

# Myanmar

## Consolidated Emergency Report 2019



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Prepared by:  
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## ABBREVIATIONS AND ACRONYMS

<b>ACF</b>	Action Contre Le Faim
<b>BHS</b>	Basic Health Staff
<b>CAAC</b>	Children and Armed Conflict
<b>CBO</b>	Community Based Organisation
<b>CCC</b>	Core Commitments for Children in Humanitarian Action
<b>CCCM</b>	Camp Coordination Camp Management
<b>CERF</b>	Central Emergency Response Fund
<b>CMC</b>	Camp Management Committee
<b>CPG</b>	Child Protection Groups
<b>CPiE</b>	Child Protection in Emergencies
<b>CPSS</b>	Child Protection Sub-Sector
<b>CSO</b>	Civil Society Organisation
<b>CTFMR</b>	Country Task Force on Monitoring and Reporting
<b>cVDPV</b>	Circulating Vaccine Derived Poliovirus
<b>DOE</b>	Department of Education
<b>DPH</b>	Department of Public Health
<b>DRD</b>	Department of Rural Development
<b>DRR</b>	Disaster Risk Reduction
<b>DSW</b>	Department of Social Welfare
<b>EAO</b>	Ethnic Armed Organisation
<b>ECD</b>	Early Childhood Development
<b>EHO</b>	Ethnic Health Organisation
<b>EiE</b>	Education in Emergencies
<b>EMRE</b>	Emergency Mine Risk Education
<b>ERW</b>	Explosive Remnants of War
<b>GAD</b>	General Administration Department
<b>GAM</b>	Global Acute Malnutrition
<b>GBV</b>	Gender-Based Violence
<b>GCA</b>	Government-Controlled Area
<b>GOM</b>	Government of Myanmar
<b>HAC</b>	Humanitarian Action for Children
<b>HPA</b>	Health Poverty Action
<b>HRP</b>	Humanitarian Response Plan
<b>HSS</b>	Health Systems Strengthening
<b>IDP</b>	Internally Displaced Persons
<b>IMAM</b>	Integrated Management of Acute Malnutrition
<b>INGO</b>	International Non-Governmental Organisation
<b>IYCF</b>	Infant and Young Child Feeding
<b>JAP</b>	Joint Action Plan
<b>KAP</b>	Knowledge, Attitude and Practice
<b>KBC</b>	Kachin Baptist Convention

<b>KMSS</b>	Karuna Myanmar Social Services
<b>LNGO</b>	Local Non-Governmental Organisation
<b>MAM</b>	Moderate Acute Malnutrition
<b>MAPDRR</b>	Myanmar Action Plan for Disaster Risk Reduction
<b>MCH</b>	Maternal and Child Health
<b>MHAA</b>	Myanmar Health Assistants Association
<b>MHM</b>	Menstrual Hygiene Management
<b>MMN</b>	Multi-Micro Nutrients
<b>MNCH</b>	Maternal, Newborn and Child Health
<b>MOH</b>	Ministry of Health
<b>MRCS</b>	Myanmar Red Cross Society
<b>MRE</b>	Mine Risk Education
<b>MRM</b>	Monitoring and Reporting Mechanism
<b>MRWG</b>	Mine Risk Working Group
<b>NGCA</b>	Non-Government-Controlled Area
<b>NGO</b>	National Non-Governmental Organisation
<b>NLD</b>	National League for Democracy
<b>NRC</b>	Norwegian Refugee Council
<b>ORS</b>	Oral Rehydration Salts
<b>PCA</b>	Programme Cooperation Agreement
<b>PLW</b>	Pregnant and Lactating Women
<b>PTA</b>	Parent-Teachers Association
<b>RRD</b>	Relief and Resettlement Department
<b>RUTF</b>	Ready-to-Eat Therapeutic Foods
<b>SAM</b>	Severe Acute Malnutrition
<b>SCI</b>	Save the Children
<b>SGBV</b>	Sexual Gender Based Violence
<b>SHD</b>	State Health Department
<b>SRP</b>	Strategic Response Plan
<b>SSFA</b>	Small Scale Funding Agreement
<b>TLS</b>	Temporary Learning Space
<b>UNDP</b>	United Nations Development Programme
<b>UNICEF</b>	United Nations Children's Fund
<b>UNV</b>	United Nations Volunteers
<b>UXO</b>	Unexploded Ordinance
<b>VDPV</b>	Vaccine Derived Poliovirus
<b>WASH</b>	Water, Sanitation and Hygiene
<b>WFP</b>	World Food Programme
<b>WHO</b>	World Health Organization

## EXECUTIVE SUMMARY

In 2018, UNICEF strived to meet the humanitarian needs of crisis-affected and displaced children, women and men across parts of Rakhine, Kachin and Shan States. UNICEF coordinated with partners to provide critical life-saving and life-sustaining services in child protection, education, health, nutrition and water, sanitation and hygiene (WASH). Populations in several areas of Myanmar continued to face conflict and displacement throughout 2018. The 2018 Humanitarian Needs Overview identified over 860,000 people in need of humanitarian assistance in Rakhine, Kachin and Shan States with an average of 36 percent of those in need being children. Though conflict in Kachin subsided during the year, in both Rakhine and Shan states additional displacement due to either fighting between the Myanmar Military or Tatmadaw and armed ethnic organizations, or between rival armed ethnic organizations, led to an increase in internal displacement late in the year. In addition to conflict-related displacement, floods in the south-eastern area of the country in July and August initiated a multi-sector response through the government, United Nations agencies, and national and international organizations and civil society groups.

In 2018, of 43 humanitarian indicators, UNICEF achieved over 100 percent of the target for 10 indicators but reached fewer than 50 percent of the target for 18 indicators. Over-achievement was due to cost efficiencies, increased demand for services, and additional partnerships to reach those in need. Under-achievement was due to lack of funding of the HAC—only 48 percent received including carryover and flood response activities—as well as restricted access by the government, and restricted access in some areas due to the volatile security situation.

Flexible funding provided through core resources and several humanitarian donors enabled UNICEF to prioritize underfunded activities such as cluster coordination and child protection activities, as well as underfunded areas such as Kachin and Shan States. UNICEF also worked to strengthen linkages between our humanitarian and development programmes by both providing humanitarian services in areas where needed, while strengthening the capacity of the government of Myanmar to provide appropriate services to all children and their caregivers.



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## HUMANITARIAN CONTEXT

Humanitarian crisis caused by conflict occur mainly in three locations of Myanmar: Rakhine, Kachin and Shan States. There are also smaller IDP populations of concern in Chin State and Kayah State. And the country remains extremely vulnerable to a number of natural hazards including flooding, cyclones, severe storms and earthquakes.

### Rakhine State

In the northern townships of Rakhine State—Maungdaw, Buthidaung and Rathedaung townships—tensions remained high throughout 2018 with fear and concern of renewed violence a pervasive sentiment among all people. Despite a relative improvement in the security situation as compared to 2017, in 2018 Rohingya communities throughout the state lacked freedom of movement, which when coupled with the lack of access by humanitarian actors, resulted in extremely limited access to services. Despite the complicated administrative procedures for travel authorizations, UNICEF and our partner agencies increased access throughout central Rakhine and to urban areas of Maungdaw District (Maungdaw and Buthidaung townships), however access to rural areas remained limited. Conversations with community members by UNICEF and other humanitarian actors show that all populations—regardless of ethnicity—are living precariously with limited access to livelihoods and services.

In central Rakhine, the conditions in the camps for 128,000 IDPs<sup>1</sup> changed very little in 2018 and remain overcrowded and under-resourced. The camps, now in existence for six years, are extremely vulnerable to the harsh weather and flooding, and require regular maintenance to sustain the most basic level. The government held two meetings in 2018 focused on a new national strategy for camp closure, however this process is still under consultation. The actions taken by the government thus far—including the closure of three Rohingya IDP camps—involve the construction of single family shelters in or adjacent to current IDP camps and do not address any of the underlying issues of security, freedom of movement, or access to services. As a result, IDPs are still wholly reliant on humanitarian agencies for survival. Protection incidents in the camps appear to be increasing and children are at increasing risk of being neglected or abused. The long-term psychosocial damage caused by living in these camp conditions is a grave concern. In 2018, an estimated 15,000 people left Rakhine State<sup>2</sup>—some for Bangladesh from Maungdaw District and others from central Rakhine by boat headed to Malaysia or other locations.

In late 2018, the situation in Rakhine State was further complicated by an intensification of the conflict between the Myanmar Army and the Arakan Army—ethnic Rakhine nationals who state that they are fighting for the self-determination of Arakan or Rakhine people while promoting their national identity and heritage.

### Kachin and Shan States

Conflict in Kachin and northern Shan States continue to put civilians in harm's way. The humanitarian situation in Kachin and northern Shan States experienced an intensification of fighting throughout most of 2018 including the use of heavy weapons and aerial bombardments. Over 43,000 people were temporarily displaced in 33 locations in Kachin and Northern Shan, triple the number of people displaced during 2017<sup>3</sup>. The fighting in Kachin resulted in an additional displacement of 14,000 people in 8 townships as well as the Laiza area on the Chinese border, bringing to 97,000 the total number of people displaced in Kachin at 140 IDP camps and camp-like settings. Over 39% of the displaced people are in areas that are beyond government control. Of the displaced and in need, children make up

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<sup>1</sup> 2019 Humanitarian Needs Overview, December 2018.

<sup>2</sup> UNHCR Population Factsheet, Bangladesh, January 15, 2019.

<sup>3</sup> OCHA Kachin and northern Shan Humanitarian Access Tracking, January 2019

around 46 percent of this population<sup>4</sup>. Although children in the IDP camps do have access to local schools, Kachin has the highest rate of school dropouts in the country. Children affected by the conflict are exposed to severe protection risks, including trafficking, separation from primary caregivers, early/forced marriages, and negative coping mechanisms, including drug abuse. Limited access by international staff and agencies—particularly to non-government-controlled areas—makes provision of adequate services, particularly protection, virtually impossible.

Children are also exposed to the risks of landmines. In 2018, UNICEF and partners documented 264 casualties (38 percent were women and children) due to landmines and unexploded ordnance (UXO) in the country. Compared to the previous years, incidents in Kachin are on rise. By November, the number of casualties (113 including 12 deaths) in Kachin reached 149 percent of the 2017 caseload. Currently, there is no demining taking place in Myanmar. Similar challenges are seen in northern Shan and Kayah States, with over 8,800 and 10,300 people remaining displaced respectively due to lack of security or potential landmines and unexploded ordnance.

During 2018, an estimated 450 IDPs were resettled through government initiatives despite a survey showing that 95% of the IDPs prefer to return to their places of origin. The resettlement areas are devoid of livelihood opportunities, far from schools, health facilities or police stations which further increases their vulnerabilities.



Protection risks increase with the intensification of fighting in parts of the State with reports of people marooned in forests, villages shelled and placed under siege by armed groups and children exposed to a range of protection risks. In 2018 there was a dramatic increase in landmine incidents and casualties by 53% compared to 2017, attributable to the increased conflict especially close to villages and in fields where men, women and children rely in large part on subsistence farming.

In northern Shan State, patterns of displacement are slightly different with frequent short-term displacement with prompt return to the village once fighting subsides. The fighting—both between the Tatmadaw and the ethnic armed groups (EAGs) and between EAGs themselves—resulted in civilian casualties as well as displacement. The 2019 Humanitarian Needs Overview, issued in December 2018, highlights fighting in February and March which displaced 5,000 people, with additional displacements of 3,000 and 2,000 people in July and August respectively. While these people do return to villages and thus don't rely on humanitarian services in camps for a sustained period of time, short-term assistance in the locations of displacement—frequently monasteries or other public locations—are required and cause an increased burden on local groups who provide the most immediate response support. In late 2018, agencies reported that the scale of recurrent displacements was putting a burden on communities who—while happy to assist—are struggling to assist at the frequency and pace of clashes.

In all areas of displacement, children and their caregivers are vulnerable to similar issues:

<sup>4</sup> 2019 Humanitarian Needs Overview, December 2018.

- Child Protection: Increased risk of trafficking, sexual exploitation and abuse, landmines and unexploded ordinance, violence, conflict with the law, recruitment and use by armed groups, psychological distress, and engaging in risky behaviours such as drug use;
- Education: lack of access to quality and safe educational initiatives for all children from ages 3 through 18 including pre-primary care, primary services and post-primary care. Adolescent girls and boys in camps and conflict-areas are particularly at risk of dropping out of school or not having access to post-primary learning opportunities;
- Health: lack of appropriate medical facilities and/or access to medical facilities and routine and emergency services;
- Nutrition: risk of inappropriate infant and young child care and feeding practices resulting in stunting in many areas. In Rakhine in particular, wasting is a concern due to sustained food security issues; and
- WASH: lack of access to appropriate quantities of water of appropriate quality as well as sanitation facilities. Though water may be available through ponds or wells, contamination at point of use remains high. WASH in schools and health services remains a concern as does ensuring inclusive and accessible facilities and menstrual hygiene management in all locations.

#### Other Areas of Humanitarian Engagement

The humanitarian impacts of the less-publicised fighting in Kayin and Chin States should not be forgotten. In Chin, fighting between the Arakan Army and Government of Myanmar resulted in displacement of 384 people -. In Kayin, over 10,000 IDPs remain in camps<sup>5</sup> as a result of fighting in previous years. However, with little action to address security and increasing frustration related to the stalled peace process, it is likely that these families will remain displaced and in need of support in 2019.

In mid-2018, flooding impacted dozens of communities in the southern half of Myanmar with Bago Region and Kayin State hit particularly hard and Ayerwaddy, Magway, Sagaing, Kayah, Rakhine, Mon, and Thanintharyi States also being impacted to a lesser extent. In Bago Region, a dam spillway collapse at the end of July displaced approximately 60,000 people for several weeks. In total the flooding displaced over 220,000 people throughout the country.

#### Human Rights

In May 2018, the Office of the Special Representative of the Secretary-General for Children and Armed Conflict listed the Myanmar military for two additional grave violations against children: killing and maiming; rape and other forms of sexual violence. In September 2018, an Independent International Fact-Finding Mission (IIFFM) on Myanmar, established by the Human Rights Council, issued a report that described serious violations of human rights law as well as international humanitarian law in Rakhine, Kachin and Shan states. This included the systematic targeting of civilians, including women and children. The report concluded that many violations amount to the gravest crimes under international law. The Government of Myanmar objected to the formation of the IIFFM and does not accept the findings. UNICEF, with the Humanitarian Country Team and others, is reviewing the recommendations of the IIFFM.

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<sup>5</sup> 2019 Humanitarian Needs Overview, December 2018.



## HUMANITARIAN RESULTS

### Child Protection

2018 SUMMARY OF PROGRAMME RESULTS		UNICEF and IPs		Cluster Response	
		2018 Target	Total Results	2018 Target	Total Results
<b>CHILD PROTECTION</b>					
# people (children, women and men) with access to psychosocial support	Kachin	99,000	56,933	94,536	64,723
	Rakhine	120,450	124,920	152,786	144,879
	Shan	27,500	7,275	27,153	7,257
# children accessing appropriate case management services	Kachin	n/a	240		
	Rakhine	n/a	1,101		
	Shan	n/a	43		
# people with access to UXO information	Kachin	90,000	58,981		
	Rakhine	3,000	1,432		
	Shan	25,000	40,771		
# adolescents provided with life skills to prevent negative coping mechanisms	Kachin	2,500	1,677		
	Rakhine	15,000	10,850		
	Shan	500	61		

*Results are achieved through contributions against appeals, as well as resources from UNICEF's regular programmes where necessary.*

The 2018 Humanitarian Action for Children (HAC) targets for UNICEF's child protection work were in line with the 2018 Humanitarian Overview Needs (HNO) and Humanitarian Response Plan (HRP). These targets were determined in close consultation with the Child Protection Sub-Sector and Child Protection implementing partners at the national and state levels. The capacity of implementing partners and funding were also taken into consideration when determining the targets.

The results achieved were accomplished through partnerships with both government agencies as well as national and international NGOs. In 2018, the UNICEF Child Protection section partnered with seven INGOs, four NNGOs and 10 government ministries and departments. The implementing partners covered child protection activities in both government and non-government-controlled areas of Kachin and Shan states, and areas of both central and northern Rakhine State.

A dedicated CP in Emergencies (CPiE) team including four international Child Protection Specialists and four national Child Protection Officers provided guidance and technical support to implement the CPiE programming from the main country office in Yangon. At the field office level, UNICEF has five staff supporting CPiE programming: one international specialist based in Sittwe, Rakhine; two national officers based in Sittwe and Maungdaw; one national officer in Myitkyina, Kachin; and one national office in Taunggyi, Shan.

Through staff engagement and partnerships, UNICEF assisted children affected by emergencies through psychosocial support, life skills programmes, mine risk education (MRE), and case management services. In 2018, approximately 304,284<sup>[1]</sup> children in total benefited from CPiE humanitarian services: 189,128 children received psychosocial support, including access to child friendly spaces with inter-sectoral interventions; 12,588 adolescent girls and boys were reached with life skills programming that built key protective skills and resilience; 1,384 children, who are survivors of abuse or violence received case management services in humanitarian setting and more than 101,184 children received MRE.

<sup>[1]</sup> The total number of beneficiaries are increased compared to the UNICEF Country Office Annual Report (COAR) due to the reporting of additional MHPSS beneficiaries reported after COAR finalization.

UNICEF continued investing in strengthening community-based child protection mechanisms such as Child Protection Groups (CPGs) in emergency-affected areas to scale-up prevention activities and ensure immediate referrals of child survivors of violence, exploitation and abuse. Especially in conflict-affected areas where, and/or when, UNICEF or implementing partners' access was limited, CPGs and community-based cadres were the only functional and promising elements of child protection system that could keep child protection interventions going, however limited. In northern Rakhine State where access was severely hampered, UNICEF supported 26 CPGs who worked in conjunction with 40 incentivized volunteers.



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UNICEF organized regular capacity building activities for implementing partners on Mental Health and Psychosocial Support (MHPSS), case management, CPiE, and referral pathways. In partnership with the INGO Community and Family Service International (CFSI), 78 Child Protection workers received training in northern Rakhine State. In Kachin, 49 child protection staff from three implementing partners were trained on MHPSS, case management and CPiE. In addition, 40 camp-based volunteers working

with the NNGO Karuna Mission Social Solidarity (KMSS) received refresher training on child protection, case management and the Monitoring and Reporting Mechanism (MRM) on grave violation against children. The trained 40 camp-based volunteers conduct monthly awareness sessions on child protection, child rights and case management in 25 IDP camps. UNICEF also expanded the child protection in emergencies programme in northern Shan State in partnership with DanChurchAid and three local NGOs. These capacity building programmes allowed implementing partners and their staff to be better equipped with skills and knowledge, and be able to identify and respond to complex child protection cases.

2018 witnessed progress in the Children and Armed Conflict (CAAC) agenda, in particular for the implementation of the Joint Action Plan to end under-age recruitment. Capitalizing on the visit of the Special Representative of the Secretary General (SRSG) CAAC to Myanmar in May, UNICEF as co-chair of Country Task Force on Monitoring and Reporting (CTFMR), led a series of high-level engagements with the government, setting the common CAAC advocacy agenda, revitalizing Heads of Agency-level CTFMR meetings, introducing the UN Security Council Working Group (UNSCWG) member states briefing, and organizing regular conference calls with the Office of the SRSG-CAAC (OSRSG). UNICEF then coordinated with various international human rights monitoring platforms covering Myanmar to promote the common CAAC agenda and key messages throughout the year.

With the Tatmadaw listed for two additional grave violations against children in 2018—killing and maiming and rape and other forms of sexual violence—UNICEF has accelerated its advocacy efforts on the CAAC agenda, in particular by seeking to expand interventions to end and prevent all six grave violations. The OSRSG and the CTFMR co-chairs, upon request from the Government, provided training for the inter-ministerial Committee on the Prevention of Underage Recruitment and for Tatmadaw focal points on the six grave violations.

UNICEF continued scaling up mine risk education (MRE) activities including the roll out the MRE Mobile Application. MRE sessions were held in both camp settings in Rakhine, Kachin and Shan and in non-camp locations in Mon, Kachin, Kayah, Kayin, Rakhine, Shan and Tanintharyi. Myanmar remains one of the most mined countries in the world and landmines and explosive remnants of war continued to pose serious risks to children in Myanmar, particularly in the areas of active conflict in Shan and Kachin States. UNICEF and partners documented 276 casualties (36% were women and children), including 48 people killed, and 228 people injured. Over the last three years incidents in Kachin and Shan have increased. In 2018, 86 percent of casualties are from these two states. The increases were due both to ongoing intensified conflict as well as improved surveillance by UNICEF and the members of the Mine Risk Working Group.

The impact of the intensified armed conflict on both IDPs and host communities remained severe. Many have faced multiple deprivations triggered by multiple displacements, including crossing frontlines to find safety. They have faced multiple barriers to accessing services. Violence against children, psychosocial distress, child labour, use and recruitment of children by armed forces/armed groups, separation of children from their families and killing and maiming due to landmines and explosive remnants of war are some of the major challenges facing children and their caregivers. Access remains challenging in the conflict affected areas both in government-controlled (GCA) and non-government-controlled areas (NGCA).

Lessons Learned: Though UNICEF is supporting the ‘localization’ approach to humanitarian action, the capacity of local partners in implementing child protection programme is still weak and additional effort and investment are required to sufficiently build the capacity of partners, especially in the areas of case management. Strengthening community-based mechanisms is critical for addressing child protection concerns. This will ensure that boys and girls have access to the trained child protection professionals who are of the same ethnicity or background and speak the same language. The community-based approach is sustainable in longer-term and effective for timely identification, referral and response for child protection cases. To build capacity within Myanmar, UNICEF started new partnerships with three local NGOs in Kachin and Shan States focused on CPiE activities and also sent a team of Myanmar nationals, including government officials, to Uganda to participate in a global coaching and mentoring initiative to strengthen case management services.

Preparedness: To support preparedness capacity for CPiE, UNICEF in collaboration with CPiE working group partners and the Department of Social Welfare, trained 186 staff in emergency preparedness in partnership with the Department of Social Welfare. Additionally, UNICEF procured CPiE supplies for future potential response activities.

Funding: The CPiE programme received less than \$2.6 million of the requested \$5.8 million in 2018. Despite carrying forward funds from the previous year, the CPiE programme in total had a funding gap of 41 percent despite the increasing needs as conflict continues and spreads. Thematic funding was also used to cover CPiE staff positions in Yangon and field offices and enabled UNICEF to build strong leadership in the coordination at national and sub national levels.

#### CPiE Sub-Sector Coordination

UNICEF continues to lead the Child Protection Sub-Sector (CPSS) at the national level and sub-national levels in Rakhine and Kachin States. In 2018, the CPSS focused on capacity building and strengthening the overall sector approaches to MHPSS, case management and adolescent programming. MHPSS programming focused on building facilitator’s skills in implementation of PSS programmes as well as building the bonds of caregivers with their children. UNICEF, as the CPSS lead, progressively applied the “localization” approach wherever appropriate, in order to expand the reach of CPiE partners to

remote and hard-to-access areas as well as to contribute to the sustainability of CPiE response capabilities.

The 2019 HNO and HRP documents were developed with comprehensive CPiE elements, within both the chapeau and dedicated sectoral pages. It has also increased gender and age-specific considerations and focus on caregivers' needs and wellbeing. Cooperation between CP and the Education Cluster and the gender-based violence sub-sector was also strengthened through information sharing and meetings.

UNICEF supported and strengthened one Union-level and four state-level Mine Risk Working Groups involving more than 10 ministries/departments, over 40 national and international organizations and additional ethnic armed groups. This has allowed better coordination among mine action actors and increased MRE and victim assistance coverage. In 2018, strong advocacy efforts have been undertaken to promote the Mine Ban Treaty. UNICEF organized a high-level event to celebrate International Mine Action Day on 4<sup>th</sup> April 2018 with the presence of Government representatives, Ambassadors and diplomats. UNICEF also facilitated the participation of Myanmar in the 17<sup>th</sup> meeting of the States Parties to the Mine Ban Convention in Geneva. The Mine Action Sector is also drafting key advocacy message to advance the mine action agenda in Myanmar.

## Education

2018 SUMMARY OF PROGRAMME RESULTS		UNICEF and IPs		Cluster Response	
		2018 Target	Total Results	2018 Target	Total Results
<b>EDUCATION</b>					
# of children 3-10 years accessing pre- primary or primary learning opportunities.	Kachin	7,000	3,695	16,000	4,242
	Rakhine	30,000	20,445	41,750	55,481
	Shan	-	-	3,100	1,252
# of adolescents 11-17 years old accessing non-formal education opportunities	Kachin	450	1,281	12,070	3,083
	Rakhine	5,000	1,051	16,700	13,396
	Shan	-	-	2,850	1,712
# of children aged 3-17 years who receive emergency education and recreational materials	Kachin	7,200	6,900		
	Rakhine	20,000	69,990		
	Shan	2,700	1,112		

*Results are achieved through contributions against appeals, as well as resources from UNICEF's regular programmes where necessary.*

UNICEF determined the HAC targets for 2018 using the HNO/HRP information as a starting point and then evaluated partner capacity in the focus areas; funding available and the feasibility of delivering the planned services considering access, security issues and UNICEF's own capacity to monitor and manage the potential partnerships. The populations targeted for Education in Emergencies (EiE) work in central Rakhine State is more or less fixed, particularly in central Rakhine IDP camps. Additionally, due to the absence of strong potential EiE partners in northern Rakhine State, UNICEF's target was limited only to those who can be reached through EiE supplies through Township Education Offices.

To achieve results against the planned targets, the EiE team used a two-pronged strategy of working through NGO partners, and working with Government through the Department of Basic Education and its subnational offices of State Education Department and Township Education Department. In Rakhine State, INGOs are principal providers of EiE services in IDP camps, however they also provide services when needed to reach conflict-affected children in surrounding areas and host communities. UNICEF works through the Ministry of Education for provision of EiE supplies, as Township Education

Offices are better placed to reach all schools as well as increasing the Government's participation and ownership of the interventions.

In Rakhine, Kachin and northern Shan States UNICEF support enabled a total of 26,472 children (13,765 girls) to access formal and non-formal basic education opportunities. In Rakhine State, UNICEF supported 13,301 children (5,966 girls and 7,335 boys) affected by conflict to access primary education in temporary learning classrooms (TLCs) and 500 adolescents from IDP camps and crisis-affected villages to have access to life-skills education. In Kachin State, 4,921 children (2,474 girls and 2,447 boys) received Education in Emergency (EiE) support. In Rakhine, Kachin and northern Shan, 78,007 children (40,564 girls and 37,443 boys) received EiE supplies to enable quality learning. Additionally, in Rakhine State, UNICEF provided roofing sheets for 90 schools, benefiting an estimated 29,900 children—of whom 52 percent are girls. In response to flooding in Bago Region, UNICEF provided individual learning packages to 983 children (511 girls and 472 boys) from 10 schools affected by flooding. The HAC target for children receiving EiE supplies



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were exceeded due to economies of scale in procurement resulting in lower unit costs, however targets for pre-primary, primary and adolescent education were not reached due to a number of factors including limited funding, partner capacity, lack of partners in northern Rakhine State, and access-related issues.

**Challenges:** Limited access and security concerns in affected areas, for both EiE partners as well as for UNICEF, was the principal challenge encountered. Additional challenges encountered by the UNICEF EiE team include:

- limited funding—only 43 percent of the US\$6,434,000 target was mobilized;
- restricted access for UNICEF and partners to affected areas to deliver support;
- too few partners in some areas—particularly northern Rakhine State;
- additional time needed to ensure that UNICEF and our partners adhere to the principle of do no harm in relation to land use and in line with global principles on internal displacement;
- lack of clarity on roles between the Union and State levels of government which delayed implementation of programme activities; and
- bureaucratic impediments which made it difficult to gather data and analyse actual needs and programme effectively;

To mitigate these challenges, UNICEF strived to maintain close contact with the relevant Government Departments and EiE and human rights actors and to forecast activities appropriately to accommodate the bureaucratic issues and minimize potential delays.

**Programme Impact:** The EiE interventions made a significant difference in the lives of conflict-affected children allowing access to educational opportunities that would otherwise not exist, or through provision of supplies to improve their learning environment. The impact is viewed from the perspective of ensuring the right to education for all children, regardless of location, ethnicity or religion. UNICEF's activities provided opportunities in area where there is limited or no government support for children affected by conflict, particularly those Rakhine IDP camps as well as working to



improve the quality of education through teacher training, working with parent teacher associations, and rehabilitating educational structures to ensure safe facilities.

Lessons Learned: Children affected by conflict, particularly those in camp settings, require a holistic package of services not just education. To address the broader needs, the Education team engaged with other sections to provide joint or integrated programming. For example, the Education and WASH Sections are jointly supporting the NNGO KMSS to provide integrated services in school facilities and improve hygiene promotion. Moving in to 2019, UNICEF has already identified a joint Education, CP and WASH programme in northern Rakhine State.

Preparedness: To ensure that UNICEF maintained the appropriate amount of stock for response to both conflict and natural disasters, the Education Section procured and warehoused a number of education supplies including the Essential Learning Package (ELP) kits, school in a carton kits, recreation kits, early childhood development (ECD) kits, roofing sheets, and school tents. These materials are housed in both UNICEF and government warehouses in Yangon and Sittwe. The pre-positioning of these supplies allowed UNICEF to respond to conflict in northern Shan State as well as flooding in Bago Region.

Funding: Education in Emergencies activities are complemented by education activities under the regular Education programme as per the multi-year workplan signed with the government. However due to the lack of funding, service delivery, focused on in-camp service delivery through NGO partners.

#### EiE Sector Coordination

UNICEF maintained support for a full-time EiE Sector coordinator, co funded with Save the Children International and supported sub-national level positions in Rakhine and Kachin States. One of the main accomplishments on 2018 was the development of the Myanmar EiE Sector Strategy 2018-2020, aligned to National Education Strategic Plan and the Ministry of Education sector reform process as well as EiE standard benchmarks for Rakhine programming. To enhance monitoring and reporting, the EiE sector received support from the Global Education Cluster to improve the “4W” tool and dashboards. Advocacy to OCHA-managed multi-donor Myanmar Humanitarian Fund (MHF) resulted in an allocation to EiE of around USD 1.4 M in 2018. The Education in Emergencies sector also worked on 2018 HRP reporting, and 2019 HNO/HRP drafting processes as well as strategic and technical review of project proposals for in-country pooled funds.



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As a result of sustained engagement with the Department of Basic Education, two EiE sector meetings were co-facilitated by the government and UNICEF/Save the Children in 2018. At the sub-national level, State Education Departments (SED) in Kachin and Shan are now co-facilitating sub-national sector meetings. In addition, the sector continues to work with the Government to take over salary payments for volunteer teachers in IDP camps in Rakhine State and to provide textbooks for IDP children. Though there are still some gaps in these services, this is a tremendous step forward and provides a transition opportunity for humanitarian actors while the government resumes their responsibility as the primary duty bearer of services.

## Health

2018 SUMMARY OF PROGRAMME RESULTS		UNICEF and IPs		Cluster Response	
		2018 Target	Total Results	2018 Target	Total Results
<b>HEALTH</b>					
# children 9 to 18 months vaccinated against measles	Kachin	7,000	1,639		
	Rakhine	21,000	5,940		
	Shan	1,000	2,586		
# children and women provided with access to health care services	Kachin	25,000	27,926		
	Rakhine	35,000	75,385		
	Shan	5,000	5,300		

*Results are achieved through contributions against appeals, as well as resources from UNICEF's regular programmes where necessary.*

UNICEF provided support for primary health care services to children and women in conflict-affected and hard-to-reach areas in both Kachin and Rakhine States. This has been done in partnership with the Ministry of Health and Sports, State-level governments, national NGOs including Myanmar Health Assistant Association (MHAA) and Kachin Baptist Convention (KBC) and INGO Health Poverty Action (HPA). Provision of basic health services to communities was carried out through various approaches such as strengthening government's capacity and systems to meet health needs, as well as improving understanding and trust among government staff, ethnic health organizations (EHO) and partner NGOs for expansion and sustainability of health services in hard-to-reach areas.

Through these organizations, health interventions being delivered included: prevention and integrated management of childhood illnesses; strengthened immunization services; support for control and prevention of outbreak of vaccine preventable diseases; provision of ante-natal care, delivery and post-natal care to pregnant women; essential new-born care, referral support for pregnancy, delivery and newborn complications; dissemination of health messages to communities; treatment-seeking behaviour; and increasing key family care practices. 2018 HAC targets were derived from the 2018 HNO/HRP with further analysis based on estimated available funding and partners, as well as consideration for activities of other Health Cluster actors.

Humanitarian preparedness and response targets for Health were somewhat achieved in 2018. Security and logistics issues affected the achievement of results, particularly measles immunization coverage—resulting in only 39 percent of targeted children 9-18 months living in humanitarian situation being immunised against measles. However, for the number of children and women in humanitarian situations provided with access to health care services, UNICEF reached 167% of the target. In 2018 a total of 108,611 children and women in humanitarian situations (female 63,755; male 44,856) were provided with access to health care services in partnership with Myanmar Health Assistant Association (MHAA) and Health Poverty Action (HPA) in Kachin, Shan and Rakhine States.

Reasons for this high achievement beyond a target of 65,000 was due to effective and frequent demand creation activities, awareness raising, dissemination of health education and appropriate use of health services provided jointly by partner staff along with basic health staff (BHS) as well as sustained similar activities by trained volunteers at IDP camps and target villages. In Rakhine State, working with MHAA, UNICEF provided mobile health services in six townships of central Rakhine. In Kachin and Shan States, UNICEF expanded its partnership with Health Poverty Action (HPA) for provision of maternal, neonatal and child health, immunization, and emergency referral support, as well as capacity improvement of basic health staff, staff of ethnic health organizations and community volunteers. All activities aimed to improve coverage and equity of quality health services.

Moreover, a total of 1,151 severe/complicated patients received referral support and a total of 7,559 pregnant women received at least four antenatal care visits and services by skilled health persons in Kachin, Shan and Rakhine states which achieved 196 percent and 192 percent against the targets respectively. A total of 11,759 children under five with diarrhoea (5,955 girl/5,804 boys) received appropriate treatment with oral rehydration salts (ORS) and Zinc tablets and 5,411 children under five with pneumonia (3,204 girls/2,207 boys) received appropriate antibiotics with the achievement of 101 and 103 percent against the targets respectively.

However, a total of only 11,421 children 9-18 months in humanitarian situations were vaccinated against measles against a target of 29,000 (39%). Reasons for this low achievement include limited access to the targeted population due to security issues in Kachin and Shan States as a result of frequent fighting between Tatmadaw and EAGs and in Rakhine State as a result of access/travel restrictions by the Government. Effective immunization programming requires scheduled



outreach services with government health staff, however they could not travel to certain areas to deliver vaccines to partners due to security reasons. Access to health care services for women and children reached 167% against the target of 65,000 affected people.

Many partners managed to exceed the planned targets due to considerable efforts in health system strengthening as well as better coordination among partners, Government health staff, EHO and communities in Kachin, Shan and Rakhine States as well as effective and extensive demand creation activities such as awareness-raising and behaviour change communication.

Coordination: As a member of the Health Cluster, UNICEF continues to engage and to collaborate closely with WHO as the Health cluster lead and State Health Departments to address access and coverage issues. UNICEF Myanmar has put together a contingency plan for Rakhine, Kachin and Shan States to support humanitarian health needs.

Challenges: Access restrictions, bureaucratic impediments and lack of funding were the major challenges for implementation of health activities in 2018. Access to much of the non-government-controlled areas and some areas in northern Shan was severely limited in the first six months of the



year due to frequent and extensive fighting between government forces and armed ethnic groups, however, access slightly improved in late 2018 allowing partners to expand activities. In Rakhine State, especially in Maungdaw District, children and their families continuously struggle to access care. UNICEF estimates that less than 10 percent of communities in these areas in need of assistance were able to receive services from mobile health clinics.

**Preparedness:** UNICEF maintains a level of preparedness through procurement and warehousing of International Emergency Health Kits and other basic response supplies. In addition, UNICEF, in partnership with the US Centers for Disease Control and Prevention, UNICEF provided technical support to the Disaster and Public Health Emergency Unit of the Department of Public Health to support preparedness and response planning as well as support on supplies and logistics management.

**Funding:** Since 2018, UNICEF's Health Section has received funding from USAID's Office of U.S. Foreign Disaster Assistance and Global Thematic Funding for Humanitarian Response. The combined amount received was \$1,594,464 which left a funding gap of 53 percent from the requested \$3,017,000. Due to underfunding in the sector, a programme gap occurred of about four months in Rakhine State and three months in Kachin and Shan States. This severely impacted the coverage of measles immunisations and reduced coverage of outreach for basic health services. However, due to the flexibility of the thematic funding received, partners were able to provide many essential services in excess of targets and reduce the severity of illnesses.

Thematic funds contributed to about 15 percent of the overall UNICEF achievement in Health. The early initiation, quick availability and the flexible nature of the thematic funds greatly accelerated the implementation of humanitarian support in health. Most thematic funding was used for procurement of lifesaving medicines and supplies for service delivery in partnerships with CSOs, government health staff and EHO health staff. Despite obstacles which have been prevailing in both Kachin and Rakhine States, UNICEF and partners generally managed to find solutions as demonstrated by the results.

## Nutrition

2018 SUMMARY OF PROGRAMME RESULTS		UNICEF and IPs		Cluster Response	
		2018 Target	Total Results	2018 Target	Total Results
<b>NUTRITION</b>					
# of children aged 6 to 59 months with SAM admitted to therapeutic care	Rakhine	9,000	2,740	10,600	3,681
# of children aged 6 to 59 months that receive micronutrient supplementation	Kachin	5,000	2,838		
	Rakhine	29,000	25,469		
	Shan	5,000	-		
# of pregnant or lactating women that receive micronutrient supplementation	Kachin	2,500	886		
	Rakhine	12,000	10,866		
	Shan	4,000	-		
# of pregnant or lactating women that access IYCF counselling	Kachin	2,000	2,146	4,100	3,346
	Rakhine	29,000	19,201	31,575	19,201
	Shan	1,000	-	835	

*Results are achieved through contributions against appeals, as well as resources from UNICEF's regular programmes where necessary.*

In 2018, nutrition in emergencies activities supported children and women affected by crisis and conflict, focusing on identification and treatment of severe acute malnutrition (SAM), multi-micronutrient supplementation and promotion of appropriate infant and young child feeding (IYCF)

practices. UNICEF provided technical assistance to NGO partners including Action Contra la Faim, Save the Children International, Myanmar Health Development Organization, and Myanmar Health Assistant Associate in Rakhine and HPA in Kachin and Shan.

Access, particularly to northern Rakhine which has the highest wasting rates in the country, remained limited for most of 2018, though with gradual improved access towards end of the year. This resulted in underachievement of humanitarian targets for children, where only 24% of targeted children (2,160 out of 9,000) with Severe Acute Malnutrition (SAM) were reached and only 50% of targeted pregnant lactating women (PLWs) received cIYCF counselling. A total of 3,681 severely malnourished children were admitted for treatment for Severe Acute Malnutrition (SAM) from January to December 2018 in Rakhine State in centres supported by UNICEF and nutrition cluster partners. UNICEF provided Ready-to-Use Therapeutic Food (RUTF) to treat 2,740 severely malnourished children through implementing partners.

In addition to supporting agencies to screen and treat children for malnutrition, UNICEF worked to provide training to the Ministry of Health and Sports (MOHS) on the Integrated Management of Acute Malnutrition (IMAM) to promote the inclusion of these activities through regular health centres and government staff. Though the training was rolled out across the state, there were delays in the actual provision of these services by health staff which resulted in coverage rates lower than desired. In addition, restrictions on partner access to areas, particularly in northern Rakhine State, where acute malnutrition needs are generally higher, further prevented comprehensive screening and treatment for vulnerable children. The Out-Patient Therapeutic Programme (OTP) for the treatment of children with SAM in Maungdaw District managed by UNICEF's partner Action Contre la Faim (ACF), was able to restart in mid-year to a much more limited extent with two central locations in Maungdaw and Buthidaung urban centres. ACF and other nutrition partners were able to continue services in central Rakhine IDP camps throughout the year.



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In addition to screening and treatment of acute malnutrition, UNICEF and implementing partners reached 19,201 out of 29,000 targeted pregnant and breastfeeding women (PLW) with community-based Infant and Young Child Feeding (cIYCF) counselling—approximately 66 percent of the 2018 HAC target. Micronutrient sprinkles for home fortification of complementary foods was provided to 25,469 children under five (88 percent of HAC target) and 10,866 PLWs (91 percent of HAC target) in Rakhine State.

In Kachin State, UNICEF's intervention focused on providing preventive nutrition services including micronutrient supplementation for children under five (U5) and pregnant and breastfeeding women (PLW) as well as IYCF counselling for caregivers. UNICEF's micronutrient supplementation programmes reached approximately 50 percent of the targeted population but were constrained by



response capacities, access and resource availability. Similarly, in Shan State, UNICEF's ability to expand coverage to vulnerable children and mothers was constrained by the lack of partners with nutrition capacity, limited access and lack of funding. Despite the overall challenges, UNICEF reached more than the targeted 2,000 PLW through cIYCF counselling in Kachin State.

While there is a need to provide high impact interventions—both prevention and treatment—most partners provided minimal impact stand-alone nutrition activities due to weak capacity. The scale of nutrition programming in Myanmar in general, and particularly IMAM, is small.

In 2018, MOHS prioritized nutrition especially in response to the Rakhine Commission Report from August 2017. Within this context, UNICEF seized the opportunity to play a key role in bringing together partners, such as 3MDG and its implementing NGO partners, for joint strategic planning and coordination with MOHS on cIYCF and IMAM. Compared to 2017 where no Government health workers had capacity to provide IMAM as per new national protocol (including out-patient), by the end of 2018 a total of 1,875 basic health staff (BHS) and clinical staff from Rakhine and Kachin (50% of health workers trained nationally) have now been trained and equipped to provide IMAM services. For cIYCF, an additional 2,765 BHS and community health volunteers have been trained and equipped in the Kachin and Rakhine State. The main challenge is to ensure quality and coverage of services, which are variable and particularly weak in Rakhine State, where health workers are overburdened with multiple development and humanitarian programs. Supportive supervision, monitoring and reporting are still very weak for both cIYCF and IMAM, where admissions data is still forthcoming.

Challenges: In 2018, UNICEF Myanmar could not implement humanitarian nutrition activities in area of Maungdaw District and some townships in central Rakhine due to severe access constraints by Rakhine Coordination Committee. UNICEF was able to advocate to MOHS to include nutrition screening, micronutrient supplementation and IYCF promotion in Government mobile health clinics, however, the quality of these MOHS mobile clinic nutrition services may be variable as partners, including UNICEF, had limited access to field monitoring. Data reports from mobile health clinics in northern Rakhine were not made available. UNICEF, partners and the wider humanitarian community continue to advocate with Government and facilitate discussions to gradually improve access to conflict affected areas, however it continues to be an ongoing programmatic constraint for intervention coverage.

Funding: Funding gaps remain a major challenge for UNICEF Myanmar to operationalize the nutrition preparedness and response plans. In 2018, the UNICEF Nutrition Unit under the Health Sector received funding from USAID's Office of Food for Peace, the Government of Japan and via Global Thematic Funding for Humanitarian Response. In total, UNICEF received a total of \$696,000 for nutrition activities, which, in addition to the carried over funding of \$763,362 resulted in a total funding of less than \$1.5 million out of the requested \$5.68 million—a funding gap of 74 percent. The flexibility of USAID's funding and supplies for nutrition programming, coupled with



delays in implementation due to the outflow of Rohingya in 2017, resulted in additional carryover of supplies which were utilized in 2018 to provide life-saving services not only in Rakhine State, but also in high-burden areas of wasting within the country including Yangon Region.

#### Nutrition in Emergencies Sector

UNICEF is leading the Nutrition Sector to coordinate the humanitarian nutrition response. The sector meets regularly at national and sub-national levels to discuss delivery of services, needs and gaps. A UNICEF Nutrition Officer consolidates monthly data from nutrition partners and drafts trend analyses which are shared with the Government and partners at both national and field levels. The Nutrition Sector, with support from UNICEF developed a Nutrition in Emergencies Training of Trainers for 30 government and partner nutrition staff. In addition, UNICEF Nutrition staff participated in the inter-cluster coordination group and provided inputs to both the HNO, HRP and reporting throughout the year as well as engaged on policy discussions. The UNICEF nutrition sector also worked closely on issues of mutual concern with the Food Security Sector led by WFP and the Food and Agriculture Organization.

#### Water, Sanitation and Hygiene Promotion

2018 SUMMARY OF PROGRAMME RESULTS		UNICEF and IPs		Cluster Response	
		2018 Target	Total Results	2018 Target	Total Results
<b>WASH</b>					
# of people (children, women, men) accessing sufficient water of appropriate quality and quantity for drinking, cooking and maintaining personal hygiene	Kachin	36,700	30,969	116,862	88,665
	Rakhine	71,870	55,115	374,137	158,654
	Shan	9,000	533	17,979	9,722
# of people (children, women, men) accessing toilets and washing facilities that are culturally appropriate, secure, sanitary, user-friendly and gender-appropriate	Kachin	36,700	27,674	116,862	74,978
	Rakhine	71,870	49,201	374,137	105,159
	Shan	9,000	-	17,979	8,705
# of people (children, women, men) that receive critical WASH-related information to prevent child illness, especially diarrhoea	Kachin	36,700	42,474	116,862	54,756
	Rakhine	71,870	53,452	374,137	143,550
	Shan	9,000	1,730	17,979	9,669
# of people (children, women, men) accessing safe water, sanitation and hygiene facilities in their learning environment, child-friendly spaces & emergency health care facilities	Kachin	14,680	505		
	Rakhine	28,748	1,187		
	Shan	3,600	-		

*Results are achieved through contributions against appeals, as well as resources from UNICEF's regular programmes where necessary.*

In 2018 UNICEF reached 321,233 people with humanitarian WASH response through supported activities and direct implementation across seven states and regions covering protracted IDP emergencies covered under the 2018 Humanitarian Response Plan (HRP) and monsoon floods. As part of the ongoing humanitarian response UNICEF continues to fulfil its cluster role as provider of last resort and supports WASH partners in some of the hardest to reach villages and IDP camps in Myanmar.

The UNICEF WASH HAC targets were determined in close consultation with the WASH Cluster and UNICEF WASH partners. Extensive liaison was undertaken at the State level to understand coverage, needs and gaps in the protracted response. UNICEF also evaluated likely funds available and analysed partner capacity in the areas of need. Fundraising targets were set to cover overall need with

operational planning targets being set to cover what was achievable with available funds. Significant planning was needed to try to anticipate shortfalls in funding at the end of 2018.

The majority of UNICEF's WASH response was based upon continuation of existing partnerships covering IDP camps and conflict-affected communities that UNICEF has supported through partners since 2012. UNICEF continued to work through a mix of modalities adapted to a diverse range of humanitarian operating environments. This includes partnerships with eight INGOs, four NNGOs, 3 government departments and some direct distribution of supplies. Within Rakhine State, implementation is primarily accomplished through INGO partners who can also provide 'protection by presence'; whereas in Kachin and northern Shan States there is higher representation of NNGOs who have access to conflict zones and areas restricted to international staff and agencies. These partnerships are essential to deliver critical WASH services to people in crowded IDP camps that are not or cannot be served by government. In 2018 UNICEF has provided \$2,925,465 in cash and \$1,950,309 in-kind to NNGO and INGO partnerships.

In northern Rakhine State, UNICEF undertook direct implementation to deliver hygiene kits to more than 63,238 people in critical need. In Kachin and northern Shan States UNICEF collaborated with government counterparts to deliver emergency supplies to 17,596 conflict-affected displaced persons. UNICEF also worked through a cooperation agreement with the World Food Programme to provide soap alongside monthly food distributions to approximately 100,000 people per month. Due to funding shortages, there was a gap in provision of soap to WFP temporarily halting distributions.

During 2018, some partnerships changed to promote localisation of the response, promote strengthened engagement with local communities and increase operational resilience to possible restrictions against INGO activities. In other locations, partnerships have been consolidated to encourage improved economies of scale and harmonisation of implementation modalities in nearby/similar locations. All partner activities are aligned with the National WASH Cluster Strategic Operational Framework which in turn is linked to the overall Myanmar 2018 Humanitarian Response Plan.

In addition to response to the protracted crisis, UNICEF worked with the government and WFP to deliver response support in both in-kind contributions and through cash-based programming. Widespread monsoon flooding had a heavy impact in the south east of the country and UNICEF together with partners was able to provide a significant immediate response to 60,496 people with lifesaving WASH supplies and services.

### Challenges:

Overall UNICEF's WASH response has been constrained by lack of humanitarian access. This has been tackled through extensive engagement through the WASH Cluster, inter-cluster coordination group, UNICEF senior management and through regional and global advocacy as appropriate. While some successes were achieved with slightly improved access over the course of 2018, this specific challenge remains. Funding gaps also continued to be challenge with humanitarian funding continuing to be severely limited and limited ability to transition, in some locations, to more development activities UNICEF continued to advocate for state-wide approaches that can consider both development and



humanitarian needs. Additionally, due to fragmentation of the WASH sector within the government structure, challenges remain in defining clear preparedness roles and responsibilities between ministries, between national and state/regional government and between agencies supporting the GoM. To this extent, while coordination remains strong in HRP covered states under the WASH Cluster modalities in other states and regions preparedness is more constrained.

Programme Impact: As identified above, overall, the programme continued to deliver results against the HAC in 2018 under difficult circumstances providing critical lifesaving WASH services in a number of locations of conflict and natural disaster response. Activities also served to prevent morbidity and public health outbreaks due to poor sanitation and hygiene practices.

### Lessons Learned:

- **Funding:** Short term humanitarian funding under protracted humanitarian crisis continues to be a major challenge for all WASH partners. There are significant opportunities for UNICEF to play a greater role in supporting partners with longer term partnerships that can support transition to and development of localized capacities. More predictable and longer-term funding would allow for significant improvements in planning processes and delivery of more cost effective and durable solutions than have been achieved so far. Innovative financing mechanisms should be explored to smooth out funding uncertainties.
- **GoM as duty bearer in IDP camps:** GoM presented a draft national strategy for the closure of IDP camps in the country, however this has not been completed or shared since late 2018. In the meantime, the government engages in activities and plans for camp closure that carry significant risk. UNICEF and WASH Cluster provide advocacy, technical support and practical guidance to mitigate these risks and can eventually support a greater role for government in supporting IDPs if key protection requirements are met.
- **Delivery Mechanisms:** Support in IDP camps remains largely constrained by short-term project orientated funding whereas the protracted situation frequently requires longer term service delivery models. One option is to transition from delivery of camp-by-camp-based WASH interventions towards a more horizontal service delivery approach across multiple locations. To this extent it is important to analyse future potential government accountabilities, capacity and operating modalities and identify areas where programming can facilitate change.



- **Resilience:** Significant opportunities exist to build upon WASH resilience work undertaken in Rakhine State, outside of IDP camps, covering both humanitarian and development outputs to strengthen all communities' resilience to both natural disasters and climate change impacts. UNICEF has extensive partnerships in place and tested delivery mechanisms that can be scaled and expanded in Rakhine State. The WASH Cluster delivered workshops in Kachin focused on humanitarian-development nexus and identified opportunities for durable solutions.

Preparedness: Preparedness capacity for WASH activities and actors was supported through trainings, in collaboration with other UNICEF sections and the WASH Cluster, covering a number of technical topics. Six contingency stock warehouses have been constructed in coordination with the Department of Rural Development in high disaster risk locations of Ayerwaddy, Rakhine and Chin States. Emergency water and sanitation supply equipment has been purchased and will be distributed to these locations after appropriate equipment training is completed. Additionally, the Department for Disaster Management (DDM) has been supported by UNICEF's SPCRM team to review its human resource (HR) scale up planning and budgeting. The Emergency Unit, Supply Unit and WASH colleagues supported DRD and DDM to develop and provide trainings on warehouse management and operations, with an inclusive disaster risk reduction component. To ensure UNICEF's internal preparedness, UNICEF updated long-term agreements for WASH supplies including hygiene kits to more effectively cover both short- and long-term emergencies.



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Funding: UNICEF's WASH sector had a 44 percent funding gap for activities in 2018 resulting in the lack of service provision as new or expanded partnerships could not be formed. In addition, the uncertainty around humanitarian funding both in terms of scale and timing means that managing cash flow has been a significant challenge. The flexibility of thematic funding has been instrumental in adapting to funding gaps and allowing us to respond quickly in locations where constraints exist with other funding agreements. This also allowed UNICEF to continue to fulfil its role as provider of last resort.

Innovations/Cash-Based Interventions: UNICEF engaged in two new partnerships with the World Food Programme (WFP). In northern Rakhine State, UNICEF provided soap to WFP for delivery to hard-to-reach communities alongside WFP's general food distributions reaching more than 100,000 people per month with soap distributions. In the south-eastern Myanmar, UNICEF and WFP worked together to deliver joint multipurpose cash programming as part of the flood recovery process through funding from the Central Emergency Response Fund. A learning exercise to better understand how effective cash-based approaches can be used for addressing WASH as part of multipurpose cash grants in the future has been commissioned and is scheduled for early 2019. In conflict areas, serious protection concerns and lack of freedom of movement hinder expansion of cash responses, however, in one Rakhine IDP camp, a voucher-based approach to the provision of hygiene items continues to function effectively. Vouchers modalities are being expanded for an estimated 14,000 beneficiaries in northern Shan State in early 2019.



### WASH in Emergencies Cluster Coordination

UNICEF continues to lead the WASH Cluster and has one international cluster coordinator based in Yangon, one international cluster coordinator and two national cluster coordination officers in Sittwe, Rakhine, one national officer double-hatted in Myitkyina Kachin and one national officer in Lashio, Shan State. The cluster continues to support multiple activities at both Union and State levels to enhance coordination, preparedness, advocacy, capacity development and knowledge management.

In 2018, the WASH Cluster has fully delivered on its cluster responsibilities as per the established terms of reference and strategy and in line with the Global UNICEF Cluster Guidance. This includes regular monitoring and reporting, advocacy, accountability to affected populations, supporting service delivery, informing strategic decision making and building capacity and supporting preparedness. In addition to the 2018 HRP, the WASH Cluster is guided by a three-year Strategic Framework which includes over 40 contextualized standards and guidance notes for WASH response in IDP camps in Myanmar. The WASH Cluster in partnership with the U.S. Centers for Disease Control and Prevention (CDC) also completed a ceramic water filter study that informed the strategic plan of the WASH Cluster. Cluster partners have furthermore piloted innovation including manuals on tiger worm toilets which reduce fecal sludge management requirements and smell inside the latrines.

The WASH Cluster has kept high level of coordination with meeting participation, monitoring and reporting and contributions to joint efforts. All partners continue to report regularly and the cluster organizes regular information management training for government and partners. Meetings are tailored to partners' needs and action-oriented. The WASH Cluster has organized joint assessments, for example, the hygiene kit assessment which is informing the update of the hygiene kit strategy to ensure the available resources are directed to the most vulnerable children and women in the IDP camps. The WASH Cluster organized over 20 trainings as part of our capacity building efforts to local partners and local government. A joint technical working group for Fecal Sludge Management in Kachin was activated and jointly led by government, the WASH Cluster and Oxfam. The WASH Cluster has captured and raised advocacy points to HCT for example on camp living conditions and limitations in most disadvantaged areas (i.e. Pauktaw IDP camps). This advocacy which brought in Protection, CCCM and Shelter clusters led to a multi-sector improved living conditions plan for Rakhine IDP camps, endorsed by HCT and supported by donors.

UNICEF as the WASH Cluster lead agency has developed the methodology for the humanitarian needs overview and humanitarian response plans with targets and budget down to township level. The WASH Cluster has furthermore contributed to regular activity reports including snapshots, newsletters and HRP/OCHA led reports. The WASH Cluster has also delivered a number of IM trainings to government and local partners. The Government in Kachin has requested to utilize the WASH Cluster IM tools which is important for the handover/transition strategy from cluster to government. The WASH Cluster monitors and reports on progress, gaps and needs on a quarterly basis and provides this information for ICCG reporting on a bi-annual basis as requested. The FTS is the financial inter-agency reporting mechanism, however due to challenges with it, the WASH Cluster has continued to monitor on a quarterly basis the financial contributions of all donors to humanitarian WASH.

Humanitarian Reform including the Grand Bargain has had substantial impact on the WASH Cluster strategy and response, especially in the areas of: localization, cash-based programming, participation revolution and humanitarian-development nexus. These have informed the strategy and have led to concerted efforts and results. For example, in Kachin the fecal sludge management technical working group is co-led with the government and aims at delivering sanitation services for both humanitarian and development areas. Furthermore, the localization agenda has been mainstreamed in the WASH Cluster strategy with a full-fledge capacity building plan and adapting of cluster functions to support local partners' capacities. In Kachin and Shan States, the WASH Cluster fully nationalized to support

the localization strategy and as a result 91 percent of the WASH response was delivered by local partners with 30 percent of the funding going directly to local partners and the rest of the funding channelled through UN and INGOs to NNGOs. At the Cluster Coordination level, the government has taken the leadership role in Kachin with the Fecal Sludge Management Technical working group co- led with Oxfam and the WASH Cluster coordinator.

## ASSESSMENT, MONITORING AND EVALUATION

In 2018, UNICEF continued using Humanitarian Performance Monitoring through data tracking as well as programme visits, site visits and spot checks of partner agencies. Data from the programme sections was evaluated on a quarterly basis for internal review and shared in published Situation Reports as well. Data was also provided to cluster/sector leads for interagency monitoring of results against the 2018 HRP on a biannual basis. The data table, together with operational updates and qualitative data enabled UNICEF's programme teams to evaluate the progress of humanitarian operations and address any challenges identified. UNICEF also provided informal reports to donors



in country as needed, or by email when requested to ensure that UNICEF partners, donors and national committees remained abreast of key challenges and contextual changes in country throughout the year.

In addition to overall monitoring, several sections have additional monitoring systems which are used. Child Protection monitoring uses a number of systems including a monthly monitoring matrix

which gathers qualitative and quantitative data, the Child Protection Information Management system (CP IMS) which supports follow up of cases of abuse or violations against children as well as the progress of the reintegration of children associated with armed groups/forces, a monitoring and reporting tracker to follow reports on the six grave violations, and the mine victim tracker. In addition, the nutrition team uses the Nutrition Information System (NIS) which is managed by UNICEF as lead of the nutrition sector and which allows UNICEF and its partners to carry out a monthly analysis of performance indicators for each nutrition sector intervention and to detect any suboptimal results. For all activities UNICEF directly funds, partners submit quarterly progress reports and, where feasible, UNICEF does field visits to engage with communities on activities, needs, gaps, bottlenecks, challenges, and opportunities for additional engagement.

All of the UNICEF cluster/sector working groups are using information management tracking systems like the “4W” which allows for progress against HRP targets on a quarterly basis and for strategic decision making including needs from the OCHA-led Myanmar Humanitarian Fund. Only the WASH Cluster has a full-time information management officer, however in 2017/2018 UNICEF received support from several of the global clusters including Education, Child Protection, and WASH.

UNICEF cluster/sector leads also worked with the inter-cluster coordination group and Humanitarian Country Team for the development of the 2019 Humanitarian Needs Overview and Humanitarian Response Plan as well as the mid-year and end of year reports on progress. Work was completed

through extensive review of existing data—given the inability to conduct additional assessments due to restrictions by the government—and was reviewed by national and international NGO partners. In addition, a consultation with an inter-ministerial panel of government counterparts was coordinated by OCHA and in which UNICEF participated. UNICEF staff also continue to work on interagency preparedness activities including a table-top simulation exercise in consultation with INGO and NNGO partners as well as government officials. In addition, UNICEF was consistently represented at the Humanitarian Country Team. To ensure that the UNICEF/Myanmar office is prepared for the variety of risks to which the country is vulnerable, staff conducted multi-hazard risk assessments and contingency planning exercises in Kachin and Shan States. UNICEF also participated in the interagency Mandalay Earthquake preparedness strategy and simulation exercise.

## FINANCIAL ANALYSIS

UNICEF requested nearly \$31.8 million for humanitarian activities in 2018 through the Humanitarian Action for Children appeal, however less than \$10 million was received. With carry over funding, a total of \$15.2 was available for humanitarian activities leaving a funding gap of 52 percent. However, there were two activities for which UNICEF received funding which is counted in the received funding, but which were not included or budgeted in the 2018 HAC funding requirement. First, UNICEF received specifically allocated WASH Cluster Coordination funding for research and studies and second, UNICEF received CERF funding for the monsoon-related flood response mid-year. While these funds were critical to UNICEF's ability to respond appropriately and provide effective cluster leadership, they are reflected as funds against the required amount whereas they are, in fact, additional funds for newly identified activities. As such, the total received for HAC identified activities, was even less than appears.

The flexible funding provided through global humanitarian thematic funds was critical in allowing UNICEF to support gaps identified as they occurred and provide consistency in staffing and coordination.

**Table 1: 2018 Funding Status against the Appeal by Sector (Revenue in USD):**

Sector	Requirements	Funds Available Against Appeal as of 31 December 2018*		% Funded Gap
		Funds Received in 2018	Carry-Over	
Nutrition	5,680,000	696,000	763,362	74%
Health	3,017,000	1,096,387	326,149	53%
WASH	8,650,000	3,655,976	1,201,915	44%
Child Protection	5,800,000	2,564,016	859,930	41%
Education	6,434,000	691,244	2,075,183	57%
Cluster Coordination	2,199,000	1,000,000	226,595	44%
<b>TOTAL</b>	<b>31,780,000</b>	<b>9,703,623</b>	<b>5,453,134</b>	<b>52%</b>

Fund available includes funds received against current appeal and carry-forward from previous year

Table 2 : Funding received and available by 31 December 2018 by Donor and Funding Type (in USD)

Donor Name/Type of funding	Programme Budget Allotment reference	Overall Amount *
<b>I. Humanitarian funds received in 2018</b>		
<b>a) Thematic Humanitarian Funds</b>		1,404,444
See details in table 3	SM189910	1,404,444
<b>b) Non-Thematic Humanitarian Funds</b> (List individually all non-Thematic emergency funding received in 2018 per donor in descending order)		
USA (USAID) OFDA	SM170240	4,170,293
Japan	SM180048	1,977,773
European Commission/ECHO	SM180212	790,103
<b>b) Total Non-Thematic Humanitarian Funds</b>		<b>6,938,169</b>
<b>c) Pooled Funding</b>		
<b>CERF grants</b>		<b>668,736</b>
UNOCHA	SM180380	373,100
UNOCHA	SM180012	211,925
UNOCHA	SM180379	83,710
<b>d) Other types of humanitarian funds</b>		<b>-</b>
<b>Total humanitarian funds received in 2018 (a+b+c+d)</b>		<b>9,011,348</b>
<b>II. Carry-over of humanitarian funds available in 2018</b>		
<b>e) Carry over Thematic Humanitarian Funds</b>		<b>1,506,880</b>
Thematic Humanitarian Funds	SM149910	1,506,880
<b>f) Carry over of non-Thematic Humanitarian Funds</b> (List by donor, grant and programmable amount being carried forward from prior year(s) if applicable)		
USA (USAID) OFDA	SM170240	1,663,652
Japan	SM150488	1,544,579
USAID/Food for Peace	SM170387	227,050
France	SM170335	194,865
UNOCHA	SM170331	168,894
USAID/Food for Peace	KM170018	95,611
USAID/Food for Peace	KM160055	41,308
USAID/Food for Peace	SM160458	5,760
UNOCHA	SM170332	4,534
<b>Total carry-over non-Thematic Humanitarian Funds</b>		<b>3,946,255</b>
<b>Total carry-over humanitarian funds (e+f)</b>		<b>5,453,134</b>
<b>III. Other sources (Regular resources set-aside, diversion of RR-if applicable)</b>		
UNICEF (FOR GR ALLOCATIONS ONLY)	GE170037	392,319
<b>Total other resources</b>		<b>392,319</b>



*\*Programmable amount of donor contributions excluding recovery cost.*

*\*\* 2018 loans have not been waived; COs are liable to reimburse in 2019 as donor funds become available*

**Table 3: Thematic Humanitarian Contributions Received in 2018**

<b>Thematic Humanitarian Contributions Received in 2018 (in USD): Donor</b>	<b>Grant Number</b>	<b>Programmable Amount (in USD)</b>	<b>Total Contribution Amount (in USD)</b>
Denmark	SM1899100048	1,404,444	1,502,755
<b>TOTAL</b>		<b>1,404,444</b>	<b>1,502,755</b>

## **FUTURE WORK PLAN**

The 2019 UNICEF Humanitarian Action for Children outlines the plan to continue service provision in all five sectors throughout the conflict-affected areas of Kachin, Shan and Rakhine States but with a substantial increase in beneficiaries. Core activities such as those conducted in 2018 will continue, however UNICEF is using an expanded methodology in the development of the 2019 HAC which has dramatically increased our targets to reach every child identified in the HNO/HRP as in need of assistance and who is not being reached by other partners. This will require significant additional funding, and should the funding come through, additional partnership agreements.

To address the changing context in Rakhine, UNICEF developed an 2019 Rakhine Response plan that identified humanitarian action—based on the HRP and HAC initiatives and activities—and including development activities. This builds on activities ongoing in central Rakhine and identifies opportunities for expansion particularly in northern Rakhine, through new partnerships and initiatives in addition to existing partners. UNICEF is also continuing existing services in Kachin and northern Shan to respond to needs of those in IDP camps and camp like settlements in both government-controlled and non-government-controlled areas.

UNICEF also aims, in 2019, to scale up accountability to affected populations with the interagency and has developed a concept note detailing a pilot programme to establish information centers in IDP camps which can provide sources of information on services available and tracking requests for assistance which are then shared with appropriate coordination bodies and service providers. The Emergency and Communications for Development Specialists are working with a number of UNICEF staff and cluster/sector leads to move this concept forward and identify funding.

## **EXPRESSION OF THANKS**

UNICEF Myanmar would like to thank the donors for their generous support to our humanitarian activities. The support of the people of Denmark and Japan, and the US Agency for International Development and the Directorate-General for European Civil Protection and Humanitarian Aid allowed UNICEF to provide critical support to children and their caregivers in crisis in 2018.

### DONOR FEEDBACK FORM

We also invite donors to provide feedback through the Donor Feedback Form which can be found [here](#) (English).

