Key achievements from the WHO-EU COVID-19 Response Project: Southeast Asia Health Pandemic Response and Preparedness (Jan 2021-Dec 2022)

To respond the COVID-19 pandemic, the WHO for Myanmar joined the WHO-EU co-funded project: South East Asia Health Pandemic Response and Preparedness, which is implemented in eight countries of the WHO South East Asia and Western Pacific Regions, namely Cambodia, Indonesia, Lao PDR, Malaysia, Myanmar, Philippines, Thailand and Viet Nam. The project period is from 1 January 2021 to 31 December 2023.

For the COVID-19 pandemic response, the WHO for Myanmar implemented activities related to surveillance, risk communication, case management, essential health services provision and operational support, for a total expenditure of around 0.9 million euros from January 2021 to December 2022. In 2021-2022, the WHO for Myanmar implemented this project through non-state actors to reach hard to reach populations in Rakhine, Kachin and southern Shan. Basic health care including maternal and child health care and non-communicable diseases care were provided to 75,604 people through 60 health facilities of Rakhine, Kachin and southern Shan. Frontline health workers were supported with 5,200 sets of personnel protective equipments (PPE). To strengthen case detection, 18 screening points were supported in Rakhine, Kachin and southern Shan. The project detected 909 Covid confirmed cases from contact tracing on 4,037 close contact people. A total of 16 oxygen concentrators and 119 pulse oximeters were supported to three hospitals and 10 screening points. Furthermore, 332 frontline health workers received case management training. And, more than 40,000 copies of posters and pamphlets were disseminated to communities and health workers.

The WHO for Myanmar will continue the implementation of this project in collaboration with non-state actors for the remaining implementation period in 2023. This project plays a crucial part in the pandemic response amidst the challenging situation in Myanmar.

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Best Shelter is a non-political, non-for-profit, local NGO of individual professionals and peers aimed to provide health promotion services for people who use/inject drugs, their (sexual) partners, communities, youth and other vulnerable populations in hard-to-reach and conflict areas in Myanmar to create an enabling and supportive environment through advocacy, capacity building and service provision.

Historically, Myanmar has been confronted with numerous armed conflicts, currently aggravated because of the country’s political crisis. Kachin has been one of the states suffering from the current situation. In July and August 2022, Selzin village in Hpakan Township in Kachin was confronted with severe fighting between various armed entities and as a result, several villagers moved to Tarmakhan and surrounding villages, staying in public places such as monasteries, churches, and schools.

Best Shelter’s mobile team provided mobile primary health care services to internally displaced people (IDPs) in Tarmakhan. With the assistance of three community prevention workers (CPW) from Tamakhan, a Medical Coordinator and a Nurse of Best Shelter provided basic health care to 307 patients at IDP camps, addressing various health issues, including non-communicable diseases (NCD) and mental health issues, as well as infectious diseases and nutritional issues in children.

Due to their negative experiences and trauma, IDPs frequently face mental health issues. Best shelter nurse provided mental health support, psychological first aid and counseling sessions during the mobile visits. CPW conducted COVID-19 awareness sessions and distributed community-based covid care kits in the IDP camps. These kits will help to protect against COVID-19 and other respiratory infections. During September and October 2022, 150 COVID-19 care kits were distributed to IDPs in Tamakhan. Best Shelter set up six handwashing stations at Hko Ma Monastery IDP camp, AD IDP camp and KBC IDP camp for COVID-19 infection prevention and control. Best shelter mobile team assisted with health issues over a two-week period in October 2022. This activity was supported by the medical supplies support of UNICEF and the technical assistance by Asia Harm Reduction Network (AHRN).

For more information, please contact: Dr Wanna Toe Wai, Best Shelter, Project Manager, bs.ygn.pm@bestsheltermyanmar.org
Health Poverty Action (HPA) is providing primary health care services such as maternal and reproductive health, child health, nutrition, malaria and immunization services in hard-to-reach areas of Kachin State.

As part of the nutrition promotion month in August 2022, activities were conducted for young children, especially during the critical 1,000 days between a child’s conception and his/her second birthday, when good nutrition positively impact the rest of the child’s life. Malnutrition during pregnancy and early life can lead to learning difficulties, vulnerability to disease, and lower future earnings. Good nutrition during pregnancy and through a child’s second birthday start their physical and brain development, giving them the best start in life.

Mrs. Lahpai Nan Bu, 22 years old, was one of the participants in Nutrition promotion event that was held in Layen Village (In Jang Yang Township). She was a primigravida - a woman who is pregnant for the first time.

“One day unexpectedly, I was invited by the village’s health council to attend the Nutrition promotion event. I had never participated in the Health and Nutrition program before in the village. This was the first time for me, and I was excited to join. On the event day, I firstly noticed about the Health Poverty Organization, and the collaboration of HPA staff and community volunteers. There were many participants joining in the ceremony such as children under five, their caretaker, pregnancy, and lactating mothers. Community volunteers shared Health Education for nutrition, especially the importance of good nutrition within the 1,000 day period for a child from pregnancy to 2 years of child age. I learned about the variety of nutrients that can contribute to the proper development of the brain. For example, iron deficiency in infants and toddlers can affect their learning as well as their social and emotional behaviors. After I had heard the 1,000 day messages, I learned about the good impact of nutrition not only for me but also for my future baby. Although I had never been to a health facility for antenatal care visit before, now I had just decided to visit as much as I can. And I now know it is crucial to get at least four times of quality antenatal care from health facility.”

Vitamin A supplantations, Albendazole feeding, measuring weight and the evaluation of nutrition status using the mid-upper arm circumstances for the children were conducted by HPA’ staff and community volunteers in this nutrition promotion event. If significant, the volunteers provided counseling services to the child’s parents and encouraged to take three groups of food in meal for the child. Mrs. Lahpai Nan Bu also took part in the demonstration on cooking with three groups of nutritious food in mother groups activities and she said that she will share knowledge about the information she received from the event in her community.

For more information, please contact: Dr Myo Min Kyaw, Program Manager, pm.mkn@healthpovertyaction.org
Since 2017, MERCY Malaysia International in Myanmar runs Thet Kal Pyin Station Hospital in collaboration with the Ministry of Health. Thet Kal Pyin Station Hospital is a key hospital that provides secondary healthcare services around the clock for Internally Displaced People (IDP) and non-displaced stateless Rohingya people in Sittwe township.

Individual A, 18, is one of the regular patients at the Thet Kel Pyin Sub-Rural Health Centre (TKP SRHC) where she receives ante-natal care during her pregnancy.

MERCY Malaysia’s medical team continues to offer comprehensive medical assistance that includes health education, pregnancy consultation and medication with no charges. Individual A was referred to the Thet Kal Pyin Station Hospital for her delivery as she is traumatised by her previous experience with the traditional birth attendant with her first child.

“No words can express my happiness over another successful delivery, and see the mother and her baby discharged in good health,” said one of the MERCY Malaysia’s doctors.

MERCY Malaysia conducts more than 20 safe deliveries every month and will continue to provide all-inclusive maternal and child healthcare for the vulnerable communities in Sittwe, Rakhine, Myanmar.
Karuna Mission Social Solidarity (KMSS) is a faith-based social network at the service of the Catholic Church of Myanmar. KMSS works in education, health, livelihoods, social protection, disaster risk reduction & emergency response. Among these, KMSS health team provided primary health care services to IDPs in the Northern Shan and Kachin since 2015.

KMSS is providing primary health care services in 16 IDP camps in Northern Shan State and four IDP camps in Mansi Township, Kachin State mainly through the mobile clinics. KMSS is also providing regular health care services by tele-consultations to IDP populations in such situations.

KMSS provides emergency health care services including timely referral support directly to patients in need with two mobile teams, in which each team comprises of a medical doctor, two clinical nurses and a community health assistance. Each mobile team is visiting four IDP camps and providing one tele-consultation per week. Medical services include integrated community case management, sexual and reproductive health care services, maternal and child health care and nutritional supports to malnourished children. KMSS is also dispensing health education activities to IDPs to increase awareness on communicable diseases and healthy seeking behaviors.

From July to Nov 2022, KMSS provided health care services to 2855 patients, health education sessions to 2492 participants, and supported 32 emergency cases.

For more information, please contact: Yein Saung, Project Manager, luxahsau@gmail.com

Registering the child patient by a caregiver at a clinic in IDP camp, Mine Yu Lay Village, KutKai Township, Northern Shan State. (Photo: KMSS)
In Southern Shan State, Relief International has been operating in 8 townships, where the areas are prone to conflict and community’s health literacy is low, with focusing hard to reach, underserved, and most vulnerable populations.

In the current times of crisis in Myanmar, continuation of essential health care services is crucial to save lives. There are many constraints in accessing life-saving health care services by communities in targeted townships, among other financial hardship. Thus, to minimize out of pocket expenditures in seeking emergency health care services by most vulnerable groups - pregnant mother and under 5 years old children, Relief International is implementing emergency referral support programs by providing travel and meal costs during hospitalization for those who are admitted in public and private health facilities, with the support of Access to Health Fund.

Up to August 2022, at least 900 pregnant mothers with prolonged labor, PROM, abortion, retained placenta were supported. And at least 555 under 5 years old children with the diagnosis of pneumonia, diarrhea, febrile convulsion, hematological disorder were also supported.

The mother of child affected with thalassemia (an inherited blood disorder that causes the body to have less hemoglobin than normal) who got tertiary referral support for surgical procedure expressed that:

“We were overwhelmed with the burden of repeated hospital admissions and blood transfusions. We were faced with financial constraints. When the medical officer guided us for an operation to get better results, we couldn’t afford the charges and almost felt despondent for our child. The financial support which was provided help us to overcome the difficulties with the medical care for our child.”

For more information, please contact: Shan Programme Team- Relief International, ri.shan@ri.org
Since 2019, IRC has been supporting cash assistance to emergency referrals for life threatening obstetric (EMOC), neonatal and childcare (ECC) and other emergencies life threatening cases including GBV survivors with support from Access to Health fund while ensuring to remove financial hardship with the timely referral. IRC provides meal cost and transportation cost for the patient and patient’s attendance at public hospitals. Starting from 2021, IRC’s support has been extended to private hospitals in addition to public hospitals. Not only meal and transport cost but also medicines, consultation fees, investigation expenses and other treatment related costs are supported at private clinics at Kayah State.

For more information, please contact: Yee Mon Than, Program Manager, YeeMon.Than@rescue.org

World Concern Myanmar (WCM) is currently rolling out a Humanitarian Assistance Project partnering with the Shew Li Shan Baptist Mission Convention (SSBC) and Shan State Lisu Christian Churches (SLCC), from 1 August 2022 to 31 January 2023. From August to November 2022, WCM provided humanitarian assistance to villages in the Northern Shan State in WASH, Nutrition, Emergency, Shelter and Non-food Items (NFI) to the targeted villages, Kaung Paung, 14-mile (Pong Mun), Law Nyem, Lisu, Pang Hpat, Nawng Hsant Kone.

The hygiene kits (soap bar, tooth paste, tooth brush, hand gel and cup), solar light, latrine construction materials (zinc, nail wire, bucket, cup, pan and pipe), clothes (underwear), NFI (pads, torchlight, bag, tarpaulin and mosquito net) were distributed and nutritious food such as rice, oil, salt and chickpea were also provided to the communities. With this project, the people in need from the 149 households in Lashio, Hseni, Nam Kham and Tang Yang Townships will be provided humanitarian assistance amidst the challenges in Myanmar.
Providing access to healthcare, nutrition and WASH services for conflict-affected people in hard-to-reach areas in Kayin

Première Urgence Internationale (PUI) is one of the NGOs responding to the pressing humanitarian needs of vulnerable people in hard-to-reach areas in Kayin State, including those in the IDP settlements and the host communities. These populations are showing an impoverishment in their health and nutritional status, with increased prevalence of malnutrition and a growing number of barriers to accessing health care.

PUI operates four mobile clinics providing integrated health services to meet people’s health needs while applying a principle of “do no harm” to ensure that the aid provided has the intended effects. The mobile clinics cover Hlaing Bwe, Kawkareik and Hpa Pun townships servicing 15 to 20 sites every week thus reaching medically underserved and hard-to-reach segments of the population, despite the security and access challenges PUI teams regularly face.

These clinics offer primary health care services including non-communicable disease interventions, basic mental health and referral, sexual and reproductive health, and nutrition services. PUI ensures the provision of safe healthcare that responds to the needs of gender-based violence survivors through coordination, immediate response, and referral to specialized services as well as community-based awareness.

To address the issue of malnutrition, with a focus on children under 5 years old, services in the mobile clinic include nutritional status screening, undernutrition identification, provision of food supplements, and referrals. This is complemented by the assessment of malnutrition at the community level and the provision of food assistance to people suffering from undernutrition, inadequate vitamins or minerals intake, and resulting diet-related non-communicable diseases. The community outreach efforts also include the operation of mother-to-mother support groups, where women from the community explore infant and young child nutrition issues together, sharing information and learning together and from each other.

PUI also implements home gardening activities to improve food security and create preconditions for better living standards. This includes providing support to the rehabilitation of WASH infrastructures through meaningful participatory mechanisms in place ensuring the inclusion of the beneficiaries in the planning and implementation of the project.

For more information, please contact: Lucia Michelazzo Ceroni, PUI’s Health Coordinator, health.co@priere-urgence-mmr.org

People living in hard-to-reach areas have been facing escalating difficulties in accessing quality health services after the shutdown of multiple health facilities in early 2021 and a shortage of healthcare providers.

After months of limited access to the needed health services, Daw Nan Eh Mu Kha Lein, a 64-year-old woman diagnosed with Stage 2 hypertension was able to receive appropriate care, regular follow-up, and the needed medications to treat her condition at one of our mobile clinics.

“I could not afford antihypertensive medications. My dizziness and vision problems were worsening, making it difficult for me to perform my daily tasks. In addition, I had not been able to assess my blood pressure and disease prognosis since 2021. It is a blessing that a health care team periodically takes care of our health in Kayin State, both for me and for the community.” Daw Nan Eh Mu Kha.

Note: Name has been changed to protect anonymity.
The health cluster is currently composed of 70 members of which 47 are implementing partners, 12 observers, 11 donors. 50 have been reporting as of 2022. Figure 1 illustrates the distribution of partners by category.

During the third quarter of 2022, Health cluster partners assisted 321K people in Myanmar including 47K persons with disability.

Beneficiaries mainly include people from Kayin 124K, people from Rakhine 70K and from Bago East 52K.

Which make a total reached for 2022 from January to September of 488K (34% of target 1.4 M).

Figure 2 illustrates the distribution of people reached by state/Region For 2022 Q3.

The data from Jan-Dec 2022 are under validation and shall be available in February 2023.

The total people in needs (PiN) for Health Humanitarian assistance is raised 4 times from 2.5 million in 2022 to 10 million in 2023.

People targeted for health humanitarian assistance has been set at 23 per cent of people in need at 2.3 million with the four population groups (displaced, returned, stateless and other crisis-affected).

Two criteria were retained for targeting people for Humanitarian assistance. First the rural/remote criteria, where people are most vulnerable and health system is most limited. Second, the capacity criteria: capacity to access people in need and to access funding, and the capacity to scale-up timely, predictable, appropriate, and effective response.