

MYANMAR TSUNAMI RESPONSE REPORT

1. SUMMARY

On 26 December 2004, the Tsunami created by a forceful earthquake at 9.0 on the Richter scale reached the south coast of Myanmar after passing through the Andaman Islands and the Myeik Archipelago. The intensity of the wave was reduced but has nevertheless taken around 60 lives, left thousands of citizens homeless and affected basic community services in the impacted areas.

The Government of Myanmar responded to the situation and provided support to affected populations. The Government has shared available information on the Tsunami impact and continues to make available to the relief community on its findings. The majority of reports independent and official converge to the same conclusion and seem to confirm that Myanmar has been spared from a large scale emergency.

Relief agencies have rapidly organized and coordinated assessments in accessible areas and have found needs for safe drinking water, food, medicines and shelter. From the onset, the IFRC took the lead in coordinating the information and response with key partners including the UN.

The UN country Team in Myanmar has distributed clear roles and responsibilities for sector-based response and lead agencies will scale up and/or re-direct their respective programmes in affected areas to meet immediate and medium term needs using existing budget or tapping into regional appeals.

2. CONTEXT AND HUMANITARIAN CONSEQUENCES

2.1 Context

The Tsunami originated from the epicentre of a massive earthquake at 9.0 on the Richter scale near Sumatra and spread thousands of kilometres for several hours. The southern coast of Myanmar (see map below) was hit by the waves around four hours later. Unlike for the coasts of Thailand or Sri Lanka, the Myeik Archipelago reduced the Tsunami's force, before impacting the coast of Tanintharyi Division. On its way to the Ayeyarwaddy coast, the wave had also severely hit the Adaman Islands (India). This might partly explains the smaller scale of damage inflicted to the southern areas of Myanmar. The Myanmar coast is also characterized by its hilly geomorphology.

2.2 Humanitarian consequences

UN agencies and relief organizations have conducted a series of assessments in costal areas, primarily in the Ayeyawaddy Delta but also in Tanintharyi Division and in Rakhine State. The first assessment phase focused on the death and missing toll. Needs assessments have gradually followed. The hardest hit area is the Laputta Township in the Ayeyawaddy Division where 34 people are officially reported dead and hundreds of families are without shelter. Initial reports from the majority of islands off the Myanmar shore do not indicate a large-scale impact.

At this point, the relief community in Myanmar deems it important to differentiate between direct victims of the waves and indirect vulnerable populations. The basic services in many of the affected areas were already precarious and affected populations may have lost the little they had.

Households that have lost members of their family and/or now have no shelter or access to safe water and medicines are direct disaster victims. At the time of writing, the UN and partners

estimate that possibly up to 30,000 people are in immediate need of food, water and shelter. Around 60 people are known to have died in the wake of the Tsunami in Myanmar. It is important to mention that reports also indicate that several hundreds fishermen of Myanmar origin have lost their lives on the Thai coast, some of whom were certainly sustaining households in Myanmar.

Aside from immediate needs, some 200 villages spread over the southern coast of Myanmar will also have suffered from the economic impact of the Tsunami disaster. Most of these villages rely on fishery to sustain their livelihoods. Fishermen and fishing equipments such as boats and nets have been the worse hit. Community basic services will also have to be supported.

3. RESPONSE PLANNING AND RESOURCE MOBILIZATION

The UNCT and relief partners' view is that the current situation in Myanmar mostly requires for agencies to scale up and/or re-direct their existing programmes in Tsunami affected areas in order to provide adequate support for a quick recovery. UN agencies will resort to existing budget or funds available through their respective regional appeal mechanisms to cover immediate response. Planning and costing of longer-term activities will take place after the completion of needs assessments.

In view of the above and for the next three months, the UN and its partners will continue assessing the needs of affected populations and will increase their activities in the following sectors with designated agencies assuming lead:

1. Water and Sanitation (UNICEF)
 - To protect affected households from water-borne diseases by providing clean water drinking and sanitation supplies.
2. Food (WFP)
 - To provide dietary support to the most vulnerable and food-insecure households by distributing food rations.
3. Shelter and NFI (UNDP and UNICEF)
 - To reduce vulnerability caused by the loss of shelter by providing emergency "self-build" shelter materials and equipment to affected families.
4. Health (UNICEF and WHO)
 - To reduce the risk of disease outbreaks and level of morbidity by strengthening disease surveillance, providing emergency medical supplies and supporting the resumption of child immunization services.
5. Livelihoods (UNDP)
 - To ensure survival and recovery of most affected households by distributing basic non-food items and psychological support, especially to special vulnerable groups, as well as income-generating activity material.
6. Coordination and support services (UNCT/RC supported by WFP)
 - To ensure adequate information gathering and coverage of needs by accessing remote areas and assessing needs

4. ROLES AND RESPONSABILITIES

The International Federation of the Red Cross in Myanmar has coordinated the initial information and response with key partners (ICRC, MSF-Switzerland and World Vision). WFP, as chair of the UN Disaster Preparedness and Management Group (UN-DPMG), is coordinating the UN's response to the disaster in collaboration with the IFRC mechanism.

Both UN and INGOs are exchanging information and coordinating their response with the national and local authorities. The Ministry of Social Affairs is the responsible central authority for disaster response. Assistance efforts have also been coordinated through the Ministry of Health at the national and local levels.

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