

MYANMAR

NOVEMBER 2021

The volatile situation in Myanmar following the 01 February 2021 coup has **resulted in increased displacement** both within the country and some crossing borders, including into Thailand

Humanitarian actors stand ready to **support the Royal Thai Government (RTG) 's efforts** to receive Myanmar refugees fleeing to ensure provision of protection

Agencies continue to take several **key preparedness actions** to ensure that complementary activities are delivered in a timely and coordinated manner

THE REFUGEE PREPAREDNESS & RESPONSE PLAN

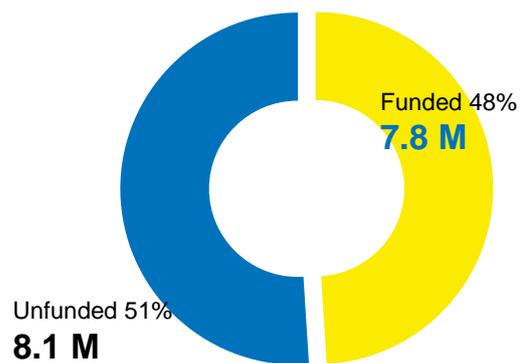
Following developments in Myanmar since 1 February, agencies elaborated the Refugee Preparedness and Response Plan (joint inter-agency plan) **to strengthen inter-agency preparedness with multi-sector coordination mechanism** established at national level and in the provinces to be ready to support the RTG responding to humanitarian needs for newly arrived refugees. This coordination mechanism, which is separate from the coordination mechanism for the nine camps, is structured around the following sectors: Education; Food; Health; Non-food items (NFIs); Protection; Shelter; and Water, Sanitation, and Hygiene (WASH).

Given the continuing volatile situation in Myanmar, the Inter-Sector Working Group (ISWG) has extended the duration of the Joint Appeal issued in June until 31 December 2021.

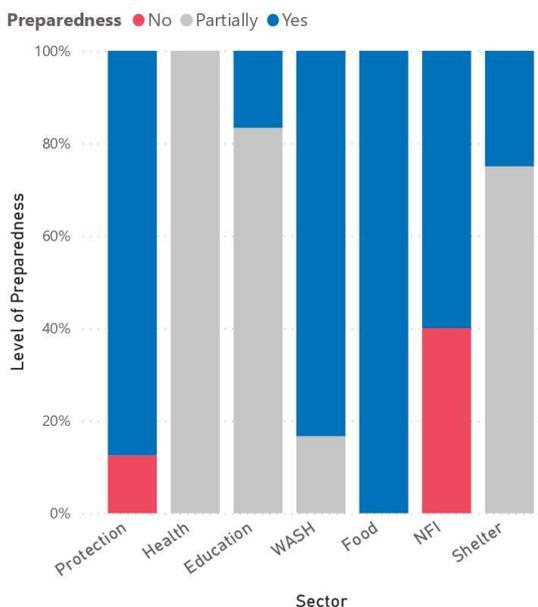
FUNDING (AS OF 10 NOVEMBER)

USD 15.9 M

*reflects funding earmarked specifically to activities in the appeal; does not reflect funding partners have generously received at broader levels of earmarking (country, subregional, regional)



PREPAREDNESS LEVEL PER SECTOR



STRATEGIC OBJECTIVES

Based on the June-November appeal, each sector has built emergency capacity and adequate inter-agency procedures to ensure effective response in the case of a **scenario of 4,000 new arrivals per month** over six months. Preparedness aims to contribute to three strategic objectives: (1) **Access to territory is ensured for persons in need of protection, in a COVID-19-sensitive manner** (2) **Essential needs are provided for** (3) **Specific needs of the most vulnerable are addressed.**

Humanitarian agencies are now positioned to support the efforts of an RTG-led response. However, certain prerequisites are required, such as humanitarian access and safeguards to prevent any actions that could lead to refoulement. While much has been established in terms of systems, outreach, and capacity-building, preparedness is also affected by some factors, including lack of access, minimal engagement by authorities, and funding gaps for some sectors.

MAIN CHALLENGE

Measures implemented to prevent the further spread of COVID19 has been one of the main challenges. From June to September, Thai borders have been closed, with few temporary border crossing points opened to transport goods. The restricted access has hampered the provision of assistance in camp. In addition, international procurement processes have been slowed and transport capacity to field locations reduced, which has hindered the delivery/prepositioning of NFIs.

HIGHLIGHT ON KEY ACHIEVEMENTS

EMERGENCY SIMULATION EXERCISE

In November, members of the inter-sector working group participated in a simulated preparedness scenario. In Mae Hong Song, partners worked on two possible scenarios. The first scenario, an influx of 4,000 refugees in temporary safety areas without humanitarian access and, the second scenario, 8,000 refugees already transferred to holding areas. In Kanchanaburi and Tak, scenarios were no access to 4,000 refugees over two weeks, and no access to 4,000 refugees over two months. The simulation allowed partners to test their current level of preparedness and identify remaining gaps. In all provinces, participants highlighted the need for continued engagement with the Royal Thai Authorities (RTA), Community Based Organizations (CBOs) and Civil Society Organization (CSOs) in order to maintain an effective level of response. The mapping of CBOs and CSOs remains an ongoing exercise to strengthen communication channels and explore other avenues of access to refugees in case of influx. The exercise was conducted online to comply with national Covid-19 protocols on organized events



PROTECTION

- SOPs and tools to ensure a principled assistance and protection approach have been developed, including a guidance note on assistance in temporary safety areas, a guidance note on assistance in non-SOP areas, an information sharing protocol, common advocacy messages, and key child protection messages. In addition, Referral Pathways (RPs) have been developed for all potential influx locations and disseminated to all protection partners in all locations. The RPs are one-pagers that list contacts of relevant focal points which can provide adequate protection services for GBV, child protection, malnutrition, mental health, patient referral and transport, and other key interventions in the holding areas in case of a future influx
- Capacity and knowledge of emergency responders have been strengthened with 419 interagency sector members, internal staff, and CSO/CBOs trained on protection mainstreaming, persons with specific needs, child protection, Gender-Based Violence, and Prevention of Sexual Exploitation and Abuse (PSEA).
- The existing and specific referral network and referral mechanism for Gender Based Violence (GBV) and Child Protection (CP) cases has been explained to all sector members, and is being adjusted for an emergency situation.



EDUCATION

- A Home Based Learning (HBL) Kit Guidance was developed, including supporting game cards with instructions for parents. The tool includes simple instructions for facilitators and local partners on engaging and organizing sessions with parents and caregivers. The content of the HBL has been translated into

Burmese, Karen, Thai and Karenni languages. Training on the HBL has been provided to education sector partners and field staff.

- 1,200 HBL Kits have been prepositioned and training and compensation of community volunteers for HBL has been provided
- Forty-seven participants were trained in Education in Emergency and Child Safeguarding. The latter training included media exploitation, sexual abuse, child labour, child abuse and consequences on children's health. The training ensures that education sector partners and other partners working with children are able to adopt a holistic approach in preventing possible harm and abuse of children and that they are and remain safe.
- Minimum standards for the establishment of Temporary Learning Spaces (TLS) near holding areas for school-aged children have been developed. These have been adapted to the local context.



WASH

- Hygiene kits and latrine designs have been standardized with consideration to affordability for everyone. More specifically, latrines have been designed for all locations, considering ease of installation, acceptance, and response time in each area.
- Assessments of type and nature of water sources and collection points (direct pumping/pipeline/ borehole with water infiltration) have been conducted.
- Partners have been trained on water supplies, hygiene promotion, sanitation work, and latrine design.



HEALTH

- SPHERE standards for basic health services have been set based on the healthcare settings of Thai-Myanmar border. Systems for the screening of disabilities have been established with the aim of providing mobility and walking aids in addition to physical rehabilitation services.
- The Mental Health Psycho-Social (MHPSS) toolbox was created, and Mental Health Training of Trainers (MH TOT) was provided in September, focusing on the clinical management of acute and general psychiatric and alcohol/other substance-related conditions, referrals and follow up strategies.
- Psychological First Aid (PFA) training was provided to local CBOs/ CSOs and health partners. The training covered basic principles, core actions, self-care and PFA for Loss and Grief.
- First Aid Kits for the influx, including PPEs for COVID19 (i.e. face masks and hand sanitizer) have been prepositioned. A drug list model for 1,000 persons for three months was prepared, ready to be activated for purchase in case of influx.



FOOD & SHELTER

- Essential food items, cooking fuel and fuel-efficient stoves for potential holding areas, as well as specific food for the nutrition of children and pregnant/breastfeeding women, have been prepositioned

NFI

NON FOOD ITEMS

- NFI kits have been prepositioned. These include plastic tarpaulins, sleeping mats, blankets, mosquito nets, dignity kits and baby kits. Procurement of kitchen sets and solar lamps is ongoing.

- Humanitarian partners at national and field levels were trained on all relevant NFI processes, tools and accountability mechanisms in emergency and post-emergency phases. Partners were capacitated to track NFI distributions using ODK Kobo tools and how to use reconciliation and accountability templates.
- A Post-Distribution Mechanism (PDM) tool has been developed.
- A Guidance Note was developed to standardize the minimum NFI kit and harmonize distribution processes.

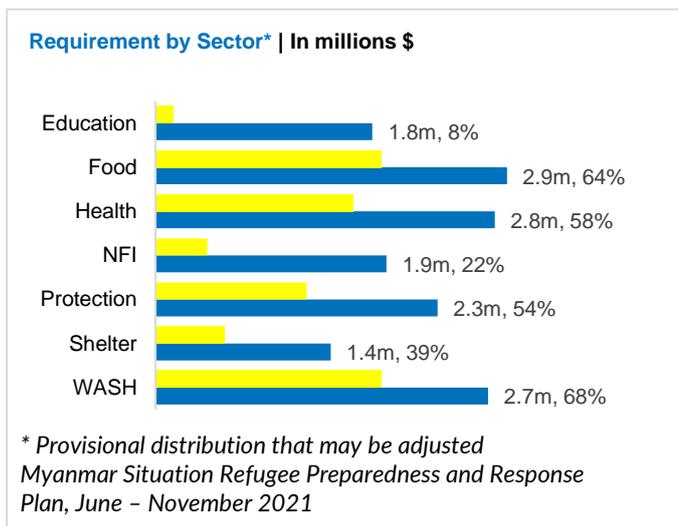


SHELTER

- Shelters have been redesigned as access to sufficient bamboo remains a challenge. The redesign exercise led to the proposal of two shelter designs that save up to 35/40% of the bamboo initially needed in constructing the original shelters. The new design is in line with SHERE standards and will place the Sector in a better position to respond more sustainably and within a specific time frame.
- Community toolkits have been prepositioned in all areas. A tool kit is designed for a group of four/ five persons to engage in the repair and construction of their shelters.

Financial Information

Agencies are very grateful for the financial support provided by donors who have contributed to their activities with unearmarked and broadly earmarked funds as well as for those who have contributed directly to the operation.



Thank you to donors who have contributed funds to date:

ECHO, Canada, Denmark, New Zealand, the United Kingdom and United States. Contributions have also been received from **Caritas and partners, OANDA, Save the Children and UNICEF.**

PARTNERS IN THE RESPONSE

Agency for Technical Cooperation and Development (ACTED) | Adventist Development and Relief Agency (ADRA) | COERR Foundation | Help Without Frontiers (HwF) | Humanity & Inclusion (HI) | International Organization for Migration (IOM) | International Rescue Committee (IRC) | Malteser International (MI) | Right to Play (RTP) | Save the Children (SCI) | Sermpanya Foundation | Shanti Volunteer Association (SVA) | Teacher Focus | The Border Consortium (TBC) | United Nations High Commissioner for Refugees (UNHCR) | Jesuit Refugee Service (JRS) | United Nations Children's Fund (UNICEF) |

MORE INFORMATION AVAILABLE AT THE FOLLOWING LINKS

- **Regional portal** – [UNHCR Thailand-Myanmar Cross Border Portal operation page](#)
- **Sector Dashboards (June - August 2021)** - Who does What Where When (4W). It provides an overview of activities undertaken towards preparedness, with the preparedness level assessed against the scenario considered in the appeal. These dashboards show some of the systems that can be activated in the event of an influx and will requires us to shift to a multi-sector emergency response
 - [Protection Sector Dashboard](#)
 - [NFI Sector Dashboard](#)
 - [Education Sector Dashboard](#)