

<p>Solidarités International (SI) is rehabilitating the latrines in the camp as most of them are in very bad condition.</p> <p>HEALTH: A State run health mobile clinic continues to provide medical services. The IDPs request the opening of a health center or clinic in the camp or that the State run mobile clinic visits the camp more frequently (at least two or three times per week). Reportedly, IDPs are suffering from various types of diseases and many of them have no financial means to buy medicines from the pharmacy.</p> <p>FOOD: food rations were delivered; however, IDPs who moved from other camps to Ah Nauk Ywe Camp have not received any rations in the past months.</p> <p>EDUCATION: NTR</p> <p>NON-FOOD ITEM: it was reported that ICRC distributed firewood to the IDPs and that German Agro Action (GAA) distributed NFIs to the IDPs that arrived in the camp in the past months.</p> <p>PROTECTION: protection monitoring activities are ongoing as well as support to the women's group. No reports on any frictions or protection concerns due to the lack of shelters for the IDPs who moved from another camp to Ah Nauk Yew Camp in the last months, however, the Protection Team is monitoring closely their situation in the camp. Access to latrines remains challenging for many persons with disabilities, elderly, children and pregnant women as these are too high, the floor is very slippery, and latrines do not have proper handrails for them. Sanitation/hygiene activities need to be improved as stagnant water in the camp is breeding mosquitos and flies which could transmit various diseases to the IDPs in the camp. Moreover, latrines are not sex segregated and this could cause incidents of GBV, particularly at night.</p> <p>Moreover, the lack of food rations for the IDPs who moved to the camp in the past months is exposing them to risks such as sexual exploitation, malnutrition, involvement in criminal activities, diseases and even death. In addition to this, lack of firewood and the fact that some IDPs go out of their camps to collect firewood are also putting them at risk when trying to collect firewood from areas outside of the camp. They can be physically attacked by neighbouring villagers when going to collect firewood. In addition to this, the lack of proper health services may cause widespread of diseases among the IDPs and death. Lack of financial means to buy medicines also exposes the IDPs to exploitation, SGBV, involvement in criminality or even malnutrition as some of them have to sell part of their food rations to obtain any money to buy medicines for them or their relatives. Self-medication also implies a major health risk for the IDPs.</p> <p>NUTRITION: reportedly, nutrition activities are being carried out for children under 5 years old.</p> <p>CHILD PROTECTION: No updates.</p> <ul style="list-style-type: none"> • Follow up on former issues <p>The DRC Protection Team followed up on health, and WASH services as well as food distribution but unfortunately there has been no major improvement in the situation.</p>	<p>concerns.</p> <ul style="list-style-type: none"> - DRC Protection Team will advocate for proper access to latrines by PWSNs in the camp with WASH partners in the camp as well as the improvement of the sanitation/hygiene conditions in the camp.
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11. Kyein Ni Pyin IDP Camp

Population: approx. 4,500 IDPs

<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: protection monitoring activities are ongoing as well as support to the women's group. WASH: IDPs report almost most latrines are full, concerns over open defecation. Drainage line often filled with sand. Hygiene promotion and regular monitoring. Without funding, the WASH component is not able to function as intended. There is no disposal system in place for latrine waste and open defecation is very evident. There is no fuel or chemicals to run the water treatments system and repairs are required to one of only 2 pumps available. The volunteers have not received wages for 2 months and although currently understanding, they grow more discontent at each visit and unwilling to perform the tasks requested of them. The overall hygienic situation in the camp is poor and has the potential to impact on health if ready solutions are not implemented ASAP. This cannot be achieved without funding. Follow up on former issues <p>NTR</p>	<ul style="list-style-type: none"> Follow up, challenges and advocacy <p>WASH – DRC plan latrine renovation in line with new WASH 2014/2015 project, awaiting final agreement. DRC investigating solutions for on site desludging</p>
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12. Say Tha Mar Gyi Village

Population: 1,000 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 NTR Follow up on former issues NTR 	<ul style="list-style-type: none"> Follow up, challenges and advocacy <p>NTR</p>
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13. Phwe Yar Gone Village

Population: approx. 2,400 inhabitants