



HIGHLIGHTS

1. According to the casualty figures provided by the Myanmar state media as of 13 May 2008, 31 938 people are reported to have died, 1403 injured and 29 770 are missing due to Cyclone Nargis.
2. Health sector relief activities have been further intensified in the affected areas. Ten Regional surveillance officers (RSOs) from WHO have been placed at the township level to support health officials in the affected areas as part of the efforts to strengthen disease surveillance activities.
3. A number of people in the cyclone affected areas are in need of treatment for diarrhoeal diseases, acute respiratory infections (ARIs) and post-cyclone injuries. NGOs working in those areas have reported setting up mobile clinics and treating people living in temporary shelters.

HEALTH ASSESSMENT & SITUATION UPDATE

- The latest statistics from the Myanmar state media indicates that 31 938 people have died in the aftermath of the cyclone "Nargis", another 1403 injured and 29 770 are missing.
- An increasing number of people with diarrheal diseases, acute respiratory infections (ARIs), and trauma are being provided treatment. NGOs working in the affected areas have reported that they are organizing mobile clinics and providing medical care to people living in temporary shelters.

HEALTH CLUSTER RESPONSE

1. Supplies

- Aid efforts are beginning to reach the affected population. The initial supply gap including emergency health drugs, supplies and kits is gradually being met by the health agencies.
- Fogging machines and bleaching powder have been procured and are being dispatched to the affected areas to prevent possible outbreaks of malaria and other water and vector borne diseases.
- WHO has provided five tents to Myanmar, to be used as temporary health posts for delivery of essential primary health care to the affected population.

2. Funds

- Funding support provided by the UK Department for International Development (DFID) and the Italian government has enabled WHO to intensify health sector interventions in the affected areas.
- The joint health cluster proposal for the Central Emergency Response Fund was submitted on 12 May 2008, in Myanmar amounting to four million USD for health, out of which US250 000 has been earmarked for health sector activities by various health partners under the cluster leadership of WHO.

3. Surveillance

- Ten Regional surveillance officers (RSOs) from WHO has been placed at the township level to support the local health officials to strengthen the disease surveillance activities. The health partners (NGOs) have agreed to feed the surveillance information directly to the RSOs. This would ensure regular flow of information to the health cluster.

HEALTH COORDINATION

- More than 20 NGOs are currently participating in the health cluster in Myanmar. The health cluster approach facilitates information sharing among all partners on the ground, identify gaps and initiate immediate remedial measures collectively.
- Accessibility to a number of peripherally located villages is still difficult, however the efforts of the health agencies have been to reach them at the earliest.
- Health cluster coordination meetings are also now being held at the township level, in both Labutta and Bogale. The longstanding presence of international NGOs, such as Merlin, in the affected areas allows close collaboration between the health cluster and local and national health officials.

NEXT STEPS

1. Follow Up Action Points

- Purchase and deliver additional supplies by the fastest possible means.
- Strengthen health coordination more so at the township level.
- Continue strengthening the surveillance system in the affected areas.
- Alert stakeholders and appeal to the donor community for strong support for response operations