

BACKGROUND

Landmines and other explosive ordnance contamination threaten the lives of men, women, and children. It limits freedom of movement and prevents displaced populations from returning home, limiting their ability to earn an income from agriculture or collection of forest products.

People in central and northern Rakhine State in Myanmar have been particularly severely affected by landmines and explosive ordnance, accounting for 17 percent of casualties in the country in 2021.

Following the conflict between the Arakan Army (AA) and the Myanmar Armed Forces (MAF) in 2019, there have been 92 documented incidents, resulting in 236 civilian casualties. More than 43 per cent of victims have been children. Based on available data, 13 out of 16 townships in Rakhine State are contaminated with explosive ordnance. However, data is incomplete, and many incidents remain unreported due to a lack

of an accident surveillance system and limited availability of health care services.²

in Rakhine State

Over the past decade, Rakhine State has experienced three major waves of displacement:

- Inter-communal conflict in 2012 in northern Rakhine led to the displacement of more than 140,000 people. While most of the ethnic Rakhine were able eventually to return to their homes, around 140,000 Rohingyas still remain in camps,³ primarily in Sittwe Township.
- Violence in 2017 forced more than 700,000 Rohingya in northern Rakhine State to flee across the border to Bangladesh.
- In 2019, intense fighting, including the widespread use of landmines, led to the displacement of 220,000 people in northern and central Rakhine.⁴ Approximately 71,600 people remain displaced in ten townships, as of 31 December 2021.⁵

Landmine and ERW incidents 2019-2021

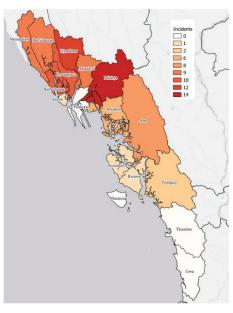


Figure 1: Landmine and ERW incidents 2019-2021

Total incidents		22		
Total Victims		Killed	Injured	Total
		13	35	48
Adult	Total Adult	10	17	27
	Male	7	13	20
	Female	3	4	7
Child	Total Child	3	18	21
	Male	3	12	15
	Female	0	6	6

Figure 2 : Explosive Ordnance Incidents in Rakhine State (2021)

- 1. United Nations Children's fund, 'Myanmar: Landmines / ERW Incidents Information, Factsheet (January September 2021)', October 2021, <www.unicef.org/myanmar/reports/myanmar-landmineerw-incidents-information-9>.
- 2. Landmine & Cluster Munition Monitor, 2021, 'Myanmar¬¬/Burma, Impact', 16 November 2021, <www.the-monitor.org/en-gb/reports/2021/myanmar_burma/impact.aspx >.
- Human Rights Watch, 'An Open Prison without End, Myanmar's Mass Detention of Rohingya in Rakhine State', <www.hrw.org/report/2020/10/08/open-prison-without-end/myan-mars-mass-detention-rohingya-rakhine-state>.
- 4. The Irrawaddy, 'Myanmar Military Calls in Jets to Attack Arakan Army in Rakhine State Mountains', 14 August 2020, <www.irrawaddy.com/news/burma/myanmar-military-calls-jets-attack-arakan-army-rakhine-state-mountains.html>.
- United Nations High Commissioner for Refugees, 'Myanmar/Rakhine State Response to displacement linked to AA-MAF conflict (January December, 2021)", https://reliefweb.int/report/myanmar/myanmarrakhine-state-response-displacement-linked-aa-maf-conflict-january-december

The extent and type of contamination in Rakhine State remain unknown. Assessments and surveys of the post-conflict affected areas became impossible when the COVID-19 pandemic led to further movement restriction in the area. Humanitarian access has been allowed only for life-saving purposes for most of 2020 and 2021 – and only to a limited number of displacement sites in urban areas. In addition, access for humanitarian actors to operate in eight heavily affected townships in Rakhine State has been restricted for several years.



CRITICAL ISSUES FOR HUMANITARIAN MINE ACTION RESPONSE

VICTIM ASSISTANCE

Survivors of landmine accidents face many challenges: continuing medical costs, psychological trauma, loss of livelihoods, educational obstacles and discrimination against people with disabilities. Restrictions on activities in rural areas, which have been exacerbated by conflict and COVID-19, make it difficult to track incidents and identify victims in need of assistance.

The lack of first response emergency services is increasing the mortality rate in such incidents. According to the International Campaign to Ban Landmines (ICBL), those who are injured do not have appropriate access to emergency health care and rehabilitation services due to the collapse of the health care

system since the military takeover.⁶ Furthermore, in Rakhine State, restrictions against the Rohingya population present additional barriers to receiving necessary care and require travel authorizations to get to hospitals.

In 2017, the Department of Rehabilitation established a programme providing survivors with a one-off payment of MMK 200,000. However, many survivors are either unaware of this benefit, are excluded from coverage, or are reluctant to use the service. Additionally, local experience suggests that this support, without comprehensive individual case assessment, does not meet the specific needs of victims and/or their families.

VICTIM ASSISTANCE INCLUDES

- data collection, including context analysis and needs assessment for services referral, as a starting point to understand the extent of the problem and the challenges ahead
- emergency and continuing medical care, including emergency first aid to the victim of the explosion and ongoing medical care other than physical rehabilitation
- physical and other rehabilitation, including physiotherapy, as well as assistive and mobility devices
- psychological and psychosocial support
- social and economic inclusion, inclusive education, as well as access to basic services and disability awareness
- establishment, enforcement and implementation of relevant laws and public policies

 International Campaign to Ban Landmines, 'Landmines Continue to Kill and Injure Citizens in Myanmar, in Midst of Humanitarian and Political Crisis', 24 June 2021, <www.icbl.org/en-gb/news-and-events/news/2021/landmines-continue-to-kill-and-injure-citizens-in-myanmar,-in-the-midst-of-a-humanitarian-and-political-crisis.aspx>. The United Nations Policy on Victim
Assistance in Mine Action (2016 Update)

EORE ADAPTATIONS

- Social media campaigns
- Remote risk education (via phone or video call)
- Mobile applications
- Remote training of community volunteers
- Capacity building/training of trainers (to CBOs/CSOs with access to remote areas)
- Mainstreaming EORE into other sectors' awarenessraising activities
- Integration with formal education
- Provision of information, education, and communication materials to overcome logistical challenges



UNICEF, as the lead agency for the mine action Area of Responsibility, collects data on this work from AoR members. However, the current system of storing the data, in a dedicated spreadsheet, is unsatisfactory. Most actors do not submit their data on Explosive Ordnance Risk Education, and any data submitted are accessible only through quarterly updates. There is no dedicated victim information system for casualties of mines/explosive remnants of war, that assists with monitoring incidents and the case management of victims.

EXPLOSIVE ORDNANCE RISK EDUCATION

In the absence of clearance operations, Explosive Ordnance Risk Education represents the best method for preventing accidents by raising the awareness of the risk and promoting safe behaviors in contaminated



areas. Traditionally, effective EORE is accomplished through visiting communities to conduct awareness-raising sessions and to plan additional interventions (such as non-technical surveys of suspected contaminated areas).

However, long-standing restrictions to humanitarian access in Rakhine State have been further tightened with COVID-19 rules and in the wake of the military takeover in 2021. As the direct delivery of EORE has thus been limited to a small number of displacement sites, adaptations have been made to extend the reach of EORE messaging.

CAPACITY AND FUNDING

Not enough financial, human and technical capacity is currently directed to humanitarian mine action in Myanmar. In 2020, Myanmar received only US\$4.1 million for mine action, ranking twenty-second in the world for donor support, despite having the fifth highest number of reported casualties.⁷

Community based organizations (CBOs) and civil society organizations (CSOs) are increasingly relied upon to fill gaps created by operational restrictions placed on international NGOs. However, many local organizations are not eligible for much funding, due to limited administrative capacity.

SURVEYS AND ASSESSMENTS

Displaced populations from the AA-MAF conflict are facing increased pressure to return to their villages of origin; however, the safe return of people cannot be guaranteed without first assessing the area for contamination by landmines and explosive ordnance. Intention surveys conducted by UNHCR consistently show fear of landmines as a significant factor in people's decisions to delay return. In addition, several humanitarian mine action organizations are planning assess explosive ordnance contamination in villages of origin through rapid assessments. Ideally, rapid assessments should be a leadin to comprehensive non-technical survey.

FOCUS ON CHILDREN

In Rakhine State, since 2019, children account for 43 per cent of all victims – higher than any other state. To address this, the HMA sector should:

- Ensure that victim assistance is gender- and age-appropriate
- Develop standard operating procedures specifically for child survivors
- Develop child-friendly EORE materials and messages
- Deliver targeted EORE sessions that are appealing and memorable for children
- Work with educators to integrate EORE messages into the curriculum

⁷ Landmine Monitor 2021, 'Myanmar¬¬/Burma, Impact', http://www.the-monitor.org/en-gb/reports/2021/myanmar_burma/ impact.aspx#Impact

PRIORITIES FOR HUMANITARIAN MINE ACTION IN RAKHINE

VICTIM ASSISTANCE

- convene a victim assistance technical working group under the Area of Responsibility with clear terms of reference and an identified lead agency
- develop referral pathways for victim assistance that are integrated with other sectoral referral pathways
- work with the Health Cluster, Mental Health and Psychosocial Support Cluster and others to improve the availability of services and identification of services for victims
- improve documentation of victim/ accidents and the monitoring of incidents and risk factors.

RISK EDUCATION

 expand the availability of EORE by engaging with CBOs, CSOs, religious groups, teachers, community health workers and volunteers

- develop a technical note to ensure that the training of trainers in EORE is consistent across organizations and complies with International Mine Action Standards
- ensure delivery of EORE to all affected populations, including those in rural areas, based on need regardless of ethnicity, age, gender, religion, or literacy
- strengthen two-way communication channels with communities to ensure risk education messaging is relevant to the context and responsive to community needs

INFORMATION MANAGEMENT

- in the absence of a national authority on mine action, the Mine Action AoR should take charge of collecting, compiling, and publishing non-sensitive data on mine action operations
- support a comprehensive victim information system that is linked to

- the national case management system and broader disability frameworks
- develop an effective information management system with consistent inputs from partner organizations
- development of data protection guidelines in accordance with safeguarding principles to prevent harm to beneficiaries, increase confidence among involved actors and increase participation in data-sharing.

SURVEY

- assess contamination in villages of origin through rapid assessments and non-technical surveys to ensure further returns of internally displaced people (IDP) are done with informed consent
- conduct non-technical surveys in rural villages where access is granted
- focus on community resilience through community mapping and marking

KEY ADVOCACY MESSAGES

- Call on all parties to the conflict to allow humanitarian access to all displacement sites, host communities, resettlement locations and rural villages for EORE, victim assistance and surveys.
- Call on all parties to the conflict to refrain from using landmines.
- Call on donors to extend access to additional funding to local organizations for EO risk education and victim assistance projects.
- All returns should be undertaken voluntarily.
- Establish two-way communication channels between IDPs and relevant actors for IDPs to share mine/ERW concerns and receive an effective and timely response.
- At a minimum, all IDPs need explosive ordnance risk education sessions before and after return.
- Surveys and/or assessments of explosive ordnance risks should be done in each return village before returns take place.
- All explosive ordnance clearance operations should be completed in-line with humanitarian principles and International Mine Action Standards.



