

NOTE ON THE 2017 MYANMAR HUMANITARIAN RESPONSE PLAN

UPDATE ON NORTHERN RAKHINE - 15 MARCH 2017

Since the 2017 Humanitarian Response Plan was issued, new information has come to light suggesting significant new needs in northern Rakhine following the 9 October 2016 Border Guard Post attacks and subsequent security operations. This note provides an update on latest developments, but continuing access constraints mean it is not yet possible to provide a complete picture of all needs.

Situation overview

A series of attacks on Border Guard Police posts on 9 October 2016 which killed nine police personnel, as well as subsequent security operations by government forces, have triggered a new humanitarian crisis in the northern part of Rakhine State. Hundreds of houses and buildings were burned, many people were killed and thousands fled their homes. Allegations of widespread human rights violations have been documented among those who have newly arrived in Bangladesh. While some internally displaced people have started to return to their homes in certain areas, other people are still on the move and the full scale of needs remains unknown due to the changing situation and ongoing access restrictions.

Displacement

According to the best information currently available, approximately 94,000 people are estimated to have been displaced either within northern Rakhine or into Bangladesh since 9 October. This includes an estimated 20,000 people who remain internally displaced people in the northern part of Maungdaw and about 74,000 people who are estimated by humanitarian organizations in Bangladesh to have crossed the border from Myanmar into Bangladesh since 9 October. There are also 326 Rakhine and Mro evacuees who continue to be hosted at two locations in Maungdaw township.

Humanitarian access

Five months after the initial border post attacks, humanitarian organizations continue to face access constraints. The Government has not yet authorized the United Nations and humanitarian partners to carry out a comprehensive needs assessment in the areas most affected by violence and displacement in northern Rakhine. Since the end of 2016, the Government has permitted an incremental resumption of some services including distributions of food and other relief items. However most protection activities remain suspended in Maungdaw District and the operating environment remains

challenging and heavily restricted. WFP has had access to the affected area since the beginning of the year for its national staff and this is enabling collection of data on food security. However access is not being granted uniformly to all organizations and in most cases international staff are not allowed to work outside the main centres. These limitations significantly affect the quantity, quality and ability to provide sustainable life-saving assistance to internally displaced and other affected people. Serious concerns remain about the implications of ongoing disruptions to life-saving humanitarian activities and other services. This is compounded by a lack of local organizations and civil society with capacity to respond to the needs of the internally displaced and other vulnerable people.

Needs assessments

A limited Multi-Sector Initial Rapid Assessment (MIRA) was conducted in two village tracts in the southern part of Maungdaw in January, but it was constrained by movement restrictions (no international staff were allowed to participate) and several challenges related to confidentiality. Permission has not yet been granted by the authorities for a comprehensive needs assessment to be carried out in the northern part of Maungdaw Township, which is the most affected area, or other parts of the affected townships. Access for qualified staff to carry out comprehensive humanitarian assessments throughout the affected townships of Maungdaw, Buthidaung and Rathedaung remains a priority. In the meantime, initial observations suggest that food/nutrition, protection, shelter, household items, medical services, water, sanitation and hygiene assistance, as well as education support are the most critical humanitarian needs. In addition, the need for mental health services and psychosocial support is likely to have increased significantly.

Humanitarian assistance and protection

Prior to 9 October, the UN and other humanitarian organizations supported more than 150,000 people in northern Rakhine with regular food and nutrition

assistance, as well as protection services. Access restrictions following 9 October resulted in the suspension of humanitarian services. Many of the affected people missed out on their seasonal food assistance, school feeding and regular nutrition support for three months. This included more than 3,000 children who were being treated for Severe Acute Malnutrition. Even before the current crisis, Global Acute Malnutrition rates in Maungdaw and Buthidaung townships were above WHO emergency thresholds and the suspension of normal services for several months is likely to have had a significant negative impact on the food security and nutritional status of vulnerable families. All of the 12 out-patient therapeutic feeding centres that were closed after 9 October have now re-opened, but the number of patients accessing the therapeutic facilities has still not reached pre-9 October levels. There are also two additional in-patient centres that never closed. Figures from nutrition centres that have re-opened in Maungdaw show an increase in people requiring treatment for severe and moderate acute malnutrition in late 2016 when compared to the same time in 2015.

At the end of February 2017, a second round of emergency food and nutrition distributions was completed in the northern part of Maungdaw Township. Distributions were conducted by national staff only as international humanitarian personnel still were not allowed to participate. Health services, including most NGO clinics, have resumed in some areas, but access to health services remains problematic due to the security situation and movement restrictions. Coverage by health actors is also reported as patchy and humanitarian staff report low patient attendance compared to normal caseloads. Despite the reopening of clinics, the suspension of services is likely to have long-term consequences for the community, including pregnant and lactating women in particular, who face increased risk of maternal mortality and morbidity. It has been possible for humanitarian organizations to deliver relief items to affected people in some areas, including non-food assistance, hygiene kits and water purifications tablets. However, protection activities remain mostly suspended in Maungdaw District.

Shelter is an emerging priority need due to a combination the destruction of properties and arson during the security operations, as well as Government orders to dismantle more than 1,000 buildings which were alleged to have been illegally built in the affected area. Movement restrictions are severely affecting the ability of villagers to travel to markets and engage in livelihoods activities.

Events since October 2016 have exacerbated the already extreme vulnerability of many people in northern Rakhine. In the nearly five years since the inter-communal violence of 2012, a range of factors

including continued movement restrictions, displacement, resulting high dependency on aid, ongoing inter-communal tensions, and limited access to basic services and livelihoods, have contributed to high levels of need and the erosion of coping capacity among the local population. The events since October 2016 have caused a further deterioration in the situation for people of all ethnic and religious backgrounds.

Humanitarian funding

The Humanitarian Country Team (HCT) has been working to outline needs in northern Rakhine arising from the 9 October attacks and subsequent security operations that were not included in the Humanitarian Response Plan released in December. In February 2017, the United Nations Resident and Humanitarian Coordinator, on behalf of the HCT, submitted a request for almost US\$ 4.4 million from the Central Emergency Response Fund to cover new needs related to the crisis in northern Rakhine. This included US\$2.4m for food security; US\$1m for protection activities and distribution of non-food items; US\$0.5m for mental health, psychosocial support services and gender based violence-related interventions; and US\$0.4m for primary health care services. The Emergency Relief Coordinator approved the release of these funds and these activities are now underway or about to begin. In addition, an allocation from the Myanmar Humanitarian Fund is being considered to make resources available to international and national NGOs working in these areas. Information from a variety of sources, however, suggests the new needs in the northern part of Rakhine will far exceed these initial funding requests. It is expected that once access improves and the authorities permit a thorough needs assessment, humanitarian partners will issue a revision of needs for each sector with corresponding financial requirements.