



Children sit with humanitarian relief supplies distributed by UNICEF at BEHS-33 Temporary Camp in Mandalay Region, Myanmar, in April 2025.

unicef 
for every child

Humanitarian Action for Children

Myanmar

HIGHLIGHTS

- The humanitarian situation in Myanmar has further deteriorated following the 28 March earthquake, compounded by floods, disease outbreaks, displacement, ongoing conflict, and other overlapping crises. In total, 21.9 million people need humanitarian assistance in 2025. Earthquake-damaged infrastructure, climate shocks, public health emergencies and protection risks threaten lives. Children's access to education is severely disrupted.
- UNICEF's humanitarian strategy focuses on working with communities and with local and international partners and all stakeholders to deliver life-saving humanitarian assistance while advancing early recovery to ensure critical services reach children in need. This includes restoring essential services and strengthening resilience to ensure a sustainable, child-focused impact amid ongoing crises.
- The revised UNICEF funding requirement is \$346.8 million to provide life-saving humanitarian assistance to 4.5 million people, including 3.1 million children. Despite the 2025 HNRP and HAC reprioritization processes, earthquake-related needs have increased the overall funding requirement for 2025. UNICEF aims to reach 1.36 million people with critical WASH supplies; 700,000 children and women with primary health care services; 2 million children under age 5 with vitamin A supplementation; 714,499 children and caregivers with mental health and psychosocial support services; and 927,441 children with access to education.

KEY PLANNED TARGETS



800,000

children vaccinated against measles



714,499

children/caregivers accessing community-based mental health and psychosocial support



927,441

children accessing formal or non-formal education, including early learning



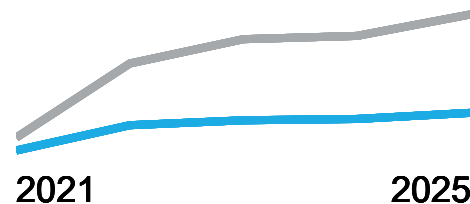
759,000

people accessing a sufficient quantity and quality of water

IN NEED

21.9
million
people¹

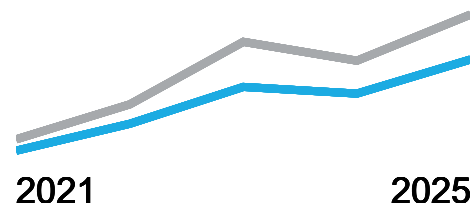
6.9
million
children²



TO BE REACHED

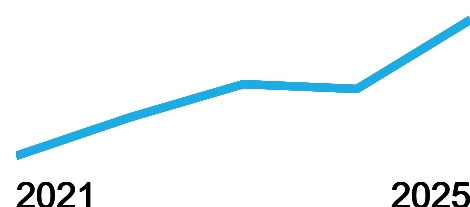
4.5
million
people³

3.1
million
children⁴



FUNDING REQUIREMENTS

US\$346.8
million



HUMANITARIAN SITUATION AND NEEDS

Children and families in Myanmar are facing a deepening humanitarian crisis, significantly compounded by the 7.7-magnitude earthquake that struck on 28 March 2025. The earthquake affected 58 townships, leaving 6.3 million people – including nearly 2 million children – in urgent need of life-saving assistance.⁵ Many of these communities were already experiencing hardship due to conflict, displacement and economic instability. In total, 21.9 million people, including 6.9 million children,⁶ will require humanitarian assistance in 2025, encompassing those affected by both the earthquake and the broader humanitarian crisis. More than 3.5 million people are internally displaced, many living in precarious situations with limited access to essential services.⁷

The earthquake caused extensive damage to healthcare facilities, severely restricting access to primary healthcare, maternal and newborn care and other essential services.⁸ The risk of health problems, including respiratory infections and acute watery diarrhoea, has heightened due to damage to water and sanitation infrastructure, poor hygiene conditions and the early onset of the monsoon season. Malnutrition remains a serious concern, particularly for children under age 5 years and pregnant and lactating women, because access to nutrition services and supplies has been negatively impacted.

The worsening economic context has further reduced household resilience, and nearly 55 per cent of children live in poverty. Rising food prices and shrinking incomes had already affected the quality of children's diets, with over 40 per cent of those aged 6–23 months unable to access adequately diverse and nutritious food.⁹

Child protection concerns are also intensifying. The earthquake has heightened pre-existing risks¹⁰ of violence, exploitation and abuse, especially for women and children. Children separated from their families because of the conflict and those affected by the earthquake have a deep need for care and support. Ongoing aftershocks and uncertainty continue to affect the mental well-being of children, many of whom require psychosocial support to restore a sense of safety and stability. At the same time, their parents and caregivers also need support to be able to care for their children and protect them from harm, violence and abuse.

The earthquake severely disrupted access to education. Of 1,656 schools assessed following the March earthquake, half were damaged and 279 destroyed.¹¹ Prioritized action is needed to support school reopening, including debris removal, establishment of temporary learning spaces and restoration of WASH facilities, because the limited access to education increases protection risks and the risk of a lost generation of children.¹²

SECTOR NEEDS¹³



13.5 million

people in need of essential health care services



2.1 million

children under five in need of nutrition support



9 million

people in need of protection services



6.4 million

children in need of education support



10 million

people lack access to safe water

STORY FROM THE FIELD



Zin Mar stands next to her son, Min Khant, who lives with a disability, in their damaged home in Mandalay, Myanmar, in April 2025.

When the earthquake hit in March 2025, Zin Mar ran barefoot from her collapsing home in Mandalay, gripping her elderly father with one hand and her son, who lives with a disability, in the other. “We had nothing but each other,” she says. Caring for both, in their earthquake-damaged home, has only become harder. Nearby, Honey Kyaw is grieving the death of her 13-year-old brother, killed when a wall fell on him during the quake.

Across earthquake-hit Myanmar, families like theirs are living without shelter, water, or steady support. UNICEF's emergency cash assistance, which prioritizes families with children or a family member with disability, is helping them cover urgent needs – from medicine to home repairs – offering not just relief, but a way to hold on.

[Read more about this story here](#)

HUMANITARIAN STRATEGY

The crisis in Myanmar is protracted and multifaceted, requiring UNICEF and partners to simultaneously address urgent humanitarian needs and invest in long-term community resilience.

In response to the March 2025 earthquake, and in line with the inter-agency Humanitarian Needs and Response Plan flash addendum for the Myanmar earthquake (April 2025), UNICEF is pursuing a coordinated, multisectoral approach that integrates humanitarian relief with early recovery efforts. This includes restoring vital services, enhancing resilience and ensuring long-term stability, particularly for children.

With nationwide coverage through seven field offices and leadership in five clusters/areas of responsibility,¹⁴ UNICEF is strengthening emergency preparedness and delivering a multisectoral response. By leveraging diverse service delivery platforms, UNICEF is expanding its multisectoral response to more communities, addressing urgent needs driven by ongoing conflict and climate-induced shocks.

Life-saving water, sanitation and hygiene (WASH) services remain a priority. These include direct distribution of WASH supplies in hard-to-reach areas; sustainable solutions such as solid waste management; facility restoration in schools and health centres; capacity-building for partners; and hygiene promotion. In earthquake-affected areas, restoration of WASH services remains a priority, especially given the significant level of infrastructure damage. As monsoon season approaches, UNICEF is mobilizing technical assessments and reinforcing infrastructure to mitigate the impact of future disasters.

UNICEF supports health and nutrition interventions in both fixed and mobile settings. These include rehabilitating health facilities, expanding solar-powered cold chain systems and launching mobile health outreach efforts. UNICEF will also deliver maternal, newborn and child health services, including disability-inclusive support.

Nutrition services prioritize early detection, prevention, treatment and care of malnourished children to help them survive, including through promoting positive feeding, dietary and care practices.

Child protection remains central to UNICEF's work in Myanmar, with integrated services offering mental health and psychosocial support; case management; prevention of gender-based violence; prevention and reporting on grave violations against children; and explosive ordnance risk education. UNICEF is also strengthening community systems and the social service workforce, transitioning from emergency response to structured, longer-term, community-based support. These efforts aim to equip local actors with the training and tools needed for sustainable child protection and emergency preparedness.

Education interventions ensure safe, inclusive learning opportunities for marginalized and displaced children. These efforts include creating safe learning environments, distributing essential teaching and learning materials, conducting light repairs to educational facilities, and launching back-to-learning initiatives that integrate structured learning support with psychosocial care to foster resilience and ensure learning continuity.

Humanitarian cash transfers in the form of multipurpose cash are complemented by integrated "cash plus" programming that targets pregnant women, children under age 2 years and children with disabilities. UNICEF is working with the Cash Working Group to harmonize cash targeting, transfer values and delivery systems, supporting both immediate relief and medium-term recovery.

UNICEF prioritizes social and behaviour change interventions to promote life-saving practices, vaccine acceptance and preventive health and social services. Strengthened community feedback mechanisms will enhance integration, social cohesion, accountability and engagement across all sectors. UNICEF is committed to protection of populations from sexual exploitation and abuse (PSEA), adhering to zero-tolerance for sexual exploitation and abuse committed by UNICEF staff and partners.

Progress against the latest programme targets is available in the humanitarian situation reports: <https://www.unicef.org/appeals/myanmar/situation-reports>

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

2025 PROGRAMME TARGETS¹⁵



Health (including public health emergencies)

- 700,000 children and women accessing primary health care in UNICEF-supported facilities
- 800,000 children vaccinated against measles¹⁶



Nutrition

- 438,989 children 6-59 months screened for wasting
- 16,071 children 6-59 months with severe wasting admitted for treatment
- 196,458 primary caregivers of children 0-23 months receiving infant and young child feeding counselling
- 260,737 children 6-59 months receiving micronutrient powder
- 2,053,292 children 6-59 months receiving vitamin A supplementation
- 109,715 pregnant and lactating women receiving multiple micronutrient supplementation



Child protection, GBViE and PSEA

- 714,499 children, adolescents and caregivers accessing community-based mental health and psychosocial support¹⁷
- 1,250,000 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions¹⁸
- 1,250,000 people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations¹⁹
- 4,128 children who have received individual case management²⁰
- 641,365 people provided with landmine or other explosive weapons prevention and/or survivor assistance interventions²¹
- 624,758 girls, boys, women and men reached through Child Protection awareness raising activities
- 21,000 children reached with child protection kits



Education

- 927,441 children accessing formal or non-formal education, including early learning
- 657,461 children receiving individual learning materials²²
- 20,680 Educators/ facilitators supported through training and/or incentives
- 2,100 temporary learning centers renovated/ rehabilitated



Water, sanitation and hygiene

- 759,000 people accessing a sufficient quantity and quality of water for drinking and domestic needs
- 351,000 people accessing appropriate sanitation services
- 709,000 people reached with handwashing behaviour-change programmes
- 1,359,000 people reached with critical WASH supplies
- 119,000 people reached with at least basic water that is safe and available when needed²³
- 300 schools/learning centers and healthcare facilities provided with package of WASH services (interim plus longer-term recovery and reconstruction)²⁴
- 83,500 men, women, girls and boys, who gained access to basic sanitation services



Social protection

- 122,112 households reached with UNICEF-funded humanitarian cash transfers
- 18,600 beneficiaries of cash transfers, including children with disabilities, who are linked with other programmes, information and services



Cross-sectoral (HCT, SBC, RCCE and AAP)

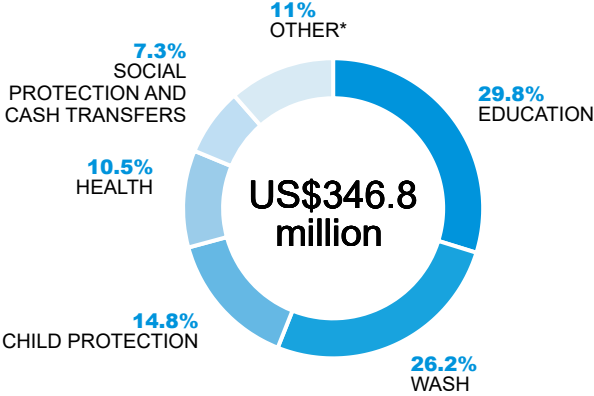
- 3,500,000 people reached with messaging on risk prevention measures and access to services
- 160,000 people sharing their concerns and asking questions through established feedback mechanisms
- 250,000 people participating in engagement actions for social behaviour change

FUNDING REQUIREMENTS IN 2025

UNICEF is requesting \$346.8 million to meet the humanitarian needs of 4.5 million people in Myanmar, including 3.1 million children. Needs remain high throughout the country due to multiple and overlapping crises and have been further exacerbated by the March 2025 earthquake. Despite the 2025 HNRP and HAC reprioritization processes, earthquake-related needs have increased the overall funding requirement for 2025.

The funding requirement considers the dynamic and fast-changing operating environment in Myanmar, diverse implementation approaches and increasing operating costs due to inflation and logistical challenges. Funding will provide 700,000 children and pregnant and lactating women with primary healthcare services and 714,499 children and caregivers with mental health and psychosocial support services. It will enable 747,000 people to gain access to safe water; and provide vitamin A supplements to 2 million children under 5 years of age. In addition, this appeal will ensure 1 million children have access to safe learning environments and critical educational resources. UNICEF will enhance social protection measures, including the provision of cash assistance to vulnerable families, helping to mitigate the impact of the country's crises on livelihoods and household resilience. Cross-sectoral interventions will promote collaboration across programmatic areas, ensuring a holistic response to the needs of affected communities.

In Myanmar's volatile operating environment, the need for flexible funding is increasingly urgent. Such funding will allow UNICEF and its partners to respond rapidly to sudden crises, including the earthquakes that occurred earlier in the year, and to respond to the impact of the flood season and recurring disease outbreaks. To promote a more sustainable response, UNICEF will continue to pursue a humanitarian–development–peace nexus approach, working with partners to align immediate life-saving interventions with longer-term resilience building. Without adequate, flexible and timely humanitarian resources, UNICEF cannot effectively address the country's ongoing emergencies, particularly those driven by climate change and public health challenges. Alongside life-saving humanitarian support, immediate investment in development initiatives is needed to reduce escalating needs and promote long-term resilience and stability in Myanmar.



*This includes costs from other sectors/interventions : Nutrition (7.2%), cluster & Field Coordination (2.5%), Cross-sectoral (SBC, RCCE and AAP) (1.8%).

Appeal sector	Revised 2025 HAC requirement (US\$)
Health	36,288,000
Nutrition	24,925,595
Child protection	51,215,368
Education	103,275,989
WASH	90,979,054
Social protection and cash transfers	25,255,446
Cross-sectoral (SBC, RCCE and AAP)	6,297,178
cluster & Field Coordination	8,521,979
Total	346,758,609

Appeal sector	Original 2025 HAC requirement (US\$)	Revised 2025 HAC requirement (US\$)	Funds available (US\$)	Funding gap (US\$)	Funding gap (%)
Health ²⁵	24,192,000	36,288,000	6,014,139	30,273,861	83.4%
Nutrition ²⁶	25,976,983	24,925,595	5,047,613	19,877,982	79.7%
Child protection ^{27,28,29}	50,996,615	51,215,368	10,361,177	40,854,191	79.8%
Education ^{30,31}	94,439,288	103,275,989	8,792,396	94,483,593	91.5%
WASH ^{32,33,34}	54,406,768	90,979,054	18,522,014	72,457,040	79.6%
Social protection and cash transfers ³⁵	21,796,232	25,255,446	6,596,864	18,658,582	73.9%
Cross-sectoral (SBC, RCCE and AAP) ³⁶	6,091,546	6,297,178	300,912	5,996,266	95.2%
cluster & Field Coordination	8,521,979	8,521,979	2,098,153	6,423,826	75.4%
Total	286,421,411	346,758,609	57,733,268	289,025,341	83.4%

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ENDNOTES

1. Figures from United Nations Office for the Coordination of Humanitarian Affairs (OCHA), HNRP Flash Addendum: Myanmar earthquake, April 2025.
2. The number of children in need is calculated as 31 per cent of the total population, per the HNRP Flash Addendum: Myanmar earthquake, April 2025.
3. The number of people to be reached is comprised of the following: 3,131,815 children and 1,387,020 adults. The calculation of adults takes into account: 1) 924,120 adults reached with critical WASH supplies, including hygiene items; 2) 20,680 educators supported with training and/or incentives; 3) 98,229 primary caregivers of children aged 0–23 months receiving infant and young child feeding counselling (50 per cent of overall target, given potential overlap with other services); 4) 70,000 adult women accessing primary health care in UNICEF-supported facilities (25 per cent of target to reduce double counting with other targets); and 5) 273,991 people reached with humanitarian cash transfers.
4. The children to be reached has been estimated based on 2,053,292 children under age 5 receiving vitamin A supplementation; 741,953 children over age 5 being reached with formal or non-formal education; and 336,570 children being provided with humanitarian cash transfers.
5. OCHA, HNRP Flash Addendum: Myanmar earthquake, April 2025.
6. OCHA, Myanmar: Re-prioritized HNRP addendum – At a glance, April 2025.
7. Office of the United Nations High Commissioner for Refugees (UNHCR), displacement figures as of 21 July 2025.
8. This includes insecurity, multiple restrictions and disruptions including to road access for essential medical supplies.
9. Multi-Sector Needs Assessment (MSNA) 2023, and Myanmar Household Welfare Survey, 2023, International Food Policy Research Institute.
10. Including the risk of children witnessing or experiencing violence in their homes or community, along with the risk of neglect.
11. OCHA, Myanmar: Earthquake response – Situation report no. 3, as of 18 April 2025, OCHA, 18 April 2025.
12. Children and youth face escalating risks of child labour, trafficking, forced recruitment into armed conflict and child/forced marriage.
13. As per the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), HNRP Flash Addendum: Myanmar earthquake, April 2025
14. UNICEF leads five clusters/areas of responsibility: WASH, education, nutrition, child protection and mine action.
15. Some nutrition and child protection targets have been reduced to focus on the most critical requirements as a result of the recent reprioritization of HNRP targets to cover the most vulnerable or high-risk populations.
16. The vaccination target is for children under 1 year of age.
17. This target includes at least 77 per cent (548,899) reached in-person and the rest (165,600) digitally.
18. 175,000 women, girls and boys will be targeted for gender-based violence prevention and response, mainly through child protection interventions. The remaining 1,075,000 will be reached through gender-based violence risk mitigation in education, health, nutrition, social protection and WASH programming.
19. 175,000 people will be targeted through child protection interventions, while the remaining 1,075,000 will be accessing reporting channels for protection from sexual exploitation and abuse through health, nutrition, education, WASH and social protection as a cross-cutting initiative.
20. This target includes children released or exited from armed forces/groups provided with protection or reintegration support; unaccompanied and separated children provided with alternative care or reunified; and legal aid support for children and adolescents/youth, including children identified through the legal aid support project.
21. 300,000 people will be reached through digital explosive ordnance risk education messaging, and 341,365 people will be reached through community-based mechanisms.
22. More than 65 per cent of targeted children will receive individualized learning materials. Additionally, all children accessing learning opportunities will be provided with appropriate teaching and learning materials through the distribution of teaching, learning and recreation kits, as well as the utilization of the Learning Passport, where feasible.
23. Sustained access signifies ensuring at least basic WASH services in communities, learning centres and healthcare facilities, achieved through rehabilitation/reconstruction of facilities and sustained by effective operation and maintenance (O&M) management.
24. The target is comprised of 180 learning centres and 120 healthcare facilities.
25. Unit costs: \$10 per immunized child and \$30 per person for primary health care services.
26. Unit costs: \$5 per child for vitamin A supplementation, screening for wasting, infant and young child feeding counselling; \$10 per person for multiple micronutrient supplementation for pregnant and lactating women and for children; and \$210 per child for severe wasting treatment.
27. The budget for interventions for protection from sexual abuse and exploitation is estimated at \$0.9 per person, with a total budget of \$1,250,000.
28. Unit costs: \$26.75 per child for community-based mental health and psychosocial support; \$5.3 per child reached through education sector facility-based intervention; and digital reach for 165,000 people costing a total of \$500,000; \$20 per person for explosive ordnance risk education; for case management, \$275 per child, and for EQ response, \$250 per child (lower due to the shorter duration of the intervention); \$45 per child for child protection kits.
29. The budget for gender-based violence interventions is estimated at \$1,250,000.
30. The unit costs align with the Education Cluster's costing.
31. Unit cost: \$3,000 per learning centre for renovation/rehabilitation, given the magnitude of damage caused by the earthquake. The previous target was 800 learning centres to be renovated with a unit cost of \$66.64.
32. Unit costs for WASH interventions in institutions (interim plus long-term recovery): \$9,600 per healthcare facility, \$6,500 per school/ learning centre.
33. Unit costs: \$30 per person accessing water; \$28 per person for sanitation; \$18 per person for supplies; \$8 per person for handwashing behaviour change interventions.
34. Earthquake response unit costs: \$22.22 per person accessing water; \$26.31 per person for sanitation; \$9 per person for supplies; \$5 per person for handwashing behaviour change interventions.
35. Unit cost: \$262.50 per household per year for cash transfers, including children with disability linked with other programmes, information and services; and \$131 per household per year for humanitarian cash transfers for an additional 20,000 households affected by earthquake.
36. Unit costs: \$0.5 per beneficiary for messaging; for community outreach, \$12 per person and \$8 per person for additional earthquake targets (lower unit cost due to shorter duration of the intervention); \$4 per person for accountability to affected populations.