

*This report was issued by OCHA Myanmar. It covers the period from 16 to 23 November. The next report will be issued on or around 30 November.*

## **I. HIGHLIGHTS/KEY PRIORITIES**

- As of 22nd of November, a total of 1,718mt of food has been distributed to nearly 200,000 beneficiaries in the 4 most affected townships.
- The State Health authorities have emphasized the need to prioritize the rebuilding of the health infrastructure.
- Clusters have identified funding needs close to US\$53 million including emergency and early recovery phases. Out of these, donors have already pledged up to US\$18 million.

## **II. Situation Overview**

Cyclone Giri, a category four cyclonic storm, made landfall in Rakhine State on 22 October, close to the town of Kyaukpyu. The Townships of Kyaukpyu, Myebon, Minbya and Pauktaw were the most severely affected by the storm, which caused severe damage to houses and infrastructure including roads and bridges in coastal areas.

The Government has reported that at least 45 people are dead or missing to date, while 101,923 people remain homeless and at least 20,380 houses were completely destroyed, with a total of at least 260,000 people (52,000 households) affected. Approximately 17,500 acres of agricultural lands and nearly 50,000 acres of aquaculture ponds were also destroyed. Transportation to the area remains challenging, as roads and bridges collapsed and were washed away. A large part of the affected areas can only be reached by boat.

Ahead of the cyclone reaching the shores, The Government of Myanmar and the Red Cross issued warnings to the population and organized the evacuation of people in coastal areas to safe locations to mitigate the impact of the disaster. The National Disaster Preparedness Coordination Committee (NDPCC) including the Ministry of Social Welfare, Relief and Resettlement has been in contact with the international humanitarian community and has welcomed support.

Assistance is being delivered by all humanitarian partners, including the Government and local authorities, local NGOs, international NGOs as well as the United Nations. In parallel, various assessments have been conducted to date, and discussions on a common assessment for medium-term recovery needs are ongoing. Findings available so far indicate that there are substantial needs in various sectors which are yet to be addressed. Logistical constraints continue to hamper relief efforts, while the transportation and communications infrastructure damaged by the cyclone is still being repaired. The Clusters have identified funding needs close to US\$53 million including emergency and early recovery phases. Out of these, donors have already pledged up to US\$18 million.

## **III. Humanitarian Needs and Response**

### **Food**

As of 22nd of November, a total of 1,718mt of food have been distributed to nearly 200,000 beneficiaries in the four most affected townships. Out of these, 1,355mt were distributed by WFP and its partners and 363mt by partners through their own resources.

### **Health**

The State Health authorities have emphasized the need to prioritize the rebuilding of the health infrastructure.

UNICEF, in collaboration with MoH, will be conducting training from 27-29 November on Expanded Program of Immunization plus (EPI plus) integrated delivery of high-impact interventions for maternal and child health such as antenatal care, supplementation of iron, folic acid, Vitamin A and B1, as well as distribution of Insecticide Treated Nets and Clean Delivery Kits.

A total of 1,000 UNICEF family kits have been distributed by NCV (Noble Compassionate Volunteer group) and 1,400 family kits and tarpaulins are currently being distributed by MRCS in Kwin Chaung and Daipone village tracts in Myebon.

The UNFPA-MMA medical team is operating a fixed clinic in Myebon town and covering 18 villages through mobile services. Until now, the team has provided essential life-saving sexual and reproductive health services and general health care to a total of 2,612 beneficiaries including antenatal care to 599 pregnant women (238 high-risk pregnancies included), birth spacing services to 1,663 clients, general health care to 350 patients. Furthermore, 550 Clean Delivery Kits and 797 Dignity Kits have been distributed to pregnant women and vulnerable women.

The UNFPA-MSI medical mobile team has visited 7 villages in Kyaukpyu and has so far provided life-saving sexual and reproductive health services and general health care to a total of 765 patients.

UNFPA will support the referral system through MMA (Myanmar Medical Association) and MSI (Marie Stoped International) who will focus on Emergency Obstetric Care (EMOC) services. MSF-H will integrate and link their referral activities to this system to the extent possible.

MSF-H continues to deliver health services through emergency medical teams in Myebon (2 fixed and 3 mobile teams) and Minbya (1 mobile team). Complications reported include respiratory infections, muscle pain, malaria, trauma, asthma, and hypertension. Some uncovered areas have been identified. Efforts to cover these areas will be stepped up when names of the locations have been confirmed.

MRCS is providing hygiene, health promotion and public health emergency trainings to 74 Red Cross volunteers from Sittwe, Myebon and Mandalay.

IOM's emergency medical mobile teams continue to operate in the affected villages in East and Middle Phayonkar islands of Pauktaw Township, now with the funding support of the Danish Embassy. Furthermore, IOM will increase efforts to address identified health service gaps in the affected areas of Pauktaw and Kyaukpyu Townships. The immediate beneficiaries will be an estimated 134,260 persons living in these Townships and will be reached by fixed clinics and outreach mobile activities, including health promotion.

MSI operates mobile medical clinics in Kyaukpyu in addition to providing Clean Delivery Kits, WaterGuard and Oral Rehydration Salts (ORS). Some severe medical cases have been referred from villages to Kyaukpyu town.

Disease surveillance activities are being stepped up with health partners reporting on a minimum of 16 diseases on a weekly basis. Surveillance reporting formats and information flow has been established and conformity is ensured by employing Standard Operating Procedures.

### **Nutrition**

Preliminary results of the nutrition assessment, jointly conducted by UNICEF and Ministry of Health (MoH), indicated that 400 severely malnourished and 4,000 moderately malnourished children of 6-59 months age are facing high risk of mortality and therefore are in need of respective therapeutic and supplementary feeding in four affected townships. The findings also indicate that 18,000 children are likely to develop acute malnutrition if the current situation of damaged harvests and threat of water-borne diseases do not improve. IRC reported suspected cases of vitamin B1 deficiency and rice shortages in some villages in Myebon where no external assistance has reached yet.

UNICEF/MOH are planning to initiate Community-Based Management of Acute Malnutrition (CMAM), which includes supplementary feeding for the emergency period and therapeutic feeding, in Myebon during the last week of November. Micronutrient supplementation and deworming in Myebon as a part of EPI-plus activity will be initiated by UNICEF/MOH next week

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Save the Children is conducting a rapid IFE (Infant Feeding in Emergency) assessment and a nutrition assessment of children by MUAC is being conducted in mobile clinics of IRC and MSF-H.

### **Livelihoods**

The member of the livelihoods cluster agreed to conduct a joint assessment with the food cluster in mid-December to review the needs of both clusters. The discussions have started on the harmonization of methodology, synchronization of the data, questionnaires, enumerators, sample size, data collection system, in particular.

The immediate interventions of cluster members will focus on: replacing lost productive assets such as boats, fishing gears of 7,500 fishing households and rehabilitating damaged aquaculture ponds; provision of seeds, fertilizer, farm machinery to the farmers to be self-sufficient in the next Monsoon season; cash for work projects to restore damaged community infrastructure; immediate cash transfers to help affected household supplement in-kind food assistance and replace lost livelihoods assets; and provision of livestock.

### **Logistics**

As of 22 November, 9,400 cubic-metres (m3) of storage capacity is available - 1,600 m3 in Sittwe, 5,000 m3 in Myebon and 2,800 m3 in Kyaukpyu. Partners have started requesting storage space from the cluster.

### **Vulnerability**

UNFPA distributed assessment forms focusing on reproductive health, protection (women-headed households) and gender-based violence (GBV) through the MRCS assessment team. Information from Myebon and other townships will be sent by MRCS and UNFPA will update accordingly.

In Kyaukpyu, data from Pynphumaw and Kalar Pike Seik villages showed that women constitute 50-60% of the affected population and half of the population in need of emergency shelter. The percentage of women-headed households varies from 7 to 23 %. No GBV cases have been reported in assessed villages to date.

### **WASH**

While some agencies continue to conduct assessments (in collaboration with other sectors), others are providing water purification and distribution in the more urban areas. Several have begun designing spring-fed gravity-flow systems in anticipation of approval of funding.

Assessments so far have found that while almost one third of water sources have been affected (damaged or destroyed), one in twelve of the water sources are prone to run dry in the later part of the dry season. Many communities have traditional coping mechanisms, knowing the location of perennial water sources, but which are much further away. However, most households have very limited water storage capacity, and household water treatment practices are uncommon.

Assessments have also confirmed that very few people in the rural areas use toilets. The cluster has agreed to only rebuild toilets where households had them before and to include in recovery plans the introduction of community-led total sanitation (CLTS). UNICEF and Save the Children are organising the first training in CLTS in January 2011.

The WASH cluster has agreed to prioritize plans for improving water sources as (1) critical due to the cyclone and (2) water shortage due to the seasonal scarcity. Pond cleaning will be carried out on a case by case basis. Where there are alternative sources to refill a pond (such as from a river) the pond could be emptied and cleaned immediately. Where there is no other source of water nearby, it will have to wait until close to the rainy season.

The WASH cluster has agreed a set of indicators for implementation of activities. DfID, AusAID and CERF projects will comply with these indicators. Agreements with ECHO and OFDA are still pending. This will make monitoring and reporting much easier and transparent. The target for water supply was agreed as 40 liters per day per person for general consumption and the basic minimum would be 15 liters.

#### **IV. Coordination**

Inter-agency coordination meetings between local and international NGOs and UN agencies have been held regularly in Yangon and in Sittwe. Bilateral meetings between local authorities and humanitarian partners take place regularly in Sittwe.

Clusters have identified information management focal points in order to ensure a proper information sharing mechanism to provide for an efficient and timely response, with support from the MIMU.

The MIMU has developed a webpage dedicated to the response to Cyclone Giri: [http://www.themimu.info/HTML/Maps/Giri\\_index.html](http://www.themimu.info/HTML/Maps/Giri_index.html). Assessment data and 3W (Who-What-Where) information on the response are being compiled by the MIMU. Please send any updates to [vognild@un.org](mailto:vognild@un.org) and [ei.ei.thein@undp.org](mailto:ei.ei.thein@undp.org).

#### **V. Funding**

The application to the CERF (Central Emergency Response Fund) is being reviewed by the CERF Secretariat.

The Government of Japan will provide emergency assistance amounting to US\$ 500,000 through the United Nations World Food Program (WFP) to the affected population.

Australia will provide US\$3 million in assistance to help affected communities and families recover from this disaster and provide essential food, shelter, clean water and sanitation. An immediate \$200,000 was provided last month through the Australian Red Cross, and the further \$2.8 million will be delivered through the United Nations World Food Programme and Australian Non-Government Organisations, CARE Australia, Save the Children Fund, Oxfam Australia, Burnet Institute and the Australian Red Cross.

Donors are encouraged to contribute to the response efforts of humanitarian partners, as well as to report to the Financial Tracking Service, which records all humanitarian contributions to Myanmar. For more information, please visit: <http://fts.unocha.org/>.

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