



UNICEF Myanmar/2023/Media organization

Children stand with their notebooks and other schools supplies, which were distributed by UNICEF in northern Shan State, Myanmar.

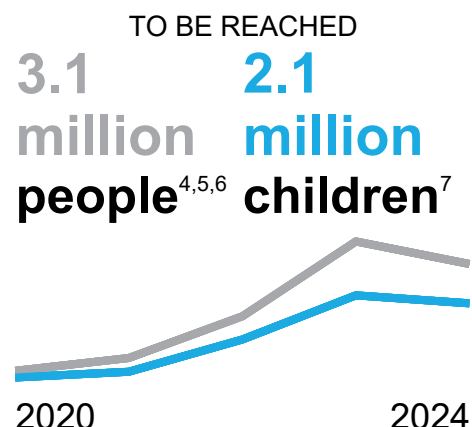
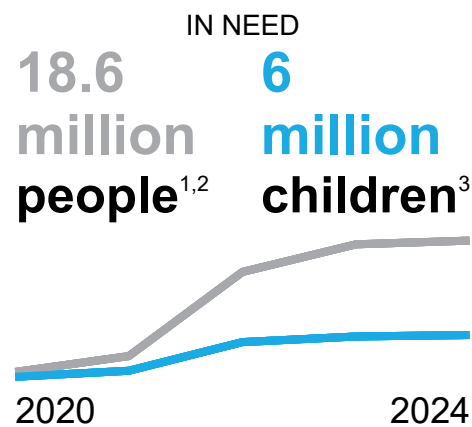


## Humanitarian Action for Children

# Myanmar

### HIGHLIGHTS

- The situation of children has worsened and remains a significant concern in Myanmar, with ongoing and escalating conflict leading to multiple displacements and the deterioration of social services in conflict-affected communities. Cyclone Mocha, which hit in May 2023, caused widespread destruction in five states, and seasonal monsoons negatively impacted already vulnerable communities. More than 18.6 million people, including 6 million children, are in need of humanitarian assistance.
- UNICEF's humanitarian strategy focuses on working with local civil society organizations, non-governmental organizations and other United Nations agencies to broaden the humanitarian response for children in all conflict-affected states and regions.
- For 2024, UNICEF is appealing for \$208.3 million to provide life-saving humanitarian assistance to 3.1 million people, including 2.1 million children. UNICEF aims to reach 850,000 people with critical WASH supplies; 350,000 children and women with primary health care services; and more than 890,000 children with education.



### KEY PLANNED TARGETS



**418,000**  
children screened for wasting



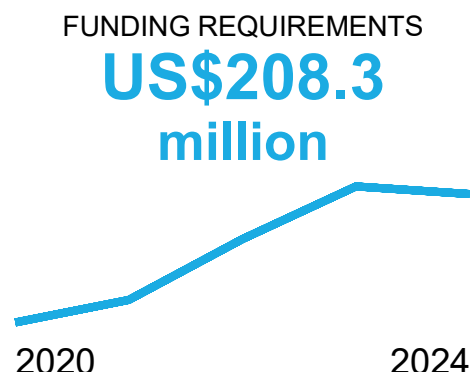
**1.7 million**  
people with safe and accessible channels to report sexual exploitation and abuse



**890,360**  
children accessing formal or non-formal education, including early learning



**850,000**  
people reached with critical WASH supplies



Figures are provisional and subject to change upon finalization of the 2024 inter-agency planning documents.

## HUMANITARIAN SITUATION AND NEEDS

The worsening situation of children remains a significant concern in Myanmar, with ongoing and escalating conflict leading to multiple displacements and the deterioration of social services in conflict-affected communities. Nearly 2 million people were displaced internally as of the end of October 2023, including 306,200 people who had been displaced prior to the military takeover in February 2021.<sup>9</sup> Adding to this, in 2023, Cyclone Mocha caused widespread destruction in five states,<sup>10</sup> and seasonal monsoons negatively impacted already vulnerable communities. Altogether, more than 18.6 million people, including 6 million children, require humanitarian assistance.<sup>11</sup>

Grave child rights violations persist, mainly due to the indiscriminate use of heavy weapons, airstrikes, explosive ordnance and recruitment and use of children. Attacks on schools and hospitals continue at alarming levels. Approximately 4.5 million children need education support because of disruption to safe learning opportunities.<sup>12</sup> Women and children face significant risks of violence, including gender-based violence, exploitation and abuse. Children and adults with disabilities are especially vulnerable and have limited access to services that meet their disability-specific needs.

A deteriorating economic situation has limited livelihood opportunities, further worsening the plight of the most vulnerable people. More than 55 per cent of children live in poverty, while three quarters of displaced households' basic needs are unmet.<sup>13</sup>

Access to water and life-saving services has deteriorated: a significant number of children are still not able to access basic health and nutrition interventions due to insecurity and other forms of restriction. The under-five mortality rate of 42 deaths per 1,000 live births in 2022 remains the highest in the region,<sup>14</sup> and up to 75 per cent of children aged 6–23 months do not eat a minimum acceptable diet.<sup>15</sup> Although immunization coverage increased to approximately 70 per cent in 2022 from 37 per cent in 2021, an estimated 1 million children missed basic vaccines from 2018 to 2022.<sup>16</sup>

Camp closures and the forced return or relocation of displaced people, particularly in Kachin, Shan and Rakhine States pose protection risks for children. Armed clashes, widespread presence of landmines and unexploded ordnance and a lack of basic services remain obstacles to return. And the proposed Rohingya repatriation from Bangladesh in the absence of conditions for voluntary and safe returns will present further protection concerns in 2024.

Military operations, ongoing hostilities and administrative constraints (e.g., travel authorization-related delays and movement restrictions)<sup>8</sup> impede access of humanitarian actors to people in need, impacting the timely delivery of programme supplies. The politicization of humanitarian assistance compounds this challenge.

## SECTOR NEEDS<sup>17</sup>



**12.1 million**  
people in need of  
primary health care  
services



**2.2 million**  
people in need of  
nutrition assistance



**8 million**  
children in need of  
protection services



**4.5 million**  
children in need of  
education support



**5.6 million**  
People in need of  
critical WASH services

## STORY FROM THE FIELD



Lar Luu, 8, didn't speak for two weeks after a landmine exploded while he and his friends were playing after school in a field near their home. He suffered severe injuries. One of his friends was killed. "We didn't know there were landmines there," says his mother.

The number of civilian casualties of landmines is rising dramatically in Myanmar, with children like Lar Luu making up 34 per cent of the victims.

UNICEF works with local partners to educate children about the risks of landmines and other explosive ordnance and how to avoid them, and supports families affected by landmines.

Lar Luu, 8, hugs his mother while showing the injury he sustained after a landmine exploded while he was playing in a field with friends after school. UNICEF works to educate children about landmines.

UNICEF will implement evidence- and experience-based strategies to broaden the humanitarian response for children through its leadership roles in five inter-agency clusters and areas of responsibility.<sup>21</sup> UNICEF will work with other United Nations agencies, non-governmental organizations and civil society organizations to ensure that humanitarian strategies reflect the inter-agency Humanitarian Needs Overview and Humanitarian Response Plan for 2024. It will also complement the transitional cooperation framework 2024–2025,<sup>22</sup> which will strengthen the humanitarian–development–peace nexus approach, focusing on localization and accountability to affected populations. UNICEF will maintain its nationwide focus in 2024, maximizing the coverage of its seven field offices in all conflict-affected states and regions.<sup>23</sup>

Protection will remain central to UNICEF's response in Myanmar; a holistic approach will provide integrated packages of life-saving child protections services.<sup>24</sup> UNICEF, as part of the country task force on monitoring and reporting, will continue to build the capacity to monitor, report and respond to grave violations against children in armed conflict. UNICEF will also continue its dialogue with parties to conflict to prevent and address grave violations.

UNICEF will provide life-saving WASH services and supplies to the affected population through local partnerships.<sup>25</sup> Local procurement, direct distribution and cash transfer modalities will maximize reach to affected populations.

UNICEF will support the continued access of crisis-affected children to safe learning through complementary learning opportunities tailored to school-age children, including pre-primary school aged children, and for those who were out of the formal system even before the current crises. This includes access to safe temporary learning spaces, critical education supplies and quality teaching and learning materials and support for educators.<sup>26</sup>

UNICEF will deliver life-saving, high-impact maternal, newborn and child health interventions using a primary health care platform, with interventions jointly delivered, managed and integrated with nutrition,<sup>27</sup> WASH and child protection sectors. Up to 1 million children will be reached with vaccination services.<sup>28</sup>

UNICEF will also strengthen existing community feedback mechanisms, focusing on the most marginalized communities, as a way to inform interventions and ensure accountability to affected populations. Capacity building of staff and volunteers on principles, integration and standard reporting for such accountability will continue. Evidence generation will leverage digital innovations and social media channels to ensure two-way communication.<sup>29</sup> UNICEF has set up a Disability Management Information System and is expanding disability screening and identification processes in collaboration with organizations of persons with disabilities and community networks.<sup>30</sup> UNICEF will continue to integrate initiatives to ensure protection from sexual exploitation and abuse into programmes and partnerships.



## Health (including public health emergencies)

- **800,000** children vaccinated against measles
- **350,000** children and women accessing primary health care in UNICEF-supported facilities



## Nutrition

- **418,000** children 6-59 months screened for wasting
- **10,900** children 6-59 months with severe wasting admitted for treatment
- **316,000** primary caregivers of children 0-23 months receiving infant and young child feeding counselling
- **293,000** children 6-59 months receiving micronutrient powder
- **1,014,000** children 6-59 months receiving vitamin A supplementation
- **316,000** pregnant and lactating women receiving multiple micronutrient supplementation



## Child protection, GBViE and PSEA<sup>32</sup>

- **3,392,000** children, adolescents and caregivers accessing community-based mental health and psychosocial support<sup>33</sup>
- **831,000** women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- **1,654,464** people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations<sup>34</sup>
- **25,000** children who have received individual case management<sup>35</sup>
- **940,000** children provided with landmine or other explosive weapons prevention and/or survivor assistance interventions



## Education<sup>36</sup>

- **890,360** children accessing formal or non-formal education, including early learning
- **450,000** children receiving individual learning materials<sup>37</sup>
- **21,864** educators supported with training and/ or incentives
- **600** temporary learning centers rehabilitated



## Water, sanitation and hygiene

- **390,000** people accessing a sufficient quantity and quality of water for drinking and domestic needs
- **300,000** people accessing appropriate sanitation services<sup>38</sup>
- **300,000** people reached with handwashing behaviour-change programmes
- **850,000** people reached with critical WASH supplies
- **300,000** people accessing functional handwashing facilities with soap



## Social protection

- **18,600** children and adolescents reached with disability-specific services and assistive technology



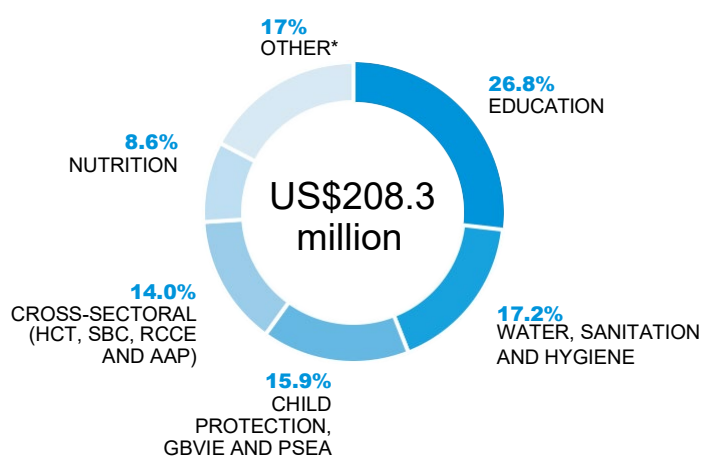
## Cross-sectoral (HCT, SBC, RCCE and AAP)

- **90,000** households reached with UNICEF-funded humanitarian cash transfers (including for social protection and other sectors)
- **3,000,000** people reached with messages on prevention and access to services<sup>39</sup>
- **359,529** people sharing their concerns and asking questions through established feedback mechanisms
- **150,000** people participating in engagement actions for social and behavioural change

## FUNDING REQUIREMENTS IN 2024

In 2024, UNICEF appeals for \$208.3 million to provide life-saving humanitarian assistance to children and families in Myanmar. This funding will allow UNICEF to reach 3.1 million people, including 2.1 million children. UNICEF and its partners will deliver much-needed services in nutrition, health, WASH, education, child protection, gender-based violence in emergencies, protection from sexual exploitation and abuse, mine action, social protection and cash-based programming, social behaviour change, accountability to affected populations, humanitarian leadership and cluster coordination. UNICEF aims to reach 850,000 people with critical WASH supplies; 350,000 children and women with primary health care services; 392,000 children, adolescents and caregivers with community-based mental health and psychosocial support (an additional 3 million children and community members will access social media and messaging on psychosocial support); and more than 890,000 children with education support. UNICEF will continue to deliver humanitarian maternal and child cash transfers to 90,000 households to meet basic needs; and 18,600 children with disabilities will be targeted for disability-specific services.

This 2024 appeal is slightly lower than that of 2023 because the national immunization programme received a commitment from development partners and is expected to be prioritized under the national health budget. However, financing remains critical for delivering effective and efficient service in all sectors. Inadequate funding will hamper UNICEF's ability to respond to the vital needs of the most vulnerable children and their families in conflict-affected, displaced and host communities across the country.



Sector	2024 requirements (US\$)
Health (including public health emergencies)	16,750,000 <sup>40</sup>
Nutrition	18,010,388 <sup>41</sup>
Child protection, GBVIE and PSEA	33,115,892 <sup>42,43,44</sup>
Education	55,871,200 <sup>45</sup>
Water, sanitation and hygiene	35,880,000 <sup>46</sup>
Social protection	8,195,000 <sup>47</sup>
Cross-sectoral (HCT, SBC, RCCE and AAP)	29,242,348 <sup>48,49</sup>
cluster & Field Coordination	11,221,000 <sup>50</sup>
<b>Total</b>	<b>208,285,828</b>

\*This includes costs from other sectors/interventions : Health (including public health emergencies) (8.0%), cluster & Field Coordination (5.4%), Social protection (3.9%).

# ENDNOTES

1. Estimate from the provisional 2024 inter-agency Humanitarian Needs Overview and Humanitarian Response Plan, as of 18 October 2023.
2. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children, and will serve as the provider of last resort where it has cluster coordination responsibilities.
3. The provisional 2024 Humanitarian Needs Overview calculated the total number of children in need based on 32 per cent of total people in need. The revised 2023 UNICEF Humanitarian Action for Children appeal was calculated based on 35 per cent of children, which also included people in need from Cyclone Mocha-affected areas.
4. The number of people to be reached is lower than in 2023 because it excludes those people reached through mass media campaigns or digital awareness sessions.
5. The population to be reached has been estimated based on the proportion of location overlapping of current year e-PDs, assuming it can be maintained for the next year. It includes a) 800,000 children under 5 years of age receiving measles immunization; b) 18,000 children with disabilities benefiting from assistive technology; 89 per cent of 0.9 million children accessing formal or non-formal education (800,000); d) 89 per cent of 0.9 million people accessing critical WASH supplies (750,000); e) 67 per cent of 0.4 million of children accessing mental health and psychosocial support, reach through media already excluded (260,000); f) 50 per cent of 0.44 million children accessing explosive ordnance risk education, reach through media already excluded (220,000); overlapping between the previous two categories excluded already; g) 50 per cent of 0.45 million people receiving cash transfer assistance (230,000); and h) educators supported (22,000). The total is 3.1 million.
6. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
7. The children to be reached has been estimated as, a) 800,000 children under 5 years of age receiving measles immunization; b) 18,000 children with disabilities benefiting from assistive technology; c) 89% of 0.9 million children accessing formal, non-formal education (800,000); d) 28 per cent of 0.9 million people accessing critical WASH supplies (240,000); e) 21 per cent of 0.4 million of people accessing mental health and psychosocial support, reach through media already excluded, (80,000); f) 16 per cent of 0.44 million children accessing explosive ordnance risk education, reach through media already excluded (70,000); g) 16 per cent of 0.45 million people receiving cash transfer assistance (70,000). The total is 2.078 million.
8. OCHA Humanitarian Access Report, 2023.
9. Office of the United Nations High Commissioner for Refugees (UNHCR), displacement figures as of 23 October 2023.
10. Rakhine, Chin and Kachin States, and Sagaing and Magway Regions.
11. Humanitarian Needs Overview and Humanitarian Response Plan 2024, data as of 18 October 2023.
12. Humanitarian Needs Overview and Humanitarian Response Plan 2024, as of 18 October 2023.
13. Estimates of monetary poverty among children in Myanmar, 2022.
14. UNICEF, Levels & Trends in Child Mortality: Report 2022 – Estimates developed by the United Nations Inter-agency Group for Child Mortality Estimation, UNICEF, New York, 2023, available at <<https://www.un.org/development/desa/pd/content/inter-agency-child-and-maternal-mortality-estimates>>.
15. Multisector needs assessment, August 2023.
16. Expanded Programme on Immunization annual review meeting, April 2023.
17. Humanitarian Needs Overview and Humanitarian Response Plan 2024 data as of 18 October 2023.
18. This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.
19. UNICEF is committed to supporting the leadership and coordination of humanitarian response through its leadership or co-leadership of cluster coordination for the WASH, Nutrition and Education Clusters and the Child Protection Area of Responsibility. All cluster coordinator costs are included in sectoral programme budgets.
20. UNICEF is committed to empowering local responders in humanitarian crises in a variety of ways. The revised Core Commitments made investing in strengthening the capacities of local actors in the humanitarian response a mandatory benchmark for UNICEF action. A more localized response will improve humanitarian action and is fundamental to achieving better accountability to affected populations.
21. UNICEF leads five clusters/areas of responsibility: WASH, Education, Nutrition, Child Protection and Mine Action.
22. The Humanitarian Response Plan 2024 has been integrated into the transitional cooperation framework 2024–2025, where it is one of the pillars.
23. UNICEF has two main offices, in Yangon and Naypyitaw, as well as five field offices and twosub-offices.
24. Services include gender-based violence mitigation, response and prevention; access to mental health and psychosocial support; case management, including for unaccompanied and separated children; and explosive ordnance risk education and victim assistance.
25. Partners include international and local NGOs, United Nations agencies, independent providers, community-based organizations, local community members and volunteers.
26. The training will focus on orienting educators to the educational pathways offered by UNICEF and implementing partners to children and youth in Myanmar. These pathways include non-formal programmes such as the Non-formal Primary Education (NFPE) programme, life skills training through the Extended and Continuous Education and Learning (EXCEL) programme, early learning and basic education. Training will also be provided on inclusive education, mental health and psychosocial support and open learning materials that UNICEF has developed and is currently rolling out.
27. UNICEF will provide preventive and curative nutrition services to vulnerable children and pregnant and breastfeeding women and will collaborate with local communities, and various partners and stakeholders to ensure nutrition screening, treatment of children with wasting and maternal infant and young child feeding counselling integrated with multiple micronutrients and vitamin A supplementation to children and pregnant and breastfeeding women.
28. Vaccination services through expanded vaccination days at both fixed and outreach sessions, and intensified hospital-based and urban immunization. Using a multi-pronged strategy of 'shadow alignment' with the national social protection system and with other United Nations agencies, international and local NGOs and ethnic health organizations, UNICEF will deliver vaccination services to zero-dose and missed children in hard-to-reach and conflict-affected areas.
29. This will be implemented through continuous direct engagement with local communities through a network of community volunteers, and capacity building of staff and volunteers of UNICEF's implementing partners on community mobilization, social and behaviour change and interpersonal communication.
30. Targeted support will be provided for children with severe disabilities. The grant includes a food component with cash support and a non-food component with access to assistive devices and rehabilitation services.
31. Beyond the UNICEF targets for these interventions, other humanitarian partners are expected to reach the remaining children/families in need.
32. UNICEF will target 70 per cent of the Child Protection Area of Responsibility targets for most of the indicators. For case management, see endnote 30.
33. UNICEF aims to reach 3 million people through digital mental health and psychosocial support and 392,000 people through community-based support.
34. Regarding the targets for protection from sexual exploitation and abuse, 831,000 people will be targeted under child protection while the remaining 823,464 will be accessing PSEA reporting channels through health, education, WASH, social protection and accountability to affected populations services.
35. The target for case management is much higher than the Child Protection Area of Responsibility target because UNICEF follows the need-based targeting approach and covers areas beyond Humanitarian Response Plan coverage such as Yangon, Ayeyarwaddy, Mandalay, Shan (east), Bago (west), etc. The reporting of case management does not include a wider range of case management in different components of the programme due to siloed reporting. Primero only reports cases that are dealt with through case management coordination. The main focus in 2024 is to strengthen reporting within the case management system and increase the social workforce.
36. Although the Education Cluster number of people in need has increased to 4.5 million from 3.8 million, the overall target for the cluster went down (from 1.5 million in the Humanitarian Response Plan 2023 to 1.36 million in 2024 Plan). UNICEF is targeting more than 65 per cent of the cluster target. Moreover, UNICEF will provide continued learning opportunities for children beyond HNRP 2024 coverage areas. The remaining children in need will be covered under the transitional cooperation framework or the nexus approach.
37. The number of children receiving individual learning materials has been reduced based on achievements in 2022 and January to August 2023.
38. The target for 'people reached with appropriate sanitation services' is less than 'people accessing a sufficient quantity and quality of water for drinking and domestic needs', as a substantial portion of the conflict-affected population is on the move and temporarily sheltering in monasteries or host communities, where basic sanitation services are available.
39. This target is for one-way messaging through social media, digital media, print materials and other mass media channels with a large reach for a comparatively low budget.
40. Unit costs: \$25 per immunized child. However, UNICEF to contribute \$10 per immunized child and \$25 per person for primary health care services.
41. Unit costs: \$200 per severe wasting treatment; \$5 per screening/vitamin A supplementation; \$10 per micronutrient supplementation for children and pregnant or lactating women; \$5 per infant and young child feeding counselling.
42. Unit costs: \$20 per child for community based mental health and psychosocial support, explosive ordnance risk education; \$250 per child for case management.
43. The PSEA budget is estimated at \$2,505,892 with \$1,662,000 under child protection with a unit cost of \$20 per child, per year. An additional \$465,892 is needed for mainstreaming PSEA across other sectors.
44. The budget for gender-based violence interventions is estimated at \$6,740,000.
45. Unit costs: \$20 per child; \$1,000 per educator; \$12,000 per learning centre.
46. Unit costs: \$29.7 per beneficiary for accessing water; \$22 per beneficiary for sanitation; \$18 per person for supplies; \$5 per person for handwashing behaviour change interventions; \$3 per person for functional handwashing facilities.
47. Cost per beneficiary: \$346 per child provided with disabilities services. Child disability benefits include cash assistance for caregivers, with cash transfer values based on the food and non-food components of the minimum expenditure basket; and provision of assistive technology and rehabilitation services by implementing partners.
48. Budget breakdown: Costs for social and behaviour change: \$1.8 million (\$12 per beneficiary); costs for accountability to affected populations: \$4.3 million (\$12 per beneficiary); and cost for risk communication and community engagement: \$3 million (\$0.5 per beneficiary). The humanitarian cash transfer programme requires an estimated \$21,628,000 (\$15.75 per beneficiary per month). The monthly value for humanitarian maternal and child cash transfers is based on the food component of the survival minimum expenditure basket developed by the Myanmar Cash Working Group.
49. The budget line includes humanitarian cash transfers, social behavior change, risk communication and community engagement and accountability to affected populations. There is a change compared to the 2023 budget because humanitarian cash transfers are now included under the cross-sectoral line item.
50. Funding requirement for cluster coordination both at national and subnational levels as UNICEF is cluster/area of responsibility lead agency in Nutrition, WASH, Child Protection and Mine Action, and co-lead of the Education Cluster. This funding will support the humanitarian response for all sectors in five humanitarian hubs (the northeast, the northwest, Rakhine, the southeast and national (Yangon), requiring additional resources to operationalize the clusters.