



# **Humanitarian Situation and Response Plan in Kachin**

**March 2012 update**

## Basic Indicators in Myanmar and Kachin State

Indicator	Myanmar	Kachin
Population	25,089,976 (M), 26,458,432 (F), 51,548,408 (Total)	679,371 (M) 703,954 (F) 1,383,325 (Total)
Proportion of population with access to an improved drinking water source	82.33 69.45	89.30 89.40
Measles vaccination rate	90.7% 82.3%	88.0% 65.0%
Under-five severe malnutrition (weight for height)	9.4	9.0
Number of health workforce (medical doctor, nurse, midwife)	5.03 per 10,000 people	9.04 per 10,000 people
Total fertility rate	2.03 children per woman 1.9 children per woman	2.23 children per woman
Maternal mortality ratio	316/100,000 240/100,000	180/100,000
Under-five mortality rate	77/1000 (2007) 71/1000 46.1/1000 66/1000 (2003-4)	27.40/1000
Coverage of antenatal care	83.1	79.40
Skilled birth attendance rate	64.2 70.6	51.20
Post-natal care coverage (frequency)	5.4	5
Abortion	One-third of all deliveries	Equally high
Comprehensive correct knowledge of HIV/AIDS (among population aged 15-24 years)	92.1	90.6

Sources: Health Management Information System (HMIS), MoH, 2009; Myanmar multiple indicator Cluster survey (MICS), 2009-10; Integrated Household Living condition Survey in Myanmar, 2009-10; Fertility and Reproductive Health Survey (FRHS), 2007; Nationwide Under 5 Mortality Survey, UNICEF/DoH, 2003-4; RH Needs Assessment, 1999.

## Executive Summary

Between June 2011 and February 2012, instability across Kachin and northern Shan states resulted in displacement, damage of infrastructure and loss of lives and livelihoods. Despite ongoing peace negotiation between parties to the conflict, incidents continue to be reported. Additionally, there are indications that a number of people fled just across the Myanmar-China border and live with relatives or in temporary makeshift camps, but information is still unclear and cannot be independently verified.

The number of Internally Displaced Persons (IDPs) steadily increased from September 2011 (approx 20,000 people) to an estimated 50-55,000 people at present. These people sought refuge in camps, in public buildings, in host families or in the jungle. The numbers of IDPs continue to fluctuate and in some locations, some IDPs temporarily return to their villages to attempt salvaging some of their livelihood, leaving some of their family members in camps or with relatives. Available information indicates that these returns are not permanent or substantial in numbers, as IDPs continue to be concerned over ongoing tensions and instability as well as presence of landmines.

Whilst the Kachin State Government started a planning exercise encompassing return and recovery operations, the Union Government and the Kachin State Government have clearly stated that only those who wish to return should do so, and that assistance in camps must continue. The State Government indicated relief aid and recovery operations will require support from the aid community well into 2013.

Whilst partners are able to provide a wide range of assistance to some 19,000 Internally Displaced Persons (IDPs) located in fully accessible towns of Myit-

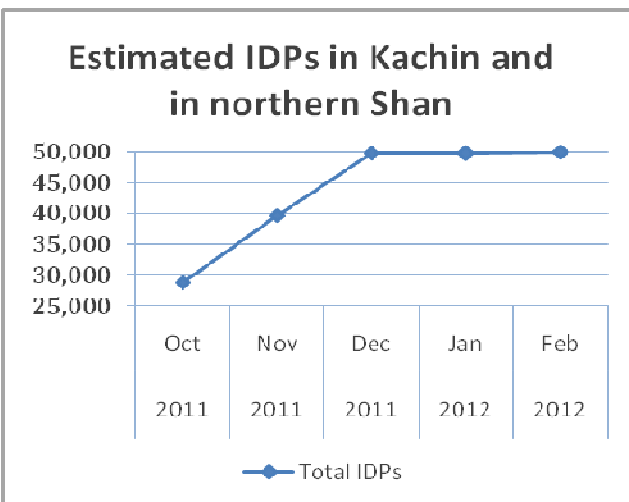


*IDP children and elderly are among the most vulnerable groups.*

kyina, Waingmaw, Bhamo, Mansi, Momauk, Puta-O and Shwegu, some (mostly local) partners do have some degree of access to population in other locations. Limited ability for a wide range of partners to reach all those in need resulted in further suffering, as gaps and inequality in assistance is a fact of life for a significant portion of the affected people.

The UN Humanitarian Coordinator, on behalf of the humanitarian community, reiterated, since June 2011, the readiness of UN and NGOs in providing assistance to all those in need. As a result, the Government invited, in September 2011, to all interested agencies to assist displaced in a number of locations and carry out an independent needs assessment in Myitkyina, Waingmaw, Bhamo, Mansi, Momauk and Shwegu. It further resulted in a UN mission and provision of assistance to IDPs in hard-to-reach areas in December 2011. However, sustained access for provision of assistance for relief and eventually recovery operations is yet to be achieved, despite positive signals by all parties involved who have explicitly welcomed international organizations' presence and operations across all locations.

In an effort to enhance assistance and coordination, local and international partners undertook an analysis of the situation in November-December 2011 and identified scenarios for the coming six months, against which sectoral plans and priorities were identified. In February 2012, partners decided to review and update the planning exercise taking into account the recent development of the situation, in view of protracted displacement and ongoing discussions around return planning. The revised planning document includes an analysis of the assistance provided to date, of the possible scenario in the coming year (March 2012-February



2013), and a review of sectoral requirements including those to cater for existing gaps and expected need for additional resources required for the provision of life-saving relief assistance as well as to support pockets of return for up to 60,000 people affected by the ongoing instability.

Partners estimated that relief assistance would be required even if the situation was to normalize in the coming months, as most of the IDPs lost their possessions, their sources of livelihood, the planting season and social services would take some time to become fully functional again. In addition, whilst the cold season is drawing to an end, partners also identified as major concerns the upcoming peak of the dry season – which will trigger water scarcity and worsen the already poor sanitary condition in camps – as well as the upcoming storm (March-April) and the rainy season (May-October) which are going to further compound the situation in camps and other IDPs locations, and hamper the distribution of aid because of increased logistic constraints.

This document concentrates on the immediate relief requirements for one year, and is going to be revised in three months from its publication. Priorities of sectoral interventions include:

Food/Livelihood: food distribution, provision of cash grant, implementation of camp-based livelihood/income generation programmes;

NFI/Camp Coordination/Shelter: distribution of NFIs, shelter construction, provision of camp management training;

Health/Nutrition/Water, Sanitation and Hygiene (WASH): replenishment of medical supplies, strengthening of surveillance of diseases, provision of more durable WASH facilities;

Education and Protection: education materials, construction of temporary learning spaces, identification of extremely vulnerable individuals and strengthening of child protection activities.

Additional discussion and planning will be required to prepare for longer-term recovery interventions.

The December 2011 plan appealed for a total requirement of US\$6.4 million across seven sectors (food, NFIs, shelter, camp management, health and nutrition, WASH, protection) for six months period, for a caseload of up to 50,000 IDPs. In view of protracted displacement, and need for longer-term assistance, the plan now estimates that some up to 60,000 IDPs will require relief assistance and that an additional US\$21.8 million are estimated to be needed to ensure aid to the full caseload for a period of one year.

Unfortunately, the December plan did not result in major contribution for the response, also in view of access-related concerns. The UN-administered Central Emergency Response Plan disbursed US\$ 1.5 million to fund activities in five sectors: food, health, protection, WASH, shelter and NFI. Other contributions included US\$200,000 by AusAid for WFP food operations. Partners have mobilized all existing stocks and funds available and have no more buffer resources to continue carrying out even basic assistance for an extended period of time.

## Current Situation

Instability in Kachin and northern Shan States restarted in early June 2011 and resulted in displacement of populations, loss of lives and livelihoods and damages to infrastructure.

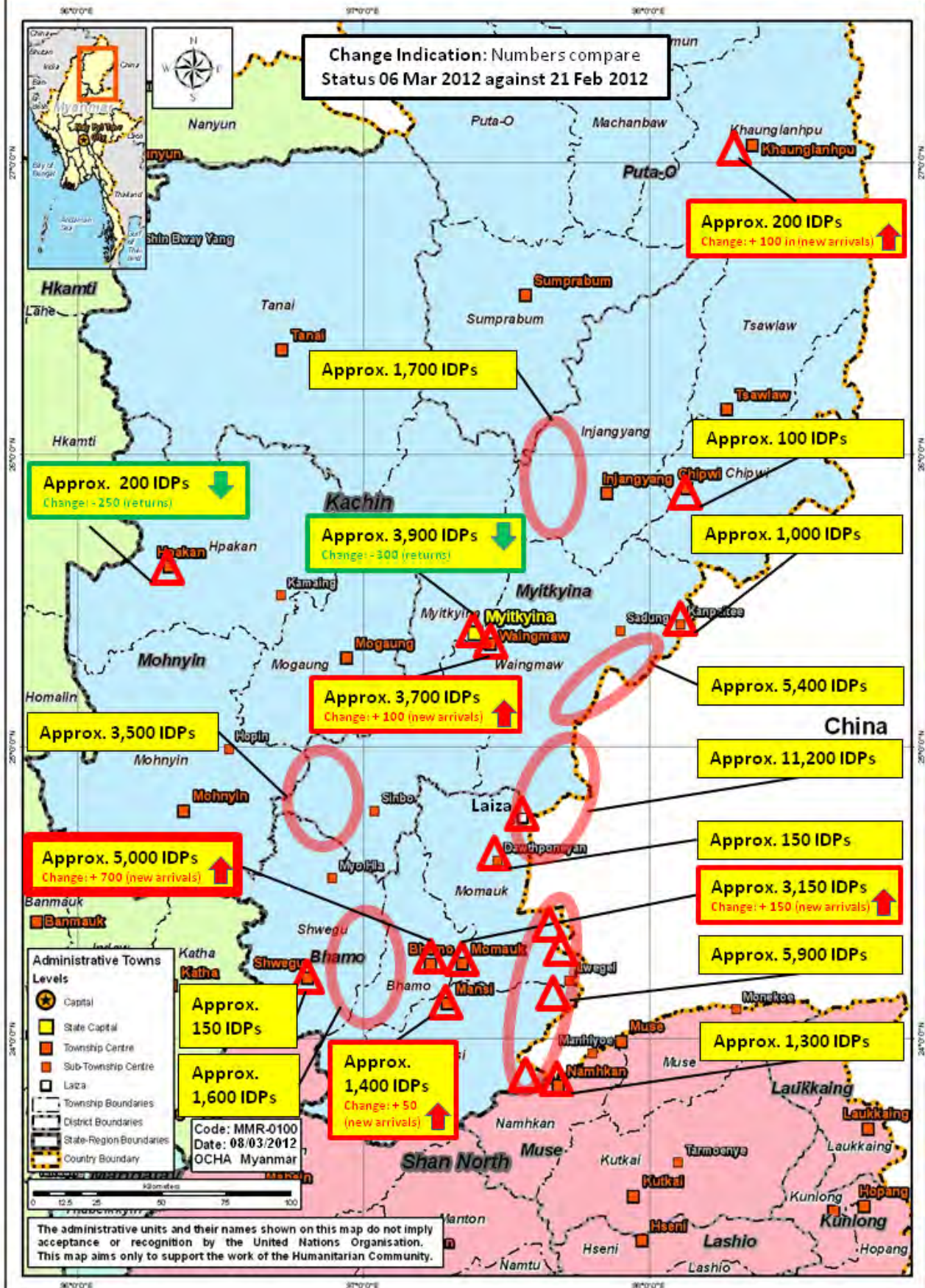
The number of displaced steadily increased since

### Summary of requirements for 60,000 IDPs for one year (Mar 2012-Feb 2013)

Sector	Requirements (US\$)
Food	8,600,000
Livelihood	2,150,000
NFI	1,117,628
Shelter	4,802,351
Camp Management	333,797
Health/Nutrition	180,000
WASH	3,300,000
Education	205,785
Protection	1,167,835
<b>TOTAL</b>	<b>21,857,396</b>



Reported IDP figures, Kachin, Status 06 Mar 2012, various Sources 



the beginning of the conflict and, although figures of displaced population continue to fluctuate and are reportedly increasing on a daily basis, it is currently estimated that between 50,000 and 55,000 IDPs may have left their homes and sought refuge in camps, with friends and relatives or into the forest across the affected region. As an indication of the increasing caseload, according to the Kachin State authorities, between November 2011 and the end of February 2012, the number of IDPs living in Myitkyina, Waingmaw, Bhamo, Mansi, Momauk, Puta-O and Shwegu has risen from 9,900 to 19,000 IDPs. In the northern part of Shan State, available information indicates similar pattern of displacement with a caseload of 1,200 IDPs in five camps. Additionally, there are indications that a number of people fled just across the Myanmar-China border and live with relatives or in temporary makeshift camps, but information is still unclear and cannot be independently verified.

Following the Government's invitation, an independent inter-agency rapid needs assessment was conducted in September 2011 in 39 locations in some IDPs sites (camps, host families, public buildings) of five townships (Bhamo, Momauk, Myitkyina, Khaunglanhpu and Waingmaw) targeting 5,900 IDPs. The assessment indicated that some 57% of the IDPs were women, 56% were children under 18 years of age, 17% children under 5, 12.5% female or child-headed IDP families and 0.96% unaccompanied elderly. Of the assessed IDPs, some 4% were identified as extremely vulnerable individuals (EVI). Although no report of child abuse/exploitation and missing children was recorded during the assessment, the relatively high number of separated and unaccompanied children and of female or child-headed IDPs families highlighted the need to take preventive measures to mitigate potential risk factors.

The findings of the September assessment indicated that living conditions, particularly in larger temporary camps/shelters and community buildings where the population density was high, were challenging. Twenty of the 39 locations were in urgent need of additional shelter, water and sanitation. Most of the assessed IDPs required additional NFI support, including plastic sheeting, cooking utensils, blankets and clothes. Over half of the assessed IDPs living in temporary camps/shelters and community buildings were facing food access issues. While access to water for domestic and hygiene uses was sufficient in the assessed locations, availability of



*IDP camp in Waingmaw Township.*

safe drinking water was an issue, as less than half of the assessed IDPs had access to sufficient quantities of safe drinking water. There was no report of disease outbreak or mortality cases since June 2011 in any of the assessed locations. Over half of the locations had access to health care services provided by basic health staff. Primary school children in all assessed locations had access to varying degree of schooling support. However, education materials were in short supply.

Another assessment was carried out by Relief Action Network for IDP and Refugee (RANIR) in January 2012 in 21 IDPs camps (19,700 IDPs) in hard-to-reach areas, using a similar data collection format administered in the September assessment. Preliminary findings indicate that, of the total assessed caseload, some 54.4 % are women, 50% are children under 18 years of age, 15.2% under five and 7.2% the elderly. While 79% of the IDPs are in camps which need renovation and/or reconstruction, 12% are with host families. The assessment also indicates that urgent needs remain in several sectors, including education, food, health, NFIs, protection, shelter and water and sanitation. The findings also show that 18 out of 21 assessed locations have inadequate food supplies to fulfill the basic food needs and lack firewood for cooking. Although IDPs have received some levels of NFIs support, additional items such as blankets, cooking utensils, plastic sheeting and clothing are needed. Although most of the IDPs camps have a various degree of access to health care services, additional medical supplies and health professionals are needed in view of protracted displacement. The RANIR assessment indicates that a number of sexual and gender based violence (SGBV) cases were observed in some camps. Out of 21 assessed locations, nine camps reported to have no access to



education/school and eight need additional school materials.

Ongoing monitoring and available information collected by partners providing assistance to IDPs indicate that some IDPs, particularly from Myitkyina and Bhamo area temporarily return to their villages for a few days or during daytime. These return occur as IDPs attempt salvaging some of their livelihood, whilst leaving some of the family members (mostly elderly, children) in camps or with relatives in view of concerns over existing tensions, possible resurgence of violence and presence of landmines as well as ensuring sustained access to much needed relief aid as they lost their source of income and assets during displacement. Available information indicates that these returns are not permanent or substantial in numbers.

Albeit most of the IDPs would like to return as soon as feasible, they continue to express concerns over ongoing tensions and insecurity as well as presence of landmines as major factors preventing return. The under-served IDPs – and those in host families in particular - may be willing to take a higher level of risk and attempt returning to engage in some limited agricultural activities to complement the relief package they have access to. This trend is likely to increase as the time for land preparation for the major agricultural season (April-May) approaches. Unless the situation stabilizes, untimely return may trigger additional protection concerns over the coming months. Possible further exposure to traumatic events is also likely to require additional attention to longer-term psycho-social support and trust building measures, possibly further compounding the sustainability of returns.

The Kachin State Government is developing a framework for return and recovery for IDPs in Ka-



*Shelter materials are urgently needed for IDPs in Kachin.*

chin State, including resources needed/available to establish an enabling environment for a safe return of IDPs. The Union Government and the Kachin State Government have clearly stated that only those who wish to return should do so. The State Government indicated that assistance to the people affected by instability continues to be needed, in form of relief assistance or recovery operations, well into 2013.

### Planning assumptions

Through a consultative process with local and international partners operating across the entire affected areas, partners elaborated three scenarios, analyzed their likelihood and related humanitarian consequences.

Whilst the situation in Kachin and northern portion of Shan States is already of concern, and whilst efforts are made to negotiate an end to the current instability, available information indicate that tensions continue to prevail, and that displacement is likely to be protracted.

Partners agreed that the most likely scenario for the next year will encompass protracted displacement with sporadic, localized return, unless parties agree to a political settlement. For planning purposes, partners agreed to use a planning figure of up to 60,000 persons displaced who will need life-saving relief assistance for at least one year. The situation in the camps is expected to deteriorate during the dry season (March-May) due to lack of water, and further aggravated in the monsoon season starting in May. Interventions in pocket of return, even if temporary, will also need to be contemplated in projects. To do so, programmes must have a degree of flexibility for interventions which – whilst taking into account protection concerns – will enable the possibility to seize opportunities to support voluntary returns as they occur.

Taking into consideration the results of the September and December rapid surveys, the estimated number of persons with special needs and acutely vulnerable people (4% of the total caseload) could reach 2,400; the number of children under 18 years of age 33,600 (56%), of children below 5 years 10,200 (17%) and of female or child headed IDP families 7,200 (12%).

### Assistance provision & priorities

The Kachin State Government, local Non-Governmental Organizations (NGOs), community-based organizations (CBOs), Faith-Based Organiza-

Core Elements	Planning assumptions
<p><u>Peace agreement signed, security conditions are re-established, population progressively returns to villages of origin</u> (best case scenario)</p>	<p>Displacement progressively decreases, even if vulnerable groups continue to remain in location of displacement until social services are fully re-established.</p> <p>Displaced children in school age will remain in the camps to continue attending classes until education services are guaranteed in villages of origin.</p> <p>Urbanization of IDPs in current locations likely for a percentage of them even once return conditions are in place.</p> <p>Assistance requirements shift from life-saving, relief to recovery interventions, including replacing lost assets and livelihood and re-establishment of basic services. Concerns over presence of unexploded ordnances and landmines require attention.</p> <p>Transport, electricity progressively return to normal, interventions required to repair damages.</p> <p>Access to all affected areas possible, re-starting of long-term programming/interventions, especially by local partners with well established presence, with international support.</p>
<p><u>Discussions between parties continue, fluctuating level of tensions</u> (most likely scenario)</p>	<p>Displacement, affecting up to 60,000 people (including 5,000 in northern Shan), likely to continue for at least one year. Number of IDPs continues to fluctuate. IDPs in host families will attempt joining those in camps or be the first to go back as host families' coping capacities have been exhausted.</p> <p>People will continue crossing into China and back to Myanmar, depending on availability of assistance and on escalation/reduction of tension.</p> <p>Situation in camps expected to deteriorate during the dry season (March-May) due to lack of water, and further aggravated in the monsoon season starting in May.</p> <p>Some IDPs face difficulties in reaching areas where assistance is provided.</p> <p>Pockets of temporary return need specific intervention. Vulnerable groups belonging to returning IDPs families continue to stay in camps in view of concerns over security, landmines. The scale of temporary returns increases as the agricultural season starts (land preparation for the main season – April/May) and in areas where tensions are lessening.</p> <p>Primary health care and education staff, displaced together with the rest of the village population, continue providing services in camps/sites, and will return to villages once the situation normalizes.</p> <p>Sporadic transport, electricity disruption possible. Air travel continues to be possible.</p> <p>Progressive opening of access, albeit with difficulties, and depending on advocacy to promote independence of humanitarian aid from political discussions. Security, rains and logistic concerns compounding access to IDPs locations.</p>
<p><u>Discussion between parties breaks down, insecurity escalates</u> (worst case)</p>	<p>Number of affected population reaches as many as 70,000 people. Disruption of basic services, supplies to markets, transport and electricity is recorded. Population will have extremely limited options to flee violence. Progressive increase in mortality and malnutrition.</p> <p>Access to population in need decreases, as some partners decide to relocate and operate remotely. Increased transport difficulties seriously hamper access to population in need. Local organizations continue to carry out activities, albeit</p>

Partners agreed to revisit scenario and requirements in three months time to ensure that plans do reflect the evolution of the situation on the ground.





*Food supplies are urgently needed in IDP camps in Kachin.*

tions (FBOs), with the support of United Nations (UN) agencies and international NGOs, private donors, and other organizations have been providing some assistance to the IDPs since June 2011. In general, according to partners, due to easier accessibility and the presence of a larger number of agencies, IDPs in areas covered by the Government's services have received assistance more than those in other locations which are not fully accessible. According to local authorities and partners, concerns exist also for some of those with host families in Myitkyina and Waingmaw, which have yet to be registered, as well as the capacity of host families to continue catering for the displaced. Coping mecha-

nisms are being exhausted, and numbers of IDPs continue to fluctuate. Details of assistance provided and gaps are available in the sectoral analysis.

Whilst partners are doubling efforts and use all available resources to respond to the needs of the affected people, more support is required to continue carrying out basic interventions, including in support to local partners which have been the primary respondent in terms of staff, materials and funding.

## **FOOD & LIVELIHOOD**

**(Facilitators: WFP & UNDP)**

### **Food**

Since August 2011, in view of concerns over the capacity of IDPs' self-sustenance over food provision, WFP started distributing basic food items (Kcal 2,100/person/day – including rice, pulses, oil and salt) to population in camps/sites in Myitkyina, Waingmaw, Bhamo, Mansi, Momauk and Shwegu in Kachin either through direct implementation or through NGOs cooperating partners, including KMSS, Shalom and World Vision. Moreover, WFP provided food to more than 3,000 IDPs in temporary camps in Nam Khan, Man Waing Gyi, Mone Baw, Kut Khai, and Man Tone in northern Shan State. In addition to four basic commodities, pregnant and lactating mothers and children under five

### **Assistance Provided to Myitkyina, Waingmaw, Bhamo, Mansi, Momauk and northern Shan since June 2011**

Food Aid	1,032 metric tons of food aid (WFP) for almost 20,000 IDPs in Kachin and northern Shan. Limited scale distribution of unconditional household cash grant and complementary food.
Livelihood	Small-scale livelihood programme in areas where the Government's services are available.
Non-Food Items (NFI)	3,500 basic and complementary NFI kits distributed, 4,000 in stock for immediate distribution.
Shelter	430 HH housing spaces under construction to host 2,150 people.
Camp Coordination and Camp Management (CCCM)	One Training of Trainers (ToT) course done in Yangon with representatives of different organizations (13 people trained); two CCCM trainings in Myitkyina (50 people) and two in Bhamo (50 people).
Health	Health assistance and distribution of 2,500 bed nets to IDPs.
WASH	Provision of water purification material, water containers and construction of latrines in camps.
Education	Six temporary learning spaces with latrine facilities (12,650 IDP children) and school materials to 13,000 displaced primary students and children under five years old who have access for Early Childhood Development services.
Protection	Protection monitoring, establishment of Extremely Vulnerable Individuals (EVI) referral system and guidelines, and EVI assistance provided in terms of medical support for landmine victims and additional distribution of NFIs. Child Protection Trainings (73 people) and provision of 110 child friendly space kits to 40 locations (3,020 IDP children).

years of age received fortified blended food (Rice Soya Blend - RSB) as nutritional supplement.

From an initial caseload of 3,600 in August, WFP-supported assistance to IDPs in Kachin gradually increased, and a caseload of 20,000 accessible beneficiaries are being assisted as of February 2012 both in Kachin and northern Shan. Over 1,000 metric tons of food have been distributed between August 2011 and February 2012. This response had been possible thanks to funds received from CERF and from AusAid and diverting resources in the WFP pipeline to meet the needs triggered by the situation in Kachin, albeit at the expense of some other planned activities in the region and in other parts of the country.

Some other organizations have delivered fresh food items to complete the daily intake. Whilst some concerns exist over accessibility to complementary food (curry, chilies, vegetables, meat, etc) as well as firewood, in the above-mentioned areas organizations involved in nutritional programmes do not indicate, thus far, any serious concern with regard to the nutritional status of the population. Food security in camps/sites assisted by WFP and partners is stable but precarious, due to the heavy reliance on food assistance and minimal availability of alternative coping mechanisms.

In areas beyond Myitkyina, Waingmaw, Bhamo, Mansi, Momauk and Shwegu and locations in north-



Photo: WFP

*IDP children need nutritious food.*

ern Shan, food provision is a major concern as interventions sustainability is challenging. RANIR surveys and other available information indicate that food distribution usually takes place on weekly or fortnightly basis, that supplies are short and pipeline breaks intermittent and that in 18 out of 21 assessed locations by RANIR, food is a concern for most IDPs.

According to the planning assumptions, whereby some 60,000 people will continue to be displaced and would be in need of basic food assistance (full food basket: rice, pulses, oil and salt; blended food where and if required; and small cash grants for complementary fresh food) until at least February 2013, additional estimated US\$ 8.6 million would be required just for basic food provision. Food assistance, however, is likely to be required even for a prolonged period of time (i.e. at least till October 2013 for those persons whose food/income relies on agriculture or livestock) as a large-scale return seems to be unlikely ahead of the next planting season (May-2013). WFP and food aid partners plans to add cash grant to dry food ration in order to complement the provide diet with other fresh food, which can be procured in local markets.

It is worth noting that the lead time from the confirmation of a grant to the delivery of food at distribution points is in average three months. WFP has taken steps to ensure that its warehouses in the region are always stocked at their maximum capacity in order to minimize possible disruptions of supply routes.

In addition, alternative logistic arrangements for food and other supplies to reach affected areas (to and within Kachin State) are being continuously reviewed in order to use the most appropriate means of transport (road, railway and river), taking into account the seasonability and absorption capacity of the different alternatives .

### Livelihood

Since June 2011, displacement caused major disruption of livelihood activities. Whilst no data is available with regard to yield losses during the main 2011 planting season for rice (June to Dec 2011) and maize (Sep 2011-Jan 2012) and for the winter season crops such as groundnut, mustard, potato and vegetables (Nov 2011-Feb 2012), it is estimated that the harvest has been severely compromised. In addition, displacement also caused loss of assets, including tools and farming animals.

Partners agreed that IDPs' engagement in productive activities would reduce dependency, enhance dignity as it would allow IDPs to access sources of income to cater for daily needs that are not fulfilled by relief interventions. Furthermore, these activities would build capacities that could be further expanded and made at good use when return occurs, and complement psycho-social support activities aimed at addressing traumatic experience resulting from displacement. Whilst until now IDPs in camps and with host families have had limited opportunities to engage in productive activities, in view of protracted displacement, partners agreed to assess opportunities and engage in livelihood interventions.

In December 2011, UNDP launched a livelihood and income generation needs assessment in 53 IDP locations/camps in Myitkyina, Waingmaw Bamaw, Momauk and Shwegu townships, targeting 2,815 households in camps (8,941 IDPs). Findings indicate that some 45% of IDPs (1,266 families comprising of about 4,020 IDPs) in assessed locations expressed interest in engaging in livelihood activities such as home gardens, small livestock breeding and small-scale trading. Constraints for carrying out such activities include availability of space within camps, limited water source for some livelihood activities such as home gardens, interest and experience of IDPs and limited opportunities for specific vulnerable groups such as pregnant women and the elderly.

So far, Metta Foundation has provided cash grants of Ks. 20,000 to 200,000 per households for income generation activities (small scale trading of vegetables and fruits) to 53 households in 16 camps in Bamaw, Momauk and Shwegu townships. UNDP is engaging with local partners to implement camp-based livelihood activities for 1,266 families over a period of three months, starting March 2012. The activities will include small animal rearing, home gardens, small scale trading, handicraft making, provision of carpenter and masons' tools, soap making, weaving, fuel shop, sewing, candle making, provision of stone grinding machines as well as activities related to skills building and vocational training. Other local and international organizations are also gearing up for such activities in camps and in locations where temporary return is taking place. Among these, Solidarités International (SI) is planning to carry out skills building activities in 15 camps in Momauk, Mansi, Bhamo townships, and potentially in Lwejel.



*Livelihood assistance is needed particularly for IDP women.*

Although at present only a fraction of IDPs has expressed interest in engaging in livelihood activities while in camps, it is expected that more will be enrolling for similar interventions as they observe the results of ongoing projects. Livelihood/income generating projects will be administered in form of cash grants (US\$80 per family every six months) against planned activities. Additional costs will be required for capacity building and monitoring. As such, it is estimated that implementation of livelihood programmes for an estimated 60,000 IDPs (12,000 households) in camps (Feb 2012-Jan 2013) will cost US\$2.15 million.

Livelihood interventions in camps will also take into consideration the possibility of support to voluntary return, as they occur. Projects will need to allow sufficient flexibility for expansion of activities in such areas whilst taking into account protection and sustainability concerns.

Self-sufficiency of IDPs will remain a concern for some time even after return occurs as long term impact on the food security situation is to be expected. A large scale, multi-sectoral resettlement program will have to be put in place to cater for such interventions.

## **SHELTER, NFI & CAMP MANAGEMENT**

**(Facilitator: UNHCR)**

### **Non-Food Items (NFI)**

Many of the displaced abandoned their villages empty handed, and, based on the September assessment results, distribution of non-food-items (NFIs) was prioritized since the onset of interventions. UNHCR, UNICEF, Solidarités International World Vision and other partners have been able to mobilize existing resources and already distributed



approximately 6,500 NFI basic households and complementary kits to date. These kits include basic items (kitchen set, mosquito nets, blankets and plastic tarpaulins) as well as complementary kits (warm clothes for children, dignity kit / sanitary cloth for women, towels, soap, detergent, floor mat, purification tablets, and plastic bucket). As of February 2012, UNHCR has additional 4,000 NFIs in stock for immediate distribution, which were purchased with its internal emergency funds. UNICEF also has a total of 500 family kits for distribution in the affected areas.

Available information indicates that NFI kits are particularly needed in camps not covered by the September assessment. RANIR assessment findings report among priority needs additional items such as blankets, cooking utensils, plastic sheeting and clothing. The UN mission to Laiza in December managed to dispatch some 800 household family kits, covering only a fraction of the needs of 1,500 families living in two camps.

Procurement of NFI was calculated on the basis of the December scenario (up to 50,000 IDPs, or 10-12,000 families). In view of continuous instability, and protracted displacement, the planning figure has been revised to reach a caseload of up to 60,000 persons affected (12-15,000 families), thereby triggering the need for procurement of additional 10,000 NFI kits, at an estimated cost of US\$1,117,628, including procurement, customs clearance, and transportation costs. The new kits will serve to support some 8,500 households who are yet to be reached as well as those who have been displaced since the beginning of the conflict and whose initial package are beyond their life span due to normal day-to-day use. It is to be noted that local and international procurement of additional NFI kits will take 8-12 weeks (including transportation to Kachin State).

#### NFI activities

- Identification of IDP in need of NFI;
- Procurement of NFI kits (basic and complementary items);
- Coordination with the Government and local partners for permits and logistical arrangements, etc;
- Complete distribution of NFI kits.

#### Shelter & Camp Management

Although UN and partners have provided a limited number of shelter interventions – such as 430 emergency shelter units - in some areas, additional shel-



Shelters are urgently needed for IDPs in Kachin.

ters remain needed. The continuous increase in the number of IDPs since June resulted in overcrowding of camps, and the establishment of new sites, which are in equally poor conditions. This trend is likely to continue as IDPs with host families tend to join camps as coping mechanisms of the host families have been exhausted, and in order to get easier access to assistance. Most of the camps in Myitkyina, Bhamo, Waingmaw, Momauk and Kaunglanhpu townships located in monasteries and churches are crowded with new arrivals from rural areas and have insufficient resources to provide proper emergency shelter units for each family.

Furthermore, variation of construction standards and shelter condition across and within camps has the potential to foster tensions among IDPs. As displacement is likely to be further protracted, alternative solutions need to be found. In addition, replacement of shelter material and/or shelter improvement is needed in camps which have been set up at the beginning of the crisis, as the ones used are beyond their life span and the number of IDPs has significantly increased since June 2011. Moreover, there are concerns over the adequacy of shelters during the rainy season (May-October).

For cooking purposes, community kitchens were built, including because of limited availability of space. In some areas, cooking place in the open air, located close to the shelters, is problematic and the situation is likely to worsen as the storm season (March-April) approaches. Due to potential risk of fire and in view of the upcoming monsoon season, cooking arrangements need to be reviewed in most camps.

UNHCR, with its emergency funds, has built 269 emergency shelters in Myitkyina and is currently

building an additional 80 temporary family housing units in Bhamo. Other organizations, such as METTA, has been building additional 430 emergency shelters in other areas.

Priority for shelter interventions, compared with the December planning scenario, has increased dramatically in view of the uninterrupted influx of persons to camps and protracted displacement conditions, increased overcrowding, inequalities of shelter condition across and within camps and the need to replace shelter materials. Considering the new planning scenario, partners agreed that construction of additional 8,000 new emergency shelters and 100 communal areas (cooking, gathering spaces, etc.) in the existing camps is crucial. The required budget for such plan is US\$4,802,351.

Camp Coordination and Camp Management needs are large, not only in terms of training, but also in implementation and strengthening of coordination mechanisms. Until now, camps are running with the support of religious organizations and volunteers, and the level of inter-camp coordination remains very limited. Moreover, most of the camp management activities are performed on a volunteer basis by individual members of different religious organizations, which is not sustainable. UNHCR has conducted a five-day Training of Trainers (ToT) Camp Construction and Camp Management (CCCM) course in Yangon and provided four CCCM trainings in Myitkyina and Bhamo, targeting local authorities, NGOs, FBOs, CBOs, volunteers and UN staff directly involved in camp management activities in Myitkyina, Waingmaw and Bhamo Townships.

Financial support for current camp coordination mechanisms is a priority, as all camp coordination members have been working on a voluntary basis since June 2011 and do not have any additional resources to do so for an extended period of time. It is estimated that additional UD\$150,000 will be needed until the end of the year for a monthly support US\$63 (Kyat 50,000) for at least two people per camp, for a total of 100 camps in places where CCCM coordination will be established. Furthermore, CCCM training continues to be a priority, given the fact that only three townships have benefited up to now. It is estimated that US\$50,000 will be needed to conduct at least 8-10 similar training in remaining areas such as Lwejel, Mai Ja Yang and Laiza, among others. The total budget needed for Camp Coordination and Camp Management activities is US\$333,797.

Coordination with WASH sector to complement

shelter construction and prevent possible emerging complications in term of sanitation, water provision, etc. and with the education sector in terms of access to schools for children in new/existing IDP settlements is warranted. Permanent coordination with the protection sector to secure that shelter and camp management interventions are appropriately responding to existing concerns and for the implementation of CCCM training.

#### Shelter & Camp management activities

- Identification of shelter construction and/or improvement needs;
- Procurement of shelter construction/improvement materials and arrangement of labor/technical needs;
- Coordination with government and local partners for permits, logistic arrangements, etc.;
- Construction/renovation of emergency shelters;
- Reinforcement of CCCM coordination mechanisms and support to camp coordination volunteers;
- CCCM trainings for local NGOs, authorities and IDPs.

### HEALTH/NUTRITION & WASH (Facilitators: Oxfam and UNICEF)

#### Health/Nutrition

Due to access constraints, the impact of the ongoing conflict on the overall health systems remains difficult to determine. It is most likely that facilities within the three most severely affected townships namely Waingmaw, Momauk and Mansi are not functioning.

According to health partners, commonly reported diseases among the IDPs remain more or less similar to the findings of the September 2011 assessment, including seasonal flu, diarrhea, tuberculosis, skin diseases and malaria; with additional reported cases of depression, psychological trauma and hypertension. According to the RANIR assessment, 19% of IDP camps have not access to functioning health facilities and 33% of them reported inadequate availability of medical supplies. There have been reports of diarrhea cases in some camps over the past months but further spreading of the disease has been controlled and prevented through intervention in hygiene and sanitation, health education as well as administration of oral rehydration therapy. Immediate reporting for veri-

fication on severity of the disease by medical professionals and establishment of clear referral systems remain important.

As the number of IDPs has been increasing and camp sites becoming increasingly overcrowded, the hygienic conditions in camps/sites have worsened, raising potential health concerns related to hygiene. Additionally, according to partners, the most recently established camps are of lower standard, with inadequate sanitary and hygiene conditions, and often located in remote areas with limited access to basic services.

The prevalence of TBC is high in the area under normal circumstances<sup>1</sup>, and overcrowding and protracted displacement will increase the risk of a further spreading of the disease. Furthermore, as the living conditions in camps are not improving, stepping up of surveillance in both urban and rural camps is increasingly critical. Provision of NFI and blankets remains crucial, especially for the newly arrived IDPs, to reduce the prevalence of respiratory illnesses.

About 1,500 bed nets have been distributed and additional 1,000 are being delivered<sup>2</sup>. Given the fact that the affected townships are among the high malaria endemic areas, further distribution will be needed to ensure all IDPs receive adequate protection. Stepping up of water and sanitary interventions will also be required to mitigate the risk of further outbreaks of communicable diseases.

The September assessment raised concerns over immunization coverage of the displaced population, which is particularly alarming for measles and polio, and further compounded by the overcrowding of camps/sites. Following the assessment, health officials conducted a targeted (screening) measles campaign of IDPs children under five years of age in all IDP locations in Myitkyina and Waingmaw. As a part of the national immunization campaign scheduled for March of 2012, all under five children in the affected townships should receive multi-antigen vaccination, including measles, supplemented with an additional doses of vitamin A. The cost of such campaign for the affected areas of Kachin, excluding the actual cost of the vaccines, would amount to some US\$ 10,000.

<sup>1</sup> According to the government data prior to the conflict, sputum positivity rate of T.B stood at 88/100,000 persons of the general population.

<sup>2</sup> As each net usually able to cover two adults and one child, the distribution of 2,500 mosquito nets will benefit around 7,500 people.

As per the recommendations of the September assessment, a nutrition rapid assessment will be conducted by National Nutrition Center in collaboration with the Kachin State Government, and with support from UN, by April 2012. This study will provide more comprehensive data on the nutrition status of IDPs and guide appropriate nutrition interventions.

The government, with UN support, provides health care services including provision of essential drugs, antenatal care, HIV prevention/treatment and malaria control, among others, for IDPs primarily in the urban and peri-urban IDPs camps/sites of Myitkyina, Waingmaw, Momauk, Bhamo, and Mansi. Specialized medical NGOs have complemented this

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#### HEALTH/NUTRITION activities

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- Strengthening of surveillance of communicable diseases;
  - Training of volunteers for syndromic reporting of events and distribution of IEC material to complement the capacity of midwives to regularly cover all IDP locations;
  - Distribution of rapid diagnostic kits for frontline health workers to diagnose communicable diseases (dengue, cholera, malaria, STI, and typhoid);
  - Provision of specimen collection kits and transportation cost for collection of specimen for analysis;
  - Treatment and referral;
  - Provision of clean delivery kits to cover all women of child bearing age. Dignity kits would be covered through the shelter & NFI sector (distribution);
  - Referral cost support for emergency care and delivery;
  - Supply of essential medicine (IEHK) to cover 60,000 people for one year;
  - Awareness raising and prevention;
  - Provision of IEC material to educate communities on effective means to prevent communicable diseases;
  - Routine immunization of multi-antigens (measles, DPT, OPV, TT, BGC) of all under three children in the affected townships;
  - Nation-wide Measles Campaign for 9 months to 5 years old children. Funding for measles vaccines is secured while additional funding would be required for operational costs for hard to reach areas.
  - Detailed health assessment;
  - Nutrition assessment of all under-five children in the areas of displacement;
  - Regular monitoring of the health situation by UN staff locally.
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assistance in remote locations. Although some agencies have scaled up their existing health assistance to a certain degree, additional resources for basic treatment and referral support continue to be required to complement and strengthen existing efforts. Since June, the UN has provided sufficient essential drugs and other medical supplies to cover the needs of some 35,000 people till end of April 2012. However, the current stock will need to be replenished to provide the needs of up to 60,000 IDPs over a period of a year.

In order to establish a basic primary health coverage (surveillance, diagnosis, treatment, referral and immunization) support would need to be channeled through the existing public health system, complemented and augmented by specialized medical organizations with technical capacity, as well as volunteers mobilized through local partners and camp management committees. The plan would need to be flexible, and any activity indicated tentative, given the fluctuating situation and the many uncertainties that pertain. The activities in the health sector, including sensitization of volunteers, medical supplies and diagnostic as well as clean delivery kits procurement and distribution, IEC materials, transportation etc would cost some US\$180,000.

## WASH

Water, sanitation and hygiene issues are of critical concern especially in view of the upcoming dry season (March-May), followed by the monsoon rains (May-October), which pose dangers of water scarcity (dry season), flooding and unsanitary conditions (monsoon).

Safe water is one of the priority needs of displaced population, according to local agencies, despite the presence of many rivers and creeks in the local ecosystem. Many of the makeshift camps have been established along the river that divides Myanmar from China, which provides sufficient water for daily domestic use. There are concerns, however, of the water quality for drinking. Water availability differs between camps with the most recently established camps facing a dire situation. The access to safe water in urban camps (Myitkyina, Waingmaw, Bhamo and Momauk) is reportedly better, although the existing water supply systems will need to be supplemented in time for the approaching dry season. In some areas, water sources (primarily wells) reportedly dry up during the day as motorized pumps were installed since the arrival of the IDPs and the level of consumption is increasing. According to RANIR assessment in 21 hard-to-reach camps, 53%

of water sources in camps are contaminated (only visual analysis carried out by staff without specific WASH expertise) and four out of 19 assessed camps did not have sufficient drinking water.

UN, INGOs and local partners have been providing essential water and sanitation services since June 2011 in IDPs camps/locations in the areas where the Government's services are available. Through national NGOs and FBOs, a certain level WASH assistance has also been delivered to other affected areas, where additional WASH facilities are urgently needed. Wash partners include UNICEF, OXFAM, Solidarités International, KBC, Shalom, among others.

As the number of displaced continues to fluctuate, temporary and mobile measures – including household water purification – are likely to be the most suitable and effective solution in the short term. As soon as the situation improves and returns take place, more long term water supply options would need to be considered. The sanitary situation in the makeshift camp is of concern as only shallow open pit latrines have been con-

### WASH activities

- Provision of an adequate number of more durable latrines/toilets and bathing areas according to Sphere standards for safe disposal of human excreta;
- Upgrade of existing latrines and bathing areas to be more durable;
- Provision of safe and equitable access to a sufficient quantity of water for drinking, cooking as well as personal and domestic hygiene;
- Provision of water of sufficient quality to be drunk and used for cooking and personal and domestic hygiene;
- Provision of adequate facilities to collect, store and use sufficient quantities of water for drinking, cooking and personal hygiene;
- Provision and resupply of hygiene kits for families, including soap, sanitary napkins, etc.;
- Training for affected women, men and children of all ages to be aware of key public health risks;
- Contingency for water scarcity including trucking as a last resort;
- Support to local NGOs from experienced hygiene promotion trainers (Oxfam) and experienced WASH technical advisors (UNICEF);
- Monitoring of implementation and WASH issues by two experienced WASH specialists (UNICEF).

structed so far, intended for temporary use. As the displacement prolongs these pits have been filled, and more appropriate latrine construction is required. In some locations, WASH facilities, particularly the latrines with plastic pans and wooden floors have been broken due to the increasing number of users. In view of the extended stay of IDPs in the camps, materials should be replaced with more durable ones such as concrete floors, ceramic pans with water seals and water tight holding tanks to minimize health risks. Camp management committees need to be supported in building additional and more appropriate latrines in the camps/sites. RANIR assessment findings in hard-to-reach areas shows that 33% of latrines in the 21 camps are used by over 50 people (Sphere standards recommends up to 50 people per latrine for the short term in emergency situations, 20 people per latrine in the long term).

Evaluation from partners also indicate that high incidence of diarrhea, dysentery and skin diseases in these remote areas are mainly caused by poor hygiene practices and lack of hygiene items (especially soap and water containers), widespread use of open defecation in camps premises, drinking of contaminated water and inadequate drainage and waste disposal systems in all camps.

Water quality test and hygiene promotion should also be undertaken in all camps/locations. With support from partners, the Department of Development Affairs continues to support WASH related activities, including emptying of tanks and garbage collection but similar support is needed in other affected areas.

With extra resources it will be possible to build better latrines and wash rooms what means that the emptying would not be a problem for at least six months. Garbage collections will have to be organ-



Access to clean water is an issue in IDP camps in Kachin.

ized on-site in hard-to-reach areas. Provision of drainage and waste disposal systems are required in camps, particularly in those recently established. This concern will become more acute when the rains come. Additional US\$3,300,000 will be needed to cover the remaining needs in the WASH sector.

## **EDUCATION & PROTECTION** **(Facilitators: UNHCR and UNICEF)** **Education**

The extent of the impact of the conflict on the school system cannot be assessed comprehensively or accurately at the moment. However, available information indicates that 52 schools in hard-to-reach areas have been shut down, of which about 22 schools in severely-affected Mansi Township have been closed since June/July, due to the prevailing instability. As such, children from those schools were admitted to the classes in IDP camps/locations, including in temporary learning facilities. For example, about 2,300 out of 6,867 school children of Laiza and Mai Ja Yang areas are reportedly learning in three temporary learning facilities setup in some towns, including Laiza. RANIR assessment indicates that nine out of 21 camps have no access to education facilities or temporary schools and 17 of the locations need additional school materials.

According to the September 2011 rapid assessment and reports from partners operating in IDP camps/sites, the majority of IDPs (56%) are children under the age of 18. In areas covered by the Government's services, there are over 3,100 school aged children. Partners' assessment in nine camps/locations in the area not covered by the government services indicated that there are over 3,700 IDPs children in school age currently in camps. Across all affected areas, children have continued education either by attending local schools, or by attending classes held in temporary learning spaces. In areas covered by the Government's services, local schools have accommodated the IDP children. In addition, six temporary learning spaces (two in Myitkyina, one in Waingmaw, one in Momauk and two in Bhamo) for approximately 12,600 children, including those in early childhood programme, have been setup by UNICEF and local organizations.

School facilities are limited in hard-to-reach areas and even less available for those who fled to China. Available information indicates that, in the



*More teachers and schools are needed for IDP children .*

makeshift camps/sites setup close to the border with China, camp management committees have constructed over 60 basic temporary education facilities for primary education with the support of local partners.

Notwithstanding remarkable efforts made by IDP children and parents, teachers and education authorities to sustain education in displacement settings, partners, indicated that school dropout rates in the academic year that ended in February 2012 increased as parents could not support their children to continue their education. In some cases, a prolonged absence in school due to the conflict and relocation also made some parents to decide to skip the remainder of the school year.

Faith-based organizations, community-based organizations and volunteers are providing Early Childhood Development assistance to pre-school aged IDPs

#### EDUCATION activities

- Provision of ELP with bag to 12,000 IDP primary school children;
- Provision of 35 ECD kits to 1,000 children of age 3-5 years;
- Provision of 840 sets of school desks and benches for 28 Temporary Safe Learning Spaces;
- Provision of 140 blackboards for 28 Temporary Safe Learning Spaces;
- Provision of 100 school kits and 100 recreation kits to 100 schools in different IDP camps and Temporary Safe Learning Spaces;
- Establishment of 28 Temporary Safe Learning Spaces with latrine facilities;
- Monitoring of implementation and education issues by Emergency Focal Person, Resident Programme Officer, Education Officer and Education Field Monitor (UNICEF).

children in 30 camps/sites, with the support of NGOs and of UNICEF. This included psychosocial support which trained 48 volunteers across Mytkyina, Waingmaw, Bhamo, Shwegu and Mansi townships.

Earlier support of essential learning materials and temporary learning spaces for the IDP children only covered a portion of the IDP children. With more displaced children in school-age, as well as children under five needing early childhood development services, the needs are much greater. The District Education Office of Bhamo is planning to extend summer classes for IDP children who have missed a large number of days due to the conflict. A local organization is planning to extend its own regular summer programme to IDP children in an effort to keep children occupied in safe activities during the summer months. Education activities need to be sustained through the summer recess. Furthermore, agencies are preparing how to address the needs of school children to return to school in June without disruption, if the current situation continues. To do this, additional resources such as learning materials, school furniture and additional Temporary Safe Learning Spaces equipped with sanitary latrines will be needed for the local schools and host communities hosting the displaced children in other affected areas.

Out of the 60,000 IDPs considered in the planning scenario, some 12,000 (20%) are estimated to be children of primary school age and about 1,000 children are under five who are in need of access to Early Childhood Development services. In order for them to continue schooling starting June 2012, resources are required to setup 28 additional temporary safe learning spaces, to complement the six existing facilities. Construction of an estimated 56 units of sanitary latrines, provision of 840 desks and benches, 140 blackboards, 100 school kits, as well as essential learning materials will be required to complete the establishment of such learning spaces. Some 25 Early Childhood Development kits will be required to provide early childhood services for additional 1,000 children (1.65% of 60,000 IDPs) aged between 3 and 5.

Once the situation normalizes, attention will need to be paid to the repair and re-equipment of schools, including teaching equipment and supplies for students. It is likely that IDP children will remain displaced - even if the parents decide to return - until when education infrastructure are functioning again in their villages of origin.



## Protection

A number of protection concern, particularly for IDP children and women, identified in the findings of the September 2011 rapid needs assessment, including family separation, children being left unsupervised, as well as landmines presence, among others, are still voiced by the IDP as of February 2012. There have been recent reports of separated families (where family members left behind can no longer reach Myitkyina and have had to leave to other locations close to the Myanmar-China border), now requesting family reunification. The number of children separated from their families, or unaccompanied has remained an issue both in terms of the need to reestablish family links and if possible reunification, and also in terms of the protection risks, which poses to such children including but not limited to access to food, shelter and other resources, sexual violence, trafficking, child labor, and underage recruitment by armed groups.

IDPs have expressed serious concerns about the presence of landmines in their villages of origin, and in areas where livelihood activities are carried out (agricultural land, forest) as there have been reports of landmine-related incidents causing victims. Three cases reported, including one child, received medical treatment at the Myitkyina hospital, but do need follow up treatment, including rehabilitation. As such, mine risk education is crucial, especially in camps.

The IDP population is made up primarily of women (57%) and children (56%). Limited livelihood activities after eight months of displacement, place women and adolescent girls in an extremely vulnerable situation, and could potentially expose them at risk of sexual exploitation. This situation is further compounded by risks associated to firewood collection in the forest, especially by women. Psychosocial support is needed particularly for women, children and the elderly in view of reported SGBV cases in some camps.

Although the Ministry of Immigration and Population continues to provide national scrutiny cards and family registration certificates in IDPs camps/locations, where the Government's services are available, it is estimated that 12% to 20% of the IDPs in those locations remains in need of such documents.

To respond to some of the concerns, partners have mobilized resources for immediate response. UNICEF supported the setup of 110 Child Friendly Space



*Counseling and psychosocial support are particularly needed for IDP women and the elderly in Kachin.*

(CFS) kits to 40 IDP locations, addressing the needs of 3,020 children under 18 years of age. This was supported through child protection training provided to 40 staff and volunteer care givers, who run the spaces to provide a safe environment for children, deliver important messages on protection – including mine risk awareness – and use the spaces for provision of psychosocial support and counseling. These training were held in Myitkyina from 24-27 October and in Bhamo from 31 October to 3 November. From February 2012, child protection activities have been expanded to cover a total of 60 IDP locations, with the establishment of Child Friendly Spaces in all target camps, benefiting 10,200 IDP children. An additional 85 Child Friendly Kits are being delivered to these locations. Some 210 community members (Child Protection Volunteers and Child Friendly Space Volunteers) will be trained, and 510 of the most vulnerable children will receive support for referrals and follow-up and family contact and/or reunification.

UNICEF, in collaboration with the Department of Social Welfare (DSW), of the Ministry of Social Welfare, Relief and Resettlement, Danish Church Aid, and UNHCR conducted workshops in Yangon (20 until 24 February 2012) and Mandalay (27 February until 2 March 2012) relating to Mine Risk Education. The objectives of the training are to develop the capacity of relevant Government departments and non-governmental and UN agencies to educate communities in the identification of mines and how to avoid mine risks. Further mine risk education sessions are needed, especially at the camp level.

UNHCR has established guidelines for the identification and assessment of extreme vulnerable individuals (EVI) in camp setting, referral system, and

provision of assistance, as per their specific needs. Identification of EVI is ongoing and a limited number of cases have received medical support for landmine victims, whilst projects targeting additional 1,000 EVIs are being planned in the coming year.

The priorities in protection sector include documentation, capacity building for IDPs (see also livelihood), establishment of referral pathways, provision of psychosocial support, trauma healing and

addressing the need of EVI, as well as mine-action related issues. Children in particular need to be where possible reunified with parents, and extended special protection to ensure that they receive a fair share of resources, and are protected from the child protection risks identified above. Additional resources, for a total of US\$1,167,835 are required to address remaining concerns.

Protection	Activities
<b>Civil Documentation</b>	<ul style="list-style-type: none"> <li>• Identification of IDP population in need of civil documentation in coordination with NGOs, local authorities and Immigration Department;</li> <li>• Support, such as equipment and office supplies, for Immigration Department offices in the area.</li> </ul>
<b>Protection Referrals</b>	<ul style="list-style-type: none"> <li>• Identification of protection incident survivors;</li> <li>• Mapping of existing referral system and identification of gaps;</li> <li>• Strengthen capacities of NGOs and FBOs who are currently providing medical, psychosocial and legal assistance to survivors of protection incidents;</li> <li>• Strengthen reporting mechanisms.</li> </ul>
<b>Awareness Raising</b>	<ul style="list-style-type: none"> <li>• Coordination with partners to identify priorities for awareness raising;</li> <li>• Training and workshop on Basic Protection, Camp Coordination Camp Management (CCCM), SGBV, for IDPs, FBOs, NGOs, and local authorities.</li> </ul>
<b>Child Protection</b>	<ul style="list-style-type: none"> <li>• Continue to support the focal points for child protection in the camps responsible for the following: i) Setting up a protection referral mechanism for children; ii) registering unaccompanied/separated children and ensuring that they are prioritized for receipt assistance; iii) maintaining family links between the unaccompanied/separated children and child headed households and their families; iv) Managing the process of reunification with families at the relevant time to ensure that these children are protected from risk of recruitment, trafficking or labor exploitation.</li> <li>• Provide training, monitoring and follow-up of the work of these focal points;</li> <li>• Provide focal persons with a fund to enable referrals and for reunification for unaccompanied children, separated children, child headed households, then female headed households (e.g. travel for medical, legal assistance, travel for reunification);</li> <li>• Continue training of child protection volunteers in each camp location to support the work of the child protection focal points;</li> <li>• Continue provision of supplies for Child Friendly Spaces and refresher training for staff and volunteers on how to run the spaces, and how to deliver age-appropriate protection messages within the spaces.</li> </ul>
<b>Extremely Vulnerable People</b>	<ul style="list-style-type: none"> <li>• Identification of Extremely Vulnerable Individuals (EVI), through camp / collective centers management partners, NGOs and FBOs;</li> <li>• Provision of cash voucher assistance to identified EVIs;</li> <li>• Coordination with government and local partners for appropriate other referrals if</li> </ul>

## Coordination arrangements

Since the resumption of instability in June, partners in Yangon and in Kachin setup coordination arrangements to ensure the follow up of the situation and identify steps to assist the affected population.

Coordination efforts have been stepped up in Myitkyina and Bhamo, with inter-agency meetings taking place on a weekly basis, to which authorities are participating. These coordination arrangements at field level are critical to ensure information sharing, coordinate response efforts, identify needs and gaps, promote principled humanitarian action and table issues of concern, including access to all those in need. The exercise is also deemed crucial to build the capacities of local authorities on coordination of assistance in disaster situations.

Coordination arrangements for activities in other affected areas are of concern and require additional attention.

Meetings with humanitarian organizations are regularly organized in Yangon to support field-based coordination, analyze the situation and identify strategies to address issues of concern, including access as well as promotion of principled humanitarian operations, and identify avenues of dialogue with all parties to the conflict to ensure that assistance reach all those in need.

With the objective of defining this plan, local and international organizations identified facilitators for four main areas, including 1) food and livelihood, 2) NFI, shelter and camp coordination; 3) health, nutrition and WASH; and 4) education and protection as follows:

Sector	Facilitator(s)
Food and Livelihood	WFP and UNDP
NFI, Shelter and Camp Management	UNHCR
Health, Nutrition and WASH	Oxfam and UNICEF
Education and Protection	UNHCR and UNICEF