



HIGHLIGHTS

- **The first joint WHO/MOH mobile health team has successfully gathered information on 126 of 162 tuberculosis patients missing since the cyclone in Ngapudaw, Labutta and Bogale.**
- **No new cases of measles and acute jaundice have been seen in locations that had previously reported such cases, according to reports from the second weekly bulletin on disease surveillance based on the Early Warning, Alert and Response System (EWARS).**
- **The preliminary outcomes of the Post-Nargis Joint Assessment (PONJA) are expected to be presented at a conference organized by the Tripartite Core Group (TCG) of the Government of Myanmar, ASEAN and the UN on 24 June.**

HEALTH ASSESSMENT AND SITUATION UPDATE

- The preliminary outcomes of the Post-Nargis Joint Assessment (PONJA) are expected to be presented at a conference organized by the Tripartite Core Group (TCG) of the Government of Myanmar, ASEAN and the UN on 24 June.
- According to Myanmar state media, health actions to control diarrhoea, dengue fever, malaria and cholera, such as drinking water chlorination and fumigation of mosquitoes, are being conducted daily in Pyapon townships.

HEALTH CLUSTER RESPONSE

1. Disease Surveillance

- The second disease surveillance bulletin in cyclone-affected areas, based on the Early Warning, Alert and Response System (EWARS), shows an increase in reporting with 92% of partners participating.
- Improvements in the situation have been observed compared to the first EWARS report:
 - No new suspected measles cases were reported after 6 June. A total of 7691 children were vaccinated in 10 camps, of which 4174 were less than 5 years.

- A strategy for flies-control, comprising of larvaeciding and surveillance, has been put in place.
- No new cases of Acute Jaundice (AJ) have been reported in the locations that previously recorded such cases.

2. Health Action

- A WHO team including international staff has left for Patheingyi and deeper into the delta area to provide support and conduct assessments.
- The first joint WHO/MOH Mobile Health Team has returned after a week-long mission to hard-to-reach areas in Ngaputaw, Labutta and Bogole. The team gathered information on 126 of 162 tuberculosis patients missing since the cyclone, through intense community participation in villages and camps. This is an important intervention to prevent a longer phase of treatment interruption and emergence of multi-drug resistance. Myanmar is one of the 22 TB high burden countries with 133 000 registered TB patients in 2007, an estimated 10% of those co-infected with TB/HIV.
- Samaritan's Purse staff has been training hundreds of Myanmar's Christians in emergency relief procedures to promote health and sanitation. SP has also provided advisors in food distribution and clean water experts.
- Save the Children has developed and translated into Burmese a short, briefing session for local relief workers (staff and volunteers) departing for work in the disaster zone. The primary goals of this 45-minute session is to prepare staff and volunteers psychologically for the experiences they will encounter while working in the disaster zone with survivors of Cyclone Nargis and to enhance positive coping with the demanding work they will be doing in the weeks and months ahead.
- Save the Children is training staff on providing appropriate psychological first aid to children and adults in the affected areas.

3. Funding

- Canada has provided funding through the SC to provide boat-based medical services.
- Denmark has provided funding through WHO for reduction of morbidity and preventable mortality in the affected population.
- Sweden is funding general health activities in the cyclone affected areas through MSF –Switzerland.

HEALTH COORDINATION

- A new format for the Health Cluster Who-What-Where (WWW) service is being designed in order to include numerical data to support the information collected over the course of the response. This additional numerical information is intended to give a fuller indication of gaps in health care provision.
- The health cluster partners have finalized the indicators for the One-year appeal process in the latest cluster meeting. The final indicators are taken from the cluster's Joint Plan of Action (JPA).
- The health cluster information manager is currently working on a new user-friendly reporting system for Who-What-Where, which is based on the cluster JPA. It is expected to be used on a trial basis next week.

NEXT STEPS

- A close collaboration has been formed with the WASH cluster to work on control of water-borne diseases. This will ensure routine water quality and quantity indicators from areas reporting water-borne diseases.