

HIGHLIGHTS

- Over **80,000** people are estimated to have been displaced by conflict in Kachin and northern Shan States, including over 5,000 newly displaced in the latest round of hostilities.
- The Government reports that the total estimated number of IDPs in Rakhine amounts to over **115,000** people.

FUNDING

US\$67.6 million

requested for **Rakhine** emergency (July 2012 to June 2013).

53% funded

Kachin Plan to be revised in March 2013



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Challenges remain in gaining access to all IDPs in Kachin

Following months of continued advocacy by the UN and humanitarian partners, early in 2013 the Government of Myanmar and the Kachin Independence Organization (KIO) informed the Resident and Humanitarian Coordinator (RC/HC) that they would welcome humanitarian assistance to IDPs in areas beyond the Government's control. However, challenges remain as operational and safety and security arrangements are yet to be clarified. A humanitarian mission left for Hpakan on 17 February, where the UN has not been able to go since January 2012, and provided assistance to some 5,000 displaced people there.

UN Secretary-General welcomes peace negotiations

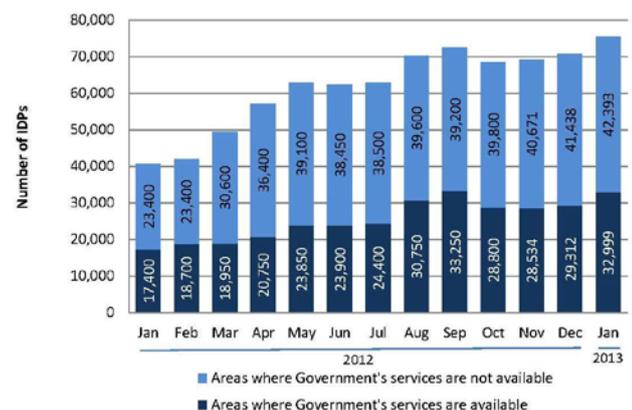
The UN Secretary-General (UNSG) welcomed "the agreement by peace negotiators of the Myanmar Government and the Kachin Independence Organization (KIO) to work on a framework to de-escalate violence in Kachin State and the Government's assurances of the resumption of access to the UN and international agencies for urgent supply of humanitarian assistance to the most vulnerable people in Kachin". The UNSG also reiterated "the UN's commitment to help and support the people of Myanmar, including through its good offices and the country team, and expressed his hope that funding and aid delivery are made available soon to address the needs of IDPs in all parts of the state".

In a related development, Special Rapporteur on the situation of human rights in Myanmar Tomás Ojea Quintana in mid February visited IDP camps in Myitkyina and Waingmaw, urging "the military and non-state armed groups to comply with international human rights and humanitarian law, and to address the use of anti-personnel landmines."

Displacement continues in Kachin

Despite positive steps in the de-escalation of conflict over the past weeks, sporadic security incidents continue to be reported in several areas across Kachin. The escalation in the conflict over the last two months has caused civilian casualties, including by explosions of landmine or improvised explosive devices (IEDs) and additional displacement of population, fueling new humanitarian

IDP figures 2012/2013



Under the International Humanitarian Law, all parties to a conflict, both State and non-State actors, are obliged to distinguish between civilians and combatants at all times and to respect the humanitarian nature of camps, settlements and other IDP-hosting areas. This entails taking all feasible measures to protect such areas from direct attack and the indiscriminate effects of military operations and to treat individuals in their power humanely.

“We welcome the recent acceptance, by both the Government of Myanmar and Kachin Independence Organization for humanitarian assistance from the United Nations and its humanitarian partners. Humanitarian assistance must flow uninterrupted as long as people are in need.

Resident and Humanitarian Coordinator in Myanmar
 Dr. Ashok Nigam, (Press Release, 17 February)

needs in Kachin and northern Shan states.

As of January 2013, the total estimated number of IDPs is estimated at over 80,000. This number, however, does not include the entire IDP caseload in northern Shan, nor IDPs living with host families. In December – January, an upsurge in fighting around Hpakan in western Kachin has forced over 2,000 civilians from their homes. Similarly, population movements were also reported in December-January in Laiza, Mansi in Kachin and Kutkai in northern Shan. Available information indicates that a total of 12 new IDP locations were established in Myitkyina, Hpakan and in several locations beyond the Government control, to accommodate newly displaced individuals, as of 31 January. The United Nations has not been able to independently verify the caseload of newly displaced in all locations as access to areas beyond the Government’s control continues to be challenging.

Protection of civilian continues to be a major concern as the number of security incidents affecting civilians has increased throughout January. Multiple incidents of shelling and explosions caused several deaths and injuries among civilians, including children and women, sparking international condemnation. Instability has also caused substantial damage to infrastructure and the disruption of electricity supply and telecommunications in Myitkyina and Waingmaw towns in December 2012-January 2013.

Humanitarian partners deliver aid amid escalating conflict

Despite security challenges and limited access, UN agencies and partners have scaled up aid to reaching people in need, particularly in areas with increased displacement. In January, WFP delivered, after many months, a two-month food ration to over 700 IDPs in Chipwe, where insecurity and destruction of infrastructure have shut down portions of major truck routes since July 2012. Shelter construction is also ongoing to meet the needs of the new IDPs both in and beyond the Government control areas; including Bhamo, Mansi and Waingmaw in Kachin and Manton in northern Shan State.



In Kachin, shelters are urgently needed, particularly in areas beyond the Government’s control. Photo: UNOCHA

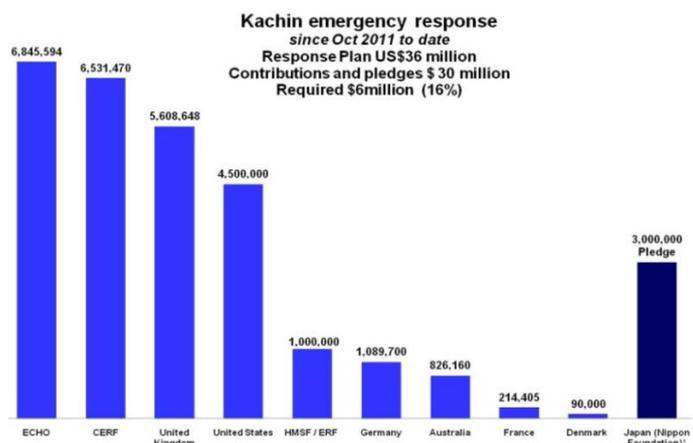
Access to over 40,000 IDPs living in non-state controlled areas is crucial

The precarious security situation continues to hamper partners’ ability to access all IDP locations. Significant humanitarian needs remain unmet, particularly in areas beyond the Government’s control where over 40,000 IDPs reside. Whilst announcements of permissions for the UN and its humanitarian partners to access these areas have been made, a formal mechanism needs to be agreed to enable regular delivery of supplies. In mid February, a UN/NGO mission delivered assistance to over 5,000 IDPs in Hpakan, once firm security guarantees for the staff and operations by both parties to the conflict were provided.

In Kachin over 40,000 IDPs urgently need relief aid

Funding situation

The Kachin Response Plan, which was released in July 2012 called for \$35.8 million to provide life-saving assistance for over 85,000 people from March 2012 to February 2013. The international community has so far pledged \$30 million, including \$6.5 million from the Central Emergency Response Funds (CERF). The plan will be revised in



“Feelings of fear, distrust, hatred and anger remain high between communities. To address this requires education, responsible local journalism, as well as mutually respectful dialogue between community leaders. For my visit, the local authorities organised a discussion between Muslim and Buddhist community leaders, which gave me hope that solutions can be found through mutually respectful dialogue in which both sides are willing to make compromises to find solutions.”

Statement of the Special Rapporteur on the Situation of Human Rights in Myanmar, (16 February)

early March 2013 to take account of growing humanitarian needs over the past months, additional resources required to resume cross-line operation as well as the rapidly changing situation.

Rakhine: Humanitarian partners work together with the Government to find solutions in IDP relocation

Relocation of IDPs is crucial before the rains come – there is no easy solution

The Rakhine State Government met on 5 February with humanitarian partners operating in Rakhine and stressed that IDP returns must be voluntary, welcoming support from the partners to develop a plan for IDP relocation/return in the region. The Government estimates that the inter-communal violence in June and October has displaced over 115,000 people across Rakhine. However, the number of people affected by the crisis is much higher. Several thousand people have been living in makeshift camps located in paddy fields or in areas which will be inundated during the upcoming raining season that will start in May. Others have seen their access to services and livelihood disrupted.

During the 5 February meeting, the Government and partners reviewed the conditions of each IDP sites and requirements for relocation/return, including the need for suitable land for shelters and construction of other basic services. At the central level, discussions took place with the Minister of Border Affairs, the focal minister for the Rakhine emergency operation. The meeting discussed details on how best humanitarian partners could support the Government’s relief efforts, especially in the setup of camps, provision of basic services, continuation of food and other assistance, restarting livelihood, in preparation for and during the return and relocation. Discussions are ongoing with the authorities to launch a joint verification that covers IDP locations across Rakhine to ensure that relief aid reaches all displaced individuals in need.

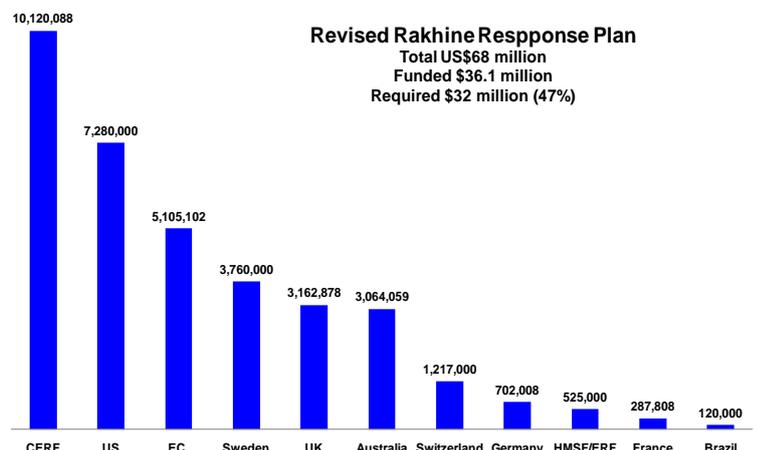
Relocation of over 24,000 IDPs in Myebon and Pauktaw is a priority

IDP camps in Myebon and Pauktaw are a concern. There, over 24,000 IDPs, majority of whom are in fear of return to their places of origin, are staying in camps located in rice fields which will be naturally flooded during the monsoon season. Unless a solution is rapidly found, health risks due to the high potential for overflowing latrine pits resulting in contamination of water sources in and around camps will increase. In order to consider all relocation options local authorities and partners carried out joint missions to IDP sites in these two townships in February.

While efforts are ongoing to secure appropriate land to construct temporary shelters and provide other basic services before the rains come, the local authorities have already started consultations with communities to identify sustainable solutions, and to create a conducive environment for IDPs who are willing to return to their places of origin. This process is aimed at fostering trust between the two communities, a positive step in building a peaceful coexistence in the region.

Funding shortages in relief operations

The Rakhine Response Plan, originally launched in July and revised in November includes requirements for more than \$68 million, of which \$36 million is funded, including \$10 million from CERF. Over \$32 million (47 per cent) is urgently needed to provide life-saving assistance. Agencies have funding and material shortfalls, and have over-extended response options



What is the Humanitarian Country Team?

The Humanitarian Country Team (HCT), under the leadership of the Humanitarian Coordinator, is a key coordination structure that is composed of organizations that undertake humanitarian action in-country and that commit to participate in coordination arrangements.

Humanitarian assistance is aimed at saving lives and alleviating the suffering of a crisis-affected population. Humanitarian assistance must be provided in accordance with the humanitarian principles of humanity, impartiality, neutrality and operational independence.

by diverting stocks between operations.

Assessments underscore changing perceptions in current response

The Government is engaging with communities also to address misperception of humanitarian operations, which has been severely affecting, since the beginning of the inter-communal conflict, the ability of partners to provide much needed aid to affected people.

While the partners are looking forward for a further stepping up of such commitment by the government, the Humanitarian Country Team has carried out a communication research project on Rakhine from 24 January to 6 February. The project sought to enhance understanding of community perceptions towards partners operating in Rakhine. The mission report outlined a set of recommendations for agencies operating in the area aimed at improving the operating environment for humanitarian and development agencies. Preliminary findings indicate that the overall perceptions towards agencies are improving due to increased engagement with and distribution of assistance to both communities. The report also highlights the need for a more coherent and coordinated response towards misperceptions, including through increased information sharing, by all involved, including the Government, with communities about partners' activities in Rakhine.

While the findings are currently being analyzed to develop a plan of action to address misperceptions, a number of communication/engagement recommendations were shared with the Humanitarian Country Team in Myanmar to incorporate into their programming, including increased sharing of studies and findings among agencies, wider engagement with all actors (community leaders and surrounding communities), development of joint messages with a focus on "aid reaching the most vulnerable", strengthened regular information sharing with both communities, provision of psychosocial support to staff and proactive engagement with media - both at national and state levels.



Kachin sectoral needs and response

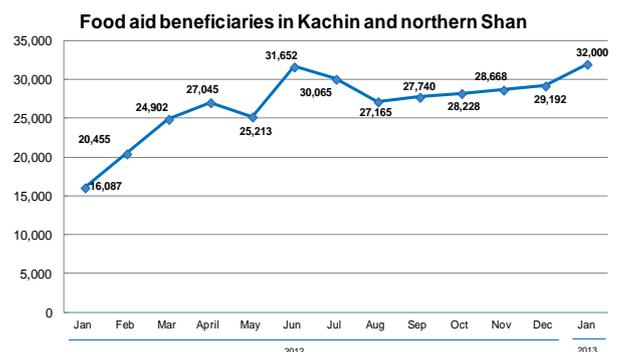
EDUCATION

With the closing of the school year at the end of February, education partners are scaling up their interventions to address the needs of school children to take final examinations. While the Kachin State Government has facilitated continuation of education for IDPs children in several areas, essential resources are still required particularly in areas beyond the Governments' control, including teachers, temporary learning spaces and education materials.

In January, Kachin Baptist Convention (KBC), with support from UNICEF, provided essential learning packages (ELP) to some 3,600 primary students in eight IDP camps in Bhamo and Mai Ja Yang. A total of 18 sets of school furniture were also provided in each IDP location. Efforts are ongoing to provide similar support with focus on areas beyond the Government's control - yet to be reached.



In January, WFP assisted IDPs in Kachin and northern Shan States. Rations reached approximately 32,000 beneficiaries with 553 metric tons (MT) of food. Local partners



including Karuna Myanmar Social Service (KMSS) and Kachin Baptist Convention (KBC) continue to provide food and cash assistance to IDPs in areas beyond the Government's control. Food partners are exploring options to deliver aid to the newly displaced across Kachin.

SHELTER and NFI

In view of the increasing number of IDPs over the past months, shelter needs have also increased, particularly in newly affected locations and in areas with increased IDP caseload. In Bhamo and Mansi, UNHCR, through local partners, is constructing 42 shelter units and 100 communal buildings. Over 100 newly displaced households were provided with family kits there. KMSS and Shalom, with support from DRC, are constructing some 235 houses in areas beyond the Government's control in Kachin and in northern Shan State. Shelter partners are currently reviewing their planned activities and existing needs to identify gap areas and additional locations to be covered in view of emerging needs triggered by the cold season.

WATER, SANITATION and HYGIENE

The WASH situation continues to be a concern, particularly in areas beyond the Government's control, with reports of open defecation, inadequate WASH facilities and limited access to safe drinking water. Lack of access and continuous population movements are major challenges to estimate needs and gaps. In January, partners provided WASH to over 9,400 IDPs (2,180 families) across Kachin by providing access to safe drinking water and water purification items. Solidarites International and CESVI, in cooperation with UNICEF, conducted hygiene promotion sessions and distributed hygiene items, covering some 5,900 IDPs. WASH partners are working together to cover needs in remaining locations.



Rakhine sectoral needs and response

EDUCATION

An assessment conducted by UNICEF and Save the Children in six camps in Sittwe in December 2012 highlights critical needs in education supplies and low student enrolment rates - both in rural and urban camps (25 per cent and 56 per cent respectively). No consistent education support has been provided in the affected locations since June 2012. In many camps, particularly in rural areas, communities were mobilised to resume the educational activities and set up temporary learning spaces, which however continue to be insufficient to cater for needs. Access to education continues to be a major challenge due to lack of teachers, temporary learning facilities and education supplies. High-level advocacy with the Ministry of Education is needed to re-deploy teachers and to resume formal education.

In effort to complement the existing basic facilities and to support resuming education services, a six-day teacher training for volunteer teachers in camps have been designed by UNICEF. The training will be rolled out in February in selected camps in Sittwe. Efforts are ongoing to identify potential volunteer teachers and to construct temporary schools in the affected locations. The essential learning packages (ELPs) and other learning materials for 10,000 children will be distributed to targeted camps in Sittwe.

FOOD

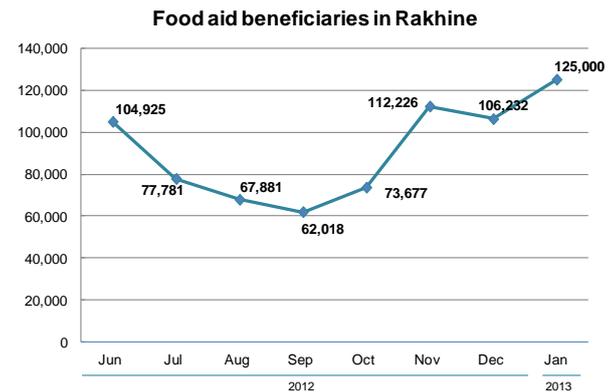
In January, WFP conducted assessments in eight villages in Sittwe to better understand the impact on livelihoods and coping capabilities of non-displaced people. Findings indicate that the prevailing security situation and movement restrictions continue to limit resumption of livelihood activities. It also highlights that markets remain functional and food items are

Internally Displaced Persons (IDPs) face a variety of risks to their health and well-being both during displacement and upon return or resettlement. Health-related factors such as disease, disability and malnutrition brought on by displacement, often claim more lives and cause greater suffering than the conflict itself.

available. The report includes recommendations for cash-based interventions to foster local economy and boost food production activities.

While discussions are ongoing between WFP and its partners on design and implementation of the cash-based intervention in those areas, regular food distribution to all affected people continues. In January, over 125,000 IDPs were provided with some 2,000 metric tons of food in ten townships (Sittwe, Pauktaw, Minbya, Myebon, Mrauk-U, Maungdaw, Rathidaung, Kyauk Phyu, Yan Byae and Kyauktaw).

Since June 2012, WFP and partners distributed more than 11,200 MT to vulnerable people in Rakhine. Food partners estimate that assistance will be needed at least until June 2013.



HEALTH

Ongoing community threats to service providers, scarcity of manpower and logistic constraints continue to hinder provision of much needed health care services in the affected locations, including vaccination, nutrition interventions, surveillance services and health care provision through mobile clinics. The situation in Myebon Township is of particular concern with ongoing threats to INGO health workers for termination of their operations in the township. Health referral services from other locations to Sittwe Hospital remain a major challenge. Partners report similar challenges to the referral services in Minbya and Mrauk-U

While efforts are ongoing to ease community tensions and to create a conducive environment for implementation of activities across Rakhine, partners continue to provide health care services in the affected locations despite serious challenges. A total of 32 mobile medical teams continue to provide health care in eight affected townships across Rakhine, including Sittwe, Minbya, Myebon, Kyauktaw, Pauktaw, Mrauk-U, Kyauk Phyu and Rathitaung. The existing health care services, so far, treated over 300 diarrhoea cases, 122 pneumonia cases and 450 malaria cases in the affected townships. In an effort to strengthen the existing services, UNICEF has made available essential supplies, including 100 child survival kits, 30,000 sachets of ORS, 150,000 Zinc tablets, 17,500 RDTs for malaria and 10,000 long-lasting insecticidal nets (LLIN) for distribution in the affected locations. In Sittwe, UNFPA continues to support the Tetanus Toxoid vaccination programme for pregnant women. In Pauktaw, Mrauk-U and Minbya, MSF continues to provide health care to both displaced and non-displaced communities. The high number of malnutrition and diarrhoea cases observed and treated through mobile clinics indicates the needs for substantial improvement in sanitary and living conditions in those affected locations to mitigate health related risks.

In an effort to identify key activities and address health concerns, the Ministry of Health organized a workshop in February to develop a comprehensive response plan for Rakhine with the participation of UN, INGOs and donors. The priority areas identified during the workshop include enhancing immunization activities, strengthening maternal care and health referral services as well as improving WASH facilities to minimize health risks.

NUTRITION

Nutrition assessments conducted in December and January indicate high rates of global acute malnutrition (14.4 per cent) and severe acute malnutrition (4.5 per cent) in rural camps in Sittwe. This is likely due in part to people not practicing recommended infant and young child feeding practices, with low rates of exclusive breastfeeding for six months in urban (13.3 per cent) and rural areas (6.2 per cent). The rates of complementary feeding are also low in both urban (21.2 per cent) and rural areas (12.8 per cent). There is a risk of a

What is “Gender-Based Violence”?

Violence that is directed against a person or a group of persons on the basis of their gender or sex. It includes acts that inflict physical, mental or deprivations of liberty whether occurring in public and private life.

worsening nutrition situation due to the high prevalence of diarrhea in rural areas (36.2 per cent). Low coverage of Vitamin A supplement is also of major concern for child survival, especially in rural areas (5.6 per cent). A recent rapid nutrition assessments in Myebon and Pauktaw indicate proxy rates of global acute malnutrition below 8 per cent, but high rates of severe acute malnutrition (>2 per cent). There is a risk of further deterioration of nutrition status in the coming months considering high population density and food insecurity with limited access to markets and livelihoods.

Sector partners continue to monitor the situation and roll out intervention package for infants, children and pregnant and lactating women. Screening for acute malnutrition has reached over 7,324 children (aged 6-59 months) in camps and neighboring villages in Sittwe. A total of 1,180 children with severe acute malnutrition have been admitted for life-saving therapeutic feeding and 1,547 children with moderate acute malnutrition enrolled into the targeted supplementary feeding programme. Furthermore, 7,062 children and 3,901 pregnant and lactating women have received multiple micronutrient supplements. Partners have also mobilised over 40 skilled counselors to support recommended infant and young child feeding practices.

1,200
SAM children
reached

1,500
MAM children
reached

Currently, Sittwe Hospital is the only referral hospital for children with severe acute malnutrition requiring inpatient management. Limited access to safe and inclusive services remains a major challenge to reduce morbidity and mortality related to malnutrition. In order to ensure quality services with increased admissions, capacity development and supervisory monitoring are required to meet minimum performance standards.

SHELTER and NFI

Shelter remains a priority in all affected locations in Rakhine. It is particularly important in larger overcrowded camps with limited access to adequate health and WASH facilities. In January, over 200 temporary tents have been set up in Ohn Taw Gyi in Sittwe. A total of 673 tents (608 from KOICA and 65 from UNHCR) have been installed in four rural sites since October 2012. In Sittwe, efforts are ongoing to construct some 135 shelter units to cover over 43,000 IDPs. In Maungdaw, a total of 80 out of 222 shelter units have been constructed by UNHCR and will be handed over to families in February. UNHCR estimates an additional 3,000 tents will be needed in Pauktaw.



An IDP camp in Myebon, Rakhine State. Photo: UNOCHA

In January, UNHCR distributed NFIs kits to IDPs in Pauktaw, Minbya and Sittwe areas and is collecting data on NFI coverage to determine needs and response strategies.

Protection

UNHCR's has observed several protection related concerns while conducting its normal monitoring activities in Rakhine, including the need for more lighting in camps, psychosocial support and hygiene items for women and girls. In Maungdaw, the community raised the need for education, including formal education, which has been interrupted since the June violence. Informal community schools have been set up in some rural areas.

In an effort to address the specific protection issues of women and children, Protection Working Group (PWG) in collaboration with the Rakhine State Government, is developing

the standard operating procedures for sexual and gender based violence (SGVB) cases and child protection activities. The weekly PWG meeting also agreed on standardization of population data collection through a unified mechanism. Such data collection exercise should be carried out after a training to camp managers and camp committees on vulnerability criteria profiling in the framework of camp coordination and camp management. A team of three protection officers from the Office of the High Commissioner for Human Rights (OHCHR) has been deployed in Sittwe to support protection interventions across Rakhine.

WATER, SANITATION and HYGIENE

The sanitation situation in the camps set up following the October inter-communal violence continues to be a concern with high rates of open defecation and poor hygiene practices being used. In Sittwe rural camps, sanitation is also a concern and has been verified in the nutrition assessment in January with a prevalence of diarrhea of 36.2%. Access to safe water is slowly improving both in the Sittwe area, where hand pumps have been made available, and in Pauk Taw, where treated water is being transported by boat. The population also has access to rainwater fed ponds for domestic use.

The WASH sector targets all 115,000 IDPs in Rakhine, regardless of ethnicity and religion. The main areas of interventions include (i) increased access to safe drinking water; (ii) provision of WASH facilities, such as latrines, showers and laundry places; (iii) improved hygiene practices; and (iv) waste management and drainage in camps. Around Sittwe, all the official camps have access to safe drinking water. Hygiene Promotion sessions are conducted in 15 camps in Sittwe, and in all camps of Pauktaw. Drainage has been improved in several camps during the last month and latrine construction is ongoing in most IDP locations. Hygiene kits have been distributed in several locations, together with WaterGuard and ceramic filters for safe household water.

The current constraint for the WASH sector is the lack of adequate land. In the area around Sittwe, the land issue not only constrains the construction, or moving, of latrines, but when the rains come, there is a great risk of flooded latrine pits. This will not only lead to polluted water all over the camps, but also create a risk of contaminating the groundwater, the primary drinking water source. This can lead to severe WASH related diseases. In the outer townships the camps are on paddy fields, which will be completely flooded during the rainy season. The WASH cluster is actively engaging with the Government for relocation of camps, emptying of latrines and latrine construction modification. Additionally, the cluster is preparing a contingency and preparedness plan for the rainy season that commences in April/May. The response capacity for WASH is further limited due to security concerns and access issues in some of the October affected townships.

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