

Nargis Response

IOM Response to Cyclone Nargis Emergency: One Year On

Summary

This month marks one year since Cyclone Nargis struck the Aveyarwady Delta leaving 140,000 people dead or missing and severely affecting some 2.4 million others. As the people of Myanmar and the international community commemorate the lives lost and acknowledge the brave recovery efforts of survivors, IOM recalls one year of response operations and looks to future recovery efforts to assist what are still very much communities in need.



One Year of Response Operations

IOM's emergency response began immediately after the cyclone hit with mobile medical clinics delivering emergency medical care where health infrastructure was completely destroyed or severely damaged. Soon after, IOM established five fixed clinics in remote parts of the Delta where health facilities were not functioning. Health services were supported by a referral and evacuation system which IOM operated as a common service for all health partners working in the delta. These primary health care services have been accompanied by a project which assists communities recovering from the psychosocial impact of the disaster.

IOM also took immediate action to meet the urgent needs of survivors living in emergency shelter and temporary facilities throughout the affected region by distributing transitional shelter materials and non-food items. This was followed by major shelter projects including a shelter needs assessment, the distribution of roofing and construction materials to under-served urban areas of the delta, the construction and repair of houses and the distribution of livelihoods materials. These activities have established IOM as the largest shelter rehabilitation agency for the Nargis response in Myanmar.

IOM is also seeking to better understand the present living circumstances of people displaced by Cyclone Nargis through a monitoring and research project. While displaced households have been the focus of this project, IOM aims to incorporate both displaced people and the communities that host them in future assistance programs. A holistic approach that takes account of the effects of displacement on entire communities and their infrastructure is essential to effective assistance.

Achievements this year...

Villages 858 villages reached with emergency aid including medical treatment

Patients 110, 613 patients treated Treated by IOM medical teams

Cases 746 cases referred and Referred evacuated for medical care

Shelter Emergency shelter provided to over 60,000

households

Distribution Hygiene kits: 9,665

> Mosquito Nets: 11,000 Jerrycans: 6,338 Raingear: 18,511 Blankets: 500 Water purifiers: 145 Household Kits 10,005

Donors and Partners

UN Central Emergency Response Fund (CERF), Government of Japan, Government of United States (USAID/OFDA), UK Department for International Development (DFID), European Commission's Humanitarian Aid Department (ECHO), Swiss Agency for Development & Cooperation (SDC), Government of Denmark, AmeriCares Foundation, Humanitarian Medical Assistance (HUMA), Chevron Corporation, Three Diseases Fund (3DF), International Medical Corps (IMC).

Health Response:

Spotlight on Nga Kwat village, Bogale

IOM established five fixed clinics in parts of the Delta where health facilities were destroyed and not functioning – including Nga Kwat village. The clinic was used as a base for outreach mobile medical teams and health educators to access the broader community. This allowed the delivery of primary health care services to some of the most isolated locations in the Delta.

At Nga Kwat village, the damaged government bamboo and wood sub-rural health centre and birthing house stood empty, while patients queued to be seen by the IOM doctor stationed at the fixed clinic. Now that the IOM medical team has vacated the clinic, Nga Kwat residents are left without adequate health services.

IOM is seeking to repair and rehabilitate public health infrastructure such as the clinic at Nga Kwat to ensure long term health care for delta communities. After the successful reconstruction of a sub-Rural Health Center in Mawlamyinegyun township, the health centre was handed over to the Ministry of Health and is now being fully utilized by village residents and surrounding communities.

It is hoped that the success of this project will lead to other such efforts, and IOM is currently seeking funding to further restore health infrastructure for communities in need.



Constructing a health center, Kyae Chan Chaung Pyar village, ©IOM/Piers Benatar

IOM field staff recall one year on...



Dr Thit Lwin IOM Fixed Medical Clinic Doctor Kyae Chan Chaung Pyar village Mawlamyinegyun Township

"The community is so remote that people had never seen a doctor or received any health education before, so all the services we were providing were new to them — even the most basic health care.

About 50% of patients came from other villages, sometimes traveling for as long as five hours by boat.

I am very pleased to have been able to use my skills in order to provide basic health care to very poor people who need it most."



Dr. Thit Lwin takes a patient's blood pressure (above ©IOM/Piers Benatar) and conducts a health education session (below © IOM).

Shelter Program:

Reconstructing Homes, Rebuilding Lives



Shelter has been a major concern for delta communities since immediately after the cyclone. One year later at the beginning of the monsoon season, the demand for urgent assistance is still present: an estimated 130,000 vulnerable families are still in need of shelter materials and 420,000 houses require rebuilding and repair.

IOM's response to date has focused on distribution of roofing and construction materials to underserved urban areas of Bogale, Pyapon and Mawlamyinegyn. Target beneficiaries have been vulnerable families, in particular those with low per capita income, displaced and resettling families; single-headed households; ill, disabled or elderly; households with a high dependency ratio; and those with no other durable shelter assistance received.

IOM's Shelter Program continues to assist vulnerable communities through the distribution of shelter materials and construction of houses (see below). With added emphasis on the connection between shelter construction, disaster risk reduction techniques and livelihoods, IOM is both assisting families and empowering communities in need.



IOM field staff recall one year on...



Shwe Myint Logistician Bogale Sub-office

"I was there from the very beginning of IOM operations as the first staff in the Bogale sub-office. This soon became the main hub of IOM operations in the Delta. My first impression was so sad: it was a scene of enormous destruction.

At first it was so hard to get things to the delta – it was raining and the roads were very bad. Then when we got all the non-food items and started distributing, it was hard to say no to people when there wasn't enough.

Now people say their biggest issue is not having adequate shelter or enough work. Incomes are very low.

I am happy now with our new shelter projects... we can provide more assistance to people who have missed out and are afraid of the rainy season which is fast approaching."



Shwe Myint (second from left) with IOM Bogale colleages and (above) supervising warehouse activities @IOM/Piers Benetar





Funding needed:

Repair, Rebuild and Rehabilitate Primary Health Centers, Maternity Homes and Capacity Enhancement in the Irrawaddy Delta USD 1.2 million

Delivering Mental Health Services and Strengthening Resilience among Affected Communities USD 600,000

Durable Shelter and Livelihood Solution for Displaced & Other Vulnerable communities USD 2,000,000

IOM wishes to thank its generous donors:

























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