

WHO: STATUS of Myanmar OPERATIONS as of 14 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"> Queries about un-reached and un-assessed areas WHO Regional Surveillance Officers continue working with the Ministry of Health (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 this week WHO Regional Office for South East Asia (SEARO), WHO Representative (WR) , BKK and HQ are sharing a framework to consolidate health information management across the affected areas Action taken with OCHA in Myanmar, Bangkok, Geneva and New York to enhance visibility of health in IASC communication and with media
3	Support to coordination	<ol style="list-style-type: none"> Country: Focus on survivors <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: <ul style="list-style-type: none"> BKK becomes ops and log hub. WHO Assistant Director-General, Health Action in Crises (ADG), Eric Laroche is in BKK Global: Joint Action Plan (WHO+Health partners) under development <ul style="list-style-type: none"> Daily Health Cluster Sitrep Regular teleconferences (TC) with Health partners. WHO working with UNICEF for supplies Videoconferencing (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"> MoH Measles immunization campaing ongoing in camps 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 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 from WHO-Bkk likely to get visa for Myanmar: WHO Emergency Response and Operations Department (ERO) Logistician now in Delhi likely to get visa for Myanmar WHO Emergency and Humanitarian Action (EHA) technical officer likely to get visa for Myanmar: ERO Log staff leaves on 16.05 for BKK BKK team joined by RA, WPRO Director a.i. ERO, Alessandro Loretti, 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 SEARO setting in place certification/decision-making system to deal with in-kind donations 3 IEHK from HRD/Dubai arrived 8 IEHK and one IDDK available in the Central Depot in Yangoon. 2 IEHK deployed to Labuta and Bogale WHO discussing with WFP and French government how best to deal with in-kind donation carried by French Navy ship
9.	IASC Resource mobilization	<ul style="list-style-type: none"> Flash appeal launched (from \$15,780 M - \$5 M for WHO).
10.	Contribution/pledges to WHO	<ul style="list-style-type: none"> Norway see above (total \$0,5 M); Denmark \$30 K Monaco EURO 75,000
11	Headaches	<ul style="list-style-type: none"> Contradictory information on humanitarian access