

2015

HUMANITARIAN NEEDS OVERVIEW

Myanmar

December 2014



Prepared on behalf of the Humanitarian Country Team in Myanmar

HIGHLIGHTS

100%
51.4 million
Total population

1 % of total population
540,700*
People with humanitarian needs

Rakhine

IDPs	139,300
Other	277,300
TOTAL	416,600

Kachin/Shan

IDPs	99,100
Other	20,700
TOTAL	119,800

Mandalay

IDPs	3,300
Other	1,000
TOTAL	4,300

* There are also an estimated 400,000 IDPs in South-eastern Myanmar, but the humanitarian and development needs of this protracted caseload are covered through a separate durable solutions framework. The wider needs of people at risk of statelessness in Rakhine are also covered through a separate UNHCR framework.

KEY HUMANITARIAN ISSUES

Prolonged displacement resulting from ongoing inter-communal tensions and unresolved armed conflict

About 241,000 people are still displaced as a result of the inter-communal violence in Rakhine State and Mandalay Region in 2012-13 as well as the armed conflict that re-started in Kachin and northern Shan in 2011. Local communities in these areas also continue to be severely affected by inter-communal tensions and unresolved armed conflict, and there are serious protection concerns that need to be addressed.

Unequal and inadequate access to basic services and livelihoods opportunities

Service provision in Rakhine State remains unequal with Muslims still facing severe restrictions on their freedom of movement, limiting their access to hospitals, primary and secondary schools, and other essential services. In Kachin the ongoing armed conflict also constrains the ability of people to gain access to essential services. In both Rakhine and Kachin, malnutrition rates are particularly high in crisis affected areas. Among the affected population, around 10-15 per cent are likely to face additional vulnerabilities related to their disability

Challenges in finding durable solutions for the displaced

The camps in Rakhine and Kachin were established as temporary ones. Shelters were designed to last for two years and the expectation was that within that time people would either return and reintegrate in places of origin or find other durable solutions. Progress in finding durable solutions has been slow but this remains a priority and humanitarian organizations continue to promote early recovery and stronger linkages between humanitarian and development efforts

Building resilience and preparing for new emergencies

Emergency preparedness is a major challenge in Myanmar, which is one of the countries at highest risk of natural disasters in South-East Asia. There is a continued need to strengthen disaster risk reduction activities and to enhance national capacity to prepare for and respond to future emergencies.



IMPACT OF THE CRISIS

HIGHLIGHTS

In Rakhine State some 139,000 people remain displaced as a result of the violence that erupted in 2012. Inter-communal tensions continue, affecting both displaced people in camps and people in surrounding communities. Continued human rights violations and movement restrictions have resulted in a situation where many of the displaced do not have adequate access to basic services, including healthcare and education. The prolonged encampment of displaced people and the increased isolation of some communities has also limited their access to livelihood opportunities. In 2014, the Government announced that it is in the process of finalizing a Rakhine State Action Plan that address a number of issues including security, stability and rule of law, rehabilitation and reconstruction of temporary settlements for displaced people, permanent resettlement, citizenship assessment, socio-economic development and activities aimed at enhancing peaceful coexistence of communities. Meanwhile, in Kachin and northern Shan states, the armed conflict that reignited in 2011 has not yet been resolved and negotiations aimed at achieving a nation-wide ceasefire continue. Approximately 5,000 people were newly displaced in 2014 following a series of armed clashes. In total, about 99,000 people remain displaced across Kachin and northern Shan states. The proximity of the conflict to the civilian population remains a major concern. The Government has announced plans to provide durable solutions for the displaced and the UN and its partners are working to ensure that initiatives aimed at providing durable solutions are carried out in accordance with international standards.

Drivers and underlying factors

The humanitarian situation in Myanmar is characterized by a complex combination of vulnerability to natural disasters, food and nutrition insecurity, poverty, armed conflicts, inter-communal tensions, statelessness, discrimination, displacement, trafficking and migration.

Following the 2010 elections, Myanmar began a process of political and economic reforms which led to the suspension of international sanctions and a substantial increase in foreign investment and international aid. Multilateral agencies such as the World Bank, the Asian Development Bank and the International Monetary Fund have re-established their presence in the country and are providing policy advice, technical assistance, loans and development aid. Despite tremendous progress, challenges remain primarily related to communal and ethnic divisions as well as protracted conflicts. If left unaddressed, these challenges pose significant risks to Myanmar's stability and progress on sustainable development.

Protection and displacement: Since 2011, conflict and unresolved ethnic, inter-communal and sectarian differences have caused the internal displacement of an estimated 241,860 people. This includes 139,310 in Rakhine State plus 99,070 in Kachin and northern Shan states, and 3300 in Meikhtila, in Mandalay Region.

In Rakhine, the inter-communal violence in 2012 created a wide range of humanitarian concerns stemming from displacement and restricted freedom of movement which limited access to essential services and livelihoods. A large number of Muslims who call themselves "Rohingya" but who the Government refers to as "Bengalis" are subjected to ongoing human rights violations and also impacted by the fact that they are not considered to be citizens of Myanmar. Even persons without citizenship who were not displaced by the 2012 violence continue to

face substantial restrictions on their freedom of movement, marriage and birth registration, and have been exposed to different forms of exploitation and abuse. According to UNHCR, approximately 53,000¹ people, most of whom are without citizenship, left the northern part of Rakhine and bordering areas in Bangladesh between July 2013 and June 2014, mostly by dangerous sea crossings.

Different areas of Rakhine have different humanitarian, recovery and development needs stemming from the combination of pre-existing under-development, movement restrictions, protracted displacement, human rights violations, on-going inter-communal tensions and insecurity. Efforts to promote reconciliation had limited success in 2014, but the Union Government has said that it will soon be launching its Rakhine State Action Plan in an effort to address unresolved citizenship issues, to find durable solutions for displaced people, and to bring about peace, stability and development in Rakhine.

In Kachin and northern Shan states, the on-going conflict and protracted displacement is leading to increased protection concerns, including gender-based violence, grave violations against children and restricted access to basic services and livelihoods. Protection risks associated with the residual conflict and landmines are of concern for IDPs and civilians in conflict-affected areas. The proximity of the conflict and presence of landmines continue to constrain the ability of people to return to their places of origin, which also often lack basic services and livelihood/employment opportunities.

There are also humanitarian challenges in a number of remote border regions and in particular parts of south-eastern Myanmar, notably in Mon, Kayah, Kayah and Shan states as well as Tanintharyi and Bago Regions, where landmine contamination constrains the ability of service providers to access people of concern. The history of conflict combined with under-investment in these areas has created chronic unmet needs for essential services in health, water and education. Cross-border human trafficking is also a serious concern. Meanwhile, political discussions between Myanmar and Thailand have made progress in establishing conditions for the return of refugees who have lived in camps in Thailand for the past few decades.

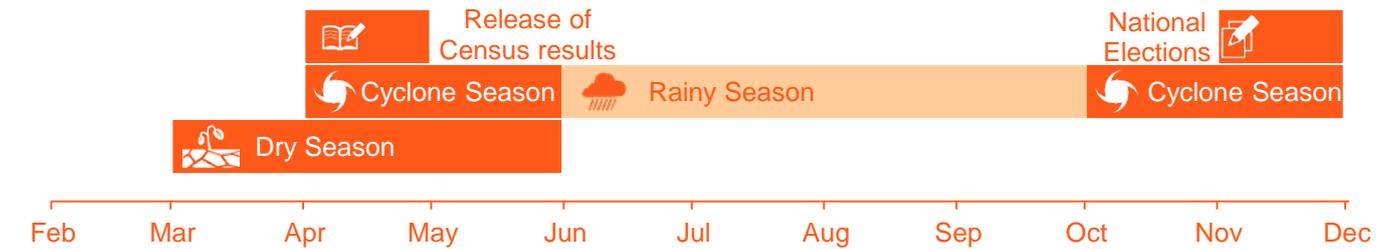
Natural disasters: Myanmar is prone to natural hazards including cyclones, storms, floods, landslides, earthquakes, tsunamis, drought, fire and forest fires. Historical data shows that there have been medium to large-scale natural disasters every few years. Between 2002 and 2013, more than 13 million people were affected by natural disasters, including three Category 4 cyclones, several major earthquakes, and flooding. In collaboration with the Government, disaster preparedness efforts have been scaled up at both national and regional levels. In 2014, the Inter-Agency Emergency Response Preparedness Plan, which identifies and explains preparedness actions of cluster/sectors, was developed to strengthen response mechanisms in the event of a major natural disaster.

Poverty and food insecurity: Poverty and under-development have also left many people highly vulnerable, particularly in crisis-affected areas. The countrywide Integrated Household Living Conditions Assessments (2005 and 2010) indicate that the national average of food insecurity is 4.8 per cent. The assessment found that Chin, Shan, Kachin, Kayah and Rakhine states suffered from higher incidences of food poverty than the national average. Many residents of these areas have limited access to cultivable land, microcredit, capital, technology and information as well as education and health services. Compared to the national average of 4.8 per cent, ten per cent of the population in Rakhine State were identified as “food poor”, defined as insufficient household income to meet minimum caloric requirements. Food insecurity combined with temporary shocks resulting from recurrent natural disasters described above also increases vulnerabilities and affects large numbers of people in the country.

Presence of landmines: Landmine contamination also remains a key humanitarian concern in Myanmar, with over 3,400 casualties reported between 1999 and 2013 by the Landmine Monitoring Report. This number is likely under-representative as data of mine accidents are not systematically gathered. As ceasefire talks have progressed, the Government has devoted more attention to address landmine contamination, including a series of training initiatives on mine-risk education, although additional steps to clear mines are needed to enable IDP/refugee returns.

¹UNHCR's report on irregular maritime movements in South East Asia, January-June 2014 (<http://www.unhcr.org/53f1c5fc9.html>)

Figure 1: Critical events timeline for 2015



Source: UN in Myanmar, Government

Geographic scope and demographic profile of the crisis

Myanmar has a multi-ethnic population of approximately 51.4 million people across seven states and seven regions. Nine of these fourteen states/regions are either affected by on-going conflict and inter-communal tensions, or remain affected by the armed conflict that has been going on for decades and that remains unresolved. According to the preliminary data from the 2014 census, there are around 7.6 million people living in the 68 affected townships (including 17 townships that were not enumerated due to insecurity).

Rakhine State is one of the least developed areas of Myanmar, with a diverse ethnic and religious population. The 2009-2010 Integrated Household Living Condition Survey, conducted before the current crisis, ranked Rakhine the country's second poorest region, after Chin State. An estimated 43.5 per cent of the Rakhine population lives below the poverty line, compared to the national average of 25.6 per cent. Inter-communal violence that erupted in Rakhine State in June and October 2012 resulted in the displacement of an estimated 139,310 people. Of these, 116,183 are in camps, 14,969 are displaced within their village of origin, while 8,158 are living with host families or in individual housing. In addition, an estimated 100,000 people in host/surrounding communities have been severely impacted by inter-communal tensions, and an estimated 5,000 people have been assessed and found to be food and nutrition insecure in Rathedaung Township. Additionally 172,290 crisis affected people have been found to be food insecure as well as in need of support for basic health care, water/ sanitation/ hygiene services and nutrition interventions in Maungdaw and Buthidaung Townships.

In Kachin and northern Shan states, approximately around 99,000 people have been displaced over the past three years. Of these, more than 50 per cent are located in areas beyond Government control. Additionally, an estimated 20,000 people hosting IDPs have depleted their assets and are no longer able to provide for their own families and the displaced people. Kachin State is resource-rich, but with higher than average poverty levels (28.6 per cent compared to the national average of 25.6 per cent). Poverty in northern Shan is even higher, with 37.4 per cent of the population below the poverty line as reported in the 2010 Household Living Conditions Survey.

Meikhtila in Mandalay Region experienced inter-communal violence in March 2013, which resulted in initial displacement of 12,000 people. As of September 2014, some 3,300 people remain in camps awaiting durable solutions.

In south-eastern Myanmar, the estimates indicate that some 400,000² people may remain displaced in 36 townships in the border region with Thailand, stretching from central Shan State down to Tanintharyi Region, following decades of armed conflict. The displaced population is living in a variety of settings: in isolated dwellings in remote areas; with host families; in towns and some in IDP camps in Shan and Kayin states along the border with Thailand. It is difficult to separate humanitarian needs from longer term development needs in these areas where the Government is involved in on-going efforts to build sustainable peace. The needs of people in these areas will be covered through a separate durable solutions framework that is beyond the scope of this Humanitarian Needs Overview.

²Figure from The Border Consortium (TBC)

Figure 2: Statistics of the population in 2015



Figure 3: Classification of people in need of humanitarian assistance⁵

September 2014	
540,701	
Total people in need	
241,680 Displaced	299,021 non-displaced
205,869 living in IDP camps	177,290 Crisis affected ⁶
14,969 living in village of origin	120,000 in host/ surrounding communities ⁷
20,842 living with host families	1,731 resettled IDPs

Source: The Relief and Resettlement Department, Save the Children International, UNICEF, WFP, WHO, UNHCR, OCHA,

³ Preliminary results of the 2014 Census

⁴ This includes people in the following States/Regions: Kachin, Rakhine, Shan (North), Mandalay, Bago(East), Kayah, Kayin, Mon, Shan (East), Shan (South) and Tanintharyi

⁵ All categories defined as per Myanmar Humanitarian Data Standards

⁶ People who were directly affected by crisis but are not displaced

⁷ Communities that host IDPs/refugees typically in camps within the community or in host families/ that are affected due to a large number of IDPs living in surrounding villages that are neither host nor surrounding communities and are not directly affected.

Figure 4: Classification of people in need of humanitarian assistance by state/region

STATE/ REGION	TOWNSHIP	Displaced Persons			Non Displaced Persons			Total
		In Camps, Collective centres or Self-settled	In village of Origin	In Host Families	Crisis affected	Host / surrounding communities	Resettled IDPs	
Kachin and Shan (North)	Bhamo	6,964		1,475		20,000	731 ⁸	
	Chipwi	3,797						
	Hpakant	3,570						
	Hseni			392				
	Khaunglanhpu	17						
	Kutkai	2,747						
	Machanbaw	37						
	Mansi	10,947		1,847				
	Manton	290						
	Mogaung	148						
	Mohnyin	150						
	Momauk	22,053		1,469				
	Muse	577		690				
	Myitkyina	6,604						
	Namhkan	1,844						
	Namtu	51		520				
	Putta-O	91		120				
	Shwegu	702		1,721				
Sumprabum	32							
Waingmaw	25,765		4,450					
Total Kachin and Shan (North)		86,386	0	12,684	0	20,000	731	119,801
Rakhine	Buthidaung				61,550	100,000		
	Kyaukpyu	1,717	65					
	Kyauktaw	1,150	5,645					
	Maungdaw			1,911	110,740			
	Minbya		5,306					
	Mrauk-U	196	3,876					
	Myebon	3,226						
	Pauktaw	17,163		97				
	Ramree	178	77					
	Rathedaung	4,089			5,000			
	Sittwe	88,464		6,150				
Total Rakhine		116,183	14,969	8,158	177,290	100,000	0	416,600
Mandalay	Meikhtila	3,300					1,000	4,300
Total Mandalay		3,300	0	0	0	0	1,000	4,300
Total People in Need		205,869	14,969	20,842	177,290	120,000	1,731	540,701

Source: Relief and Resettlement Department, Save the Children International, UNICEF, UNHCR, WHO, WFP, OCHA

⁸ According to the Kachin State Government, 731 IDPs have returned/resettled. Some returns have not been verified at the time of writing. The Humanitarian Country Team has agreed to support those returns that are verified and considered to be voluntary, safe and sustainable.

Figure 5: Sex and Age Disaggregated Data for IDPs in Camps⁹

Province	Children (<18)		Adults (18-60)		Elderly (>60)		Male	Female	TOTAL
	M	F	M	F	M	F	(total M)	(total F)	Current
Kachin	19,505	19,490	15,845	18,808	2,058	2,888	37,408	41,186	78,594
Rakhine	20,992	20,693	15,094	17,172	1,078	1,306	37,164	39,171	76,335
TOTAL	40,497	40,183	30,939	35,980	3,136	4,194	74,572	80,357	154,929

Source: UNHCR

Situation of the affected populations

Rakhine State

Inter-communal and sectarian tensions continue throughout much of Rakhine State. The number of people displaced since July 2012 as a result of inter-communal violence and who remain in need of humanitarian assistance stood at 139,310 by October 2014. In addition, humanitarian organizations are targeting an estimated 100,000 vulnerable people in communities hosting/surrounding IDPs and 177,290 other particularly vulnerable crisis affected people.

The situation is critical for over one million Muslims, most of whom call themselves “Rohingya” but who the Government refers to as “Bengali”, whose citizenship status remains unresolved. About 95 per cent of the displaced people in Rakhine fall into this category. These people are subject to restrictions on their freedom of movement, limiting their access to livelihoods, health care, food, education and other basic services. For the displaced people, this has resulted in a near total reliance on humanitarian assistance to meet their basic needs.

The findings of WFP’s latest post distribution monitoring report indicates that a significant proportion of the target beneficiaries in Rakhine State, despite receiving monthly food distributions, are still experiencing difficulties to cover their basic food needs. Vulnerable groups such as female/child-headed households, widows, elderly, children and the disabled are at particular risk of abuse and exploitation. Limited access to agricultural land and high levels of debt has increased food insecurity across Rakhine State.

In the northern part of Rakhine State, where humanitarian needs are intertwined with longer term development needs, a number of UN agencies and NGOs work closely with the authorities to support vulnerable communities that continue to co-exist in a fragile environment. A lack of citizenship combined with locally imposed restrictive and discriminatory policies and practices increases their vulnerabilities. Inadequate health, water, sanitation and education services add to these vulnerabilities. Most of the population is landless and dependent on day labour, fishing, or subsistence farming on leased land. Poverty and recurrent natural disasters exacerbate food and nutrition insecurity and contribute to social instability. Families are often forced to take on additional debt, further marginalizing household security.

According to UNHCR, IDPs and other vulnerable people affected by the overall situation in the central and northern parts of Rakhine State are increasingly opting for risky solutions such as unsafe and illegal maritime journeys in an attempt to reach other countries in the region to seek protection. Whereas this has been a phenomenon for many years, the number of departures has significantly increased over the past two years and the profiles of people leaving have changed from single males to families including babies and the elderly. In an attempt to address the unresolved citizenship issues in Rakhine, in 2014 the Government launched a pilot citizenship verification process in Myebon Township and it has announced that it will be extending the verification process throughout the State as part of the implementation of its Rakhine State Action Plan.

⁹ Rakhine State data source: CCCM Cluster Analysis Report, November 2014

(<https://www.sheltercluster.org/Asia/Myanmar/RakhineAndKachin/Pages/Rakhine-DataAnalysis.aspx>). Data available for two camps in Pauktaw Township and 11 camps in Sittwe Township;

Kachin/Shan (N) data source: CCCM Cluster Camp Profile, June 2014. Data available for Bhamo, 10 camps, Chipwi, five camps, Hpakant, 20 camps, Machanbaw, one camp, Mansi, 9 camps, Mogaung, three camps, Mohnyin, two camps, Momauk, 15 camps, Myitkyina, 25 camps, Puta-O, one camp, Shwegu, two camps, Waingmaw, 22 camps for Kachin; Kutkai, seven camps, Manton, one camp, Muse, two camps, Namhkan, three camps, Namtu, one camp.

In addition to the displaced, there are around 100,000 people living in rural areas who have been directly affected by the violence that erupted in 2012. Muslim communities in these areas continue to face severe restrictions on their movements and have limited access to livelihood opportunities. Rakhine communities are also affected by the ongoing inter-communal tensions. There is less trading between the two communities and the overall economy is much less vibrant than it previously was. Conditions in the IDP camps vary, with some of the more remote camps being much worse than others. Overcrowding in the camps is a problem, with people living in small rooms and cramped conditions in long-houses. During the rainy season conditions are particularly bad in some of the camps where there are inadequate drainage systems. The accommodation units (barrack-style buildings known as “long-houses”) were designed and constructed to be temporary. These have now been subjected to two rainy seasons and require significant care and maintenance to ensure minimum shelter standards are maintained.

Many of the IDP camps are still in areas prone to flooding and exposed to tropical storms and tidal surges. Some of them are permanently flooded, due to ground water exfiltration, making the sites environmentally unsafe, despite the best efforts of service providers. The situation is compounded by poor hygiene practices, including open defecation, which pose serious health risks to the camp population. Water quality remains a concern as there is a general lack of local capacity to build protected water points. Water scarcity is an issue in some areas during the dry season, leaving over 16,000 people at risk each year. A lack of previous technical investment to provide durable sources of drinking water, combined with increased inter-communal tensions, poses a situation where emergency water supply is needed every year.

Access to and provision of health care services remains limited due to restrictions on health care providers as well as an insufficient number of trained health workers. The majority of the IDPs and rural populations in northern areas of Rakhine State rely on essential health facilities provided by the Ministry of Health and partners. The township hospitals and routine health facilities remain inaccessible to Muslims (including IDPs) in the central and northern part of Rakhine and healthcare provision is severely constrained as a result of threats and intimidation directed at both health care providers and patients by members of the Rakhine community.

This situation continues to compromise the ability of people to gain access to immediate life-saving services and poses serious difficulties in the provision of essential health care, especially for implementation of a functional referral system. There is only one hospital in Sittwe that receives Muslim referral patients from IDP camps. The disruption of a functional referral pathway has increased the vulnerability of women and girls who are survivors of gender-based violence. With limited access to medical services, the risks of complications, unwanted pregnancies or HIV infection rise exponentially. While some improvements have been made in providing maternal care with deployment of UNFPA/MNMA midwives and doctors to provide Reproductive Health Care to IDPs, Sexual and Reproductive Health (including Emergency and Comprehensive Obstetric Care) is still limited and challenging. Access to routine immunisations in Rakhine State was interrupted for over a year until they resumed at the end of 2013 with support from WHO and the health cluster.

Nutrition surveys conducted by Save the Children International (SCI) in Sittwe in December 2013 indicated high Global Acute Malnutrition (GAM) rates of around 10 per cent in camps. A similar survey in IDP camps in Pauktaw Township also showed GAM rates of over 16 per cent and a Severe Acute Malnutrition (SAM) rate of 1.8 per cent, which are around the critical emergency threshold. Furthermore, nutrition surveys conducted by Action Contre la Faim (ACF) in November and December 2013 in northern part of Rakhine showed alarming GAM rates. In Buthidaung and Maungdaw Townships, the GAM prevalence was recorded at 21.4 per cent and 20 per cent respectively. Likewise, SAM prevalence was recorded at 3.7 per cent and 3 per cent respectively. A total of 27,734 GAM and 4,405 SAM children were found to have suffered from acute malnutrition. This is well above the WHO emergency threshold of 15 per cent for GAM and 2 per cent for SAM.

The 2014 Child Protection Knowledge, Attitude and Practices Study (KAP) revealed that nearly 25 per cent of adults in Sittwe were aware of children having sex for money. In addition, 40 per cent of adults stated that migration of children took place with little awareness on the risks involved. For adolescents in Rakhine State, the situation is especially dire with virtually non-existent access to post-primary education or livelihood opportunities.

According to a rapid protection assessment conducted in selected camps in April 2014, as many as 75 per cent of the groups reported that the overall situation was unsafe for women and girls in particular due to several

contributing factors including overcrowded shelters with men and women sharing the same space, harassment, and fear of sexual violence near latrines and water points at night and when collecting firewood in far isolated areas.

Low levels of education remain one of the contributory root causes and drivers of inter-communal violence in Rakhine State. As of November 2014, IDPs remain dependent on in-camp education services which are still insufficient in terms of coverage and quality (only 70 per cent of primary school-aged children in IDP camps have access to basic education delivered by inadequately-trained volunteer teachers). The situation for post-primary education is more critical with only 8 per cent of adolescents in IDP camps having access to basic non-formal education (literacy and, in some cases, life-skills) and access to the university remains blocked. These issues are compromising education's role as a protective agent (physically, psychologically and cognitively) which offers hope, as well as a force for containing further conflict and potential radicalization.

Kachin and northern Shan states

An estimated 99,000 people in Kachin and northern Shan states remain displaced as a result of the armed conflict that re-started in 2011. While many of these people are living in camps that are being well managed by national NGOs, the majority continue to live in crowded conditions in temporary accommodation that was not designed to house people for a protracted period of time. Most of the displaced face serious difficulties in restoring their livelihoods and reducing dependency on aid. Pursuing certain livelihoods has protection implications, for example cultivation of land located in high-risk areas. Prolonged displacement has also put a strain not only on the displaced but also on host communities who have exhausted their resources and who also therefore require a certain level of assistance. It is estimated that approximately 20,000 people are hosting IDPs across Kachin and northern Shan states.

Of the total of 99,070 IDPs, over 50 per cent are living in areas beyond Government control, where access for international organizations is improving, but remains limited. Since September 2013, international humanitarian organizations have had more regular access to areas beyond Government control through an increased number of cross-line missions. Between January and September 2014, over 20 missions have delivered assistance to tens of thousands of people in hard-to-reach areas. These missions supplement assistance delivered regularly by local organizations, but assessments indicate significant gaps in basic assistance and services. More consistent and flexible access for humanitarian organizations is required to ensure adequate provision of assistance to the most vulnerable.

The Government has started planning for small projects to provide durable solutions to a limited number of IDPs in Kachin. In May 2014, over 113 households were resettled to an area outside of Myitkyina, as well as Lwedgel. More small-scale spontaneous or organised resettlement and return initiatives are to be expected over the course of 2015. The international community is engaging with the Government and other local actors to ensure that standards are met in advance of such initiatives and that movements are conducted in accordance with the Guiding Principles on Internal Displacement.

In Kachin and northern Shan states, displaced people are in need of reliable information about the peace process and timelines for their return or resettlement. Currently there is no systematic mechanism for communicating with affected communities on this and responding to their questions.

While there are needs in all sectors, shelter is a particular concern. Most of the existing IDP shelters were provided in 2011 and no longer provide sufficient protection from rains and wind. If displacement is to be prolonged further, there will be a need to step up activities to restore livelihoods and reduce aid dependency in camps, as well as activities to build capacities that will support communities when they return or resettle elsewhere. While most camps have primary health care services, assessments indicate generally low satisfaction with health services due to inadequate drugs and human resources as well as access constraints which pose considerable challenges to establish functional referral systems. Health risks associated with poor hygiene practices and overflowing of latrine pits are present in most IDP camps. Prolonged use of the existing water and sanitation facilities has reduced the quality and coverage of these services. Seasonal diarrhoea outbreaks remain a concern in IDP locations, especially among children under 5 years old. Due to access constraints, WASH knowledge sharing/awareness

raising remains a major challenge, especially in areas beyond Government control. The weakness of supplied water quality monitoring combined with the poor design of some water facilities and the necessity to rationalize hygiene promotions activities also contribute to increase a risk of exposing to water borne disease hazards.

Pregnant and lactating women, as well as children under five have faced a serious deterioration in their nutrition status, in particular due to irregular access to markets and low diversity of nutritional food products. The Standardized Monitoring and Assessment of Relief and Transitions (SMART) survey results in early 2014 indicated low rates of acute malnutrition (wasting) among children aged 6-59 months in IDP camps both within and beyond Government control (GAM 1.9 per cent and 2.9 per cent respectively). However, the prevalence of chronic malnutrition (stunting) is very high among children aged 6-59 months in both areas (global stunting between 44.5 and 47.6 per cent). This is above the WHO emergency threshold (40 per cent).

The high number of displaced children requiring pre-school, primary and secondary education, has put pressure on the existing facilities in areas both within and beyond Government control, despite the establishment of additional temporary learning spaces (TLS) and schools in IDP camps. The additional costs related to ensuring a minimum quality of education (education supplies and additional tuition fees) are prohibitive for many IDP families in both areas. The expansion of boarding schools and houses helps overcome some of the challenges to post-primary education in some areas, but also brings some protection concerns. Despite these, post-primary education opportunities, including for non-displaced adolescents, remain scarce, representing a failure to provide protective alternatives to the many risky activities present in these conflict areas.

There are many protection concerns related to the on-going conflict and protracted displacement, including risks associated with human trafficking, labour exploitation, sexual and gender based violence, rape and landmine contamination. The lack of services means that cases emerge only during assessments and focus group discussions. Other protection concerns related to children affected by armed conflict in Kachin and northern Shan states remain pressing, including drug use. In addition, grave violations against children during armed conflict continue to be reported such as sexual violence and occupation of schools. The prevalence of gender-based violence during and post conflict in Kachin and northern Shan states has been observed, including forced marriage through trafficking, domestic partner violence, rape and marital rape.

South-eastern Myanmar

For the first time in decades, people in conflict-affected areas of the south-eastern region are experiencing an improved protection environment including declines in forced labour, recruitment into armed groups, extortion and illegal taxation. Cessation of hostilities agreements has provided opportunities for further dialogue and negotiations with the Government. Since December 2010, The Border Consortium (TBC) has reported limited new displacement and significant IDP returns. In August 2014 UNHCR completed an assessment of returns that highlighted returns of IDPs and refugees across the south-eastern region. Increased freedom of movement has enabled many IDPs to access their agricultural land or gardens to expand their livelihood opportunities as well as to re-establish their lives back in their home villages. Despite these positive developments, there were some skirmishes and territorial clashes between factions of ethnic armed groups and the army, resulting in new displacement in some locations in 2014.

In general, although humanitarian conditions have been improving, access to clean water remains an urgent need, with continuing high levels of poverty and underdevelopment. Standards of sanitation are also low, with inadequate household latrines and open defecation practices. Health care services operate with limited skilled personnel as well as inadequate facilities, basic equipment and supplies. Services for life-saving reproductive health, malaria prevention and control, and HIV are limited or do not exist. Education is also substantially underdeveloped, with sub-standard services, a shortage of teachers and inadequate numbers of primary schools. School attendance is also hampered by education costs, distance, insecurity and language barriers. Most children have limited opportunities to continue education beyond primary school. A number of protection concerns also remain, including landmine contamination and land-related issues.

INFORMATION GAPS

HIGHLIGHTS

The availability of information about humanitarian needs varies across Myanmar. Data for IDP camps in Rakhine and Kachin states tends to be the best available as a result of dedicated camp-management structures in place at these locations. Information on displacement outside of camp settings, isolated villages, remote border areas and the situation in the south-eastern region remains limited. Data for hazard risks are incomplete and out-dated across the country as the current hazard profile has not been updated since 2009, and no multi-hazard risk mappings have been done at the state/region or township level. The dearth of reliable data increases a risk that analysis and subsequent planning might underestimate or overlook the actual humanitarian needs and undermine preparedness efforts.

While gathering of humanitarian data and reporting has improved somewhat, especially regarding vulnerable populations figures, many technical and operational challenges remain. There is no sex and age disaggregated data for 35 per cent of the displaced people in Rakhine or Kachin, nor for any of the displaced people in south-eastern Myanmar. While the global averages suggest that 10/15 per cent of the population has a disability in all areas, data specifically on children and adults with disabilities among the displaced are not available.

For non-displaced crisis-affected people, there is sex and age disaggregated data for 100 per cent of the food insecure people. There is very little information about the host families in Kachin State and surrounding/host communities or other affected people in Rakhine State, each of which have specific needs due to particular burdens or restrictions that they are currently faced with.

The Government's draft "Rakhine Action Plan" refers to a set of activities – including citizenship verification and resettlement – intended to have a significant impact on the overall humanitarian situation in Rakhine State. However, the plan has not yet been finalized and timelines for implementation of the plan remain uncertain. Humanitarian organizations will continue to monitor the situation closely and adapt their plans as more information becomes available. Meanwhile, in Kachin and northern Shan states, more detailed information about the situation of people living in areas beyond Government control is needed to improve the current response as well as to adequately plan for durable solutions. This would not only include personal and community needs, but also contextual information on availability of services, livelihoods opportunities, and the presence of landmines and explosive remnants of war.

The Government has made clear that it would like to see significant progress in achieving durable solutions for displaced people in Kachin, northern Shan and Rakhine states in 2015. While humanitarian actors are prepared to support this process in line with the Guiding Principles on Internal Displacement, a regular engagement with the Government on their plans is needed to ensure complementary approaches.

In order to improve communications with communities, efforts have been made to establish feedback mechanisms in IDP camps. However, challenges remain in operationalizing these services, particularly in camps that do not have dedicated INGOs responsible for camp coordination and camp management.

ANNEX: OPERATIONAL ENVIRONMENT

HIGHLIGHTS

With continued inter-communal tensions and unresolved citizenship issues that are deeply politicized in Rakhine State, the Government and national institutions have not been able to respond to the needs of all displaced and vulnerable people, and as a result the United Nations and international organizations continue to play a vital role. However, with competing humanitarian needs elsewhere in the world, humanitarian operations have remained under-funded and the attacks on the premises of aid organizations in Rakhine State in March 2014 resulted in additional constraints on the abilities of humanitarian organizations to meet the needs of affected people. Humanitarian organizations also continue to face many access constraints as a result of insecurity, armed conflict, bureaucratic procedures as well as some community resistance in the case of Rakhine.

National and local capacity and response

The first Vice President leads the National Emergency Preparedness and Management Central Committee and the Rakhine State Peace, Stability and Development Implementation Central Committee. The second Vice President leads the Central Committees on Emergency Preparedness and Response, including the National Natural Disaster Preparedness Central Committee and its Work Committee. In addition to these committees, the Government recently established two national-level bodies to support early warning and response for conflict situations and for natural disasters: the Emergency Crisis Centre under the Ministry of Home Affairs, and the Emergency Operations Centre under the Ministry of Social Welfare, Relief and Resettlement.

In Kachin State, a Joint Strategic Team (JST) was set up by nine local NGOs to strengthen coordination. They developed a joint strategy for the humanitarian response in Kachin and northern Shan states as well as a joint programming strategy for the safe and dignified return and resettlement of IDPs. The JST is financially and technically supported by a number of INGOs involved with Kachin State.

As of October 2014, the activities of over 60 national NGOs are being recorded in the 3Ws (Who, What, Where) database managed by the Myanmar Information Management Unit (MIMU). The majority of the activities of these national NGOs are in the areas of health (24 organizations), education (18), protection (17), food (16), livelihoods (16) and agriculture (12).

International capacity and response

Eighty-two international non-governmental organizations (INGOs) and 14 United Nations agencies reported activities through the MIMU 3Ws database. Their operational presence across the country (for either humanitarian or development work) are listed in the following table:

Number of UN and INGO humanitarian and development projects by State/Region and sector as of November 2014																			
State/Region	Agriculture	CCCM	Coordination	Disaster Risk Reduction	Education	Environment	Food	Governance	Health	Mine Action	Non-Agricultural Livelihoods/Infrastructure	Non-Food Items	Nutrition	Peace Building/Conflict Prevention	Private Sector Development	Protection	Shelter	WASH	Total Organizations
Ayeyarwady	13	0	2	11	9	2	0	5	21	0	11	0	5	1	0	12	1	2	46
Bago (East)	4	0	1	2	4	0	1	2	9	1	3	0	1	2	0	5	0	1	22
Bago (West)	1	0	1	1	3	0	0	1	9	0	2	0	1	1	0	3	0	0	14
Chin	7	0	2	3	5	1	2	5	9	0	6	0	1	2	0	6	0	1	26
Kachin	6	2	3	1	5	3	7	3	13	1	6	2	3	2	0	14	4	6	40
Kayah	4	0	1	0	7	0	0	5	12	5	6	1	2	1	0	10	0	3	28
Kayin	3	0	1	4	9	0	2	7	16	2	6	0	1	3	0	9	0	7	32
Magway	8	0	1	2	10	1	6	7	16	0	10	0	3	0	0	9	1	4	32
Mandalay	6	0	2	2	7	2	2	7	21	0	11	0	1	2	0	10	0	3	39
Mon	6	0	1	4	6	0	3	4	15	0	7	0	2	2	0	11	0	4	30
Naypyitaw	1	0	0	0	3	0	0	1	7	0	0	0	1	1	0	4	0	0	14
Rakhine	9	3	2	8	11	2	4	4	12	0	7	1	8	2	1	12	2	10	36
Sagaing	8	0	1	2	7	2	0	5	13	0	7	0	2	0	0	7	0	2	32
Shan (East)	2	0	1	1	3	1	2	1	6	0	1	0	0	1	0	4	0	0	11
Shan (North)	8	1	2	3	5	2	7	4	18	0	8	1	6	1	0	9	2	6	38
Shan (South)	4	0	2	0	4	4	2	4	9	0	4	0	1	2	1	8	0	0	28
Tanintharyi	1	0	1	1	6	4	0	5	11	0	2	0	1	2	0	9	1	4	28
Yangon	7	1	6	5	11	0	4	6	21	0	15	1	5	1	0	18	2	3	54

Humanitarian access

In Rakhine State, humanitarian organizations have access to all the main IDP camps and sites, although in practice they often face difficulties as a result of inter-communal tensions and obstacles put up by local communities. International humanitarian staff are required to get travel authorizations in order to reach these places. Access to northern part of Rakhine State is more restricted, with only a small number of UN agencies and INGOs working in this area. Moreover, population movement is restricted in this area due to the presence of large numbers of checkpoints. Medecins Sans Frontieres (MSF) suspended all its activities in Rakhine in 2014 following instructions from the Union Government. The Union Government and State Government have both announced that MSF may gradually return and resume its work, but in practice this is taking time as a result of resistance from the local Rakhine community. The international NGO Malteser International also suspended its work in the Sittwe area in 2014 as a result of pressure from the local community but is able to operate in all other areas of Rakhine State.

Following the March 2014 attacks by members of the local Rakhine community on 33 offices and premises of aid workers, UN agencies and INGOs were instructed by Rakhine State authorities to limit their presence in Sittwe town to the "Southern Quarter", which is a designated area where the Government commits to provide additional security for UN and INGOs offices/premises. This has constrained humanitarian operations as there are not enough available suitable buildings in this area to meet the needs of all UN agencies and INGOs currently working in the area. They continue to advocate for this area to be widened. This will also be needed if development actors are to significantly scale up their activities in Rakhine State, as requested by the Government.

In Kachin and northern Shan, humanitarian staff have access to most of the main IDP camps and settlements, although they face severe restrictions in areas of insecurity and on-going armed conflict. The Government authorizes movement of UN-led convoys to areas beyond Government control, but these are tightly controlled. Local NGOs continue to play a leading role in the response in hard-to-reach areas to ensure that life-saving needs of the most vulnerable people are covered. While there have been significant improvements in 2014 with regular cross-line missions, the UN and its partners continue to advocate with the Government for more sustained access in order to be able to ensure vulnerable people get the quality of care, services and assistance they need.

Security constraints

Armed conflict continues in parts of Kachin and northern Shan states, leading to occasional additional restrictions on movements of humanitarian staff. The presence of landmines and explosive remnants of war also remains a serious constraint to the ability of humanitarian staff to move freely to reach affected people. In 2014 there were a number of clashes between the army and the ethnic armed groups, particularly in northern Shan State. In Rakhine State, threats to humanitarian agencies, often issued on social media sites, are a cause of significant concern. National staff of international organizations also often receive threats from local community and social networks.