

CYCLONE MOCHA FLASH APPEAL

MYANMAR

ISSUED
MAY 2023



At a Glance

3.4M

PEOPLE LIVING IN HIGHEST IMPACT ZONE*

1.1M + **500K** = **1.6M**

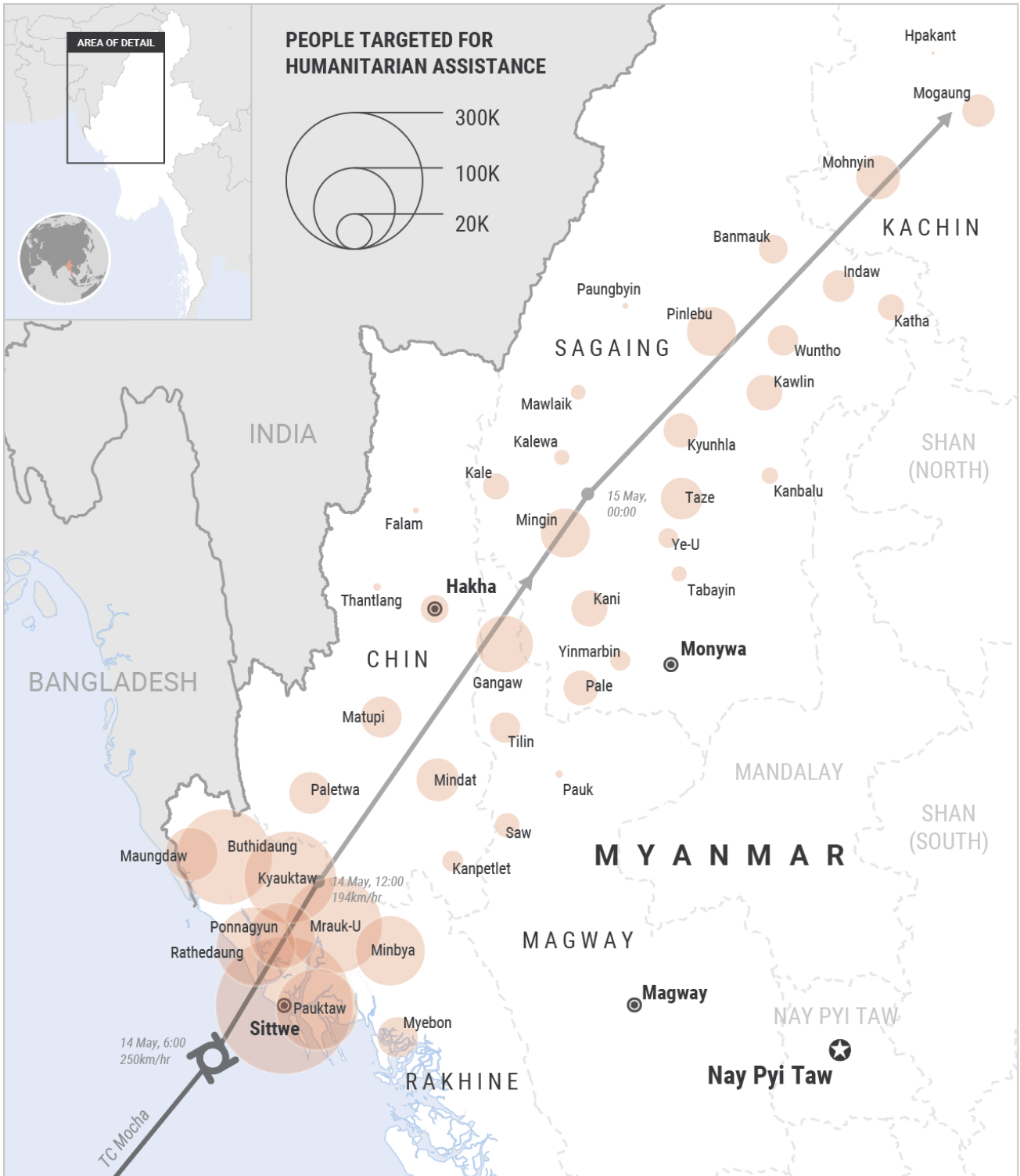
PEOPLE ALREADY TARGETED UNDER 2023 HRP

NEW/ADDITIONAL CASELOAD

TOTAL PEOPLE TARGETED FOR CYCLONE RESPONSE

55% FEMALE





18% CHILDREN UNDER 18



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.
 * Total number of people in >120 km/h wind speed zones

Data sources: GDACS, JTWC, Humanitarian partners

Response Summary

	PEOPLE TARGETED FOR THE CYCLONE RESPONSE			TOTAL REQUIREMENTS (US\$)		
	PEOPLE ALREADY TARGETED UNDER 2023 HRP	NEW/ ADDITIONAL CASELOAD	TOTAL PEOPLE TARGETED FOR CYCLONE RESPONSE	ALREADY COSTED IN HRP 2023	ADDITIONAL REQUIREMENTS	TOTAL RESPONSE REQUIREMENT
 EDUCATION	339K	163K	502K	22.0M	6.5M	28.6M
 FOOD SECURITY	534K	500K	1M	48.6M	26.1M	74.6M
 HEALTH	252K	177K	429K	11.6M	11.5M	23.1M
 NUTRITION	104K	41K	104K	8.4M	4.3M	12.7M
 PROTECTION	800K	351K	1.2M	47.2M	20.7M	67.9M
 SHELTER/ NFI/CCCM	390K	267K	657K	35.1M	36.1M	71.2M
 WASH	549K	262K	549K	37.9M	15.2M	53.1M
 COORDINATION & COMMON SERVICES					2M	2M
	1.1M	+ 500K	= 1.6M	211M	+ 122M	= \$333M
	PEOPLE ALREADY TARGETED UNDER 2023 HRP	NEW/ADDITIONAL CASELOAD	TOTAL PEOPLE TARGETED FOR CYCLONE RESPONSE	ALREADY COSTED IN HRP 2023	ADDITIONAL REQUIREMENTS	TOTAL RESPONSE REQUIREMENT

In response to Cyclone Mocha, the Nutrition and WASH Clusters will be targeting a subset of their existing HRP caseload with new activities. The total Flash Appeal caseload for both clusters will therefore be equal to the existing HRP caseload but those targeted will receive additional support

This document is consolidated by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) on behalf of the Humanitarian Country Team and its partners. It covers the period from May to December 2023 and was issued on 23 May 2023.

The boundaries and names shown and the designations used on this document do not imply official endorsement or acceptance by the United Nations.

Cover photo: A man repairing his cyclone-affected house in Rathedaung, Rakhine.

Credit: UNOCHA/Pierre Lorioux/2023



*Flooded houses in Salin, Magway region.
Credit: Partner /2023*

Situation Overview

This multi-sectoral Flash Appeal targets approximately 1.6 million people affected by cyclone Mocha and its aftermath across five areas of Myanmar – Rakhine, Chin, Sagaing, Magway and Kachin. A total of US\$333 million is urgently required for this response plan to address needs in areas in all communities affected by the cyclone and its aftermath.

The cyclone and the flooding that followed hit an area of high pre-existing vulnerability, with large numbers of displaced, returned, stateless and crisis-affected people, who were already targeted for support under the existing 2023 Humanitarian Response Plan (HRP). Thus, the financial requirement for this Flash Appeal includes some activities originally costed under the 2023 HRP that can now be

pivoted to support people affected by the cyclone. It also identifies completely new or scaled-up activities that will support the cyclone response to the existing HRP target populations, as well as costing support to entirely new people with needs as a result of the disaster across all communities.

Communities and humanitarian responders are now in a race against time to implement the response outlined with the monsoon imminent and hundreds of thousands of people either homeless or living in damaged shelters with limited access to clean water. A dramatic scale-up of funding is imperative to support the activities outlined given the scale of the disaster and the dire existing funding gap for the HRP (10 per cent funded). The day before the cyclone, the Humanitarian Coordinator initiated a \$2m Reserve

Allocation under the Myanmar Humanitarian Fund to kick-start procurement of supplies and cash responses to affected people. On 18 May, the Emergency Relief Coordinator also approved a \$10m allocation under the Central Emergency Response Fund (CERF) Rapid Response window to support the Humanitarian Country Team to expand operations. However, much more support is needed to deliver a disaster response at-scale.

This plan outlines immediate responses to be implemented during the initial months after the cyclone. The HCT may decide to revise this appeal once more information becomes available or may choose to fold these activities into a wider HRP revision at a later date.

Context and Needs Overview

Extremely Severe Cyclone Mocha hit Myanmar's Rakhine with brutal force on 14 May. One of the strongest cyclones ever recorded in Myanmar, the eye made landfall between Cox's Bazaar and Kyaukpyu township, approaching the coast with maximum sustained winds of around 250 km/h and wind gusts of up to 305 km/h, before continuing inland and impacting communities with heavy rain and winds on 15 May. This appeal addresses needs generated by the cyclone and its aftermath in communities across five states and regions – Rakhine, Chin, Sagaing, Magway and Kachin.

An estimated 7.9 million people live in areas that experienced winds in excess of 90kmph during the cyclone. Of these, 3.4 million faced very destructive winds of more than 120 kmph, placing them at very high risk given the poor shelters in these locations and their pre-existing vulnerabilities.

Heavy rainfall, storm surge and strong winds associated with the cyclone caused widespread damage across affected locations, including flooding in low-lying areas of Rakhine, particularly in and around the state capital, Sittwe, as well as the townships of Kyauktaw, Maungdaw, Pauktaw, Ponnagyun, and Rathedaung. Almost all buildings in Sittwe and Rathedaung have suffered damage, leaving hundreds of thousands of people either homeless or living in damaged houses. Significant damage has been suffered by displacement camps, where long houses were left in splinters and access

bridges have been washed away. Extensive areas of farming land and coastal areas have been affected, with severe losses of assets that are crucial for the agriculture and fishery sectors. The destruction of the local fishing fleet and heavy loss of agricultural inputs will have serious implications on livelihoods and are likely to see the adoption of negative coping strategies in the months ahead.

As the weather system moved inland into the country's Northwest and Northeast, continuous heavy rain caused flooding in townships in Magway where the Ayeyarwady River overflowed. In Chin, houses were reportedly damaged or destroyed. In Magway and Sagaing, floodwaters reportedly damaged infrastructure and agricultural fields and washed away livestock and personal belongings. Later, in Waingmaw Township in Kachin, shelters were damaged in Shanjai, which is home to more than 1,000 displaced people, as well as in the Maga Yang/Sha It Yang, Hka Shau, and Pajau/Janmai displacement camps

Significant damage has been reported to public infrastructure in all affected areas, including hospitals, health centres, banks, schools, bridges, and religious buildings. Water systems, sanitation facilities, water supply infrastructure and latrines have also been affected, reducing access to safe drinking water and basic hygiene services, and increasing the risk of outbreaks of water-borne disease.

Although most markets have re-opened, the soaring prices of basic shelter materials needed for rebuilding, including tarpaulins, metal sheeting, and nails, has made this task unaffordable for most affected people in these very impoverished parts of the country. Food costs have also spiked in many locations, putting a strain on households that were already living on the edge of survival. For example, the price of one kilogram of rice in Mrauk-U township has increased from MMK 1,300 (\$0.62) before the cyclone to MMK 1,500 (\$0.71) one week after the disaster.

Even prior to the cyclone, the affected areas were characterized by heavy humanitarian needs resulting from years of conflict, displacement, statelessness, COVID-19, and economic instability. This new disaster has now added a devastating new

dimension to the humanitarian situation facing people in the country's west.

Preparedness and early response

The Myanmar Humanitarian Emergency Response Preparedness Plan was activated at the national and sub-national levels ahead of the cyclone making landfall. Humanitarian organisations ramped up their preparedness efforts, pre-positioned personnel and supplies wherever possible, and disseminated safety messages to affected areas.

Since the cyclone hit, humanitarian personnel have been working to gauge the full impact of the disaster on affected people through a series of field missions and early support where they had permission to start distributions particularly of food, non-food items (NFIs), shelter and hygiene items. Based on discussions in Nay Pyi Taw, a detailed two-week distribution plan will soon be shared for approval, outlining further support that is ready to be provided to across all affected communities in Rakhine and Chin. Efforts are also underway to move more supplies to the impact zone from both Yangon and various locations outside the country.

The national Natural Disaster Management Committee was activated in Nay Pyi Taw before the

cyclone and local authorities carried out evacuations in high-risk areas. In areas under the control of the State Administration Council (SAC), local authorities deployed personnel to start initiating debris clearance, restore communications and begin distributions.

The ASEAN Centre for Humanitarian Assistance (AHA) deployed staff to support the Emergency Operations Centre in Nay Pyi Taw before the cyclone hit. A 14 member ASEAN Emergency Response and Assessment Team (ERAT) has been deployed to Rakhine to support the response by the Department of Disaster Management (DDM). The first three plane loads of AHA shelter supplies arrived in Myanmar on 21 May and were handed over to DDM for distribution in affected areas. OCHA continues to coordinate closely with AHA on the response.

In areas outside SAC control, various ethnic and resistance groups have been measuring the impact in affected communities and delivering assistance to the extent of their resources and access.

Civil society organizations and religious networks are working to support affected communities.

Communities themselves have also swung into action, clearing debris from blocked roads, and providing shelter to those who have lost their homes.

*A local resident cleaning up extensive damage to his shop caused by Cyclone Mocha. Sittwe, Rakhine.
Credit: UNICEF/Naing Linn Soe/2023*



Strategic Objectives

The overall strategy of this response is to prioritise immediate, lifesaving assistance to people affected by the cyclone and its aftermath in Rakhine, Chin, Sagaing, Magway and Kachin, in alignment with the broad strategic objectives and approaches elaborated in the 2023 HRP. Specifically, this Flash Appeal aims to deliver assistance to all affected communities and ensure that:



Protection risks and needs of cyclone-affected people are identified, monitored, mitigated, and met, while the centrality of protection is upheld across the humanitarian response including through promotion of respect for human rights, international humanitarian law and humanitarian principles.



Suffering, morbidity, and mortality is prevented or reduced through the provision of critical humanitarian assistance to cyclone-affected people, prioritising those who are most vulnerable.



Cyclone-affected people have safe, tailored, timely and dignified access to the essential services and support to ensure their survival and prevent deterioration of their humanitarian situation.

This Appeal builds on the response approaches articulated in the HRP, outlining a prioritized and integrated immediate response with built-in agility to enable the delivery of assistance in challenging circumstances and adjust to the changing needs of a fast-moving emergency.

Given the high underlying vulnerabilities of the affected communities, additional requirements have been identified across all sectors but shelter, food security, water and sanitation and protection have emerged as critical priorities requiring the most urgent action. The plan also includes enabling activities that would help facilitate the humanitarian response and people's access to services including debris clearance and bridge repairs in critical locations.

With detailed analysis of new needs still under development, the Inter-Cluster Coordination Group (ICCG) has relied on a combined impact and vulnerability analysis to develop its targets. This plan provides support to people living in the most severe impact zone of 120kmph and above and prioritizes assistance to those facing the highest risks within this area based on the weakness of their shelter, levels of food insecurity, poverty measures and other vulnerability criteria. These targets may be further finetuned during the coming months as needs become clearer and resources are mobilized, requiring either this plan to be updated or the HRP to be revised.

Response Approach

Logistics and access

Access challenges are well articulated in the 2023 HRP and are characterized by movement restrictions, roadblocks by all parties, intensified hostilities, complex and restrictive bureaucratic processes for travel authorization, visa delays, banking issues and interference in humanitarian activities by armed actors. As mentioned above, humanitarians are discussing detailed distribution plans with Nay Pyi Taw, pending formal approval.

The cyclone has now added an additional layer of complexity to the access and operational environment. Telecommunications were cut in the initial days following the cyclone and remain patchy a week after the disaster, while Sittwe airport and many roads were inaccessible and have been badly damaged affecting the size of aircraft and vehicles that can access the impact zone. Physical access is in the process of being restored, but severe damage to infrastructure – which was already limited in many areas – means that reaching remote communities remains challenging. Humanitarian actors are exploring all possible routes to reach affected people and are engaging with all relevant actors to expand safe and secure access to those in need.

Centrality of Protection

Efforts will continue to operationalize the Centrality of Protection in humanitarian programming throughout the cyclone response, noting that the risks of protection violations often increase in post-disaster settings as people become more acutely vulnerable, exhaust coping strategies, and face displacement and homelessness. This response will also adhere to the commitments to Protection from Sexual Exploitation and Abuse (PSEA) and Accountability to Affected People (AAP) described in the 2023 HRP. Explosive Ordnance Risk Education (EORE) continues to be mainstreamed across the response.

This will be done through protection monitoring with the different clusters and humanitarian actors. The

Protection Cluster together with the Child Protection and Gender-Based Violence (GBV) Areas of Responsibility (AoR) and partners will continue to strengthen protection monitoring to safely collect and verify information, to analyse protection trends, and to identify violations of rights and protection risks faced by all cyclone-affected people.

Specific needs of persons with disabilities, the elderly, women, girls, boys will be considered in the design and provision of assistance. Other groups prioritized for targeted and specialised support include people without shelter or living in poor shelter conditions, female-and child- headed households, GBV survivors, persons with diverse sexual orientation and gender identities, people belonging to different ethnic groups, unaccompanied and separated children, and stateless people.

Relationship between this plan and the 2023 Humanitarian Response Plan for Myanmar

All cyclone-affected areas had been previously identified as having acute humanitarian needs in the 2023 HNO. However, the wide-ranging impact of the cyclone has likely deepened those needs and impacted on additional people over those already included.

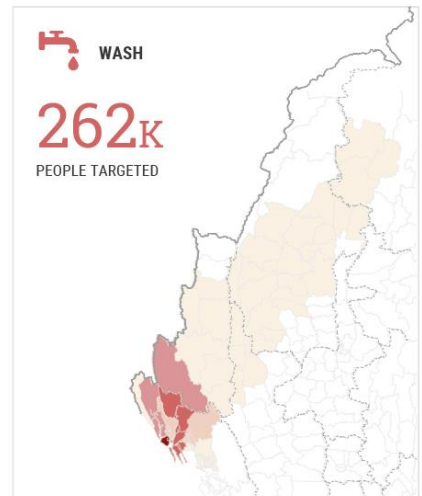
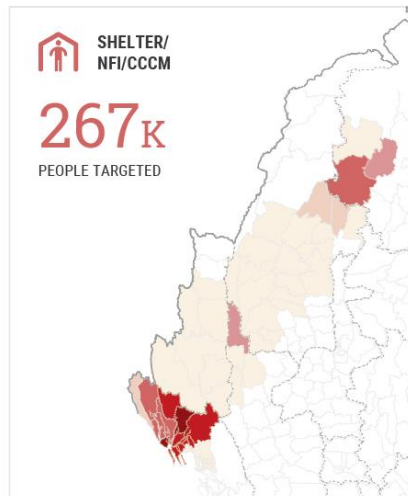
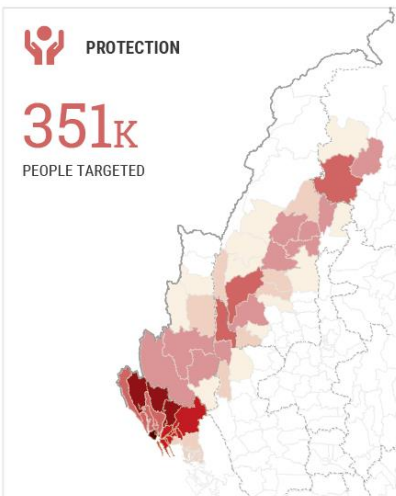
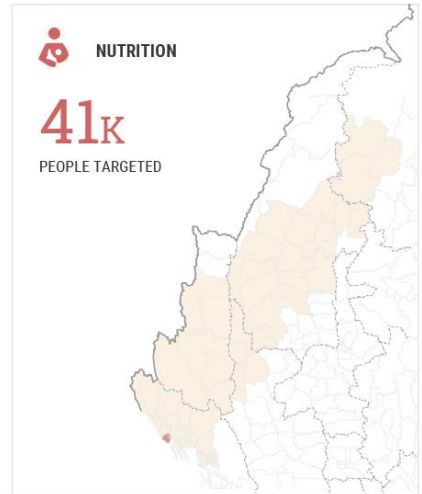
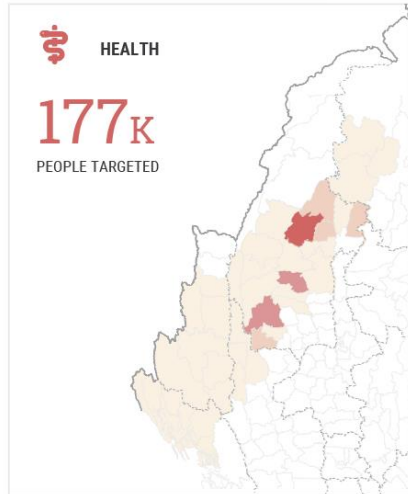
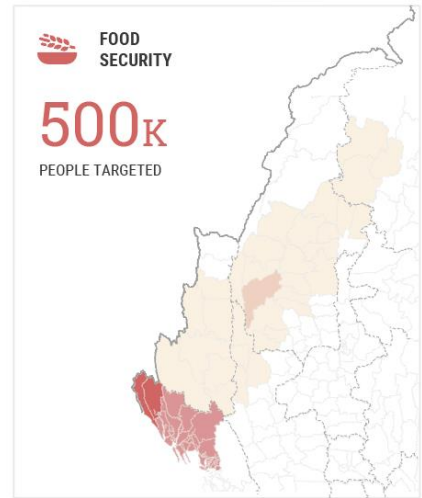
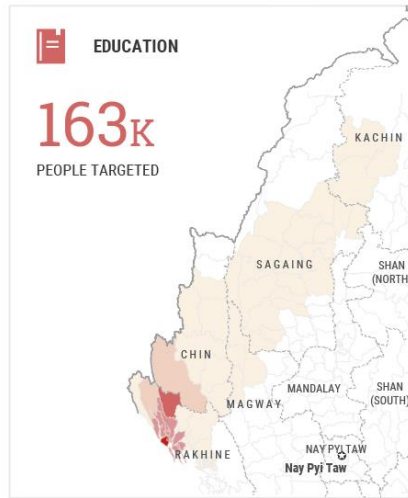
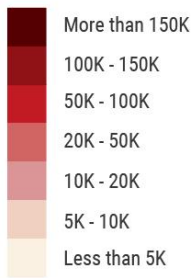
While the majority of people and activities were already included in the 2023 HRP in some form, activities within the appeal have been updated to include new caseloads and additional activities where appropriate.

Consequently, the additional requirements being added to the HRP for cyclone-affected areas are costed at \$122M, while \$211M is being re-programmed from within the HRP to better support cyclone-affected communities.

Donors able to provide new funding are encouraged to be in touch with OCHA and the ICCG for the latest updates on sector-specific gaps and priorities, and to consider channelling urgent funds through the Myanmar Humanitarian Fund (MHF) or bilaterally. Contributions to this plan can be recorded in FTS.

Response by Cluster

NEW/ADDITIONAL PEOPLE TARGETED FOR HUMANITARIAN ASSISTANCE BY CLUSTER



Education

Cluster Leads:
Save the Children, UNICEF

TOTAL PEOPLE TARGETED	% FEMALE	% CHILDREN (UNDER 18)	REQUIREMENTS (US\$)
502K	51	95	28.6M

Cluster impacts and needs

Schools and learning centres are among the infrastructure damaged and destroyed by strong winds and flooding in the aftermath of the storms. Damage and destruction to other community infrastructure such as churches and monasteries will also have ripple effects on education activities, as some have been used by communities for education purposes following the military takeover in February 2021. Given the high vulnerability of populations in these areas prior to Cyclone Mocha, families were already experiencing increasing difficulties in keeping their children in school, especially due to the ongoing insecurity and lack financial of capacity.

Implementation strategy

Areas most affected by the cyclone will be prioritized – i.e., those that experienced wind speeds of over 120 kmph – starting with Rakhine and then the Northwest. As the cyclone occurred during school holidays, immediately addressing damage to schools and learning centres to facilitate resumption of learning at the start of June is the priority. The types of activities and delivery modalities remain the same as those planned in the 2023 HRP. This means prioritizing restoration of basic education infrastructure including water and sanitation in schools, staffing learning centres, building capacity of community educators, and providing supplies and psychosocial support. Explosive ordnance risk education is also a priority to keep children and communities safe from unexploded ordnance in this period.

Destruction after Cyclone Mocha. Sittwe, Rakhine. Credit: UNOCHA/Suhad Sakalla/2023





Food Security

Cluster Leads:
FAO, Mercy Corps, WFP

TOTAL PEOPLE TARGETED	% FEMALE	% CHILDREN (UNDER 18)	REQUIREMENTS (US\$)
1M	53	36	74.6M

Cluster impacts and needs

Cyclone Mocha has structurally undermined food security by inducing losses of existing food stocks, agriculture inputs and assets for implementing income-generating activities (e.g., fishing material, small businesses), as well as reducing access to markets and increasing food prices. Women, girls, and marginalized groups such as stateless people and LGBTQIA+ people are especially vulnerable due to the increased risk of discrimination and abuse, including sexual abuse.

The impact on food stocks, production assets and crops mean that people’s food security status is at risk of dramatically deteriorating in the coming days. This may negatively impact long-term food security if an integrated food security response is not provided.

Implementation strategy

The overall objective of the Cluster response is to save lives and to support livelihoods of rural vulnerable flood-affected households through food, agriculture, livestock, and basic livelihoods assets/infrastructure support.

Recent analysis showed that households without productive assets are more severely affected by food insecurity, are more likely to apply emergency coping strategies, and experience greater difficulty recovering from food insecurity. Support to

livelihoods is critically needed to limit further deterioration of the food security status of affected populations. Fishermen affected by Cyclone Mocha will be included in the prioritization of livelihoods support needs, although this group is not targeted in the 2023 HRP.

Some 360,000 displaced people and other extremely vulnerable populations with limited income-generating opportunities were already entirely dependent on food assistance prior to Cyclone Mocha and are already included in the 2023 HRP. For this Flash Appeal, the Food Security Cluster is thus focusing on an additional 500,000 people in the worst-affected areas who are at risk of acute food insecurity due to the cyclone and have limited access to jobs or other opportunities to earn an income. Finally, nearly 10,000 people already covered by the 2023 HRP will require additional (expanded) support.

It is expected that a combination of in-kind and cash assistance is required, targeting the provision of full rations for three months depending on the severity of household needs. Procurement will be done locally as far as possible.

Cash for work is a key activity of the Cluster’s Mocha response as it helps boost the local economy, represents a source of income for the most affected people who lost everything, and it helps rebuild the community environment (road, markets, etc.) to reconnect to markets and access to services.

TOTAL PEOPLE TARGETED	% FEMALE	% CHILDREN (UNDER 18)	REQUIREMENTS (US\$)
429K	52	35	23.1M

Cluster impacts and needs

Most health facilities in Sittwe, including Sittwe General Hospital, have been damaged, resulting in shortages of medicines, medical supplies, and health staff, thereby seriously affecting health service delivery. Many laboratories and operating theatres are non-functional. Medical clinics in displacement camps are damaged. Thet Kal Pyin Station Hospital – a 16-bed hospital providing health services for stateless people in Sittwe – is functioning at half its capacity. Rural health centres, as well as camp and community clinics in the Northwest and Kachin have reportedly also been damaged.

The impact of the cyclone on health facilities, combined with the pre-existing heavily restricted access to health services pose significant challenges to people, exacerbating vulnerability among girls, boys, women and men in Rakhine, Chin, Magway, Sagaing and Kachin. Communities are also at heightened risk of waterborne and other communicable disease outbreaks, such as cholera, dengue, malaria, and measles, particularly given the imminent monsoon season.

Implementation strategy

The Health Cluster will work on restoring the availability of healthcare to the affected population prioritizing three activities in cyclone-affected areas that are also integrated in the existing HRP:

- delivery of primary healthcare service basic packages (including maternal, child and adolescent health; sexual and reproductive health (SRH); mental health and psychosocial support (MHPSS), particularly providing psychological first-aid; life-saving treatment for non-communicable and other

diseases; and health-related gender-based violence (GBV) services)

- primary healthcare service complementary packages (emergency healthcare including surgery and, trauma care, rehabilitation, and referrals)
- early detection and timely response to epidemic-prone diseases

Fixed and mobile clinics form a key part of the health response in Myanmar, both for the cyclone-specific response and under the 2023 HRP more broadly. Ninety clinics are mobilized in affected areas – 30 in Rakhine, 28 in the Northwest and 32 in Kachin. Even before the cyclone, the HRP identified a requirement of 165 mobile clinics to assist people in need who are displaced, returned, stateless or otherwise crisis-affected (59 in Rakhine, 51 in Kachin and 45 in the Northwest). A gap of 75 mobile clinics remains to implement critically needed basic and complementary healthcare service packages.

The Health Cluster will support the recovery of health services including damaged/destroyed health facilities, driven by the needs of affected people. Medicines, medical supplies, health services, and cash assistance will also be provided to health facilities and people in need, to address shortages and the disrupted supply chain. The health response will extend beyond the four groups identified under the 2023 HRP, to cover those directly affected while delivering health services to the most vulnerable people affected by Cyclone Mocha.



Cluster Lead:
UNICEF

TOTAL PEOPLE TARGETED	% FEMALE	% CHILDREN (UNDER 18)	REQUIREMENTS (US\$)
104K	71	58	12.7M

Cluster impacts and needs

The impact of Cyclone Mocha will deprive more children and pregnant and lactating women of access to timely and lifesaving nutrition treatment and support, contributing to increased morbidity and mortality. Only nine per cent of children requiring lifesaving therapeutic treatment were reached in the first quarter of 2023, with the provision of nutrition assistance severely hampered by access constraints, restrictive humanitarian space, displacement, and uncertainty around the importation of nutrition therapeutic products, alongside only 2.1 per cent of the Nutrition Cluster’s funding requirements being met prior to the cyclone.

Low funding and the restrictive operating space for humanitarians means that no recent, comprehensive analysis could be undertaken to establish the nutrition situation of children so far in 2023. However, anecdotal evidence from non-representative observations has shown increasing rates of severe acute malnutrition (SAM), with SAM admissions to date being double the 2022 admission figures for the same period. These and other factors suggest that nutrition support needs have markedly increased, requiring multi-faceted interventions. The addition of a new shock in areas with existing protracted nutrition support needs will further increase concerns around optimum infant and young child feeding (IYCF) practices not being applied and possible increased prominence of the use of breast milk substitutes.

Implementation strategy

The Nutrition Cluster is prioritizing the treatment of SAM and management of moderate acute malnourishment (MAM) cases in children, both of

which increase mortality risk if untreated. The Cluster is also focusing on preventative interventions such as the provision of micronutrient supplementation to children and pregnant and lactating women, as well as the provision of enriched foods and IYCF messaging to pregnant and lactating women. This will be implemented in the cyclone-affected areas alongside the continuation of other preventative complementary treatments. The cyclone will not significantly change the modality or overall programmatic approach for any target groups, except for complementary support for infants and lactating women.

In such emergencies, it is critical to continue protecting, promoting, and supporting the feeding and care of infants and young children through optimal breastfeeding. Caregivers, especially pregnant and postpartum women, cannot be neglected. Lapses can increase morbidity and mortality due to poor access to safe water, poor hygiene practices and poor access to diverse food. As such, focus will also be given to affected infants who cannot be breastfed. While breastfeeding is the safest way to feed an infant, especially during an emergency, this is not always possible, and management of non-breastfed children is vital. The emphasis will be on exploring the best available feeding options (re-lactation, wet nursing, or use of donor human milk from a human milk bank). In the absence of these safer options, as a last resort, infant formula, accompanied by an essential package of support will be provided as lifesaving – requiring expeditious mobilization of dedicated resources. Eligible children will be determined on a case-by-case basis through observations by qualified health/nutrition staff trained on IYCF-E. Such interventions must also be managed by these staff.



Cluster Leads:
NRC, UNFPA, UNHCR, UNICEF

TOTAL PEOPLE TARGETED	% FEMALE	% CHILDREN (UNDER 18)	REQUIREMENTS (US\$)
1.2M	53	35	67.9M

Cluster impacts and needs

The cyclone has exacerbated risks previously experienced by displaced and vulnerable people, causing deaths, injuries, loss of valuable documents, and damage and/or loss of property. Access to protection and other essential services (e.g., legal services) has been severely disrupted. The ongoing conflict, limited freedom of movement and communication breakdown compound these risks. Women, youth, and children face heightened risk of human trafficking, adoption of negative coping mechanisms, children engaging in child labour, and recruitment by parties to the conflict. The dignity and mental health of affected people has also been compromised due to a lack of immediate services and shelter overcrowding.

The destruction of protection facilities/spaces, shelters and latrines heightens the risk of sexual and gender-based violence (GBV) and psychosocial distress. It has compounded pre-existing risks, including forced displacement due to armed clashes, violence, targeted attacks, landmines and explosive remnants of war, as well as added to widespread fear around safety and security, including fear of sexual violence among women and girls.

Many affected people face significant access issues due to restricted freedom of movement leading to limited ability to utilize services including health, education as well as humanitarian assistance. Multiple factors, including conflict, widespread fear, risk of forced recruitment, and arbitrary arrest, have seriously impacted people’s ability to move and seek aid. Extortion remains a widespread protection concern in Rakhine and is increasingly becoming a concern in other states/regions.

Child Protection

The displacement of people due to the cyclone, including those who were already in displacement sites, exacerbates child protection concerns. Immediately following the disaster, children and their caregivers face psychosocial distress as well as possible separation of children from their caregivers, which creates a need for rapid reunification, psychological first aid and psychosocial support (PSS). Children may be left unsupervised, with increased risk of injury from playing or scavenging for saleable items in debris or floodwaters. Cases of children drowning have already been reported. Child protection risks are also expected to increase exponentially in the weeks and months following the disaster. Families often live in crowded conditions both in houses or displacement/evacuation sites, anxiety is heightened, schools are not accessible, and resources are diminished, often leading to the adoption of negative coping mechanisms including physical and emotional violence towards children. Child protection risks such as violence (including SGBV) both inside and outside the home, exploitation, child labour, child marriage, trafficking, dangerous onward movement, and other life-threatening activities are likely to increase over time. Children with disabilities and other marginalized children are also in heightened need of additional support.

Gender-Based Violence

Women and girls are particularly at risk following the impacts of Cyclone Mocha. Pregnant women have reduced access to health facilities, girls are more likely to miss out on schooling, and women and girls may resort to harmful coping mechanism to meet their basic needs. In Rakhine, most Women and Girls

Safe Spaces (WGSS) in displacement camps are severely affected by the cyclone, requiring restoration to provide GBV case management and PSS services. The cyclone also heightened pre-existing vulnerabilities through the loss of family members and livelihoods, as well as destruction of homes and infrastructure. In addition to material impacts, this could trigger or exacerbate the mental health conditions and may lead to increased social and economic tensions. Lack of privacy, limited supply of sanitary materials and lack of access to safe and hygienic sanitation facilities also negatively impact the ability to adequately manage menstruation and exposes women and girls to further discrimination.

Mine Action

Myanmar is believed to be one of the most mine-contaminated countries in the world. Landmine use by all sides in a range of conflicts over several decades is documented, and accident data also reflects high levels of contamination. The use of landmines and improvised explosive devices in Myanmar by parties to the conflict has grown exponentially in the past year. Whilst the picture of contamination remains unclear, data on mine incidents indicates that the presence of contamination is having a devastating impact on people's lives across the country. Recent data shows that the number of events and casualties reported in 2022 is the highest ever since the sector began recording incidents.

More than 60 per cent of the landmine incidents reported in the first quarter of 2023 are from areas recently affected by Cyclone Mocha and 90 per cent of the incidents reported were in red zones, where wind speeds of over 120 km/h were recorded. Landmine contamination surveys indicate that almost 300 villages have reported either confirmed or suspected hazardous areas. Flooding may induce the migration of landmines, turning formerly safe areas into locations that pose a threat to people's safety. People undertaking clean-up of debris caused by the cyclone, as well as children, are most at risk. Safety messaging is urgently needed to inform affected communities of the landmine risks. Mine Action AoR partners are already deployed in these areas, but with limited capacity. Funding to deploy additional

capacity can be utilised to scale up response quickly and meet the urgent needs.

Implementation strategy

The Protection Cluster will focus on protection monitoring and analysis using the Protection Incident Monitoring System, targeting the affected population to identify protection risks to the people, using the results to guide programming and advocacy.

The Cluster will:

- Provide support for access to legal documentation during the emergency phase, to facilitate affected people's access to services and ability to move and claim their rights.
- Provide targeted/specialised support for persons with specific needs, especially those with critical and urgent protection needs that cannot be catered for under any other case management system.
- Coordinate and utilise existing referral systems where necessary and possible.
- Provide emergency cash grants where appropriate and possible.
- Support community-based protection structures and community-led initiatives as part of the wider Community-Based Protection (CBP) and localization efforts.
- Engage in community awareness raising for prevention and mitigation of protection risks and Communication with Communities (CwC) activities on the pre-cyclone messaging.

Cluster members will (i) ensure the provision of legal aid services, including counselling and legal aid support, to affected people with protection concerns and in need of legal aid assistance; (ii) provide capacity-building support to humanitarian actors, service providers and community groups that support protection responses; and (iii) ensure effective communication support through remote means and mobile safe space operation.

For other crisis-affected people, the target has increased from 10 per cent previously targeted under the 2023 HRP to 40 per cent due to increased vulnerability. There will be intensified protection monitoring of the risks and devising of swift

programmatic modalities to address these to ensure that people do not fall further into vulnerability and face more serious protection risks. Access to civil documentation will also be emphasised.

Child Protection

The Child Protection AoR has revised its 2023 HRP activity groupings to meet the new needs of children and caregivers. Within case management, a range of essential services will be included, such as identification and referral of children in need, family tracing and reunification for separated and unaccompanied children, and support to alternative care arrangements. Child Protection actors will also scale up PSS for all children affected by the cyclone, including activities such as establishment of mobile and temporary child friendly spaces, group and individual PSS and messaging, while referring cases of mental health issues for specialized services. As many children have lost their essential belongings, Child Protection AoR partners will distribute child protection kits to meet children's basic needs.

Communities play a central role in the protection of children in terms of both prevention and response activities. The Child Protection AoR will prioritise supporting community mechanisms and continue to build on existing community capacity for child protection. Positive parenting and support for caregivers will be scaled up to mitigate against violence in the home and other negative coping mechanisms. All Child Protection AoR actors will adapt key messages and prevention activities to be more suitable for cyclone response, recognizing the ongoing needs that existed pre-cyclone. This will include awareness raising on issues such as recruitment into armed groups, safe migration, child marriage, child labour, dangers and injuries and child trafficking. The Child Protection AoR works closely with other clusters for integrated programming.

Gender-Based Violence

In order to address the lifesaving protection needs of women and girls, the GBV AoR and its partners will continue to provide sustained and adapted provision of quality multi-sectoral response services, including case management, MHPSS, health, legal assistance and temporary shelter or safe houses. Where mobility

and access to in-person services are limited, GBV partners will continue and/or expand remote service provision. More attention will be paid to strengthening inclusion and consideration of special needs and vulnerabilities of persons with disabilities, adolescents, ethnic minorities and persons with diverse sexual orientation and gender identities through analysis and targeted responses. To ensure timely response and referrals, the GBV AoR and its partners will regularly update service mappings and referral pathways in quickly changing operational environments. Dignity kit distributions, in addition to meeting people's immediate needs in relation to dignity and menstrual health, will be complemented by information sharing on GBV risk mitigation and available services.

As part of the GBV mitigation and prevention strategies, the GBV AoR will conduct community engagement and will promote women and girls' empowerment and safety, including through psychosocial support, GBV observations and GBV risk mitigation in coordination with other clusters and working groups. These interventions aim to reduce negative coping mechanisms arising from the devastating effects of the cyclone. Regular GBV safety audits and analysis will be conducted, including follow-up on recommendations to enhance a safe environment for women and girls through early identification of risks and advocacy with other humanitarian actors to mitigate such risks.

There is need to take a 'do no harm' approach to ensure that the distribution of relief and recovery does not exacerbate protection risks including violence, abuse, exploitation, and exclusion. The AoR will promote socially inclusive programming that ensures the participation of people living with disabilities in all aspects of relief and recovery planning, design, implementation, and monitoring.

Mine Action

The Mine Action AoR will implement activities related to the direct delivery of EORE in communities; dissemination of awareness raising material; social media messaging, including messaging on possible migration of landmines; and continuation of surveys in red zones. This will be complemented by activities focused on victim assistance.

TOTAL PEOPLE TARGETED	% FEMALE	% CHILDREN (UNDER 18)	REQUIREMENTS (US\$)
657K	53	36	71.2M

Cluster impacts and needs

Cyclone Mocha severely impacted the shelter conditions of communities and displaced people. The cyclone intensified the pre-existing situation of displaced people in Rakhine, Chin, Magway, Sagaing and Kachin, with the minimum capacity to meet their basic shelter needs. Inadequate shelter conditions, including lack of electricity and privacy in provisional accommodation and inappropriate WASH facilities also contribute to increased protection risks for women and girls.

Thousands of homes have been completely or partially destroyed across the five states/regions. Around 205 pre-existing displacement sites and camps in Rakhine have been severely damaged. The Cluster estimates that 1.6 million people are the most vulnerable and should receive shelter and NFI support, as well Camp Coordination and Camp Management (CCCM) assistance. Concurrently, Cyclone Mocha has compounded existing difficulties in Shelter and NFI service delivery, slowing down supply chains by increasing demand, reducing available stocks of shelter materials and NFIs, and increasing pressure on the supply of skilled and unskilled labour as well as fuel and transportation. Already prior to the cyclone, the cost of Shelter and

NFI service delivery increased by 40-45 per cent from 2022 to 2023 and this is only expected to worsen due to supply and demand issues.

Implementation strategy

The Shelter/NFI/CCCM Cluster will prioritize existing activities in the HRP, although scaling up to respond to the most vulnerable affected population living in the worse affected areas at planned and unplanned settlements, collective centres, host arrangements and other communities impacted by the cyclone.

The overall Cluster response will focus on lifesaving activities through shelter linked with protection to ensure health, safety, dignity, and privacy. The first line response will centre on the provision of emergency shelter support through kits (rapid response tarp kit, emergency shelter kits, and shelter toolkit), materials or cash, and distribution of essential NFIs (blankets, sleeping mats, mosquito nets, solar lamps, buckets, jerry cans, kitchen sets, and clothes kits), followed by shelter construction and reconstruction, and improving living conditions through site care and maintenance to internally displaced people, returnees, resettled, locally integrated, and stateless people and other impacted community in the five affected states/reg

²As per IFRC's Global Shelter Cluster convener role in natural disasters, IFRC will complement UNHCR's existing Cluster Lead role in Myanmar for the Cyclone Mocha response

Water, Sanitation and Hygiene (WASH)

Cluster Lead:
UNICEF

TOTAL PEOPLE TARGETED	% FEMALE	% CHILDREN (UNDER 18)	REQUIREMENTS (US\$)
549K	53	36	53.1M

Sector impacts and needs

Existing water, sanitation, and hygiene (WASH) infrastructure in the communities, camps and displacement sites affected by Cyclone Mocha was heavily impacted, including most latrine superstructures, water points, water tanks, handwashing facilities, and wastewater treatment units. The floods in the aftermath of the cyclone damaged available WASH items such as water filters and family hygiene kits for displaced families. Access to WASH facilities in temporary learning spaces and health facilities has been impacted. The shortage of supplies combined with increased demand has pushed up the price of WASH commodities and items in the local market. Water boating in camps was also halted due to the cyclone, and the electricity cuts have affected water supply in urban areas of Rakhine.

Most WASH activities have been negatively impacted by the cyclone, including access to safe water through water trucking, desludging of latrines, and access to gender-appropriate latrines, especially for populations with special needs. Most of the people in IDP camps were selected based on their vulnerability status. WASH interventions prior to the cyclone were already limited to basic and semi-permanent services in many response areas, with contamination of water resources and water scarcity in many areas affected by climate change and worsened by this latest disaster.

Implementation strategy

Existing 2023 HRP WASH Cluster activities will continue to be prioritized. However, these will be scaled up to respond to the enormous need to rehabilitate and restore damaged WASH infrastructures in camps and new displacement sites and support access to safe drinking water and sanitation for the wider affected population.

Initial indications are that 80 per cent of latrines in camps and new displacement sites were damaged by Cyclone Mocha. Many shallow wells and water ponds were contaminated with seawater, and most affected people do not have basic hygiene items. Many locations that were already stressed with insufficient safe water are further stressed throughout Chin, Kachin, Rakhine, and Sagaing.

The WASH Cluster will focus on the restoration of the semi-permanent WASH facilities and services that existed before the cyclone. This includes the rehabilitation of latrine and bathing facility superstructures, reinstallation of handwashing facilities, provision of consumables, provision of hygiene kits and water treatment items (e.g., water tablets and water filters), treating/repairing shallow wells, and water trucking and boating to water-insecure locations. The Cluster will also work closely with partners on the removal of debris from WASH facilities and wastewater drainage, focusing on environmental sanitation components in the camps and sites, including solid and liquid waste. Complementing these activities will be a focus on hygiene promotion, awareness raising about contamination and reprinting of the information, education, and communication (IEC) materials.

The overall programmatic approach set out in the 2023 HRP will continue, and the modalities will not change for any targeted group. The WASH Cluster will improve the current facilities and services through improvements to the quality of old and damaged superstructures. Where feasible, cash programming will be utilized, especially in hard-to-reach locations. More community voluntary participation will be prioritized in the rehabilitation and restoration of WASH facilities and services, including use of local materials.



Coordination & Common Services

Cluster Lead:
OCHA

REQUIREMENTS (US\$)

2M

Infrastructure repair to enable operations and access

Cyclone Mocha has had a major impact on critical infrastructure that is fundamental for communities' wellbeing and the economic resilience of affected areas, including water systems, roads, and bridges. The damage to physical infrastructure is also impeding the delivery of critical lifesaving support, as key networks of roads and bridges that serve as lifelines for vulnerable communities are disrupted.

It is also critical that debris removal and waste management operations take place immediately to remove hazardous materials that pose a risk to people's lives, health, and wellbeing, and to enable economic activity and access to and delivery of critical goods and services. Communities and partners have begun clearance of smaller debris and are providing cash-for-work to compensate small businesses that have lost their revenue streams, prioritizing women-owned businesses. This immediate and early assistance provides recipients with access to cash to buy essential items while supporting the local economy to recover.

Early recovery partners will prioritise the following emergency response activities in the first three months after the cyclone, thereby paving the way for medium- and longer-term recovery:

- Supporting emergency demolition, debris removal, waste segregation, recycling, and safe management, including supply of equipment that will reduce the volume of demolition waste, training personnel who will use the equipment and potential re-use/recycling of suitable waste material for reconstruction.
- Identifying the infrastructure that needs to be repaired to allow humanitarian supplies to

be delivered and undertake repair work. This includes bridge repair, and emergency repairs to community infrastructure, as identified with relevant communities.

Cross-cutting issues

Cash and Voucher Assistance (CVA) Programming

Prior to the cyclone, humanitarian partners were already implementing CVA to support internally displaced persons, stateless people, and crisis-affected people across Rakhine. Despite Cyclone Mocha causing significant damage in Rakhine, shops and markets are slowly reopening within just one week. Nonetheless, there are reports of significantly increased prices of rice within some markets, which will likely influence the selection of modality in some areas. With the guidance of the Myanmar Cash Working Group (CWG), humanitarian partners are actively assessing the functionality of markets in their targeted areas and evaluating the feasibility and suitability of utilising cash assistance, using common market observation tools. As the transportation infrastructure gradually reopens, markets are anticipated to improve and play a crucial role in the response efforts in the coming weeks and months.

The Myanmar CWG is coordinating the CVA response to Cyclone Mocha in Myanmar. The response efforts are supported by field observations, which aid in determining the priority needs of the affected communities and will help inform decision-making regarding the most appropriate modality of assistance. Additionally, the CWG is providing advice on Multi-Purpose Cash Assistance and CVA transfer values, leveraging the existing Survival Minimum Expenditure Basket (SMEB). Where markets are functioning, the CWG advises to select a modality

that will facilitate the strengthening and stability of these markets. These efforts support a CVA response that is appropriate for meeting the evolving needs of the cyclone-affected populations.

Accountability to Affected People

AAP is an active commitment by humanitarians to use power responsibly by taking account of, giving account to, and being held to account by the people we assist. By engaging with affected people, we can better understand the risks they face, their vulnerabilities, their strengths, their capacities for resilience, and their perspectives on the humanitarian response. The views of all community members should be considered holistically to ensure that the aid provided is appropriate, timely, and meets their needs in a dignified manner. In the aftermath of Cyclone Mocha, this means that all humanitarian actors will ensure that AAP is at the core of their emergency response.

To date, with support of the AAP Working Group, organizations have been developing and disseminating key messages to cyclone-affected people. These are context specific and have been translated into local languages. It is important that children, women, and men who have been impacted by the cyclone have access to relevant, timely and useful information in formats that are appropriate to their needs. This enables them to make informed decisions and learn more about the goods, services and supports being provided by humanitarian actors.

By sharing messages widely and through a range of platforms, organizations will increasingly be able to engage with newly affected people as well as those who have already been identified. As the cyclone response unfolds and more structured exchanges with affected people can take place, humanitarian organizations will be able to secure a more tailored and accountable response in addressing the actual needs of the people.

Disability Inclusion

Women, men, boys and girls with disabilities are often left behind during emergency responses, despite being amongst those with the most need. Cyclone Mocha has caused significant injuries and increased both the number of people needing short-

term support as well as the number of people needing longer-term support for permanent disabilities.

Whilst the needs are significant, the challenges to implementing a disability-inclusive response are severe. Many actors do not have the capacity to ensure inclusive humanitarian action and/or do not see inclusion as a priority in emergencies. Inclusive responses require additional effort and additional funding and must be prioritized to ensure that no-one is left behind.

During the planning and implementation of response activities, it is vital that humanitarian actors consult people with disabilities and tailor activities to ensure accessibility of information, assistance and services, and targeted activities where possible. During the emergency the Disability Technical Advisory Group will support partners to:

- Promote meaningful participation of persons with disabilities and their representative organizations
- Remove barriers to accessing humanitarian assistance and services and information about them, and provide reasonable accommodation wherever possible
- Respect the rights of persons with disabilities and ensure that they are protected from all forms of abuse, including sexual exploitation and abuse
- Empower persons with disabilities and support them to develop their capacities
- Disaggregate data for monitoring inclusion

The [IASC Disability Guidelines](#) elaborate on how these actions can be implemented.

Gender-sensitive response to Cyclone Mocha

The cyclone has exposed the already crisis-affected population to greater protection risks and vulnerabilities, including exacerbating those experienced by women and girls. Before the cyclone, many women and girls were able to generate some income through activities on top of their usual caregiving roles at home. These gains for women's active participation are now at risk due to the disruption caused by the cyclone, with many women and girls bearing the additional care burdens arising from the cyclone, such as caring for the injured.

Displacement and damage to infrastructure may result in women and girls having to go further to access basic items for themselves and their families, such as water or cooking fuel, or to queue for long periods for relief supplies including food. If the main breadwinner was killed or is missing following the cyclone, women will need to seek outside employment to support their family in addition to fulfilling their household tasks. Girls are more likely to be withdrawn from school to help around the household.

Globally, women and children are 14 times more likely than men to die when disaster strikes. Even when they survive, women and girls are at greater risk than men and boys to exploitation, violence, and abuse, brought on by overcrowded shelter conditions, additional burdens and stress, and a lack of social structures to support them. Specific needs of women and girls in terms of their hygiene and health, including menstrual health, may be overlooked but are equally important with other needs to ensure full inclusion of women and girls in response and recovery activities.

The Gender in Humanitarian Action Working Group (GiHA) will work to:

- Ensure gender-specific response and recovery needs are identified in post-disaster participatory analysis. The data must be gender-differentiated for a better analysis and response that meets the specific needs of women and girls.
- Ensure communications and information-sharing mechanisms are gender-responsive and create a space for both men and women

to contribute to the response and recovery process and discuss their priorities.

- Develop community participatory monitoring for activities that actively involves women and girls, as well as adequate complaints handling mechanisms, including sexual exploitation and abuse, for disaster recovery activities.
- Ensure women are part of any camp management and/or disaster management committees and are able to take a leading role in the response/recovery process
- Involve women in all response/recovery activities, including on any post-disaster livelihoods activities following a comprehensive gender analysis to mitigate any risks.

Prevention of Sexual Exploitation and Abuse

In emergencies, there is often a breakdown of the normal protective institutions and there are usually considerable practical and psychosocial implications for the lives of those affected, including lack of awareness by humanitarian workers and persons of concern about their rights, entitlements and responsibilities and the increased risks of sexual exploitation and abuse. The PSEA Network has thus initiated the following activities in response to Cyclone Mocha:

- Creation of PSEA messages in English and Burmese and subsequent translation into other local languages in the affected areas, to be shared widely amongst partners and communities.
- Distribution of PSEA IEC Materials and awareness raising activities on PSEA.

How to Contribute

Donating to the Cyclone Mocha Flash Appeal

Financial contributions to reputable aid agencies are among the most valuable and effective forms of response in humanitarian emergencies. Public and private sector donors are invited to contribute cash directly to aid organizations providing humanitarian response in Myanmar.

Guidance for doing so can be found here: [Business Brief: Humanitarian Overview and Call to Action](#)

Contributing through the Central Emergency Response Fund

The Central Emergency Response Fund (CERF) provides rapid initial funding for life-saving actions at the onset of emergencies and for poorly funded, essential humanitarian operations in protracted crises. The OCHA-managed CERF receives contributions from various donors – mainly governments, but also private companies, foundations, charities and individuals – which are combined into a single fund. This is used for crises anywhere in the world. Find out more about the CERF and how contribute:

<https://cerf.un.org>

Make an in-kind contribution of goods and services

While humanitarian aid is needed urgently, The United Nations urges companies to refrain from sending unsolicited donations that may not correspond to identified needs or meet international quality standards. Donors are highly encouraged to send cash rather than in-kind donations. Donations-in-kind

are useful when they meet a pre-identified need on the ground for which supply through other means (procurement, prepositioned stock) is not available. In other circumstances they may not fit needs, can potentially be administratively burdensome (placing demands on thinly stretched emergency personnel), and may undermine local markets (where local supply is available).

For any additional questions about in-kind donations, please reach out to OCHA with as much detail as possible, including what you wish to donate and how much, the estimated market value, your time frame for delivery, details on shipping and any other conditions. We will then guide you to the most appropriate recipient organization (s). Companies with employees, suppliers, or customers in the country or region, or those with existing agreements with responding humanitarian organizations should aim to provide support directly to these groups. For more information, please contact OCHA's Private Sector Engagement Advisor at ocha-ers-ps@un.org.

Registering and recognizing your contributions

We thank you in advance for your generosity in responding to this urgent request for support. OCHA manages the Financial Tracking Service (FTS), which records all reported humanitarian contributions (cash, in-kind, multilateral and bilateral) to emergencies. Its purpose is to give credit and visibility to donors for their generosity and to show the total amount of funding and expose gaps in humanitarian plans. Please report yours to FTS, either by email to fts@un.org or through the online contribution report form at: <https://fts.unocha.org>

Annex 1: Cluster Activities

The below tables provide an overview of activities and costing for the new caseloads.¹

Education

No.	Activity	Newly Targeted People					Activity Requirement (US\$)
		Total	IDPs	Returned, resettled and locally integrated IDPs	Non-displaced stateless people	Other crisis-affected people with hum. needs	
1	Equip learning spaces with appropriate supplies (e.g black boards, furniture, chalk, etc.)	163K	42K	0.7K	35K	85K	126K
2	Establish/ and or build capacity of education committees/PTAs to actively participate in education in their communities	163K	42K	0.7K	35K	85K	430K
3	Establish/rehabilitate TLSs that are accessible to all crisis affected children and youths (incl those with physical disabilities)	163K	42K	0.7K	35K	85K	378K
4	Provide age and context-appropriate menstrual hygiene and health management information sessions and materials/supplies (sanitary pads/napkins/towels) to adolescent girls in learning spaces	163K	42K	0.7K	35K	85K	727K
5	Provide cash and voucher assistance (based on feasibility)	163K	42K	0.7K	35K	85K	80K
6	Provide EiE relevant capacity building to volunteer and community educators (EiE, learner centered pedagogy, SEL, PSS, DRR, CP, Child safeguarding, etc.)	163K	42K	0.7K	35K	85K	506K
7	Provide inclusive age and context-appropriate, supplementary open learning materials/ resources to conflict and displacement-affected children and youth to support their education	163K	42K	0.7K	35K	85K	560K
8	Provide individual age/ task-appropriate, and inclusive learning materials/education supplies/ for use by learners and educators (learners and educators kits - note books, pencils, pens, back packs, uniforms/school clothing, etc.)	163K	42K	0.7K	35K	85K	840K
9	Provide/expand safe, relevant, accessible, quality and inclusive non formal education opportunities for all crisis and displacement affected children and youth (ECCD, and basic education)	163K	42K	0.7K	35K	85K	770K

¹ Click the link to access the detail list of activities and funding requirements for the HRP 2023 – [document link](#)

10	Provide/improve safe accessible context appropriate and gender segregated WASH facilities in learning spaces	163K	42K	0.7K	35K	85K	56K
11	Recruit and retain quality educators through provision of incentive payments for educators	163K	42K	0.7K	35K	85K	992K
12	Strengthen EiE response capacity of CSOs, NGOs, ethnic, monastic and local partners (incl MRE, PSEA, advocacy, coordination, resource mobilization, contingency plans, AAP, etc.)	163K	42K	0.7K	35K	85K	893K
13	Train educators and or parents/caregivers in effective use of supplementary learning materials	163K	42K	0.7K	35K	85K	162K
Education total							6.5M

Food Security

No.	Activity	Total	Targeted people			Activity Requirement (US\$)	
			IDPs	Returned, resettled and locally integrated IDPs	Non-displaced stateless people		Other crisis-affected people with hum. needs
1	Food assistance / MPCA (for IDPs) (S01) - New beneficiaries (cyclone MOCHA)	7K	7K			225K	
2	Food assistance / MPCA (for non IDPs) (S02) - New beneficiaries (cyclone MOCHA)	346K		6.5K	38K	301K	17.0M
3	Agriculture & livelihoods - MPCA (S03) - New beneficiaries (cyclone MOCHA)	147K				147K	7.1M
4	Food assistance / MPCA (for non IDPs) (S02) - HRP 2023 beneficiaries with specific cyclone MOCHA assistance	10K			10K		1.2M
5	Agriculture & livelihoods - MPCA (S03) - HRP 2023 beneficiaries with specific cyclone MOCHA assistance	10K			10K		556K
Food Security total							26.1M

Health

No.	Activity	Total	Targeted people			Other crisis-affected people with hum. needs	Activity Requirement (US\$)
			IDPs	Returned, resettled and locally integrated IDPs	Non-displaced stateless people		
1	Primary Health Services Basic Package including maternal, child and adolescent health, sexual and reproductive health, MHPSS, GBV-related health	177K	53K	1.3K	72K	51K	5.6M
2	Primary Health Services Complementary Package for surgery and trauma	53K	16K	0.4K	22K	15K	4.2M
3	Primary Health Services Complementary Package for rehabilitation services and provision of assistive devices for persons with injuries and different forms of impairments	25K	7K	0.2K	10K	7K	984K
4	Timely detection and coordinated response to notifications of outbreaks for epidemic-prone diseases	35K	11K	0.3K	14K	10K	703K
Health total							11.5M

Nutrition

No.	Activity	Total	Targeted people			Other crisis-affected people with hum. needs	Activity Requirement (US\$)
			IDPs	Returned, resettled and locally integrated IDPs	Non-displaced stateless people		
1	Boys and girls aged 6-59 months at risk of acute malnutrition in priority locations who received blanket supplementary feeding support programme	17K	13K	0.2K	2K	2K	1.5M
2	Children 6-59 months receiving multiple micronutrient powders	23K	14K	0.2K	4K	5K	250K
3	Children 6-59 months screened for wasting	21K	14K	0.2K	4.3K	3K	273K
4	Children aged 6-59 months with MAM admitted for treatment	7K	4K	0.05K	2K	1.5K	406K
5	Children aged 6-59 months with SAM admitted for treatment	2K	1.1K	0.01K	0.4K	0.2K	336K
6	PLW screened for malnutrition	16K	11K	0.1K	3K	2K	209K
7	PLW with MAM admitted for treatment	2K	1.2K	0.01K	0.3K	0.3K	161K

8	PLWs at risk of acute malnutrition in priority locations who received blanket supplementary feeding programme	14K	11K	0.1K	1.2K	1.4K	903K
9	Pregnant women receiving preventative Multiple Micro-nutrient tablet or iron-folic acid supplementation	18K	11K	0.1K	3K	4K	190K
10	Primary caregivers of children 0-23 months receiving IYCF counselling with BMS intervention	18K	11K	0.1K	3K	4K	95K
Nutrition							4.3M

Protection

No.	Activity	Total	Targeted people			Other crisis-affected people with hum. needs	Activity Requirement (US\$)
			IDPs	Returned, resettled and locally integrated IDPs	Non-displaced stateless people		
Protection							
1	General Protection: GP Provision of targeted/specialized support to persons with specific protection needs/risks	3K	0.8K	0.1K	0.5K	2K	150K
2	General Protection: Overall Community awareness raising for prevention and mitigation of protection risks	1.2M	311K	23K	207K	610K	23K
3	General Protection: Protection monitoring and assessments	197K	53K	4K	36K	105K	20K
4	General Protection: Overall Capacity building support to humanitarian actors and services providers	0.6K	0.2K	0.01K	0.1K	0.3K	60K
5	General Protection: Provide advice or technical support on mainstreaming protection from protection partners to humanitarian partners from non-protection sector	223K	60K	4K	40K	118K	112K
6	General Protection: Community-based protection structures and community-led risk mitigation initiatives supported	0.7K	0.2K	0.01K	0.1K	0.4K	350K
7	General Protection: Support for access to legal documentation	467K	126K	9K	84K	247K	4.7M
8	General Protection: Communication support	0.5K	0.1K	0.01K	0.1K	0.3K	48K
General Protection total							5.4M

Child Protection

9	Child Protection: Child protection mainstreaming activities for other humanitarian actors	0.01K	0.01K	0.01K	0.01K	0.01K	0.1K
10	Child Protection: CP Case management and psychosocial support (Child Protection)	45.9K	12K	0.9K	8K	24K	4.6M
11	Child Protection: CP Community awareness raising for prevention and mitigation of protection risks (Child Protection)	52K	14K	1K	9K	28K	521K
12	Child Protection: CP Community-based protection structures and community-led risk mitigation initiatives supported (Child Protection)	0.04K	0.01K	0.01K	0.01K	0.02K	22K
13	Child Protection: Distribution of CP kits to children (boys and girls) (Child Protection)	0.7K	0.2K	0.01K	0.1K	0.4K	71K
Child Protection total							5.2M
Gender-Based Violence							
14	Gender Based Violence: Awareness-raising and communication with community activities	271K	58K	3.2K	90K	120K	870K
15	Gender Based Violence: Build technical capacity	0.5K				0.5K	132K
16	Gender Based Violence: Case Management and Psychosocial Support Services	217K	46K	3K	72K	96K	2.3M
17	Gender Based Violence: Dignity Kits	142K	42K	2K	35K	62K	4.5M
18	Gender Based Violence: Provision of Safe Environment to GBV survivors	0.01K	0.01K				10K
Gender-Based Violence total							7.8M
Mine Action							
19	Mine Action: EORE direct delivery in communities	921K	249K	18.4K	166K	488K	1.8M
20	Mine Action: Material distribution	191.5K	52K	4K	34K	101K	383K
21	Mine Action: Social media messaging	44K	12K	1K	8K	23K	0.4K
22	Mine Action: Victim assistance	0.8K	0.2K	0.02K	0.1K	0.4K	22K
23	Mine Action: Contamination surveys	0.1K	0.01K	0.01K	0.01K	0.03K	28K
Mine Action total							2.3M
Protection total							20.7M

Shelter/NFI/CCCM

No.	Activity	Total	Targeted people				Activity Requirement (US\$)
			IDPs	Returned, resettled and locally integrated IDPs	Non-displaced stateless people	Other crisis-affected people with hum. needs	
1	Shelter construction and reconstruction (IDP camps and sites, and villages)	49K	45K	2K	1K		11.6M
2	Provision of Emergency shelter support (kits and materials/ cash assistance)	164K	152K	7K	4K		9.6M
3	Provision of NFI kits to IDPs in camps/ sites	229K	229K				9.7M
4	Provision of NFI kits to returnees/ resettled, stateless people	34K		17K	17K		1.1M
5	Provision of NFI kits to IDPs	85K	85K				3.5M
6	Improve living conditions through site care and maintenance (CA)	218K	218K				606K
Shelter/NFI/CCCM total							36.1M

Water, Sanitation and Hygiene (WASH)

No.	Activity	Total	Targeted people				Activity Requirement (US\$)
			IDPs	Returned, resettled and locally integrated IDPs	Non-displaced stateless people	Other crisis-affected people with hum. needs	
1	Restoration of the semi-permanent WASH facilities and services that were exist prior to the cyclone, that will be including of rehabilitation of latrines and bathing facility superstructure, reinstallation of handwashing facilities,	261K	206K		18K	38K	7.0M
2	Provision of consumable and provision of Hygiene kits & water treatment items including (water tablets, water filters, etc.)	262K	206K	0.3K	18K	38K	3.7M
3	Treating / repairing shallow wells, water trucking and boating to water insecure locations, etc.	224K	206K		18K		2.6M

4	Removal of debris from WASH facilities and wastewater drainage, focusing on Environmental Sanitation components in the camps and sites including solid and liquid waste.	224K	206K	18K		1.3M
5	Hygiene promotion and raising awareness about the level of contamination and re-printing of the IEC materials.	261K	206K	18K	38K	612K
WASH Total						15.2M

Sittwe residents pumping water for domestic use. Sittwe, Rakhine. Credit: UNICEF/Naing Linn Soe/2023



CYCLONE MOCHA FLASH APPEAL

MYANMAR