This regular update, covering humanitarian developments up to 30 November, is produced by OCHA Myanmar in collaboration with the Inter-Cluster Coordination Group and UN agencies. Response figures are based on self-reporting by organizations to clusters. The next humanitarian update will be issued at the end of December 2022.

HIGHLIGHTS & KEY MESSAGES

- More than 1.4 million people are displaced across the country, of whom more than 1.1 million were displaced since the 2021 military takeover.
- Armed clashes, compounded by tight security, access restrictions, and threats against aid workers, continue to hamper humanitarian operations across Myanmar.
- Humanitarians are hoping that an informal ceasefire agreement between the Arakan Army (AA) and the Myanmar Armed Forces (MAF) may create space for the delivery of much-needed assistance in Rakhine and southern Chin where access has been restricted since September. The situation is being closely monitored.
- Humanitarians are deeply concerned about the newly passed NGO registration law and partners are currently investigating the potential impact on the delivery of life-saving humanitarian assistance.
- Premature return of Internally Displaced Persons (IDPs) from past and present conflicts in Rakhine, Chin and southern Shan states remains a major protection concern amid ongoing insecurity and continued fighting. It is critical that returns are done safely and voluntarily, in line with international principles.
- Inflation in commodity prices, including for food and fuel, is deepening the socio-economic stress on communities, forcing them to adopt negative coping mechanisms.
- The 2022 Humanitarian Response Plan (HRP) remains drastically underfunded as the end of 2022 is approaching. As of 30 November, it is only 28 per cent funded, leaving a gap of US$597 million (FTS). In the first nine months of 2022, humanitarians reached at least 3.9 million people with assistance according to reports received by clusters.

KEY FIGURES*

<table>
<thead>
<tr>
<th>Figure</th>
<th>Description</th>
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<tbody>
<tr>
<td>1.4M</td>
<td>People internally displaced across Myanmar</td>
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<tr>
<td>1.1M</td>
<td>People currently displaced by clashes and insecurity since February 2021</td>
</tr>
<tr>
<td>330K</td>
<td>People internally displaced due to conflict prior to February 2021, mainly in Rakhine, Kachin, Chin, and Shan</td>
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<tr>
<td>31K</td>
<td>Civilian properties estimated to have been burnt or destroyed since February 2021</td>
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*Displacement figures fluctuate during any given month. These figures represent the number of people currently displaced. Cumulative numbers for returns and displacement are not always available.

1Progressive Karenni People Force on Kayah (up to 1 November 2022), OCHA field data on Sagaing/Magway/Chin (up to 31 October 2022), Data for Myanmar in remaining states (up to 25 August 2022)
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SITUATION OVERVIEW

The humanitarian situation continues to be dominated by hostilities and increasing economic stress for millions of people. Frequent, indiscriminate attacks, including airstrikes and artillery fire in civilian areas have caused casualties and spread fear. Displacement also continues to rise despite some reported returns. According to the latest UN figures, the estimated number of new IDPs since the military takeover has passed 1.1 million, bringing the total number of IDPs across the country to almost 1.4 million. More than 49,400 people remain in neighbouring countries after fleeing since the takeover.

Nearly 31,000 civilian properties, including houses, churches, monasteries, and schools are estimated to have been destroyed although figures are difficult to verify. The level of destruction of civilian property, particularly of homes, combined with the deteriorating security situation and explosive ordnance risks are delaying returns and prolonging people’s displacement.

Suffering is being compounded by heavy restrictions on humanitarian access, including cumbersome bureaucratic processes and systematic blocks on access approvals, that continue to delay the delivery of critical and lifesaving assistance to affected people. Humanitarian actors, including the UN, INGOs, and local partners, continue responding to both pre-existing and emerging needs wherever they can. Despite the constrained operating environment and limited funding (less than 30 per cent), nearly 3.9 million people across Myanmar had received assistance by the end of September. Please see the full Quarter 3 dashboard here.

Local partners are now the backbone of the response and Quarter 3 saw a further increase in the number of organizations coordinating their response through the cluster system from 177 in Quarter 2 to 219 - a direct result of a scale-up in cluster coordination efforts, with a particular focus on hard-to-reach areas. Nevertheless, response numbers are based on voluntary reporting by partners to clusters and there is likely to be significant underreporting by local organizations. As 2022 is nearing an end, this year’s HRP is only 28 per cent funded, which amounts to only $230 million out of a total of $826 million required.

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2 Progressive Karenni People Force on Kayah (up to 1 November 2022), OCHA field data on Sagaing/Magway/Chin (up to 31 October 2022), Data for Myanmar in remaining states (up to 25 August 2022)

3 Financial Tracking System (FTS), as of 28 November 2022.
Civilian casualties and displacement as fighting continues

Intense armed clashes, compounded by tight security, and access restrictions on the movement of people and goods in multiple states and regions continue to endanger the lives and safety of the people of Myanmar and undermine their livelihoods.

In Kachin, armed clashes between the MAF and the joint forces of Kachin Independence Army (KIA) and People’s Defence Forces (PDFs) continue to cause insecurity and displacement, as well as limiting livelihood opportunities in several townships. Fighting in Hpakant township has intensified since the airstrike on 23 October prompting civilian casualties and displacement. In addition, there have been more stringent security checks on the Hpakant Road, and commercial and humanitarian transporters have been prevented from moving supplies of basic commodities such as food, medicine, and fuel to residents of Hpakant township. In Momauk and Shwegu townships, heavy artillery fire has also continued since late October 2022. As a result, more than 1,600 people from several villages in Mai Ja Yang area of Momauk township have been displaced and are currently sheltering in church compounds and monasteries, as well as with host communities in Momauk and Bhamo towns. Locals in Lung Ja, Naung Paung and Wa Wang in Mai Ja Yang are concerned about the security situation and the impact of shelling on the harvest. Food shortages may result if crops are not harvested on time. A primary school in Momauk town was partially damaged by artillery fire on 31 October. Shelling was also reported in Shwegu township, where about 500 people from Moe Sit and Ye Loi villages were temporarily displaced to Shwegu town between late October and mid-November 2022.

In Rakhine and southern Chin, fighting between the MAF and the AA continued until late November when an informal ceasefire agreement was reached. Dozens of civilian casualties were reported during the fighting that took place before the ceasefire, particularly in Maungdaw and Ponnagyun townships due to artillery shelling, while more than 7,200 people were newly displaced in Ponnagyun and Kyauktaw townships between 8 and 14 November. In parallel, about
8,500 people displaced since August 2022, returned to their areas of origin in three townships of northern Rakhine because fighting had subsided there, and they had been unable to access humanitarian support in the displacement sites. As of 14 November, about 20,800 people remained displaced in Rakhine and Paletwa township of Chin due to conflict between the AA and the MAF since August 2022, bringing the total number of IDPs from past and present AA-MAF conflict to about 95,000.

Humanitarian organizations are now closely monitoring the impact of the informal ceasefire announced from 27 November and are hoping this may create space for the delivery of much-needed humanitarian assistance to IDPs and crisis-affected communities where access has been heavily restricted since September. In early November, an additional two townships had been added to the six already restricted townships. If they remain in force, these restrictions would, for example, affect the lives of more than 6,000 IDPs in rural displacement sites and villagers in Kyauktaw and more than 25,000 Rohingya IDPs in Kyauktaw who rely solely on humanitarian assistance. Public boat travel between Sittwe and other townships, except the southern part of Rakhine, had previously been restricted since 15 September. Following the informal ceasefire, the waterway between Sittwe and Rathedaung and Buthidaung was opened on 27 November and will now operate four days a week. Small boats have also started to operate between Sittwe and Pauktaw township again, including urban areas. It remains to be seen if the informal ceasefire will result in more restrictions being relaxed, including boat and road travel to other locations, or will allow for the replenishment of supplies and medicine from Yangon, which had also been limited by road closures and checkpoints. During November, search and arrest operations also increased in Rakhine, including in Buthidaung, Kyaukpyu, Kyauktaw, Minbya and Toungup townships.

In the Northwest, fighting between the MAF and various PDFs, involving airstrikes, mortar fire and ambushes, continues to raise protection and humanitarian concerns in Chin, Sagaing and Magway. Heavy restrictions on civilian movement and transport of commodities are deepening concerns about shortages and surging prices for food and medicine. The MAF continues to conduct random searches, security raids, arbitrary arrests and detentions. Security is tight at checkpoints into towns and villages, while household checks at night also continued to be reported in various locations across the Northwest.

The overall number of IDPs in the Northwest slightly decreased in the first week of November, particularly in Sagaing as about 2,500 IDPs sheltering at a monastery in Banmuk township returned to their villages of origin within the same township. According to the latest UN figures, as of 28 November, about 781,900 people remain displaced across the Northwest since the 2021 military takeover. This represents 67 per cent of all new IDPs nationwide since February 2021. Most of the displaced people continue to live in informal displacement sites with limited access to assistance and services. They are increasingly vulnerable to hunger, illness, human trafficking and exploitation. The estimated number of people who remain displaced in India from these areas stands at 49,500.

In northern Shan, armed clashes between the MAF and various armed groups were reported in Kutkai, Kunlong, Manton, Muse, Namhkam, Namtu and Nawngkio townships. Consequently, civilian casualties, including of children, were reported due to indiscriminate artillery fire and shooting in November but there were no reports of major new displacement. As of 28 November, approximately 16,600 people remain displaced in temporary displacement sites and protracted camps in northern Shan, according to the latest UN figures. Forced recruitment and abduction of civilians remain major concerns. Some 15 people were reportedly abducted and forcibly recruited in Hsipaw, Kunlong and Lashio townships between 29 October and 12 November, bringing the total number civilians forcibly abducted for forced recruitment in 9 townships across northern Shan since the beginning of 2022 to 148, according to initial reports by local sources and protection partners.

Across the Southeast, armed conflict between the MAF and various armed groups continued unabated in almost all states and regions. In southern Shan and Kayah, fighting between the MAF and the joint forces of Karen Nationalities Defence Forces (KNDF) and PDFs also continued in several townships. There have been reports of artillery fire, even when there is no active fighting taking place, resulting in civilian casualties including children. There are reports of 7 people being killed and 23 being injured in Demoso, Loikaw and Pekon townships between 26 October and 15 November. Access restrictions to townships in southern Shan and Kayah remain in place with an increasing number of checkpoints and tight scrutiny measures. The de facto Shan State authorities have recently reported that access is prohibited to Pekon, Pindaya and Ywangan townships, while access is only being granted to the urban areas of Hopong, Kalaw, Lawksaw, Lollen, Nyaungshwe and Taunggyi townships. Partners reported tight scrutiny at checkpoints in southern Shan, especially for international staff. Apart from Taunggyi urban areas, both national and international staff need to obtain travel authorization to access town areas in all accessible townships.

Fighting between the MAF and the joint forces of Karen National Liberation Army (KNLA) and PDFs also continued across several townships in eastern Bago, Kayin and Mon involving airstrikes and artillery fire. On 9 November, houses
were reportedly destroyed by the aerial bombardment of Ta Baw Koh Der village in Hpapun township of Kayin. In eastern Bago, 9,400 people, mostly from Shwegyin township, were newly displaced between 31 October and 14 November 2022. Partners remain deeply concerned about the situation in eastern Bago as more than 30,000 IDPs are sheltering in Kyaukkyi, Nyaunglebin and Phyu townships. The majority are in Kyaukkyi, with limited access to humanitarian assistance. The number of partners operating in eastern Bago is considerably fewer than other parts of the Southeast. However, efforts are underway to draw additional resources to the area.

In Tanintharyi, ongoing armed clashes between the MAF and local PDFs resulted in new displacement in November of 9,000 people in Palaw township. Clashes intensified in this township in early November and the MAF reportedly burnt down an unverified number of houses. On 3 November, trucks with humanitarian rice supplies were stopped at a checkpoint into Dawei township and troops forced its driver to return.

Overall displacement figures have increased across the Southeast since the end of September. According to the latest UN figures, as of 28 November, about 328,900 people remain displaced by conflict and insecurity since 1 February 2021 and are staying in collective centres, informal displacement sites and host communities in various townships across the Southeast. Access remains constrained across most parts of the Southeast however assistance is reaching people in need through local actors, sometimes supported by, and in partnership with INGOs and UN agencies.

**The impact of conflict and economic crisis on the lives of women and girls in Myanmar**

The women and girls of Myanmar are paying a heavy price for the conflict and economic instability sweeping the country. Women and girls have long experienced widespread discrimination but as the gravity of the situation has deteriorated, they are now also increasingly being exposed to risks from gender-based violence (GBV, including intimate partner violence, early/forced marriage, sexual harassment, denial of resources, psychological or sexual abuse and exploitation, and reduced access to vital healthcare and justice services. Given the gendered impacts of the crisis, local and international humanitarian partners are working hand-in-hand to ensure life-saving protection services and health assistance are available to survivors and vulnerable women and girls. They are also working to integrate gender across all sector strategies and plans, however increased funding is desperately needed for these interventions.

**Surging protection risks:** COVID-19 and the 2021 military takeover have significantly increased the risk factors for GBV, particularly intimate partner violence, due to women’s prolonged confinement in the home and increased psychological and economic stress, including poverty and displacement. The increased militarization of the country, combined with lack of community and state protections, disruption of community services, mass displacement and separation from families, the scarcity of essential resources and mobility restrictions have also combined to drive greater vulnerability to GBV. Displaced women and girls, in particular, are at disproportionate risk of GBV, as they are often separated from support networks and may face sexual exploitation in exchange for safety or commodities. Being physically cut off from employment opportunities and financially dependent on humanitarian support leaves many displaced women with limited options to support themselves and therefore they are more likely to marry young or not report intimate partner violence if it would mean losing their only source of financial and social support.

The availability of protection, legal and support services, including safe shelter, for GBV survivors varies across states and regions. Humanitarian partners are working to fill gaps in support services for survivors. By the end of September 2022, humanitarian partners had reported reaching almost 680,000 people with gender-based prevention and response services. In particular, local civil society organizations and women’s organizations, who often serve as the entry point for women and girls to access required support and services, have been responding to these increasing safety, health and protection risks faced by women, girls, young people and people of diverse gender identities and sexual orientation, especially in hard-to-reach areas. The safety and security of many CSOs and women’s organizations doing this critical work is under constant threat in conflict-affected areas. UNFPA is also supporting 17 Safe Houses and 43 Women and Girls Centers across the country. In these safe spaces, and through existing helplines, women and girls can access GBV services, including case management, referral to health services, group and individual psychosocial support services and vocational training activities. More than 18,680 frontline service providers have been trained with support from the GBV sub-cluster on GBV related topics including case management, safe referrals and mental health and psychosocial support. Nevertheless, GBV services are still inadequate for the scale of the crisis.

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**Case Study:** It was only after attending a GBV course conducted by Yaung Chi Thit, a local NGO, with other women from her village that Nang Moon (not her real name) remembered how sad she was every day and realized that she too was “a person who experienced gender-based violence.”

Nang Moon lives in Yar Thit Kay village, Mrauk- U township of Rakhine. After attending the GBV workshop, she realized that she wanted to provide knowledge to other women who are subjected to domestic violence - physical, sexual, economic violence, as well as online harassment.

She says that violence between married couples is common in her village but “men do not think that gender-based violence issues need to be discussed.” She observed that gender-based violence often occurs due to causes outside of the house, describing instances where husbands could not control their tempers or drank too much before coming home and beating their wives.

Education is a powerful tool in changing perceptions of women and preventing GBV. Nang Moon believes that “most men think that once he marries a woman, he owns her, and that if she doesn’t listen to him, he can blame her and hit her.” She added “if my husband and other men were given the opportunity to learn about GBV, their behaviors and attitudes would change”. Nang Moon knows that advocating for men and boys to change their perceptions will be a difficult and long-term task but believes GBV trainings are a powerful first step.

Prior to the 2021 military takeover, some progress was made in relation to the legal and policy frameworks to promote gender equality and combat violence against women. Both the COVID-19 pandemic and political crisis negatively affected the availability and accessibility of legal and justice support for GBV survivors. The weak rule of law, lack of trust in judicial and law enforcement mechanisms, the lack of an impartial, effective civilian protection structure, and lack of support systems for survivors of GBV have fostered an environment where perpetrators of GBV and sexual exploitation abuse can operate without fear of repercussions, where survivors do not seek help due to fear or lack of trust, or where they turn to inadequate informal justice systems where their rights and gender equality may not be respected. According to a joint UNDP-UN Women survey published earlier this year, *Women Living Under the Pandemic and Military Rule*, [w]omen who sought support are four times more likely to use an ‘informal’ source of support (relative, friend, etc.) than a formal one such as the Myanmar Women’s Affairs Federation or the police. Persons with disabilities and Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, Intersex, Asexual (LGBTQIA+) persons also have limited access to support and information about their rights, which is likely to compound their vulnerabilities. UNFPA is currently supporting 22 CSOs through small grants to support emergency response and GBV service provision for the most vulnerable people, including people with disabilities and LGBTQIA+ people.

**Coping with economic distress:** The deteriorating socio-economic situation due to COVID-19 and military takeover is placing increased pressure on women who carry a disproportionate weight of responsibility for keeping their households afloat. The pandemic and the conflict have resulted in massive job losses, inflation, interruptions to agriculture and a surge in poverty which have, in turn, made it harder for women to feed their families and are driving the adoption of negative coping strategies. Families are cutting back on what they eat, relying on their savings, borrowing from family or friends, and selling their assets. The burden of many of these coping strategies is more likely to fall on women than on men. For example, according to a WFP-FAO assessment, August-September 2022, “[b]orrowing food is more common among female headed households than among male headed households (21 per cent vs 16 per cent). Female headed households also have to rely more on selling household assets compared to male headed households (51 per cent vs. 43 per cent) and to rely more on savings to meet their food needs (76 per cent vs. 69 per cent).” Early/forced marriage and trafficking are other negative coping strategies due to economic distress.

To address these negative coping strategies, the Food Security Cluster is supporting livelihoods projects with an emphasis on gender-transformative and non-household-based activities that supports women’s economic empowerment and self-reliance and improves the access of women and girls to a suitable diet. In addition, the Food Security and Nutrition clusters have been working closely to provide emergency support and nutrition assistance to the increasing number of men, women and children who are food insecure.

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5 Regressing Gender Equality in Myanmar: Women living under the Pandemic and Military rule, March 2022
Furthermore, humanitarian partners have been working tirelessly to implement a wide range of projects that address the financial, safety and security threats to women, girls, and other vulnerable groups, and the impediments to their economic growth and advancement. For instance, UN Women, together with international and local partners, has organized many livestock vocational trainings to vulnerable women, particularly those leading their households, in multiple states and regions, and has provided them with in-kind support (piglets, chickens, and poultry feed) to start a small business. This is supporting their recovery from crisis but also helping them to build a sustainable income, so they are less reliant on humanitarian support over time.

Disruptions to women’s healthcare: Finally, the crisis is having a disproportionate impact on women and girls’ access to health services, particularly reproductive healthcare and routine immunisations. The breakdown of the public healthcare sector since the military takeover has affected access to primary health services. The lack of access to mental health and psychosocial support services (MHPSS) for GBV survivors due to the disruption of services and ongoing insecurity is another challenge in a highly stressed environment. Access to clinical care for GBV survivors was not prioritized during the COVID-19 pandemic and has been significantly reduced since the military takeover due to the limited availability and accessibility of health services overall. Even before the current crisis, the women of Myanmar suffered a disproportionately high level of reproductive health issues. Maternal mortality is expected to have worsened due to unavailability or unwillingness to access healthcare since the military takeover. Restrictions on access have further obstructed the transportation of medical supplies and mobile clinic activities. Routine immunizations for diseases like measles have been heavily interrupted and this will have long-term consequences.

To address these impediments to women’s healthcare, health partners worked collectively to establish and strengthen complementary options for access to primary health services, including life-saving maternal, newborn, child, sexual and reproductive health care services as well as treatment for non-communicable diseases, mental health, and psychosocial support.

HUMANITARIAN RESPONSE

Humanitarian Access: Humanitarian access remains severely constrained by movement restrictions imposed by the de facto authorities. In Rakhine, an additional two townships, Pauktaw and Kyauktaw, were included alongside the six townships where access was restricted in mid-September. Public road and water transport had been suspended to most locations in the State although some relaxation on boat travel limitations has been announced since the informal ceasefire between the AA and the MAF was announced in late November. Humanitarians are closely monitoring the access situation and are advocating for further openings to deliver life-saving assistance in the days ahead. In Kachin, following the airstrikes in Hpakant township on 23 October, the MAF has introduced an unofficial travel ban, preventing humanitarian partners from moving in and around the township. As a result, several hundreds of IDPs have little or no access to basic services, including health. Ongoing armed clashes in Kachin have also forced some humanitarian partners to relocate their staff members for their safety.

In addition, several key access roads and bridges were reportedly damaged due to military operations in Kayah, Mon and Tanintharyi, generating extra obstacles in delivering humanitarian assistance. In Kayah, the de facto authorities have imposed access restrictions across the state, except Loikaw township, since 1 October. Similar travel restrictions imposed by the de facto authorities and MAF in Shan have also limited partners’ ability to deliver assistance in several locations.

In Chin, humanitarian partners have been experiencing lengthy blackouts of mobile and internet connections in several townships. In addition, humanitarian shipments of education materials were not allowed to pass through various MAF checkpoints following instability in the security situation. Arrests and detentions of humanitarian workers by the MAF is hindering the delivery of assistance to affected people in conflict affected areas. Humanitarians continue to advocate with all relevant stakeholders for unimpeded and safe access to people in need for the delivery of critical lifesaving assistance.

Funding situation: As the end of 2022 is approaching, the HRP remains drastically underfunded, threatening the ability of partners to respond to growing needs and leaving thousands of affected people, including IDPs, without basis services that ensure a dignified life. As of 29 November, the HRP is only 28 per cent funded, leaving a gap of $596 million (FTS). Given the surge in displacement and soaring needs, especially in the Northwest and Rakhine, increased resources are urgently required to support a meaningful package of support to affected people. Funding constraints, coupled with access restrictions, continue to affect the depth and quality of assistance delivered by humanitarians, forcing partners to heavily prioritize their assistance as outlined in HRP Mid-Year Monitoring Report. Donors are urged...
to give generously to alleviate suffering, mitigate the risks posed by the adoption of negative coping strategies, and prevent the loss of hard-fought development gains.

![Image](2022%20HRP%20Funding%20and%20Requirements%20by%20Cluster%20As%20of%2030%20November%202022.png)

Source: Financial Tracking Service

### Needs, Response, Gaps and Challenges by Cluster

The information below is provided by each of the seven operating clusters and their sub-working groups in the context of Myanmar. Information is self-reported by aid organizations to the relevant clusters on a monthly basis for inclusion in this update. Accordingly, this section is not necessarily reflective of all humanitarian interventions undertaken on the ground but rather those voluntarily reported by partners. All partners are encouraged to report their work via the relevant clusters to ensure good visibility of gaps and response. The ICCG’s Information Sharing Protocol allows for this information to be shared in a non-identifiable manner.

#### Education in Emergencies

**Needs**

- There is a need for professional development training and mental and psychosocial support for teachers working in IDP camps.
- Higher quality education support is needed for displaced children and young people who are often denied access to quality education due to inadequate learning spaces, bureaucratic issues (e.g. not possessing a transfer letter from their former school) or security challenges.
- In Kachin, students and teachers in community-led schools in areas outside de facto control need basic learning tools including student kits, teacher kits, school kits, learning materials which complement the curriculum, WASH facilities, safe spaces for learning, recreation and rehabilitation; as well as honorarium fees; and capacity building programs, for teachers in particular. Most teachers are unpaid volunteers due to the community not being able to afford school fees.
- In Kayin, many children in Thandaunggyi township cannot access formal education as 100 teachers did not receive their stipend salary. In addition, 444 displaced students who are learning in the faith-based school in War Par Palon village in Thandaungyi township need teaching aids, shelter, psychosocial support program (PSP) training and food. A national partner is distributing the teaching aids to the students, but they require financial support.
- In southern Shan, Schools in Hsihsein and Nyaungshwe townships need more furniture and student kits to accommodate the increasing number of students transferring from nearby camps that are slated for closure.
- In Shan, children of about 700 displaced households in Sinlikongra village and Namtu town are not receiving education services and UNICEF is currently assessing their precise education needs. These households were displaced from Kone Ka Yar, Sin Li, Nam Hkun, Nar Mon, Bang Nay and Man Jet villages in October due to armed clashes.
- In Kayin, there are safety issues surrounding educational facilities due to military presence near and raids on schools, mainly in the Kawthoolei administrative area. Fears have increased since an airstrike on 8 November that destroyed the Tah Baw Ko Der Primary School in Lu Thaw township.
Response

- By the end of September 2022, cluster partners had reached more than 542,200 children and youth out of the 1.4 million targeted (39 per cent) with education services and support. Of the total reached, more than 131,000 were IDPs.
- In Kachin, community-led schools are providing educational opportunities to children with challenges and needs. Activities include: development of a Learning Space Improvement Plan; learning space renovations to improve WASH facilities in camp-based schools; supporting community members working as education volunteers; recruiting more basic education teachers; providing capacity building training (including EXCEL training) to basic education volunteers; and forming village education committees (VEC), including a Parent Teacher Association (PTA). The Education Cluster also conducted a Contingency Planning workshop with partners during this reporting period.
- In Shan, the following responses were undertaken:
  - Provision of hygiene kits, student kits, teacher kits, education kits, teacher learning materials (TLMs) and teacher stipends to students and educators in 12 townships.
  - Two education partners jointly conducted career guidance counselling training; mentoring and coaching training; in-service teacher trainings to teachers and volunteers, to build their capacity and improve the learning outcomes of the children in Namtu township.
  - Community awareness sessions on Protection for Sexual Exploitation and Abuse (PSEA), explosive ordnance risk education (EORE) and child safety training were also conducted.
- In Kayah and southern Shan, the following responses were undertaken:
  - Village/camp education committees and volunteers received community-based education kits, teacher kits, stationery and “Library for All” story books for children during an orientation session on Social Emotional Learning (SEL).
  - A community awareness raising session was held on the importance of education during crisis in Hpruso and Loikaw townships.
  - Education service providers continued to support learning opportunities in Early Childhood Development and Basic Education, reaching a total of 9,064 students (4619 Boys, 4445 Girls) in Taunggyi, Nyaungshwe, Pinlaung, Hsihseng, Pekon, Loikaw, Hpruso, Shadaw and Demoso townships.
  - 1,200 children (450 boys, 750 girls) belonging to the Ta’ang, Ru, and Jing ethnic minority groups participated in mother tongue story telling activities in Namsang, Lawksawk, Kalaw, Mongkaing and Monghsu townships.
  - Education cluster members attended a Training of Trainers session on the Joint Education Needs Assessment.

Gaps & Challenges

- Across Myanmar, intense fighting, airstrikes and artillery fire have limited access to communities, causing delayed service delivery, and making program implementation more expensive and difficult to execute.
- Supply chain disruptions coupled with inflation have increased the cost of fuel, transport, electricity, and other inputs, directly affecting project management and contingency and emergency responses. The scope of Community Based Education (CBE) is being limited by lack of funding, human resources, or educational materials. CBE initiated by locals in and around conflict areas has not been provided with sufficient teaching and learning materials to support displaced children.

Food Security Needs

- Continuing inflation has continued to reduce access to sufficient food for the most vulnerable people to meet their nutritional needs. Oil prices are at a record high after month-on-month increases of 8 per cent for mixed oil and 11 per cent for palm oil.
- Overall prices in October were 68 per cent higher than pre-crisis, 90 per cent higher than at the same time in 2021 and averaged more than MMK5,000 per viss (1.6 kg) in many parts of the country. Fuel prices are similarly escalating, up 18 per cent between September and October, and up 72 per cent compared to pre-crisis affecting the transportation of produce and movement of people to markets.
- As inflation continues to increase, food assistance is necessary to prevent worsening food insecurity in conflict areas, but particularly Sagaing, which currently hosts the highest number of IDPs in Myanmar.
- In Kachin, food gaps are reported in areas outside SAC-control. Food security partners are looking into ways to cover these gaps.

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6 WFP, Market Price Update – October 2022
Response

- During the third quarter of 2022, the Food Security Cluster reached:
  - 633,226 IDPs with food assistance, representing 114 per cent of the Cluster’s SO1 target in the 2022 HRP (556,000).
  - 2,565,317 non-IDPs with food assistance, representing 87 per cent of the Cluster’s SO2 target in the 2022 HRP (2,944,000).
  - 190,733 IDPs and non-IDPs with agriculture and livelihoods assistance, representing 22 per cent of the Cluster’s SO3 target in the 2022 HRP (850,000).
- During the third quarter, Yangon, Rakhine and Kayah states received the highest proportion of support, with 1,973,905, 641,784 and 220,186 people, respectively.
- In the Northwest, Cluster partners continue expanding their operations to hard-to-reach areas. Partners provided multi-purpose cash assistance for the first time to 1,250 people in Saw township in Magway in September and to 466 people in Katha township in Sagaing in August.

Gaps & Challenges

- Despite notable improvements in accessing areas in the Northwest and Southeast and expansion of assistance distribution, there are still significant access restrictions in these parts of the country, particularly in conflict areas. Cluster partners are working to further expand their operations into hard-to-reach areas in 2023.
- Inflation has had a programmatic impact on the cost of delivering assistance. Regarding cash-for-food assistance, partners have had to increase their transfer value per person to compensate.
- The amount of cash assistance being provided to each person is still less than the average Food Security contribution to the minimum expenditure basket (MEB), as calculated in 2021.
- Agriculture and livelihood support remain insufficient, compromising efforts to maintain food availability, including in hard-to-reach areas.

Health

Needs

- Due to continued armed conflict and heavy fighting, improved access to emergency healthcare services for injured patients in Hpakant, Kachin, is urgently needed.
- Due to an increasing number of IDPs, more mobile clinics and essential medical supplies are needed in the Northwest, Kayah State and northern Shan. Required supplies include contraceptive pills, micronutrients, and anti-malarial drugs.
- High level advocacy addressing the ongoing movement restrictions across townships in Rakhine is urgently needed to prevent a deterioration in the health status of crisis-affected people in these locations.

Response

- By the end of September 2022, health partners have reached more than 488,000 people out of the 1.4 million targeted (34 per cent) for health assistance. The majority of people reached were in Kayin (199,421), Rakhine (74,190), Kayah (53,975), and eastern Bago (52,682). Of the total, more than 128,900 people reached were IDPs.
- In Kachin, 53 basic hygiene kits were distributed in Shwegu township; 100 female dignity kits and 100 clean delivery kits (CDKs) were distributed in Bhamo township; and 2,000 Paracetamol tablets, 2,000 Zinc tablets and 2,000 sachets of oral rehydration salts (ORS) were provided to emergency response and mobile health services for IDPs in Myitkyina and Waingmaw townships.
- In Northern Shan, 3,321 primary health care consultations were provided by 9 mobile clinics, reaching 31 IDP sites and vulnerable people in 24 villages across 11 townships in October.
- In Sagaing, primary healthcare was provided by mobile clinics run by partners partners reaching 3,530 patients during October: 1,413 patients in Kale township; 390 patients in Kalewa township; 380 patients in Mawlaik townships; 418 patients in Mingin township; 822 patients in Paungbyin township; and 107 patients in Tamu township.
- In Kayin, health partners provided primary healthcare services to 471 people from Hlaingbwe township and to 509 people in Thandaunggyi township during October. Partners also provided referral support to 17 pregnant women and provided sexual and reproductive health commodities (100 implants; 300 packs of oral contraceptive pills; 300 Depo-Provera injections; 200 Newborn kits; and 200 CDKs) to mobile clinics in Hpa-An township.
Gaps & Challenges

- There are insufficient mobile clinics for all IDPs in formal and informal new displacement sites in northern Shan.
- In Rakhine, movement restrictions have impacted the work of mobile clinics and health services: 22 of 40 mobile clinics’ operations remain suspended.
- There are continued difficulties in procuring and transporting medicines to communities. Basic medicine shortages may lead to difficulties in controlling disease outbreaks.
- In Kayin, heavy fighting in Kawkareik area and a consequent increase in security check points have delayed health activities.

Nutrition Needs

- In Rakhine, the following needs were identified:
  - Nutrition partners have requested mid-upper arm circumference (MUAC) anthropometric assessments tools to expand active screening services to facilitate the early detection and referral of malnourished children and pregnant and lactating women.
  - 11 previously identified malnourished children from Pautkaw township and 30 newly identified malnourished children from Minbya township have not received treatment according to protocol.
  - 638 malnourished children from Buthidaung and Maungdaw townships have had their treatment disrupted due to restrictions on nutrition interventions by authorities.
- In Kachin, Integrated Management of Acute Malnutrition (IMAM) services and supplies are needed at banana plantation sites in Waingmaw township. In hard-to-reach areas in Injayan and Sumprabum townships, a pipeline break is possible for therapeutic nutrition supplies for children with moderate acute malnourishment (MAM).
- In the Northwest, based on an initial mapping exercise by the ICCG Northwest partners, there are gaps in the supply of micronutrient supplements and anthropometric measurement tools like MUAC tapes. Partners will be quantifying the needs in this region and tailoring the most appropriate response, including provision of supplies such as ready to use supplementary feeding (RUSF) to implementing partners in Chin and Sagaing.
- In Kayin, there is a need for anthropometric measurement tools like MUAC tapes and therapeutic nutrition supplies to address severe acute malnutrition (SAM) in Thandaungyi, Kyainseikgyi and Kawkareik townships.

Response

- By the end of September 2022, 167,647 (18 per cent) of the 1 million people targeted have been reached with nutrition services and treatment across the country, with most of the assistance so far provided in Rakhine State, followed by Kayin, Kachin and Ayeyarwady. Of the total people reached, more than 128,000 were IDPs.
- A national NGO continues to operate in hard to access areas and underserved banana plantations in Waingmaw where they are screening and referring children with SAM. The NGO has also provided essential nutrition supplies in Injayan and Sumprabum areas in partnership with an INGO.
- In Kachin, a local partner continues to provide micronutrient support, as well as infant and young child feeding counselling through mobile services integrated with primary health care and nutrition interventions for newly displaced mothers and children under 5 in Bhamo and Momauk townships.
- In the Northwest, despite challenges, one local partner is still operating referral centres treating SAM cases in Hakha and continues to provide support in Chin and Sagaing.
- Two INGOs have addressed cases of malnutrition and requirement of PLWs via their targeted supplementary feeding programme (TSFP).
- An NGO provided medical services to manage malnutrition for patients with underlying health complications in Magway. Efforts are also underway to combat SAM and MAM in Paletwa.
- In the Southeast, nutrition partners continued to provide children with nutrition services, including active MUAC screening and distributing micro-nutrient powder and tablets.
- In southern Shan, nutrition partners provided 100 multi-vitamin tablets and 272 nutrition bowls to displaced people as part of the inter-agency distribution mission in early October.

Gaps & Challenges

- Provision of nutrition services in Rakhine remains limited due to access constraints despite the announcement of the informal MAF-AA ceasefire in late November. Advocacy efforts are underway with the de facto authorities to permit the transportation of supplies and staff for the continuation of life-saving assistance.
- The de facto local authorities have prohibited partners from initiating implementation in Kampalet and Mindat townships in Chin, which is in turn affecting delivery of services undertaken by a national NGO and an INGO in Pakokku, Pauk and Myaing towns in Magway Region.
Protection

Needs

- Landmines and explosive remnants of war (ERW) continue to pose a threat to the life and safety of civilians in Myanmar. UNICEF recorded 257 casualties from landmine explosions between January and July 2022. However, the actual number is likely to be higher due to access constraints, insecurity, and internet challenges with reporting. Due to worsening conflict, assistance to the increasing number of explosive ordnance victims is urgently needed.
- Threats of premature returns of IDPs to their villages of origin by the de facto authorities remain a major protection concern with fear the push might risk the safety and security of IDPs amid ongoing fighting. In southern Shan, the township-level de facto authorities seem to have extended the previous end of October deadline to early next year. There were no reports of enforcement of returns, but pressure continues, particularly in Rakhine. Humanitarians continue to advocate of a voluntary and safe returns.
- In Rakhine, the following trends and needs have been identified due to the conflict between the AA and MAF:
  - Fighting, including indiscriminate artillery shelling in civilian areas have posed grave risks to people’s safety and security.
  - Raids, random searches, arbitrary arrests, and military presence has been causing psychological distress and harm to affected people.
  - People might face food shortages, particularly of rice, as farmers in Ponnagyun were not allowed to access their paddy fields during the peak of the rice harvesting season. In Minbya, farmers reported that the MAF has reaped the rice crops.
- In the Northwest, partners reported the following needs in October:
  - IDPs, particularly in Sagaing, are increasingly at risk due to continued fighting and need specialized protection services and assistance, including psychosocial support, explosive ordnance risk education and victim assistance, as well as prevention and response services on child protection and GBV.
  - Existing services remain limited compared to the needs, particularly in Sagaing, which hosts the highest number of IDPs. Increased programming for child protection, GBV, mine action, mental health and psychosocial support, and other protection activities remains a priority.
- In the Southeast, partners reported the following needs in October:
  - Civilian casualties, arbitrary arrests and detention, forced labor, and risks of being trafficked remain major protection concerns.
  - In Kayah and southern Shan, there is concern over a lack of food and other basic services, including health, water and sanitation according to feedback and complaint mechanisms.
- In Kachin, there is a need for life-saving humanitarian assistance and protection services for the 2,700 new IDPs in Shwegu and Momauk townships, as well as for protracted IDPs and host communities.

Response

- By the end of September 2022, protection partners had provided protection assistance and targeted lifesaving services to more than 1,055,700 affected people (53 per cent of HRP target), including more than 285,000 IDPs.
  - More than 656,500 people received child protection services.
  - Some 679,770 people received GBV services in 93 townships. These include more than 233,000 IDPs.
  - More than 123,900 people received Mine Action services.
- In Kachin, humanitarian partners in Bhamo township are responding to the needs of new IDPs in the state’s south.
- In the Northwest, protection services, as well as GBV, child protection, mine action activities continue to be implemented based on needs despite armed clashes and restrictions. However, more interventions are required, particularly in conflict-affected and hard-to-reach areas.
- In Shan, GBV and child protection partners provided the following services during October:
  - In northern Shan, GBV partners continue to support case management and referral across the state and have formed GBV reduction committees in Kutkai, Kyaukme and Manton townships. These committees are expected to support a series of GBV awareness sessions for married people and youth in the community.
  - In Lashio township, a local partner provided GBV awareness sessions to an LGBT group; a local women’s organization resumed crisis support and safe house services for affected people; another local partner provided GBV awareness raising training for community leaders and vocational training for women
• An INGO provided Child Protection in Emergency (CPIE) kits to 6 children in 2 households from Mong Yin village in Lashio township and has managed 30 cases in Hseni and Nawngkio townships.
• A total of 16 Child-Friendly Spaces (CFSs) were established and cash assistance was provided to two needy children in Muse township in October.
• An INGO provided legal support to 2 girls in Lashio township; an NNGO provided legal support for 9 child protection cases and 1 GBV case in the Lashio Township Law Court; and a women’s organization provided legal support for 14 child rape cases in Lashio.

- In the Southeast, GBV partners continue to implement GBV prevention response services, despite ongoing armed clashes and movement restrictions. However, more interventions are required, particularly in conflict-affected and hard-to-reach areas. Clarification from MUH No. 22: GBV services are also being provided in conflict areas by partners who are not members of the cluster system and may not have reported their work through the GBV sub-cluster. The GBV sub-cluster aims to engage more with these partners to better reflect all GBV activities in the Southeast.
- Protection partners in the Southeast continue to monitor protection and human rights violations (i.e. arbitrary detentions, killings, extortion, physical abuse, maiming, limiting of access to emergency medical treatment etc.) with the aim of obtaining real-time understanding of the current situation to better inform advocacy and operational response.

Gaps & Challenges
- The Northwest, where humanitarian needs are highest, must be prioritized by partners and donors for funding and rapid response. While some new programs are being established, responses remain limited due to access constraints and greater advocacy is required on this.
- In Kachin and northern Shan, continued armed clashes, the presence of armed groups, possible landmine contamination, and movement restrictions are limiting the access of people, particularly IDPs, to livelihoods. In Momauk, some farmers are unable to harvest their crops due to ongoing clashes near farming areas.
- In the Southeast, checkpoints, extensive road blockages and unpredictable armed clashes, security threats and landmine accidents continue to limit the work of humanitarians and are creating difficulties obtaining access permission to provide assistance.

Shelter, Non-Food Items (NFIs), Camp Coordination and Camp Management (CCCM)

- In Rakhine, the following needs were identified in October:
  - Most of the 600 displaced households (2,700 IDPs) who have recently arrived at pre-existing AA-MAF displacement sites are in urgent need of shelter and NFI assistance. As of October 2022, a total of 2,038 displaced households (8,542 IDPs) were sheltering in these sites since 25 August 2022 (Rapid assessment, October 2022).
  - In Pauktaw township, 30 of the 87 longhouses in Nget Chaung-2 IDP camp (housing 5,000 IDPs) are in a dilapidated condition. They were last reconstructed or renovated by shelter partners in 2019 and are due to receive reconstruction and renovation support in 2023 (OCHA field assessment, October 2022).
  - In Sittwe, Pauktaw, and Kyaukpyu townships, out of the 2256 longhouses at the Rohingya and Kaman camps, 500 are structurally unsound and require reconstruction, affecting the living conditions of more than 22,000 IDPs. There is funding for reconstructing about 100 of the shelters in 2023, but there is still a funding gap of $3.3 million to reconstruct all of them.

- In the Northwest, a cluster partner conducted an assessment to understand the humanitarian situation of the 32,627 identified IDPs sheltering in Falam, Hakha and Matupi townships of Chin, and Kale and Shwebo townships of Sagaing, in October 2022. They found a need for more than 4,600 shelter kits, 10,000 NFI kits, 8,500 winter jackets and more than 15,000 pieces of basic clothing for IDPs in these areas.
- In Kachin, more than 1,300 IDPs in Momauk township need shelter and other forms of humanitarian assistance. These IDPs were newly displaced on 21 October due to armed clashes between the MAF and KIA in this township and are currently staying with host communities in Momauk and Bhamo towns (Initial assessment, October 2022). A follow up rapid needs assessment (RNA) was conducted in mid-November and a response plan is being prepared.
- In northern Shan, the de facto authorities have continued to push for camp closure, particularly in Namtu township. Although local advocacy efforts have been successful in extending the camp closure deadline to April 2023, there is still insufficient time to fully plan a safe and voluntary return.
Response

- By the end of 2022, a total of 413,832 people in Myanmar (67 per cent of the 621,700 people targeted for assistance in 2022) were provided with Shelter, NFI and CCCM services. It is important to note that demands for these services are growing due to ongoing armed conflict and surging displacement.
- In Rakhine, cluster partners at pre-existing AA-MAF displacement sites provided relief items to 233 newly displaced households and shelter assistance to 115 newly displaced households. Cluster partners are currently prioritising the needs of new arrivals.
- In the Northwest, one partner distributed household kits to 25 displaced households in Tamu township in Sagaing and some partners provided multi-purpose cash assistance to 160 families whose houses had been destroyed in arson attacks in Kale and Shwebo townships in Sagaing in October 2022.
- In Kachin, shelter partners provided emergency shelter kits to new IDPs displaced since 21 October and who are now living in the open in Momauk township. Partners continue distributing relief items in 5 IDP camps in bordering areas where there have been shortages. These should help meet the needs of 16,000 existing IDPs, as well the needs of IDPs from both Momauk township and Se Zin village of Hpakant township. In October, distributions covered about 475 people with full or partial NFI packages. Based on identified needs.
- In the Southeast, partners continued the ongoing distribution of relief items to 508 displaced households in Taungoo township in eastern Bago and to 875 displaced households in Thandaunggyi township in Kayin State. Partners also distributed NFI sets (including kitchen sets, tarpaulin, blankets, mosquito nets, sleeping mats, buckets, jerrycans and solar lamps) to 514 displaced households and 4,484 roofing sheets to 141 displaced households in southern Shan.

Gaps & Challenges

- In northern Shan and Kachin, IDPs in 8 camps (more than 2,700 IDPs) were asked by the de facto authorities to find land to relocate to but have not provided any financial support.
- In Kachin, more than 7,000 newly displaced people in Hpakant, Mohynin, Momauk and Waingmaw townships remain unable to return to their places of origin and consequently need regular humanitarian assistance.
- In the Northwest, ongoing armed conflict and roadblocks remain an obstacle to humanitarian assistance delivery.
- In Rakhine, movement restrictions continued to disrupt service delivery. The Cluster continues to work with the ICCG to advocate for humanitarian access and explore alternative delivery methods.

Water, Sanitation and Hygiene

Needs

- In Rakhine, 12 per cent of 113 AA-MAF displacement sites still lack sufficient water; 40 per cent remain without appropriate sanitation; and 76 per cent still have hygiene gaps (Cluster 3W analysis, September 2022).
- In Kachin, 11,649 people (2,102 households) in 20 IDP camps in Bhamo and Momauk townships have faced funding shortages since the beginning of November 2022 (Cluster 4W analysis report, Q3 2022).
- In Kachin, there was an outbreak of acute watery diarrhoea (AWD) in Jaw Masat IDP camp (667 IDPs) in Myitkyina township, with about 100 mild to severe cases reported in October 2022. Water quality tests confirmed that one third of drinking water sources were contaminated with fecal coliform and 10 out of 17 randomly selected households were affected.
- There is an urgent need to stockpile contingency items which can be mobilized in unforeseen crises, as well as used to replenish WASH hygiene items in existing camps in Rakhine and Kachin.
- In Shan, there is a 5 per cent gap in access to sufficient water, a 22 per cent gap in sanitation services and a 35 per cent gap in access to hygiene items in 38 protracted IDP camps (Cluster 4W analysis report, Q3 2022).
- In the Northwest, 89 per cent of 655 displacements sites covered by WASH partners still lack appropriate sanitation and 94 per cent of them reported hygiene gaps in September 2022 due to underfunding and access constraints (Cluster 3W analysis, September 2022).

Response

- By the end of September 2022, a total of 904,266 people (43 per cent) of the 2.1 million people targeted had received WASH services across the country.
  - 677,747 people benefitted from access to safe and clean water
  - 389,716 people benefitted from functional excreta disposal systems
  - 856,734 people benefitted from hygiene promotion activities and WASH NFIs
- In October 2022, the following WASH responses were undertaken:
  - In Rakhine, WASH partners hosted 26 hygiene promotion sessions and provided critical WASH supplies to 92 of the 113 pre-existing AA-MAF displacement sites in 8 townships, reaching 48,177
IDPs. These supplies included 231 water filters, 405 disinfecting and sanitizing tablets, 202 hygiene kits, about 1,000 bars of soap, and about 6,000 sanitary pads.

- In Kachin, to address the aforementioned AWD outbreak, WASH partners provided water purification tablets, 70 per cent calcium hypochlorite chlorine to disinfect household drinking water and in collaboration with health partners, treatment was provided to 81 of the 100 patients affected in October.
- In northern Shan, partners distributed emergency hygiene kits and water containers to more than 250 IDPs who had been displaced from various villages in Namtu township and are sheltering in temporary displacement sites in the same township.
- In southern Shan, as part of an inter-agency distribution mission to new displacement sites in Hopong, Kalaw, Nyaungshwe and Taunggyi townships in early October 2022, WASH partners distributed 1,130 hygiene kits, 760 water purification materials, 1,400 hygiene kits, 100 water containers, 12 water filters, 20 water purification items and 66 waste bins to 1,940 IDPs in 23 displacement sites in Nyaungshwe township. WASH partners also provided 42 individual latrines to new displacement sites in Tangyan township in October.
- In the Northwest, WASH partners distributed 1,130 jerry cans, 3,000 hygiene kits, more than 1,700 bars of soap, and 3,200 sanitary pads in October, reaching:
  - 39,062 IDPs in 228 of 333 displacement sites across 7 townships in Chin State.
  - 3,519 IDPs in 21 of 52 displacement sites in 2 townships in Magway Region.
  - 74,332 IDPs in 86 of 270 displacement sites in 11 townships in Sagaing.

Gaps & Challenges
- In Rakhine, access constraints and expired MoUs held by WASH partners continue to impede the granting of travel authorization and the delivery of humanitarian items. This has also prevented the transportation of NFIs and hindered monthly hygiene kit distributions in AA-MAF displacement sites across different townships.
- In Kachin, insufficient funding has limited WASH assistance in IDP camps in Bhamo and Momauk townships.
- Travel restrictions continue to impede humanitarian assistance in Manton, Muse (Monekoe area) and Kongyan townships in northern Shan and at the border area of southern Shan and Kayah.
- In the Northwest, blocked transport routes, humanitarian access constraints and insecurity continue to challenge WASH partners in reaching affected people.

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