

HIGHLIGHTS

- Attacks on offices and premises of international organisations in Rakhine cause major disruption to delivery of life-saving services
- Inadequate mobile clinics and emergency referrals in Rakhine
- Inadequate access to protection services in Rakhine puts many at risk
- Water and sanitation problems in camps and nutrition programmes are halted
- Funding uncertainty affects aid operations in Kachin
- Meiktila: over 5,400 people remain in camps

Key FIGURES

Number of IDPs targeted in Rakhine State

IDPs in camps	110,000
IDPs living with host families	28,000

Number of IDPs targeted in Kachin State

IDPs in camps	81,000
IDPs living with host families	10,000
New IDPs (displaced in late 2013)	2,000

Source: UNHCR, OCHA, CCCM



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Aid work in Rakhine badly disrupted following attacks on organizations' offices and premises

Hundreds of thousands of vulnerable people in camps and communities were severely affected following the systematic ransacking of UN and international NGO premises in Sittwe, Rakhine State, on 26 and 27 March. In total, 33 premises belonging to seven UN agencies and seven international NGOs were ransacked, including 12 offices, 16 guest-houses and 5 warehouses. Some items were also looted and total damages/losses are estimated at over US\$1 million.

The attacks forced international organisations to temporarily relocate over 300 staff. Some staff subsequently returned but with tensions remaining high the authorities imposed strict restrictions on the movements of staff and over a thousand humanitarian workers had to cease all their activities. Many were national staff from Rakhine who were afraid to return to work following threats and intimidation from the local community.

The events took place in the period leading up to the census when tensions in Rakhine were already high. The mob violence was apparently sparked by rumours that spread within the community when an aid worker removed a Buddhist flag that had been put up by a local person outside an INGO office. Many Buddhist flags had been put up around Sittwe to symbolize opposition to the census. Following the incident, the President immediately set up an Investigation Commission and the Government pledged to bring those responsible to justice, to take measures to ensure the safety and security of all humanitarian workers, and to ensure the continuation of the aid operation.

The attacks and subsequent restrictions on movements of staff resulted in the suspension of almost all aid operations carried out by UN agencies and international organizations in the camps for internally displaced persons (IDPs) and amongst communities in the Sittwe area. In the meantime, the Government committed to cover medical emergencies and other critical life-saving needs through special interim measures involving the Ministry of Health and other national institutions.



Ah Nauk Ywe IDP camp in Pauktaw, Rakhine. Credit: OCHA, 2013

But services fall far short of the services that were being provided prior to the events of 26-27 March. The United Nations has informed the Government that it is deeply concerned about the plight of 140,000 displaced people in camps and settlements, as well as other vulnerable people. The situation is compounded by the fact that MSF-Holland has not yet been able to resume its vital life-saving activities in the health sector, following the instructions that were given earlier in the year for the organization to leave Rakhine. Development work in the Sittwe area was also brought to a standstill as staff were forced to suspend their activities.

Limited mobile clinics and emergency referrals

Following the attacks, health services for most of the 140,000 displaced people and half a million other vulnerable people in communities has been seriously hampered, particularly life-saving emergency medical referrals. The situation is especially difficult for people in camps, many of whom are under severe movement restrictions.

The most critical health services provided by humanitarian actors in Rakhine are mobile clinics in camps and to vulnerable people outside camps, as well as emergency medical referrals to Dar Paing, Sittwe, Maungdaw and Buthidaung Hospitals. Despite efforts by the Ministry of Health, which deployed additional health teams to Sittwe following the attacks, only a small number of displaced people have received critical healthcare services since 27 March. Before MSF-Holland was forced to suspend its activities, INGOs were doing an average of 400 emergency medical referrals every month. Following the events of 26-27 March, less than five per cent of these referrals were taking place according to the World Health Organization (WHO).

Humanitarian organizations have been calling for the immediate resumption of all life-saving medical services. Without this, they have warned that many lives will be lost. Meanwhile, they are continuing to provide staff, medicines and logistical support to the Ministry of Health.

Inadequate access to protection services

Over 300,000 of the most vulnerable people in Rakhine, including children in camps and women, depend on protection services provided by UN agencies and other international organizations in Rakhine. The violence that erupted in late March resulted in the suspension of these services. This includes the suspension of much needed psycho-social support to nearly 15,000 children in camps.



Young girl in Basra IDP camp. Credit: IRIN/Lonstreath , 2013

Health services and other special support for survivors of gender based violence are in most cases no longer available to women and girls in camps under the current circumstances. Over 200 individuals – including survivors of sexual and gender based violence – who were already receiving special support, are no longer getting this support.

Prior to the suspension of UN/INGO activities, staff of humanitarian organizations were carrying out about 130 protection monitoring visits every month. Due to the current movement restrictions, all of these are currently on hold.

It is critical that all life-saving services for displaced people and vulnerable communities in Rakhine are restored as soon as possible

Over 200 individual protection cases are no longer getting the support they need

Water and sanitation problems in camps

With the dry season almost at its peak, displaced people in Pauktaw Township were already facing water shortages before the outbreak of violence at the end of March. Following the movement restrictions, ICRC and INGOs put in place special measures, working in support of the State Department of Rural Development (DRD), to ensure water continued to be provided to camps in this area. DRD, with support from ICRC, took over water boating to some 3,700 people. Arrangements were also made for other camps in Pauktaw to receive fuel for water pumping and chemicals for water purification from neighbouring villages. These are temporary solutions and humanitarian organizations will continue to monitor the situation closely, working through DRD, until they are able to resume normal operations.

De-sludging of latrines in camps and transportation of waste matter has been badly disrupted. This is a major concern as there are additional health risks when latrines fill up and stop functioning. DRD has limited transportation capacity and has until now not been able to manage the treatment station without significant support from INGOs. As the monsoon season approaches, and with limited health services available in camps, it is particularly important to avoid additional sanitation problems. Normally, at this time of year, ahead of the monsoon season, extra efforts are made to de-sludge latrines.

Unless nutrition programmes are rapidly resumed, malnutrition rates are likely to rise and the conditions of children who are already malnourished are likely to deteriorate further.

Nutrition support programmes are stopped

The World Food Programme (WFP) and its humanitarian partners provide monthly food rations and other assistance to almost 360,000 people across Rakhine State. Among them, 140,000 people are living in camps and rely almost entirely on external assistance. WFP completed all the scheduled food distributions for March before its activities were suspended due to the civil unrest on 27 March. In anticipation of the census and the Water Festival, almost half of April food distributions were also completed in March. The attack caused significant damages to WFP's warehouse, offices, boats and vehicles and local contracted transporters were reluctant to deliver food to IDP camps due to security concerns. Nevertheless, WFP immediately put in place measures for the remaining April food distribution. Food rations will be distributed with support from the Rakhine State Government, who will provide trucks, drivers, fuel and police escort for transporting food to the remaining camps.

While these temporary measures have avoided any major disruption in food distribution, nutrition programmes have been severely affected. Following the disruptions to the aid operation and restrictions on staff movements, the Outpatient Therapeutic Programme (OTP) in the Sittwe area had to be temporarily suspended, affecting more than 300 children with Severe Acute Malnutrition (SAM). Unless nutrition programmes are rapidly resumed, malnutrition rates are likely to rise and the conditions of children who are already malnourished are likely to deteriorate further.

More funding needed for Kachin aid operations

Some NGOs operating in areas beyond Government control in Kachin are facing low levels of funding. Unless this is resolved soon, it could have a negative impact on the delivery of humanitarian services, including food distributions for displaced people.

Uncertainty about funding could have an impact on humanitarian services in Kachin

Karuna Myanmar Social Services (KMSS), a national NGO, has been providing food assistance to eight camps, supported by Trocaire. Trocaire is facing uncertainty about funding of its programmes, which put over 20,000 people in these camps at risk of food shortages during the coming months. WFP stepped in to fill the gap for April and if needed may also be able to assist in May and June, subject to having adequate humanitarian access. So far, one-month food rations, consisting of rice, salt, pulses and oil, have been provided, covering the most critical needs for April. Trocaire is currently working with a donor to finalize a proposal which should cover food needs for the next eight to nine months.

The Kachin Baptist Convention (KBC), a national NGO supported by Oxfam, provides food rations to 8,500 displaced people in six camps. These camps are not accessible to international organisations through cross-line missions due to logistical and security constraints. Funding for these camps was due to run out in April, but in March Oxfam received news that new funding would likely be forthcoming for the coming months.



Mother and child in IDP camp in Laiza, Kachin.
Credit: OCHA. 2014

Funding uncertainty affecting critical services for IDPs

Uncertainty about funding is also having an impact on other critical humanitarian operations in Kachin. Additional funding is needed to provide temporary shelter for approximately 15,000 people in camps, as well as to carry out maintenance and repair work on temporary shelters that are now close to three years old. There is an urgent need to improve water and sanitation in camps across Kachin, yet projects cannot begin unless more funding is secured. Protection services also need to be strengthened and funding is needed for this, including for addressing gender based violence and for prevention of human trafficking and monitoring. Unless more funding becomes available, it will also not be possible to carry out the necessary improvements in education for children and adolescents, and for increasing livelihood opportunities.

More funding needed for IDPs in Meikhtila

One year ago, on 20 March 2013, inter-communal violence erupted in Meikhtila, Mandalay Region, and rapidly escalated into large-scale clashes in other towns in the country. According to the Ministry of Home Affairs, 43 people died and 86 were injured in 15 townships across the country, with 1,355 buildings damaged or destroyed. In Meikhtila, the town that suffered the most severe damages and losses, over 12,000 people were displaced following the unrest. One year later, the majority of displaced families have returned home or have been resettled. However, over 5,400 people remain in temporary accommodation in five different locations waiting to be resettled.

Need to step up resettlement programme ahead of rains in June

According to the Government's resettlement plan, all those displaced were due to be resettled by the end of April. However, lack of funding and delays in construction has resulted in a situation where many buildings will not be completed on time and many displaced people are likely to spend another rainy season in camps. Conditions in camps need to be improved as they were only built for short-term use and many facilities are not equipped to withstand another rainy season.

Humanitarian assistance in the five Meikhtila camps had to be scaled down due to limited funding. Currently, only Save the Children and the Myanmar Red Cross Society are providing assistance. Displaced people in the camps are particularly badly affected and do not have access to adequate healthcare. Visits by doctors are not regular and there is a limited supply of medicines. Lack of hygiene is also a concern and while there is drinking water in the camps, it is the height of the dry season and water shortages have been reported. Food assistance is covered until the end of April, however there is uncertainty regarding provisions after that. There are few livelihood opportunities in the camps, and there are nutritional concerns. With people likely to remain in camps for the coming months, additional funding for displaced people in the Meikhtila area is urgently needed.

Humanitarian assistance in five Meikhtila camps had to be scaled down due to limited funding

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