

EXTENDED DEADLINE: Tuesday, 8 June 2021 (09:00am Yangon time)

Background

This document provides an addendum to the Myanmar Humanitarian Fund (MHF) [First Standard Allocation \(2021-SA1\)](#), launched on 12 May 2021. Through this addendum, the MHF will make additional **US\$0.35 million** available to support immediate multi-sector life-saving response in benefit of displaced people and other vulnerable people in **Mindat township, in the south-eastern part of Chin State**,¹ affected by the ongoing armed conflict between the Myanmar Armed Forces (MAF) and the Chinland Defense Forces (CDF). COVID-19 related actions will be mainstreamed throughout the response to the humanitarian needs.

Allocation Breakdown *(Updated)*

Indicative Envelopes ²	Priority	TOTAL US\$ million	Chin	Rakhine	Kachin	Shan	South-East
EiE	1	1.50		0.55	0.70	0.10	0.15
WASH	1	1.75	0.05	0.65	0.50	0.20	0.35
Shelter/NFI/CCCM	1	1.75	0.10	0.70	0.70		0.25
Protection	2	1.50	0.15	0.45	0.55	0.25	0.10
Nutrition	2	1.00		0.45	0.25	0.20	0.10
Health	3	1.00	0.05	0.50	0.30	0.10	0.05
Food Security	3	1.50		0.50	0.50		0.50
<i>Multi-sectoral response</i>	-	<i>0.35</i>	<i>0.35</i>				
TOTAL		10.35	0.70	3.80	3.50	0.85	1.50

Section 1: Humanitarian Situation

The humanitarian situation in the south-eastern part of Chin State has deteriorated since late April 2021, particularly in Mindat township. Hostilities between the MAF and the CDF, formed by local fighters armed with makeshift weapons, have escalated in Mindat Town on 12 May, with the MAF deploying heavy artillery, military helicopters and additional troops to the area since. On 14 May, the MAF imposed martial law in the town of about 25,000 people (2014 data). Reports of violence, including indiscriminate attacks on civilians and infrastructure continue to date. This is the second wave of fighting in Mindat, after the first armed clashes on 24 April over reported arrests of local residents. Mobile connection is reportedly not working in the town and surrounding areas. According to media reports, since 12 May at least 5 civilians have been killed, 10 injured, and an unidentified number of people detained, with reports indicating cases of women and girls sexually assaulted. This is in addition to a number of houses and other civilian properties damaged or destroyed. As per available information, the MAF has occupied hospitals, banks, government offices, some (private) residences and schools, according to operational partners. As of 19 May, most of the town remains without electricity, while the water supply, which was reportedly suspended on the night of 18 May, was restored by 20 May.

¹ It may include the caseload of conflict-affected people in other townships in Chin State, i.e. Kanpetlet.

² Funding envelopes are only indicative and will depend on the quality of the proposals submitted by partners, the recommendations made by the MHF Review Committee, the comments provided by the MHF Advisory Board and the final decision of the HC.

Exact figures on this internal displacement are difficult to verify, with varying reports by operational partners and public sources. According to a local NGO, approximately 7,520 people (1,653 families) have been internally displaced: they have been staying in at least 13 displacement sites and/or host communities since 12 May. This figure, however, does not take into account the high number of persons who had reportedly fled to the forest and mountainous areas since 12 May. Other sources, including media, indicate that as many as 70 per cent of the town population have fled since 12 May. Those fleeing are reportedly men of fighting-age, leaving behind the elderly, people with disabilities, women and children. Another operational partner reported a lower figure of 1,500 people who had fled as of 17 May. Some sources also reported about 1,000 people displaced from neighboring Kanpetlet Town.

The humanitarian situation in Mindat is reportedly challenging, with most shops closed and limited supplies. According to operational partners on the ground, people remaining in Mindat urgently needed access to medicine including first aid, shelter and drinking water. Amidst reports of sexual violence and occupation of civilian infrastructure as well as increased presence of troops in the town, protection needs may be significant. The needs of people who are internally displaced in sites and/or staying with host communities include food, essential medicines, access to water and temporary shelter materials, such as tarpaulins. People who have been displaced and were still reportedly hiding in forests and mountains, would most certainly need shelter, food, water, hygiene kits, first aid and access to medical care. Protection services, including GBV and psychological support, should also be provided to them as well as those residents still present in Mindat.

Access and insecurity are the two main challenges, with access to Mindat town only possible via two roads, where MAF has been reportedly blocking entry into Mindat, with heavy presence. This area was not covered by the 2021 Humanitarian Response Plan and a limited number of operational partners who were already present in Mindat are currently facing challenges assessing needs and providing response, both in the town and in displacement sites. There are also reports that a number of staff working with partners present on the ground have gone into hiding because of the insecurity and possible reprisals. Mobile connectivity is another major operational challenge: as mobile connection is reportedly not operational at the moment, thus preventing communication with the displaced people and receipt/verification of information.

Section 2: Strategic Statement

In view of the critical humanitarian needs and ongoing, this addendum to the MHF First Standard Allocation (2021-SA21) is launched to expedite additional resources in support of an immediate multi-sector life-saving response in benefit of displaced people and other vulnerable crisis-affected people in Mindat township, in the south-eastern part of Chin State.

The MHF will safeguard the most effective use of limited funds by ensuring that the most immediate needs are addressed by funding the top priority activities in the most affected areas; taking into consideration other sources of funding and reprogrammed activities; ensuring timely response through an integrated and simultaneous strategic prioritization and technical review, which will shorten the time required to identify priority activities and areas of implementation; and assuring the greatest accountability and value-for-money for limited funds available through decreasing overheads and costs of subcontracting and applying the MHF Accountability and Risk Management Framework.

Section 3: Cluster/Sector Breakdown and Priorities

4.1 Cluster/Sector Breakdown *(Updated)*

Cluster / Sector	Priority	TOTAL US\$ million	Targeted People ³		
			HRP 2021	Additional needs	Total
EiE	1	1.50	24,160	6,180	30,340
WASH	1	1.75	82,344	29,000	111,344
Shelter/NFI/CCCM	1	1.75	80,300	12,000	92,300
Protection	2	1.50	79,000	12,600	91,600
Nutrition	2	1.00	51,569	4,079	55,648
Health	3	1.00	267,969	9,517	277,486
Food Security	3	1.50	45,000	30,000	75,000
Multi-sector response	-	0.35	-	5,000	5,000
TOTAL		10.35	278,228	39,116	317,344

4.2 Cluster/Sector Priorities

Regarding the emergency response in Mindat township, as population movement is still ongoing and needs are being identified, the MHF suggest a multi-sector life-saving response.

Multi-sector response

Displacement from armed conflict is growing and necessitates support in key sectors. The needs of people who are internally displaced in sites and/or staying with host communities include food, essential medicines, access to water and temporary shelter materials, such as tarpaulins. food assistance, health support including first aid, emergency shelter and drinking water. People who have been displaced and were still reportedly hiding in forests and mountains, would most certainly need shelter, food, water, hygiene kits, first aid and access to medical care. As indicated below, reports of sexual violence and occupation of civilian infrastructure as well as increased presence of troops in the town, protection needs may be significant. Protection services, including GBV, child protection and psychological support, should also be provided to them as well as those residents still present in Mindat town and other affected areas. Other urgent needs may be added, as per ongoing needs assessments.

Section 4: Process and Timeline

4.1 Allocation Strategy Development Process:

This addendum has been consolidated on 21 May 2021 with the support of operational partners, clusters and sectors and the MHF Advisory Board, under the leadership of the Humanitarian Coordinator a.i.

According to the feedback provided by partners during the project design workshop conducted on 17-18 May (English and Myanmar sessions), and considering the additional envelope in Chin, the MHF will extend the deadline of project submission up to **8 June (09.00am Yangon time)**. **This applies to all the proposals.**

Proposals covering these additional needs in Chin can be submitted under a single project proposal covering other targeted needs in Chin State, i.e. in Paletwa Township, but should be submitted separately from other States, including Rakhine. Applicant organizations should demonstrate actual capacity, presence and access to the people in needs. **Implementation period of life-saving activities targeting the additional needs included in this Addendum and in the initial First Standard Allocation Strategy is limited to 6 months.**

³ As the estimation for the situation in Mindat Township (Chin State) is very difficult at this point, this figure will be revised during the project selection as per submitted proposals.

4.2 Allocation Timeline *(Updated)*

Phase	Step	What	Who	Key Date
Preparation	1. HC endorsement of the concept note	Concept paper	HC	21 April 2021
	2. Development of the draft of the allocation strategy	Allocation Strategy	OCHA Clusters/Sectors	21 April - 5 May 2021
	3. Comments from the Advisory Board and HC endorsement of the allocation strategy	Allocation Strategy	Advisory Board HC	6 May - 10 May 2021
	4. Launch of allocation strategy	Allocation Strategy	OCHA	12 May 2021
Addendum	5. Preparation of addendum	Addendum	OCHA Cluster/Sector Advisory Board	19-21 May 2021
Proposal Development	6. Proposal submission deadline	Proposal preparation	Partners	8 June 2021
Proposal Review	7. Strategic, technical and financial review	Project prioritization Proposal review	Review Committee OCHA	15 June 2021
	8. HC/Advisory Board proposals endorsement	AB comments and HC endorses project prioritization	HC AB	21 June 2021
	9. Proposal revision and adjustments	Partners address feedback	Partners OCHA	28 June 2021
Approval	10. Final budget clearance	OCHA final clearance	OCHA HQ	29 June 2021
	11. Project start date	Project implementation	Partners	1 July 2021 <i>(if pre-financed, as soon as budget is cleared by OCHA HQ)</i>
	12. Grant Agreement preparation and signature	GA prepared/start date agreed with partner and signature	OCHA HC Partners	1-2 July 2021
Disbursement	13. Grant Agreement final clearance	GA cleared and signed	OCHA	8 July 2021
	13. First disbursement	Payment request processed	OCHA	15 July 2021

Section 5: Contacts and Complaints

5.1 Key Contacts



MHF

MHF-Myanmar@un.org
www.unocha.org/Myanmar/about-MHF

5.2 Complaints Mechanism

MHF implementing partners with insufficiently addressed concerns or complaints regarding MHF processes or decisions can at any point in time send an email to MHFComplaints@un.org. Communications can also include reports on fraud and malfeasance. Complaints will be compiled, reviewed and raised to the HC, who will then take a decision on necessary action(s). When relevant, the HC will share with the Advisory Board any concerns or complaints and actions taken thereof.

Section 6: Annex 1 (Prioritization Matrix)

MHF 2021-SA1		CHIN STATE		
Sector	Priority activities ⁴	Target	Townships	Envelope
Multi-sector emergency response	<ul style="list-style-type: none"> • Education in emergencies: provision of teaching and learning materials; child-friendly spaces. • Food security: emergency food and cash assistance; livelihood support is required for displaced population and other affected population in the areas. • Health: primary health care, including first aid, mental health and psychosocial support, immunization support and obstetric care; through mobile clinics and medical supplies; emergency referrals, including for obstetric care. • Nutrition: nutrition prevention activities; screening of children under-five and pregnant and breastfeeding women for acute malnutrition, referral and follow-up. • Protection: protection monitoring; gender-based violence response, case management psycho-social support and life skills; child protection activities; support for inclusive services ensuring accessibility and meaningful participation for vulnerable or excluded populations (especially elderly and persons with disabilities); psychosocial support; mine risk education related activities. • Shelter/NFI/CCCM: provision of shelter kits with assistance and NFI kits (including winterization). • WASH: provision of drinking water; gender-/child-/disability-friendly segregated latrines and bathing stations; hand-washing stations; water supply; hygiene kits, including COVID-19 kits and menstrual hygiene management (MHM) kits; hygiene promotion, including COVID-19 risk communication. 	<p>5,000 people</p> <p><i>displaced and other crisis-affected people (additional needs)</i></p>	Mindat	<p>\$350,000</p> <p><i>(additional to the existing envelope for Paletwa Township)</i></p>

⁴ This is only a summary of key activities, which may be modified according to the needs assessments and justification provided by the applicant organizations, in agreement with the technical advice of clusters and sectors. COVID-19 related actions should be mainstreamed throughout the response to the humanitarian needs, as well as other cross-cutting issues, including conflict sensitivity and social cohesion.