

Reporting Period: 29 September to 28 October 2021

Myanmar Country Office

Humanitarian Situation Report No. 7



Highlights

- In the northwest region's recent hostilities and active clashes, including airstrikes in Sagaing, have caused further population displacement and increased vulnerability. As road movements in Chin are limited due to ongoing armed clashes are impacting the availability of fuel and the price of goods has risen. Relief supplies including essential medicines are in urgent need, with very limited transportation alternatives.
- A UNICEF Rapid Needs Assessment during 28 September to 5
 October in selected townships of Sagaing region found that priority
 humanitarian assistance needs are food items and health services,
 including medicine, treatment, and COVID-19 related testing,
 treatment and vaccination.
- Since mid-October, communication interruption in regions of southeast Myanmar, as well as Sagaing and Kachin, have exacerbated the vulnerability and threatened the well-being of the population while stopping humanitarian partners from communicating efficiently.
- Travel authorization requirements and restrictive banking regulations continue to be the main obstacles for our partners and to severely impact programme implementation, in addition to the intermittent fighting and clashes, adding another layer of complexity to already limited access.

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



219,000

IDP due to clashes and insecurity since February 2021 (OCHA October 2021)

UNICEF's response and funding status

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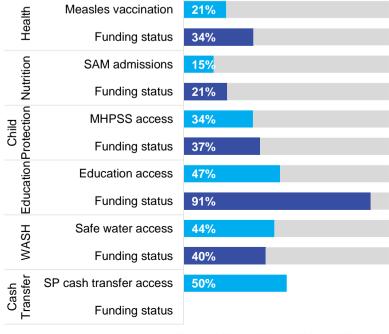




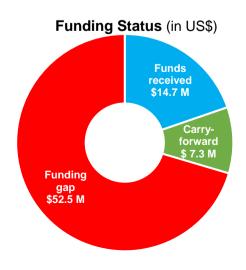








UNICEF Appeal 2021 US\$74.5 million



Funding overview and partnerships

UNICEF is appealing for US\$74.5 million to support 667,389 vulnerable people, including 316,165 children, in Myanmar with critical humanitarian service provision and assistance across various sectors including water, sanitation, and hygiene (WASH), health and nutrition, education, child protection and social protection.

Against this appeal, US\$22 million has been received to date, including US\$7.3 million received in 2020 and US\$14.7 million received in 2021 from donors including Denmark, European Civil Protection and Humanitarian Aid Operations (ECHO), Germany, Japan, Norway, Thailand, United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) and the USA. Donors in 2020 included Australia, Gavi, the Vaccine Alliance; Japan; Ministry of Commerce of the People's Republic of China, OCHA, the UK, USA, and UNICEF Singapore together with global humanitarian thematic funding.

However, the revised 2021 Humanitarian Action for Children (HAC) funding requirements has a gap of 70 per cent, and UNICEF requires an additional US\$52.5 million to ensure service provision and address urgent unmet needs of the affected population, especially children and women, in Myanmar. With this funding, UNICEF would urgently address the needs of children aged 6–59 months suffering from severe acute malnutrition, as the nutrition sector remains largely unfunded with a 79 per cent funding gap. Furthermore, additional funding would provide UNICEF with the means to support the 22,041 girls, boys and woman targeted for gender-based violence services who are still in need of assistance, as the funding gap for these specific services is currently 67%.

Situation overview & humanitarian needs

The security context in Myanmar remains volatile, notably in Kachin, Shan, Chin, Sagaing, Magway, and southeast Myanmar, where an increased frequency of armed conflicts has been reported with ongoing hostilities and clashes, worsening the humanitarian situation. As of 21 October 2021, 80 children (73 boys and 7 girls) have been killed by the security forces since the military takeover. At least 65 attacks against hospitals and health personnel and at least 197 attacks against schools and school personnel have been reported, along with incidents of military use of education facilities (187) and hospitals (48) by the security forces. In Sagaing and Magway, security incidents relating to the heavy deployment of the Myanmar Armed Forces (MAF) have been reported, with artillery shelling and torching of houses and villages, causing people to flee. Escalation of fighting, including airstrikes, has been reported in the northwest area of Myanmar, resulting in civilian casualties and more than 21,420 people displaced across 5 townships of Chin; 19,500 people remain displaced in Sagaing and Magway regions. Across the country, the incidence of explosions targeting governmental institutions and the telecommunication infrastructure owned by the State Administrative Council imply the situation remains worrying, causing movements of humanitarian partners to be limited given the risks. Additionally, as of 17 October, the internet and Wi-Fi connection in 10 townships of Chin, 11 townships of Sagaing, 1 township of Kachin and 4 townships of Magway were shut down by the de facto authorities, creating severe impediments to information sharing and having a serious impact on the security and livelihood of the population.

The number of COVID-19 cases has reportedly decreased, with a test positivity rate of 7.8 percent, although the testing remains limited. Stay-at-home restrictions were lifted in Kale, Sagaing and Tamu in Sagaing region. However, Hakha continues to be under restrictions. Movements between Kale and Hakha, Kale and Gangaw, Gangaw and Pale are currently to be avoided as active armed conflicts have been reported between the MAF and People's Defence Forces (PDF). The diminution of transportation services, combined with the increased price of diesel and gasoline, caused a surge in consumer goods prices and a reduction of their availability and variety.

Several security constraints have impacted the achievement and reach of UNICEF's activities, notably the restrictions to the transportation of supplies in some regions due to the instability of the situation, the intermittent and unpredictable hostilities, and the roadblocks due to escalation of fighting and the numerous checkpoints. Furthermore, the need to procure travel authorization remains a major access impediment and a high constraint factor for the humanitarian partners' capacity to reach people in need, along with to the lack of cash due to the banking regulations which remains problematic. In addition to COVID-19 related restrictions, all the above create significant impacts on our capacity to access vulnerable communities in urgent need of humanitarian services including food, shelter, safe water and essential medicine.

¹ UNOCHA Humanitarian Snapshot as of 18 October 2021

Summary analysis of programme response

Nutrition

UNICEF, in close collaboration with its national and international nutrition implementing partners, improved nutrition essential service coverage including severe acute malnutrition (SAM) treatment admissions, infant and young child feeding (IYCF) counselling, and multiple micronutrient supplementation. Thanks to the expansion of services by partners in Yangon and Kayin as well as the resumption of activities in Rakhine, a total of 631 children aged 6–59 months suffering from SAM were admitted for treatment compared to 217 in the previous reporting period. Additionally, IYCF counselling services provided an increased number of 2,525 caregivers with messages on breastfeeding in the context of COVID-19, and 14,150 children were assisted with multiple micronutrient powder supplementation. A total of 4,547 pregnant and lactating women (PLW) received multiple micronutrient tablet supplementation, a meaningful increase from the 2,053 PLW reached during the previous report. Although improvements were observed, the nutrition sector remains the lowest funded at only 21 per cent and additional funding would provide the targeted 15,807 children with appropriate services to counter malnutrition.

Security concerns and restrictions remain the main challenge in the transportation of nutrition supplies to Chin, Kayah and Sagaing regions. For timely response and contingency planning, UNICEF has pre-positioned nutrition supplies, such as ready-to-use therapeutic food (RUTF) or vitamin-A and multiple micronutrient tablets at its field office in Taunggyi, Shan which would cover nutrition needs for estimated 1,600 6-59 months children and 1,700 pregnant and lactating women.

Health

Capacity-building remains one of UNICEF's priorities for supporting implementing partners in the provision of quality health-care services in accordance with UNICEF and WHO's guidelines. In this regard, UNICEF successfully organized an eight-day virtual training on Integrated Management of Newborn and Childhood Illnesses (IMNCI) with attendance from nine partner organizations and 56 participants.

Following reports of armed clashes in Kawkareik and Kyainseikkyi in Kayin State causing 5,000 people to be displaced, UNICEF urgently sent 10 Interagency Emergency Health Kits which could cover 10,000 population to Hpaan sub-office to ensure that health supplies were available to emergency response partners. Furthermore, given the increasing needs in the region, UNICEF amended the partnership with Premiere Urgence Internationale (PUI) to integrate primary health-care services into the current provision of nutrition services to over 15,000 displaced populations and host communities in Hpaan, Kayin State.

UNICEF's partners successfully provided 12,852 people with primary health-care services across Rakhine, Kachin, Shan, Kayin and Yangon peri-urban area, . Essential medicines, personal protective equipment (PPE) and supplies required for primary health-care service were delivered to partner Action Contre La Faim (ACF) in Rakhine and 81 first aid kits to partner Karuna Mission Social Solidarity (KMSS) in Shan North and Shan South.

WASH

UNICEF has made significant improvements to WASH services in Kayin and Kayah regions as well as Yangon and Shan, having provided access to a sufficient quantity of safe drinking water to 70,872 new beneficiaries. New activities were implemented in some of these regions during the period, notably the distribution of bottled drinking water to 50,000 people in Hlaing Thar Yar township at the rate of 2 litres per day for at least 90 days. Treated drinking water is provided through a water bottling company and distribution is coordinated by UNICEF partners WaterAid and Terre des Hommes.

As the COVID-19 pandemic is still ongoing, UNICEF has intensified the risk communication and community engagement (RCCE) activities, reaching a total of 182,998 people so far in 2021. From this number, UNICEF reached 168,596 individuals across the country with critical WASH services, an impressive progression compared to the 14,402 individuals from the last reporting period.

Out of the 98,500 individuals targeted by the WASH programme to provide them with access to appropriately designed and managed latrines, UNICEF and its implementing partners have successfully reached 63 per cent of their target so far, with 62,490 individuals having access to gender-sensitive sanitation services.

Child protection

UNICEF, through its 24 partners, has ensured a steady progression in its activity implementation for the reporting period by reaching 10,031 individuals (3,488 girls, 2,836 boys, 2,591 women and 1,116 men). Although 34 per cent of children targeted for mental health and psychosocial support (MHPSS) have received assistance, the gap remains high with 66 per cent who still do not have access to those services. Additionally, UNICEF provided 567 individuals (281 girls, 252 boys and 54 women) with access to gender-based violence (GBV) mitigation, prevention or response. Nevertheless, a worrying number of 22,041 individuals targeted are still in need of those services and reaching them through our

programme remains an utmost priority. Current UNICEF funding for child protection has a gap of 63 per cent, which is impacting service delivery. Three more partnerships on prevention of sexual exploitation and abuse (PSEA) are being developed to reinforce community awareness on SEA reporting and services for vulnerable populations in Kachin, Northern Shan, Rakhine, Kayah and Kayin through localized interventions.

In Southern and Eastern Shan, two boys (13 and 14 years) were injured by explosive ordnance, and UNICEF maintains its efforts towards Explosive Ordinance Risk Education (EORE) and reached 4,988 individuals (1,586 girls, 1,166 boys, 1,523 women and 713 men) in Shan, Kachin and Northern Rakhine. As the security situation remains uncertain, UNICEF pre-positioned 600 child protection (CP) kits and distributed an additional 1,115 CP kits including 12 kits to detained children in Myawaddy, and 4 recreational kits to beneficiaries in Kayah, Eastern Shan, Northern Shan State and Mon State..

Since the military takeover, UNICEF and its implementing partners provided legal aid services and necessary assistance to 423 children (34 per cent girls) and 646 young people (27 per cent females) who had been arrested and detained, among them children allegedly associated with national security offences, PDFs as well as irregular migration. The children assisted with legal aid service included 44 children (43 boys) 55 youth (2 females) allegedly associated with PDFs and 71 Rohingya migrant children (15 boys and 56 girls). The online 5th lawyers Community of Practice forum held in October explored ways to protect fundamental rights under the State of Emergency as well as to enhance referral linkages with other protection actors including the ICRC.

Education

Although the education sector presents the lowest funding gap at only 9 per cent, important challenges still prevent children having access to primary education as all the schools across the country were to be closed until 31 October due to COVID-19 prevention measures imposed by the de facto authorities. Additionally, COVID-19 prevention measures, combined with non-authorization of travel, impacted programme monitoring as staff field visits were limited. Once the schools reopen, 19,448 essential learning package (ELP) kits are ready to be distributed to IDPs and affected children in Rakhine. To alleviate some of the challenges from school closure, UNICEF's partners provided an orientation session to 209 (66 females) volunteer teachers, Early Childhood Care and Development (ECCD) caregivers, and Nonformal Primary Education (NFPE) facilitators on short term home-based learning. Additionally, 2,446 (1,211 girls) children of Grade-1 to Grade-4 were also provided with short term home-based learning by volunteer teachers.

As many regions were blocked from access to the internet and Wi-Fi by the de facto authorities, information sharing, monitoring, and timely reporting have remained a challenge for most partners. As for the impact of limited banking services, extra charges for transaction costs by local service providers have been reported, contributing to the uncertainty of the economic situation. Displacements of school-aged children due to the worsening security situation in Chin, Kayah, Southeast and Kachin also continued during the reporting period. Despite these problems, UNICEF Education continued to work with partners to support children's continuous access to basic quality education. In the Southeast, UNICEF through its partner will reach 10,000 IDP children with essential learning packages and renovation of 10 learning spaces damaged by the conflict.

Social protection

UNICEF, jointly with the Swiss Development Cooperation (SDC), funded the humanitarian cash transfer (HCT) programme in Hlaing Thar Yar. Although the first payment was successfully completed with the UNICEF fund in July 2021, the follow-up cash disbursements faced severe challenges. Since the beginning of the conflict, the new banking regulations have caused money transfer issues, preventing SDC from transferring to a financial service provider. Consequently, the distribution planned for 5,300 registered pregnant women and children under 2 could not be carried out in September. Current practice is that NGOs are requested by Myanmar Foreign Trade Bank (MFTB) to submit a valid MOU with Government and certification from the counterpart department to be able to receive the US dollars into the organization's account. Partner organization followed up with the bank and provided the required documents in collaboration with SDC. Finally, the cash has arrived at partner's account.

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 6,827 children and 678 pregnant women living in informal settlements. To date, the service users have already received 25,031 telemedicine consultation services together with 4,775 prescriptions, 1,504 investigations and 1,490 referrals, 255 hospital cash grant services and 2 antenatal care services provided.

A digital platform named 'Community voice project' was created to seek the feedback of the beneficiaries directly. The platform will be using the Viber channel and was introduced in Kachin. It will be piloted in some locations of Kachin with the support of Kachin field office and UNICEF partners. The questionnaires to be sent out to beneficiaries have been drafted.

A training module on accountability to affected populations (AAP) was developed in both English and Myanmar. Training contents include basic concepts and principles of AAP, integration of AAP in the ways we work and AAP in action. Based on the needs of the UNICEF partners, AAP training was provided to Karuna Mission Social Solidarity (KMSS) and Kachin Baptist Convention (KBC), who have recently developed new programme documents (PDs) for WASH projects in Kachin. These PDs also include AAP indicators such as number of complaints, established feedback mechanisms, and number of people having access to the established mechanisms. The training was conducted online on 19 and 20 October with 28 participants from 2 organizations participating.

Humanitarian Leadership, Coordination and Strategy

Child protection

The Child Protection Area of Responsibility (CP AoR) conducted a review of its coordination system across the country, identifying areas where further support is required, notably in Chin, Sagaing and Southeast. A terms of reference (ToR) on subnational coordination was presented at the last CP AoR monthly meeting and shared with CP partners, with the objective of strengthening the AoR across the country and creating further accountability and representation within the cluster system.

Consultations continued to be held with the global AoR on the development of a national localization strategy. The benchmark and strategy will be developed through a series of steps, starting mid-November with an initial workshop with partners. ToR for cluster leadership and co-leadership have been drawn up and discussed. Furthermore, planning for the celebration and commemoration of both World Children's Day (Convention on the Rights of the Child-CRC day) and 16 Days of Activism Against Gender-based Violence (GBV) in November have taken shape within the Child Protection and GBV AoRs/sub-clusters. In Rakhine, Monitoring and Reporting Mechanism (MRM) training on grave violations against children was conducted by the Protection network including the GBV working group and IAC members.

Education

The Education cluster is updating its capacity to reach a much larger number of children in need of emergency education support. A new subnational coordination structure with additional capacity to engage with local and national partners was endorsed by partners and will be implemented in consultation with each subnational coordination group over the next few months.

The Education cluster has produced draft contingency response plans (CRPs) for Kachin State and the Southeast, in a process driven by the Education in Emergencies (EiE) partners working in those locations. These Education Cluster CRPs are aligned with inter-cluster documents for emergency preparedness and response. Throughout the period of October, the 2022 Education Cluster 'People in Need' and 'target' figures were analysed with partners for the drafting process of the Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP).

WASH

The WASH cluster reviewed the current cluster coordination mechanism structure at subnational level and discussed the coverage of new areas of the country including northeast and southwest regions. INGOs have been invited to express their interest in taking over leadership positions of the WASH cluster at subnational level.

The WASH cluster People in Need analysis was finalized and submitted as part of the humanitarian process cycle and HRP. More than 5.4 million people were identified for humanitarian assistance, with a focus on the following population groups: IDPs, IDP returnees, stateless people, and the most vulnerable crisis-affected people. The cluster's capacity exercise was conducted, and 117 WASH partners were identified across the country with the updated contingency stock.

The cluster arranged the two batches (3 days) of training on 'Solar Waterpower Systems' conducted by IOM and Oxfam, with 60 participants from 23 WASH agencies. Moreover, partners conducted global handwashing day events in camps and new displacement sites in Rakhine.

In Chin state, WASH partners are responding to 6,842 crisis-affected people by distributing 881 hygiene kits, 22 waste bins, and adult potties for elders throughout 11 new displacement sites in Paletwa township. The main challenges reported by members relate to the hygiene promotion sessions, which have been stopped due to COVID-19 restrictions, limited supplies in the local markets of hygiene items and/or increased prices, and lack of access due to continued fighting between the military and PDF.

Nutrition

UNICEF, as the cluster lead, has been coordinating the HNO and HRP process with partners, and facilitating the 2022 humanitarian situation analysis and response planning. In coordination with Global Nutrition Cluster (GNC) and GNC Technical Alliance team, technical support is being provided to the Integrated Management of Acute Malnutrition and Infant and Young Child Feeding counselling (IMAM/IYCF) and Assessment and Information Management (AIM) technical working groups for capacity-building initiatives.

Human Interest Stories and External Media

Facebook Posts:

https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/4618372054896950/https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/4605790096155146/https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/4598289070238582/https://www.facebook.com/unicefmyanmar/posts/4561352410598915

Twitter Posts:

https://twitter.com/UnicefMyanmar/status/1450012465534799877 https://twitter.com/UnicefMyanmar/status/1450416018376044549 https://twitter.com/UnicefMyanmar/status/1443504899321327620 https://twitter.com/UnicefMyanmar/status/1443110345854259202

Next sitrep: 30 November 2021

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Annex A: Summary of programme results

Outlinary of prograf	UNICEF and IPs			Cluster Response			
INDICATOR	2021 Targets	Total Results	Change Since Last Report ▲ ▼	2021 Targets	Total Results	Change Since Last Report ▲ ▼	
NUTRITION							
# children aged 6–59							
months with SAM admitted for treatment	15,807	2,328	▲ 631	15,821	2,328	▲ 631	
# children 6–59 months	15,607	2,320	▲031	15,621	2,320	▲031	
receiving multiple							
micronutrient powders	226,973	63,345	▲ 14,150	227,092	63,345	▲ 14,150	
# of mothers, fathers and	,	,		,	,	ŕ	
other caregivers of							
children (0-23 months)	135,648	15,255	▲ 2,525	135,743	16,052	▲ 2,525	
reached with messages	.00,0.0	.5,255	= 2,020	.00,0	. 5,552	= 2,020	
on breastfeeding in the context of COVID-19							
#EALTH # children 9 to 18 months							
vaccinated against							
measles	17,000	3,532	▲ 296				
# affected population	,	-,					
accessing primary health-							
care services	154,000	71,758	▲ 12,852				
WATER, SANITATION							
AND HYGIENE							
# male and female							
accessing a sufficient							
quantity of safe water for							
drinking, cooking and							
personal hygiene	437,500	193,643	▲ 70,872	872,121	374,255	▲ 78,513	
# male and female							
accessing appropriately							
designed and managed latrines	98,500	62,490	▲ 358	872,121	282,868	▲ 3,157	
# male and female	30,300	02,430	■ 330	072,121	202,000	▲3,137	
reached with critical							
WASH supplies (including							
hygiene items) and							
services	557,500	411,263	▲ 168,953	1,022,495	394,576	▲ 70,694	
CHILD PROTECTION							
# children, adolescent							
boys and girls and male							
and female caregivers accessing mental health							
and psychosocial support	135,000	45,655	▲ 4,476	168,000	93,114	▲ 7,554	
# women, girls and boys	100,000	10,000	, 3	100,000	55,221	_ / ,55 1	
accessing GBV risk							
mitigation, prevention or							
response interventions	33,000	10,959	▲ 567	34,500	12,207	▲ 1,090	
# boys and girls, men and							
women accessing							
explosive weapons-	90 F00	22 120	A 4 000	90 F00	83,734	▲ 10,835	
related risk education	80,500	32,120	▲ 4,988	80,500	05,/54	A 10,035	
EDUCATION							

# of targeted girls and boys (3–17) supported to access quality and inclusive pre- primary/primary and post-						
primary learning opportunities	87,100	40,916	▲ 336	273,590	45,192	0
# male and female volunteer teachers/facilitators who have completed trainings to provide quality and inclusive education to						
children	1,010	290	0	5,791	1,396	0
SOCIAL POLICY						
# households benefiting from social assistance measures to respond to COVID-19 and humanitarian crises with UNICEF support	500,000	251,300	▲ 5,300			
AAP (NOTE: C4D/RCCE	500,000	251,300	▲ 3,300			
included in sectors)						
# male and female						
sharing their concerns						
and asking						
questions/clarifications to						
address their needs						
through established feedback mechanisms	52,000	2,970	▲ 193			
ICCUDACK ITICCITATIONIS	32,000	2,970	= 193			

Annex B Funding status

		Funds available		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	\$1,322,250	\$1,088,757	\$4,690,493	66%
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	\$429,827	9%
Social Protection and Cash Transfer	\$12,750,000		\$29,377	\$12,720,623	100%
Rapid Response Mechanism	\$4,000,000	\$51,403	\$212,685	\$3,735,912	93%
Cluster coordination	\$1,575,000			\$1,575,000	100%
Total	\$74,507,059	\$14,698,258	\$ 7,334,859	\$52,473,943	70%

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

^{**} Protection against Sexual Exploitation and Abuse