

<p>reported that neither have they medicines nor medical equipment to treat diseases.          FOOD: WFP/SCI distributed food rations to the IDPs.          EDUCATION: SCI is running the elementary school in the camp. IDPs were informed that their children will have to attend the same class as last school year due to the lack of examinations.          NON-FOOD ITEM: it was reported that no more firewood would be distributed in this camp.          PROTECTION: Women and girls do not feel comfortable taking showers in the shower rooms as these have no doors and are being used as latrines by some IDPs. As a result, IDPs are taking showers inside their shelters and this is causing stagnant water underneath and deterioration of the shelters. Moreover, the IDPs do not have proper access to health care as there is a lack of a well-equipped health center inside the IDP camp or nearby. The bad conditions of the shelters in the camp are a serious concern for the safety of children and other persons with specific needs such as elderly, disabled and pregnant women.          NUTRITION: Regular activities by SCI on-going.          CHILD PROTECTION: Regular activities by SCI on-going.          LIVELIHOOD: No updates</p> <ul style="list-style-type: none"> <li>• <b>Follow up on former issues</b></li> </ul> <p>The DRC Protection Team followed up on health, shelter, and WASH but unfortunately there has been no major improvement in the situation.</p>	
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## 10. Ah Nauk Ywe IDP Camp

Population: approx. 3,900 IDPs

<p><b>Highlights</b></p> <ul style="list-style-type: none"> <li>- 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.</li> <li>- 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.</li> <li>- 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.</li> </ul> <ul style="list-style-type: none"> <li>• <b>Other update on activities and issues</b></li> </ul> <p>SECURITY:          CAMP MANAGEMENT: no updates.          SHELTER: Households who arrived in the camp some months ago are still in need of shelters as they are staying in the kitchen facility in the camp or with relatives in their shelters. It was also reported that some shelters were repaired.          WASH: The IDPs reported the need for hygiene and sanitation activities in the camp.</p>	<ul style="list-style-type: none"> <li>• <b>Follow up, challenges and advocacy</b></li> </ul> <ul style="list-style-type: none"> <li>- DRC Protection Team will follow up with health actors on the provision of health services in the camp.</li> <li>- DRC Protection Team continues to follow up and advocate for the IDPs who still have not received any food rations in the camp. This matter has been referred to WFP and the PWG in various occasions.</li> <li>- DRC Protection has referred to the PWG the situation of IDPs without shelters in the camp. The Protection Team is following closely on the situation of these families and any possible protection</li> </ul>
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<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"> <li>• <b>Follow up on former issues</b></li> </ul> <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"> <li>- 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.</li> </ul>
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## 11. Kyein Ni Pyin IDP Camp

Population: approx. 4,500 IDPs