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Myanmar Country Office Humanitarian Situation Report



Reporting Period: 1 January to 31 December 2021

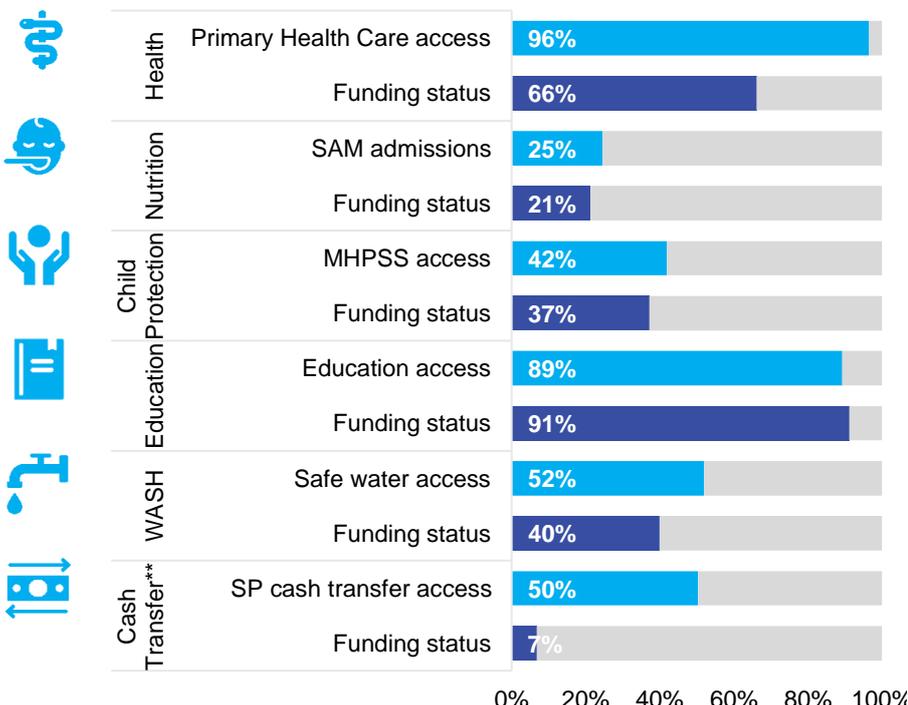
Highlights

- In 2021, UNICEF received 34 per cent of its Myanmar Humanitarian Action for Children appeal of US \$74.5 million, leaving a 66 per cent of needs unmet. Despite this gap, UNICEF's response reached 96 per cent of its target (148,528 people) in providing access to primary health care services, 89 per cent of its target (77,758 children) in providing access to primary education, and 52 per cent of its target (227,013 people) in providing access to safe water.
- Since the military coup on 1 February, 320,900 people have been newly displaced nationwide, including 15,000 people who have fled to India. In the southeast, 175,700 people have been displaced, including 4,700 individuals who are now in Thailand as of December 2021. Prior to the coup, an additional 370,000 people were in protracted displacement due to earlier conflict mainly in Rakhine, Kachin and northern Shan states.
- Since the February 2021 military takeover, more than 100 children have been killed in Myanmar, including through shootings, airstrikes, indiscriminate artillery fire, use of explosives and being used as human shields.
- UNICEF, jointly with the Swiss Development Cooperation and in partnership with TdHL, funded the humanitarian cash transfer programme in Hlaing Thar Yar, benefitting a total of 5,300 recipients.

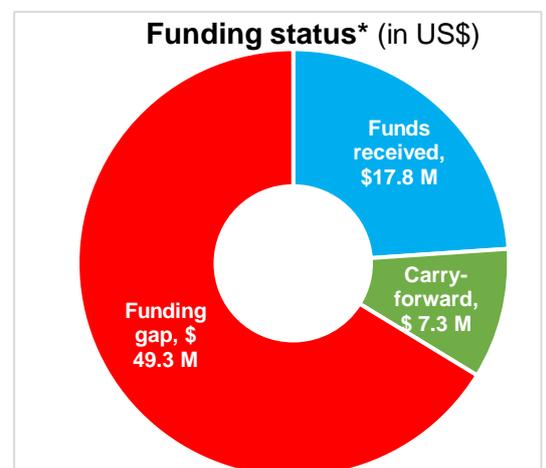
Situation in Numbers

-  **1,200,000** children in need of humanitarian assistance
-  **3,000,000** people in need (HRP and Addendum 2021)
-  **370,000** internally displaced people (IDPs) prior to Feb 2021 (OCHA, 2021)
-  **320,900** IDPs due to clashes and insecurity since February 2021 (UNHCR 2021)

UNICEF's Response and Funding Status



UNICEF Appeal 2021 US\$ 74.5 million



*Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors.

**Target from government-led social protection program supported by UNICEF prior to February 2021

Funding Overview and Partnerships

The 2021 Myanmar Humanitarian Action for Children (HAC), aligned with the Myanmar Humanitarian Response Plan (HRP) addendum, was revised to US \$74.5 million in August 2021 from the original US \$61.7 million requested at the end of 2020. Since the 1 February military takeover, the political crisis has further exacerbated pre-existing vulnerabilities, resulting in deepened humanitarian needs. Consequently, the HAC revision was developed, and UNICEF appealed for funding to scale up the provision of multi-sectoral life-saving services for assisting vulnerable children and their families affected by the ongoing crisis and COVID-19 pandemic. UNICEF received US\$ 25.1 million, including US\$ 7.3 million received in 2020 and carried forward, through generous contributions made by Australia, Denmark, European Civil Protection and Humanitarian Aid Operations (ECHO), Gavi, the Vaccine Alliance, Germany, Japan, Norway, Thailand, the Ministry of Commerce of the People's Republic of China, the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA), the UK, USA and UNICEF Singapore, together with invaluable financial support from global humanitarian thematic funding.

As of 31 December 2021, UNICEF had an overall HAC funding gap of US \$49.3 million, or 66 per cent, of the total appeal amount. The sectors primarily affected by this gap were the social protection and nutrition sectors, with only 7 per cent and 21 per cent funded respectively. Furthermore, the child protection sector also remained underfunded, with a gap of 63 per cent, consequently preventing 137,569 children out of the targeted 248,500 to receive assistance for much-needed psychosocial support, gender-based violence services and explosive weapons-related risk education. More details of funds received per sector can be found in Annex B.

Situation Overview & Humanitarian Needs

Eleven months into the 1 February 2021 military takeover, the conflict has spread across Myanmar, affecting hundreds of thousands of people who urgently need multisectoral emergency assistance. Throughout the year, the expansion of the conflict has severely impacted the already affected public system and provoked increased population displacements nationwide, with some people fleeing their homes in fear of the armed conflict, and others leaving villages destroyed by armed groups. The northwest and southeast regions have been the most severely affected by the clashes between the Myanmar Armed Forces (MAF) and the People's Defence Forces and Ethnic Armed Organizations. As of 27 December 2021, the UN Refugee Agency reported a national total of 320,900 people who have remained displaced since the beginning of the clashes, including approximately 15,000 people who have found refuge across the border in India. This national total also accounts for 175,700 individuals who have been displaced in the southeast, including 4,700 people who have fled to neighbouring Thailand since the mid-December attacks in Kayin state. Prior to the coup and in addition to the previous figures, OCHA reports that approximately 370,000 people are in protracted displacement due to earlier conflict in Myanmar. This number includes 144,000 people, mostly Rohingyas, living in Rakhine state camps since 2012, 106,700 people living in protracted displacement camps in Kachin and northern Shan states since 2011, and 82,200 people displaced due to conflict between the Arakan Army and MAF from early 2019 and late 2020.

In 2021, these mass movements of the population generated an array of new needs and exacerbated the vulnerability of specific groups, such as children and women, affected by the widespread violence. Humanitarian programming readjustments to the growing needs resulting from the COVID-19 pandemic were still a priority this year, with newly added vulnerabilities since the start of the conflict. From the initial 1 million people in need identified at the end of 2020, the number rapidly grew to 3.1 million in the Humanitarian Response Plan addendum. Consequently, UNICEF revised its Humanitarian Action for Children in August, which highlighted its aim to reach 667,389 people including 316,164 children out of the 1.2 million children estimated to be in dire need of nutrition services, safe drinking water, health care, protection and education. All assistance programmes have been expanded, but humanitarian partners have faced additional layers of complexity in their implementation, including access restrictions to people in conflict-affected areas, security risks and threats due to hazards, and temporary suspension of their activities due to COVID-19 prevention measures. Despite funding gaps and operational constraints, UNICEF implemented its responses, including reaching 96 per cent of its target for providing access to primary health care services to 148,528 people, 89 per cent of its target for providing access to primary education to 77,758 children aged from 3 to 17 years, and 52 per cent of its target was reached for providing access to safe water to 227,013 people.

As of 1 January 2022, a cumulative total of 531,025 confirmed COVID-19 cases and 19,274 deaths were recorded in Myanmar, resulting in a case fatality rate of 3.6 per cent. The escalation of the armed conflict, the population displacements and the impact of COVID-19 control measures have further restricted access to essential services, in conjunction with their impacts on children. As a result, approximately 12 million children missed school for 18 months due to the pandemic. Even though schools began to reopen in November 2021, the slow growth in attendance (40 to 50 per cent as of December 2021) demonstrated resistance to attending schools managed by the de facto authorities.

The conflict's impact on children goes further, with exposure to violence affecting their physical and psychological health and well-being, and the heightened risks of suffering from conflict-related violence including killing, physical injury, trafficking, recruitment and use in armed conflict, sexual violence, arbitrary arrest, and unlawful detention. Given the persistence of the conflict and its impact, UNICEF has estimated that the population's emergency needs will continue to grow in 2022, with an estimated 25 per cent of the population needing humanitarian aid, including 5 million children.

Summary Analysis of Programme Response

Health

Multiple challenges were faced in the implementation of activities in 2021, impacting the delivery of health services. The disruption of essential maternal, newborn and child health (MNCH) services and an almost complete halt to the immunization programme since the military takeover affected the capacity to reach the targeted children aged from 9 to 18 months for their vaccination against measles. A total of 4,835 children were vaccinated against the disease, out of the targeted 17,000 children in Kachin, Shan and Rakhine. Meanwhile, 148,528 people, representing 96 per cent of the target, received primary health care services in Kachin, Rakhine, Shan, Kayin, and Kayah states and the Yangon peri-urban area through UNICEF partners Myanmar Health Assistant Association (MHAA), Health Poverty Action (HPA), Kachin Baptist Convention (KBC), Action Contre La Faim (ACF), Karuna Mission Social Solidarity (KMSS), Suwannimit Foundation (SNF) and Terre des Hommes Lausanne (TdHL). UNICEF partners have continued to deliver essential MNCH services at the community level and through mobile clinics, and partners have successfully procured BCG, MR, OPV, JE and Td vaccines to reach 80,000 children and 80,000 women in 37 townships. In response to growing urgent health needs and emergency cases resulting from the armed clashes, UNICEF provided a total of 98 interagency emergency health kits and 450 first aid kits for clinics, outreach primary health care services, volunteers, internally displaced people (IDP) and host community members. This benefited 30,650 people (14,326 men and 16,324 women) including 10,697 children, 270 pregnant women and 368 disabled people.

UNICEF has been coordinating the COVID-19 vaccination roll out with vaccines supplied through the COVAX initiative, together with the World Health Organization (WHO), Gavi and donors, within the framework of the United Nations Health Response and Contingency Plan, the Revitalization of Routine Immunization, and COVID-19 vaccinations. The final planning phase continues, and diplomatic talks and negotiations are also taking place under the umbrella of the United Nations and the Association of Southeast Asian Nations (ASEAN). With UNICEF support, the MHAA vaccinated 8,102 people against COVID-19 in 10 camps in Rakhine. Additionally, following the limited public health services since the beginning of the pandemic, plus the impacts of the military takeover on access and availability of health facilities and personnel, UNICEF supported the response to the third wave of COVID-19 by procuring a total of 4 oxygen plants with the capacity of 300 litres per minute, 488 oxygen concentrators and accessories, 900 oxygen cylinders with flow meters and humidifiers, personal protective equipment (PPEs) including 36,390 packs of surgical masks and medicines for case management. Messages about COVID-19 prevention and services, and community engagement on this, have reached 24,732 people.

Nutrition

In 2021, although UNICEF has reached a total of 148,294 children (65 per cent of its target) aged 6 to 59 months with multiple micronutrient powders, only 25 per cent of the 15,807 targeted children in need of treatment for severe acute malnutrition have been reached, for a total of 3,888 children. This gap is largely due to the impact of the 79 per cent funding gap for the nutrition sector, in addition to challenges faced by partners related to limited access to humanitarian areas due to increased insecurity, with further impacts created by the continued consequences of the COVID-19 preventive measures. The nutrition sector has also suffered from a limited number of nutrition implementation partners in some areas such as Chin, Yangon and Bago due to capacity and resource challenges. Even with the above-mentioned challenges, UNICEF's implementation partners provided life-saving nutrition services including the counselling of 25,402 caregivers with infant and young child feeding (IYCF), the support of 31,172 pregnant and lactating women (PLW) with multiple micronutrients supplementation, and the screening of 104,110 children aged 6–59 months for acute malnutrition. To prevent malnutrition among under-five children who are living in hard-to-reach, conflict-affected and food-insecure areas, UNICEF, in coordination with field partners, made blanket distributions of 4,098 cartons of ready-to-use therapeutic food (RUTF), benefiting an estimated 20,490 children aged 6–59 months in Shan, Yangon, Bago and Kayin.

With the crisis spreading and impacting access to facilities, UNICEF helped expand essential nutrition services in Kachin, Rakhine, Kayin and Shan, with essential nutrition supplies such as 3,650 cartons of RUTF, anthropometric equipment, deworming tablets, vitamin A, multiple micronutrients, nutrition bowls and posters. These were distributed

with the help of MHAA, ACF, KBC, World Concern, Medical Action Myanmar, Community Partners International (CPI), Meik Swe Myanmar and Kayin State Nutrition team. Approximately 60,000 children aged between 6 months and 5 years are benefitting from the distribution of vitamin A tablets in Kachin, Mon, Kayin, Chin, Magway and northern Shan through UNICEF partner Save the Children International.

UNICEF provided a variety of training and workshops for its partner organizations throughout the year, including community IYCF, Integrated Management of Acute Malnutrition (IMAM), vitamin A supplementation and nutrition supply forecasting as well as supply chain management training. These trainings in Yangon, Rakhine, Kachin, Kayin and Shan, reached most regions of Myanmar and involved more than 300 partners, including CPI, PUI, HPA, MHAA, Save the Children, TDH, ACF, MSF, RI, HKI, IRC, World Visions, KBC, KMSS, RCLS, MAM, SNF and Mawkun.

Cluster: The Nutrition Cluster includes one national cluster and six subnational clusters. The national Cluster is led by UNICEF and has established a Strategic Advisory Group (SAG) and two Technical Working Subgroups (TWG). One of these subgroups deals with Infant and Young Child Feeding and the Integrated Management of Acute Malnutrition (IYCF/IMAM) and the second is Assessment and Information Management. This is co-chaired by NGO partners to provide technical guidance and capacity-building among the cluster members. The southeast cluster (Kayin, Mon, Tanintharyi, Bago (East) and Kayah) is going to be upgraded from nutrition working group to a subnational nutrition cluster given the increased needs and the number of partners in those areas. UNICEF, in collaboration with the Global Nutrition Cluster (GNC) and other nutrition partners, has developed an emergency response and preparedness plan with a focus on risk analysis, capacity mapping, and contingency planning.

Based on the capacity mapping, training on Infant and Young Child Feeding in Emergency (IYCF-E) was given to 31 senior staff of the Nutrition Cluster partners in collaboration with the GNC Technical Alliance. The Nutrition Cluster gave a knowledge, attitude and practice survey and advice on rapid nutrition assessment techniques to 30 staff from its partners. Eight staff from the standby team for Rakhine subnational cluster were trained on conducting a rapid needs assessment. The Nutrition Cluster has developed an online tool and virtual training materials to enhance the ability of partners to implement and scale up nutrition-specific interventions nationally.

Child Protection

In 2021, the scale of the conflict expanded to include previously unaffected townships, with a total target of 248,500 people in need of mental and psychological support, gender-based violence (GBV) services and explosive weapons-related risk education. UNICEF delivered child protection services to 117,618 vulnerable children (63,407 girls and 54,211 boys) despite the sector being funded at only 37 per cent. Due to the political turmoil and COVID-19 impacts, remote counselling methods were adopted to cope with the situation, with phone calls placed through established hotlines and in response to clients' needs. Following the February military takeover UNICEF, together with Save the Children, revitalized the interagency Case Management Task Force to coordinate case management actors and to improve standards in child protection and GBV case management. UNICEF also invested in fast-tracking the pilot of the Child Protection Information Management System (CPIMS+) and Primero platform in Myanmar.

With increased limitations in access to conflict areas, plus restrictions caused by COVID-19 as well as substantial security risks and threats for monitoring and reporting mechanism (MRM) on the ground, many pre-existing monitors ceased their contributions causing the overall ability of MRM network to be highly impacted. Nevertheless, UNICEF continued to explore ways of increasing its monitoring and reporting mechanisms such as the documentation of violations not occurring during armed conflict, including attacks on schools and hospitals or the killing and maiming of children in a non-armed conflict context. One of the biggest gains towards the end of 2021 was UNICEF committing to coordinate humanitarian efforts on mines in Myanmar. UNICEF has brought together more than 40 partner organizations and mine action organizations to advocate for support to victims and for enhanced Explosive Ordnance Risk Education to save the lives of children and their communities.

Despite the security and safety risks that frontline workers have been facing in the implementation of their activities throughout the year, UNICEF, in partnership with 85 local lawyers, provided legal aid services and assisted a total of 809 children (408 boys, 401 girls) and 756 young people (31 per cent female) who have been arrested and/or detained following the military takeover, across 14 states and regions. Furthermore, a total of 6,955 child protection kits were distributed in high-risk areas in Mon, Kayin, Chin, Magway, Rakhine, Kachin, Shan and Kayah, as well as 62 child-friendly space kits to Kayin, Rakhine and Shan to assist with mobile psychosocial support and counselling to displaced children and their families. Nine more partnerships on protection against sexual exploitation and abuse (PSEA) are

being implemented to reinforce community awareness on SEA reporting channels and services for vulnerable populations in Kachin, northern Shan, Rakhine, Kayah and Kayin through localized interventions.

Cluster: In 2021, as part of the cluster activation and because of the growing needs nationally, the Child Protection Area of Responsibility (CP AoR) conducted a review of its coordination system across the country, identifying areas where further support is required, notably in Chin, Sagaing and the southeast. Despite limited resources, existing subnational coordinators have established a coordination structure from Chin to cover these areas. This has enabled the sector to work with local partners in mobilizing responses and monitoring the situation in these regions. The CP AoR also supported the Protection Cluster in subnational consultations with partner agencies during the Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP) process for a more inclusive process, greater awareness among actors around the cluster system and improved ownership of the humanitarian strategies. Towards the end of 2021, the CP AoR has worked closely with the Global CP AoR to develop a strategy for improving localization within its coordination system, and develop improved coordination methods at national and subnational level, guiding further actions in 2022. With the increasing violation of children's rights in Myanmar, the CP AoR worked with partner agencies to develop a statement issued in November 2021, highlighting issues affecting children in Myanmar. This included plans for joint advocacy and engagement with donors and other interested parties.

Education

In many areas, children have faced challenges accessing organized learning due to COVID-19 and concerns about safety and security. Programme delivery within the education sector remained constrained due to the tense political environment and restrictions imposed for the control of COVID-19. Without engagement with the Ministry of Education (MoE) under the de facto authorities, getting authorization and access for programme monitoring became challenging and UNICEF consequently increased its engagement with civil society organizations (CSOs) to reach more children.

Displacements of children in Chin, Sagaing, Kayah, the southeast and Kachin increased during the year, as conflict spread in these regions. Despite the challenges, insecurities and uncertainties that followed the military takeover, UNICEF and its partners continued to support continuity of learning for 77,758 children (38,076 girls) aged from 3 to 17 years across Myanmar, representing 89 per cent of the identified target. Key activities included maintenance of temporary learning classrooms (TLCs), provision of home-based learning materials, provision of volunteer teachers' incentives and COVID-19 awareness. Schools remained closed for most of the year although, from 1 November, all schools including Government schools, TLCs and monastic schools, except in townships under COVID-19 restrictions, were allowed to open. Students' and teachers' attendance rates remained low, depending on states and regions, mainly as a result of the widespread instability. Non-formal education classes also opened at the end of November, with low enrolments and attendance.

Cluster: After the military takeover, the education in emergencies (EiE) sector developed a provisional strategy to support children's continuous learning, integrating with non-specialized psychosocial support, life-saving messages and skills and COVID-19 prevention. The strategy also identified joint sector approaches including monitoring access to learning, subnational contingency planning and a renewed effort to engage and support local organizations. The Education Cluster was activated nationally in August 2021 which formalized the role of EiE partners in minimizing disruptions to education for all children. The Education Cluster continued to respond to the protracted crisis in Rakhine and Kachin and supported the continuous access to education more broadly in response to the evolving humanitarian crisis. At national level, the Education Cluster is co-chaired by UNICEF and Save the Children and has a dedicated Education Cluster coordinator. During the last quarter, partners have been developing a two-year strategy built on the provisional strategy and aligned with the 2022 Humanitarian Response Plan. UNICEF contributed technical support to this strategy at national and subnational levels. The Education Cluster is also adding subnational coordination groups to cover Chin, Sagaing, Magway, Kachin, Shan, Rakhine, Kayah and southeast Myanmar.

WASH

2021 was characterized by the impact of COVID-19 and the military takeover, with significant consequences for humanitarian access, compromised supply chains, timely availability of supplies, limited cash availability and short-term funding. However, UNICEF support in supplying critical water, sanitation and hygiene (WASH) services reached 562,994 people in Rakhine, Kachin, and northern Shan as well as in the expanded outreach areas of Chin, Sagaing, Kayin, Kayin and other conflict-affected regions. Following the takeover, UNICEF increased its target of people in need of access to sufficient clean water by over 480 per cent, in addition to helping 237,500 people (74,789 men, 84,336 women, 36,836 boys and 41,539 girls) access clean drinking water in 2021, three times more than the 82,825 people reached in 2020. Gender-sensitive sanitation services benefited 108,484 IDPs, a multimedia campaign on handwashing through social

media and radio reached 3.1 million people and COVID-19 prevention and mitigation messages through interpersonal communication reached 203,001 people.

The additional challenges faced by most WASH partners have been getting travel authorizations and extension or renewal of Memoranda of Understanding, while activities were also hampered by limitations in banking services, creating cash flow issues in the targeted locations with limited supplies and price increases for essential WASH items. Overcoming these constraints, UNICEF WASH response was delivered in many ways including through expanding partnerships with over 20 international and local civil society organizations, United Nations agencies and specialized contractors. In Rakhine, UNICEF partnered with Community and Family Services International, People in Need, Consortium of Dutch NGOs, OXFAM, Solidarity International and Community Development Association. Kachin Baptist Convention, KMSS, HPA, Metta and ArYone Oo Social Development Association supported humanitarian response in Kachin, Shan and Kayah. In Kayin, UNICEF main partners were Adventist Development and Relief Agency, Peace Winds Japan and CPI. For urban response in Hlaing Thar Yar township in Yangon, in addition to hiring a private company, Water Aid and TdH supported delivery of daily purified drinking water supply to 50,000 people. Since July 2021, more than 12 million litres of bottled drinking water have been distributed to households reeling from the impact of COVID-19 pandemic and martial law. In Wa Special Region, in northern Shan, UNICEF and the World Food Programme (WFP) jointly helped install 217 sets of water storage tanks with handwashing facilities in 123 schools in 13 townships, benefiting 16,156 students. This service-level agreement between WFP and UNICEF is unique and integrates support for school feeding and a programme for promoting handwashing. In response to COVID-19, WASH implementing partners have distributed and installed 800 portable handwashing stations in communal places, temporary learning spaces and schools, with 36,580 people being able to access WASH supplies such as hygiene kits, and benefiting from communal handwashing basins.

Cluster: The cluster system was activated nationally in mid-2021, because of the large displacement due to the military takeover. The WASH Cluster extended its coordination beyond the five Humanitarian Response Plan locations targeted for 2021, to include northern Chin, Kayah, South Shan states, Magway, Sagaing and the southeast region of Myanmar. However, due to limited funding, the coordination in some locations was covered by the WASH programme team and other cluster team members. The WASH Cluster partners were awarded US\$1,623,820 (20 per cent) of the 8,056,542 USD Myanmar Humanitarian Fund Second Standard Allocation envelope. All projects are multisectoral and are spread out through Chin, Magway, Sagaing, Kayah, Shan, Kachin, Kayin and Rakhine. The WASH Cluster finalized the following key plans during 2021: the menstrual hygiene management guideline, the inclusion tool kit including a WASH assessment tool, the standard operation procedures, WASH designs, and a WASH Cluster and EiE guideline for reopening safe learning spaces in respect of the MoE COVID-19 school opening guideline.

Social Protection

UNICEF piloted a mobile-based health microinsurance initiative, aiming to provide affordable health services in the emergency and targeting the most vulnerable households in the informal settlements of Hlaing Thar Yar and Shwe Pyi Tar townships. The project's services included health education material, medical consultations with doctors on call, outpatient referral and cash subsidies covering hospitalization cost. Some 9,242 people benefited from the initiative, including 8,480 children under 7 years old and 762 pregnant women. To date, service users have received 30,586 telemedicine consultation services 5,534 prescriptions, 2,240 investigations, 1,528 referrals, 330 hospital cash grants, and 340 outpatient services. Parents of hundreds of children aged under 2 were able to call the service for messages on IYCF, while 124 pregnant women were also provided with antenatal care via tele-messaging.

UNICEF, jointly with the Swiss Development Cooperation and in partnership with TdHL, funded the humanitarian cash transfer programme in Hlaing Thar Yar. The first payment was successfully completed from the UNICEF fund in July 2021, while the second, electronic cash disbursement was provided during the last quarter of 2021 with a transfer value of MMK42,800 per programme participant. The third round of cash transfers was planned for the end of December with 5,074 programme participants. A total of 5,300 people (2,417 pregnant women and 2,883 children under 2 including 1,483 girls) in Hlaing Thar Yar, Yangon are set to receive the payments with feedback mechanism available. The first round benefited 138 people with disabilities (2.8 per cent), with 144 (2.7 per cent) benefiting from the second round. Additional challenges have been faced throughout the implementation of the programme as approximately 500 participants changed their phone numbers due to political, social and economic issues. Furthermore, in light of the ongoing forced evictions from informal settlements by the military authorities, many participants had to leave Hlaing Thar Yar for other townships or return to their place of origin. UNICEF and partners are trying to identify and contact these individuals using the UNICEF work on Social Behaviour Change Communication activity.

Communications for Development (C4D), Accountability to Affected Population (AAP)

In 2021, UNICEF developed an accountability indicator as part of its Humanitarian Action for Children appeal. It has been working on collecting information and reporting on Accountability to Affected Population (AAP). With the support of UNICEF field offices, consultation meetings were conducted with partners, seeking to use their existing AAP mechanisms to obtain information on complaints and feedback related to UNICEF programming, and fed this information into the data-collection tool. Due to the intense security situation in Myanmar throughout 2021, many partners do not have regular access to project locations, thus having less capacity to seek feedback and inputs from beneficiaries. To address these challenges, the C4D team worked to develop AAP indicators to be included in all new programme documents, which will allow data and information to be collected from partners' reports. The data collection for AAP takes place on a quarterly basis and 4,270 pieces of feedback were recorded throughout 2021 across Kachin, Rakhine, Chin and Shan states and then analysed and shared to the respective programmes for follow-up.

As part of COVID-19 prevention, UNICEF has collaborated with the WHO to continuously monitor people's reactions and responses to COVID-19 information and vaccination on social media, using the data analysis tool "Crowd Tangle". Findings are shared in the risk communication and community engagement working group to develop myth-busting infographics and music videos.

Humanitarian Leadership, Coordination and Strategy

UNICEF's humanitarian strategy in Myanmar is aligned with the Humanitarian Needs Overview, the Humanitarian Response Plan, and Clusters and programme priorities. In response to the political crisis and its impact, four clusters were activated on 21 August 2021, namely Nutrition, Food Security, Education and Protection. UNICEF is leading three clusters and one Area of Responsibility (AoR). UNICEF leads the Nutrition and WASH Cluster, while co-leading both the Education Cluster and the Child Protection AoR with Save the Children. UNICEF continues to work in coordination with the Myanmar Humanitarian Country Team, while collaborating with UN agencies and INGOs to efficiently coordinate and deliver life-saving services. In addition to taking part in the Inter-Cluster Coordination Group led by OCHA, UNICEF facilitates the in-country interagency PSEA network with UNFPA and is an active participant in the Access Working Group. Through nine offices across Myanmar, UNICEF ensures monitoring of its programme implementation and coordinates its activities in Yangon and Nay Pyi Taw, Lashio and Taunggyi in Shan, Sittwe and Maungdaw in Rakhine, Myitkyina in Kachin, Hakha in Chin and Hpaan in Kayah.

Human Interest Stories and External Media

Press statements (published at CO level)

<https://www.unicef.org/myanmar/press-releases/new-years-babies-over-2688-children-will-be-born-myanmar-new-years-day-unicef>

<https://www.unicef.org/myanmar/press-releases/unicef-myanmar-statement-fatal-explosion-ordnance-minbya-town>

https://www.unicef.org/eap/reports/asia-and-pacific-regional-overview-food-security-and-nutrition-2020?fbclid=IwAR3jzIcmq_J5ONxvAFAaahzWQp31T585MuOpJfjtJVjDVRfa-ZQSuWn3o1E

<https://www.unicef.org/myanmar/press-releases/unicef-calls-greater-attention-protection-childrens-rights-myanmar>

<https://www.unicef.org/myanmar/press-releases/occupation-schools-security-forces-myanmar-serious-violation-childrens-rights>

<https://www.unicef.org/myanmar/press-releases/brutal-violence-security-forces-myanmar-leaves-dozens-dead-including-multiple>

<https://www.unicef.org/myanmar/press-releases/unicef-statement-media-reports-alleging-misuse-unicef-provided-supplies-kachin-state>

<https://www.unicef.org/myanmar/press-releases/nutrition-partners-caution-against-unnecessary-use-breast-milk-substitutes-bms>

<https://www.unicef.org/myanmar/press-releases/joint-statement-gavi-unicef-and-who-efforts-accelerate-covid-vaccine-availability>

Press statements (published at RO level)

<https://www.unicef.org/eap/press-releases/unicef-condemns-reported-killing-least-35-people-including-four-children-and-two>

<https://www.unicef.org/eap/press-releases/education-risk-generation-children-myanmar-must-have-safe-appropriate-and-inclusive>

<https://www.unicef.org/eap/press-releases/brutal-violence-security-forces-myanmar-leaves-dozens-dead-including-multiple>

<https://www.unicef.org/eap/press-releases/unicef-condemns-killings-and-arbitrary-detentions-children-security-forces-during>

<https://www.unicef.org/eap/press-releases/unicef-condemns-violence-mandalay-reportedly-resulting-death-child>

<https://www.unicef.org/eap/press-releases/unicef-calls-greater-attention-protection-childrens-rights-myanmar-during-time>

Press statements (published at HQ level)

<https://www.unicef.org/eap/press-releases/brutal-violence-security-forces-myanmar-leaves-dozens-dead-including-multiple>

Human interest stories and articles

<https://www.unicef.org/myanmar/stories/serving-children-myanmar>

<https://www.unicef.org/myanmar/stories/healing-childrens-trauma-simple-box-crayons>

<https://www.unicef.org/myanmar/stories/wake-crisis-unicef-brings-clean-water-vulnerable-urban-families>

<https://www.unicef.org/myanmar/stories/unicef-relief-supplies-reach-desperate-families-cut-chin-state-myanmar>

<https://www.unicef.org/myanmar/stories/thousands-stranded-and-displaced-floods-receive-support-unicef>

<https://www.unicef.org/myanmar/stories/myanmar-training-empowers-villagers-tackle-unexploded-weapons>

<https://www.unicef.org/myanmar/stories/unicef-kits-bring-normality-displaced-children-conflict-affected-myanmars-south-east>

<https://www.unicef.org/myanmar/stories/fighting-child-deaths-covid-19-respiratory-infections>

<https://www.unicef.org/myanmar/stories/boosting-vitality-building-strong-families>

<https://www.unicef.org/myanmar/stories/covid-19-pandemic-frontline-workers-receive-toys-their-children-kachin-state>

<https://www.unicef.org/myanmar/stories/myanmar-preventing-mother-child-transmission-hiv-during-covid-19-pandemic>

<https://www.unicef.org/myanmar/children-myanmar>

Next SitRep: 28 February 2021

UNICEF Myanmar Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/myanmar>

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Summary of Programme Results

INDICATOR	UNICEF and IPs Response			Cluster Response		
	2021 Targets	Total Results	Change ▲▼	2021 Targets	Total Results	Change ▲▼
NUTRITION						
# children aged 6-59 months with SAM admitted for treatment	15,807	3,888	▲2,408	15,821	3,888	▲2,408
# children 6-59 months receiving multiple micronutrient powders	226,973	148,294	▲114,826	227,092	148,294	▲114,826
# of mothers, fathers and other caregivers of children (0-23 months) reached with messages on breastfeeding in the context of COVID-19	135,648	25,402	▲25,402	135,743	28,533	▲28,533
HEALTH						
# children 9 to 18 months vaccinated against measles	17,000	4,835	▲2,674			
# affected population accessing primary health care services	154,000	148,528	▲110,893			
WATER, SANITATION AND HYGIENE PROMOTION						
# male and female accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	437,500	227,013	▲139,238	872,121	525,089	▲182,039
# male and female accessing appropriately designed and managed latrines	98,500	108,484	▲46,389	872,121	325,325	▲71,878
# male and female reached with critical WASH supplies (including hygiene items) and services	557,500	629,639	▲459,856	1,022,495	662,771	▲339,814
CHILD PROTECTION						
# children, adolescent boys and girls and male and female caregivers accessing mental health and psychosocial support	135,000	56,623	▲21,843	168,000	111,095	▲32,440
# women, girls and boys accessing GBV risk mitigation, prevention or response interventions	33,000	11,781	▲2,916	34,500	12,768	▲3,178
# boys and girls, men and women accessing explosive weapons-related risk education	80,500	42,527	▲21,620	80,500	179,851	▲135,617
EDUCATION						
# of targeted girls and boys (3-17) supported to access quality and inclusive pre-primary/primary and post primary learning opportunities	87,100	77,758	▲50,454	273,590	107,921	▲46,199
# of male and female volunteer teachers/facilitators who have completed trainings to provide quality and inclusive education to children	1,010	883	▲593	5,791	2,001	▲591
SOCIAL POLICY						
# households benefiting from social assistance measures to respond to COVID-19 and humanitarian crises with UNICEF support	500,000	251,300	▲5,300			

AAP (NOTE: C4D/RCCE included in sectors)

male and female sharing their concerns and asking questions/clarifications to address their needs through established feedback mechanisms

52,000

4,270

▲ 2,533

Annex B

Funding Status

Sector	Requirements	Funds available		Funding gap	
		Received current Year 2021	Carry-over	\$	%
Nutrition	\$12,542,544	\$1,292,974	\$1,364,812	\$9,884,758	79%
Health	\$7,101,500	\$3,610,557	\$1,088,757	\$2,402,186	34%
WASH	\$17,725,000	\$5,365,513	\$1,710,652	\$10,648,835	60%
Child Protection, GBVIE* and PSEA**	\$14,000,000	\$3,711,202	\$1,500,303	\$8,788,495	63%
Education	\$4,813,015	\$2,954,916	\$1,428,272	\$429,828	9%
Social Protection and Cash Transfer	\$12,750,000	\$833,658	\$29,377	\$11,886,965	93%
Rapid Response Mechanism	\$4,000,000	\$51,403	\$212,685	\$3,735,911	93%
Cluster coordination	\$1,575,000	-		\$1,575,000	100%
Total	\$74,507,059	\$17,820,222	\$ 7,334,859	\$49,351,978	66%

*Minimum Standards for Prevention and Response to GBV in Emergencies

** Protection against Sexual Exploitation and Abuse