

**MYANMAR
RAPID RESPONSE
DISPLACEMENT
2023**

23-RR-MMR-62123

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Resident/Humanitarian Coordinator a.i.

PART I – ALLOCATION OVERVIEW

Reporting Process and Consultation Summary:

Please indicate when the After-Action Review (AAR) was conducted and who participated.

3 December 2024

On 3 December 2024, OCHA Myanmar convened and facilitated the After-Action Review (AAR) for this CERF Rapid Response grant for the countrywide intensification of conflict which began in late October 2023. Six organizations participated in the AAR session, including all three CERF recipient UN agencies – UNICEF, UNHCR and WFP – alongside two local partners. A total of 21 people participated in the session: 14 representatives from the recipient UN agencies, 3 from local partner organizations and 4 staff from OCHA's Humanitarian Financing Unit (HFU).

Please confirm that the report on the use of CERF funds was discussed with the Humanitarian and/or UN Country Team (HCT/UNCT).

Yes No

Please confirm that the final version of this report was shared for review with in-country stakeholders (i.e. the CERF recipient agencies and their implementing partners, cluster/sector coordinators and members and relevant government counterparts)?

Yes No

1. STRATEGIC PRIORITIZATION

Statement by the Resident/Humanitarian Coordinator:

Since 27 October 2023, Myanmar has experienced the most intense and geographically widespread armed clashes since the 2021 military takeover. In less than two months by the end of 2023, more than 660,000 people were newly displaced, increasing total displacement countrywide to about 2.6 million people. Nearly a year later, this figure stood at almost 3.5 million at the start of December 2024, with escalating armed clashes in both pre-existing conflict hotspots and areas previously less heavily affected by post-takeover conflict leading to a sharp rise in displacement and needs.

This unfolding emergency within an emergency quickly overwhelmed the limited resources of UN agencies and partners to deliver a response at scale, as chronic underfunding of the response – the 2023 HNRP was only 45 per cent – left humanitarian organizations struggling to keep pace with rapidly growing needs. Depleted supply pipelines, reduced response capacities and severe access constraints compounded the challenges of underfunding, leaving UN agencies and partners in urgent need of a critical injection of funding to ramp up response efforts.

Moving into 2024, as the conflict spread further and triggered more displacement and needs, this US\$7 million CERF Rapid Response grant provided a timely lifeline, enabling a rapid scale-up of multi-sectoral interventions in areas facing intense clashes and surging displacement, including the Northeast, Northwest, Rakhine and Southeast. This allocation prioritized a strategic combination of in-kind relief and cash-based support to most effectively address the most urgent survival needs of newly displaced people, helping preserve their well-being and dignity.

Additionally, this CERF grant strategically complemented other pooled fund allocations, including from the MHF, enabling a swift geographic expansion of response coverage, improving access negotiations and leveraging the capacities of local organizations to reach affected people more effectively. This coordinated effort significantly enhanced the humanitarian community's ability to respond to rapidly growing needs to help save lives and alleviate suffering.

CERF's Added Value:

CERF funding significantly enhanced the humanitarian response by enabling the rapid delivery of life-saving assistance and protection interventions for the most vulnerable. With CERF's support, UNHCR, UNICEF and WFP, along with their partners, reached approximately 237,000 people, which is 82,500 more than originally targeted through this allocation.

UNHCR enhanced the safe and effective delivery of aid through protection monitoring and distributed core relief items, multipurpose cash, and cash-for-shelter support to the most vulnerable, while UNICEF provided complementary healthcare and WASH services to women, children and other at-risk people. WFP's intervention focused on providing food and cash-based assistance to affected people to address pressing food needs. These interventions addressed urgent survival needs, safeguarded the dignity and well-being of conflict-affected people, and demonstrated CERF's added value in facilitating targeted assistance to underserved and high-priority areas affected by the escalation in conflict starting in October 2023.

Amid an extremely constrained operating environment, CERF's flexibility allowed agencies to adapt activities and reach locations with people most in need, navigating operational challenges and tailoring responses to a rapidly changing context to ensure the effective and principled delivery of aid. The grant supported partnerships with 14 local organizations, including new local partners, fostering a more localized response informed by communities' expressed needs which leveraged the access advantages of local partners to delivery tailored assistance in hard-to-reach areas. Strategic collaborations with local CSOs and NGOs helped reach the most vulnerable people with timely assistance. CERF funding also supported capacity-building for local partners, including on cross-cutting priorities such as the prevention of sexual exploitation and abuse (PSEA), strengthening future responses and ensuring the sustainability of key initiatives beyond the lifespan of this project.

Did CERF funds lead to a fast delivery of assistance to people in need?

Yes

Partially

No

The rapid disbursement of CERF funds enabled the fast delivery of assistance to people in need, allowing UNICEF, UNHCR and WFP to maintain and scale up their operations in response to emerging needs, despite challenges around funding uncertainties and escalating conflict heading into 2024. CERF funds facilitated rapid local procurement of essential relief items and supported the continuation of key partnerships, including with local organizations, ensuring that lifesaving aid continued to reach those most in need without interruption, including in underserved and hard-to-reach areas. Furthermore, CERF's timely support helped sustain supply pipelines and prevent significant gaps in assistance due to resource shortfalls, ensuring that conflict-affected communities continued to receive the assistance they desperately need and deserve.

Did CERF funds help respond to time-critical needs?

Yes

Partially

No

CERF funds played a crucial role in responding to time-critical needs. By providing fast and flexible funding, CERF's support enabled UNICEF, UNHCR and WFP to address urgent needs through an integrated, multi-sectoral response in areas severely affected by escalating conflict and displacement. The quick mobilization of CERF funds allowed for the immediate procurement and distribution of essential aid, including child protection kits, WASH supplies and lifesaving shelter support. CERF's timely support also helped fill critical response gaps amid escalating needs and funding shortfalls, ensuring that vulnerable people received effective and principled aid in a timely manner. This swift response was vital in preventing

response delays and reducing the impact of the escalating conflict on affected people already grappling with severe needs and worsening vulnerabilities following years of conflict and recurrent climate shocks.

Did CERF improve coordination amongst the humanitarian community?

Yes

Partially

No

This allocation improved coordination amongst the humanitarian community, facilitating enhanced inter-cluster coordination, increasing collaboration between agencies and partners, and promoting complementary response efforts that enabled the delivery of a comprehensive package of aid to affected people. By providing rapid and flexible funding, CERF allowed agencies to better align their efforts and reach the most vulnerable more effectively. CERF funds facilitated enhanced information sharing at the sub-national level which in turn strengthened national-level coordination and facilitated better engagement with partners between and within different clusters. This project will have a positive impact on coordination amongst the humanitarian community beyond the project's lifespan.

Did CERF funds help improve resource mobilization from other sources?

Yes

Partially

No

CERF funds helped improve resource mobilization from other sources. The rapid release of CERF funds helped UN agencies and their partners quickly deliver assistance in hard-to-reach conflict-affected areas, increasing the visibility of ongoing response efforts among donors which helped mobilize additional donor resources, including through bilateral funding. CERF funds helped agencies demonstrate their ability to provide timely aid despite seemingly insurmountable response challenges, which encouraged donors to contribute additional resources to further scale-up response efforts and provided agencies leverage to unlock additional internal resources from their headquarters. CERF's catalytic effect for resource mobilization came at a critical moment as UN agencies and partners faced severe funding shortfalls which potentially jeopardized their capacity to maintain ongoing partnerships vital to accessing hard-to-reach areas and to keep supply pipelines flowing smoothly to ensure that lifesaving assistance and protection continued to reach those most in need.

Considerations of the ERC's Underfunded Priority Areas¹:

Lifesaving assistance and protection for women and girls disproportionately affected by conflict and displacement required the most urgent funding following the escalation of conflict in late October 2023. This allocation prioritized their health, safety and well-being through integrated gender-sensitive WASH interventions, GBV risk mitigation and response, and various initiatives aimed at supporting the empower of women and girls. For example, more than half of UNICEF's health care staff and volunteers which participated in project implementation for this CERF grant were women, contributing to women's empowerment and leadership in the response. Moreover, targeted awareness-raising on GBV prevention,

¹ In January 2019, the Emergency Relief Coordinator identified four priority areas as often underfunded and lacking appropriate consideration and visibility when funding is allocated to humanitarian action. The ERC therefore recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and HCTs/UNCTs when prioritizing life-saving needs for inclusion in CERF requests. These areas are: (1) support for women and girls, including tackling gender-based violence, reproductive health and empowerment; (2) programmes targeting disabled people; (3) education in protracted crises; and (4) other aspects of protection. While CERF remains needs based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the questions and answers on the ERC four priority areas [here](#).

specialized services for GBV survivors, and the distribution of hygiene kits, including menstrual hygiene materials, helped address critical response gaps to support the dignity and well-being of women and girls.

CERF funding enabled the delivery of gender-sensitive and inclusive programming, promoting empowerment and safety for women and girls while addressing the differentiated needs of persons with disabilities. For example, WASH infrastructure was designed to ensure accessibility and security for vulnerable women and girls, with gender-segregated facilities for men and women and modifications for persons with disabilities. GBV survivors received essential services, including mental health and psychosocial support (MHPSS), case management and referral support for medical and other critical services. The CERF-funded projects also supported victim assistance for explosive ordnance (EO) survivors. For instance, UNICEF and its partner provided victim assistance services to nine EO survivors (1 man, 3 girls, 5 boys). These services included case management, MHPSS, and registration in UNICEF’s Disability Management Information System, which facilitated access to cash support for EO survivors through other sources of funding.

Overall, CERF funding played a pivotal role in advancing inclusive programming efforts while highlighting the need for increased investment to sustain and expand these critical interventions, as resource limitations continue to prevent the effective scale-up of these efforts. For instance, specialized services, such as mental health counselling and case management for GBV and EO survivors and persons with disabilities, require predictable and sustainable funding and capacity-building for aid workers, volunteers and communities to be inclusive and effective.

While agencies and their partners reached 14,220, they still collectively fell short of the planned target (15,100). Across the response, challenges persist in the targeting of and provision of assistance to persons with disabilities due to a number of compounding factors, including constrained access to affected communities, data and information limitations and sensitivities as well as persistent communication and information sharing challenges resulting from limited internet access and mobile phone connectivity. More sustained investment in these effective programming areas is necessary to improve the quality of assistance and services provided to people with distinct needs and protection risks.

Table 1: Allocation Overview (US\$)

Total amount required for the humanitarian response	886,700,000
CERF	7,006,092
Country-Based Pooled Fund (if applicable)	32,600,000
Other (bilateral/multilateral)	406,600,000
Total funding received for the humanitarian response (by source above)	446,206,092

Table 2: CERF Emergency Funding by Project and Sector/Cluster (US\$)

Agency	Project Code	Sector/Cluster	Amount
UNHCR	23-RR-HCR-050	Protection	1,103,046
UNHCR	23-RR-HCR-050	Shelter and Non-Food Items	1,103,046
UNICEF	23-RR-CEF-078	Health	1,204,000
UNICEF	23-RR-CEF-078	Water, Sanitation and Hygiene	1,204,000

UNICEF	23-RR-CEF-078	Protection - Child Protection	392,000
WFP	23-RR-WFP-070	Food Security - Food Assistance	2,000,000
Total			7,006,092

Table 3: Breakdown of CERF Funds by Type of Implementation Modality (US\$)

Total funds implemented directly by UN agencies including procurement of relief goods	4,537,416
Funds sub-granted to government partners*	0
Funds sub-granted to international NGO partners*	805,936
Funds sub-granted to national NGO partners*	1,662,740
Funds sub-granted to Red Cross/Red Crescent partners*	0
Total funds transferred to implementing partners (IP)*	2,468,676
Total	7,006,092

* Figures reported in table 3 are based on the project reports (part II, sections 1) and should be consistent with the sub-grants overview in the annex.

2. OPERATIONAL PRIORITIZATION:

Overview of the Humanitarian Situation:

Since late October 2023, Myanmar has been experiencing the most intense and geographically extensive armed clashes witnessed in the country since the 2021 military takeover. By the end of 2023, more than 660,000 people had been newly displaced across multiple states and regions since the escalation began, bringing the total displacement countrywide to approximately 2.6 million people by year's end. The escalation in conflict, both in pre-existing conflict hotspots and in new areas previously less affected by post-takeover conflict, triggered a sudden and significant increase in displacement and needs across the country, quickly outstripping the limited resources of UN agencies and their partners to effectively respond to the unfolding emergency within an emergency. The surge in displacement created an urgent need for scaled-up assistance and protection for both newly displaced and protracted IDPs as well as host communities.

In 2024, escalating conflict across Myanmar continues to drive rising humanitarian needs, marked by increasing displacement, worsening food insecurity, severe human rights violations and deadly protection threats to civilians, including from growing landmine/EO contamination. In September 2024, devastating countrywide floods triggered by heavy rains and the remnants of Typhoon Yagi affected more than 1 million, many of whom reside in areas already affected by the intensification of conflict. The Southeast and Northwest, particularly Mandalay Region, were hardest hit by these devastating floods, exacerbating an already dire humanitarian situation amid escalating armed clashes.

By December 2024, it was estimated that almost 3.5 million people were internally displaced across Myanmar, marking a staggering year-to-year increase driven by escalating armed conflict and recurrent climate shocks. The protection environment has significantly deteriorated as hostilities continue to intensify, leaving civilians increasingly vulnerable to severe rights violations, displacement and limited access to basic services. Despite the immense challenges, humanitarian organizations, both international and national, have demonstrated resilience, and through strong partnerships and innovative approaches, managed to navigate access constraints to continue delivering life-saving aid, including food, shelter, health services and protection, in the most hard-to-reach conflict-affected areas.

Operational Use of the CERF Allocation and Results:

On 23 November 2023, the Emergency Relief Coordinator allocated \$7 million from CERF's Rapid Response window to kick-start emergency relief efforts following the intensification of conflict since late October 2023. This time-critical funding enabled UN agencies and their partners to provide life-saving, multi-sectoral assistance to 237,000 people, including 84,770 women, 61,246 men, 45,457 girls and 45,526 boys, including 14,220 persons with disabilities, through complementary interventions in food security, health, protection, shelter/NFI and WASH. With CERF's support, UN agencies and their partners delivered critical humanitarian aid and services, supporting affected people to cope with and recover from the multifaceted impacts of the unfolding crisis, which helped stave off a dangerous accumulation of unmet needs and reduced compounding vulnerabilities and reliance on negative coping mechanisms.

Through this CERF allocation, UNICEF and its partners reached 35,875 people with essential primary health care, including lifesaving medical treatment for 769 children under 5. They also supported 41,512 people with access to clean water and sanitation services, and improved the well-being of 38,554 people through MHPSS services, child protection kits, and awareness-raising on GBV, PSEA and EORE, including tailored support for 4,332 people in extreme distress. UNHCR and its partners delivered lifesaving assistance to 109,593 people across the Northwest, Southeast and Rakhine. Key achievements included protection monitoring reaching 45,000 people, distribution of core-relief items to nearly 30,000 people, and cash assistance for more than 34,600 people, enabling targeted support for those with urgent protection and shelter needs. WFP and its partners provided emergency cash-for-food assistance to 94,653 people in conflict-affected areas of Chin and Rakhine states.

This coordinated response provided life-saving support to the most vulnerable people displaced by escalating conflict, many of whom have been displaced multiple times. CERF funding enabled a desperately needed scale-up of the response to address new needs in areas already facing severe pre-existing response challenges due to enduring conflict, displacement as well as political and economic instability. This timely injection of CERF funding was crucial amidst chronic underfunding of the humanitarian response, given that the 2023 HRP was only 45 percent funded, leaving a more than \$480 million funding gap. This CERF allocation strategically complemented ongoing MHF allocations, including the \$1 million Reserve Allocation for the escalation of conflict in northern Shan. Additionally, it strategically aligned with and built on the \$10 million CERF Rapid Response grant for Cyclone Mocha and the \$9 million CERF Underfunded Emergencies allocation, bolstering humanitarian response efforts which increased the collective reach and impact of pooled fund allocations amid severe underfunding.

People Directly Reached:

During the implementation of this CERF grant, the operational context in Myanmar continued to significantly deteriorate. Despite considerable operational constraints, agencies leveraged strategic partnerships, including with local organizations, and flexible response modalities to deliver life-saving assistance and services to 237,000 people across the Northwest, Northeast, Southeast and Rakhine. This represents an additional 82,500 people reached with life-saving aid compared to the planned target (154,500) – a 55 per cent overachievement – demonstrating the capacity of UN agencies and their partners to deliver a cost-effective and impactful response with additional resources.

UNHCR successfully met most targets under this allocation, following a three-month no-cost extension and reprogramming for the delivery of cash assistance through partners instead of financial service providers which helped with effective project planning and execution. Under its protection activities, UNHCR set a target of 42,300 people but reached 45,000 thanks to increased protection monitoring – around 250 protection monitoring reports were conducted by UNHCR and its partners – which helped enrich the overall protection analysis and informed better targeted and quality programming. Through its shelter/NFI activities, UNHCR aimed to assist 55,200 people, including 8,280 persons with disabilities, exceeding the overall target by reaching 64,593 people. The overachievement in the shelter/NFI component of the project was attributed to lower-than-estimated costs for shelter repairs, enabling more households to be supported. Close to 30,000 people received in-kind core-relief items, while 32,681 people benefited from multi-purpose cash assistance. Additionally, 1,927 people received cash-for-shelter support, primarily in eastern Bago and Kayin in the Southeast as well as Chin and Sagaing in the Northwest.

Through this allocation, UNICEF and its partners provided critical multi-sectoral support to the most vulnerable. Through its health activities, UNICEF targeted 30,000 people, exceeding its objective by reaching 35,875 people, including 2,869 persons with disabilities. Essential primary health care interventions reached 35,875 people, with 769 ill children under five receiving lifesaving medical care. Additionally, 1,493 people, including 724 pregnant women, were referred for specialized services. UNICEF and its partners scaled-up health activities as the project progressed in an effort to keep pace with rising needs, leading to an overachievement in this cluster. Under the WASH component, UNICEF aimed to reach 40,000 individuals, surpassing this target by reaching 41,512 people, including 1,106 persons with disabilities. UNICEF's WASH services reached both IDPs and host communities through improved access to clean drinking water and sanitation services as well as improved hygiene information and knowledge. Supplies such as water containers and menstrual hygiene kits were distributed to 40,208 people.

For child protection activities, UNICEF planned to assist 15,000 individuals, including 720 persons with disabilities, but significantly exceeded this target by reaching 38,554 people, including 690 persons with disabilities, which is more than double the original target. This success has largely been attributed to UNICEF's collaboration with partners to enhance the capacities of nearly 70 community facilitators, who conducted awareness-raising activities across seven targeted townships, significantly expanding outreach benefitting 22,889 people from increased information and knowledge on GBV, PSEA and EORE. Additionally, following a new needs and risks identified among children in Rakhine, UNICEF expanded its child protection activities, leading to an increase in children reached with critical protection interventions such as the rollout of Child Friendly Spaces, mobile MHPSS, remote counselling and MHPSS awareness-raising for caregivers.

Through its food security and cash assistance activities, WFP targeted 65,000 people, including 4,550 persons with disabilities, but significantly surpassed its target, reaching 94,653 individuals, including 6,626 persons with disabilities. According to WFP, this overachievement is the result of conservative planning figures, with cash transfer rates averaging between MMK 30,000 and 36,000 in implementation areas, allowing WFP to assist more people than initially planned.

People Indirectly Reached:

Overall, an estimated 266,600 people indirectly benefited from the life-saving response delivered through this CERF grant. WFP's cash interventions supported local markets by enabling assisted people to purchase food commodities, indirectly benefiting local retailers. Local partners and financial service providers also indirectly benefited, improving their capacity for timely service delivery and enhancing their knowledge and skills around financial inclusion. These improvements included electronic financial transfer services, which benefited vulnerable groups such as women and persons with disabilities.

Through UNICEF's interventions, approximately 258,000 people indirectly benefited from enhanced access to primary health care services, emergency referral systems and health education. The rollout of fixed and mobile clinics ensured consistent health service delivery, while COVID-19 prevention and care information was shared with assisted people. In the WASH sector, 35,000 people indirectly benefited from the distribution of water purification chemicals, community water filters and renovated water sources. Hygiene promotion activities also reinforced safe hygiene practices within these communities. Child protection awareness-raising activities reached over 23,000 people indirectly, including 5,200 children, through the sharing of key information on GBV risk mitigation, MHPSS, child safeguarding and children's rights. Distribution of IEC materials amplified this reach, while 5,311 people, including 999 children, received EORE messaging.

In total, some 8,325 people from host communities indirectly benefitted through UNHCR's project, including nearly 3,000 people who indirectly benefitted from the distribution of core relief items and nearly 4,000 who indirectly benefited from multi-purpose cash distributions in affected communities, as well as 2,250 who indirectly benefitted from UNHCR's protection activities.

Table 4: Number of People Directly Assisted with CERF Funding by Sector/Cluster*

Sector/Cluster	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Food Security - Food Assistance	18,923	17,245	11,818	12,014	60,000	33,129	26,503	17,037	17,984	94,653
Health	7,500	4,500	9,300	8,700	30,000	15,768	5,977	7,192	6,938	35,875
Protection	12,200	10,200	9,600	10,300	42,300	15,750	13,950	7,200	8,100	45,000
Protection - Child Protection	3,500	2,500	5,000	4,000	15,000	13,137	3,391	14,100	11,318	41,946
Shelter and Non-Food Items	15,100	12,225	13,500	14,375	55,200	22,606	20,023	10,337	11,627	64,593
Water, Sanitation and Hygiene	14,464	12,697	6,347	6,492	40,000	15,011	13,176	6,588	6,737	41,512

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

Table 5: Total Number of People Directly Assisted with CERF Funding by Category*

Category	Planned	Reached
Refugees	0	0
Returnees	0	0
Internally displaced people	128,820	187,157
Host communities	17,220	43,577
Other affected people	8,460	6,266
Total	154,500	237,000

Table 6: Total Number of People Directly Assisted with CERF Funding*

Sex & Age	Total Number of People Directly Assisted with CERF Funding*		Number of people with disabilities (PwD) out of the total	
	Planned	Reached	Planned	Reached
Women	45,700	84,770	4,400	5,255
Men	37,800	61,246	3,600	3,864
Girls	35,400	45,457	3,500	2,468
Boys	35,600	45,526	3,600	2,634
Total	154,500	237,000	15,100	14,220

PART II – PROJECT OVERVIEW

3. PROJECT REPORTS

3.1 Project Report 23-RR-HCR-050

1. Project Information			
Agency:	UNHCR	Country:	Myanmar
Sector/cluster:	Protection	CERF project code:	23-RR-HCR-050
	Shelter and Non-Food Items		
Project title:	Protection and life-saving multi-sector assistance to conflict-affected Internally Displaced People		
Start date:	16/01/2024	End date:	10/10/2024
Project revisions:	No-cost extension <input checked="" type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 54,608,666
	Total funding received for agency's sector response to current emergency:		US\$ 2,150,000
	Amount received from CERF:		US\$ 2,206,092
	Total CERF funds sub-granted to implementing partners:		US\$ 1,144,000
	Government Partners		US\$ 0
	International NGOs		US\$ 106,000
	National NGOs		US\$ 1,038,000
Red Cross/Crescent Organisation		US\$ 0	

2. Project Results Summary/Overall Performance

During the implementation period, the situation across the country continued to deteriorate significantly. The spread of fighting and increased territorial control by the Ethnic Armed Organizations triggered fundamental shifts in conflict dynamics and territorial administration as well as shifting dynamics with the de facto authorities, existing and emerging armed groups, political stakeholders, and civil society/community-based organizations, requiring measured approaches to implementation, engagement and UNHCR's operational footprint. Despite this increasingly complex response environment, UNHCR managed to deliver lifesaving assistance to 109,593 people across the Northwest, Southeast and Rakhine.

At the end of the implementation period, for which UNHCR received a three-month no-cost extension, and with reprogramming for the provision of cash assistance through partners instead of directly by FSP, most targets originally planned under this CERF allocation were met. In total, some 45,000 people were reached through Protection Monitoring, either in-person or remotely. This was done through 77 Rapid Protection assessments by KMSS, and 156 by Meikswei, which

enabled the development and dissemination of 9 monthly protection updates, 5 cluster advocacy notes, 5 UNHCR advocacy papers, 3 PIMS and 3 5Ws. This enabled UNHCR and partners to identify persons with specific protection risks, share information with cluster members and the HCT on urgent needs and facilitate the distribution of much-needed assistance. It also enabled UNHCR to identify people in urgent need of core-relief items and cash assistance (both multi-purpose cash and cash for shelter). In total, close to 30,000 people benefited from (in-kind) core-relief items, while 32,681 people benefitted from multi-purpose cash assistance, and some 1,927 people received cash for shelter (mainly in eastern Bagin, Chin, Kayin and Sagaing).

3. Changes and Amendments

The project benefitted from a three-months no-cost extension in order to complete the cash assistance component which was delayed due to several compounding factors outside the control of UNHCR and partners, including access and security constraints. These delays were only exacerbated by worsening economic instability and subsequent setbacks in contracting an FSP. UNHCR redeployed part of the funds for multi-purpose cash grants from the total direct project costs to UNHCR partners.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Protection									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	9,760	8,160	7,680	8,240	33,840	14,763	13,000	7,000	7,987	42,750
Host communities	2,440	2,040	1,920	2,060	8,460	987	950	200	113	2,250
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	12,200	10,200	9,600	10,300	42,300	15,750	13,950	7,200	8,100	45,000
People with disabilities (PWD) out of the total										
	1,830	1,530	1,440	1,545	6,345	789	497	360	406	2,052
Sector/cluster	Shelter and Non-Food Items									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	15,100	12,225	13,500	14,375	55,200	21,423	17,157	8,578	11,360	58,518
Host communities	0	0	0	0	0	2,056	1,867	1,243	909	6,075
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	15,100	12,225	13,500	14,375	55,200	23,479	19,024	9,821	12,269	64,593
People with disabilities (PWD) out of the total										
	2,265	1,834	2,025	2,156	8,280	1,550	1,375	707	797	4,429

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

In total, some 8,325 people from host communities indirectly benefitted through this project (including nearly 3,000 people who indirectly benefitted from the distribution of core relief items and nearly 4,000 who indirectly benefited from multi-purpose cash distributions in affected communities, as well as 2,250 who indirectly benefitted from UNHCR's protection activities).

6. CERF Results Framework

Project objective	Provide life-saving assistance to conflict-affected displaced populations to enable them to meet their protection and basic needs.			
Output 1	Protection monitoring			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Protection			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	PG.1 Number of human rights and/or protection monitoring missions, analyses and/or reports that inform the humanitarian response	20	25	UNHCR and partner reports
Indicator 1.2	Number of people receiving information on the humanitarian response	42,300	45,000	UNHCR and partner reports
Explanation of output and indicators variance:		Some 250 rapid protection assessments were conducted by partner in this period which enriched the overall protection analysis and informed better targeted and quality programming.		
Activities	Description	Implemented by		
Activity 1.1	Undertake protection monitoring activities	Meikswe Myanmar, KMSS, MRCS , DRC, LWF		

Output 2	Procurement and distribution of Core-Relief Items			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Shelter and Non-Food Items			
Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	SN.2b Number of in-kind NFI kits distributed	5,500	6,500	UNHCR and partner reports

Indicator 2.2	SN.2a Number of people receiving in-kind NFI assistance	27,500	29,985	UNHCR and partner reports
Explanation of output and indicators variance:		N/A		
Activities	Description	Implemented by		
Activity 2.1	Procurement of Core-Relief Items	UNHCR		
Activity 2.2	Distribution of Core-Relief Items It is to be noted that usually UNHCR partners distribute however in case of joint inter agency distributions the CBOs are identified on case-by-case basis dependent on access.	UNHCR (including through joint inter-agency response) and partners		

Output 3	Provision of MPC to conflict affected population to meet their basic needs			
Was the planned output changed through a reprogramming after the application stage?		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Sector/cluster	Multi-Purpose Cash			
Indicators	Description	Target	Achieved	Source of verification
Indicator 3.1	Cash.1a Number of people receiving multi-purpose cash	26,200	32,681	UNHCR and partner reports
Indicator 3.2	Cash.1b Total value of multi-purpose cash distributed in USD	749,320	716,000	UNHCR and partner reports
Explanation of output and indicators variance:		<p>A redeployment of funds for multi-purpose cash grants was granted to UNHCR to enable the partial reallocation of resources from the total direct project costs to implementing partners.</p> <p>404 HH benefitted directly from UNHCR FSP while all the remaining 7,321 HH were assisted by the partners. All HH were provided with the MPCA amount established by Cash Working group that was periodically adjusted.</p> <p>Implementation in Rakhine could not take place due to the escalation of conflict and need for partner relocation while one of the partners was deregistered by the de facto authorities in the second quarter of the year.</p>		
Activities	Description	Implemented by		
Activity 3.1	Provision of MPG through cash in envelope (or Financial Service Providers, depending on feasibility)Each family will receive MMK 300,000. The distribution will be done by UNHCR, KMSS and MRCS.	Meikswe and KMSS		

Output 4	Shelter Assistance (Cash for shelter)			
Was the planned output changed through a reprogramming after the application stage?		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
Sector/cluster	Shelter and Non-Food Items			
Indicators	Description	Target	Achieved	Source of verification

Indicator 4.1	Cash.3a Number of people receiving conditional cash transfers	1,500	1,927	UNHCR and partner reports
Indicator 4.2	Cash.3b Total value of conditional cash transfers distributed in USD	90,000	50,000	UNHCR and partner reports
Explanation of output and indicators variance:		The overachievement in people reached (indicator 4.1) is a result of the fact that the actual cost of the cash-for-shelter support required was less than originally planned (ranging from 150,000 to 500,000 MMK), while some shelters required more expensive repairs, costing up to 3,000,000 MMK. Overall, this allowed UNHCR to reach additional 400 people above those originally targeted with much-needed shelter support.		
Activities	Description	Implemented by		
Activity 4.1	Provision of cash for shelter Assistance will be based on vulnerability assessment of the households. This will be the case for both MPG and cash for shelter.	KMSS		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas² often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)³:

As part of its commitment to Accountability to Affected Populations (AAP), UNHCR's comprehensive needs assessment was conducted at every phase of the programme cycle - engaging people of concern, affected communities and partners, through surveys, key informant interviews and discussions. Additionally, UNHCR maintained strong engagement with displaced communities (through partners and community leaders) to enable identification and prioritization of targeted beneficiaries, particularly the most vulnerable. Community-based protection initiatives also helped improve the wellbeing of assisted people through awareness-raising and sensitization on protection-related issues, with a special focus on inclusion of vulnerable groups.

² These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

³ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

b. AAP Feedback and Complaint Mechanisms:

UNHCR continues to expand and adapt two-way complaint and response mechanisms (CRM) throughout the country by diversifying tools (i.e., hotlines, email, help desks) and improving recording of complaints and feedback received. This supports the inclusive participation of all affected people in key decisions across the programme cycle. Throughout this project, UNHCR maintained and expanded two-way communication and AAP mechanisms by promoting equitable access to diversified information and feedback channels. Camp management agencies and camp managers strengthened feedback mechanisms while diversifying and expanding tools and communication channels. AAP has been strengthened through diversified complaint and feedback mechanisms and improved recording of complaints and feedback, with more than 90 per cent of camps equipped with community-based feedback and complaints mechanisms.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

During the implementation period, UNHCR continued to ensure protection from sexual exploitation and abuse (PSEA) through expansion of communication channels and capacity building of both UNHCR and partner staff, which is part of UNHCR's regular programming. Throughout the year, PSEA information brochures and posters, including information on how to report incidents, were developed, translated into local languages, and disseminated through UNHCR and partners. UNHCR facilitated access to online PSEA courses for partner staff, while also meeting regularly with partners to monitor compliance with PSEA Core Standards, and strengthening capacity to prevent and address SEA and improve complaint and feedback mechanisms.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

UNHCR sex- and age-disaggregated data (SADD) in PIMS, Camp Profiles, rapid needs assessments, solutions' needs assessments, as well as post-distribution and PSN assistance monitoring facilitated analysis around the intersection between gender and other specific needs of populations at risk. In addition, UNHCR continued supporting advocacy on gender equality and women's empowerment at the UN Gender Theme Group (GTG) and Gender Equality Women Empowerment Cooperation Partners Group (GEWE CPG), ensuring the inclusion of people of concern in programming. The Protection Cluster mainstreamed gender considerations in humanitarian planning and responses for all sectors. Within the framework of this CERF project, special attention was given to women and girls particularly for protection-related activities, taking into account specificities of their situation in light of large-scale displacement and a heightened risk environment, ensuring that relevant referral and assistance mechanisms have been put in place.

e. People with disabilities (PwD):

UNHCR's work is guided by a rights-based approach. In line with this, and as part of this project, UNHCR focused on the meaningful engagement of persons with disabilities (as part of its persons with specific needs) in all decisions that affected them. This included sharing relevant information on protection and assistance services, identifying their particular needs and designing appropriate modalities of assistance through increased participation in programme design and implementation on equal basis with others. Similarly, Focus Group Discussions facilitated the identification of persons with disabilities' needs and engagement on the best ways to respond to them, particularly for shelter assistance.

f. Protection:

UNHCR mainstreamed protection actions ('do no harm,' conflict sensitive, rights/needs-based assistance targeting) in all planned activities. Protection monitoring assessed the protection risks of the targeted beneficiaries and informed responses, while community-based protection initiatives directly involved communities in their protection outcomes and enabled them to improve their resilience. All other types of assistance, particularly the provision of shelter/NFI assistance, were designed to mitigate protection concerns for persons at heightened risk, especially single heads of households, persons with disabilities as well as women and girls without adequate support.

g. Education:

Not applicable.

8. Cash and Voucher Assistance (CVA)**Use of Cash and Voucher Assistance (CVA)?**

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is a component of the CERF project	Yes, CVA is a component of the CERF project	34,608 people (8,144 families)

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

Cash assistance was provided to 34,608 people. This includes the provision of multi-purpose cash assistance to 32,681 people (7,725 families) as one-time unrestricted payments of on average MMK 300,000, in line with the recommendations of the Cash Working Group, which was distributed primarily through partners. A limited number of households were given the MMK 370,000 (SMEB) value. In addition, some 1,927 people (419 families) benefitted from cash-for-shelter assistance with assistance ranging from MMK 150,000 to 500,000 per household, depending on the state of the shelters and a higher amount for returnee families, in line with the Guidance on Cash developed by the Shelter/NFI/CCCM Cluster.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
Multi-purpose cash assistance	32,681	US\$ 716,000	Multi-Purpose Cash	Unrestricted
Cash for shelter	1,927	US\$ 50,000	Shelter and Non-Food Items	Unrestricted

3.2 Project Report 23-RR-CEF-078

1. Project Information			
Agency:	UNICEF	Country:	Myanmar
Sector/cluster:	Health Water, Sanitation and Hygiene Protection - Child Protection	CERF project code:	23-RR-CEF-078
Project title:	Provision of emergency life-saving Health, Child Protection and WASH services to communities affected by the recent conflict in Myanmar during the fourth quarter of 2023.		
Start date:	17/01/2024	End date:	16/07/2024
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input checked="" type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 61,682,000
	Total funding received for agency's sector response to current emergency:		US\$ 16,092,142
	Amount received from CERF:		US\$ 2,800,000
	Total CERF funds sub-granted to implementing partners:		US\$ 1,217,641
	Government Partners		US\$ 0
	International NGOs		US\$ 625,217
	National NGOs		US\$ 592,424
Red Cross/Crescent Organisation		US\$ 0	

2. Project Results Summary/Overall Performance

Through this CERF grant, UNICEF and its partners provided essential primary health care services to 35,875 people, including lifesaving medical management for 769 ill children under 5; gave access to clean drinking water, gender-segregated sanitation and bathing facilities, along with improved knowledge of safe hygiene practice to 41,512 people, including IDPs and their host communities; delivered MHPSS services, provided Child Protection emergency kits and improved knowledge on GBV, PSEA and EORE for 41,946 people, including 4,332 people in extreme distress supported with in-person MHPSS sessions.

Thanks to UNICEF's health interventions, 1,493 people were referred for specialized care, including 724 pregnant women for emergency obstetric services and 769 severely ill children under 5 for further care. Medical supplies and equipment were distributed across project locations in Rakhine, Kayah, Shan, Sagaing and Chin, including 475 sets of Interagency Emergency Health Kits (IEHK), sufficient to cover approximately 120,000. Additionally, 4,000 Clean Delivery Kits and 3,850 Family Newborn Kits were distributed, supporting safe childbirth and enhancing newborn survival through improved thermal

and hygienic care. These initiatives significantly benefited vulnerable communities, particularly amid intensified conflict, exceeding the planned targets for the project.

In response to surge in displacement following the October 2023 escalation of conflict, UNICEF provided lifesaving WASH assistance to 41,512 people across Myanmar with CERF's support. This assistance targeted displaced families and host communities, ensuring access to critical WASH services and strengthening local systems and capacities. Specifically, 28,971 IDPs and 12,541 members of host communities received WASH support. Clean drinking water was provided to 41,151 people, including 6,252 in the Northwest, 18,607 in the Southeast, 15,612 in Rakhine, and 680 in northern Shan through water treatment supplies and improved water sources in IDP sites/camps and communities.

Sanitation and hygiene-related activities benefited 25,819 people who gained access to gender-segregated sanitation and bathing facilities and received training on proper maintenance of these facilities. Social behavior change campaigns and community mobilization reached 41,512 people with hygiene messages around handwashing, personal hygiene and environmental cleanliness. Critical WASH supplies, such as menstrual hygiene items and water storage containers, were distributed to 40,208 people, supporting safe water storage and overall household hygiene management.

Under the Child Protection component, UNICEF provided MHPSS to 9,746 children and caregivers, including 5,414 through awareness-raising sessions and 4,332 through in-person MHPSS sessions. Awareness-raising efforts reached 22,889 children and other community members, enhancing knowledge on GBV risk mitigation, PSEA and EORE. Trained case managers conducted assessments and referrals to tailored services to meet children's specific needs, mitigating further risks and promoting healthier coping strategies.

3. Changes and Amendments

With the intensification conflict in Rakhine State, urgent child protection needs were identified by WASH partners on the ground. To address these needs, UNICEF, in collaboration with Relief International, expanded case management, MHPSS and PSEA awareness-raising activities in Rakhine. Although these interventions fell within the original project scope, including the agreed activities and budget, UNICEF expanded its Child Protection interventions into a township in Rakhine – not originally targeted under the Child Protection component of its project – as a real-time analysis from the WASH teams conducting activities in the same township found that there were considerable needs and risks faced by children, including risks of abuse, exploitation and violence, exposure to explosive ordinance and separation from families and caregivers, which required immediate attention. In response, UNICEF worked with a new implementing partner under this CERF grant, Relief International, a long-standing partner of UNICEF, as this INGO was best placed to respond to the child protection needs and risks in Rakhine, which is one of the most complex operating environments across the country. This expansion of activities allowed UNICEF to deliver lifesaving protection services to people at heightened risk, including case management for 10 children (6 girls and 4 boys), MHPSS services to 261 children and caregivers (259 children: 130 girls and 129 boys and 2 adults: 1 woman and 1 man), as well as PSEA awareness-raising for 21 children (12 girls and 9 boys) and 4 community members.

The rapidly shifting response landscape necessitated this quick shift in UNICEF's programming to tailor its activities to meet the emerging needs of affected communities. UNICEF's Child Protection teams proceeded to collaborate with a new CERF implementing partner (Relief International) to deliver priority protection interventions in Rakhine, which was not originally targeted for Child Protection interventions. The deviation from the original plan was necessary to quickly adapt to the

changing environment and ensure that vulnerable children and caregivers received timely support. Prior approval from CERF for these interventions was not secured as the urgent nature of the required response, and the shifting access landscape in Rakhine, required immediate action from UNICEF to ensure that assistance and services could reach those in need.

With the intensification of conflict in Rakhine, urgent child protection needs were identified by WASH partners on the ground. In response, UNICEF, in collaboration with Relief International, expanded case management, MHPSS, and PSEA awareness-raising activities in Rakhine. While these interventions aligned with the original project scope, including the agreed activities and budget, UNICEF extended its Child Protection interventions into Myebon Township, which was not originally targeted under the Child Protection component of the project. This decision was based on real-time analysis from WASH teams operating in the township, which highlighted significant risks faced by children, including the risks of abuse, exploitation, and violence, exposure to landmines and explosive ordnance as well as separation from families and caregivers.

Given the urgent protection needs in Myebon, UNICEF worked with a new implementing partner under this CERF grant, Relief International, a long-standing partner of UNICEF, and one of the few INGOs able to operate in the complex environment in Rakhine. Through this expansion, UNICEF successfully delivered life-saving protection services to vulnerable children and caregivers, including case management for 10 children (6 girls and 4 boys), MHPSS services for 261 children and caregivers (259 children: 130 girls and 129 boys, and 2 adults: 1 woman and 1 man) and PSEA awareness-raising for 21 children (12 girls and 9 boys) and 4 community members.

The rapidly evolving humanitarian context posed several implementation challenges, necessitating a post-facto revision request to align the final report with the adjustments made during implementation. The evolving security situation and shifting access dynamics in Rakhine required UNICEF to immediately adapt its programming, which did not allow for prior approval from CERF before making these changes. Additionally, logistical and procurement challenges affected the timely delivery of essential supplies:

- Although the Child Protection kits were locally procured, access constraints in Rakhine caused delays in the final stages of distribution. The process was already underway at the time of the project's official end date, but due to unforeseen access challenges and evolving security conditions, the final distribution was completed shortly thereafter. By August 2024, UNICEF and its partner had successfully distributed all Child Protection kits, reaching a total of 9,150 adolescents and children (2,907 boys, 3,055 girls, 2,106 women and 1,082 men), slightly exceeding the original target.
- For the health kits, to mitigate offshore procurement and tax exemption delays, UNICEF initiated the process early. However, an unexpected global stock shortage at UNICEF's Supply Division delayed the arrival of IEHK kits in Myanmar (April–May 2024). The 475 CERF-procured IEHK kits were held up in Myanmar's tax exemption process, requiring close oversight by UNICEF to expedite clearance. To address immediate health needs, UNICEF distributed 34 kits from its pre-positioned stocks, ensuring that essential support reached affected children while awaiting the arrival of the IEHK kits procured under the project. By the end of 2024, these CERF-funded kits successfully cleared customs, and distribution was completed in February 2025. All transportation and distribution costs were covered by UNICEF's regular resources. Despite these challenges, the IEHK kits played a vital role in delivering life-saving interventions to affected communities in Rakhine.

Despite significant challenges, UNICEF successfully delivered the originally planned assistance, albeit with delays in final distribution. The IEHK kits and Child Protection kits procured and distributed were vital in delivering life-saving support to affected children and caregivers across Rakhine. Given the unforeseen access constraints, supply chain disruptions, and urgent response needs, UNICEF requested and obtained from CERF a post-facto approval for the kits procurement and distribution.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Health									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	4,350	2,610	5,394	5,046	17,400	9,461	3,586	4,315	4,163	21,525
Host communities	3,150	1,890	3,906	3,654	12,600	6,307	2,391	2,877	2,775	14,350
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	7,500	4,500	9,300	8,700	30,000	15,768	5,977	7,192	6,938	35,875

People with disabilities (PwD) out of the total

600	360	750	700	2,410	1,261	478	575	555	2,869
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Sector/cluster	Water, Sanitation and Hygiene									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	10,125	8,888	4,443	4,544	28,000	10,476	9,195	4,598	4,702	28,971
Host communities	4,339	3,809	1,904	1,948	12,000	4,535	3,981	1,990	2,035	12,541
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	14,464	12,697	6,347	6,492	40,000	15,011	13,176	6,588	6,737	41,512

People with disabilities (PwD) out of the total

723	635	317	325	2,000	424	375	152	155	1,106
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* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

Sector/cluster	Protection - Child Protection									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	2,810	1,920	3,950	3,320	12,000	2,190	906	2,037	1,906	7,039
Host communities	690	580	1,050	680	3,000	8,377	2,206	8,497	6,569	25,649
Other affected people	0	0	0	0	0	2,570	279	3,566	2,843	9,258
Total	3,500	2,500	5,000	4,000	15,000	13,137	3,391	14,100	11,318	41,946
People with disabilities (PwD) out of the total										
	220	120	130	250	720	220	46	240	184	690

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

Approximately 258,000 people indirectly benefited from this project, including 200,000 people through enhanced access to primary health care services located close to their communities and improved emergency referral systems. UNICEF's partners supported service delivery within camps, maintained fixed clinics near displaced populations, and operated mobile clinics in villages, ensuring consistent access to health services for all affected people. Additionally, these communities gained indirect benefits from health education initiatives, including COVID-19 prevention and care information disseminated by partners.

In the WASH sector, an estimated 35,000 people, including 1,750 persons with disabilities, indirectly benefited. This included access to water purification chemicals, installation of community water filters, and the renovation of existing water sources. Hygiene promotion activities led by community volunteers further supported the well-being of these populations, reinforcing safe hygiene practices.

Awareness-raising activities under the Child Protection sector reached more than 23,000 people indirectly, including 5,200 children, providing essential knowledge on GBV risk mitigation, MHPSS, child safeguarding and children's rights. Distribution of IEC materials on mental health, GBV and PSEA reporting mechanisms amplified the project's reach and impact. Furthermore, EORE messages were shared with 5,311 people, including 999 children, increasing awareness and reducing risk in vulnerable landmine/EO-contaminated areas.

6. CERF Results Framework

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Project objective	Children, women, and their families have improved access to essential health care services, protection support and WASH services and supplies			
Output 1	Children and women have access to safe MNCH and emergency health care			
Was the planned output changed through a reprogramming after the application stage? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
Sector/cluster	Health			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	H.8 Number of primary healthcare consultations provided	30,000	35,875	Partner report
Indicator 1.2	H.1a Number of emergency health kits delivered to healthcare facilities	475	475 procured and distributed	Distribution report
Indicator 1.3	H.10 Number of people referred to higher level and/or specialized health services	800	1,493 (724 women, 368 boys and 401 girls)	Partner report
Indicator 1.4	AP.2b Percentage of affected people who state that they are aware of feedback and complaints mechanisms established for their use 80%	80	80	Programme visit

Explanation of output and indicators variance:	<p>Indicator 1.1 variance: Affected communities depend on the services provided by the humanitarian community through mobile and fixed clinics and through volunteer networks, as the functionality of public health services remains significantly constrained. With a growing displaced population, partners intensified their efforts to provide additional services as much as possible, resulting in a greater level of achievement than originally anticipated.</p> <p>Indicator 1.2 variance: 475 IEHKs were procured with CERF funds. Out of 475 planned kits, 34 kits were distributed during the project period using pre-positioned stocks. The remaining 441 kits were distributed in February 2025 to the initially planned locations and target populations. UNICEF's regular resources covered the entire cost of transportation and distribution of the 475 kits.</p> <p>Indicator 1.3 variance: Partners provided support for emergency referrals. As conflict rages on and communities increasingly depend on partners' health services, the number of cases requiring treatment increased, resulting in a significant rise in the number of cases requiring referral support, which exceeded the planned target for this indicator.</p>
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Activities	Description	Implemented by
Activity 1.1	Supply of essential medicines and equipment for emergency primary health care and MNCH services	UNICEF
Activity 1.2	Provision of healthcare services to women, children and families through mobile teams and community health workers	Action Contre la Faim, Myanmar Health Assistant Association (MHAA), Karuna Mission Social Solidarity (KMSS), Medical Action Myanmar (MAM)
Activity 1.3	Assistance for referral support	Action Contre la Faim, Myanmar Health Assistant Association (MHAA), Karuna Mission Social Solidarity (KMSS), Medical Action Myanmar (MAM)

Output 2 Ensured protection from abuse, exploitation, neglect and deprivation from primary caregivers for conflict affected children through the provision of a package of services including mental health and psychosocial well-being, case management and the provision of child protection kits to boys and girls and their caregivers in Southeast regions.

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster	Protection - Child Protection			
Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Number of children and adolescents have accessed to age and gender appropriate child protection emergency kits	9,000	9,150 (2,106 women, 1,082 men, 3,055 girls and 2,907 boys)	Partner Report (5Ws)
Indicator 2.2	Number children, adolescent boys and girls and male and female caregivers accessing mental health and psychosocial support including through child friendly Spaces, mobile PSS and remote counselling activities and parenting sessions	4,000	9,746 (1,581 women, 516 men, 4,160 girls, 3,489 boys)	Partner Report (5Ws)
Indicator 2.3	CP.3 Number of children receiving protection support (e.g. family	50	63 (40 girls and 23 boys)	Partner Report (5Ws)

	tracing, reunification, reintegration, case management services, etc)			
Indicator 2.4	Number women, girls and boys accessing GBV risk mitigation, prevention and/ or response interventions	5,000	5,183 (3833 women, 777 girls and 573 boys)	Partner Report (5Ws)
Indicator 2.5	Number people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers	2000	17,706 (5,557 women, 1755 men, 6,067 girls and 4,327 boys)	Partner Report (5Ws)
Indicator 2.6	Number of frontline workforce, community teachers, Community Health Workers and Community facilitators trained on child protection topics	100	98 (60 women and 38 men)	Partner Report (5Ws)
Indicator 2.7	AP. 5b Percentage of affected people who state that they were able to access humanitarian assistance and services in a safe, accessible, accountable and participatory manner 80%	80	80	Partner Report
Explanation of output and indicators variance:		<p>Indicator 2.1 variance: A total of 9,150 people were reached under this component of the project, including 5,758 during the project period and 3,392 by August 2024. UNICEF used other sources of funding to support the kits post project transportation and distribution.</p> <p>Indicator 2.2 variance: As the need for MHPSS activities increased, UNICEF's partner focused more on this activity and significantly expanded its reach through CFS, mobile MHPSS, remote counselling and MHPSS awareness-raising for caregivers. Adolescents and young people in IDP camps found the "I support my friends" peer approach particularly helpful. In addition, MHPSS awareness activities were provided to 260 children and caregivers in Rakhine. The overachievement against this indicator is in part attributable to the additional beneficiaries reached through originally unplanned Child Protection activities in Rakhine (see explanation in Section 3: Changes and Amendments).</p> <p>Indicator 2.3 variance: Following the identification of critical child protection needs in Rakhine by the WASH team, immediate case management services were provided to 10 children (6 girls and 4 boys) through UNICEF's partner, Relief International. This intervention, although essential, was not originally planned under this project, contributing to the overachievement against this indicator (see explanation in Section 3: Changes and Amendments).</p> <p>Indicator 2.5 variance: This indicator was exceeded due to UNICEF's collaboration with its partner to enhance the capacity of 69 community facilitators, strengthening their capacity to conduct PSEA awareness-raising activities across 7 targeted townships. Additionally, in response to critical needs identified by the WASH team, PSEA awareness-raising sessions were extended to 25 children and community members in Rakhine (see explanation in Section 3: Changes and Amendments).</p>		

Activities	Description	Implemented by
Activity 2.1	Locally procure and distribute child protection kits	Suwannimit Foundation (SNF)
Activity 2.2	Provide MHPSS services including targeted psychosocial support and psychosocial first aid through child friendly spaces, mobile PSS teams and remote counselling	Suwannimit Foundation (SNF), Relief International
Activity 2.3	Provide case management support and protection services to unaccompanied and separated children	Suwannimit Foundation (SNF), Relief International
Activity 2.4	Provide awareness messages on the prevention of gender-based violence	Suwannimit Foundation (SNF)
Activity 2.5	Provide GBV response services to child victims of gender-based violence	Suwannimit Foundation (SNF)
Activity 2.6	Establish or strengthen reporting pathways for sexual exploitation and abuse	Suwannimit Foundation (SNF), Relief International
Activity 2.7	Raise awareness about the established reporting channels for sexual exploitation and abuse by aid workers	Suwannimit Foundation (SNF)
Activity 2.8	Refresher training to frontline workforce, community teachers, Community Health Workers and Community facilitators	Suwannimit Foundation (SNF)
Activity 2.9	Programme visit to access beneficiary satisfaction with services provided	Suwannimit Foundation (SNF)

Output 3 40,000 people (12,697 men, 14,464 women, 6,492 boys and 6,347 girls) in conflict-affected areas are provided with access to lifesaving emergency WASH services and supplies

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster	Water, Sanitation and Hygiene			
Indicators	Description	Target	Achieved	Source of verification
Indicator 3.1	WS.6 Number of people accessing sufficient and safe water for drinking, cooking and/or personal hygiene use as per agreed sector standard	40,000	41,151 (14,880 women, 13,061 men, 6,531 girls and 6,679 boys)	Partner Report
Indicator 3.2	WS.9a Percentage of people who report using a safe, dignified and functional sanitation facility with functional handwashing facility (with soap/cleaning agent and water) 70% (28,000 persons)	70	65% (25,819 – 9,336 women, 8,195 men, 4,098 girls and 4,190 boys)	Partner Report
Indicator 3.3	WS.17 Number of people receiving WASH/hygiene messaging	40,000	41,512 (15,011 women, 13,176 men, 6,588 girls and 6,737 boys)	Partner Report
Indicator 3.4	WS.16a Number of people receiving critical WASH supplies (e.g., WASH/hygiene kits)	40,000	40,208 (14,539 women, 12,762 men,	Partner Report

			6,381 girls and 6,526 boys)	
Indicator 3.5	AP.3b Percentage of affected people who state that they were consulted on the humanitarian response 80%	80	87% (34,834 – 12,599 women, 11,059 men, 5,530 girls and 5,655 boys)	Partner Report
Indicator 3.6	CC.1 Number of implementing partner staff receiving training to support programme implementation	140	191 (99 women, 92 men)	Partner Report

<p>Explanation of output and indicators variance:</p> <p>Indicator 3.6: The overachievement for this indicator was due to training provided to both partner staff and camp volunteers on WASH-related interventions, which included components on AAP and Prevention of Sexual Exploitation and Abuse (PSEA).</p>	<p>Indicator 3.1, 3.3 and 3.4: The overachievements were primarily due to the increased movement of affected people within project locations. Families frequently moved between temporary displacement sites or to safer locations, leading to fluctuating numbers at different points during project implementation.</p> <p>Indicator 3.2: The underachievement was also due to the population fluctuations within displacement sites throughout the project period. The provision of toilets was based on the needs at each target location, following a standard ratio of 1 toilet per 50 people. It is also important to highlight that in addition to toilets, bathing facilities were simultaneously provided to serve the same population.</p> <p>Indicator 3.5: The overachievement is a result of the integration of AAP related activities into community mobilization efforts. During these activities, individuals received refresher information on the AAP mechanism and were encouraged to provide feedback.</p> <p>Indicator 3.6: The overachievement is due to training provided to both partner staff and camp volunteers on WASH-related interventions, which included components on AAP and PSEA.</p>
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Activities	Description	Implemented by
Activity 3.1	Provision of clean drinking water to the IDPs through the procurement and distribution of water purification tablets, flocculent, water filters, containers	UNICEF, Karuna Mission Social Solidarity (KMSS), Ar Yone Oo Social Development Organization (AYO), Metta Development Foundation (Metta), Community Development Association (CDA), Solidarite International (SI), Suwannimit Foundation (SNF)
Activity 3.2	Provision of clean drinking water to the IDPs through the installation of communal water storage, water trucking and distribution	UNICEF, Karuna Mission Social Solidarity (KMSS), Ar Yone Oo Social Development Organization (AYO), Metta Development Foundation (Metta), Community Development Association (CDA), Solidarite International (SI), Suwannimit Foundation (SNF)
Activity 3.3	Construction of emergency latrines and handwashing facilities and communal/private bathing facilities in the IDP camps, temporary IDP sites and host communities	UNICEF, Karuna Mission Social Solidarity (KMSS), Ar Yone Oo Social Development Organization (AYO), Metta Development Foundation (Metta), Community Development Association (CDA), Solidarite International (SI), Suwannimit Foundation (SNF)
Activity 3.4	Distribution of critical WASH supplies. Hygiene kits to be distributed and complemented with hygiene promotion/ social and behaviour change communication	UNICEF, Karuna Mission Social Solidarity (KMSS), Ar Yone Oo Social Development Organization (AYO), Metta Development Foundation (Metta), Community Development Association (CDA), Solidarite International (SI), Suwannimit Foundation (SNF)
Activity 3.5	Community Consultation to inform on the WASH interventions and feedback on the response quality	UNICEF, Karuna Mission Social Solidarity (KMSS), Ar Yone Oo Social Development Organization (AYO), Metta

	Development Foundation (Metta), Community Development Association (CDA), Solidarite International (SI), Suwannimit Foundation (SNF)
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7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁴ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)⁵:

AAP is mainstreamed in UNICEF partnerships, with local staff and volunteers from affected communities actively involved in programme implementation and monitoring. Community health workers engage with community members and relay feedback to facilities to enhance service delivery. Feedback and complaint mechanisms, supported by UNICEF, were established at the community level to gather and respond to inputs from beneficiaries. Implementing partner staff and volunteers are trained on AAP to ensure that adequate consultation and feedback systems are integrated throughout project implementation. Consultations with beneficiaries are conducted during initial assessments, including discussions with community leaders, camp representatives and households. Engaging volunteers within the communities or camps helps build local ownership and capacity, ensuring that activities remain responsive and adaptive based on community feedback and contextual developments.

b. AAP Feedback and Complaint Mechanisms:

AAP is mainstreamed in UNICEF partnerships, with capacity building on AAP, community sensitisation and use of feedback mechanisms to address problems/complaints being included. UNICEF has incorporated AAP feedback mechanisms as a standard feature in all new partnership agreements for accountability and responsiveness to communities.

Initial assessments were conducted to determine the current needs of the target population before project implementation. These assessments involved consultations with relevant camp or community leaders and, where present, management committees. The findings from these assessments informed tailored interventions, while established feedback mechanisms provided systems for reporting AAP-related issues, including direct contact with project staff present in targeted locations. Feedback mechanisms included suggestion boxes, shared contact numbers, and volunteers serving as feedback channels.

Post-distribution monitoring and programme visits were conducted, featuring interviews and group discussions with a focus on vulnerable groups and gender-specific sessions. In areas where conflict escalated, AAP mechanisms were integrated

⁴ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

⁵ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

into planned visits and activities to maintain continuous connections, networks and feedback systems throughout the project.

Complaints were received through agreed channels, documented by implementing partners, and addressed through appropriate interventions. Partners ensured responses were communicated to camp or community management committees after issues were resolved. Documentation of feedback was maintained and reported to UNICEF during progress review meetings and through monitoring visit reports.

Through this funding, UNICEF established a reporting mechanism in seven townships: Bilin, Thaton (Mon), Hpa-An, Hlaingbwe, Myawaddy, Kawkareik, Karinseikkyi (Kayin), and Dawei (Tanintharyi). UNICEF trained 74 community facilitators who provided awareness-raising on AAP and PSEA, supported by IEC materials to promote the use of the reporting mechanisms.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

UNICEF requires all staff and consultants to complete the mandatory PSEA training, which is available in the Myanmar language on the UNICEF learning platform, Agora. Partnership Cooperation Agreements (PCAs) between UNICEF and partners include clauses mandating proper PSEA measures within their management systems, and partner staff are also required to complete PSEA training.

PSEA training, monitoring, and reporting are integrated within AAP systems to streamline feedback and maximize the effectiveness of these networks in project locations. Community awareness on PSEA is conducted in project areas, and reporting mechanisms are made accessible. Camp volunteers receive PSEA training on handling reports and understanding the referral channels. Specific contact information for PSEA reporting is provided to volunteers and community management committees. Partner organizations are equipped with relevant PSEA policies and procedures to guide necessary actions and ensure appropriate follow-up steps are taken.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

The project focuses primarily on women and children (50 per cent girls) as the main beneficiaries, ensuring they receive essential health care services. In addition, more than 50 per cent of the health care staff and volunteers assisting with the project are women, contributing to women's empowerment and leadership.

Gender segregation and accessibility considerations are incorporated into the design and construction of toilets and bathing facilities, providing separate facilities for men and women and ensuring strategic placement for the security of women and girls. Hygiene kits distributed include menstrual hygiene management materials, such as disposable pads and women's panties. Additionally, gender and disability considerations are integrated into programme monitoring to assess both access to and acceptability of the services and WASH supplies provided.

The project also included targeted awareness-raising activities on GBV and its risk mitigation. With this funding, specialized services for GBV survivors were made available, including mental health counselling and referrals to medical care through the case management mechanism.

e. People with disabilities (PwD):

The project was designed to address the needs of all segments of the population, including persons with disabilities. Partners received training on disability inclusion to facilitate the adaptation of services for better accessibility for persons with disabilities. Persons with disabilities identified were linked to other programmes that provide cash-based support.

A comprehensive approach was applied to WASH interventions, ensuring the inclusion of persons with disabilities. WASH kits were distributed to all households, with a particular focus on households with members who have disabilities, the elderly and female-headed households. Community engagement activities prioritized the involvement of these vulnerable groups, incorporating them into consultations and assessments during the planning phase. Toilet and bathing facility designs took accessibility for persons with disabilities into account, and their participation in program monitoring visits was emphasized to inform project implementation and improve long-term program strategies.

Through this funding, UNICEF and its partners were able to provide victim assistance services to 9 EO survivors (1 man, 3 girls and 5 boys). These services included case management, MHPSS, and registration in UNICEF's Disability Management Information System, enabling access to further cash assistance.

f. Protection:

Protection was integrated into the project implementation process. By working in close collaboration with partners from a range of sectors, UNICEF was able to strategically share targeted geographical locations, thereby enhancing the overall impact of the project. Some activities were conducted jointly with the objective of integrating protection awareness-raising messages into both health and WASH initiatives. For example, CP case management services were provided to 10 children (6 girls and 4 boys) in Rakhine State, where a WASH project was simultaneously being implemented. While the CP component was not originally included in the Rakhine plan, the WASH team promptly identified the urgent protection needs of these children at the site. This demonstrated a high level of awareness of protection issues and close collaboration with the WASH team, which promptly referred the children to MHPSS services to address their needs.

g. Education:

UNICEF's case management services include trained case workers who facilitate referrals to education facilities and services for out-of-school children, ensuring learning continuity. To support this, UNICEF's CP section collaborates closely with its education section to promote a seamless transition and carry out necessary advocacy for these children. Additionally, the organization consistently monitors attacks on schools or their military use through the Monitoring and Reporting Mechanism, with findings reported quarterly and annually to the Office of the Special Representative of the Secretary-General for Children and Armed Conflict (CAAC) to ensure accountability for perpetrators.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
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No

No

0

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

This six-month CERF project did not include CVA due to the limited timeframe, which presented challenges in establishing the necessary financial systems and secure delivery mechanisms. These critical steps are essential to ensure that CVA is implemented safely and effectively. Additionally, emergency projects often require direct provision of goods and services to meet urgent needs swiftly, leaving insufficient time to develop and coordinate comprehensive CVA strategies.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
Not applicable	n/a	n/a	n/a	Choose an item.

9. Visibility of CERF-funded Activities

Title	Weblink
Not applicable	Not applicable

3.3 Project Report 23-RR-WFP-070

1. Project Information			
Agency:	WFP	Country:	Myanmar
Sector/cluster:	Food Security - Food Assistance	CERF project code:	23-RR-WFP-070
Project title:	Assist crisis-affected people in Myanmar to meet their food and nutrition needs		
Start date:	12/01/2024	End date:	11/07/2024
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 222,000,000
	Total funding received for agency's sector response to current emergency:		US\$ 15,500,000
	Amount received from CERF:		US\$ 2,000,000
	Total CERF funds sub-granted to implementing partners:		US\$107,035
	Government Partners		US\$ 0
	International NGOs		US\$ 74,719
	National NGOs		US\$ 32,316
Red Cross/Crescent Organisation		US\$ 0	

2. Project Results Summary/Overall Performance

WFP reached 94,653 people in Chin and Rakhine states, including people with disabilities, with cash-based emergency relief assistance under this CERF grant. The impact of the assistance provided exceeded WFP's initial plan, as outlined in the proposal. WFP planned to provide two months of cash assistance to 65,000 people in Shan, Chin and Rakhine who had been newly displaced as a result of increasing conflict since late October 2023. WFP provided life-saving food assistance through cash-based transfers in hard-to-reach conflict-affected areas within Chin and central Rakhine states. Support in Shan state was provided with financial support from other partners.

WFP originally planned to assist 65,000 beneficiaries with two months of cash assistance but managed to reach more people - a total of 94,653 beneficiaries. This was possible due to the following reasons:

- While some beneficiaries received two months of assistance, others in certain townships received only one month, allowing WFP to extend the assistance to a larger number of people. Additional months of assistance were provided with funds from other partners.
- Although WFP planned for a possible cash transfer rate of MMK 30,000 – MMK 45,000 per person per month, the rate, or amount required in the target townships, was between MMK 30,000 – MMK 36,000. This lower than

planned cash assistance rate enabled WFP to assist a larger number of individuals. The rates of cash assistance are based on the cost of a basic food basket at local market prices. WFP ensures the cash assistance rates are adequate through monthly monitoring of the cost of a food basket – by state/region and township. The reference food basket is set to make it possible for WFP beneficiaries to meet their minimum dietary needs of 2,100 Kcal per person per day.

3. Changes and Amendments

Despite the complex operating environment, WFP was able to deliver the CERF-funded assistance as planned and was able to assist a larger number of people due to conservative planning at the proposal stage.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Food Security - Food Assistance									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	20,654	18,678	12,730	12,938	65,000	33,129	26,503	17,037	17,984	94,653
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	20,654	18,678	12,730	12,938	65,000	33,129	26,503	17,037	17,984	94,653
People with disabilities (PwD) out of the total										
	1,446	1,307	891	906	4,550	2,319	1,855	1,193	1,259	6,626

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

Beneficiaries who received cash-based transfers purchased food commodities from local markets, thus indirectly supporting local retailers. Local cooperating partner organizations and local financial service providers were also indirect beneficiaries. Working together with WFP, they have improved their capacity for timely service delivery. The project also enhanced their skills in financial inclusion such as providing electronic financial transfer services to women, persons with disabilities and other vulnerable communities.

6. CERF Results Framework

Project objective	People are better able to meet their urgent food needs.				
Output 1	Women, men, girls and boys affected by crisis receive in a timely manner cash-based transfers that meet their daily food needs.				
Was the planned output changed through a reprogramming after the application stage?				Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Sector/cluster	Food Security - Food Assistance				
Indicators	Description	Target	Achieved	Source of verification	
Indicator 1.1	Cash.2a Number of people receiving sector-specific unconditional cash transfers (Number of people receiving in-cash assistance)	65,000	94,653	MDR	
Indicator 1.2	Cash.2b Total value of sector-specific unconditional cash transfers distributed in USD (Quantity of cash assistance distributed in USD)	1,516,035	1,515,944	MDR	
Indicator 1.3	AP7 Number of community-based complaints/feedback mechanisms established	1	1	CFM	
Explanation of output and indicators variance:		WFP used conservative planning figures based on the spread of possible cash transfer rates across the country. Rates can range from MMK 30,000 to 45,000; however, in the areas of implementation under this grant, the average rates were between MMK 30,000 and 36,000, which means WFP could ultimately assist more people. The rates are based on the cost of basic foods in local markets.			
Activities	Description	Implemented by			
Activity 1.1	Identification and selection of IDP camps and villages and beneficiaries	Cooperating Partners: Chin Ethnic Peasant and union (CEPU), Community Association for Rural Development (CARD), People Hope Community Development (PHCD), Together for Sustainable Development (TSD), Zion Agriculture Research Organization (ZARO), Save the Children International (SCI), Plan International Myanmar			

		(PIM), Community and Environment Development Association (CEDA)
Activity 1.2	Provide food and/or cash-based transfer assistance to 94,653 people affected by crisis.	WFP and Cooperating Partners
Activity 1.3	Post-distribution Monitoring and Reporting	WFP and Cooperating Partners
Activity 1.4	Engage communities by consulting a diverse range of people, providing accessible information about WFP's programmes, ensuring the functionality of the feedback system.	WFP and Cooperating Partners

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁶ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)⁷:

WFP's commitments to AAP are mainstreamed across all operations at every stage of the programme cycle to ensure crisis-affected people are meaningfully involved in the design, implementation and monitoring of the project.

During the reporting period, WFP strengthened information provision to affected populations, updating its mapping of available, accessible, and preferred communication channels by location and key demographic groups. WFP worked both directly and through cooperating partners to provide accessible, accurate, timely, and trusted information on WFP, its programming, and specific entitlements and impacts for crisis-affected people. Communication channels in use include word- and picture-based banners and information, education, and communication (IEC) materials, recorded audio messages in local languages, project site help desks, suggestion boxes, face-to-face engagement through CPs and trusted interlocuters and Community Feedback Mechanism (CFM) channels, where WFP can provide on-demand answers to specific questions. To ensure accessibility, information is shared face-to-face through trusted interlocuters within communities, and information products are translated into 10 languages: Myanmar, Chin, Shan, Ta'ang, Wa, Chinese, Mon, Kayam, Nagamese, and English.

b. AAP Feedback and Complaint Mechanisms:

⁶ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

⁷ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

WFP operates an accessible, trusted and effective CFM covering all activities and operational locations. The CFM operates through diverse communication channels including a telephone helpline network, SMS, viber, suggestion boxes, helpdesks, email, and face-to-face with WFP and CP staff.

CFM cases are registered only with informed consent of the user, with all case and personal details encrypted in WFP's case management system, SugarCRM. Viewing/access permissions to CFM cases is closely controlled to protect user confidentiality.

During the reporting period, WFP received and managed 2,627 CFM cases relevant to CERF-funded activities and locations. CFM users represented a broad diversity of affected people, including 48 per cent women. Close to 20 per cent of CFM cases were closed on the spot by providing requested information, with 80 per cent of cases actioned and closed by relevant WFP programme teams. Almost all (99 per cent) of CFM cases were closed within 30 days in accordance with WFP's CFM standard operating procedures (SOPs).

The CFM is operated by 17 dedicated CFM and PGAAP employees based in all WFP sub-offices and the country office, and is overseen by a high-level AAP Advisory Group within the Country Office.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

As per the SOP on PSEA, allegations or suspicions of SEA linked to WFP interventions can be reported to:

- **The WFP Office of the Inspector General of Investigations (OIGI)** by phone, email or online. OIGI has exclusive authority and responsibility to conduct investigations into allegations of SEA against WFP personnel. Any allegations or report of SEA against WFP personnel shall therefore immediately be reported to OIGI.
 - **The WFP PSEA Focal Points.** As PSEA Focal Points, Deputy Country Director for Operations and the Head of Crisis Response Emergency Preparedness and Response have been trained to ensure the strictest of confidentiality including as to the alleged perpetrator. In addition to the CO PSEA focal points, WFP has PSEA Champion Network including PSEA focal points from field offices and supply chain and have been trained for community sensitizations and WFP and CP staff/vendors awareness on PSEA. WFP Myanmar updated its PSEA SOP and developed PSEA risk matrix and action plan in June 2024 and implementing.
 - **The WFP Community Feedback Mechanism.** CFM operators are trained in a victim-centred intake approach, immediately registering the case in the CFM data system (SugarCRM) in accordance with the CFM SOP. The case is assigned to CO PSEA main focal point, and the case is referred directly to OIGI. CFM Operators know how to maintain the strictest confidentiality including as to the alleged perpetrator. The CFM, which has coverage across all WFP project sites, has seven communication channels.
 - **The inter-agency PSEA Network.** WFP is participating in the meetings and contributes. WFP is member of inter-agency SEA risk assessment in 2024.
 - **The UN IP PSEA Capacity Assessment.** WFP has initiated an online evaluation of partners' capacities on Sexual Exploitation and Abuse (SEA) through the UN Partner Portal (UNPP). The main objectives are to ensure that those served by WFP are not put at risk of SEA, to work collaboratively with partners to improve prevention and response to
-

allegations, and to take concrete actions in support of the Zero Tolerance policy on SEA. All cooperating partners (CPs) have already completed an offline capacity assessment. WFP is now working with CPs to finalize the online assessment in the UNPP.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

All WFP outcome indicators are disaggregated by gender. WFP remains committed to addressing gender inequality and enhancing women's empowerment through its programmes, in line with its 2024-2025 Protection Gender and Accountability to Affected People (PGAAP) Strategy and Action Plan.

WFP completed the Gender Equality Certification Programme and successfully achieved 38 of 39 benchmarks. The final benchmark - partnering with government entities - was not applicable under UN guidelines on engagement with the de facto authorities.

WFP has increased the sensitization of crosscutting social and behavioural change communication (SBCC) efforts with communities, reaching 11,521 women, 10,874 men and 68 others, of them 422 persons with disabilities. This aimed to gradually shift community attitudes and behaviour towards inclusive and equitable assistance. Key messages on risks and rights including Gender Based Violence (GBV), Sexual Exploitation and Abuse (PSEA) and Community Feedback Mechanism (CFM) were disseminated. Sensitization sessions with communities were paused due to active conflict in most operational areas in November 2023. This sensitisation resumed in a few targeted areas in 2024.

WFP continuously made efforts on increasing women's decision making through women's participation in joint decision-making. According to 2023 post-distribution monitoring results, joint decision-making over the use of WFP assistance has increased from 43 per cent in December 2022 to 70 per cent in December 2023.

WFP launched a gender e-learning platform in Myanmar language for national staff, cooperating partners and the Food Security Cluster to allow a deeper understanding and application of gender equality in project implementation. However, user registration is very low because national partner staff access to the platform is very challenging due to limited/lack of mobile connectivity and electricity, and staff relocation due to the ongoing active fighting.

e. People with disabilities (PwD):

WFP employs a twin-track approach to increase disability inclusion: mainstreaming programming to prevent persons with disabilities from slipping through the cracks, while simultaneously providing more targeted assistance to people with disabilities. WFP continues its efforts to integrate disability inclusion across its activities by engaging local partners for advocacy and technical assistance, enhancing staff and partners' capacity, and collecting disability-disaggregated data.

During this reporting period, WFP continued its efforts to integrate disability inclusion across its activities by mainstreaming inclusion through the 2024 field-level agreement review process. Most WFP offices have integrated disability assessable roads as per universal design features, pending incorporation of disability friendly equipment.

f. Protection:

Myanmar's protection environment deteriorated significantly in 2024 as armed conflict intensified. In addition, current ongoing fighting in Rakhine severely increased the needs of the Rohingya, Rakhine and other religious minorities. The major issue of

the de facto authorities' control and monitoring of personal data (know your customer requirements) continued to impede WFP's ability to transfer assistance through digital cash.

WFP prioritizes the safety and security of its beneficiaries in accessing food distribution points and meetings. WFP developed a set of guidelines on safe distributions for different kinds of distributions, which were used to train WFP and cooperating partner staff including practical training sessions with distribution staff and camp-based volunteers. Despite tightly restricted humanitarian access, almost all of relief beneficiaries in conflict-affected areas reported having unhindered access to WFP's assistance and this was likely due to WFP's efforts to support partners to improve safe distribution practices in different scenarios and increased distribution support from established food management committees, cooperating partners and camp-based volunteers. Almost all beneficiaries (99 percent) receiving emergency relief assistance in conflict-affected areas reported feeling safe and dignified when accessing assistance.

g. Education:

Not applicable.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
Yes, CVA is the sole intervention in the CERF project	Yes, CVA is the sole intervention in the CERF project	94,653

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

CVA was used to address the food needs of 94,653 beneficiaries in conflict-affected areas in Chin and Rakhine states.

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction
Cash-Based Transfer	94,653	1,515,944	Food Security - Food Assistance	Unrestricted

ANNEX: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

Project Code	Sector	UN Agency	Partner Type
23-RR-CEF-078	Health	UNICEF	INGO
23-RR-CEF-078	Health	UNICEF	NNGO
23-RR-CEF-078	Health	UNICEF	NNGO
23-RR-CEF-078	Health	UNICEF	INGO
23-RR-CEF-078	Water, Sanitation and Hygiene	UNICEF	NNGO
23-RR-CEF-078	Water, Sanitation and Hygiene	UNICEF	INGO
23-RR-CEF-078	Water, Sanitation and Hygiene	UNICEF	NNGO
23-RR-CEF-078	Water, Sanitation and Hygiene	UNICEF	NNGO
23-RR-CEF-078	Water, Sanitation and Hygiene	UNICEF	INGO
23-RR-CEF-078	Water, Sanitation and Hygiene	UNICEF	NNGO
23-RR-CEF-078	Child Protection	UNICEF	INGO
23-RR-CEF-078	Child Protection	UNICEF	NNGO
23-RR-CEF-078	Child Protection	UNICEF	INGO
23-RR-CEF-078	Food Security	WFP	NNGO
23-RR-CEF-078	Food Security	WFP	NNGO
23-RR-CEF-079	Food Security	WFP	NNGO
23-RR-CEF-080	Food Security	WFP	NNGO
23-RR-CEF-081	Food Security	WFP	INGO
23-RR-CEF-082	Food Security	WFP	INGO
23-RR-CEF-083	Food Security	WFP	NNGO
23-RR-CEF-084	Food Security	WFP	NNGO

23-RR-HCR-050	Camp Coordination and Camp Management	UNHCR	INGO
23-RR-HCR-050	Protection	UNHCR	INGO
23-RR-HCR-050	Camp Coordination and Camp Management	UNHCR	INGO
23-RR-HCR-050	Protection	UNHCR	INGO
23-RR-HCR-050	Multi-Purpose Cash	UNHCR	NNGO
23-RR-HCR-050	Protection	UNHCR	NNGO
23-RR-HCR-050	Multi-Purpose Cash	UNHCR	NNGO
23-RR-HCR-050	Shelter and Non-Food Items	UNHCR	NNGO
23-RR-HCR-050	Protection	UNHCR	NNGO
23-RR-HCR-050	Multi-Purpose Cash	UNHCR	NNGO
23-RR-HCR-050	Protection	UNHCR	NNGO