

Danish Refugee Council Monthly Record of Information from program locations in Rakhine State November 2014

The Monthly record represents a snapshot of the situation in the camps and villages where DRC works and aims to capture the issues relevant for DRC operations. This record does not presume to provide a comprehensive picture of the progress and challenges for every sector in each location.

Existing protection referral pathways and the CCCM complaints response mechanism form the foundation of this report. DRC seeks to verify concerns reported to the extent possible and share information with the relevant sectors/agencies for further action.

1. MAIN TRENDS

1.1 Main Trends in IDP Camps

➤ **CAMP MANAGEMENT:**

- Household cards developed
- Infrastructure safety assessment conducted

➤ **SHELTER:**

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➤ **PROTECTION:**

- Main protection issues continue to be
- Protection mainstreaming training conducted for all partners

➤ **CHILD PROTECTION:**

- Main cases are

➤ **WASH:**

- Maintenance of infrastructure is an issue across camps due to the quality of materials used in the original construction. A lack of ownership for the latrines often results in parts being removed for other purposes, mainly firewood. The use of bamboo sheets often result in warping and loss of privacy. Floor slates are often broken preventing access for squatting.
- Desludging services are available but with end treatment facilities supported by NGO. There are many latrines that require desludging but a limited number of collection trucks operated by Oxfam.
- Many of the camps have very poor drainage or is none existent, causing scouring and uncontrolled flow between the shelters that could lead to undermining of shelter support structures.

➤ **HEALTH:**

- There are still gaps
- Very few referrals taking place

➤ **NUTRITION:**

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- **FOOD:**
 - 80% complaints from CRM about food not being
- **NON-FOOD ITEMS:**
 - NFI in camps still on hold
 - Part of previously distributed NFIs being sold due to lack of income
- **EDUCATION:**
 - Very challenging to find TLS teachers
- **LIVELIHOOD:**
 - Lack of activities in camps
- **OTHER ISSUES:**
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- **FOLLOW UP ON FORMER ISSUES:**

In Communities

(only regarding issues raised by residents or flagged by DRC)

- HEALTH:
- EDUCATION:
- NON-FOOD ITEM:
- LLH:
- PROTECTION:

2. HIGHLIGHTS PER LOCATION

(for all locations, copy from highlights in complete update without the follow up section)

1. Say Tha Mar Gyi IDP Camp

2. Phwe Yar Gone IDP Camp

Food: Food rations temporarily cut by 20%...

NFI: delivery of NFI by UNHCR still on hold since the beginning of the year etc...

Health: IDP reports the clinic the lack of health services as the main need in PYG. IRC runs a clinic in nearby STMG but PYG IDPs do not feel comfortable using it and they have to wait 8 hours without a guarantee to see a doctor.

WASH: During a recent visit, members of the community complained about the use of open concrete drainage as the children often fall in them and injure themselves.

3. Ohn Taw Gyi North IDP Camp

4. Ohn Taw Gyi West IDP Camp

5. Baw Du Pha IDP Camp

6. Dar Paing IDP Camp

7. Sat Roe Kya IDP Camp

8. Ohn Taw Gyi South IDP Camp

9. Sin Tet Maw IDP Camp

- IDPs expressed serious concerns about their lack of legal status and rumours on policies that might be adopted by the Government in the next months.
- Shelters are in need of maintenance and that even some have become dangerous for children.
- Access to health services is still limited despite the mobile clinics that visit the camps every month.

10. Ah Nauk Ywe IDP Camp

- Access to health by the IDPs continues to be dramatically limited in the camp, particularly for PWSNs. There are not health facilities or clinics in the camp and most of the IDPs have no financial means to buy medicines or to go to other places to seek medical assistance.
- IDPs who moved from other camps to Ah Nauk Ywe Camp are in need of shelters. These HHs are temporarily staying in the kitchen facility in the camp or with relatives. The lack of shelters for these families could raise protection concerns such as frictions with other IDPs, SGBV, and exploitation, among others.
- Access to latrines is still challenging for persons with disabilities, elderly, children and pregnant women as these are too high and lack proper handrails. Moreover, latrines are not sex segregated and this could cause incidents of GBV particularly at night.

11. Kyein Ni Pyin IDP Camp

- Protection monitoring activities are ongoing as well as support to the women’s group.

12. Say Tha Mar Gyi Village

- Protection monitoring activities are ongoing as well as support to the women’s group.

13. Phwe Yar Gone Village

- Protection monitoring activities are ongoing as well as support to the women’s group.
- **LLH:** DRC distributed business grants to 14 Female Headed Households
- **WASH:** DRC set up a WASH committee and started the construction of communal latrines and XX hand pumps
- **HEALTH:** diarrhoea cases reportedly increasing

14. Pa Lin Pyin Muslim Village

15. Pa Lin Pyin Rakhine Village

16. Ohn Taw Chay Village

- Protection monitoring activities are ongoing as well as support to the women’s group.

17. Ohn Taw Gyi Village

- Protection monitoring activities are ongoing as well as support to the women’s group.

18. Baw Du Pha Village

- Protection monitoring activities are ongoing as well as support to the women’s group.

19. Dar Paing Village

- Protection monitoring activities are ongoing as well as support to the women’s group.

20. Zaw Bu Gyar Village

- The security in the village and surroundings has improved. Reportedly, relations between the villagers and Muslim communities have improved and some of them have employed Muslims to carry out farming activities.

21. Ohn Ye Paw Village

22. Sin Tet Maw Village

- Protection monitoring activities are ongoing as well as support to the women's group.

23. Ah Htet Ywar Village

- Protection monitoring activities are ongoing.

24. Baw Da Li Village

- Protection monitoring activities are ongoing as well as support to the women's group.

25. Ah Nauk Ywe Village

- Protection monitoring activities are ongoing as well as support to the women's group.

26. Sin Aing Village

- Reportedly, there have been some tensions between the inhabitants from Sin Aing village and neighbouring villages.

27. Kyauk Pyin Seik Village

- The elementary school in the village was rehabilitated by DRC and furniture and stationary were provided for the school.

3. FULL UPDATE PER LOCATION

1. Say Tha Mar Gyi IDP Camp

Population: approx. 11,700 IDPs

<p>Highlights</p> <p>Activities and issues:</p> <p>CAMP MANAGEMENT: DRC full range of activities on-going, focus on access to services monitoring and referral, shelter maintenance monitoring, and integration of camp representatives into camp coordination meetings. Field Office Assistant and volunteers collected data on WASH services in the camp, including indicators relating to water points, latrines, drainages, and solid waste management. A Focus Group Discussion with both CMC and Women Group was held about what sort of training they would most prefer to attend. 16 Days of Activism Against Violence Against Women and Girls 2014 was advocated by DRC staffs and volunteers. Furthermore, an assessment (individual interviews) on household fuel usage of IDPs was conducted. As for Community Service Activities, library sessions continued for two days each week.</p> <p>SHELTER: IDPs complained about the condition of their shelters' roofs, walls and floors. DRC (CCCM) staffs, the DRC shelter engineer, the Field Office Assistant, and the volunteers did shelter maintenance monitoring regarding the most damaged parts.</p> <p>CHILD PROTECTION: Regular activities of SCI are on-going and the CFSs are running regularly. Activities focussed on recreational activities for children and students, such as handicraft and painting, hand-washing training, and health education session at the CSFs. There were no new child-related protection cases that had to be followed up.</p> <p>WASH: Regular activities by Oxfam (WASH) focused on cleaning of latrines, drainages, and camp area, as well as hand-washing training, hygiene promotion session with CMC and all IDPs, including training on use of ceramic water filters. Volunteers and some other IDPs joined a camp cleaning event. A list of people with disabilities was collected and wheel chairs will be provided. Furthermore, 50 new double latrines are being built and 80 boreholes are being repaired, while there are plans to build 800 concrete laundry slabs and 100 bathrooms.</p> <p>HEALTH: MRF and MHAA clinic treated over 1,800 patients, with most common diseases being fever, skin itching, and diarrhoea. Further services included DEPO injection for those who would like to do family planning, ATT injections for pregnant women, and nutrition powder for children under five years. However, due to the fact that medical services are not provided every weekday, medical emergencies become a challenge for many IDPs. IDPs reported that diarrhoea is more of an issue now, especially for children. MRF and IRC conducted joint diarrhoea assessment and held a meeting on referral of diarrhoea patients.</p> <p>NUTRITION: SCI regular activities are on-going, focussing on mother-to-mother sessions, behaviour change communication, health education sessions, and individual counselling. Furthermore, SCI did MUAC for children under five years and ACF did MUAC for children under two years. MHAA did MAUC screening as well, and if they found malnourished children, they distributed nutrition powder. MHAA also gave ATT injection to pregnant women.</p> <p>FOOD: WFP food distribution for the month of November completed by week 3. Furthermore, WFP staffs asked IDPs about food concerns. Some IDPs said that the provided food is not enough, as they sell some of it in order to buy firewood, vegetables, and fish.</p> <p>NON-FOOD ITEMS: No agencies supported NFI kits in the camp, the residents are in need of mosquito nets, as well as cooking pots, and other kitchen utensils.</p> <p>EDUCATION: Plan International TLSs are running, focus on recruiting volunteer teachers, construction of 3 new TLSs, renovation of multipurpose building, and discussion with parents and teachers regarding ToR and CoC at the TLS. There is a plan to collect student list for distribution of student kits.</p> <p>LIVELIHOOD: Currently no support to livelihood activities.</p> <p>OTHER ISSUES: UNOCHA visited and talked with CMC and other IDPs regarding their main concerns.</p> <p>FOLLOW UP ON FORMER ISSUES: NTR</p>	<ul style="list-style-type: none"> • Follow up, challenges and advocacy <p>DRC Protection Team will follow up with health actors on the provision of health services in the camp.</p>
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<p>PROTECTION: Protection monitoring, activities with the women`s group, and identification of PWSNs for IPAs are ongoing.</p> <p>Due to the fact that medical services are not provided on a daily basis in the camp, medical emergencies become a challenge for many IDPs. Those who have the financial means to pay for transport and other charges go to Dapaing Clinic. Others have to rely on pharmacies in the camp and what the storekeeper prescribes for them. Cases of diarrhoea are common in the camp and the death of one baby (7 months) was reported.</p> <p>It was also reported by the IDPs that due to the lack of firewood, IDPs are forced to take wood/bamboo from common facilities such as the kitchens, showers and latrines. Women and girls cannot use any of the communal showers in the camp as these have been damaged by IDPs who have taken the wood for cooking.</p> <p>It was reported that IDPs who moved from another camp to STMG in the last months have not received their food rations in the last month and neither WFP nor the Food Committee has provided any justification or explanation to this. It was reported that most of the IDPs in the Camp want to remove the current Food Committee as there are allegations of corruption and extortion.</p> <p>Follow up on former issues</p> <p>NTR</p>	<p>The DRC Protection Team continues to monitor the situation in the camp as well as unhindered access to basic services by all IDPs.</p> <p>DRC Protection Team will follow up with health actors on the provision of health services in the camp.</p> <p>The DRC Protection Team has raised the lack of food distribution to IDPs in the camp to DRC CCCM but the situation continues to be the same.</p>
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2. Phwe Yar Gone IDP Camp

Population: approx. 2,400 IDPs

<p>Highlights</p> <ul style="list-style-type: none"> - Diarrhoea causes the death of one baby in the camp. - Difficulties in the access to latrines by PWSNs due to the lack of handrails to support their access. - Some of the IDPs are conducting livelihood activities in surrounding villages reportedly. - WASH During a recent visit, members of the community complained about the use of open concrete drainage as the children often fall in them and injure themselves. <p>• Other update on activities and issues</p> <p>CAMP MANAGEMENT: DRC full range of activities on-going, focus on access to services monitoring and referral, shelter maintenance monitoring, and integration of camp representatives into camp coordination meetings. Field Office Assistant and volunteers collected data on WASH services in the camp, including indicators relating to water points, latrines, drainages, and solid waste management. A Focus Group Discussion with both CMC and Women Group was held about what sort of training they would most prefer to attend. Additionally, the CMC identified the lack of firewood and NFIs (especially solar light around the latrines area) as the main problems in the camp. 16 Days of Activism Against Violence Against Women and Girls 2014 was advocated by DRC staffs and volunteers. Furthermore, an assessment (individual interviews) on household fuel usage of IDPs was conducted. As for Community Service Activities, library sessions continued for two days each week.</p> <p>SHELTER: IDPs complained about the condition of their shelters’ roofs, walls and floors. DRC (CCCM) staffs, the DRC shelter engineer, the Field Office Assistant, and the volunteers did shelter maintenance monitoring regarding the most damaged parts.</p> <p>CHILD PROTECTION: Regular activities of SCI are on-going and the CFSs are running regularly. Activities focussed on recreational activities for children and students, such as handicraft and painting, and health education sessions at the CSFs. There were no new child-related protection cases that had to be followed up.</p> <p>WASH: Hygiene kit distribution has taken place and assessments of the latrines. Desludging has been planned for the first week in Dec 14.</p> <p>HEALTH: The MRF and MHAA clinic in STMG camp is accessible for IDPs in PYG. However, due to the fact that medical services are not provided every weekday, medical emergencies become a challenge for many IDPs. In PYG, no major health issues reported, but skin infection was more common than before. IDPs mentioned the lack of health facility in PYG as an issue.</p> <p>NUTRITION: SCI regular activities are on-going, focussing on mother-to-mother sessions, behaviour change communication, health education sessions (including diarrhoea awareness), and individual counselling. Furthermore, SCI did MUAC for children under five years, provided a cooking demonstration, and did joint screening with ACF on malnourished children.</p> <p>FOOD: WFP food distribution for the month of November completed by week 4. Furthermore, WFP staffs asked IDPs about food concerns. Some IDPs said that the provided food is not enough, as they sell some of it in order to buy firewood, vegetables, and fish.</p> <p>NON-FOOD ITEMS: No agencies supported NFI kits in the camp, the residents are in need of mosquito nets, as well as cooking pots, and other kitchen utensils.</p> <p>EDUCATION: SCI and Plan International activities on-going. SCI staffs visited their TLS to observed needs of students, while constructing one TLS for the NFE program intended for youth aged between 11 and 18 years.</p>	<ul style="list-style-type: none"> • Follow up, and advocacy <p>DRC (CM) in coordination with Shelter Cluster to address IDP’s needs.</p> <p>Cases of domestic violence will be referred to relevant GBV actors in the camp.</p> <p>The case of the death of the baby was referred by DRC (CM) to DRC Protection, which gathered further info on the case, which was also shared with WASH Cluster.</p> <p>DRC Protection is monitoring deaths of infants in camps and villages to identify causes as well as any problems regarding access to health services.</p> <p>The DRC Protection Team continues to monitor the situation in the camp as well as unhindered access to</p>
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<p>LIVELIHOOD: Provision of cash grants, Cash Management and Bookkeeping Training, as well as on-going technical support for and monitoring of Female Headed Households. Furthermore, identification of and consulting with households selected for IPA.</p> <p>OTHER ISSUES: UNOCHA visited and talked with CMC and other IDPs regarding their main concerns.</p> <p>FOLLOW UP ON FORMER ISSUES: NTR</p> <p>PROTECTION: Protection monitoring, activities with the women’s group, and identification of PWSNs for IPAs are ongoing.</p> <p>In relation to food ration distribution, IDPs in the Camp are monthly receiving their rations except for those who recently moved from other camps to PYG. It was also indicated that WFP has not updated its list of beneficiaries in the last months, particularly, that some of the beneficiaries have died and babies have born.</p> <p>The IDPs in PYG have asked for health facilities to be set up in the camp as they usually have to go to the facilities in STMG.</p> <ul style="list-style-type: none"> • Follow up on former issues <p>NTR</p>	<p>basic services by all IDPs.</p> <p>The Protection Team is monitoring deaths of infants in camps and villages to identify causes as well as any problems in the access to health services by the IDPs in camps. Relevant information is being shared with DRC CCCM as part of the referral process.</p>
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3. Ohn Taw Gyi North IDP Camp

Population: approx. 13,700 IDPs

<p>Highlights</p> <p>Tensions between IDPs and contractors working in the camp were reported as well as threats against IDPs.</p> <p>Allegedly, 8 children died from diarrhoea in the camp. This was reported to the Government and DRC CCCM by the Camp Committee.</p> <ul style="list-style-type: none"> • Other update on activities and issues <p>CAMP MANAGEMENT: DRC full range of activities on-going, focus on access to services monitoring and referral, shelter maintenance monitoring, and integration of camp representatives into camp coordination meetings. Field Office Assistant and volunteers collected data on WASH services in the camp, including indicators relating to water points, latrines, drainages, and solid waste management. A Focus Group Discussion with both CMC and Women Group was held about what sort of training they would most prefer to attend. Furthermore, the CCCM team facilitated a meeting between OCHA, CMC, and Women Group, and negotiated between CMC, land owner, contractor, and SCI staff regarding renovation and construction of latrines, boreholes, and drainages. 16 Days of Activism Against Violence Against Women and Girls 2014 was advocated by DRC staffs and volunteers. Furthermore, an assessment (individual interviews) on household fuel usage of IDPs was conducted. As for Community Service Activities, library sessions continued for two days each week.</p> <p>SHELTER: Some of the shelters' roofs, walls, and floors are in bad condition. DRC (CCCM) staffs, the DRC shelter engineer, the Field Office Assistant, and the volunteers did shelter maintenance monitoring regarding the most damaged parts. Those damaged shelters need to be renovated as soon as possible as this is top priority for the camp residents.</p> <p>CHILD PROTECTION: DRC (CP) team carried out their regular activity, providing Youth Group with life-skill training, holding parenting sessions for mothers and fathers, and conducting a ceremony for 16 Days of Activism Against Violence Against Women and Girls 2014. All CFSs of SCI and LWF are running regularly. There were no new child-related protection cases that had to be followed up.</p> <p>WASH: SCI (WASH) running full range of activities, focussing on CHP home visits, latrine desludging, organizing hygiene training for CPG, hygiene promotion sessions, ceramic water filters distribution and monitoring, and renovating damaged boreholes and latrines. 50 new latrines have been built as well. Furthermore, training on pure water was provided to TLS teachers and new CHP, hand-washing trainings were provided to Child Club and Mother Club, and CHP did Focus Group Discussion and gave soap and soap box.</p> <p>HEALTH: Mercy Malaysia opened the mobile clinic for three days per week (plus one day in week 4) and MoH for one day per week. All TLS students were provided with health education training. CMC and IDPs complained that one clinic for the whole camp would not be enough.</p> <p>NUTRITION: ACF regular activities are on-going and nutrition centre opened three days per week in cooperation between ACF and MHAA. ACF and SCI did joint screening on malnourished children. Furthermore, SCI did home visits, held peer to peer group discussion, and held a discussion with pregnant women, providing them with multi-vitamins. Furthermore, 30 IDPs (men and women) joined training provided by Myanmar Red Cross Society (MRCS).</p> <p>FOOD: WFP food distribution for the month of November completed by week 3. IDPs not on the WFP list received monthly rations instead of 15 day supply. However, some of the people who get ration from MRF made oral complaint as they have been cut of MRF food distribution for about two months. The Government donation of rice was delivered for BDP(61).</p> <p>NON-FOOD ITEMS: No agencies supported NFI kits in the camp, the residents are in need of mosquito nets, as well as cooking pots, and other kitchen utensils. Also needed are household kits including solar lights and warm clothes for the children.</p>	<ul style="list-style-type: none"> • Follow up, challenges and advocacy <p>Cases of domestic violence will be referred to relevant GBV actors in the camp.</p> <p>DRC (CM) to follow up MRF response to complaint sent by IDPs.</p> <p>The DRC Protection Team continues to monitor the situation in the camp as well as unhindered access to basic services by all</p>
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<p>EDUCATION: Regular education activities of LWF and all TLSs opened regularly. Furthermore, LWF conducted a training (capacity building) for TLS teachers. New latrines and boreholes are being built in OTG-6, and renovated in OTG-3 and BDP-61.</p> <p>LIVELIHOOD: Currently no support to livelihood activities.</p> <p>OTHER ISSUES: IRC (WPE) provided sewing machine training to 20 women, did community mapping, and carried out IEC training.</p> <p>FOLLOW UP ON FORMER ISSUES: NTR</p> <p>PROTECTION: Protection monitoring, activities with the women`s group, and identification of PWSNs for IPAs are ongoing.</p> <p>The IDPs asked for lights to be placed in the camp or latrines. Reportedly, IDPs fear to go to the latrines at night as there are many "ghosts". The women's group members requested support with the construction of showers and latrines, installation of street lights, and distribution of soap and menstrual pads.</p> <p>It was also reported problems with food rations as some IDPs who came from Kyauk Phyu, Mye Bone, and Pauk Taw have not received their food rations since August 2014.</p> <p>Shelters, showers and latrines are in need or maintenance. The fact that most of the showers are not in good condition, makes the situation more difficult for women and girls.</p> <ul style="list-style-type: none"> • Follow up on former issues <p>NTR</p>	<p>IDPs.</p> <p>Advocacy for access to food and health continues with relevant humanitarian partners in the field.</p>
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4. Ohn Taw Gyi West IDP Camp
Population: approx. 3,200 IDPs

<p>Highlights</p> <p>Tensions between IDPs and host community over no payment of daily labour wages to the IDPs were reported.</p> <p>Also there were tensions between the two communities as the livestock owned by the IDPs goes to the host community's land plots and eats the crops.</p> <ul style="list-style-type: none"> • Other update on activities and issues <p>CAMP MANAGEMENT: DRC full range of activities on-going, focus on access to services monitoring and referral, shelter maintenance monitoring, and integration of camp representatives into camp coordination meetings. Field Office Assistant and volunteers collected data on WASH services in the camp, including indicators relating to water points, latrines, drainages, and solid waste management. A Focus Group Discussion with both CMC and Women Group was held about what sort of training they would most prefer to attend. The CCCM team also facilitated a meeting between the Danish Ambassador, CMC, and Women Group Furthermore, the CCCM team and Engineer did assessment of warehouse renovation and extension and did assessment of kitchen space to be renovated as library. 16 Days of Activism Against Violence Against Women and Girls 2014 was advocated by DRC staffs and volunteers. Furthermore, an assessment (individual interviews) on household fuel usage of IDPs was conducted.</p> <p>SHELTER: The camp residents complained that some shelter roofs, walls, and floors are still in need of renovation. DRC (CCCM) staffs, the DRC shelter engineer, the Field Office Assistant, and the volunteers did shelter maintenance monitoring regarding the most damaged parts.</p> <p>CHILD PROTECTION: DRC (CP) team carried out their regular activity, providing Youth Group with life-skill training, and holding parenting sessions for mothers and fathers. Furthermore, play kits were provided for youth centre, CPG training was provided to Women Group, and list of children with disabilities was collected. There were no new child-related protection cases that had to be followed up.</p> <p>WASH: CDN (WASH) activities are on-going, focus on desludging, latrine maintenance and renovation, camp cleaning, as well as health education and hygiene promotion training for CDN volunteers. CDN staff also monitored whether the volunteers did regular activities in the camp. Activities of CDN volunteers also included putting lime powder around the drainages once a week, monitoring use of ceramic water filters, monitoring diarrhoea cases, and organizing hand-washing competition. Furthermore, solar lights are set up in the latrine areas. CDN staffs and engineer checked damaged washrooms and latrines regarding required materials for latrines renovation.</p> <p>HEALTH: IRC opened clinic four days a week (minus one day in week 1 and 2) and MOH opened clinic for one day per week. Most patients suffer from fever (also including Malaria), diarrhoea, skin disease, and coughing. Further services included DEPO injection for those who would like to do family planning. IRC also distributed mosquito nets in Than Daw Li Group and Pauk Taw Group, and discussed with CMC about 16 Days of Activism Against Violence Against Women and Girls 2014.</p> <p>NUTRITION: ACF regular activities are on-going, focus on home visits and nutrition awareness raising with Men Group and CMC. One child was referred to the OTG-North nutrition centre.</p> <p>FOOD: WFP did distribution of rice, nutrition powder, and salt (only for 15 days). There were no additional rations for the increased number of IDPs. IDPs complain about food distribution, as they see a lack of rations. One of donor from YGN supported rice, dry chilli, onion, garlic, and oil for Than Daw Li Group group.</p> <p>NON-FOOD ITEMS: No agencies supported NFI kits in the camp, the residents are in need of household kits including winter clothes.</p>	<ul style="list-style-type: none"> • Follow up, challenges and advocacy <p>DRC (CM) is following up with the Township Administrator regarding the living conditions of the STMG group.</p> <p>In relation to the lack of shelters for the families who recently moved to the camp, this was referred to the PWG.</p>
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<p>EDUCATION: All TLS of SCI are running. However, the teachers faced difficulty because there was a lack of textbooks. The teachers also demanded fencing for the TLSs. Hygiene training was held for the students and the teachers went to Thet Kay Pyin to discuss education activities, the state of the student, and how the students can pass the examination.</p> <p>LIVELIHOOD: Provision of cash grants, Cash Management and Bookkeeping Training, as well as on-going technical support for and monitoring of Female Headed Households. Furthermore, identification of and consulting with households selected for IPA.</p> <p>OTHER ISSUES: UNICEF discussed with camp residents about difficulties regarding camp condition and food distribution.</p> <p>FOLLOW UP ON FORMER ISSUES: The DRC Protection Team followed up on the provision of a shelter for the family who stayed temporarily in the women’s center. The accommodation of this family was discussed with the Camp Leader and it was decided to move the family to one of the modular buildings until they are given a shelter in the camp. Other IDPs also face the problem of not having their own shelter and, in the meantime, they are staying with relatives in the camp. This could eventually cause frictions, or any protection incidents such as GBV.</p> <p>PROTECTION: Protection monitoring, activities with the women’s group, and identification of PWSNs for IPAs are ongoing.</p> <p>A family temporarily living in the women’s center moved to one of the modular buildings. They have reported that they have not been given any shelter and ask for support to build their own in the camp. Other IDPs also face the problem of not having their own shelter and, in the meantime, they are staying with relatives in the camp. This could eventually cause frictions, or any protection incidents such as GBV.</p> <p>Reportedly, some HHs are selling alcohol in the camp and this was reported to the Camp Committee.</p> <p>Shelters and showers are in need of maintenance. Women and girls do not take showers in the communal ones so they have to take showers inside their shelters.</p> <ul style="list-style-type: none"> • Follow up on former issues <p>NTR</p>	<p>The DRC Protection Team continues to monitor the situation in the camp as well as unhindered access to basic services by all IDPs.</p> <p>In relation to the lack of shelters for the families who recently moved to the camp, this was referred to the PWG.</p> <p>IDPs are asking for distribution of clothes and blankets for the Winter season. This was referred to the PWG but it was said that the distribution of any NFIs has been suspended.</p>
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5. Baw Du Pha IDP Camp
Population: approx. 11,600 IDPs

<p>Highlights</p> <p>IDPs reported feeling concerned about Muslim communities in surrounding villages. Allegedly, some items were stolen in the camp and the IDPs don't know who the responsible of this is.</p> <ul style="list-style-type: none"> • Other update on activities and issues <p>CAMP MANAGEMENT: DRC full range of activities on-going, focus on access to services monitoring and referral, shelter maintenance monitoring, and integration of camp representatives into camp coordination meetings. Field Office Assistant and volunteers collected data on WASH services in the camp, including indicators relating to water points, latrines, drainages, and solid waste management. A Focus Group Discussion with both CMC and Women Group was held about what sort of training they would most prefer to attend. Furthermore, the CCCM team and Engineer did assessment of kitchen spaces to be renovated (including one to become a library). 16 Days of Activism Against Violence Against Women and Girls 2014 was advocated by DRC staffs and volunteers. Furthermore, an assessment (individual interviews) on household fuel usage of IDPs was conducted. Community Service Activities included cane ball matches and setting up a visibility sign board for cane ball, while a potential football competition remained on hold indefinitely.</p> <p>SHELTER: IDPs reported that some shelter roofs still need to be renovated and some shelters' walling and flooring need to be renovated as well. DRC (CCCM) staffs, the DRC shelter engineer, the Field Office Assistant, and the volunteers did shelter maintenance monitoring regarding the most damaged parts.</p> <p>CHILD PROTECTION: Regular activities of SCI are on-going and the CFSs are running regularly. Activities focussed on recreational activities for children and students, such as handicraft and painting, and health education session at the CSFs. Furthermore, CFS staffs provided living harmony training to children. There were no new child-related protection cases that had to be followed up.</p> <p>WASH: SI (WASH) running full range of activities, focussing on camp cleaning, latrines cleaning and desludging, monitoring quality of water in boreholes and in households, diarrhoea tracking surveys, as well as hygiene kit distribution and monitoring. Further activities included shelter visits, trainings on how to use ceramic water filters, a school hygiene promotion program in the TLSs, water testing in households and water points, and setting up hand washing stand near the latrines.</p> <p>HEALTH: Mercy Malaysia opened the clinic five days a week. No major health cases had to be treated. Most patients were suffering from fever, diarrhoea, or coughing.</p> <p>NUTRITION: SCI, ACF, and MHAA regular activities around nutrition centre on-going. SCI updated the list of pregnant women, distributed multi-vitamin to pregnant women, and consulted Mothers Group, Men Group, and held peer to peer group meeting in women space for pregnant women. Furthermore, SCI met with CMC regarding CFS renovation. ACF conducted home visits, held meetings with Traditional Birth Attendants, Women Group, Men Group, and also mother in law group. MHAA provided nutrition packages.</p> <p>FOOD: WFP rations for 15 days were delivered in week 2, 3, and 4, and included rice, beans, salt, oil, and nutrition powder. WFP staffs did food monitoring as well. Government distributed 48 rice bags to 164 host community households, distributed 30 rice bags to 320 IDPs who do not get rations from WFP, and distributed 10 cans of rice to 515 IDPs who don't get ration from WFP.</p> <p>NON-FOOD ITEMS: DRC had already distributed NFI kits to all of camp residents and not many complaints regarding NFIs at the moment. However, some IDPs requested to provide winter clothes as the weather is getting cold.</p> <p>EDUCATION: TLSs of SCI opened regularly. Volunteer Teachers from SCI have been trained regarding NFE. Furthermore, SCI is collecting the list of NFE students who are under 18 years. The WASH infrastructure is not functioning well, including damaged boreholes near TLS, missing hand washing</p>	<ul style="list-style-type: none"> • Follow up, challenges and advocacy
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<p>tap, and the students do not seem to use TLS latrines from TLS.</p> <p>LIVELIHOOD: Currently no support to livelihood activities.</p> <p>OTHER ISSUES: UNHCR (Protection) held meeting with Women Group and Boy Group. ICRC provided first-aid training to three men and two women in BDP 2. 15 chairs from CMC office were stolen in BDP 1.</p> <p>FOLLOW UP ON FORMER ISSUES: NTR</p> <p>PROTECTION: Protection monitoring, activities with the women`s group, and identification of PWSNs for IPAs are ongoing.</p> <p>IDPs continue to report the lack of blankets and winter clothes.</p> <p>It was reported that due to the lack of livelihoods in the village some of them have taken the decision to leave their village and look for opportunities abroad.</p> <ul style="list-style-type: none"> • Follow up on former issues <p>NTR</p>	<p>The DRC Protection Team continues to monitor the situation in the camp as well as unhindered access to basic services by all IDPs.</p>
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6. Dar Paing IDP Camp

Population: approx. 10,500 IDPs

<p>Highlights</p> <ul style="list-style-type: none"> Other update on activities and issues CAMP MANAGEMENT: DRC full range of activities on-going, focus on access to services monitoring and referral, shelter maintenance monitoring, and integration of camp representatives into camp coordination meetings. Field Office Assistant and volunteers collected data on WASH services in the camp, including indicators relating to water points, latrines, drainages, and solid waste management. A Focus Group Discussion with both CMC and Women Group was held about what sort of training they would most prefer to attend. 16 Days of Activism Against Violence Against Women and Girls 2014 was advocated by DRC staffs and volunteers. Furthermore, an assessment (individual interviews) on household fuel usage of IDPs was conducted. Community Service Activities included cane ball matches as well as setting up a visibility sign board for cane ball. SHELTER: The camp residents complained that some shelter roofs, walls, and floors are still in need of renovation. DRC (CCCM) staffs, the DRC shelter engineer, the Field Office Assistant, and the volunteers did shelter maintenance monitoring regarding the most damaged parts. CHILD PROTECTION: Regular activities of SCI are on-going and the CFSs are running regularly. Activities focussed on recreational activities for children and students, such as handicraft and painting, and health education session at the CSFs. Furthermore, CRC training was provided to children on CRC day. There were no new child-related protection cases that had to be followed up. WASH: SI (WASH) running full range of activities, focussing on camp cleaning, latrines cleaning and desludging, monitoring quality of water in boreholes and in households, diarrhoea tracking surveys, as well as hygiene kit distribution and monitoring. Further activities included shelter visits, ceramic water filter distribution and trainings, a school hygiene promotion program in the TLSs, water testing in households and water points, latrine and borehole repairs, setting up hand washing stand near the latrines, and Focus Group Discussions with Women and Men Groups regarding the use of hand-washing tap. Furthermore, constructed walkway in sector 1, new bathrooms in sector 4, and emergency latrines in tent areas in sector 3 and 4. HEALTH: IRC opened clinic in Sector 4 opened two days per week. IDPs want this clinic to open daily, as sometimes there is not enough time to treat all patients. To get treatment, some sick persons went to Dar Paing Rural Health Centre which is open daily in DP village. No major health issues were reported. Some Pregnant women regular come to the clinic in order to receive health care. IRC distributed mosquito nets in sector 4. NUTRITION: ACF, SCI, and MAHH activities are running regularly. SCI opened nutrition centre, conducting counselling sessions for pregnant women, peer-group meetings on women’s nutrition. Furthermore, SCI did MUAC measuring for children, picked up the pregnant women list, and provided multi-vitamin to those women. ACF and MHAA nutrition centre opened in DP village. ACF did awareness raising regarding nutrition. FOOD: WFP delivered food and distribution of 15 day rations by week 4. WFP staff did food monitoring in this camp. Government distributed rice to families who did not get rations from WFP. In sector 4, one private donor from abroad donated the rice to those who don't get food from WFP. In DP counter, food committees received and distributed beans from WFP for 15 days. In tented area, state government administrator supported rice and oil and in sector 4, rice 150 bags and oil 25 gallons have been distributed. NON-FOOD ITEMS: No agencies supported NFI in the camp in 2014 and the camp residents stated that they want NFI kits that include blankets and clothes, as there will be winter season very soon and especially the children need warm clothes. 	<ul style="list-style-type: none"> Follow up, challenges and advocacy
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<p>EDUCATION: UNICEF handed their activities over to LWF, and all TLS are running regularly. One new TLS is under construction in Sector 3. LWF is planning to recruit more volunteers and advertised job vacancies.</p> <p>LIVELIHOOD: Currently no support to livelihood activities.</p> <p>OTHER ISSUES: WFP staff said that they are going to reduce rice at Thae Chaung counter by 20%. IDPs are worried about that. MRF did needs assessment from CMC. Furthermore, RSG administrator asked CMC to collect the list of people who will compete in sport event in December.</p> <p>FOLLOW UP ON FORMER ISSUES: The DRC Protection Team followed up on a reported incident involving a minor.</p> <p>PROTECTION: Protection monitoring, activities with the women`s group, and identification of PWSNs for IPAs are ongoing. Reportedly, police and military conduct security checks in the camp.</p> <ul style="list-style-type: none"> • Follow up on former issues <p>The DRC Protection Team followed up on a reported incident involving a minor.</p>	<p>The DRC Protection Team continues to monitor the situation in the camp as well as unhindered access to basic services by all IDPs.</p> <p>The DRC Protection Team referred a reported incident involving a minor to SCL for further action.</p>
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7. Sat Roe Kya IDP Camp
Population: approx. 3,002 IDPs

<p>Highlights</p> <ul style="list-style-type: none"> Other update on activities and issues <p>CHILD PROTECTION: Parenting sessions ongoing; youth groups life skills trainings ongoing; case management ongoing; 16 days of activism activities conducted (awareness raising on CP and GBV), drawing competition</p> <p>SHELTER: shelters are in need of maintenance and the IDPs are concerned about their shelters could not endure the next rainy season.</p> <p>WASH: WASH actors continue with their activities in the camp. It was reported that the IDPs have to go to fetch water from a nearby monastery (40 min. by foot).</p> <p>HEALTH:</p> <p>FOOD: Food rations were distributed in the camp.</p> <p>NON-FOOD ITEMS:</p> <p>NUTRITION: Regular activities on-going (ACF).</p> <p>EDUCATION:</p> <p>PROTECTION: Regular protection monitoring, and support to women's group ongoing. IPA consultations held with community groups to explain process and criteria.</p> <p>Tensions over recruitment of volunteers from the SRK1 and SRK2 were reported. Usually community leaders try to have the people in their camps working for international NGOs and they dislike the idea of having volunteers from other nearby camps or villages.</p> <p>There are not showers in the camp and women and girls have not place where to take a shower.</p> <p>CHILD PROTECTION:</p> <p>LIVELIHOODS:</p> <ul style="list-style-type: none"> Follow up on former issues <p>NTR</p>	<ul style="list-style-type: none"> Follow up, challenges and advocacy <p>The DRC Protection Team continues to monitor the situation in the camp as well as unhindered access to basic services by all IDPs.</p>
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8. Ohn Taw Gyi South IDP Camp

Population: approx. 13,000 IDPs

<p>Activities and issues:</p> <p>WASH: There is a high number of reported repairs required for the camp and a contract is being prepared to complete initial repairs. Volunteer's numbers will increase from 28 to 60 for which over 500 applications have been received. A large group of approximately 60 people addressed the DRC Hygiene Promotion team and complained that DRC shouldn't hire ex Oxfam. It has been suggested by the CCCM that a lucky draw system should be incorporated but this does not guarantee that the appropriate people are used in the hygiene promotion team. Further talks involving the community, CCCM and protection will be required to resolve the issue to prevent issues arising.</p> <p>FOLLOW UP ON FORMER ISSUES: NTR</p>	<p>Follow up, challenges and advocacy:</p>
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9. Sin Tet Maw IDP Camp

Population: approx. 3,000 IDPs

<p>Highlights</p> <p>Good relationship between the villagers and communities living in neighbouring villages. Reportedly, they conduct livelihood activities such as fishing during daytime. Police and army are present in the site and have to be notified about any fishing activities.</p> <ul style="list-style-type: none"> • Other update on activities and issues <p>WASH: Some of the hand pumps in the village are in need of repair work and latrines are needed. Open defecation is common in the village.</p> <p>Health: There are not medical facilities or health center in the village so some of them go to the health center in STMG IDP Camp although there are not enough medicines and medical equipment to treat them. Some others seek assistance from other villagers or buy medicines in a pharmacy. Villagers with sufficient financial means to pay for a proper medical treatment go to Thet Kay Pyin Clinic or Dar Pine Hospital.</p> <p>Education: there is a primary school in the village, but it lacks materials and benches for the students. Currently, there are only three teachers working in the school and are paid by the community.</p> <p>Protection: due to lack of latrines in the village, open defecation in nearby fields is common. This is highly risky for women and girls who could be subjected to SGBV.</p> <p>Food: no distribution of food is taking place in this village.</p> <p>Livelihoods: The two most common livelihood activities are fishing and farming, however, the villagers make small profit from the selling of fruits and vegetables.</p> <ul style="list-style-type: none"> • Follow up on former issues <p>NTR</p>	<ul style="list-style-type: none"> • Follow up, challenges and advocacy
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13. Phwe Yar Gone Village

Population: approx. 2,400 inhabitants

<p>Highlights</p> <p>Muslim and Rakhine communities seen to have a good relationship and are carrying out livelihood activities.</p> <ul style="list-style-type: none"> • Other update on activities and issues <p>Protection: Protection monitoring activities are ongoing as well as support to the women’s group. There is lack of basic services in the village, so villagers have to go to the camps to have access to them. It was also reported that mostly male villagers are leaving the State meaning that their wives and children stay behind in the village.</p> <p>WASH: No updates. DRC planning to start WASH activities in Pwe Yar Gone village and is currently recruiting additional Hygiene Promoters funded under ECHO to allow implementation to start.</p> <p>Health: the village doesn’t have a health center. They usually seek medical assistance in STMG health center. Those who have financial means to pay for transport and doctor fees go to Thet Kay Pyin Clinic or Dar Pine Hospital. Those with limited financial means stay in the village taking homemade or traditional medicine treatments.</p> <p>Education: there is not any school in the village so children are attending classes in the school in PYG camp.</p> <p>Livelihood: Focal Group Discussion for selection of female headed household beneficiaries.</p> <ul style="list-style-type: none"> • Follow up on former issues <p>NTR</p>	<ul style="list-style-type: none"> • Follow up, challenges and advocacy <p>NTR</p>
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14. Pa Lin Pyin Muslim Village

Population: approx. 1,400 inhabitants

<p>Highlights</p> <p>The security situation in the village was reported as stable as well as a good relationship with neighbouring Rakhine villages.</p> <ul style="list-style-type: none"> • Other update on activities and issues <p>WASH: DRC hygiene promotion and regular monitoring. Follow up monitoring is required to assess the impact of the latrines and refuse pits constructed in early 2014 and to gauge the level of ownership attained.</p> <p>HEALTH:</p> <p>PROTECTION: protection monitoring is ongoing as well as support to the women's group.</p> <p>Access to basic services in particular latrines and water points remains a challenge for PWSNs, particularly the elderly and disabled.</p> <p>LIVELIHOODS: Follow Up Monitoring of Female Headed Household beneficiaries</p> <ul style="list-style-type: none"> • Follow up on former issues <p>NTR</p>	<p>Follow up, challenges and advocacy</p> <p>The DRC Protection Team will continue with their protection monitoring activities in the village as well as their activities with the women's group with particular attention on domestic violence.</p>
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15. Pa Lin Pyin Rakhine Village

Population: approx. 900 inhabitants

<p>Highlights</p> <p>The security situation in the village was reported as stable as well as the relationship between Muslim and Rakhine communities. Reportedly, both communities are doing farming and fishing activities together and without any tensions.</p> <ul style="list-style-type: none"> • Other update on activities and issues <p>WASH: DRC conducted regular WASH activities. Hygiene Promotion and increased AWD awareness training in reaction due to reported AWD in the nearby camp. HEALTH: The Government has recently assigned a health assistant to the village so there is medical treatment available to the villagers.</p> <p>Education: there is one school in the village which is accessible to 178 students. However, the school lacks furniture for the students.</p> <p>PROTECTION: protection monitoring is ongoing as well as support to the women's group. Reportedly, some of the livestock has gone missing and the villagers believe that their livestock has been taken by the IDPs who then eat it. This was reported to the Police but no action has been taken in this regard.</p> <p>The villagers also indicated that IDPs have destroyed their crops.</p> <p>Livelihood: Follow Up monitoring of Female Headed Household; Cash Management and Book Keeping Training; Following up Community Protection Assistance Activities.</p> <p>Follow up on former issues</p> <ul style="list-style-type: none"> • NTR 	<p>Follow up, challenges and advocacy</p> <p>The DRC Protection Team will continue with their protection monitoring activities in the village.</p>
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16. Ohn Taw Chay Village

Population: approx. 1,100 inhabitants

<p>Highlights</p> <p>There have been accusations against IDPs of destroying crops that belong to the host community and stealing the livestock of the villagers.</p> <ul style="list-style-type: none"> • Other update on activities and issues <p>PROTECTION: protection monitoring is ongoing as well as support to the women's group. Reportedly, some of the livestock has gone missing and the villagers believe that their livestock has been taken by the IDPs who then eat it. This was reported to the Police but no action has been taken in this regard.</p> <p>The villagers also indicated that IDPs have destroyed their crops.</p> <p>It was reported that due to the lack of livelihood activities in the village, people are travelling abroad to neighbouring countries.</p> <p>Health: there are not medical facilities in the village, so the villagers who have financial means for transport and medical fees go to Dar Pine Hospital or Thet Kay Pyin Clinic.</p> <p>Education: There has one school at the village. They have many students and School space is no enough.</p> <p>NFI: the villagers are in need of winter clothes and blankets.</p> <p>Child Protection: Parenting sessions ongoing; youth groups life skills trainings ongoing; case management ongoing; 16 days of activism activities conducted (awareness raising on CP and GBV), drawing competition</p> <p>Livelihood: Follow Up Monitoring of Female Headed Household beneficiaries</p> <p>Follow up on former issues</p> <ul style="list-style-type: none"> • NTR 	<p>Follow up, challenges and advocacy</p> <p>NTR</p> <p>Need to follow up with Education partners and UNICEF</p>
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17. Ohn Taw Gyi Village

Population: approx. 2,400 inhabitants

<p>Activities and issues:</p> <p>CHILD PROTECTION: Parenting sessions ongoing; youth groups life skills trainings ongoing; case management ongoing; 16 days of activism activities conducted (awareness raising on CP and GBV), drawing competition</p> <p>FOLLOW UP ON FORMER ISSUES: NTR</p>	<p>Follow up, challenges and advocacy:</p> <p>Need to follow up with Education partners and UNICEF</p>
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18. Baw Du Pha Village

Population: approx. 1,500 inhabitants

<p>Highlights Protection monitoring activities are ongoing as well as support to the women’s group.</p> <ul style="list-style-type: none"> • Other update on activities and issues Protection: due to the lack of livelihood activities and current situation, people are leaving to Thailand and Malaysia. <p>Follow up on former issues</p> <ul style="list-style-type: none"> • NTR 	<p>Follow up, challenges and advocacy</p> <p>NTR</p>
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19. Dar Paing Village

Population: approx. 4,200 inhabitants

<p>Highlights Protection monitoring activities are ongoing as well as support to the women’s group.</p> <ul style="list-style-type: none"> • Other update on activities and issues Security: allegedly, some IDPs are staying in shelters in the village and have been accused of being involved in thief of things in the village. Health: there is a health center in the village however this one lacks medicines and medical equipment. <p>Follow up on former issues</p> <ul style="list-style-type: none"> • NTR 	<p>Follow up, challenges and advocacy</p> <p>NTR</p>
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20. Zaw Bu Gyar Village

Population: approx. 300 inhabitants

<p>Highlights</p> <p>The security in the village and surroundings has improved. Reportedly, relations between the villagers and Muslim communities have improved and some of them have employed Muslims to carry out farming activities.</p> <ul style="list-style-type: none"> • Other update on activities and issues <p>Security: there was a robbery in the village recently. The village administrator and other relevant authorities are conducting an investigation into this.</p> <p>WASH: latrines have been constructed by the Department of Rural Development, Rescue and Resettlement.</p> <p>HEALTH: The MoH usually provides health in the village (mobile clinic), however, they haven't come in the last weeks. The villagers have requested to be provided with a phone number of the mobile clinic so they can contact them in case of an emergency.</p> <p>PROTECTION: protection activities are on-going.</p> <p>NON-FOOD ITEMS: The villagers indicated that most of the households have no financial means to buy any warm clothes for the winter.</p> <p>LIVELIHOODS:</p> <p>Follow up on former issues</p> <ul style="list-style-type: none"> • NTR 	<p>Follow up, challenges and advocacy</p> <p>The DRC Protection Team will follow up on the security situation in the village and the improvement in the relations between the two communities.</p>
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21. Ohn Ye Paw Village

Population: approx. 300 inhabitants

<p>Activities and issues:</p> <p>WASH: DRC – Hygiene Promotion at community level for children and regular monitoring ongoing is currently the primary drive within the community with continued support for the constructed latrines and their ownership.</p> <p>LIVELIHOOD:</p> <p>Cash Grant Activity ongoing. As a part of community protection assistance, Construction of communal hall has been starting in October.</p> <p>FOLLOW UP ON FORMER ISSUES: NTR</p>	<p>Follow up, challenges and advocacy:</p>
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22. Sin Tet Maw Village

Population: approx. 3,700 inhabitants