This report summarizes the situation as of 9 August 2024.

**Situation Overview**

**Yangon**
- According to the ministerial authorities for health, a total of 2,261 hospitalized cases of acute watery diarrhea (AWD) and 161 hospitalized cases of AWD with severe dehydration were reported from 44 townships of Yangon region as of 8 August 2024. Among them, 15 cases have died, but cause of deaths is unknown. Cholera infection is confirmed in some of those AWD cases.
- Until 23 July 2024, ministerial authorities for health had publicly shared the daily number of new AWD cases with or without severe hydration (Figure 1).
- Most affected townships were Thaketa, Hlaingtharyar, Botahtaung, Dawbon, and Thingangyun.

**Rakhine**
- Starting from mid-June, AWD cases increased in Sittwe in Rakhine State, with a notable surge of the cases, including those with severe dehydration, in late July. Cholera infection is confirmed in some of those AWD cases.
Public Health Response

Planning and coordination

- High level meeting between WHO and ministerial authorities for health was held on 31 July 2024. The WHO-UNICEF joint Plan of Actions was discussed.
- WHO held the second meeting with the Director-General of the European Civil Protection and Humanitarian Aid Operations (ECHO) to review and discuss the current AWD situation in Yangon.
- WHO had a meeting with a partner on 5 August 2024 for planning of cholera response activities. Prioritization of high-risk townships in Yangon for the provision of support and response was discussed.
- WHO facilitated ad hoc operational discussion with key health partners regarding AWD/cholera response in Rakhine state on 7 August 2024.
  - The meeting highlighted the limited availability of health workers (e.g. medical doctor, nurses) in Rakhine.
  - A need to advocate for improved transportation of medicine and medical supplies to Rakhine, provision of training on case management and IPC for health partners and addressing communication challenges were discussed.
- Joint Health and WASH cluster meeting was organized on 7 August 2024. The partners aim to develop a joint response plan for ongoing AWD/cholera event.

Surveillance and Laboratory

- Laboratory supplies provided by WHO in 2023 facilitated timely detection of cholera cases in this outbreak.
- Additional laboratory supplies have been delivered to the National Health Laboratory and hospitals in 2024. These include: cholera laboratory test kits (for 500 tests), five cholera investigation kits and 2,480 cholera rapid diagnostic tests.

Risk communication and community engagement (RCCE)

- Cholera RCCE materials (https://www.who.int/myanmar/emergencies/cholera-rcce-materials) were shared to stakeholders, targeting communities in Yangon through various communication channels and platforms.
- An urgent RCCE working group meeting was convened with partners on 23 July to discuss AWD/cholera outbreak responses.
- Over 3000 pamphlets on prevention and control messages of cholera have been distributed through the civil society organization networks to communities with limited access to online materials.

Case management and infection, prevention and control (IPC)

- WHO offered training on infection, prevention and control for civil societies organizations which are working actively to respond to AWDs in Yangon.
- WHO held ongoing discussion with a partner for AWD case management in Yangon.
- Most civil society organizations, in collaboration with Township Health Departments, are implementing IPC activities, such as chlorination of water sources, disinfection of cholera patients’ households, and awareness raising among households for AWD and cholera.
Supply of health commodities

• WHO has provided the following health commodities to support responses to ongoing AWD/cholera events.
  o 500 sachets of oral rehydration salt (ORS) and 21 drums (40kg) of bleaching powder to civil society organization network in Yangon.
  o 180 drums (40 kg) of bleaching powder to the ministerial authorities for health.
  o Interagency Emergency Health Kits (IEHK), including Basic Renewable Kits (200), Cholera central kit (1), Cholera community kit (14) and water purification tablets (544,000) were also supplied to the ministerial authorities for health for ongoing Yangon event.

Challenges

• Lack of access to the real-time disaggregated data for the actual ongoing cholera situation has been a challenge for effective planning of resources and informed response actions. WHO has requested the Ministerial authorities to continue communicating detailed public health information on AWD and cholera to WHO as per the requirements under the International Health Regulations (2005).
• The reactive oral cholera vaccines (OCV) can only support the containment efforts; nevertheless, effective and efficient public health measures are required in the longer-term, along with more sustained investments, both in health and WASH.

Way forward

• The WHO-UNICEF joint plan of action for AWD/cholera response has been presented to the ministerial authorities for health with the aim to contain the cases transmission and avoid spill-over in neighboring states/regions and coordinate response action according to standard protocols and requirements, both for health and WASH. The plan is being finalized.