

Reporting Period: 29 October to 28 November 2021

Myanmar Humanitarian

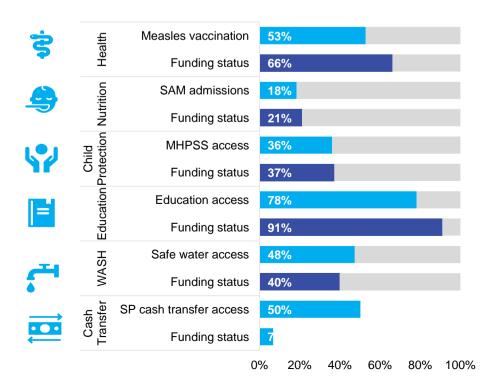
Humanitarian Situation Report No. 8



Highlights

- Security concerns, access challenges and consequent monitoring and reporting delays, travel authorization restrictions, and banking regulations continue to severly hamper the delivery of timely humanitarian assistance in the conflict-affected regions of Myanmar.
- As of 01 November 2021, all schools, with the exception of those in 46 townships where COVID-19 restrictions remain, were allowed to reopen after their four-month closure due to COVID-19. UNICEF and partners are closely monitoring this return to school while continuing with Education in Emergencies support for children's continuous learning.
- UNICEF and its partners provided legal aid support to 370 people including 246 people in Rakhine.
- Even though improvements were achieved and new activities were implemented by UNICEF partners, many sectors remain underfunded such as WASH with a current gap of 60 percent of funding requirements. Additional funding would provide the targeted 557,500 individuals with sufficient safe water, latrines, and critical hygiene items.

UNICEF's response and funding status



Situation in Numbers 1,200,000



Children in need of humanitarian assistance (HAC 2021)



3,000,000

People in need (HRP and Addendum)



336,000

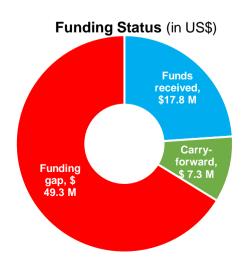
Internally displaced people (IDPs) (early 2021) (OCHA, 2021)



234,600

IDP due to clashes and insecurity since February 2021 (OCHA Humanitarian Snapshot November 2021)

UNICEF Appeal 2021 US\$ 74.5 Million



Funding Overview and Partnerships

UNICEF appeal for US\$74.5 million to help vulnerable people in Myanmar has brought in US\$25.1 million to date. The cash is to pay for critical humanitarian services and assistance for 667,389 vulnerable people including 316,165 children. Donations include US\$7.3 million received in 2020 and US\$17.8 million received in 2021. Donors making generous contributions in 2021 include Denmark, European Civil Protection and Humanitarian Aid Operations (ECHO), Germany, Japan, Norway, Thailand, the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA), and the USA, together with invaluable financial support from global humanitarian thematic funding. Donors that supported the UNICEF humanitarian programming in 2020 included Australia; Gavi, the Vaccine Alliance; Japan; the Ministry of Commerce of the People's Republic of China; OCHA, the UK, USA and UNICEF Singapore together with global humanitarian thematic funding.

Even with the increased funding of US\$3.1 million since the last reporting period, UNICEF is still in urgent need of US\$49.4 million to ensure life-saving assistance in various sectors including water, sanitation, and hygiene (WASH), health and nutrition, education, child protection and social protection. Major gaps remain, particularly in the nutrition sector, which has only 21 per cent funding. Additional funding in this sector would feed 15,807 children aged 6–59 months suffering from severe acute malnutrition.

Situation Overview & Humanitarian Needs

The humanitarian crisis is worsening in Myanmar, as a direct consequence of fighting between armed groups spread across the country. Provision of assistance, in terms of goods and staff to affected areas is compromised, specifically in regions such as Chin, Sagaing, and Magway, where heavy artillery and armed conflicts are ongoing between the People's Defence Forces (PDF) and the Myanmar Armed Forces (MAF). There are frequent reports of people trying to escape the conflicts and associated risks, with OCHA estimating that more than 37,000 people have been displaced in the three northwest regions since May 2021, including 7,358 children. Furthermore, in the southeast region, displacements continue to take place in various townships as clashes and regular attacks between MAF, PDF and Ethnic Armed Organizations (EAO) are increasing according to field reports. The Office of the United Nations High Commissioner for Refugees (UNHCR) estimates a total of 166,700 people have been displaced across this area as of November 2021, including 84,300 people in Kayah, 20,800 people in southern Shan, 49,500 people in Kayin, 5,000 people in Mon and 7,100 people in Tanintharyi.

A multisectoral response is being provided by UNICEF in the affected areas, although its top priority is seeking to ease the rigid travel restrictions which are severely hampering humanitarian partners. Nevertheless, since the last reporting period, 237,090 children and their families have been reached with nutrition, health, WASH, child protection, education services, as well as social assistance and Accountablity to Affect Populations (AAP).

During the reporting period, the national COVID-19 positivity rate has been reported to decrease at a rate of 3,45 per cent compared to 6,91 per cent during the previous period. Although in some regions such as northern Shan, cases have surged after the gradual resuming of businesses and markets. Additionally, a few IDP camps in Kachin have reported active cases, but challenges in access, security and communication are prohibiting to confirm the numbers.

Summary Analysis of Programme Response

Health

UNICEF coordinated a four-day virtual training of trainers (TOT) on community case management of diarrhoea and pneumonia by volunteers and on community-based newborn care. There were 48 participants from three partner organizations; Action Contre La Faim, Myanmar Health Assistant Association and Kachin Baptist Convention, and multiplier training for volunteers will now be organized.

Travel restrictions for NGO partners remain the main challenge, prohibiting them from accessing their project's township or village. However, service provision through volunteer networks is facilitating an increased coverage of some services including essential care for newborns and sick children under five. Restrictions on the clearance of medicines have also been reported, causing shortages of essential supplies to some partner international NGOs. To ensure continuity of service delivery, UNICEF provided other medicines, especially those for the treatment of pneumonia and diarrhoea. These should cover around 30,000 under fives in Rakhine, Kachin, Shan and Chin for three months.

As COVID-19 cases reportedly increased in northern Shan and Kachin since the last period, UNICEF provided personal protective equipment, including coveralls, to meet the needs of 400 health care providers in Ethnic Health Organizations in the Liza and Wa areas. Medicines required for COVID-19 treatment and two oxygen plants were also procured, making a total of four plants. Site selection for oxygen plants and pre-installation preparation are under way in coordination with partner organizations.

Nutrition

UNICEF's partners have made significant improvements to preventive nutrition services, having provided multiple micronutrient supplements to a total of 29,501 children aged 6-59 months in Rakhine, Kayin, and Yangon (up from the 14,150 children reached in the last reporting period). This included supplements supplied to 19,525 children in Yangon townships of Hlaing Tar Yar and Dagon Seikkan.

In terms of treatment services, UNICEF partners reached a total of 589 children aged 6-59 months with Severe Acute Malnutrition (SAM) in Rakhine, Kayin, Kachin, and Yangon. Given the limits on movements due to security concerns as well as COVID-19 restrictions (especially in northern Rakhine townships), challenges were faced in receiving and providing follow-up visits for the SAM treatment services. This has led to high rates of people defaulting on appointments or not responding. To prevent malnutrition among under-five children who are living in hard-to-reach, conflict-affected, and food-insecure areas, UNICEF, in coordination with field partners, performed blanket distribution of 4,098 cartons of Ready to Use Therapeutic Food (RUTF). An estimated 20,490 children aged 6-59 months in Shan (north, south, and east), Yangon, Bago, and Kayin benefited from these supplies. Additionally, UNICEF provided its partners with essential nutrition supplies to support 43,000 children aged 6-59 months and 4,600 pregnant and lactating women.

Child Protection

Since the military takeover in February, UNICEF has given legal aid services and humanitarian assistance to 705 children (47 per cent girls) and 734 young people (31 per cent females) detained for alleged association with PDFs and alleged migration-related offences.

More cases of arrests of Rohingya people and alleged cases related to People's Defence Forces have been reported during the period, with UNICEF and its partners providing legal aid support to 370 people including:

- 173 Rohingya children (43 boys and 130 girls)
- 73 Rohingya young people (17 males and 56 females)
- 54 children (48 boys) and 70 youths (7 females) for PDF-related cases.

A total of 5,117 individuals (1,825 girls, 1,660 boys, 940 women, and 648 men) were reached with critical child protection services through 26 partners. Out of this number, only 84 individuals were reached for gender based violence (GBV), compared to 567 last month, as security and access-related concerns have limited field monitoring and reporting. Consequently, UNICEF is seeking new partnerships and ways of reaching people in need, more specifically in the hard-to-reach areas of Sagaing and Chin.

Mental health and psychosocial support services (MHPSS) were provided for 3,162 individuals (1,571 girls, 1,465 boys, 105 women, and 21 men) in Kachin Shan, central Rakhine, northern Rakhine, Chin, Kayin and other locations. Of these, 282 were reached in Chin, a great improvement in the last few months as new partnerships are being developed and coordination is being strengthened at the field level.

UNICEF organized a three-day Explosive Ordnance Risk Education (EORE) online Training of Trainers (TOT) for partners, attended by 36 community volunteers (27 females) from Mon, Kayin and Thanintharyi. An EORE online TOT was also conducted for 20 participants from agency staff (17 males). This training will provide tools for trainers including activities that seek to reduce the risk of injury from EO and to raise awareness of women, girls, boys and men in addition to promoting behavioral change.

Education

From 01 November 2021 all schools, including Government schools, temporary learning spaces and monastic schools, with the exception of those in 46 townships where COVID-19 restrictions remain, were allowed to open by the COVID-19 prevention Central Committee. Non-formal education classes are scheduled to open at the end of November. UNICEF and partners are closely monitoring the children's return to school while continuing with Education in Emergencies (EiE) support for children's continuous learning. According to reports from UNICEF field offices, some attendance rates from Government schools, as of mid-November, were as follows: Kayin 44 per cent; Shan east 27 per cent; and Shan south 34 per cent. Locations with ongoing armed conflict, which are not part of the 46 townships with COVID-19 restrictions, were among the least likely to have significant portions of children reported to be enrolling in education.

In Rakhine there are some temporary learning classes (TLC) in Sittwe, while Minbya has a 90 per cent attendance rate. In Chin, due to the ongoing armed conflict, only three out of nine townships have opened schools and are admitting students, and four townships are under lockdown due to COVID-19. Due to Internet cuts, the field office's communication with partners remains challenging. As new displacements continue to be reported, three new IDP camps in Thantlang and Hakka townships were set up and are now accommodating 12,000 IDPs. UNICEF, through its partner KMSS,

provided three early childhood care and development kits and seven recreation kits to nine IDP camps in Mindat, benefiting 720 IDP children.

In Rakhine, EiE partners are not receiving travel authorization to visit IDP camps for education activities, as such authorization is given only for life-saving work. Furthermore, programme implementation continues to be delayed due to Covid-19 related movement restrictions, although UNICEF was able to get essential learning packages to 986 children (493 girls) from monastic schools in Sittwe and Buthidaung townships. After the reopening of schools, 3,383 (1,628-girls) children are now attending TLC run by UNICEF partner, Plan International in Minbya and Sittwe. Additionally, EiE partners continue to face financial transaction challenges as current bank transfer to cash rates stand at 6–7 per cent.

WASH

WASH activities remain a core priority and UNICEF delivered clean drinking water to an additional 14,179 conflict-affected populations in northern Rakhine, Kayah, Kayin, Chin, and Sagaing during the reporting period. Furthermore, a total of six million liters of clean drinking water were distributed to 50,000 people including an estimated 16,500 children living in Hlaing Tharvar through the water bottling project run by UNICEF and partners.

In Kayah, a new partnership with Karuna Mission Social Solidarity (KMSS) was signed, allowing UNICEF to reach 5,151 individuals with gender-sensitive sanitation services including emergency latrines and bathing shelters for IDPs. Across nine townships of central and northern Rakhine, UNICEF delivered life-saving WASH interventions through five Community Service Organization (CSO) partners, notably CFSI, People in Need, Solidarites International (SI), the Community Development Association (CDA), and the Consortium of Dutch NGOs. These interventions included COVID-19 mainstreamed activities such as installation of water supply, washing stations, waste bins, soaps, and information, education and communication (IEC) materials. A regular component of UNICEF work on promoting hygiene is now addressing the transmission of COVID-19, prevention and mitigation messaging.

UNICEF continues to prioritize immediate assistance to IDPs and host communities. Following reports of new displacements in Kyauktaw township, UNICEF partner CDN distributed 6,000 hygiene kits and 63,000 water purification sachets to newly displaced IDPs in Sittwe and Kyauktaw townships. UNICEF has tackled poor access and communication with a new partnership with CSOs and is using direct distribution to ensure that those in need are reached. For example, 90,269 people have been reached with life-saving WASH supplies in the past three months in Kayah.

Social Protection

The second cash disbursement via electronic payment started during the reporting period with a transfer value of MMK42,800 per program participant. To cover the commission fees at the cash-out point, MMK2,800 has been added to the original transfer value of MMK40,000. A total of 5,300 program participants (2,417 pregnant women, and 2,883 children under 2 including 1,483 girls) in Hlaing Thar Yar, Yangon are set to receive the payments and there is a feedback mechanism for programme participants. Additional challenges have been caused by approximately 500 programme participants having changed their phone numbers due to political, social, and economic issues.

In light of the ongoing forced evictions from informal settlements by the military authorities, many programme participants had to leave Hlaing Thar Yar for other townships or return to their original place. UNICEF and partners are trying to map out these individuals and contact them from the Social Behavior Change Communication activity.

UNICEF continued to provide "Emergency Primary Health Care Services" through health microinsurance (HMI) services in Yangon peri-urban area, Hlaing Thar Yar, and Shwe Pyi Thar townships. Currently, the services are provided for 9,242 program participants, 8,480 children under 7, and 762 pregnant women. To date, service users have received 30,586 telemedicine consultation services together with 5,534 prescriptions, 2,240 investigations, 1,528 referrals, 330 hospital cash grants, and 340 outpatient benefit services.

Communication for development (C4D), Accountability to Affected Populations (AAP)

AAP training was provided for Kachin Baptist Convention (KBC) which has developed AAP indicators on new programme document (PD) for a health and nutrition project in Kachin. The indicators include the number of staff and volunteers trained on AAP and PSEA, the number and type of complaint mechanisms established, and the number of people sharing their concerns. The online training was conducted for two days with 23 participants. KBC will now establish relevant complaint and feedback mechanisms in their targeted locations and will seek feedback from those who have benefited.

Humanitarian Leadership, Coordination, and Strategy

Child Protection

The Child Protection Area of Responsibility (CP AoR) conducted a one-day workshop, with support from the Global CP AoR team in Geneva, to develop a Localisation strategy. The CP AOR developed and shared with partners a statement on issues affecting children in Myanmar for joint advocacy and engagement with donors and other interested parties.

The second allocation of the Myanmar Humanitarian Fund (MHF) funding has commenced and the CP AoR has supported the prioritization of areas for funding. Review of funding applications will take place in December, with projects commencing at the start of January.

Education

The Education Cluster is developing a two-year strategy to be finalized by mid-February 2022. The strategy will build from the existing 1-year Provisional EiE strategy and will align with the 2022 HRP and with development partner frameworks. Additionally, the cluster is working on increasing its coordination capacity through adding sub-national coordination to its structure and identifying dedicated coordinators.

WASH

The total number of WASH People in Need for 2022 was calculated at 5.4 million and the WASH Cluster, with the collaboration of partners is working to identify response strategy, targets, and budget for the 2022 Humanitarian Response Plan (HRP).

The cluster received US\$600,000 as Second Standard Allocation from the MHF. The northwest and southeast response areas have been identified as top priorities for this with Rakhine and Kachin second.

Nutrition

The nutrition cluster, with the support of the Assessment and Information Management (AIM) technical working group and Global Nutrition Cluster (GNC) Technical Alliance, organized a Mid Upper Armed Circumference (MUAC) assessment and Infant and Young Child Feeding (IYCF - KAP) survey orientations with the participation of 60 partners from 19 organizations.

Human Interest Stories and External Media

Facebook Posts:

https://www.facebook.com/unicefmyanmar/posts/4684807984920023

https://www.facebook.com/unicefmyanmar/posts/4675420792525409

https://www.facebook.com/unicefmyanmar/posts/4665229860211169

https://www.facebook.com/unicefmvanmar/photos/a.416623888405142/4661886607212161/

https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/4649869041747251/

Twitter Posts:

https://twitter.com/UnicefMyanmar/status/1457664194027810819

https://twitter.com/UnicefMyanmar/status/1455830048972451842

https://twitter.com/UnicefMyanmar/status/1455402815044587524

https://twitter.com/UnicefMyanmar/status/1454755915555491845

https://twitter.com/UnicefMyanmar/status/1453269056828628995

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Annex A: Summary of programme results

	UNICEF and IPs Response			Cluster Response*			
INDICATOR	2021 Targets	Total results	Change ▲ ▼	2021 Targets	Total results	Change ▲ ▼	
NUTRITION							
# children aged 6-59 months with SAM admitted for treatment	15,807	2,917	▲ 589	15,821	2,917	▲ 589	
# children 6-59 months receiving multiple micronutrient powders	226,973	92,846	▲29,501	227,092	92,846	▲29,501	
# of mothers, fathers and other caregivers of children (0-23 months) reached with messages on breastfeeding in the context of COVID-19	135,648	21,039	▲ 5,784	135,743	21,994	▲ 5,942	
HEALTH							
# children 9 to 18 months vaccinated against measles	17,000	3,764	▲232				
# affected population accessing primary health care services	154,000	86,080	▲14,322				
WATER, SANITATION, AND HYGIENE							
PROMOTION # male and female accessing a sufficient quantity							
of safe water for drinking, cooking and personal hygiene	437,500	207,822	▲14,179	872,121	374,255	0	
# male and female accessing appropriately designed and managed latrines	98,500	67,685	▲ 5,195	872,121	282,868	0	
# male and female reached with critical WASH supplies (including hygiene items) and services	557,500	545,505	▲ 134,242	1,022,495	394,576	0	
CHILD PROTECTION							
# children, adolescent boys, and girls, and male and female caregivers accessing mental health and psychosocial support	135,000	48,817	▲3,162	168,000	97,157	▲ 4,043	
# women, girls and boys accessing GBV risk mitigation, prevention or response interventions	33,000	11,043	▲84	34,500	12,291	▲84	
# boys and girls, men and women accessing explosive weapons-related risk education	80,500	33,991	▲ 1,871	80,500	113,777	▲30,043	
EDUCATION							
# of targeted girls and boys (3-17) supported to access quality and inclusive pre-primary/primary and post primary learning opportunities	87,100	68,109	▲ 27,193	273,590	45,192	0	
# of male and female volunteer teachers/facilitators who have completed trainings to provide quality and inclusive education to children	1,010	454	▲164	5,791	1,396	0	
SOCIAL POLICY	7,010	707	A 10-7	0,701	1,000		
# households benefiting from social assistance measures to respond to COVID-19 and humanitarian crises with UNICEF support	500,000	251,300	0				
AAP (NOTE: C4D/RCCE included in sectors)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,					
# male and female sharing their concerns and asking questions/clarifications to address their needs through established feedback mechanisms	52,000	3,542	▲ 572				

^{*}Cluster results are reported quarterly with the exception of nutrition which reports monthly.

Annex B Funding Status

		Funds avail	Funding gap		
Sector	Requirements	Received current Year 2021	Carry-over	\$	%
Nutrition	\$12,542,544	\$1,292,974	\$1,364,812	\$9,884,758	79%
Health	\$7,101,500	\$3,610,557	\$1,088,757	\$2,402,186	34%
WASH	\$17,725,000	\$5,365,513	\$1,710,652	\$10,648,835	60%
Child Protection, GBViE* and PSEA**	\$14,000,000	\$3,711,202	\$1,500,303	\$8,788,495	63%
Education	\$4,813,015	\$2,954,916	\$1,428,272	\$429,828	9%
Social Protection and Cash Transfer	\$12,750,000	\$833,658	\$29,377	\$11,886,965	93%
Rapid Response Mechanism	\$4,000,000	\$51,403	\$212,685	\$3,735,911	93%
Cluster coordination	\$1,575,000	-		\$1,575,000	100%
Total	\$74,507,059	\$17,820,222	\$ 7,334,859	\$49,351,978	66%

^{*}Minimum Standards for Prevention and Response to GBV in Emergencies

^{**} Protection against Sexual Exploitation and Abuse