

HAC/ERO: STATUS of Myanmar OPERATIONS as of 15 May 2008

OPS components		MYANMAR
	Figures	Updated official statistics as of 12 May: 31,938 deaths; 29,770 missing; 1,403 injured.
1	Security	<ul style="list-style-type: none"> Phase I. Unrest in some parts of the Delta.
2	Assessment and monitoring	<ul style="list-style-type: none"> 7 national consultants (WRO staff) in the field (4 in Laputto and Bogale; 3 in the Ayeyarwaddy area) for assessment and delivery of medical supplies WHO Regional Surveillance Officers continue working with MOH and NGOs to coordinate assessments and disease surveillance. Health Cluster has drafted 3 W for Yangon and Ayeyarwady divisions: final version expected by end of today SEARO, WR, BKK and HQ working together at rumours verification, disease surveillance and EWARS and in-depth assessment in the affected areas WHO information and guidelines on HIC-BKK Govt now accepts technical assistance from ASEAN countries
3	Support to coordination	<ol style="list-style-type: none"> Country: Focus on survivors, to place them in temporary shelters in Mya Mya, Bugale and Mau Bin <ul style="list-style-type: none"> Latest Health Cluster meeting in MMR with participation of 30 INGOs+UN.(more than 50 participants). MoH officials invited to update the next Health cluster meeting (16.05). MoH requested additional assistance from WHO in Ayeyarwaddy WHO field presence in all 6 most affected areas. 22 UN Agencies+ NGOs present in 58 townships in the affected area . Region: Regular Health Cluster meeting in BKK and participation in the Log cluster meeting <ul style="list-style-type: none"> BKK becomes ops and log hub. Global: Joint Action Plan (WHO+Health partners) under development <ul style="list-style-type: none"> Daily Health Cluster Sitrep Regular TC with Health partners. WHO working with UNICEF for supplies VC on stratetgic public health issues with Tech Departments Directors to be held 16 May. VC with donors participation under discussion.
4	Identifying and filling gaps	<ul style="list-style-type: none"> Dead bodies is the concern of local authorities MoH Measles immunization campaing ongoing in camps (kids aged 9 months to 5 year) Public Health priorities: Diarrhea, ARI, physical and psychological trauma Urgent need of dressing materials for health facilities 5,000 viper venom requested (2,000 available in SEARO)
5	Strengthening and repairing systems and building capacities	<ul style="list-style-type: none"> Need to plan for health services in emergency shelters/camps Add more assistance to hospital in Mau Bin which becoming a referral hospital for all 4 townships in the affected area 200 fogging machines requested; 100,000 bed nets requested More basic units of IEHK requested. MOH requests WHO's assistance to distribute supplies in affected areas Log health platform in BKK needs strengthening Tents needed to open outreach dispensaries, etc in affected areas
7	Personnel	<ul style="list-style-type: none"> Epidemiologist, Logistician, EHA technical officer likely to get visa for Myanmar: ERO Log staff leaves on 16.05 for BKK BKK team joined by RA, WPRO Di.a.i.ERO leaves for SEARO on 17.05
8	Supplies	<ul style="list-style-type: none"> Water-purification equipment and 20 IEHK and five IDDK doinated by Norway are in the pipeline SEARO setting in place certification/decision-making system to deal with in-kind donations 11 IEHK and one IDDK available in Yangoon. 2 IEHK deployed to Labuta and Bogale Medical supllies from the Swiss govt arriving
9	Cash-flow	<ul style="list-style-type: none"> \$ 80 K from DFID and \$350 K from SEARHEF allotted RR CERF \$ 1,875,15
10.	Outstanding cost	<ul style="list-style-type: none"> 22,500 USD for ITT equipment 350,000 from WHO SEARO Emergency Fund
11.	IASC Resource mobilization	<ul style="list-style-type: none"> Flash appeal launched (from \$15,780 M - \$5 M for WHO). Positive feedback from key donors
12.	Contribution/pledges to WHO	Approx. 3, 2 Million USD so far : CERF, Denmark, Norway, Monaco, UK, Italy, Romania
13	Headaches	<ul style="list-style-type: none"> Contradictory information on humanitarian access

