



# Humanitarian Situation Report No. 12

Reporting Period  
1 January to 31 December 2022

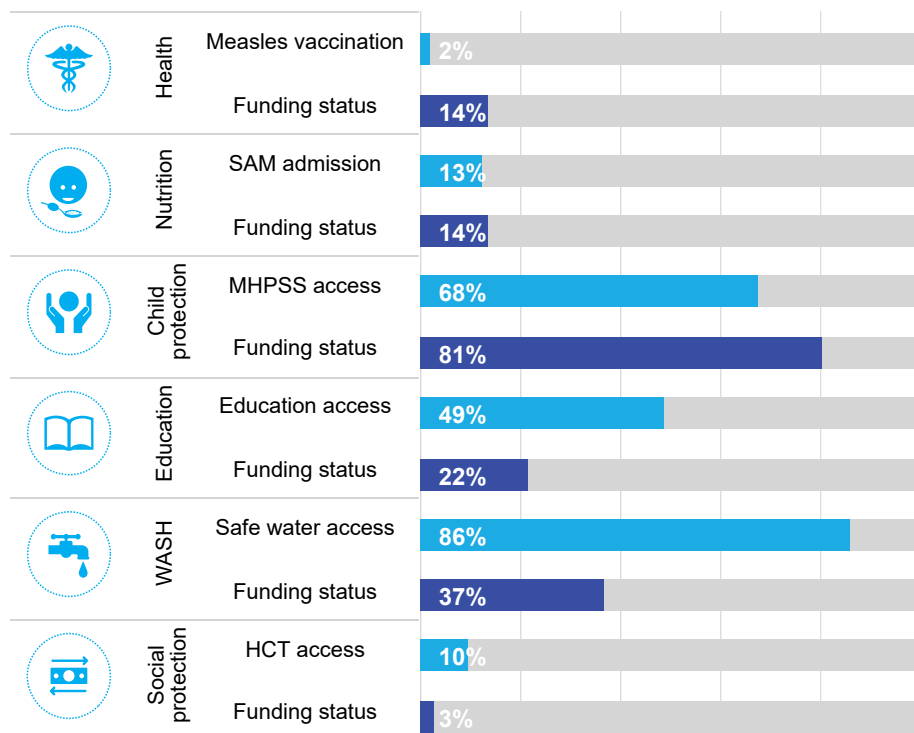
World Children Day celebration in Northern Shan State.

## Myanmar

### HIGHLIGHTS

- Myanmar continues to experience a severe - and worsening - humanitarian and human rights crisis. Conflict and violence have escalated across the country, impacting children and their families and displacing more than 1.5 million people.
- Access of conflict-affected populations to services and delivery of humanitarian assistance has been further constrained by restrictions imposed on movement of both people and goods.
- Grave violations of child rights have increased in 2022 compared with 2021. There has also been an eightfold increase in the number of abductions in 2022. As of December 2022 at least 670 children had been killed or maimed by armed actors since the military takeover in February 2021
- In 2022, UNICEF received US\$ 33.92 million, representing 22 per cent of its Myanmar Humanitarian Action for Children appeal of US\$ 151.4 million. Despite the gap, UNICEF and its partner reached close to one million children and their families

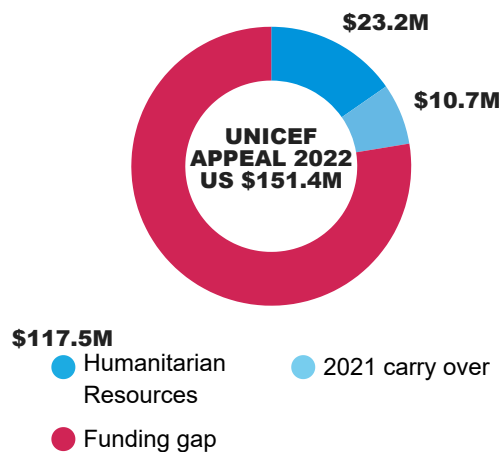
### UNICEF RESPONSE AND FUNDING STATUS\*8



### SITUATION IN NUMBERS<sup>1</sup>



### FUNDING STATUS (IN US\$)\*\*



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

\* UNICEF response % is only for the indicator, the funding status is for the entire sector.

## FUNDING OVERVIEW AND PARTNERSHIPS

In 2022, Myanmar continued to struggle with unprecedented political, socioeconomic and human rights issues and humanitarian crises. The 2022 Myanmar Humanitarian Needs Overview estimated that 14.4 million people, including 5 million children, needed assistance. UNICEF Myanmar Country Office appealed for US\$151.4 million to help displaced people and host communities across the country. Despite a number of challenges: restrictions in accessing affected communities, high levels of uncertainty about security and the funding gap significantly impacted the programmes, UNICEF was able to reach close to 1 million children and their families.

By the end of 2022, UNICEF Myanmar had received US\$33.92 million (including US\$10.74 million carried forward from 2021), representing 22 per cent of the amount appealed for. The funding was generously contributed by the Bureau for Humanitarian Assistance (USAID/BHA), the European Commission's Humanitarian Office (ECHO), the German Federal Foreign Office, the Global Thematic Fund, Denmark, Japan, Norway, the Korean Committee for UNICEF, the United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) and the World Health Organization. These funds were used to deliver much needed services in nutrition, health, water sanitation and hygiene (WASH), education and child protection.

In 2023, UNICEF, with continued support from the donors, will scale up programmes and approaches to reach more vulnerable children and communities. UNICEF expresses its sincere appreciation to all private and public sector donors for their contributions in supporting the children of Myanmar.

## SITUATION OVERVIEW AND HUMANITARIAN NEEDS<sup>6</sup>

The humanitarian situation in Myanmar deteriorated throughout 2022 with an increase in the severity and frequency of clashes across the country. The number of people displaced more than doubled in 2022 from over 700,000 in January, rising to over 1.5 million by the end of the year. The northwest and southeast regions were the most impacted, with Sagaing accounting for approximately 53 per cent (624,000 out of 1,175,300) of total people displaced since the military takeover of February 2021. By the end of the December, the further deterioration of the security situation in the southeast led to almost 284,000 people displaced and living in challenging situations with extremely limited access to services.

Humanitarian access continues to be significantly constrained with movement restrictions and interference limiting the ability of UNICEF and its partners ability to reach populations in need, particularly in rural areas. Insecurity and the volatile operational environment have also negatively impacted people's ability to access humanitarian assistance and basic services. The introduction of a new registration law towards the end of 2022 threatens to make access harder in 2023.

Access and uptake of public sector social services including health and education were severely reduced in 2022, undermining the delivery of child health and welfare services, and education, amongst others. The disruption in routine immunization services also poses a high risk of vaccine-preventable disease (VPD) outbreak. Approximately more than 1.6 million children were un-immunized or under-immunized, by analyzing the last 5-year cohort data of routine immunization coverage. Large scale violence and displacement, attacks on schools also disturbing children's opportunity to learn

safely, and more families withdrawing their children from the formal education system due to safety concern. Furthermore, more than half of the country's professional teachers were either suspended, arrested or left the profession after the 2021 military takeover. This trend has put immense pressure on the alternative education pathway, and substantial investment is needed to continue to support those children's learning, or risk more than half of the school-age children dropping out of learning opportunities. An estimated 3.7 million children nationwide have restricted, or no, access to learning. Children remain in need of safe spaces to learn, quality learning materials and trained teachers, particularly in areas accommodating newly displaced populations. As per the Humanitarian Needs Overview 2023, nearly one third of newly arrived IDPs are facing difficulties to access to safe and sufficient water, dignified sanitation and hygiene items and facilities in informal settlements. The number of reported casualties resulting from landmines and explosive remnants of war (ERW), increased to 390 in 2022 from 284 reported in 2021, with of which 34% were children.

Child protection needs increased through the year with grave violations of child rights increasing from 248 to 670 as compared to 2021.

Camp closures, forced returns and relocation remain major protection concerns entering into 2023. Engagement with relevant stakeholders is critical to safely access the most vulnerable children in remote and conflict-affected areas, for the delivery of WASH, health, nutrition, education and child protection services and supplies.

## SUMMARY ANALYSIS OF PROGRAMME RESPONSE

### Health and HIV and AIDS



Trained volunteer providing newborn care in Rakhine state

In 2022, UNICEF and its 13 health programme partners (including private sector general practitioners) reached 458,141 with primary health care services through mobile and fixed clinics and outreach services in Rakhine, Kachin, Shan, Kayin, Kayah, Sagaing, Chin, Bago, Mon, Tanintharyi and peri-urban Yangon. During the year an increase in health needs, and primary health care consultations has led to exceed the health HAC annual target.

UNICEF helped build the capacity of 21 organizations on issues such as essential newborn care and the integrated management of childhood illness. Training of trainers on community-based service provision for newborns and children aged under 5 years was provided to 30 organizations. Between them, these organizations

cover over 2 million people across the country, delivering basic health care services and supporting community-based service provision. UNICEF facilitated a series of capacity-building trainings for partners from 5 organizations on the prevention of mother-to-child transmission HIV and syphilis among the most underserved, vulnerable and conflict-affected populations in Kachin, northern Shan, Mon and Thanintharyi.

Supplies, including 303 emergency health kits, 14,576 clean delivery kits and 20,381 newborn kits to support essential newborn care at home, and essential medicine including ORS, Zinc and Amoxicillin were given to partners, to cover the needs of more than 420,000 people.

In response to COVID-19, UNICEF provided personal protection equipment and also supported the installation and commissioning of oxygen plants at four sites, Hinthada, Taunggyi, Kalay and Loikaw, which has been completed, together with power backup with GenSets. Approval from local authorities for running the plant is pending for three sites. The plant in Hinthada has started to run, serving the local community as well as eight nearby townships.

## Nutrition



A staff health-educator from implementing partner discusses to an audience of ethnic Lahu women and children during awareness session on nutrition and WASH for pregnant women, lactating mother.

2022, UNICEF and its partners reached only 13 per cent of its annual target to treat severe acute malnutrition (SAM); a total of 4,734 children aged 6–59 months (2,190 boys, 2,544 girls) were given lifesaving treatment. Similarly, 65,268 primary caregivers (60,494 females, 4,774 males) with children aged under two, which is 22 per cent to the target, were reached with Infant and Young Child Feeding (IYCF) counselling.

UNICEF and partners faced multiple challenges in responding to nutritional needs and reaching targets, including a lack of technical capacity for such treatment, limited funding and resources and access constraints.

UNICEF, as provider of last resort, supported partners in reaching 466 children (217 boys, 249 girls) who were moderately malnourished in Ayeyarwaddy region, by providing a simplified treatment that includes the provision of ready-to-use-therapeutic food.

64,880 pregnant and lactating women and more than 2.9 million children aged 6–59 months were reached throughout the year with nutrition services such as multiple micronutrient and vitamin A supplements. UNICEF supported the monitoring of violations of breast milk substitutes and assisted in the systematic distribution of

infant formula and feeding kits for seven children aged under six months, in coordination with subnational nutrition clusters.

In order to address some of these challenges, UNICEF has developed multiple strategies with partners to expand coverage of services. For example, UNICEF provided nutrition training on the integrated management of acute malnutrition to 455 nutrition partners, IYCF counselling training to 497 partners, and breast milk substitute (BMS) monitoring, attended by 60 participants from more than 30 organizations. As co-Chair of the Assessment and Information Management (AIM) technical working group, supported the delivery of online training in measuring children's mid-upper arm circumference and assessing IYCF. UNICEF has also expanded its coordination with the private sector such as working with the Myanmar Garment Manufacturers Association, in order to improve garment workers' nutrition, and with the Myanmar Salt Industry Association to mitigate iodine deficiency disorders.

### Nutrition Cluster

The national Nutrition Cluster, 202,363 people out of a targeted 1,025,354. The deepening and widespread crisis saw the cluster reaching 4,483 (11 per cent) children with SAM; 14,037 (35.5 per cent) of children with moderate acute malnutrition (MAM). Preventive interventions for children under five years old and pregnant and lactating women reached 201,541 (20 per cent) of the targets through close collaborative work with partners across the country. Partners were unable to reach the targets as a result not only of limited funding, (\$8.9 million of the \$60.7 million funding needed), but also as a result of limited access due to withheld travel authorizations and the need to increase partners' capacity to respond to the mounting pressures. Needs in 2023 are projected to continue to rise. However, the looming negative impact of the mandatory registration of humanitarian partners could further affect their response.

Nutrition Cluster coordination has been expanded to five sub-national operational levels, covering 11 states and regions to be able to respond directly to the specific nutritional needs in these areas. Beneficiaries out of the 1,025,354 target in the 2022 HRP (although there are an estimated 2,050,709 people in need). The deepening and widespread crisis saw the cluster reaching 4,483 (11 per cent) children with SAM; 14,037 (35.5 per cent) of children with moderate acute malnutrition (MAM) out of a targeted 39,477 and 121,100 children under five years. Preventive interventions for children under five years old and pregnant and lactating women reached 201,541 (20 per cent) of the targets through close collaborative work with partners across the country.

## Child protection, GBViE and PSEA<sup>7</sup>

In 2022, UNICEF scaled up multisectoral Mental Health Psychosocial Support (MHPSS) interventions reaching 206,681 individuals, out of whom 164,978 are children (86,135 girls and 78,843 boys) and 41,703 parents and caregivers (28,700 women and 13,003 men). Parents received positive parenting sessions which in combination with MHPSS interventions aim to promote safe environments for children and prevent violence against children in a holistic manner through this response 5,342 child protection kits were also delivered through child-friendly schools and community centres. Child-focused MHPSS training was delivered to 430 (178 males and 252 females) field responders from 55 civil society organizations (CSOs)/NGO/INGOs working in sectors including health, education and child protection. Additionally, 22 youth leaders (10 males; 11 females; 1 other) took part in a pilot of the 'I support my friends' peer-to-peer psychological first aid training. In the second half of the year, UNICEF led the delivery of MHPSS awareness and key messages on mental health and psychosocial well-being through

Viber and Facebook reaching, engaged 36,313 users.

UNICEF and its partners reached 27,428 beneficiaries (9,301 girls, 7,911 boys, 10,216 women) with gender-based violence (GBV) services, such as awareness-raising, child protection case management for survivors of sexual violence, girls' empowerment and life skills workshops for adolescents. Some 195 child survivors of sexual violence and 68 cases of child and early-marriage received case management support and care. UNICEF delivered two training sessions for 25 service providers on caring for child and adolescent survivors who were trained on child-friendly communication techniques and the process of referrals. Through the use of social media platforms, more than 50,000 young people were reached and, 1,900 adolescents and young people (760 boys and 1,140 girls) contributed to information-gathering on GBV through U-Report platform.

Throughout the year, in conflict-stricken areas of Kachin State, the northwest and southeast of Myanmar, activities focusing on child protection in emergencies reached 69,945 children and caregivers who were provided with awareness-raising sessions related to child protection, child rights and monitoring and reporting mechanisms. An additional 2,827 child protection practitioners and community-based volunteers received training to build their technical capacity.

UNICEF Myanmar provided legal aid services to 1,290 children (723 boys; 567 girls) and to 1,362 young people (945 male and 417 female) through a support network of 89 local lawyers. These included 127 children (113 boys and 14 girls) and 268 young people (237 boys and 31 girls) arrested for alleged association and/or support to the People's Defence Force, as well as 348 children (176 boys and 172 girls) and 214 young people (133 male and 81 female) for Rohingya-related cases. An additional 154 children (119 boys and 35 girls) and 92 young people (51 male and 41 female) received comprehensive child protection services through case management referral. The lawyers participated in community of practice sessions, convened by UNICEF, where they received training from the Office of the High Commissioner for Human Rights (OHCHR) and an international human rights law firm on collecting evidence, documentation and reporting child rights violations. UNICEF and UNHCR organized several workshops to prevent childhood statelessness and to promote birth registration in Yangon and Sittwe.

#### Child Protection Area of Responsibility (CP AoR)

The CP AoR focused on strengthening sub-national coordination, scaling up the localization approach, the capacity building of local partners and expanding service provision. In response to the escalating crisis in the Northwest, a new sub-national AoR was established with UNICEF's leadership, focusing on the response in Chin, Sagaing, and Magwe. The sub-national CP AoR for NW has collaborated with a number of local partners who are new to child protection and has focused on building their capacity to respond to the child protection needs. AoR rolled out a series of trainings for CP AoR members in collaboration with other sectors with the aim to mainstreaming CP and ensuring linkages for case management. The CP AoR and GBVSS collaborated to review referral pathways and the mapping of services as well as the training of child protection partners and nurses on care for child survivors. The national CP AoR has worked closely with the subnational coordinators and UNICEF information management to ensure timely data-collection, giving the child protection sector specific insights into the reach of its work, and enabling it to confidently advocate for more resources in particular areas. The CP AoR has also launched its own website [www.myanmarchildprotection.com](http://www.myanmarchildprotection.com) which offers essential resources that can be accessed by all child protection (and non-child protection) actors.

#### Mine Action AoR

MA AoR was also established in 2022, enabling the sector to collaborate on coordination, strategy, execution and advocacy. MA AoR is fully operational at national level and gaining momentum. Efforts to expand sub-national coordination levels continue; handhold be completely operational by the first quarter of 2023.

In 2022, the number of people reached by explosive ordnance risk education (EORE) increased despite the continued operational challenges, to over 420,000 people. This compares with 402,664 in 2019, 106,875 in 2020 and 194,530 in 2021. This increase has been largely due to the shift in delivery methods. Most implementing partners can now deliver EORE remotely, using volunteers, local partners based in affected regions, and online delivery via social media platforms and apps. In 2022, UNICEF Myanmar fully launched its Mine Risk Education (MRE) app on both Android and iOS platforms, which is able to be used completely offline after it is downloaded. The MRE app provides animated and narrated informational videos as well as interactive quizzes and games. EORE's mainstreaming into broader humanitarian intervention in 2022, is an initiative strongly supported by the Myanmar Humanitarian Fund.

Over the course of 2022, UNICEF has collaborated extensively with other partners to develop an advocacy working group for mine action. This brings together stakeholders such as mine action organizations, CSOs, donors and UN agencies to develop a means to improve access beyond EORE, Victim Assistance and surveys, which are currently the only mine action activities the sector can implement in Myanmar. No technical activities such as landmine clearance or technical surveys by civil society actors are permitted.

## Education

From January to December 2022, UNICEF and its partners supported 567,287 children (girls: 287,445, boys: 279,842) to access formal and non-formal education, including early learning, by providing teaching and learning materials, capacity building and incentives for volunteer teachers/ethnic language teachers/facilitators/caregivers, and supporting cognitive development, social and emotional learning and psychosocial support. UNICEF and its partners also provided individual essential learning packages for 159,911 children (81,099 girls, 78,812 boys). Moreover, 29,698 children/adolescents (15,366 girls, 14,332 boys) were reached through UNICEF-supported skills development interventions. These interventions were conducted across the country, including conflict-affected areas, which will help promote continuity of learning for the most vulnerable children, including those who are internally displaced and out-of-school.

Many schools under the Ministry of Education have reopened across the country in June as the new School Year, while many remain closed, particularly in rural areas at the village level. As of 26th September 2022, according to the UNICEF Field Offices' research, the estimated status of school reopening in Kayin is 71%, Mon is 92%, and Rakhine is 96%, while also the estimated status of school reopening in Shan and Kachin States is high (around 80% respectively). On the contrary, in Kayah (18% reopened) and Chin (35% reopened) States, many schools are still closed, while also in Sagaing Region around half number of the schools seem still closed mainly due to conflict-related reasons.

In Rakhine state, there were clashes between MAF and the Arakan Army in many townships, which displaced children. Although an informal ceasefire between MAF and the Arakan Army was reached on 26 November in Rakhine, there are still an estimate 80,850 displaced children who need help with their education (UNHCR data as of 26 December 2022).

## Education Cluster

The education cluster has with its subnational cluster coordination mechanisms in four hubs facilitated more and closer engagement with communities, stakeholders and partners through regular and frequent cluster coordination meetings and field missions.

The cluster implemented a nationwide Joint Education Needs Assessment in close collaboration with partners, CP AoR and the Global Education Cluster (GEC). By the end of the year, data-collection was completed, and a final report is expected in early 2023. It is hoped to provide as broad and comprehensive picture as possible on the education situation nationally which will further inform targeted programming based on identified needs.

The cluster led the partners in developing the bid for US\$19 million from the Education Cannot Wait fund's multi-year resilience programme. This will be used to support children's access to safe, quality, inclusive relevant learning opportunities. The proposal was submitted in December 2022, and approval of funding and commencement of implementation is expected in early 2023.

Partners have registered some successes; with partners receiving training in gender provided by gender in Humanitarian Action (GIHA), and EiE and coordination skills training led by the GEC, among others. Strengthening the capacity of the cluster is a top priority for 2023; with a capacity-building plan to be set out to address the identified gaps.

On the localization agenda: cluster has led mapping, supported onboarding and facilitated the active participation of local partners in the cluster coordination mechanism in various ways – most notably the provision of simultaneous translation services to the Myanmar language at national-level cluster meetings. This has encouraged the participation of local partners. This will remain a priority in 2023, with the inclusion of local partners in the Strategic Advisory Group.

The Education Cluster remains one of the least funded in the 2022 HRP. By the close of Q4, less than 10 per cent of the US\$91 million required had been received (according to data available on the UNOCHA financial tracking service).

## Water, sanitation and hygiene

In 2022, UNICEF and partners expanded humanitarian WASH services across Myanmar, reaching 594,699 affected people (196,250 children) with lifesaving water, sanitation and hygiene (WASH) supplies and services. Beneficiaries included displaced people in long-term camps, temporary sites, forests and peri-urban settlements. Clean drinking water was provided for 427,717 people through a mix of delivery by boat, treatment, and kiosks. Gender-segregated sanitation services, including emergency latrines and bathing shelters, were provided for 236,864 people, with 44,932 children reached with WASH facilities and hygiene services in learning centres and safe spaces.

More than 50,000 internally displaced people in long-term camps in Kachin, Rakhine and northern Shan received regular WASH services including water, improved sanitation and critical WASH supplies. UNICEF distributed more than 8.7 million litres of bottled water to 50,000 people from January to April 2022, before moving to support the establishment of two water kiosks in peri-urban Yangon using a sustainable business model. Currently these two water kiosks have the capacity to produce and deliver affordable bottled water to 22,500 vulnerable people in martial law townships.

In the northwest (Chin, Sagaing and Magway), 83,264 people received lifesaving WASH services and supplies. Some 67,439 affected people received a drinking water service and 22,358 people received gender-separated and inclusive sanitation services. In the southeast (Shan South, Kayah, Kayin, Mon and Bago), 157,816

affected people received WASH services and supplies.

As lack of travel authorizations, limited cash availability because of the banking crisis, and restricted access impeded the response, UNICEF and its partners are increasingly adopting local procurement and cash or voucher-based responses.

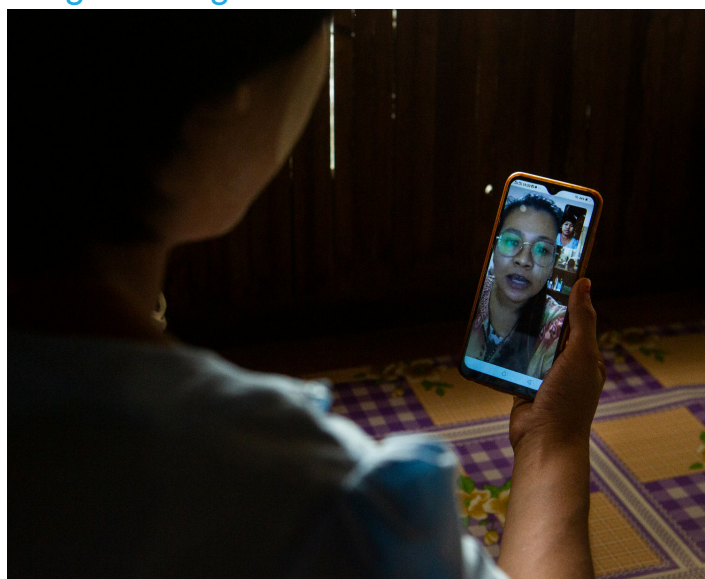
## WASH Cluster

The WASH Cluster received only 10 per cent of the HRP budget of 2022, the lowest among the clusters. In total, the cluster supported around 1,063,504 people with critical WASH services and supplies, while strengthening COVID-19 prevention for affected people throughout Myanmar.

While the cluster reached close to 51% of its overall target, many people did not receive the full WASH service package foreseen under the cluster minimum standards due to the limited funding available. People were reached with emergency sanitation and equitable, inclusive, and safe access to functional excreta disposal systems. However, the number of people per latrine exceeded the WASH Cluster's minimal standards of 20 people per latrine. Equitable, inclusive and safe access to hygiene items and community-tailored messages, enabling health-seeking behavior were provided, though not on a monthly basis throughout the year.

In Kachin state, the cluster reached some 68% of the target population with water, 82% reach with sanitation, and 73% with hygiene promotion. In the Northwest Region (Chin, Magway and Sagaing) the cluster reached with 65% with water, 55% with sanitation, and 68% with hygiene interventions. In Rakhine state, the cluster reached 87% of the target population with water, 95% with hygiene, and 84% with sanitation services. In Shan state (North, East and south), the cluster reached 30% of the target population with water, 55% with sanitation, and 73% with hygiene interventions. In the Southeast Region (Bago, Kayah, Kayin, Mon, Tanintharyi), the cluster reached 88% of the target population with water, 49% with sanitation, and 96% with hygiene interventions. Finally, in Yangon, 95% of the target population was reached through the distribution of safe/purified drinking water to vulnerable people living in informal settlements in Hlaing Tharya.

## Social protection and Cash-based Programming



A pregnant woman receiving online health counseling service via mobile phone as a part of the UNICEF Bright Start pilot programme in Yangon, Myanmar

### Cash Transfer Programme

In the peri-urban Yangon area, UNICEF conducted six payment

cycles of cash transfers for pregnant women and children aged under two years by the end of December 2022. 5,978 targeted programme participants received cash for the first three payment cycles and 7,000 programme participants received cash for the last three payment cycles. At the end of 2022, more than 8,800 programme participants were able to access the programme and US\$1 million was provided overall. UNICEF also completed more than 10,700 sessions on social behaviour change communications, providing essential and key messages about health, nutrition and hygiene best practices via home visits and phone calls.

In addition, UNICEF provided some training of trainers in cash and voucher assistance to field level staff in Civil Society Organizations through its collaboration with the Cash Working Group. UNICEF also set up a common cash facility and management information system for cash transfer programmes to integrate with relevant partners and agencies. With the upgraded system and existing partnership agreements, UNICEF is ready to implement humanitarian cash assistance to reach the most disadvantaged groups, especially vulnerable children and women in crisis-affected areas.

In 2022, despite a very challenging environment and variety of constraints, the UNICEF humanitarian cash transfer programme was able to cover 10 per cent of its target, including pregnant women, children aged under 2 years and those with disabilities, planned in 2022 HAC. In 2022, the implementation of UNICEF MCCT was only possible in peri-urban townships of Yangon in partnership with local NGOs. Contingency partnership agreements with NGOs were already in place in other seven states/regions. However, with a funding gap of more than US\$24 million, around 80,000 children from crisis affected states and regions still need the cash transfer programme.

As of December 2022, the health microinsurance scheme Bright Start has covered 31,167 pregnant women and children under the age of five across six townships in peri-urban Yangon (Hlaing Thar Yar, Shwe Pyi Thar, North Okkalar, North Dagon, South Dagon, Dagon Seikkan). Programme participants have free access to teleconsultations with family doctors, home delivery of medicines, and reimbursement of out-of-pocket expenditures related to deliveries in local health facilities and other selected inpatient and outpatient care services. Bright Start operates a free, 24-hour hotline enabling women and caregivers of children to request emergency care, speak with their family doctor, or listen to information offered by an interactive voice response system. Other communication channels include SMS and a Viber chatbot.

Bright Start has delivered 56,458 teleconsultations, comprising 9,927 emergency calls to the hotline; 11,364 telehealth consultations between programme participants and their respective family medical doctors initiated by the client; and 35,122 teleconsultations initiated by family doctors to follow up with patients. As a result of these teleconsultations, 1,387 women and children were referred to private special clinics for antenatal care and medical investigations and 7,334 were prescribed medicines and supplements that were delivered directly to their home, typically within 24 hours. In addition, Bright Start reimbursed out-of-pocket health costs for the hospitalization of 2,158 pregnant women and children aged under five years.

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

UNICEF co-led the risk communication and community engagement (RCCE) technical working group and conducted weekly social media monitoring around COVID-19 prevention and vaccines and, based on this evidence, appropriate messages were developed and shared with partners and disseminated through social media platforms which reached 2.6 million people. UNICEF conducted a rapid survey

on COVID-19, in August 2022, with 491 respondents in 47 townships, to gather evidence on communities' perceptions of COVID-19 and its vaccines to inform interventions.

'Knowledge Talk', a Viber channel was set up to provide timely information and lifesaving messages and to address feedback/queries from communities. UNICEF built capacity on community mobilization of 518 staff/volunteers from partner and CSOs in five states/regions. Through strategic partnerships, UNICEF has reached 138,981 parents and caregivers with community workers raising awareness on aspects of maternal and child health, care and development. UNICEF has prioritized timely lifesaving messaging for reaching ethnic minorities and low-literacy populations and have contextualized and disseminated 70 different types of information, education and communication materials and nine animation videos intended to reach 4.4 million people. UNICEF facilitated community consultations to assess community needs on education services through 581 key informant interviews and 135 focus group discussions which will inform programming in 10 states. On AAP, 3,290 submissions were received through community feedback mechanisms and analysed using the AAP dashboard. The AAP task force was set up with focal points from main programme section teams. AAP indicators were integrated in the programme documents of 39 implementing partners. The AAP capacity assessment was carried out with 142 staff/volunteers from 26 UNICEF implementing partners.

## HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

UNICEF's humanitarian coordination and strategy in Myanmar is aligned with the 2022 HNO and HRP, as well as clusters and programmes priorities. UNICEF continues to support the coordination of humanitarian actors, leading the Nutrition Cluster, the WASH Cluster and co-leading the Education Cluster and the Child Protection AoR, with Save the Children. Since December 2021, UNICEF has also been leading the Mine Action AoR. In response to the crisis, UNICEF is adapting the way it works to achieve continuity of critical services at scale, coordinating with the Myanmar Humanitarian Country Team and with an extensive and diverse network of partners, including United Nations agencies, national and international NGOs, private sector partners and local organizations to efficiently deliver lifesaving services. In addition to taking part in the Inter-cluster Coordination Group led by OCHA, UNICEF facilitates the in-country inter-agency PSEA network with the United Nations Population Fund (UNFPA). UNICEF continues to co-lead the RCCE Working Group and is an active participant in the Humanitarian Access Working Group. UNICEF ensures the coordination and monitoring of its programme implementation across Myanmar, drawing on its strong field presence through its main offices and seven field offices, namely Yangon and Nay Pyi Taw, Lashio and Taunggyi in Shan, Sittwe and Maungdaw in Rakhine, Myitkyina in Kachin, Hakha in Chin, covering the Northwest and Hpa-an in Kayah, covering the Southeast. UNICEF will continue to focus on reaching the most vulnerable children, including those who are displaced and stateless, children with disabilities and those in hard-to-reach areas, including areas under martial law.

## HUMAN INTEREST STORIES AND EXTERNAL MEDIA

- Stories: Finding happiness in home-based learning  
<https://www.unicef.org/myanmar/stories/finding-happiness-home-based-learning>
- One volunteer's work to provide critical care to children in conflict-stricken Kayah State, Myanmar  
<https://www.unicef.org/myanmar/stories/one-volunteers-work-provide-critical-care-children-conflict-stricken-kayah-state-myanmar>
- Stories: Timely treatment helps child recover from severe malnutrition  
<https://www.unicef.org/myanmar/stories/Timely%20treatment%20helps%20child%20recover%20from%20severe%20malnutrition>
- Stories: Proper feeding: an easy way to ensure children stay nourished, healthy and strong  
<https://www.unicef.org/myanmar/stories/proper-feeding-easy-way-ensure-children-stay-nourished-healthy-and-strong>
- Stories: Rural Karen community enjoys new access to water in dry season  
<https://www.unicef.org/myanmar/stories/rural-karen-community-enjoys-new-access-water-dry-season>
- Stories: New family latrines welcomed by displaced families  
<https://www.unicef.org/myanmar/stories/new-family-latrines-welcomed-displaced-families>
- Stories: Mobile-based emergency healthcare eases family worries in Myanmar  
<https://www.unicef.org/myanmar/stories/mobile-based-emergency-healthcare-eases-family-worries-myanmar>
- Stories: Conflict-affected adolescents change their and others' lives in Kachin, Myanmar  
<https://www.unicef.org/myanmar/stories/conflict-affected-adolescents-change-their-and-others-lives-kachin-myanmar>
- Stories: Parents' relief as clean water arrives  
<https://www.unicef.org/myanmar/stories/parents-relief-clean-water-arrives>
- Stories: Cash transfers lift poor families out of despair  
<https://www.unicef.org/myanmar/stories/cash-transfers-lift-poor-families-out-despair>
- Tweet: UNICEF statement on killing of 11 children in Sagaing  
<https://twitter.com/UNICEFMyanmar/status/1571827666185232389>
- Tweet: Story on UNICEF mental health support programme  
<https://twitter.com/UNICEFMyanmar/status/1491947607253524481>
- Tweet: UNICEF humanitarian appeal 2022  
<https://twitter.com/UNICEFMyanmar/status/1515872823738314754>
- Facebook post: UNICEF statement on killing of 11 children in Sagaing  
<https://www.facebook.com/354768004590731/posts/5680897195311092/>
- Facebook post: #VaccinesWork social media campaign  
<https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/5111489202251897/?type=3>
- Facebook post: UNICEF Myanmar Humanitarian Appeal 2022  
<https://www.facebook.com/unicefmyanmar/photos/a.416623888405142/5152332284834255/?type=3>

## HAC APPEALS AND SITREPS

- Myanmar Appeals  
<https://www.unicef.org/appeals/myanmar>
- Myanmar Situation Reports  
<https://www.unicef.org/appeals/myanmar/situation-reports>
- All Humanitarian Action for Children Appeals  
<https://www.unicef.org/appeals>
- All Situation Reports  
<https://www.unicef.org/appeals/situation-reports>

## NEXT SITREP: MARCH 2023

## ANNEX A SUMMARY OF PROGRAMME RESULTS<sup>8</sup>

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2022 targets	Total results	Progress	2022 targets	Total results	Progress
<b>Health</b>								
Children and women accessing primary health care in UNICEF-supported facilities	Total	-	158,951	458,141	▲ 26%	-	-	-
Children aged 9 to 18 months vaccinated against measles	Total	-	760,000	15,279	0%	-	-	-
Pregnant and lactating women receiving HIV testing and post-test counselling	Total	-	75,000	-	0%	-	-	-
<b>Nutrition</b>								
Children aged 6 to 59 months with severe acute malnutrition admitted for treatment	Total	-	37,503	4,734	▲ 1%	39,477	4,734	▲ 1%
	Girls	-	37,503	2,544	0%	39,477	2,544	0%
	Boys	-	37,503	2,190	0%	39,477	2,190	0%
Primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling	Total	-	291,068	65,268	▲ 1%	363,835	75,589	▲ 2%
	Women	-	291,068	60,494	▲ 1%	363,835	69,785	▲ 2%
	Men	-	291,068	4,774	0%	363,835	5,804	0%
Children aged 6 to 59 months receiving vitamin A supplementation	Total	-	529,215	3 million	▲ 2%	661,519	257,479	▲ 2%
	Girls	-	529,215	1.5 million	▲ 1%	661,519	129,663	▲ 1%
	Boys	-	529,215	1.5 million	▲ 1%	661,519	127,816	▲ 1%
<b>Child protection</b>								
Children and parents/caregivers accessing mental health and psychosocial support	Total	-	303,000	206,681	▲ 6%	348,000	253,096	▲ 5%
	Girls	-	303,000	86,135	▲ 3%	348,000	-	0%
	Boys	-	303,000	78,843	▲ 2%	348,000	-	0%
	Women	-	303,000	28,700	▲ 1%	348,000	-	0%
	Men	-	303,000	13,003	▲ 1%	348,000	-	0%
Women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions	Total	-	133,000	27,428	▲ 3%	150,000	39,692	▲ 3%
	Girls	-	133,000	9,301	▲ 1%	150,000	-	0%
	Boys	-	133,000	7,911	▲ 1%	150,000	-	0%



Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2022 targets	Total results	Progress	2022 targets	Total results	Progress
	Women	-	133,000	10,216	<span>▲ 1%</span>	150,000	-	<span>0%</span>
People who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers	Total	-	148,000	29,852	<span>▲ 1%</span>	170,000	32,437	<span>▲ 1%</span>
	Girls	-	148,000	5,662	<span>0%</span>	170,000	-	<span>0%</span>
	Boys	-	148,000	5,193	<span>0%</span>	170,000	-	<span>0%</span>
	Women	-	148,000	12,153	<span>0%</span>	170,000	-	<span>0%</span>
	Men	-	148,000	6,844	<span>0%</span>	170,000	-	<span>0%</span>
Children who have received individual case management	Total	-	2,850	4,519	<span>▲ 13%</span>	4,400	5,388	<span>▲ 10%</span>
	Girls	-	2,850	2,000	<span>▲ 5%</span>	4,400	-	<span>0%</span>
	Boys	-	2,850	2,519	<span>▲ 8%</span>	4,400	-	<span>0%</span>
Children in areas affected by landmines and other explosive weapons provided with relevant prevention and/or survivor-assistance interventions	Total	-	386,485	128,185	<span>▲ 6%</span>	444,000	420,723	<span>▲ 13%</span>
	Girls	-	386,485	39,044	<span>▲ 2%</span>	444,000	-	<span>0%</span>
	Boys	-	386,485	36,030	<span>▲ 2%</span>	444,000	-	<span>0%</span>
	Women	-	386,485	33,397	<span>▲ 2%</span>	444,000	-	<span>0%</span>
	Men	-	386,485	19,714	<span>▲ 1%</span>	444,000	-	<span>0%</span>
<b>Education</b>								
Children accessing formal or non-formal education, including early learning	Total	-	1.2 million	567,287	<span>▲ 4%</span>	1.3 million	527,795	<span>0%</span>
Children receiving individual learning materials	Total	-	1.1 million	159,911	<span>▲ 2%</span>	-	-	<span>-</span>
Children/adolescents accessing skills development programmes	Total	-	18,000	29,698	<span>▲ 26%</span>	-	-	<span>-</span>
<b>WASH</b>								
People use safe and appropriate sanitation facilities	Total	-	271,632	234,857	<span>▲ 2%</span>	701,921	440,855	<span>▲ 2%</span>
People reached with hand-washing behaviour-change programmes	Total	-	653,683	243,624	<span>▲ 1%</span>	548,070	520,577	<span>▲ 8%</span>
People reached with critical WASH supplies	Total	-	998,710	594,699	<span>0%</span>	1.3 million	980,972	<span>▲ 4%</span>
Male and female accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	Total	-	434,468	427,717	<span>▲ 1%</span>	1.2 million	773,047	<span>▲ 1%</span>
<b>Social protection</b>								

Sector			UNICEF and IPs response			Cluster/Sector response		
Indicator	Disaggregation	Total needs	2022 targets	Total results	Progress	2022 targets	Total results	Progress
Households reached with UNICEF-funded multi-purpose humanitarian cash transfers	Total	-	90,000	8,809	0%	-	-	-
Cross-sectoral (C4D, RCCE and AAP)								
People with access to established accountability mechanisms	Total	-	30,000	29,661	▲ 2%	-	-	-
	Women	-	30,000	16,000	0%	-	-	-
	Men	-	30,000	13,661	▲ 1%	-	-	-

## ANNEX B FUNDING STATUS

Sector	Requirements	Funding available		Funding gap	
		Humanitarian resources received in 2022	Resources available from 2021 (carry over)	Funding gap (US\$)	Funding gap (%)
<b>Nutrition</b>	23,645,813	2,239,568.18,165,445	1,052,874	20,353,370.81,834,555	86%
<b>Health and HIV and AIDS</b>	34,578,000	915,187.371,109,173	4,040,180	29,622,632.628,890,827	86%
<b>Water, sanitation and hygiene</b>	29,808,821	9,849,213.04,596,175	1,234,970	18,724,637.954,038,247	63%
<b>Child protection, GBViE and PSEA</b>	9,870,753	7,163,374.44,811,844	851,505	1,855,873.5,518,815,601	19%
<b>Education</b>	22,020,965	2,111,493.91,550,098	2,834,082	17,075,389.08,449,902	78%
<b>Social protection</b>	24,879,956	147,187	697,548	24,035,221	97%
<b>Cross-sectoral (HCT, C4D, RCCE and AAP)</b>	28,250	-	32,029	-3,779	0%
<b>Cluster Coordination</b>	6,546,432	749,436	-	5,796,996	89%
<b>Total</b>	<b>151,378,990</b>	<b>23,175,459.962,344,795</b>	<b>10,743,188</b>	<b>117,460,342.0,376,552</b>	<b>78%</b>

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## ENDNOTES

1. UN data as of 26 December 2022
2. Myanmar Humanitarian response plan, 2022
3. idem
4. Myanmar Humanitarian Update No. 25 | 30 December 2022
5. idem
6. <https://data.unhcr.org/en/documents/details/97853>
7. <https://www.myanmarchildprotection.com>
8. HIV testing and post-test counselling data will not be available due to limitation of data accessibility. Education Cluster results are as of end of Q3 2022.