







# HIGHLIGHTS

## MYANMAR






	<p>Extremely severe cyclone Mocha hit Myanmar’s Rakhine state with force on 14 May 2023, making impact close to the state capital, Sittwe. This was <b>one of the strongest cyclones ever recorded</b> in Myanmar, with windspeeds of up to <b>250 kmph</b>.</p>
	<p>Information on the extent of needs is still emerging, as physical and bureaucratic impediments <b>limit the scale of impact assessments</b>.</p>
	<p>UN OCHA has published a flash appeal with <b>\$333 million</b> urgently required for the response, targeting <b>1.6 million people</b> affected. The flash appeal complements the existing HRP, currently 10% funded.</p>
	<p>An estimated <b>7.9 million people</b> live in areas that experienced winds in excess of <b>90 kmph</b> during the cyclone, of which <b>3.4 million</b> faced very destructive winds of over 120 kmph placing them at very high risk.</p>

## SITUATION OVERVIEW

The impact of the cyclone has caused significant infrastructural and shelter damage across Rakhine state and the northwest of Myanmar. In Rakhine state, the worst affected areas are believed to be Sittwe and Rathedaung, followed by Buthidaung, Kyauktaw, Maungdaw, Minbya, Mrauk-U, Pauktaw, and Ponnagyun, with coastal areas particularly destroyed. The townships of Kyaukpyu, Ramree, Munaung, Myebon, and Ann also suffered significant damages, though less severe than in other areas of Rakhine. In the northwest, (Chin, Magway and Sagaing) access limitations, ongoing conflict and communication challenges have hindered the ability of humanitarian partners to fully understand the scale of damages. In Chin, the worst affected areas are believed to be Paletwa, Matupi, Mindat, Hakha and Kanpetlet; in Magway, Gangaw, Tilin and Saw; and in Sagaing, Mingin, Pinlebu, Taze, Kyunlha, Kani and Pale.



Electricity infrastructure damaged in Sittwe. Photo: IOM Myanmar

	<p>Clean water is becoming an urgent priority need across all affected areas due to contamination of the main water sources. The lack of clean water is increasing the risk of the spread of waterborne diseases among the affected population. Humanitarian partners are reporting an increase in cases of diarrhoea particularly among children due to unclean water sources and a lack of functioning latrines.</p>
	<p>Healthcare needs are also acute, with clinics destroyed in many areas. Reports from health actors on the ground suggest an increase in abdominal issues, respiratory tract infections, vector borne diseases, and communicable diseases. Medicines are in high demand and short supply, partially due to damage to storage warehouses.</p>
	<p>Tens of thousands of shelters have been destroyed across Rakhine and the northwest, with IDP camps and villages in the coastal areas badly affected. Cash actors are reporting a substantial increase in the cost of procuring shelter items in local markets, such as tarpaulins and bamboo, as well as shortages of such items.</p>
	<p>Food distributions have resumed but there remains a significant need for additional food and nutrition assistance, and reports suggest that food supplies are limited in the markets. Food shortages are being reported in evacuation and other temporary shelters where people have had to remain due to flooding and damage to their homes.</p>
	<p>Protection services have been disrupted, and protection needs of children are increasing. Delivery of child protection services, case management and psychosocial support is urgently needed. Populations who have been affected by the cyclone, ongoing conflict, and poverty are reportedly in need of mental health and psychosocial support services. Additionally, disruptions from the cyclone have moved mines and other unexploded ordnance which now pose a significant risk in many areas, increasing the need for awareness raising and mine risk education.</p>

## IOM RESPONSE

IOM in Myanmar is rolling out a rapid emergency response in the aftermath of the cyclone.

- Many people sustained injuries during and after the cyclone. IOM rapidly deployed mobile health teams to the affected areas. Mobile health teams have been visiting badly hit townships, providing emergency consultations, basic medical assistance and referrals to health centres where needed.
- Mobile health teams are preparing to scale up to provide more services to people in need of healthcare assistance in affected villages, camps and sites. Additional staff are being trained to increase the capacity of the mobile health teams, including doctors, nurses, and health educators.
- IOM is supporting community-based health workers to deploy in the affected areas to increase overall healthcare capacity.
- IOM health workers have been distributing chlorination tablets to the community as part of their operation, to increase access to clean drinking water.
- IOM has deployed a number of additional emergency surge staff to Sittwe to increase procurement, logistics and emergency response capacity to facilitate rapid humanitarian response. The teams in Yangon are supporting the procurement and delivery of urgently needed lifesaving assistance to Sittwe through both local procurement where possible and shipment of relief items from Yangon.



Destroyed brick and bamboo houses in Rathedaung township. Photo: IOM Myanmar