

HIGHLIGHTS

- 1. Key hospitals are functioning. However, outlying areas are difficult to reach. The Ministry of Health is trying to expand coverage by sending health assistants and midwives to health centres and healthcare delivery points.**
- 2. Reports from Health Cluster partners call for psychosocial support to the affected people. WHO guidelines for mental health in emergencies have already been translated into the local language. However the local human capacity to respond to this need are limited.**
- 3. The latest report from the state media inform that the death toll is 77 738, with another 55 917 missing, and 19 359 injured. The United Nations' latest estimate is that 2.4 million people are affected, many of them severely and that 150 000 people are living in 120 temporary settlements in the Irrawady delta.**

HEALTH ASSESSMENT & SITUATION UPDATE

- The latest report from the state media inform that the death toll is 77 738, with another 55 917 missing, and 19 359 injured. State media also report that Myanmar has spent over 50 billion kyats in relief and rehabilitation efforts so far.
- The UN estimates that 2.4 million people are affected. Initial UN estimates also indicate that there are 150 000 people living in 120 temporary settlements in the Irrawady delta.
- The Ministry of Health has a team of high-level officials working out of Yangon General Hospital responsible for planning, managing and coordinating the overall emergency response in health.
- Key hospitals are functioning and health supplies continue to reach the major administrative centres. However, outlying areas are difficult to reach, and many health structures are damaged or destroyed.
- The Ministry of Health is expanding coverage beyond hospitals by sending health assistants and midwives to strengthen the human resources at health centres and healthcare delivery points. The health workers are conducting such as chlorination, vaccination, setting up mobile health outreach teams, disease surveillance. They will be involved in health promotion as well.
- The Ministry of Health has redeployed 10 medical doctors and 12 nurses as well as three Public Health Officers from Mandalay and Yangon General Hospital to Ma U Bin hospital.
- The government is encouraging private companies to assist in the damaged areas. This also applies to private hospitals, one of which is sending a medical team and nurses to undertake medical care in Ngaputaw.
- The government organized, for international partners, a visit of affected areas which included temporary shelters in Kyauktan, Dedadye and Kungyangon

townships. The shelters were well set up and included medical services. However they have a limited capacity to respond to the large number of people needing assistance.

- John Holmes, the UN Emergency Relief Coordinator, has arrived in Yangon and will meet with the Cluster leads.

HEALTH CLUSTER RESPONSE

1. Supplies

- WHO supplied one emergency health kit to the Ma U Bin Hospital which is functioning as a referral hospital for the affected areas. The kit will cover 10 000 people for three months.
- The 2000 anti-snake venom vials that arrived from Thailand have been dispatched to the affected areas.
- UNFPA reports that their relief supplies cover a population of 150 000 and the target for next week is to cover 300 000. UNFPA supplies include clean delivery, maternal health and reproductive health kits including family planning items.

2. Medical Care and Human Resources

- Reports from health partners suggest a strong need for psychosocial support to the affected people. WHO has distributed guidelines for mental health in emergencies which have been translated into the local language. However the local capacity to respond to this need is limited.
- UNICEF reports that there is an urgent need to equip the temporary shelters with space for clean and safe delivery and is taking action to this effect, as well as supplying clean delivery kits.
- The Ministry of Health has trained approximately 50 epidemiologists posted in the affected areas in the management and control of gastro-enteritis, as well as engineers to improve water quality and sanitation. WHO provided guidelines to the participants on the management of cholera and acute diarrhoea.
- WHO is also distributing guidelines on management of vector-borne diseases like dengue, leptospirosis and chikungunya for health officials in the affected regions.
- The Department of Health is preparing for a possible dengue outbreak in the affected areas, as this vector-borne disease is endemic in this region, and has sent the insecticide and spraying equipment provided by the Health Cluster.

3. Surveillance

- The daily disease surveillance is limited by difficult access to the worst affected areas. The Health Cluster is exploring ways to make this surveillance more effective and expand its reach by drawing on both formal and informal reports.

HEALTH COORDINATION

- Based on the current needs and logistical feasibility, the UN country team has identified three sub-operational hubs based in Patheingyi, Labutta and Bogale

- to support with coordination and information management the humanitarian response. They will be managed by UN national staff. The centres will have multi-sectoral coordination functions.
- WHO provided a briefing for a team of doctors from the Thai Ministry of Public Health that has arrived in Myanmar to support the relief work.

NEXT STEPS

- The Health Cluster's plans encompass the relief and recovery phase and are being finalized.
- The Health Cluster and Water and Sanitation (WASH) clusters are strengthening their collaboration to ensure rapid response to any cases of severe diarrhoea. The health cluster receives rumours and information from different sources, and these are discussed with the WASH cluster lead to agree on suitable action. The WASH cluster has teams available and is able to send ORS and chlorination supplies to the areas where cases have been reported.
- WHO continues to advocate with the donors to mobilize stronger support for the health sector. Australia donated 2.4 million Australian dollars and DFID will increase its contribution US\$ 493 000. The Flash Appeal will be revised and readjusted during the coming weeks as assessments bring in more clear information on needs.