

Myanmar HEALTH CLUSTER Bulletin - Quarter Four – 2023



**10 M
People
in Need**



**2.5 M
People
Targeted**



**769 K
People
Reached**



**118 M USD
Funding
requirement**



**35.2 M USD
Funding
Received**

HIGHLIGHTS


In 2023, the Myanmar Health Cluster reached 769 080 people in conflict-affected and remote areas across 11 States and Regions, including 339 760 internally displaced people. This achievement signifies 31 % of the cluster target for the year. Each people received one or more health services from partners with highest number reached in Kayin (24%), followed by Kachin (21%) and Rakhine (20%).

Although the number of people reached reflects a 40 % increase compared to 2022, the health services remained highly limited, fragmented and below standards due to legal, administrative and military impediments.

From 1 October to 31 December 2023, health partners reported 221 965 consultations, with more than 50% addressing Primary Health Care, 22% focusing on Maternal and Newborn Care (including 436 deliveries), 10% Mental Health Care and Psychosocial Support and 5% Trauma Care. Additionally, health partners reported 450 consultations related to a disability.

Health Sector

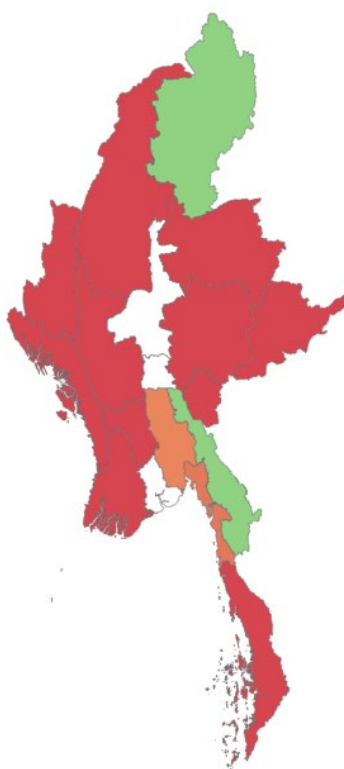
Member		
	International NGO	31
	National NGO	17
	Observer	13
	UN Agencies	7
Total		68


FUNDING \$US		
	Funding Received	35 M USD
	Funding Required	118 M USD


People Reached (Quarter 4) 2023


State/Region Name	Proportion of People Reach Q4
Kayin	237%
Kachin	164%
Bago (East)	78%
Mon	75%
Kayah	44%
Rakhine	43%
Shan (North)	40%
Shan (South)	6%
Chin	4%
Magway	4%
Tanintharyi	3%
Sagaing	3%
Mandalay	NA
Nay Pyi Taw	NA
Yangon	NA
Ayeyarwady	0%
Bago (West)	0%
Shan (East)	0%

% of People Reached Against Targeted, State/Region, Jan-Dec 2023, Myanmar



By Area		
	Northeast	217 109
	Northwest	24 760
	Southeast	372 374
	Rakhine	154 837
TOTAL		769 080

By Population Group		
	Displaced	339 760
	Returned	12 231
	Stateless	14 949
	Other Crisis affected	402 140
TOTAL		769 080

By Sex, Age & By Sex, Age & Disability		
	Female	388 275
	Male	380 805
	Children (Age < 18)	219 477
	Adult (Age 18-59)	490 591
	Elderly (Age ≥ 60)	59 012
	People with disability	9 427

	No Operation Area
	< 50% Reached
	50 - 80% Reached
	80 - >100% Reached

In 2023, the Health Cluster concentrated its efforts on enhancing governance, establishing localized coordination in four humanitarian areas in Northeast (Kachin, North Shan), Northwest (Chin, Magway, Sagaing), Southeast (Bago East, Bago West, Kayah, Kayin, Mon, Eastern Shan, Southern Shan & Tanintharyi) and Rakhine (Rakhine, Paletwa). A Strategic Advisory Group was formed, complemented by three technical working groups focusing on priority health services, data and preparedness and response for emergency. Additionally, the Task Force on sexual and reproductive health continued its ongoing activities.

The Health Cluster adopted the ICCG Data and information sharing Protocol – to ensure safe, ethical, and effective management of data in Myanmar. The Public Health Situation Analysis was updated and published - <https://reliefweb.int/report/myanmar/myanmar-public-health-situation-analysis-august-2023>. The document outlines on the key health risks for Myanmar in the year. It also provides insights into the Health System Status, Humanitarian Health Response and information sources and gaps. More than 10 trainings were conducted on data reporting, OPD/priority life-saving health services and communicable disease management, notably on cholera and dengue. These were implemented nationally in a cascade mode and sub nationally.

2023 was a year of immense challenges – from the Cyclone Mocha with winds reaching 190-250 km/h, making it one of the strongest cyclones on record in the country <https://reliefweb.int/report/myanmar/health-cluster-sitrep-no-1-tropical-cyclone-mocha-19-may-2023> to the intensification of clashes since October 2023. Together, health partners responded resiliently to meet the needs of affected displaced, returned, stateless and other crisis affected populations, within their capacities and authorizations. However insufficient funding has stand out as the primary challenge in several areas. The impact of underfunding in health cluster during 2023 had significant repercussions on humanitarian health assistance, resulting in the arrest of crucial activities in several areas such as mobile clinics lifesaving health services and financially supported referrals.

Finally, health facilities, health workers, patients and critical assets including operational vehicles remains targets of attacks. In 2023, 66 attacks on health care were documented via the WHO's Surveillance System for Attacks in Health Care (SSA) [SSA Home | Index \(who.int\)](#). These attacks resulted in at least 14 deaths. Each attack is deeply concerning, significantly impacting access to essential health services, especially for women, children, and other vulnerable groups.

UPDATE FROM NORTHEAST

Continuing provision of health services in Northern Shan during Humanitarian crisis

The escalation of armed conflicts in Northern Shan since October 2023 has huge impact on civilian lives and livelihoods, resulting in widespread displacement and significant humanitarian challenges. Consequently, several activities have been delayed, partners have had to relocate, and mobile clinic operations have been suspended in certain areas. Despite these challenges, partners remain committed to providing essential healthcare services to those in need, demonstrating resilience and dedication.



Despite access challenges, road blockages and security concerns, health partners are continuing efforts in providing cash assistance, referring emergency patients, delivering primary healthcare including maternal, child, sexual and reproductive and rights health services via mobile and static clinics, and addressing TB, HIV, and malaria in accessible areas.

By the end of January 2024, over 70% of partners are maintaining their operations in Northern Shan, although with reduced staff, indicating their commitment to providing essential services despite challenges.

Figure: LLINs distribution in Maimao Township, Wa area, Northern Shan State by Health Poverty Action

UPDATE FROM RAKHINE

Rakhine State is a disaster-prone area with protracted emergency nature. The recent intensified conflict has forced the temporary suspension of the activities in areas both public and private hospitals, and operation of international and national health partners. The fuel needs were high for operation theatre function at hospitals especially in Northern Rakhine.

Operational health partners are providing health services at their utmost effort, continuing emergency patient referral, teleconsultation modalities via the frontline health workers in the field in the midst of communication challenges.

Kayah State is conflict affected area with protracted emergency nature. Many of people displaced to Southern Shan. According to the UN report issued on 27 November, since the armed operation broke out on 11 November 2023, Humanitarian needs were reported from the townships where Kayah IDPs are being displaced.

As Estimated number of people displaced since February 2021 and remain displaced (as of January 29, 2023): 111,500 in Kayah State & 105,800 in Shan (South) State out of 711,100 in Southeast Myanmar.

The difficulties of humanitarian access were also reported by local partners due to the increasing MAF's checkpoints and scrutiny. Some have been displaced multiple times. The return of IDPs was unlikely to happen soon and the population movement will likely remain fluid, as the security situation remained fragile

The recent intensified conflict has forced the temporary suspension of the activities in areas both public and private hospitals, and operation of international and national health partners.

Operational health partners are providing health services at their utmost effort via the frontline health workers in the field amidst the difficult situation such as communication challenges, limitation of access and tight investigation.

Cash Assistance to emergency referral patients at public and private hospitals within Kayah State

Since 2019, the IRC has provided financial assistance for emergency referral services to address life-threatening obstetric (EMOC), neonatal and childcare (ECC), and other critical cases, including survivors of gender-based violence. This assistance aims to alleviate financial burdens that may hinder timely referrals. Our support covers meal and transportation expenses for patients and their attendants at public hospitals.

Beginning in 2021, our support has expanded to include private hospitals alongside public ones. In addition to meal and transportation costs, we also cover expenses for medicines, consultation fees, investigations, and other treatment-related costs at private clinics in Kayah.



Cash assistance to the mother displaced internally due to conflict.

One of the Health Education Sessions in Pekhon Township conducted by Myanmar Catholic Health Commission (MCHC) partner of KMSS & WVI.



On 29 October 2023, health education about breastfeeding was given at Ba Mai Village in Pekhon Township. A total number of 43 participants attended the session. The importance of breastfeeding and the benefits of breastfeeding for mother and baby were explained. Breast milk contains ideal nutrition for babies, important antibodies that reduce disease risk for babies and it helps baby's healthy weight and makes babies smarter. Not only for the babies but also for the mother, breastfeeding reduces disease risk and risk for depression. Moreover, breastfeeding saves time and money and enhances a stronger bond between the mother and the child.

Emergency Response for Health Assistance toward Conflict-Affected Communities

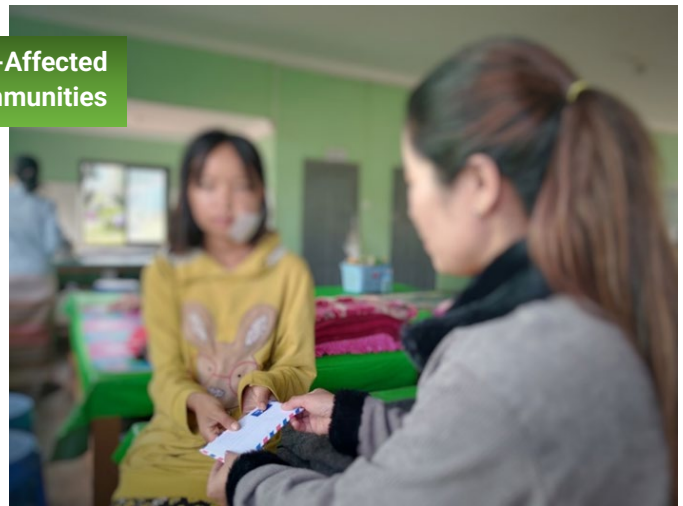
As conflict intensifies, the needs of Health Humanitarian Assistance have risen especially for vulnerable conflict-affected communities. Meikswe Myanmar aims to empower the capacity of conflict-affected communities to enhance their resilience through providing psychosocial support activities following with Nutrition Feeding programs and supporting people with serious medical conditions and victims of war weapons/mines.

Moreover, Meikswe Myanmar also collaborates with partners for special services referral to fill the gap of health assistance for conflict-affected communities.

Most of the IDPs people from Kayah State are facing many diseases such as diabetes, hypertension, heart disease, gastritis, and strokes due to their unhealthy food system, and bad practices related with health. So, it is obvious that conflict-affected communities are in needs of appropriate health services.

During the period between October to December 2023, Meikswe Myanmar has provided support for patients from conflict-affected communities who were suffering esophageal cancer, arthritis, asthma, throat tumor cancer, uterus tumor, diabetes, heart diseases and victims of wars weapons/land mines. Moreover, Meikswe Myanmar conducted psychosocial support activities for children with Nutrition Feeding Programs in IDPs sites.

On the other hand, various organizations related with public health and humanitarian response are not accessible to cover all areas of conflict-affected communities. Therefore, public health care, facilities and services are required immediately for conflict-affected vulnerable communities, and it can be found and highlighted that it is in an emergency state for them.



The commencement of 2024 is marked by escalating conflicts, widespread political and socio-economic turmoil and significant challenges stemming from acute funding shortages. The health cluster estimates that 12 million people will need humanitarian health assistance in 2024 of which 23% are targeted in view of the four distinct population groups: displaced, returned, stateless and other crisis-affected, consistent with 2023 groups <https://reliefweb.int/report/myanmar/myanmar-humanitarian-needs-and-response-plan-2024-december-2023-enmy>.

Medical teams will continue delivering priority life-saving health services through mobile & statics clinics, telemedicine, purchasing of services in private facilities and through community-based services. The cluster is also supporting the donation of medicines, medical supplies and equipment to all implementing partners including local CSOs and community-based organisations. The cluster is financially supporting referrals for specialised services for continuum of care.

Furthermore, the health cluster will continue ramping up its subnational coordination capacity in 2024, aiming a more impactful presence in the field and local-led actions. It will place a strong emphasis on accountability toward affected people and people-centered response. A workshop is planned in the first months of the year to document best-practices, standards and challenges and a training based on the findings of the workshop in following months.

၂၀၂၄ နှစ်ဦးပိုင်းမှ စတင်သော ပြင်းထန်သည့် ပဋိပက္ခအငြင်းပွားမှု ကိစ္စရပ်များ၊ နိုင်ငံရေးလှုပ်ရှားမှုများ၊ လူမှုစီးပွားရေးကဏ္ဍတွင်း ကမောက်ကမဖြစ်မှုများနှင့် စီးပွားရေးမငြိမ်သက်မှုများကြောင့် ရန်ပုံငွေရရှိရန် ခက်ခဲသော စိန်ခေါ်မှုနှင့် ကြုံတွေ့နေရပါသည်။

ကျန်းမာရေး ကဏ္ဍလုပ်ငန်းအစုအဖွဲ့ (Health Cluster) သည် ၂၀၂၄ ခုနှစ်အတွင်း ဖွဲ့စည်းမှု လူဦးရေ (၁၂) သန်းခန့် သည် လူသားချင်းစာနာထောက်ထားမှုဆိုင်ရာ ကျန်းမာရေးအကူအညီများကို လိုအပ်လာမည်ဟု ခန့်မှန်းထားပါသည်။ ၎င်းတို့အနက် မှ (၂၃ %) အား လျာထားလူဦးရေ အုပ်စု (၄) စု ထား၍ ကျန်းမာရေးစောင့်ရှောက်မှု လုပ်ငန်းများ အကောင်အထည်ဖော်ဆောင်ရွက်နိုင်မည်ဟု မျှော်မှန်းထားပါသည်။

ဆေးကုသပေးသောဆေးအဖွဲ့များသည် ရွေးလျား နှင့် အထိုင်ဆေးခန်းများဖွင့်လှစ်ကုသခြင်း ၊ တယ်လီဖုန်းဖြင့် လိုအပ်သော ဆေးဝါးများအား ညွှန်းဆိုပေးခြင်းဝန်ဆောင်မှုများ (telemedicine) ၊ ပုဂ္ဂလိကဆေးခန်းများမှတစ်ဆင့် ရပ်ရွာအခြေပြု ကျန်းမာရေးစောင့်ရှောက်မှုအဖွဲ့များ မှတစ်ဆင့် အသက်ကယ်ကျန်းမာရေး ဦးစားပေး ဝန်ဆောင်မှုများကို ဆက်လက်လုပ်ဆောင်နေပါသည်။ ကျန်းမာရေး ကဏ္ဍလုပ်ငန်းအစုအဖွဲ့ (Health Cluster) သည် လိုအပ်သောဆေးဝါးများ၊ ဆေးဝါးအထောက်အပံ့နှင့် ဆေးဘက်ဆိုင်ရာ စက်ပစ္စည်းများကို ဒေသခံ လူထုအခြေပြုအဖွဲ့များ၊ ရပ်ရွာအခြေပြုအဖွဲ့များ အပါအဝင် ကျန်းမာရေးစောင့်ရှောက်ပေးမှုလုပ်ငန်းများ လုပ်ကိုင်နေသော အဖွဲ့အစည်းများထံသို့ ထောက်ပံ့ပေးလျက်ရှိပါသည်။

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