DENIED AND DEPRIVED

Local communities confronting the humanitarian crisis and protection challenges in Southeast Burma

KHRG Karen Human Rights Group
Documenting the voices of villagers in rural Burma
Denied and Deprived:
Local communities confronting the humanitarian crisis and protection challenges in Southeast Burma

Karen Human Rights Group
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# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>4</td>
</tr>
<tr>
<td>Key findings</td>
<td>6</td>
</tr>
<tr>
<td>Recommendations</td>
<td>7</td>
</tr>
<tr>
<td>Methodology</td>
<td>9</td>
</tr>
<tr>
<td>Terms and abbreviations</td>
<td>10</td>
</tr>
<tr>
<td>Map 1: KHRG operational area (KNU-defined Kawthoolei and Burma</td>
<td>11</td>
</tr>
<tr>
<td>government-defined state and region boundaries)</td>
<td></td>
</tr>
<tr>
<td>Chapter 1: Protection challenges</td>
<td>12</td>
</tr>
<tr>
<td>A. Border crossings denied</td>
<td>12</td>
</tr>
<tr>
<td>B. Local support mechanisms</td>
<td>14</td>
</tr>
<tr>
<td>C. Restricting essential needs</td>
<td>17</td>
</tr>
<tr>
<td>Map 2: Air and ground attacks, fighting and displacements in</td>
<td>18</td>
</tr>
<tr>
<td>Dooplaya District</td>
<td></td>
</tr>
<tr>
<td>Map 3: Air and ground attacks, fighting and displacements in</td>
<td>19</td>
</tr>
<tr>
<td>Mu Traw, Kler Lwee Htoo and Doo Tha Htoo districts</td>
<td></td>
</tr>
<tr>
<td>Chapter 2: Livelihoods</td>
<td>20</td>
</tr>
<tr>
<td>A. Growing food insecurity</td>
<td>20</td>
</tr>
<tr>
<td>B. Livelihood challenges tied to displacement</td>
<td>22</td>
</tr>
<tr>
<td>C. Livelihood support and needs</td>
<td>25</td>
</tr>
<tr>
<td>Chapter 3: Health care</td>
<td>30</td>
</tr>
<tr>
<td>A. Health care to internally displaced people</td>
<td>30</td>
</tr>
<tr>
<td>B. Health care in villages</td>
<td>32</td>
</tr>
<tr>
<td>C. COVID-19</td>
<td>35</td>
</tr>
<tr>
<td>D. Vulnerable populations</td>
<td>36</td>
</tr>
<tr>
<td>Chapter 4: Education</td>
<td>38</td>
</tr>
<tr>
<td>A. School closures</td>
<td>38</td>
</tr>
<tr>
<td>B. Funding challenges</td>
<td>39</td>
</tr>
<tr>
<td>C. Challenges due to displacement</td>
<td>41</td>
</tr>
<tr>
<td>Chapter 5: Local actors and the need for funding alternatives</td>
<td>43</td>
</tr>
<tr>
<td>Conclusion</td>
<td>45</td>
</tr>
</tbody>
</table>
Introduction

Since the 2021 military coup,\(^1\) the security and human rights situation in Burma/Myanmar\(^2\) has seriously degraded, creating a dire humanitarian crisis that is being inadequately addressed. A large portion of the population in Southeast Burma is living in conflict-affected areas and enduring forced displacement, extreme food insecurity and constant threats to health and safety. Despite the high numbers of people fleeing to the Thai border seeking refuge, the vast majority have been unable to enter Thailand or seek protection under international conventions. Forced to remain within national borders, civilians are being subjected to threats to life by the State Administration Council (SAC)\(^3\) due not only to armed conflict, air strikes and other forms of violence, but also to the deprivation of humanitarian aid. Since the coup, the SAC military has imposed travel restrictions on humanitarian workers, blocked access roads and aid convoys, destroyed non-military supplies, attacked aid workers, and shut down telecommunications services.\(^4\) The COVID-19 situation has also worsened, largely due to the SAC’s mishandling (even weaponisation) of the pandemic.\(^5\) The virus has now spread to areas that had not previously experienced outbreaks, creating further vulnerabilities, particularly among displaced populations.

The current problems are not the result of a lag in humanitarian response, or simply poor coordination that requires a little time to iron out as organisations explore delivery solutions in a challenging crisis environment. The current lack of access to aid is primarily due to deliberate attempts on the part of the SAC to deny lifesaving assistance to civilians in need, combined with barriers regarding the right of civilians to cross international borders to obtain protection – barriers that could constitute refoulement. Thus, it is clear that any true resolution to the current humanitarian crisis requires that the SAC and neighbouring governments respect their obligations under international humanitarian and human rights treaties and conventions. Such demands however

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\(^1\) On February 1\(^{st}\) 2021, the Burma (Myanmar) military deposed the democratically elected government led by the National League for Democracy (NLD). The military proclaimed a year-long state of emergency and transferred power to Min Aung Hlaing, the Commander-in-Chief of Burma’s Armed Forces. Based on unproven fraud allegations, the Burma military invalidated the landslide victory of the NLD in the November 2020 General Election and stated it would hold new elections at the end of the state of emergency. Elected President Win Myint and State Counsellor Aung San Suu Kyi were detained, along with ministers, their deputies and members of Parliament.

\(^2\) In 1989, the then-ruling military regime changed the name of the country from Burma to Myanmar without consultation from the people. Despite controversy over this name change, the use of Myanmar became common on an international level in recognition of the establishment of a civilian government in 2016. KHRG prefers the use of Burma because it is more typically used by villagers and since the name change to Myanmar is reflective of the military regime’s longstanding abuse of power.

\(^3\) The State Administration Council (SAC) is the executive governing body created in the aftermath of the February 1\(^{st}\) 2021 military coup. It was established by Senior General Min Aung Hlaing on February 2\(^{nd}\) 2021, and is composed of eight military officers and eight civilians. The chairperson serves as the de facto head of government of Burma (Myanmar) and leads the Military Cabinet of Burma, the executive branch of the government. Min Aung Hlaing assumed the role of SAC chairperson following the coup.


continue to be ignored, which is why practical solutions to the existing situation must also be developed, and without further delay. With the primary channels for aid and protection provision largely out of play due to access issues, a better understanding of the situation on the ground is desperately needed in order to determine how new channels can be established that rely more fully on local actors already operating in these areas and how funding can be redirected to be more inclusive of these local actors.

With that goal in mind, this report describes the situation on the ground in Karen State, looking both at the specific needs of villagers and communities, and at the efforts and challenges faced by organisations trying to assist and support them. This report examines the major logistical and security challenges preventing existing aid from effectively reaching its target recipients to help stakeholders better evaluate how aid can be used and implemented. The report also highlights how local efforts and initiatives are currently filling certain gaps, and how greater recognition of and investment in these channels may lead the way to more effective solutions not just in resolving immediate needs but also by supporting more sustainable mechanisms in the long run.

Karen State, defined locally, includes the following areas: Kayin State, Tanintharyi Region and parts of Mon State and Bago Region.
Key findings

Security risks and threats to life due to the escalation of armed conflict, air and ground attacks, retaliatory activities against civilians, arrests and roundups, and other human rights violations have led to increasing displacements of civilians since the 2021 military coup.

The vast majority of displaced villagers in Southeast Burma remain internally displaced due to restrictions on the right to cross the border into Thailand, and thus are unable to benefit from wider international protections and humanitarian assistance.

Reminiscent of the earlier “four cuts” approach employed by previous military regimes as a means to destroy the support base of ethnic armed organisations (EAOs) in Burma, the new military junta has imposed heavy restrictions on movement and the transportation of goods, confiscated, looted and destroyed medical and food supplies and arrested those providing them, thus cutting off essential resources to civilians.

The SAC’s restrictions violate civilian rights under Article 3 of the Geneva Convention and the principle of humane treatment, which includes the obligation not to intentionally subject civilian populations to situations where their human dignity is threatened through lack of essential supplies.

Reports of food shortages and of deaths due to the inability to access medical care, as well as decisions to remain in areas of heavy conflict and insecurity because there is nowhere else to go, all point to the gravity of the humanitarian crisis and the need for immediate action.

The current efforts of villagers to support each other by drawing on local expertise to figure out alternative healthcare options, and to keep schools running for their children even in displacement show the effectiveness of local, community-driven networks in delivering aid to populations in need.

Local civil society and community-based organisations (CSO/CBOs), ethnic service providers, and faith-based organisations, all of whom have knowledge of and experience with the local context, have been the primary actors providing humanitarian aid and emergency support to displaced villagers. International donors and humanitarian organisations, though unable to deliver the aid themselves, have failed to provide these groups with sufficient support.

7 In Burma (Myanmar), the scorched earth policy of ‘pyat lay pyat’, literally ‘cut the four cuts’, was a counter-insurgency strategy employed by the Burma military as early as the 1950s, and officially adopted in the mid-1960s, aiming to destroy links between insurgents and sources of funding, supplies, intelligence, and recruits from local villages.
Recommendations

To the international community, ASEAN, NGOs, funding agencies, and regional and foreign governments

- Acknowledge that the SAC is the root cause of the current human rights and humanitarian crisis.
- Refrain from giving any political legitimacy to the military junta and recognise that any collaboration with the junta only serves to bolster their legitimacy.
- Ensure that the SAC is unable to hold decision-making power over the distribution of aid, and that funds are not indirectly being rerouted through the SAC.
- Recognise that the humanitarian principle of neutrality is frequently misapplied in the case of Burma, and thus often impedes the fulfilment of the wider humanitarian agenda.
- Consult and sign Memorandums of Understanding (MoUs) with the National Unity Government (NUG) and EAOs, rather than the SAC, to address the unfolding humanitarian crisis across the country.
- Call on ASEAN to suspend Burma from ASEAN membership until a democratically-elected civilian government is restored, and to cooperate with international and local actors to end the military junta’s violence against the people of Burma.
- Diversify international funding distribution so that more funding is made directly available to non-state actors, particularly ethnic service providers and civil society organisations, regardless of their registration status.
- Prioritise and strengthen methods of service delivery and communication that rely on local CSO/CBOs and ethnic service providers that have the ability and networks (due to consistent access and trust from the community) for local implementation of support programmes.
- Include local CSO/CBOs and ethnic service providers in decision-making processes since these actors have already worked for decades to provide support and services to local communities.
- Support ethnic health organisations (EHOs) and other non-state health actors, including the COVID-19 Task Force created by the NUG and local EHOs, to boost COVID-19 prevention and treatment, and ensure the provision of other essential health services in rural areas.
- Support self-funded and ethnic-run schools and education programmes by directing funding to local service providers and CSO/CBOs.
- Urge neighbouring countries to ensure that their authorities do not deny entry to people crossing the border seeking refuge; and encourage them to work with cross border organisations to develop support and protection services for those seeking refuge.
● Engage with neighbouring countries to ensure the passage of aid into Burma, in particular via land borders and through cross border aid organisations and local civil society organisations already operating in the area.

● Publicly declare support for an International Criminal Court (ICC) referral and seek out all additional opportunities to hold the Burma military accountable for its vast array of crimes.

● Place sanctions on oil and gas revenues, and impose other measures that will have an economic impact on the junta’s ability to wage war against the people of Burma.

● Support a UN Security Council resolution on a global arms embargo.

● Assist in the creation of civilian safe zones (both in Burma and in neighbouring countries) where the protection of civilians is internationally guaranteed.
Methodology

The security situation in KHRG’s area of operation has been seriously deteriorating since the 2021 coup, leading to challenges in conducting extensive interviews. KHRG thus decided to be more selective than usual in its interviews, choosing individuals who were knowledgeable about the situation in their community or region and could potentially provide a fuller picture of the humanitarian crisis and villagers’ needs. As such, this report is based on 24 interviews conducted in November and December 2021, primarily with local leaders and villagers who are active in their community. In addition, six interviews were conducted with members of local CSO/CBOs about the work they have been undertaking since the coup and the challenges they have faced regarding emergency support and service delivery. Due to the outbreak of fighting and armed attacks since December 2021 in multiple districts, which then led to a deepening humanitarian crisis particularly along the Thai-Burma border area, raw data reports from December 2021 through March 2022 have also been included in the preparation of this report.

Research for this report consists primarily of oral testimonies, gathered via audio-recorded semi-structured interviews. The interviews were conducted by KHRG staff and a network of researchers who are local community members, trained and equipped to employ KHRG’s documentation methodology. To complement the information provided by the interviewees, KHRG also used its own documentation and other external sources where appropriate.

The information is drawn from interviews and raw data gathered across only five of the seven districts within KHRG’s operational area: Doo Tha Htoo (Thaton), Kler Lwee Htoo (Nyaunglebin), Mergui-Tavoy, Mu Traw (Hpapun), and Dooplaya. The decision to limit our research to these areas was based on the type of documentation KHRG had been receiving since the coup, and what seemed to be the most critical areas in evaluating the challenges to humanitarian aid.

The areas cited in this report are commonly referred to as “districts” and are listed by the name used by the Karen National Union (KNU), as well as many local Karen organisations, both those affiliated and unaffiliated with the KNU. KHRG’s use of the district designations in reference to our research areas represents no political affiliation; rather, it is rooted in the fact that many rural communities commonly use these designations.

All participants were informed of the purpose of the interviews and provided consent to be featured in this report. Interviews were conducted in S’gaw Karen and Burmese. The names and identifying details of interviewees have been withheld for security reasons.

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8 KHRG’s full documentation philosophy and methodology is available upon request.
9 For clarity, the Burmese terms used for these districts are provided in brackets but do not correspond with the Burma (Myanmar) government administrative divisions.
10 The Karen National Union (KNU) is the main Karen political organisation. It was established in 1947 and has been in conflict with the Burma/Myanmar government since 1949. The KNU wields power across large areas of Southeast Burma and has been calling for the creation of a democratic federal system since 1976. Although it signed the Nationwide Ceasefire Agreement in 2015, relations with the government remain tense.
In certain cases, village and personal names have been censored using single-digit letters from A--- to Z---. The code names do not correspond to the actual names or to coding used by KHRG in previous reports.

Due to the sensitive nature of some information provided by local actors and organisations, certain details regarding service delivery and specific operational challenges could not be included in this report.

**Terms and abbreviations**

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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</thead>
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<tr>
<td>AHA</td>
<td>ASEAN Coordinating Centre for Humanitarian Assistance on Disaster Management</td>
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<td>ASEAN</td>
<td>Association of Southeast Asian Nations</td>
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<td>BGF</td>
<td>Border Guard Force</td>
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<td>BMA</td>
<td>Burma Medical Association</td>
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<td>BPHWT</td>
<td>Back Pack Health Worker Team</td>
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<tr>
<td>CSO/CBO</td>
<td>Civil Society Organisation /Community-Based Organisation</td>
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<td>CDM</td>
<td>Civil Disobedience Movement</td>
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<td>CIDKP</td>
<td>Committee for Internally Displaced Karen People</td>
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<td>EAO</td>
<td>Ethnic Armed Organisation</td>
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<td>FBR</td>
<td>Free Burma Rangers</td>
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<td>IDP</td>
<td>Internally Displaced Person</td>
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<td>KDHW</td>
<td>Karen Department of Health and Welfare</td>
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<td>KECD</td>
<td>Karen Education and Culture Department</td>
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<tr>
<td>KERT</td>
<td>Karen Emergency Relief Team</td>
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<tr>
<td>KESAN</td>
<td>Karen Environmental and Social Action Network</td>
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<td>KNLA</td>
<td>Karen National Liberation Army</td>
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<tr>
<td>KNU</td>
<td>Karen National Union</td>
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<tr>
<td>KORD</td>
<td>Karen Office of Relief and Development</td>
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<td>KRC</td>
<td>Karen Refugee Committee</td>
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<td>KSEAG</td>
<td>Karen State Education Assistance Group</td>
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<tr>
<td>KTWG</td>
<td>Karen Teacher Working Group</td>
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<tr>
<td>KWO</td>
<td>Karen Women's Organisation</td>
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<tr>
<td>MPFU</td>
<td>Myanmar Persons Fleeing Unrest</td>
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<tr>
<td>NGO</td>
<td>Non-Governmental Organisation</td>
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<td>NUG</td>
<td>National Unity Government</td>
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<td>PDF</td>
<td>People’s Defence Force</td>
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<td>SAC</td>
<td>State Administration Council</td>
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<td>UNHCR</td>
<td>United Nations High Commissioner for Refugees</td>
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Map 1: KHRG operational area (KNU-defined Kawthoolei and Burma government-defined state and region boundaries)
Chapter 1: Protection challenges

This section provides an overview of protection challenges, showing that the failure of neighbouring governments to respect international standards regarding the right to seek protection across international borders has created a situation where internal displacement is the only option for most villagers fleeing conflict, insecurity and human rights violations in Southeast Burma. It further examines the challenges in delivery of humanitarian aid and emergency support to the growing population of persons in need, highlighting the physical constraints of operating within national borders due largely to the SAC’s restrictions on movement and the transportation of goods, the SAC’s confiscation and destruction of medical and food supplies, and the SAC’s threats against actors engaged in humanitarian and emergency support.

A. Border crossings denied

Drawing on information provided by various local sources, KHRG has estimated that over 170,000 people have been displaced within Karen State since the February 2021 military coup. This estimate is likely lower than the actual numbers. Forced displacements are extremely difficult to measure and track in general, but even more so in the current context. The heavy constraints on formal border crossings into Thailand and on the establishment of official (internationally or nationally recognised and guaranteed) displacement sites on either side of the Thai-Burma border means that most displacements are extremely informal, remain “internal” and thus are more difficult to track and report. The key agencies typically responsible for tracking and reporting displacements also have little to no access to displacement sites. The United Nations Refugee Agency UNHCR (Thailand) said in early January 2022 that it had not been granted access by the Thai government to displacement sites in Mae Sot, Thailand where refugees are being hosted, and added that it also cannot access the Burma side of the border.¹¹

The Thai government has nevertheless stated its commitment to assisting and taking care of people from Burma fleeing unrest who have crossed the border into Thailand. It has also stated that it stands ready to help facilitate the delivery of humanitarian assistance in Burma.¹² The Thai government has however refused the help of international governments and agencies in attending to the needs of displaced persons along the border, insisting that it is handling the situation itself. The Prime Minister affirmed on January 17th 2022 that: “The Myanmar Persons Fleeing Unrest (MPFU) would only be returned on a voluntary basis. The global community may rest assured that the Thai agencies provide assistance to MPFU based on international humanitarian principles.”¹³ Meanwhile, villagers who crossed into Thailand have reported to KHRG that they were told by Thai soldiers, “Hey!!! No gunfire sound, you cannot come” and forced to return to Burma.

¹¹ “Fleeing violence in Myanmar, thousands camp along Thai border river”, Reuters, January 2022.
Local Thai authorities have allowed those fleeing to cross the river into Thailand at critical moments and have provided some emergency support, but that assistance has remained minimal. Those fleeing have typically been allowed to remain for only short periods, and Thai soldiers have insisted that they leave when the sound of gunfire and shelling subsides. As one local CSO director remarked, “It’s not like there is a schedule for the fighting and shelling. You can’t just send people back like that.”

On December 23rd 2021, students from Thay Baw Boh (Taw Naw) High School, who had fled to Thailand due to shelling and fighting, crossed back to Thay Baw Boh village in Dooplaya District after being told by Thai authorities that they cannot stay in Thailand. [Photo: KHRG]

Early on, after the initial air strikes in Mu Traw District in March 2021, the Thai government cited security and public health risks due to COVID-19 as the reason for blocking entry into Thailand. Public health concerns however cannot be used to justify refoulement. According to UNHCR: “Denial of access to territory without safeguards to protect against refoulement cannot be justified on the grounds of any health risk”, since measures can be taken, such as testing and/or quarantine, which would enable authorities to manage the arrival of asylum-seekers in a safe manner. Nevertheless, the Thai government has continued to place heavy constraints on movement across the border, and

standard measures for officially receiving and screening persons fleeing unrest from Southeast Burma into Thailand do not seem to be in operation.

Although most people from Burma seeking refuge in Thailand have been pushed back, UNHCR stated that according to the Thai government, 1,980 individuals remain in Thailand as of April 6th 2022, for the most part sheltered in five temporary safety areas (TSAs) placed under the jurisdiction of the Royal Thai Army. The existing temporary shelters (refugee camps) on the Thai side of the border that were created in the 1980s are not being used to welcome new refugees, and UNHCR Thailand has been prevented access to the newly displaced populations. On January 20th 2022, UNHCR released a statement calling on the Thai government to “transfer the group of refugees being sheltered in the ‘temporary safety area’ in Mae Sot, Tak Province, to another location where they can access safer and more dignified temporary accommodation, and receive improved humanitarian assistance”. It also reiterated its readiness to assist Thai authorities in responding to the humanitarian needs of the new arrivals. UNHCR and humanitarian partners continue to request access to the refugee population to no avail. As they are managed by the Royal Thai Army, there is also no available information on these temporary safety areas, who is being received there and under what conditions.

**B. Local support mechanisms**

Because of the difficulty of crossing into Thailand, displacement sites on the Burma side of the Moei River are being created through the efforts of border-based CSO/CBOs, mostly Karen-led organisations, along with local faith-based organisations and the KNU. These local actors have worked to ‘formalise’ these displacement sites so as to assure a minimum level of services to the IDPs that are finding refuge there and to coordinate their activities to maximise impact.

The total population at these semi-formal sites near and along the Moei River in Dooplaya District has risen from around 4,000 in January 2022 to around 11,400 as of the first week of April 2022, with the number of sites also increasing from five to eight. Dry food goods and other material supplies (like tarpaulin for building makeshift shelters, mats, blankets and clothing) and sanitary items (including feminine hygiene products) are being provided on a regular basis, sometimes daily, but depending primarily on what local Thai authorities and soldiers will allow at the various crossing locations on any given day.

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15 UNHCR, “Myanmar Emergency - UNHCR Regional Update - 6 April 2022”, April 2022.
17 These displacement sites were initially areas where IDPs began gathering as they fled to the Thai-Burma border. They were ‘formalised’ in the sense that locally based CSO/CBOs identified them as key sites where they could regularly provide support and services, create structures to store needed supplies, and set up mobile clinics. These displacement sites do not however exist in the official sense of being recognised by any national or international bodies.
18 These figures are based on the number of food cards distributed by local CSO/CBOs.
Although ‘formalised’ by local CSO/CBOs to provide better protection for the IDPs, these sites continue to struggle to exist in any official sense that might allow them to operate without obstruction from local governments and military personnel, and to access further funding (the local CSO/CBOs providing support are largely reliant on their existing funding sources).

Even with a growing number of IDPs being supported at these displacement sites, the vast majority have little to no access to humanitarian support. For Dooplaya District alone, the estimate made by local CSO/CBOs is currently 40,000 IDPs. The number of IDPs in Mu Traw District, where skirmishes and military activity have been most intense and constant since the coup, is much higher with an estimated 90,000 since the coup.19 Spread out in nearby jungles, hiding in caves and along waterways, or taking refuge in other villages where they may have relatives or friends, most of these IDPs remain invisible from an aid perspective because of the difficulty of tracking and recording these households and individuals. In some cases, IDPs are setting up in areas surrounding the semi-formal displacement sites in Dooplaya District in order to have access to some of the services offered. Since many of the people receiving support at the displacement sites have chosen to set up outside of the actual camps, or come and go depending on their particular needs, it has been difficult to track numbers despite the creation of IDP lists. This can also present challenges to budget assistance appropriately, since local actors need to be able to identify the size and number of the IDP population.

UNHCR Myanmar has reported providing limited emergency relief support to IDPs fleeing from Mu Traw District to Myaing Gyi Ngu in Hpa-an District.20 The three IDP camps in that area, which emerged in 2016, normally house around 5,000 displaced persons but, since the coup, the number has risen to around 10,000.21 With the rapid

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19 Displacement figures are difficult to calculate, particularly over extended periods because villagers may move in and out of displacement during that time.

20 UNHCR, “UNHCR steps up aid for displaced in Myanmar as conflict intensifies”, February 2022.

rise in IDPs, existing humanitarian support is unable to cover the needs of the entire camp population, particularly since the new arrivals are not officially registered in the camps. The World Food Programme (WFP) also reported that it has provided rice to about 6,800 people in the area.\textsuperscript{22}

Local CSOs however have estimated that 20,000 IDPs are in critical need (i.e., facing extreme food insecurity and health issues) in Mu Traw District just since January 2022. Despite being an area where displacements have been ongoing since the beginning of the coup, the establishment of new formal IDP camps has not been possible. However, local organisations like Committee for Internally Displaced Karen People (CIDKP) and Karen Office of Relief and Development (KORD), who have a longstanding presence in the area, have been working to provide emergency support for local IDPs. Due to the challenges of creating new formal or even semi-formal displacement sites, they have set up distribution sites where IDPs can come to pick up food and supplies on their own. The situation is far from ideal since it poses risk for both those accessing support and those providing support, but it has been successful in getting aid to those who otherwise would have no access at all. Other organisations, like Karen Department of Health and Welfare (KDHW) and Back Pack Health Worker Team (BPHWT)\textsuperscript{23}, who are also well-established in the district, have also struggled to maintain full operation of their activities due to heightened security risks.

With displacement figures over 170,000 in Karen State, it is clear that only a small fraction are receiving any form of formal assistance. Most are struggling to have access to food, basic living supplies and medical care. While some have been able to take refuge with family members elsewhere, those who do are often adding to the livelihood challenges of their relatives.

\textsuperscript{22} Ibid.

\textsuperscript{23} Backpack Health Worker Team (BPHWT) is an organisation that provides health care and medical assistance to displaced civilians inside Burma.
C. Restricting essential needs

While border-based organisations in Thailand have managed to move some supplies to the displacement sites just across the border, moving support materials and food further inland has been more problematic. Transporting goods from nearby towns within Burma is often the only way to get supplies (including rice) to IDPs in areas away from the border. However, concerned that supplies going to rural areas are intended for or will be given to ethnic armed groups, the SAC military has been placing heavy restrictions on the movement of goods, including humanitarian support. Thus, not only has it proven difficult to transport emergency relief support from Thailand, any movement of goods within Burma itself is being heavily monitored and restricted.

These restrictions on the movement of goods are impacting not only the delivery of humanitarian support to displaced villagers, but also the livelihood and health needs of all rural villagers. Rural areas typically depend on accessing supplies from town, thus any blockage of goods to rural areas also serves as a means of cutting off villagers from essential needs. This is in violation of international human rights laws, including the International Covenant on Economic, Social and Cultural Rights (ICESCR), ratified by the Burma government in 2017, and the Geneva Convention (Article 3), which provides for protection against situations where human dignity is threatened through lack of essential supplies.

Depending on where they live, villagers who have not displaced may be in as much need of emergency or humanitarian support as villagers who have displaced. Villagers and local leaders in some rural areas reported no longer receiving visits from healthcare workers and no longer being able to transport medicine and medical supplies from urban areas. Villagers themselves are often unable to access towns or their farmland in order to earn a living because of imposed travel restrictions, landmine contamination and/or general insecurity due to armed conflict, military activity, patrolling and security checks along roads. Any existing food supplies they had before the coup have been dwindling over the past year. Villagers in many areas have also reported incidents of looting and confiscation of food, livestock and property by SAC soldiers, creating further hardship. Of course, many were already facing livelihood challenges and food insecurity prior to the coup due to the COVID-19 pandemic.24

Recognising the wider reverberations of the SAC’s restrictive measures, and how all villagers are impacted, whether they are currently facing displacement or not, is key to understanding the full scope of the humanitarian crisis in Southeast Burma and the need for immediate resolution.

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Map 2: Air and ground attacks, fighting and displacements in Dooplaya District
Map 3: Air and ground attacks, fighting and displacements in Mu Traw, Kler Lwee Htoo and Doo Tha Htoo districts
Chapter 2: Livelihoods

This section presents the situation in rural villages, highlighting the livelihood challenges and growing food insecurity faced by rural villagers, whether experiencing displacement or not. Since the 2021 military coup, fighting and air and ground attacks by SAC forces, as well as increased military activity, including security checkpoints, patrolling and heavy troop movements, have forced many villagers to flee their homes. Villagers often flee with little food and supplies, and have poor access to shelter and potable water. The SAC has also been imposing heavy restrictions not just on travel but the transportation of goods, making it difficult for villagers to access food and other livelihood needs. Whether they have fled or not, villagers are struggling to meet their livelihood needs, with many running out of food and other necessities, yet also unable to access humanitarian support. Villagers and IDPs have been forced to rely on the limited assistance that local organisations, ethnic armed groups and community members themselves are able to provide.

A. Growing food insecurity

Food insecurity has been rapidly increasing since the 2021 military coup. A Karen Women’s Organisation (KWO) member in Meh Klaw village tract25, Bu Tho Township, Mu Traw District stated: “Yes, we face food insecurity. It is not easy to make money at the current time. Some villagers don’t have enough rice. We cannot buy things, as we cannot travel. It becomes a challenge for us to support our families.” Another villager from Ma Htaw village tract, Dwe Lo Township, Mu Traw District echoed that sentiment: “I think everybody faces food insecurity because we cannot work on anything as we cannot travel. […] Villagers just eat food that they keep [have stored away]. They bought that food before the road closed last year. They keep some food from last year. Once that food is gone, they don’t know what they are going to do. […] Some villagers’ food [supply] is already gone.”

For rural villagers in Southeast Burma, who rely primarily on farming, the inability to travel can have a devastating impact on their livelihood. This issue became apparent after the outbreak of COVID-19 in 2020 when widespread travel restrictions were first set up. At that time, KHRG reported an increase in livelihood problems since villagers were often unable to travel to town (to purchase supplies and certain food staples) and unable to access their own farmlands and plantations when located at a distance from their village.26 Many also depend on day labour, often because they do not have land, so when they are unable to travel, they are unable to find work. Although rural villagers are often able to grow vegetables at home or forage in nearby forests, these options may help relieve livelihood problems in the short term but cannot satisfy livelihood needs in any durable way. During the initial COVID-19 restrictions, villagers in some areas ran out of foodstuffs like rice, oil and salt, as well as other household supplies. At that time, some local leaders had to relax travel restrictions or organise bulk purchases

25 A village tract is an administrative unit of between five and 20 villages in a local area, often centred on a large village.
Since the coup, movement restrictions have become more challenging. They are due not simply to COVID-19 prevention but also to armed conflict, militarisation and other security issues limiting movement, like landmine contamination and security checks by SAC soldiers. According to a villager in Bilin Township, Doo Tha Htoo District interviewed in mid-December 2021: “Due to the travel restrictions that started after the COVID-19 pandemic and then following the coup, we did not have sufficient petrol and food, such as oil and rice, because we mainly access food from town. [Currently] we do not feel secure traveling to town and our leaders also remind us not to travel due to the high security risk.” He added that the movement restrictions have resulted in “livelihood challenges, insufficient food and higher purchase costs in the community – prices this year are three times higher than the previous year.” Another villager from Bilin Township stated that in rural villages, “prices are getting higher due to shopkeepers not being able to access products from town to sell. Before, we could get 10 eggs for 1,000 kyats [USD 0.54], but now we can get only five eggs for 1,000 kyats. One bottle [litre] of oil was 1,400 kyats [USD 0.76], but now it is 2,800 kyats [USD 1.51]. This is an extreme problem for us.” A villager from Yaw K’Daw village tract, Noh T’Kaw (Kyainseikgyi) Township, Dooplaya District remarked that although the price of goods has risen, the selling prices of crops have dropped: “[T]he value of the goods [crops] is going down and it is affecting [our] livelihood. For some people, even though they work, they don’t get to eat.”

Since travelling between rural areas and towns has become more difficult, some villagers have resorted to hiring drivers to buy food for them. However, the transportation of goods from towns to rural areas has also become more difficult since the SAC has established more checkpoints and has been preventing anyone, including villagers, from transporting certain kinds of goods and larger quantities of goods. In Tha Htoo (Thaton) Township, Doo Tha Htoo District, one villager said that local SAC troops do not allow them to transport rice, health and medical supplies, Pearl fertilizer (a specific brand of fertilizer), and electrical materials such as batteries, wires, and engine oil. He added that they have to undergo questioning by SAC soldiers whenever they transport any supplies, including food. After they are questioned by the SAC, their supplies are often confiscated and/or destroyed, and they have also had to pay fines to the SAC soldiers.

Even when villagers are able to sell their crops in nearby towns, they are at high risk of having the money they earned confiscated by SAC soldiers at checkpoints on the road. KHRG has received several reports of the SAC confiscating money from villagers while they are traveling, including while returning from selling their crops. As an interviewee from Mergui-Tavoy District explained, “When we have the money from selling [crops], it is not easy to carry it with us. Some people were investigated at the Byaw Taw Wa checkpoint [K’Ser Doh Township] after coming back from selling their farming products. Their money was taken at the [SAC] checkpoint.”

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27 Ibid.
28 All conversion estimates for the kyat are based on the April 27th 2022 mid-market exchange rate of 1,000 kyats to USD 0.54 (taken from https://wise.com/gb/currency-conveter/mmk-to-usd-rate).
29 KHRG, “Doo Tha Htoo District Situation Update: Forced portering and the use of civilians as human shields, and updates on livelihood, health and education, August to September 2021”, February 2022.
Since the coup, villagers in conflict-affected areas have often been unable to harvest crops and take care of their livestock due to fighting and shelling, SAC activities and landmine contamination. Farms near vehicle roads are particularly at risk of indiscriminate shelling as soldiers undertake road security or travel between their army camps. KHRG has received a number of reports of villagers being shot at and/or killed while working on their plantations since the start of the coup. A villager in Yaw K’Daw village tract, Noh T’Kaw Township, Dooplaya District said that SAC soldiers were setting up camps from A--- village to B--- village in Noh T’Kaw Township, engaging in inspections and arresting people. He added that, “If the enemy [SAC] was around, the villagers were very worried and they couldn’t go to work at their farms.” A villager from C--- village, Ma Htaw village tract, Dwe Lo Township, Mu Traw District stated: “Now villagers are afraid to work on their lands. They are even afraid to look after their buffalos. The situation is becoming one in which villagers are starting to be hungry.”

B. Livelihood challenges tied to displacement

As armed conflicts have increased since the coup, the number of displaced persons has been increasing dramatically. IDPs are often unable to bring food, clothes, bedding, cooking equipment and other basic necessities with them, and even when they are able, it is rarely sufficient. A 17-year-old student who fled Lay Kay Kaw in Dooplaya District with her school in mid-December 2021 stated during an interview several days after fleeing: “[W]hen we fled we didn’t bring anything with us. We brought one to two clothes items and blankets with us. We didn’t bring any money with us. [...] During the

One of the many displacement sites that have formed along the Burma side of the Moei River since the December 2021 outbreak of fighting and air and ground attacks in Dooplaya District. Villagers were not able to bring much with them and are exposed to hot sun and heavy rain. This photo was taken on February 22\textsuperscript{nd} 2022 after the tarpaulin roofs from their temporary huts were blown off by torrential rain and wind during the night. The villagers are waiting for their clothes, blankets, and other belongings to dry under the sun. [Photo: KHRG]

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30 Established at the time of the earlier ceasefire agreements to welcome back former refugees and IDPs to their country, Lay Kay Kaw New Town was supposed to serve as the symbol of a new era of peace and unity. Since December 2021, the SAC has launched air and ground attacks throughout the area, and fighting has erupted between the SAC and ethnic armed groups.
time we were fleeing, sometimes we bought food [from money given to us by others]. In P’Loo, there were some people who helped us [and gave us food]. Even when we [don’t have good food] we have to eat it.” As with many villagers in the Lay Kay Kaw area who were forced to displace in December 2021, she and her classmates had to flee to a new place every day as fighting spread until they arrived at the Moei River.

Villagers are also typically unable to bring their livestock with them when they displace. Some villagers, if they have displaced close by, may return to their village to try to care for livestock or their fields. However, villagers do so at risk of life. On February 18th 2022, a displaced couple from D--- village, Maung Ma Ywar Thit village tract, Kaw T’Ree (Kawkareik) Township returned to their house to look after their livestock. While there, indiscriminate shelling resumed and the wife was killed by shrapnel from a mortar explosion beside her house. Many villagers are too afraid to return, so may risk losing their livestock, as one villager from Thay Baw Boh village tract in Dooplaya District stated: “I am afraid to go home. We have our household items and livestock left in the village. The livestock are finding food themselves, as we are afraid to go back. It is not good because they [the livestock] also have their own life [are at risk of dying].”

SAC troops operating in Aaw Hpa Hpa Doh village tract, Kaw T’Ree Township, Dooplaya District occupied villagers’ homes, making temporary beds and using the villagers’ materials to cook for themselves while the homeowners had fled from fighting in the area. They also destroyed villagers’ personal possessions. These photos were taken on March 4th 2022. [Photos: Local villager]

Villagers experiencing displacement are also at high risk of having their homes and villages looted and destroyed by SAC soldiers while they are displaced. Following the initial fighting and displacements in the Lay Kay Kaw area in December 2021, villagers stated that local shops run by villagers had been completely cleared out, and rice and other food items, as well as bedding, clothes and other household items had been stolen from villagers’ homes. One shop owner from E--- village, Kya K’Wa village tract, Kaw T’Ree Township stated: “Yes, they destroyed civilians’ houses and took villagers’ clothes and destroyed foodstuffs. They scattered villagers’ rice on the streets and took and discarded machetes that belong to villagers.” In February 2022, SAC troops based in Kawkareik Town traveled to rural villages and looted over 100 houses while the

31 KHRG, “Dooplaya District Short Update: A woman was killed by mortar shrapnel during indiscriminate shelling by armed groups, February 2022”, March 2022.
homeowners had fled; they then hauled the looted items back to town in military trucks. They took civilians’ household items, food, livestock and money, and destroyed items that they did not take.

Due to the livelihood challenges faced during displacement, some displaced villagers choose to return to their village despite the security risks. A displaced villager from Dwe Lo Township, Mu Traw District told KHRG, “As for us, we had difficulty in the place where we had been displaced. We had no money [cannot earn money] while staying in other villages. We had to buy everything. That is why we do not want to stay in another village. So we returned to live in our village.” After they returned, the husband stepped on a landmine while he was going to collect fish from the river near his village. The severity of his injuries led to amputation of one of his legs, which will result in further livelihood challenges for his family.

Living conditions during displacement can vary greatly. While some are able to stay with family in other villages or in towns, most are forced to seek refuge by hiding in the jungle or fleeing toward the border. A villager from G--- village in Kaw T'Ree Township, Dooplaya District who fled to the river after fighting broke out stated: “Now, we have to sleep under the trees. We are staying randomly like this.” Although they were able to receive support when they arrived at the Moei River, she stated that she received no blankets and had to ask her husband, who had stayed in the village, to send some. Although some semi-formal displacement sites have now been created along the Moei River in Dooplaya District due to the large numbers who fled the Lay Kay Kaw area in December 2021, displaced villagers in most other districts, including other parts of Dooplaya, are more likely to end up in smaller informal sites and dependent on items they brought with them and/or are able to find in the forest.

This photo was taken on March 16th 2022. Due to skirmishes and indiscriminate shelling, villagers from Choo K’Lee village tract, Kaw T’Ree Dooplaya District in December 2021, some villagers secretly snuck into Thailand to try to find a safe place to stay. These IDPs are hiding in an irrigation channel near the Moei River in Thailand. The photo was taken on January 18th 2022. [Photo: KHRG]

32 KHRG, “Mu Traw District Incident Report: A male villager was injured by a landmine explosion in Dwe Lo Township, September 2021”, December 2021.
Heavy rains that hit Thailand and Southeast Burma in February 2022 further aggravated the poor living conditions faced by most displaced villagers in Karen State. One KHRG staff member who visited an IDP site along the Moei River noted that the tarpaulins provided IDPs to set up shelter are only able to protect people from the heat of the sun, not the rain: “The IDPs are roofing their temporary shelters with tarpaulins, but they do not have enough tarpaulins to pave the ground. On the evening of February 18th 2022, rain poured into the IDP site, however, the provided tarpaulins were not enough to protect them from the rain.” Another KHRG staff member visited H--- village, Hson Si Myaing village tract, Kaw T’Ree Township, Dooplaya District on the Waw Lay River (a branch of the Moei River) in February 2022. Villagers had earlier crossed into Thailand due to the fighting. However, when the rain and strong winds hit, their temporary shelters were not sturdy enough to protect them. A displaced villager said that even though it is not safe to return to their village, they went back home due to the heavy rain and wind. A KHRG researcher reported that Eastern Taw Naw (Dawna Mountain Range) villagers who were forced to flee in March 2022 also encountered heavy rain while travelling through the forest to reach the Thai-Burma border. The villagers could not carry anything with them when they fled, and they had to take cover under banana tree leaves when it rained.

**C. Livelihood support and needs**

Many villagers stated that since the coup, they had not received or had stopped receiving support. Travel restrictions and high security risks after the coup stopped many organisations from working on community development and prevented humanitarian aid organisations from accessing communities that need help. A KNU village tract leader from Kruh Tuh (Kyonedoe) Township, Dooplaya District remarked that, “Since the coup, our village is not under government control anymore [so is not receiving support from the government].” NGOs also stopped supporting us as well. We can’t do social fellowship [social gatherings or hold activities and ceremonies, for instance to build friendship amongst villagers and between the villages for community development] like before [the coup] […] so we are unable to work together for the development of the village and development of political life.”

33 Prior to the 2021 military coup, areas within KHRG’s operational area were designated as being under either KNU control, government control or mixed (KNU and government) control. Since the Burma military unlawfully ousted the NLD government and seized power in February 2021, many rural villagers no longer consider their area under government control. In seizing power, the SAC not only replaced top officials but many administrators at the local level in areas previously under government control. Villagers in KHRG’s operational area have stated that they do not accept these administrators as legitimate.
The T'Hkaw Pwa village tract administrator in Moo (Mone) Township, Kler Lwee Htoo District expressed his concerns about not being able to find ways of accessing support: “[W]e do not know where to get support, and we cannot get support without permission from villagers as well [villagers may not accept support from certain stakeholders, like those tied to the SAC]. We are thinking [of looking for support] for them [villages who need help], but we do not see any way yet.”

In some areas, much of the support is currently coming from other villagers. As a village tract leader from Kruh Tuh Township, Dooplaya District pointed out: “Karen people don’t have the nature to let each other starve. When we have less food, we can help each other and siblings are helping each other.” The T'Hkaw Pwa village tract administrator in Moo Township, Kler Lwee Htoo District expressed the same sentiment: “Some people face poverty, but we are helping each other [for the people who need help]. For instance, if a villager needs help, the other villagers go to help them; some villagers give them one tin [approximately 12.5 kilograms] of rice and some villagers give them two tins of rice so that they could cover their livelihoods.”

Some villagers have allowed those in need to work on their farm in exchange for rice, while others have loaned paddy [grain] to those who are struggling with their crops. Some villagers could rely on help from other villagers and relatives who have rice; some rely on community organisations and local leaders. A local leader in K'Moh Thway area, Mergui-Tavoy District stated that civilians (including young people), religious leaders, village leaders and KNU leaders in K'Moh Thway area formed a local committee to collectively organise support, especially food and health care, for villagers in need, particularly those who have fled to their area seeking refuge. Many such groups emerged earlier during the COVID-19 pandemic, and since the coup have continued to operate to help Civil Disobedience Movement (CDM) participants, activists and others fleeing possible persecution by the SAC. Faith-based organisations have also been active. A villager from Moo Township, Kler Lwee Htoo District explained that: “In September [2021], a social organisation [Samaritan’s Purse] in Moo Township, Kler Lwee Htoo District distributed a sack of rice to each household who faced food shortages.”

Some villagers who were able to harvest enough paddy in previous years are now sharing food with other villagers who face food shortages. As a villager from Bilin Township, Doo Tha Htoo District explained, “When we still have rice, we can share it with them. If we do not have rice anymore, they will not be able to ask from us [there will be nothing to share]. Therefore, if we have to eat plain porridge, we all will eat plain porridge. If we can still have rice, we will all have rice.” Thus, even when villagers themselves are facing hardship, they are willing to share whatever remains. Of course, as the livelihood situation becomes more dire for more villagers, there will be nothing

34 On February 2nd 2021, healthcare workers at state-run hospitals and medical facilities across Burma (Myanmar) spearheaded a Civil Disobedience Movement (CDM) consisting of labour strikes in protest against the February 1st 2021 military coup. The movement quickly spread to include civil servants from all sectors of the government who are walking off their jobs as a way of non-recognition and non-participation in the military regime. Because of the popularity of the movement, and its seminal role in wider protests across the country, some people have begun using it as a catch-all phrase to include other protest forms like boycotts and pot-banging.
left to share if access to humanitarian aid continues to be blocked.

Another villager who fled when fighting broke out in Dooplaya District in December 2021 highlighted the problem of placing a burden on other villagers who try to help the IDPs who flee to their village: “What can I bring, I can only carry some rice and basic necessities such as salt and fish paste. We have to move to another village, and what are we going to eat. We also have to consider the other villagers, we cannot eat all they have.”

A KWO member in Meh Klaw village tract, Bu Tho Township, Mu Traw District noted that asking for assistance could also lead to unwanted debt: “If we have money, we can buy rice from other villagers but if we don’t have money, we cannot buy rice. We can sometimes ask rice from other villagers and then we pay later. But it is not always good to ask for rice and pay later because we don’t have jobs to get income.”

For many IDPs, the situation has indeed become critical. In Mu Traw District, where there are fewer formal displacement options, many IDPs are living in small groups in the forests. Since displacement can extend over long periods, some prefer to stay in forest areas close to their homes and farmland in order to be able to return periodically to tend to crops and livestock. Those who flee to the forest are unlikely to receive any support. As a KWO member in J--- village, Meh Klaw village tract, Bu Tho Township, Mu Traw District remarked when asked about support for local villagers who fled: “No. Nobody saw that villagers fled to the forest.” An IDP from Lay Kay Kaw noted the same problem for villagers in Kaw T'Ree Township, Dooplaya District who fled in December 2021: “It’s very cold now and some of the IDPs didn’t get blankets. There were those IDPs who fled to the forest too without people noticing them. They didn’t get any support. They didn’t have water to drink and they didn’t have food to eat.”

In Mu Traw District, local organisations like CIDKP, Karen Teacher Working Group (KTWG), Karen Environmental and Social Action Network (KESAN), KORD, Free Burma Rangers (FBR) and KWO have been working to provide humanitarian support to displaced villagers, when they are made aware of displacements. But due to challenges in accessing the displaced villagers, the villagers themselves typically have to go to a distribution place to pick up the supplies. As a KHRG researcher reported in March 2022, after villagers in Saw Muh Plaw and Hkay Poo villages, Lu Thaw Township were forced to flee, supplies were sent to a location along the Salween River and the IDPs were required to pick it up there. They were provided sanitation items like alcohol gel, mosquito nets, soap, toothbrushes, and blankets. Each household was also provided 2,000 baht [USD 58.27] in cash. This type of set up, while necessary because of the difficulty of transporting the supplies further inland on a large scale, does mean that support is less likely to reach those who are not able to make their way to the river.

35 Founded in 1997, Free Burma Ranger (FBR) is a multi-ethnic humanitarian relief organisation that specialises in providing emergency health care, shelter, food and clothing to civilians in war zones and prioritises assisting IDPs.

36 All conversion estimates for the baht are based on the April 27th 2022 mid-market exchange rate of 1 baht to USD 0.029 (taken from https://wise.com/gb/currency-converter/thb-to-usd-rate).
As one member of the Karen Emergency Relief Team (KERT)\(^{37}\) remarked, even traveling short distances to reach formal displacement sites or distribution sites can be extremely challenging.

This photo was taken on April 9\(^{th}\) 2021, in Day Pu Noh area, Lu Thaw Township, Mu Traw District after an SAC military airstrike on March 27\(^{th}\) 2021. It shows villagers finding temporary shelter in a cave while fleeing. [Photo: KHRG]

The social secretary of Kler Lwee Htoo District added that the SAC in his area have begun preventing villagers from taking food into the jungle. Although he had no explanation for why, it is likely to prevent villagers from bringing support either to IDPs or to the Karen National Liberation Army (KNLA)\(^{38}\) or People’s Defence Force (PDF)\(^{39}\).

He states: “But for the villagers who work in the jungle and would like to bring food with them, they are being disturbed and prohibited by SAC soldiers. They [SAC soldiers] do not loot the villagers’ property but they disturb the villagers who bring food with them to the jungle. […] I heard that they are not allowed to bring food to the jungle and I also heard that they prohibited the support that comes from organisations.”

Because of the difficulty and risks in transporting goods both back to one’s displacement site and during displacement, local organisations have also been trying to provide assistance to IDPs in the form of cash. An IDP from Ma Htaw village in Mu Traw District explained the importance of cash assistance: “If we receive financial [cash] support, we can go and buy things that we need. If we receive materials, how can we carry or bring them with us when we flee? So it is easier for us if we receive cash. So we can buy what we need. It will be easier to manage things in times of displacement.”

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\(^{37}\) The Karen Emergency Relief Team (KERT) is a collaboration between Karen-led organisations based along the Thai-Burma border, and was formed in March 2021 to support and respond to the humanitarian needs of displaced villagers in Southeast Burma.

\(^{38}\) The Karen National Liberation Army is the armed wing of the Karen National Union.

\(^{39}\) The People’s Defence Force (PDF) is an armed resistance established independently as local civilian militias operating across the country. Following the February 1\(^{st}\) 2021 military coup and the ongoing brutal violence enacted by the junta, the majority of these groups began working with the National Unity Government (NUG), a body claiming to be the legitimate government of Burma (Myanmar), which then formalised the PDF on May 5\(^{th}\) 2021 as a precursor to a federal army.
Even when IDPs receive humanitarian support, it still fails to meet the needs of most villagers. One villager from Ann Hpa Lay village in Dooplaya District, who has now faced multiple rounds of displacement since the fighting broke out in December 2021, stated: “When the villagers have to flee from their village, they face many difficulties but some of the displaced people were supported by outsiders [organisations] with rice [donations]. I think the support includes all kinds of food and clothing. What I want to say is that the supplies are not sufficient even though we still get support. We were supported with all kinds of things but it is not enough for everyone, especially clothing. […] For those who [already] have enough, it is not a problem. The problem is that some families originally do not even have enough for their basic needs. It is worse for them when they have to flee. For food, it does not mean that we do not get support but it is just not enough as the number of displaced people is high.”

The problem of insufficient support is growing daily as fighting and attacks continue to spread and intensify. KHRG field staff visiting Mu Traw District after the January 2022 air strikes remarked that humanitarian aid organisations (mostly local CSO/CBOs and faith-based organisations) are present and providing support, however, it was clear that the support will not be enough for the villagers in the long-term.

To address the current humanitarian crisis, one villager pleaded, “Please support us because we really need it”, and called for the establishment of a “No Fire Zone” where civilians can take refuge and are provided health care and food “because we don’t want to flee to the other country [Thailand]”. 
Chapter 3: Health care

Although the healthcare system has been in crisis throughout Burma since the 2021 military coup, the healthcare situation for villagers in rural ethnic areas is even more critical since support services have greatly curtailed across districts. The Dooplaya District deputy medical officer said in December 2021, “Whenever I am travelling on the ground, people ask me ‘Aren’t there any healthcare workers with you?’” The SAC has placed heavy restrictions on the transportation of medical supplies and increased the number of military checkpoints. Health workers themselves have become significant targets of SAC attacks and have become less active in rural areas where health care is already limited. Some displaced villagers are able to access healthcare services offered by a network of locally based border organisations inside the country and operating near the Thai-Burma border. Although these organisations have been critical in providing healthcare services, the vast majority of IDPs and rural villagers are facing inadequate health care since the coup, while health issues, including the spread of COVID-19, have increased. Many are left with no option but to try to treat themselves.

A. Health care to internally displaced people

IDPs face significantly increased risk of a wide number of health issues due to poor living conditions and insufficient health care. The deputy medical officer in Dooplaya District remarked that displaced villagers are already suffering the consequences of malnutrition and need urgent health care. He observed that those who fled close to Twee Hpah Wee Mountain, “their skin is getting yellow and their stomachs are swollen” (a common sign of a lack of protein in the diet), and added that they are “living in the forest like wild chickens” and thus only eating what is available to them in the forest. When asked what kinds of medicine they used, they told him that they only used herbal medicines.

For some, lack of health care is seen as one of the biggest challenges during displacement. Particularly during monsoon season, which lasts from May until late October, displaced villagers were at higher risk of contracting illnesses, including COVID-19 and vector-borne diseases. In February and March 2022, the region also experienced unprecedented heavy rains in what is normally the dry season. The escalation of conflict and the SAC military’s oppression since

December 2021 in multiple areas led to further displacements and health issues. While those in the semi-formal IDP sites may receive some health care from external organisations, those who do not have access to these sites are struggling to manage their healthcare needs.

Access to health care varies depending on the conditions of displacement, notably the displaced villagers’ ability to travel and the location of the IDP site. In some cases where displacement is sporadic, villagers have been able to return to their village when fighting settles down and may still be able to access medicine if local clinics continue to run. For villagers who face continuous or ongoing cyclical displacement, villagers often need to travel to nearby villages to access necessary medicine from clinics, as clinics in their own village may be destroyed or have been forced to close. Many villagers in Ma Htaw village, Ma Htaw village tract, Dwe Lo Township, Mu Traw District have been displaced for over a year, even before the 2021 coup for some. Because almost everyone fled from the village, there is no longer a clinic. The displaced villagers must travel to Meh Nyoo Hta village to get medicine.

In many cases, IDPs cannot travel out of the places they are displaced due to ongoing insecurity. Because they cannot access medical facilities, some villagers have died as a result. A displaced villager from Ma Htaw village tract described the situation: “Now we are afraid to go to hospital. Actually, we are afraid to go anywhere. […] We are afraid to travel because of landmines. Also, the road is closed. There are many Burmese [SAC] soldiers in the area. We are afraid that fighting might happen.” In recalling the death of displaced villagers, she added: “When the fighting happened, villagers were afraid to send those people [who are sick] to hospital. So they just died, as they did not get medical treatment. For example, Daw Mya Tin, she died because her medicine was gone [she could not retrieve any more critical medicine] because she cannot travel to get or buy medicine.”

Some emergency healthcare support to IDPs is now available along the Thai-Burma border, as multiple IDP sites were formalised in January 2022, making it easier for organisations, in particular KDHW in collaboration with BPHWT, Mae Tao Clinic and Burma Medical Association (BMA), to provide healthcare support to displaced villagers. From December 2021, due to the outbreak of armed conflict and air strikes in the Lay Kay Kaw area of Dooplaya District, KDHW started providing emergency response health care to those who had fled to displacement sites in Burma, along the Thai border. A mobile clinic provided by KDHW is now operating across these semi-formal displacement sites. Those who are ill are thus able to receive a minimum level of medical care, and those who have been injured are able to have their wounds dressed. In some cases, those in critical condition have been able to receive treatment in hospitals in Thailand.

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42 Daw is a Burmese honorific title for female adults, a married woman or a woman of a higher social position.
However, international humanitarian organisations are facing challenges in reaching IDPs that are further inland and at informal sites as transportation of large trucks of material supplies is proving difficult given the political situation and COVID-19. Even prior to the coup, in 2020, border-based health organisations faced challenges sending medical supplies to villages, as searches and seizures by SAC military soldiers began to get stricter. This has only intensified following the coup, as the SAC have increased their military activity and restricted the transportation of medical supplies and equipment. Since December 2021, when the SAC began launching ground and air offensives in Lay Kay Kaw, local service providers noted that transferring medical supplies across the border has become even more critical, yet also more difficult.

Along with lack of knowledge as to where many informal displacement sites are located, the travel restrictions imposed by the SAC have prevented healthcare support from reaching informal displacement sites. Displaced villagers have frequently stated that they have not received any healthcare support since being displaced, unless a health worker was among those who fled. Villagers from Kheh Der village tract, Ler Doh (Kyaukkyi) Township, Kler Lwee Htoo District, who fled in January 2021 and who had been displaced for almost a year at the time of the interview, were provided medical assistance through health workers sent by township and district leaders. However, during the monsoon season, when IDPs were suffering from deteriorating health conditions, health workers left. While they were there, they sometimes did not have the medicine to treat certain illnesses that the villagers were facing.

**B. Health care in villages**

While displaced villagers have faced particular challenges accessing health care, rural areas in general have endured healthcare issues, as the transportation of medicine and medical supplies has been restricted, even blocked, in some areas since the coup. The deputy medical officer in Dooplaya District remarked in December 2021 that even villagers remaining in their villages have been dying from dehydration and diarrhoea. In particular, villages far from the Thai-Burma border and from larger towns have faced...
challenges accessing health care. A local leader from K’Moh Thway area, Ler Doh Soh Township, Mergui-Tavoy District said, “We [those supplying health care in K’Moh Thway area] need a lot of medical support because we do not have sufficient medicine and there are different people who need different medical treatment. We do have a willingness to treat every disease but we cannot do anything because of insufficient medicine.”

Rural villages depend on access to towns for their supply of medicine. Following the coup, the SAC restricted the transportation of medicine and medical supplies. It is unclear whether an official directive was released banning such activity. Villagers however reported having medicine and medical supplies systematically confiscated at security checkpoints near towns, and having to secretly transport supplies from towns if they want to bring them back to their village. A villager from Htee Toh Loh village, Poh Pee Der village tract, Moo Township, Kler Lwee Htoo District stated in December 2021: “There has been an increase in the price of medicine following the coup because there are difficulties in travelling and transportation. [SAC] authorities forbade people to transport and carry medicine so people have to transport it secretly. For instance, when we went to buy the most needed medicines from Mone Town, we had to transport them secretly back to our village.” As a result, the price of medicine and medical care in rural areas has increased, making them too expensive for many villagers to afford. Villagers in many areas have already run out of medicine and medical supplies, and have no other option than turning to traditional/herbal treatments.

Some SAC-run hospitals continue to be open, despite many healthcare workers joining the CDM following the coup. However, the deputy medical officer from Dooplaya District recognised that villagers are afraid to go to these hospitals as they are run by the SAC. Furthermore, as hospitals face significant staff shortages, it is difficult for these hospitals to operate as normal and for villagers to access sufficient medical supplies. A villager in Htee Hpa Doh Hta village tract, Bilin Township, Doo Tha Htoo District said, “We used to rely on Lay Kay and Hpwa Gaw hospitals. The Lay Kay Hospital closed due to health workers joining the CDM. Then, we had to rely on Hpwa Gaw Hospital, but the BGF [Border Guard Force]43 and SAC destroyed it [Hpwa Gaw Hospital] so we cannot do anything now [cannot access health care]. We have to go to Thaton or Hpa-an towns [to access healthcare services] so it is extremely difficult for us.” In many cases, it is likely that those who are in critical condition face the most difficulty reaching hospitals that are far away, yet need access to these facilities the most.

Due to the coup and COVID-19, villagers have not been able to hold gatherings, thus activities carried out by local health providers including health education training have had to stop. A village health committee member from Yaw T’Rwaeh village tract, Kruh Tuh Township, Dooplaya District recognised the challenges in implementing effective training following the coup and said, “In the past [before the coup], we didn’t have any problem of grouping people together [gathering in groups for meetings]. Now if we

43 Border Guard Force (BGF) battalions of the Tatmadaw (Burma military) were established in 2010, and they are composed mostly of soldiers from former non-state armed groups, such as older constellations of the DKBA, which have formalised ceasefire agreements with the Burma (Myanmar) government and agreed to transform into battalions within the Tatmadaw.
group ourselves together for sharing health education to the villagers, outsiders from nearby villages might think that we are coming together to discuss the [anti-coup] protests. Because of this situation, it becomes a problem for us to give healthcare education (HE). So we can’t do HE training anymore.”

Local health providers have also faced challenges in accessing these villages, and in transporting medical supplies in order to run local clinics. Following the coup, communication with field staff also became more difficult. As a result, these organisations have struggled to implement activities as normal in rural areas, creating delays and ineffective implementation, including for monitoring trips and field visits in villages. Some local health providers can also no longer refer patients to SAC-run hospitals due to lack of staff in these hospitals. Instead, they have to build the capacity of their own health workers, which takes time and can be ineffective in comparison.

KDHW has long been providing essential healthcare services to rural villagers throughout Karen State. However, since the coup, KDHW often does not have sufficient supplies or the ability to treat major illnesses in certain areas that are difficult to access. In some areas, clinics operated by KDHW continued to run in 2021, but were then forced to become mobile clinics in order to continue their services. Still, many of the clinics that continue to run do not reach rural villages. For instance, the nearest KDHW clinic to Hkler Hkoh village, Ma Htaw village tract, Dwe Lo Township, Mu Traw District is in T’Dwee Hkoh village, over three miles away along jungle roads. Given the ongoing insecurity in the area, it is too far for villagers to reach.

BPHWT has typically been able to reach more remote areas to provide free medicine and supplies to rural villages. This has ensured that villagers are able to get treatment for at least some illnesses. BPHWT operates in all seven districts of Karen State, and has a strong presence in Mu Traw District. They have previously established six BPHWT centres and two hospitals in Dwe Lo Township, four centres and two hospitals in Lu Thaw Township and two centres in Bu Tho Township. However, following the coup, BPHWT had to move out from where they were based in Mu Traw District.

BPHWT also provides services in Dooplaya District. However, one villager from K--- village, Wah Mah village tract, Noh T’Kaw Township, Dooplaya District remarked that BPHWT could not provide treatment and medicine for all types of illnesses, and thus villagers still had to obtain certain medicines on their own. For those with little income and livelihood challenges, this can have a significant impact on their health if they cannot access these medicines. Therefore, it has become even more difficult for the
villagers to access necessary medicine and healthcare. In Ler Doh Township, Kler Lwee Htoo District, villagers reported facing a shortage of supplies, including healthcare supplies as there were no clinics and not enough staff from BPHWT to provide healthcare to the whole township.

As many rural villages have been cut off from external aid following the coup, many villagers have been supporting one another on a local level to ensure that the village has sufficient health care. In Noh Law Hsoo village, Meh Klaw village tract, Bu Tho Township, Mu Traw District, one villager who is able to travel to town has been helping buy medicine for the rest of the village. A local villager explained, “We don’t have a clinic in our village but we have a female teacher [health worker]. She buys medicine from the town so villagers go and ask [for] medicine from her if they need [it].” With decreasing access to western medicine, villagers have also taken to using traditional herbal medicines to treat a multitude of illnesses including malaria and COVID-19.

In some areas, those in positions of authority have begun to organise alternative healthcare services in local areas. In K’Moh Thway area, Ler Doh Soh Township, Mergui-Tavoy District villagers are being trained by a CDM doctor who is taking refuge in the area and then providing 24-hour health care to their local village. Local township leaders had previously discussed building a public hospital that rural villagers in the district can access. They had not started arrangements for this project yet, and are unlikely to be able to do so in the current context. Without support and funding from other organisations, it is unlikely that villagers will be able to sustain healthcare support among themselves. A local leader in Ler Doh Soh Township emphasised that medicine and supplies remain scarce without the support of local CSO/CBOs.

**C. COVID-19**

Since the emergence of COVID-19, multiple locally-based organisations, including KDHW, have worked to provide a collaborative response for COVID-19 emergency support and have engaged in the distribution of some COVID-19 testing equipment and medicine. Since the coup, these local organisations have faced challenges in delivering COVID-19 support, largely due to frequent searches and seizures by the SAC and concerns regarding the safety and security of their workers in transporting medical supplies. The SAC has attempted to use the pandemic as a weapon against the people of Burma by claiming sole control of medical care and blocking key organisations from helping prevent the spread of the virus. The SAC’s crackdown on health workers and attempts to cut off needed medical supplies, including oxygen, contributed not only to reduced healthcare services in most rural areas since the coup, but also to the development of a third wave of COVID-19 beginning in July 2021. At that time, KHRG began receiving reports of outbreaks, with entire villages being infected. The number of COVID-related deaths has also increased.

Communities facing displacement have been particularly impacted by the third wave of COVID-19. The SAC’s actions have negatively impacted access to healthcare, particularly in rural areas. The lack of support from local and international organisations has compounded the challenges faced by communities in achieving healthcare for their populations. The ongoing conflict and displacement have further exacerbated the health crisis, underscoring the urgent need for targeted assistance and long-term solutions to address the resulting health needs.
COVID-19. When fighting and shelling break out, villagers are often forced to hide together in makeshift bunkers for extended periods, or shelter together in cramped spaces during displacement, making it difficult to control the spread of the virus under such conditions. The lack of testing in many areas has also meant that villagers are usually unaware of being infected prior to displacement, and thus unable to take necessary precautions. Many villagers have however also expressed their lack of concern about COVID-19 when faced with these other threats: “When villagers flee [from SAC soldiers], they forget to be afraid of the Coronavirus. They are only afraid of SAC soldiers.”

The spread of the virus has been exacerbated by the fact that few rural villagers have been vaccinated. Few areas in KHRG’s operational area have had access to the vaccine. Even when available, most rural villagers do not trust the SAC to administer vaccinations to them. A villager from Noh T’Kaw Township, Dooplaya District said, “Even though they [the SAC] talk about it [providing vaccines], people in L--- village won’t accept the injection [vaccine] if it comes through the SAC. We are afraid to take it.” In the newly created semi-formal displacement sites along the Moei River, border-based and ethnic health providers have also been working to provide vaccinations to IDPs. However, among the interviews that KHRG conducted, some villagers continue to express disbelief that COVID-19 exists, meaning that greater COVID-19 awareness is still needed. In an interview conducted in November 2021, a health committee member from Kruh Tuh Township, Dooplaya District expressed concern that this would deter organisations from providing the vaccine to rural villagers: “I think the reason they [organisations] are not coming is because the villagers are not willing to get the vaccination. The villager in charge used to collect the names and there were only a few people who gave their names to get the vaccine. Maybe that is the reason [organisations are not coming]. I am not sure.” Given the reduced access to health care since the coup, a failure to provide vaccinations can lead to even greater risk of COVID-related deaths and health complications.

D. Vulnerable populations

Since the coup, women have faced challenges gaining access to sufficient maternal health care. Pregnant women experiencing displacement are at significant risk of suffering complications during childbirth, yet there is a lack of healthcare workers equipped to help with pregnancy issues and childbirth at displacement sites. A female IDP from Ma Htaw village tract, Dwe Lo Township, Mu Traw District highlighted this challenge. As everybody from the village fled to different areas for what has been a year, women still do not have access to midwives, putting both the mother and the child at risk. This is also the case in rural villages as pregnant women and mothers cannot access hospitals in cases of emergency. In Htee Toh Loh village, Poh Pee Der village tract, Moo Township, Kler Lwee Htoo District, if midwives cannot deliver a baby in the village, pregnant women have to go to the hospital in Mone Town. However, it is no

longer easy to reach this hospital as it was before, given the insecure situation. Following the coup, pregnant women in the same village also stopped receiving certain prenatal care including vitamin injections. With lack of staff in hospitals and many pregnant women needing urgent medical attention, pregnant women are in danger of facing critical health conditions. Many children are no longer receiving routine vaccinations or birth certificates, which will have long-term consequences.

The elderly and disabled are also at higher risk of not having their health needs met. With limited healthcare services and decreasing medical supplies in rural areas since the coup, the elderly and others with ongoing health conditions are among those who are increasingly dying as a result of illness and COVID-19. A pastor in Noh T*Kaw Township, Dooplaya District noted that "it is good if we have [a clinic] in our village because it is not easy for elders to go [to other villages for medical treatment]". The elderly and disabled are often those who are unable to displace despite the insecurity of staying in the village. Those who do displace are likely to endure living conditions that are particularly harsh and unsuitable for these more vulnerable populations, and are also more likely to suffer increased health problems as a result. With little access to proper health care during displacement, many elderly IDPs are dying while displaced.

The right to be free from interference with one's health, and entitlement to have access to health facilities, goods and services are core obligations under international human rights law. It is thus critical that healthcare supplies be made available and that their distribution not be blocked, as without the necessary medical supplies and medicine, villagers with illnesses face significant challenges in all aspects of living. Healthcare providers in rural villages also need to be supported to ensure sustainable health care at a local level. Because healthcare workers face risk due to the ongoing conflict across districts, accommodation needs to be provided to staff to ensure their safety when travelling to different regions. Finally, COVID-19 testing equipment and prevention materials need to be distributed across districts and trustworthy vaccination programmes need to be developed.
Chapter 4: Education

It would be easy to think that given the high levels of displacement, conflict and insecurity that villagers are facing in Karen State that education is no longer a priority for local communities. Despite the challenging circumstances, villagers are taking great effort to make sure that the children in their communities are able to continue their studies. They are using every resource at their disposal to keep schools open and teachers housed and fed. Meanwhile, external sources of support have largely disappeared, meaning that schools that do remain open are almost exclusively funded through local channels. This section presents the actions taken by local communities to keep their children in school, along with the existing challenges and needs of these communities.

A. School closures

In some areas, villagers reported that schools have been closed for two years now. The ongoing COVID-19 pandemic, made worse by the SAC’s poor handling of everything from testing to access to medical care and supplies, has left many schools closed since March 2020. The escalation of armed conflict, air and ground attacks, and human rights violations since the 2021 military coup has led to widespread displacements and the destruction of some schools. The military coup has created additional strains on educational services. Many government teachers joined the CDM and refused to teach in what became SAC-run schools. Students (in some cases encouraged by their parents) also refused to return to schools run by the SAC. In some cases, SAC and BGF soldiers have also threatened teachers, parents and students to try to force them to return to SAC-run schools, only making villagers more concerned about sending their children to these schools.

A villager in mixed-control Htee Toh Loh village, Poh Pee Der village tract, Moo Township, Kler Lwee Htoo District stated that in his village, where school is offered through Grade 9, school attendance at the government (now SAC-run) school has dropped significantly since the coup: “After the coup, the military tried to reopen the school, but it did not go well. The school reopened for a month and it closed since then. When the school reopened [again] only around 25 percent of students attended class.”

Overall, Karen Education and Culture Department (KECD) schools, at least in some areas, have managed to stay open on a fairly consistent basis. Some closures have resulted from threats by SAC soldiers. In Kaw T’Ree Township, Dooplaya District, the M--- village secretary told villagers in Kyaw Hta village tract that the SAC military will do something bad to them if they try to open KECD schools since villagers had refused to reopen government schools.

49 According to KECD, as of the 2019-2020 academic year, there were 1,495 schools with 164,875 students enrolled and 11,444 teachers serving at these schools. It is unclear how many KECD schools are still open.
KHRG received multiple reports that enrolments at KECD schools have increased due to government school closures and students refusing to attend SAC-run schools. But increased enrolments have placed heavy strain on the schools’ resources. Many schools reported not having enough teachers for the number of students, not having sufficient supplies and classroom space, and not having the appropriate resources to add additional grades (since the schools that have remained open may not have previously served all grades needed by the community).

Communities have also turned to creating self-funded schools in an effort to meet the educational needs of the children in their community. And in fact, because SAC authorities are less likely to be aware of the existence of these self-funded schools, they are less likely to face threats to shut down than KECD schools. The village tract administrator of Yaw T’Rweh village tract, Kruh Tuh Township in Dooplaya District stated that while they were worried about threats from the SAC regarding the self-funded school that they created, it ended up not being an issue: “Actually there aren’t any [threats] because the [SAC] government doesn’t know about it [the existence of the school].”

B. Funding challenges

Schools, however, require funds to keep running. Many KECD schools have been able to keep paying teachers’ salaries, but that has not been the case everywhere. The village head of N--- village, Htee Hpa Doh Hta village tract, Bilin Township, Doo Tha Htoo Township noted in mid-December 2021 that teachers at the KECD school are no longer receiving their salary: “They are [now] volunteering in the service of education. They just receive some support [from KECD].” He added that while they have accommodation, “they do not have good food. Sometimes, they do not even have vegetables so they just have to have eat [rice without curry] like that. Sometimes, the school principal buys good curry for them so they can have a good meal.”

In nearby P--- village, Htee Hpa Doh Hta village tract, Bilin Township, there is only a self-funded school through Grade 4. A local villager stated that the teachers are not receiving any salary, only rice from the villagers: “We just help them by sharing food [rice] with them; some students give one basket of paddy, some of them give two baskets of paddy [based on the school grade]. […] [The rice] does not fully cover [teachers’ livelihoods], but the teachers are just serving for the children’s education so they accept it.” He added that if the children are able to stay in the village for their education, it is less of a burden on their family because the children live and eat at home. However, many parents have to send their children outside the village. In those cases, parents struggle, and often go in debt: “Yes, we have a lot of challenges [to send our children to school]. Some people have to borrow money from other villagers when their children who study in other places request money. Therefore, parents are in debt [for their children’s education] so they just have to repay it by doing this and that work [odd jobs].” The village head of Htee Hsee Baw Hkee in Bilin Township stated that dormitory fees, just for food, can cost parents 150,000 kyats [USD 81.02] annually per child.
Similarly, in Q--- village, Htee Hpa Doh Hta village tract, Bilin Township, the local community decided to open a self-funded school “because the students were away from school and they were just playing on the road so it was not good for their health as well”. Another villager explained that due to the closure of the government school, “If we do not create a self-funded school, our children will not know how to read anymore.” But due to a lack of teachers, the community is drawing on local villagers to carry out the teaching: “They are serving the community’s education of children. They are young villagers who graduated Grade 10 or are waiting for the results of their examination and so teach in a self-funded school. Students’ parents support them a little bit and KECD also supports them so they will receive some support, but most of all they are willing to serve for the community education.”

In Mu Traw District, the village head of R--- village, Ma Htaw village tract, Dwe Lo Township said that since the government school closed and they opened a self-funded school, the village has had to provide 30 baskets of rice to each teacher because they receive no salary. He stated that: “Some villagers faced challenges, as they cannot give rice because they don’t have land to work on.” In such cases, other villagers have been able to help by providing extra rice. Villagers in Q--- village, Htee Hpa Doh Hta village tract, Bilin Township had to provide 15 baskets of rice, in total, to each teacher for the school year. Teachers also received some support from KECD, but no official salary.

Although villagers have been able to help each other thus far in order to keep schools running, if the situation continues, communities will have fewer resources. Already, external support has dwindled. Prior to the coup, Karen State Education Assistance Group (KSEAG), a community-based organisation that aims to provide equitable education assistance to schools across Karen State, had been helping provide school materials through funding from Child’s Dream Foundation, a Thai NGO. According to a report by Child’s Dream Foundation, in 2019, KSEAG had received USD 180,000, and their services reached on average over 1,500 schools, approximately 150,000 students and more than 10,000 teachers annually, including in the most remote areas.51 (Child’s Dream Foundation had also provided USD 220,000 in 2019 to KECD to support teacher training.52) The village tract administrator of Yaw T’Rweh village tract, Kruh Tuh Township in Dooplaya District noted that, since the coup, they stopped receiving this support.

KHRG received little information about educational support from larger international organisations. However, a villager in O--- village, Poh Pee Der village tract, Moo Township, Kler Lwee Htoo District stated that there is currently a school being funded by United Nations Children’s Fund (UNICEF) in partnership with a local Karen Christian organisation to help children who cannot afford to go to school and who cannot read and write: “Students who cannot attend Myanmar government school, they can attend the school funded by UNICEF. The school days are like the other schools. It opens from Monday to Friday and closes during the weekends.” The school covers Grades 1 to 4, and teachers are selected among youth from local churches.

51 Karen State Education Assistance Group, “Ensuring educational supplies for schools in Myanmar’s conflict zones”, March 2019.
C. Challenges due to displacement

Villagers and communities facing displacement have encountered the biggest challenges maintaining educational services for their children. Since early 2021, villagers in Mu Traw District have experienced ongoing displacement due to increased fighting, shelling and air attacks, as well as general insecurity. Shortly after the coup, KHRG reported displacements and school closures in multiple parts of Lu Thaw and Bu Tho townships, Mu Traw District as SAC troops began extending their operations into KNU-controlled areas, patrolling and indiscriminately firing mortars.\(^{53}\)

Villagers from Kheh Der village tract, Ler Doh Township, Kler Lwee Htoo District have been displaced since December 2020 and have not been able to return due to an escalation in conflict since the military coup. Students could not return to their village and go to school properly. Despite the circumstances facing them, villagers have attempted to keep schools running. Pa Kaw Hta Primary School, Kheh Der Middle School and T’Kaw Der Middle School have been operating while hiding in the forest. The school teachers and school committee were also planning to build temporary schools in the hiding site so that the displaced children can continue their studies under better conditions.

As semi-formal displacement sites in Dooplaya District have only recently emerged, plans for addressing the educational needs of IDPs are still being worked out. KECD has stated that they plan to form mobile schools in all IDP sites in Dooplaya District, and have already received some support from Karen Refugee Committee (KRC) and local KECD staff to implement this plan. They noted that teachers are among those sheltering in IDP sites, and thus will be able to undertake the actual teaching at these mobile schools. Due to ongoing armed conflict, there are no plans yet for building new schools because they worry the buildings will be destroyed by the SAC.

When schools face closures for extended periods, children are less likely to return to school at all even when schools reopen. This was a problem identified by parents and other community members during the initial school closures that took place as part of the COVID-19 measures back in 2020. Older children were likely to start working or get married instead of finishing their studies. Community members spoke of children getting into trouble, turning to drugs and alcohol, because they have nothing else to do and are themselves worried about their own future. KHRG was unable to establish whether young girls and young boys are equally impacted by school closures and drop outs. Since the coup, concern is growing because, as one village head in Mu Traw District noted, “[c]hildren are just getting old but they grow up without getting a chance to study.”

Impeding access to education, particularly when ethnic minority groups are directly or indirectly targeted, is a violation of a variety of international humanitarian and human rights laws, including provisions regarding the rights of children. Lower educational levels can have long-term impacts on ethnic minority groups and contribute to further economic and social disadvantages for these communities in the future. It is for that reason that villagers themselves have been so adamant about maintaining their children’s education amidst the bombs and gunfire, and despite displacement. As the village head of Htee Beh Hka Hta village in Dwe Lo Township, Mu Traw District stated: “It will not be good if we cannot access education. For us, it is okay because we are getting old. I am saying it for the children.” Social assistance programmes to protect education and keep schools open in situations of insecurity and armed conflict rarely exist, but need to be developed in order to prevent the further marginalisation and denial of rights of ethnic minorities, since education is not just an end in itself, but an “enabling right, empowering access to other human rights, to meaningful participation in society.”

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Chapter 5: Local actors and the need for funding alternatives

While local actors are working to provide needed emergency humanitarian support to the growing population of displaced persons, they still struggle in the delivery of services, even at the more formal displacement sites that have recently been created. Because these sites are on national territory, those receiving support are considered ‘internally displaced’. Thus, funds earmarked for refugee protection are not available to the local actors currently providing this support. In general, funding for IDP protection is more difficult to obtain because less substantial overall and because IDP numbers and needs are poorly documented in assessments and reports that determine funding allocation. Funding is further limited by the fact that many of the local CSO/CBOs providing support in this case are unregistered organisations, and thus are ineligible for the few funding options that are available.

Instead, the majority of funding is typically directed toward large international NGOs and multilateral organisations. According to data collected by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) Financial Tracking Service, in 2016 for Burma, only 0.2% of incoming funds allocated to NGOs (and only 0.069% of total incoming funds) were distributed to local NGOs. However, most of the international organisations, to whom the majority of funding is directed, are currently unable to operate fully: in Burma, because of the armed conflict and security situation and/or actual blockages and attacks on aid workers by the SAC military; and in Thailand, because of barriers created by the Thai government.

After the outbreak of clashes in the Lay Kay Kaw area in December 2021, P’Loo Gyi High School in Kaw T’Ree Township, Dooplaya District served as a key site for the distribution of emergency support. Support was provided by local community members and border-based CSO/CBOs. [Photo: KHRG]

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56 76% of UNHCR’s global budget in 2021 was tied to refugee projects, whereas only 15% was tied to IDP projects (final budget for IDP projects in 2020 in Asia and the Pacific was smaller, only 5%). See UNHCR, “Executive Committee of the High Commissioner’s Programme: Update on budgets and funding (2020-2021), Standing Committee, 80th Meeting (EC/72/SC/CRP.7)”, March 2021.

The other large percentage of funding has typically gone to the government of Burma. Since the coup, some foreign governments and stakeholders have effectively treated the SAC as the government of Burma by continuing to direct funds to those currently in power. Others, in an effort to avoid working with the SAC and show their non-recognition of the SAC as a legitimate government, have tried to redirect funds to organisations like the Association of Southeast Asian Nations (ASEAN) and other international partners. However, even these efforts often fail to address the problem of directing funding elsewhere. Under ASEAN’s Five-Point Consensus, developed to address the political crisis in Burma since the coup, the ASEAN Coordinating Centre for Humanitarian Assistance on Disaster Management (AHA Centre) was given the responsibility of coordinating emergency response and humanitarian relief operations in Burma. Standard operating procedures for the AHA Centre, however, allow the Burma government, as the receiving party of ASEAN assistance, to “exercise the overall direction, control, coordination and supervision of the assistance within its territory.” Furthermore, because Burma holds a seat on AHA Centre’s Governing Board, and is represented by the Ministry of Social Welfare, Relief and Resettlement, which is currently controlled by the SAC, the SAC can potentially dictate the terms under which the AHA Centre operates, including who the AHA Centre works with in the provision of humanitarian aid.

As such, there are few existing channels that allow funding to make its way directly to local service providers and protection agents, despite the fact that under the current situation these are the primary actors providing emergency support. Without sufficient funding, their ability to continue providing support will remain highly limited. Already stretched thin, support for those in need will only become tighter as the population of displaced persons grows. Furthermore, the vast majority of the funds being allocated to resolve the humanitarian crisis are actually not being used since most large international organisations have yet to gain access to key service areas. If the funds are being used, then the question needs to be asked, to what purpose, since it is more than clear that those funds are not reaching the target populations or the actors currently providing emergency support.

IDPs and local community members come together at P’Loo Gyi High School to prepare food to support other displaced villagers who have fled to P’Loo Gyi, Kaw T’Ree Township, Dooplaya District. This photo was taken on December 18th 2021. [Photo: KHRG]

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Conclusion

In presenting the humanitarian crisis and challenges to humanitarian support, this report has highlighted the needs and experiences of villagers who have been displaced, but also of those who remain in their villages. In the current context, where safe displacement options are rare, some villagers are choosing to remain in their village despite armed conflict, shelling, abuse and threats by SAC soldiers, the imposition of forced labour and other human rights violations. Thus, villagers face a variety of threats to their security and to life whether they choose to flee or to stay.

Because the SAC has returned to a “four cuts” approach of cutting off essential resources to civilians as a means to destroy the support base of ethnic armed organisations, all villagers in Karen State, whether displaced or not, are currently confronting problems in access to food, work, health care and education, and thus are in need of support.

Local service providers and local communities themselves have been instrumental in responding to the needs of rural villagers as the humanitarian crisis deepens. Meanwhile, most external NGOs and large international organisations have been prevented from undertaking protection services and offering humanitarian support, whether in Burma or across the border in Thailand.

UNHCR stated in a recent report analysing the protection situation:

There is a wide network of local civil society organizations (CSOs) implementing various activities in border areas. They are often trusted by local authorities and able to reach even remote areas to deliver assistance. In Mae Hong Son province, many CSOs have a long experience working in the refugee temporary shelters, usually providing basic assistance such as food, health and WASH. Although some of these actors have a long experience delivering humanitarian assistance, their capacity varies, with gaps in terms of protection expertise in particular.\(^{59}\)

They then called upon humanitarian actors to “invest resources in building the capacity of local civil society organizations with the ability to assist refugees where they are displaced and advocate for site-level expansion of the protection space”.\(^{60}\) While such actions are welcome, recommendations of this nature still fall short of recognising the true contributions being made by local actors and the ways in which protection frameworks and funding schemes are set up to exclude local actors from larger decision-making about how aid distribution should and could function. What local organisations really need from the international community is not instruction or direction, but funds and resources; and they need it now.

In an earlier report, local CSOs, including KHRG, presented their concerns about existing solutions to the humanitarian crisis, stating that donors and international humanitarian organisations currently face a crucial choice between sticking to orthodox


\(^{60}\) Ibid.
humanitarian practices and principles that ultimately reinforce the military junta’s ability to weaponise humanitarian aid and further oppress ethnic populations, or engaging meaningfully with those CSOs and CBOs on the ground that are fully capable of providing aid to the communities they serve.61

KHRG reiterates the recommendations of that report in asserting that solutions “should come in the form of support for existing local structures to provide humanitarian aid directly to CSOs, rather than creating new structures. These are the structures built by the local community, which could be eroded if an INGO overrides their functions through a top-down approach in the distribution of aid. Thus, donors and INGOs must listen to communities, ensure conflict sensitivity and support local communities to be the driving agents in their own humanitarian aid solutions. […] Donor funding must not sideline ethnic communities from key decisions or through bureaucratic obstacles but be equal partners in aid programs and services.”62

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62 Ibid.
Photos: Front and back cover

Front cover photo:
This photo was taken on December 23rd 2021 on the Thai side of the Moei River across from Thay Baw Boh village, Thay Baw Boh village tract, Kaw T'Ree Township, Dooplaya District. In this photo, Taw Naw High School students were crossing back to Thay Baw Boh village after they were prevented from staying in Thailand by Thai authorities. [Photo: KHRG]

Back cover photo:
This photo was taken on December 24th 2021 in a temporary displacement site near P'Loo Lay village in Kaw T'Ree Township, Dooplaya District. Villagers in surrounding areas have taken refuge from the airstrikes and fighting. [Photo: KHRG]

[All photos: KHRG unless cited otherwise]
Since the 2021 military coup, the security and human rights situation in Burma/Myanmar has seriously degraded, creating a dire humanitarian crisis that is being inadequately addressed. A large portion of the population in Southeast Burma is living in conflict-affected areas and enduring forced displacement, extreme food insecurity and constant threats to health and safety. Unable to enter Thailand or seek protection under international conventions, civilians are being subjected to threats to life by the State Administration Council due to not only armed conflict, air strikes and other forms of violence, but also the deprivation of humanitarian aid.

Most external NGOs and large international organisations have been prevented from undertaking protection services and offering humanitarian support. Local service providers and local communities themselves have been instrumental in responding to the needs of rural villagers, but seriously lack funds and resources. In examining the major logistical and security challenges preventing aid from effectively reaching its target recipients, this report highlights the urgent need for greater recognition of and investment in these local channels, and asserts that the most effective solutions recognise local communities as the driving agents in their own humanitarian aid solutions.

Karen Human Rights Group (KHRG) was founded in 1992 and documents the situation of villagers and townspeople in rural Southeast Burma through their direct testimonies, supported by photographic and other evidence. KHRG operates independently and is not affiliated with any political or other organisation.