**HIGHLIGHTS**

- Suspension of MSF activities threatens to further weaken an already fragile health care system in Rakhine and puts many vulnerable people at risk.
- Protests take place against aid workers in Rakhine amid continued inter-communal tensions.
- New research looks into aid effectiveness from the point of view of those receiving the aid.
- Cross-line missions into areas beyond Government control in Kachin are continuing, but sustained access to all IDPs is needed.
- Mine Risk Education gathers pace in Kachin.

**Key FIGURES**

**Number of IDPs targeted in Rakhine State**

<table>
<thead>
<tr>
<th>IDPs in camps</th>
<th>110,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>IDPs living with host families</td>
<td>28,000</td>
</tr>
</tbody>
</table>

**Number of IDPs targeted in Kachin State**

<table>
<thead>
<tr>
<th>IDPs in camps</th>
<th>81,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>IDPs living with host families</td>
<td>10,000</td>
</tr>
</tbody>
</table>

**New IDPs (displaced in late 2013)**

| 2,000 |

Source: UNHCR, OCHA, CCCM

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**MSF-H is asked to halt activities in Rakhine**

On 26 February, MSF Holland (MSF-H) was instructed by the Rakhine State Government to cease its activities in Rakhine State. Reasons given included the expiry of its Memorandum of Understanding and the recent protests against MSF. As instructed, on 27 February MSF suspended all its activities in Rakhine State and on 28 February, following an instruction from the Ministry of Home Affairs to cease its operations throughout the country, MSF-H closed its clinics all over the country. MSF-H was subsequently informed on 3 March that it could restart its activities in the rest of the country but that the ban remained in place in Rakhine. The Government later publicly clarified that the suspension of MSF-H activities is a temporary one. MSF is seeking clarification on the specific conditions that have been laid down for it to be able to resume its activities. Intense negotiations for MSF-H to be able to resume its life-saving activities are continuing.

MSF-H has been providing life-saving assistance to the most vulnerable and hardest to reach communities in Rakhine State since 1994. In 2013, MSF staff carried out over 400,000 consultations and around 2,900 emergency referrals in eight townships in Rakhine. Over half a million people benefitted from their services, including primary health care, reproductive health, ante-natal and post-natal care, as well as treatment of malaria, HIV and tuberculosis. Since 2004, MSF-H has treated more than a million malaria patients across Rakhine State, where the disease is endemic.

With over 500 staff in Rakhine, MSF-H has been providing over 60 per cent of the international humanitarian response in the health sector in Rakhine State. The United Nations has informed the Government that it is very concerned about the potential humanitarian impact of a suspension of MSF-H activities in Rakhine, and the risk of this further weakening an already fragile system of support to vulnerable communities. Humanitarian organizations have made clear that replacing the MSF-H operation would be extremely challenging due to the scale and complexity of the current MSF-H operation and the extensive outreach to the most vulnerable groups that MSF-H has built up over many years.
Protests and continued inter-communal tensions in Rakhine

People in many parts of Rakhine State are facing increasing difficulties as inter-communal tensions persist. Muslims – including both those in IDP camps and those who have not been displaced – continue to face serious movement restrictions, making it difficult for them to access essential services and engage in livelihoods activities.

Meanwhile, as humanitarian organizations continue providing aid to people in camps (the majority of which are Muslim camps), there have been growing complaints from members of the local Rakhine community that not enough of the aid is reaching the ethnic Rakhine population. This has led to further tensions and in some cases aid workers assisting Muslims have been threatened and intimidated by local people.

Myebon is an example of a township where tensions are particularly high. Here, some staff from an international NGO resigned in February following multiple incidents of threats and intimidation. The international NGO (INGO) eventually had to suspend most of its activities as a result of the intense pressure its staff were facing. In late February, INGOs received an ultimatum to leave the township. Public anti-NGO letters by civil society organizations, with specific demands and ultimatums for INGOs to leave altogether, were also issued in Mrauk-U and Pauktaw.

There were a number of public protests in Rakhine in February against international organizations that are providing aid to Muslims. Some of the protests were specifically aimed at MSF. Protesters were also calling for enforcement of the 1982 citizenship law and a revoking of the right of temporary citizens to vote. Protests took place in Sittwe, Minbya, Mrauk-U, Maungdaw, Buthidaung and Pannayen.

Rakhine State authorities have asked international organizations to be more transparent in their work and to liaise more closely with the authorities at both state and township levels to avoid misunderstandings.

During February, the Deputy Minister of Border Affairs led a joint mission to Rakhine with UN agencies and members of the Central Coordinating Committee to address concerns raised by humanitarian organizations. Rakhine State authorities and international organizations also organized joint visits to a number of townships, to meet with community leaders and listen to their concerns, with the aim of repairing these relationships and building trust.

Improving aid effectiveness through 'listening'

In February, staff from the Collaborative Development Associates (CDA) “Listening Project” visited Rakhine and Kachin states. The visit was related to a research project that CDA is conducting in partnership with OCHA in five countries, including Myanmar. The research project is looking at aid effectiveness from the point of view of the communities that receive that aid. During the visit they focused on learning more about how crisis-affected people perceive the assistance they are receiving.

In Rakhine, the team visited Sittwe urban and nearby rural areas. Issues highlighted by displaced people included inadequate information-sharing by aid agencies, leading to mistrust and accusations that international humanitarian organizations are not sufficiently transparent. The perception of unequal and unfair distribution of assistance, featured strongly in conversations with Rakhine IDPs.
Initial suggestions from CDA to address community perceptions include increased information-sharing by aid agencies, the need for organizations to adapt their programmes based on community feedback, and the need for them to step up face-to-face engagement and dialogue with communities. Measures to help address perceptions of uneven assistance could include the building of stronger linkages between humanitarian organizations and those development organizations that have already established constructive relationships with the communities concerned; and by increasing communications about development initiatives that are already underway in Rakhine.

In Kachin, the CDA team visited Myitkyina and Waing Maw townships. Discussions focused on the key role of national NGOs and their interactions with international organisations. While national NGOs valued the skills, expertise and support of UN and international NGOs, they also called for more inclusive coordination mechanisms, better information-sharing, the streamlining of processes and more capacity building.

Displacement in Kachin has become protracted, with many families having been displaced from their homes for almost three years

Kachin: Cross-line missions to areas beyond Government control continue

Since June 2011, fighting between the Kachin Independence Organization (KIO) and Myanmar Government forces has displaced an estimated 100,000 people. More than 50,000 of these people are living in areas beyond Government control, where access for international organizations has been gradually opening up. The displacement has become protracted, with many families having been displaced from their homes for almost three years, and this is straining the resources of host communities and local aid groups.

Local organisations have been playing a leading role in the response, helping ensure people’s basic needs are covered under difficult circumstances. Strengthening coordination with and support for local organisations remains key to scaling up the response and better meeting the needs of IDPs.

Since September 2013, international humanitarian organizations have had more regular access to the areas beyond Government control, with 21 cross-line missions granted access during this period. These missions have delivered assistance to tens of thousands of people, and have provided support for local NGOs. However, despite their efforts, the assistance has not been enough to meet all the needs of displaced communities and inter-agency needs assessments have shown that more assistance is needed.

The UN and its partners continue to consult closely with the Government on ways to further expand access, as many activities require more sustained support to ensure vulnerable people get the quality of care, services and assistance they need.
Mine Risk Education gathers pace in Kachin

In February, UNICEF supported the establishment of a state-level working group on Mine Risk Education which will operate under the leadership of the Kachin Ministry of Social Affairs. Based on broad consultations with national and international humanitarian organisations, planning for Mine Risk Education activities has been developed and approved by State Authorities in Kachin. Mine Risk Education is a vital need in Kachin, particularly in areas where there has been armed conflict and where displaced people are considering returning to their homes.

In March, UNICEF, Danish Church Aid and the Danish Refugee Council/Danish Demining Group (DRC/DDM) will conduct rapid assessments in IDP camps around Bhamo and Myitkyina to identify those most at risk of landmines. Assessments will help humanitarian actors to tailor their messaging and their approach. They will also inform training of trainers. DRC/DDM will also train a team that will be deployed in the landmine affected areas in the southern part of Kachin and that will be able to rapidly deploy to areas of concern when new accidents happen.

UN provides $5.5 million to help 280,000 people in Rakhine and Kachin

The UN Central Emergency Response Fund (CERF) will provide US$5.5 million to ten projects to be implemented by UN agencies in Myanmar. This CERF “underfunded emergencies” allocation will provide assistance to 187,000 vulnerable people in Rakhine, and 93,000 in Kachin. UN agencies receiving grants will channel $2.5 million of this funding through local and international NGOs.

CERF funding will support the distribution of a basic food ration to 200,000 displaced people in Kachin and Rakhine. Some 5,000 displaced people in Kachin living in substandard shelters will be provided with new temporary shelters and access to clean water and sanitation facilities. Some 7,700 host families and the IDPs living with them in Kachin will receive support to restore their agricultural production.

Funds will also be used to increase support for primary healthcare services in Kachin and Rakhine, and to provide life-saving nutritional assistance to almost 60,000 children suffering from malnutrition in Rakhine. CERF funds will also enable some 3,900 post primary school age children in IDP camps in Rakhine to continue their education after almost two years with no educational opportunities. In both Kachin and Rakhine, support will also be provided for activities aimed at ensuring the protection of IDPs and the protection of civilians in general.