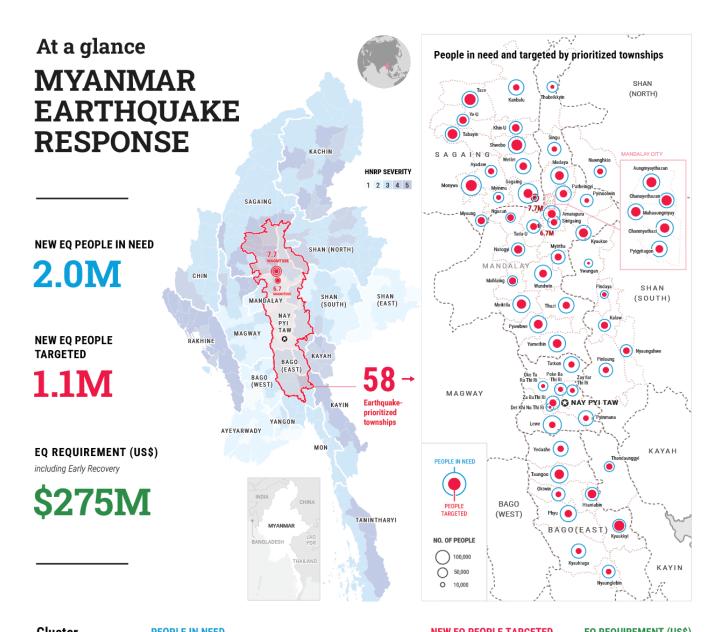
HNRP FLASH ADDENDUM

MYANMAR EARTHQUAKE

ISSUED APRIL 2025



Early Recovery



Cluster breakdown	HNRP 2025 4.3M	New people in need	Total people in need in worst EQ affected area	2025 HNRP Outside of Prioritized 1.1 M	\$275M
Food Security	3.6M	248K	3.9M	666K	43.0M
🕏 Health	2.1M	658K	2.4M	306K	23.0M
8 Nutrition	604K	268K	635K	231K	3.6M
Protection	3.0M	2.2M	5.3M	582K	17.0M
Gen. Protection	2,2M	2.2M	4.4M	515K	7.2M
Child Protection	1.9M	186K	2.1M	227K	2.9M
ਰੂੰ GBV	2.1M	220K	2,3M	221K	3.1M
Mine Action	1.8M	334K	2.1M	347K	3.8M
Shelter/NFIs/CCCM	1.0M	4.2M	5.2M	753K	59.4M
WASH 🚰	1.1M	3.2M	4.3M	1.0M	55.3M
Multi-purpose Cash 739K					27.1M
💥 Coordination and Common Services					2.5M
⊗ Accountability to Affected People					800K
X Coordination					1.3M
of Protection from Sexual Exploitation and Abuse					538K
ta Logistics					2.7M



Situation Overview

PEOPLE AFFECTED
BY THE EARTHQUAKE

17.2M

People living in the affected areas (13 states/regions)

SHAKE INTENSITY

OR
HIGHEI

9.1M

People living in affected

People living in affected 58 prioritized townships in 7 worst-affected states/regions SHAKE INTENSITY

OR HIGHE

EARTHQUAKE IMPACTS

(As of 6 April 2025)

3.4K

PEOPLE KILLED

220

PEOPLE MISSING

4.5K

PEOPLE INJURED

41K

HOUSES DAMAGED OR DESTROYED

3.3K

RELIGIOUS FACILITIES DAMAGED

500K+

PEOPLE WITHOUT ACCESS TO LIFE-SAVING CARE

1.8K

SCHOOLS DAMAGED OR DESTROYED

100K+

PREGNANCIES AT RISK DUE TO DAMAGED HOSPITALS

The devastating 7.7 magnitude earthquake that struck Myanmar on 28 March 2025 caused widespread destruction—reducing homes, hospitals, schools, and vital infrastructure to rubble—in areas where over 17 million people live. More than 9.1 million live in the hardest-hit areas, including Mandalay and Sagaing, where entire communities have been upended, forcing people to seek shelter in makeshift conditions often in the open, disrupting markets, and bringing essential services—including running water, sanitation, and

health—to the verge of collapse. Of these, 6.3 million people are estimated to be in urgent need of assistance and protection, an increase of 2 million people due to the earthquake.

The earthquake and hundreds of aftershocks compounded and multiplied the needs of people already facing immense humanitarian needs. Even before the disaster, an estimated 19.9 million people were in need due to ongoing conflict, climatic disasters, displacement, and economic

hardship. With affected people's needs escalating rapidly, the earthquake has pushed those already vulnerable even deeper into crisis—while tipping many others into new and urgent needs. The international community has stepped in and rapidly mobilized support to local responders and communities, working to scale up assistance across affected areas.

This document outlines the Humanitarian Country Teams (HCT) response strategy, with additional estimated financial requirements for humanitarian organizations to assist people impacted by the devastating earthquakes and succeeding aftershocks. This addendum to the Humanitarian Needs and Response Plan (HNRP) includes the projected requirements of United Nations (UN) agencies and non-governmental organizations (NGOs). The figures provided are indicative and may be revised as further information becomes available on the evolving situation and response required.

Context

The devastating earthquakes that struck Myanmar on 28 March have caused widespread death, human suffering and destruction—aggravating an already alarming humanitarian crisis. Over 6.3 million people are in immediate need of humanitarian assistance and protection as a result of the earthquakes, including 4.3 million people who were already in need across the affected areas and now require even greater support, and an additional 2 million people who require urgent assistance and protection due to the earthquakes.

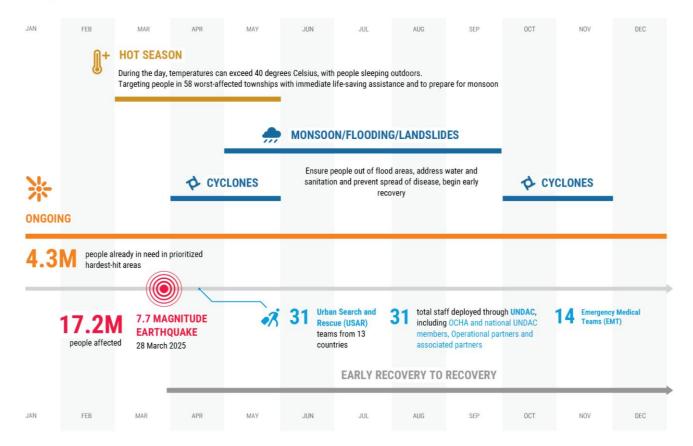
On 28 March 2025, just before 1 p.m. local time, a powerful 7.7 magnitude earthquake struck central Myanmar. The epicentre was near Sagaing and Mandalay—two of the country's most populated areas—and the earthquake hit at a shallow depth, making it even more destructive. People across the country—and even beyond—felt the ground shake. Just minutes later, a second earthquake of 6.7 magnitude ripped through the same regions, with dozens of aftershocks striking in the days that followed. Homes, schools, hospitals and religious sites have collapsed, and entire communities have been torn apart.

The scale of the disaster has been devastating and will be felt for years to come. Military authorities in Myanmar have declared a state of emergency in six regions —Bago, Magway, Mandalay, Sagaing, Nay Pyi Taw and Shan State—and have called for international support to help millions of people affected.

Ten days on, by 6 April, at least 3,400 people had died, over 4500 had been injured, and more than 200 were still missing, according to official figures. The real toll is likely much higher, with communication blackouts and underreporting making it difficult to grasp the full scale of the tragedy.

Many families continue sleeping in the open, too afraid to return home. Over 40,000 homes were damaged or destroyed, according to preliminary data from the Association of Southeast Asian Nations (ASEAN) Coordinating Centre for Humanitarian Assistance, and ongoing aftershocks continue to shake the affected areas, threatening further destruction across already devastated communities. These tremors are deepening fear in the communities and preventing many from returning to their homes. The aftershocks also complicate response efforts, making it even harder to reach and support those in need.

TIMELINE



The earthquake struck the heart of Myanmar's food-producing regions—destroying fields, irrigation, and grain stores. Millions of livestock are at risk, and farmers now face the loss of both their harvest and their only source of income. In a country where 15 million people are food insecure, more than 3.6 million in the areas worst affected by the earthquake. The area hit by the earthquake produces one-third of Myanmar's cereals and nearly 80 percent of its maize, while hosting a large share of the country's livestock.

Massive destruction has made life extremely difficult for millions, decimating access to essential services. People in the hardest-hit areas face tremendous challenges to access electricity or clean water, while phone and internet access are severely disrupted. Families remain unable to contact missing or separated loved ones due to the communications blackout, while services that depend on electricity are largely disrupted. Other civilian infrastructure, including dozens of roads and bridges, and Mandalay's airport have also been damaged.

Disease is already spreading, raising fears of a looming health emergency. Cases of diarrhoea are rising, children and older people are falling ill from the heat, and concerns about cholera are growing, especially where bodies remain buried under the rubble in this extreme heat. This is unfolding as nearly 70 health facilities have been damaged, and severe shortages of medical supplies are putting the lives of the injured and sick-including women and children-at even greater risk. At least 173,000 pregnant women are struggling to access life-saving sexual and reproductive health services. The disruption of health services is cutting people off from the medications they rely on to survive-whether it is for HIV/AIDS, tuberculosis, diabetes, or high blood pressure-putting thousands at serious medical risk.

Just over a week after the earthquakes, occurring at the start of the period of extreme heat in Myanmar, heavy rains poured over areas torn apart by the disaster, adding to the hardship faced by already struggling communities. The approaching monsoon season increases the risk

of flooding in already devastated areas. As heavy rains drench the earthquake-hit areas, countless families are still sleeping in the open, with no proper shelter.

The earthquake has caused major disruption to Myanmar's already fragile education system.

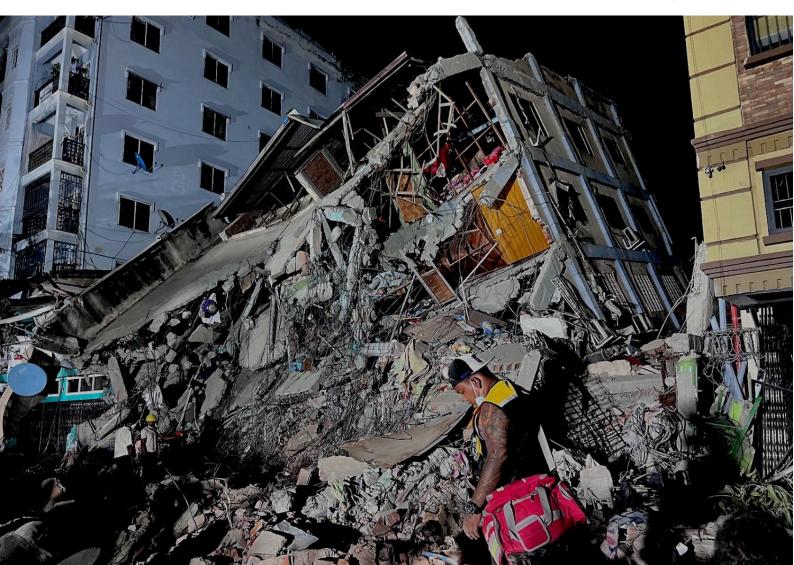
Nearly 2,000 schools have been damaged or destroyed, with many now being used as displacement centres—leaving hundreds of thousands of children without access to education. With classrooms reduced to rubble, there is growing concern that many children, especially those from poorer communities, will fall behind in their studies—or never return to school at all.

The psychological toll on communities is immense. People are still reeling from the emotional impact of the initial earthquake, and the relentless aftershocks are only deepening fear and helplessness. Families—especially children—are facing complex feelings of fear, anxiety, and

confusion as they struggle with loss, disrupted lives, and the constant uncertainty of whether another major shock is coming. Comprehensive mental health and psychosocial support services are urgently needed to help people begin to heal and rebuild their sense of security and community.

The earthquake has disproportionately affected people with disabilities, who face greater risks due to injuries, displacement, and disrupted services. A rapid UN assessment with 15 disability-focused organizations in Mandalay and Sagaing found that 11 organizations reported direct impacts from the earthquake. The disaster has also led to new disabilities and placed additional strain on already limited resources. Families of people with disabilities—who make up over a third of households in Myanmar—have suffered severe hardships, including the destruction of homes, loss of livelihoods, and damage to critical infrastructure.

Photo: WFP/Arete



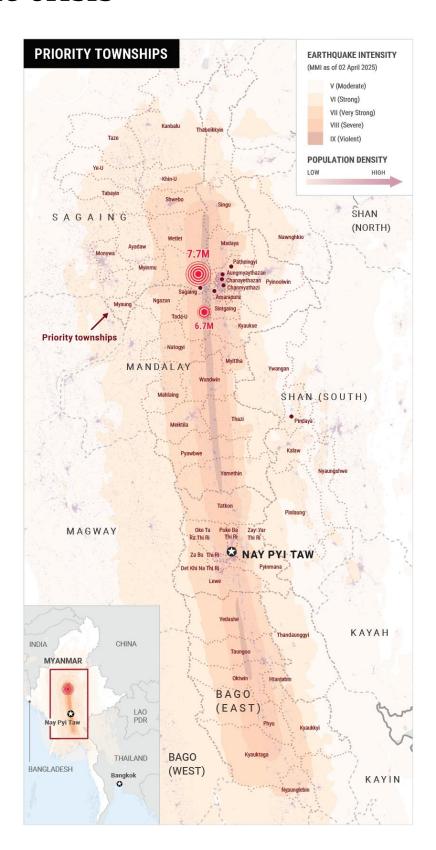
Evolution of the crisis

The earthquake and hundreds of aftershocks struck people who were already facing immense humanitarian needs. An estimated 19.9 million people were already in need of humanitarian assistance prior to the disasters.

Even before the earthquake, people in Myanmar were living through a severe humanitarian, development, and human rights crisis—driven by persistent conflict, recurrent disasters, political instability, and economic hardship.

Of Myanmar's 3.5 million internally displaced people, approximately 1.6 million are in the hardest-hit regions—Mandalay, Sagaing, and parts of Shan State. Over 30 per cent of them are children and many have been displaced multiple times, fleeing their homes with nothing but the clothes on their backs. Displaced people struggle to access vital services, including health care and education.

More than 10 million women and girls were estimated to need humanitarian assistance even before the disaster, due to the compounded impacts of conflict, political instability, and economic collapse. Now, their situation has become even more precarious. Women and girls are disproportionately affected in crises—facing increased risks of gender-based violence, insecurity, and serious barriers to accessing essential services, healthcare, and protection.



Response scale up

CLUSTER PRIORITY NEEDS



Education in Emergencies

Large numbers of schools destroyed or used to shelter displaced people



Food Security

Urgent need for ready-to-eat food and basic commodities, major damage to agriculture



Health

Hospitals and clinics destroyed, remaining facilities overwhelmed. Critical shortages of medical supplies, reproductive health services, and mental health and psychosocial support



Protection

Need to protect vulnerable people, particularly women, children, elderly and persons with disabilities as protection risks, including child protection, gender-based violence and mine risks have severely increased, requiring urgent Protection including MHPSS, CP, GBV and MA AoR interventions



Nutrition

Rising prices and food shortages threaten maternal & child nutrition



Shelter

Millions of people have lost their homes or shelters and are sleeping outside



WASH

Urban water systems are heavily damaged, a high number of sanitation systems are destroyed and aquifers are impacted affecting wells in rural areas



Multi-purpose Cash

Despite extensive damages, many markets are functioning. Right now, most people's needs are multidimensional



Early Recovery

2 million tonnes of debris in need of urgent removal

The humanitarian community is working around the clock to support local responders and communities, and to urgently scale up their operations across the earthquake-affected areas of Myanmar. But more needs to be done.

UN agencies, NGOs, the Red Cross and Red Crescent Movement and local partners rapidly mobilized aid-including medical care, shelter materials, safe water, hygiene kits and foodworking closely with local organizations and generous local communities to reach affected communities. In the first 10 days that followed the disaster, over 165,000 people were reached with essential supplies and cash assistance. Emergency food distributions began within 48 hours, with at least 70,000 people reached in Mandalay, Nay Pyi Taw, Sagaing and southern Shan. Over 100 tonnes of medical supplies have arrived, and mobile health teams are providing trauma care, essential medicines and psychosocial support. Local partners are being supported to address rising health risks-including

diarrhoea, respiratory infections and skin diseases—particularly in areas with damaged water and sanitation infrastructure. Child protection efforts are ongoing to identify and reunite separated children, offer mental health support and create safe spaces for displaced families.

Regional and international actors have stepped in swiftly. Search and rescue teams reached the epicentre within hours, with more than 30 teams from 13 countries helping locate survivors and support communities in their darkest hours. In addition, 14 international Emergency Medical Teams have deployed in the country, setting up field hospitals and mobile teams in central Myanmar to provide health services to people in

most affected areas. The ASEAN Coordinating Centre for Humanitarian Assistance (AHA) deployed relief items from its regional warehouse in Malaysia and activated its emergency response team with personnel from across the region. The United Nations has reinforced its presence through the deployment of UN Disaster Assessment and Coordination (UNDAC) teams and is working closely with ASEAN and local authorities to coordinate the response.

Despite these efforts, the scale and urgency of the disaster demand far greater action. Affected people's needs are rapidly outpacing the current response capacity. Many affected peopleespecially those in hard-to-reach areas-have yet to receive the support they desperately need. The 2025 HNRP was already critically underfunded before the earthquake struck, with just over 5 per cent of the US\$1.1 billion requested received as of 10 April 2025. Now, with new and growing needs emerging, additional resources are urgently required. This document outlines the financial requirements to scale up the earthquake response and calls on the international community to step up its support-ensuring that life-saving aid reaches all those in need, before it is too late.

This addendum increases the 2025 HNRP to meet new needs.

Within the 58 prioritized townships, there were already 4.3 million people in need. However, the wide-ranging impact of the earthquake rapidly worsened those needs—pushing the most vulnerable even deeper into crisis and affecting many others not previously targeted, creating new and urgent needs.

While the majority of people and activities were already included in the 2025 HNRP in some form, this addendum updated requirements to address

escalating needs, new caseloads and additional activities where appropriate.

Consequently, the additional requirements being added to the HNRP for earthquake-affected areas are costed at \$275 million, including immediate early recovery activities.

Access situation

The earthquake has compounded already severe access challenges across Myanmar, with damage to roads, airports, and key infrastructure further limiting the ability of humanitarian actors to respond effectively. The situation is particularly challenging in areas not controlled by the State Administration Council (SAC), where humanitarian access remains severely constrained. Over the past years, aid operations in Myanmar have faced persistent challenges due to the ongoing armed conflict, bureaucratic barriers, and targeted violence against humanitarian personnel and infrastructure. According to OCHA's Access Severity monitoring at the end 2024, of the 58 townships located in the highest-intensity earthquake zones, 14 face extreme access difficulties (Level 3), primarily concentrated in northern Sagaing, northern Shan, and eastern Bago. An additional 26 townships—including 17 in Mandalay—are reported to have moderate access restrictions, while 9 townships are perceived to be fully accessible. Of the nearly 9 million people residing in these highest-intensity earthquake areas, approximately 1.2 million are in townships with extreme access challenges, and some 4.5 million live in areas with moderate constraints. Notably, almost 2 million people living in the highest-intensity earthquake areas are in the 9 townships considered to be relatively accessible. Physical access constraints also exist, as roads, bridges, and other critical infrastructure were impacted by the earthquake.

Strategic Objectives

*The two Strategic Objectives as outlined in the HNRP are retained for this addendum with no changes.

SO1



Protection risks and needs are identified, monitored, mitigated, and addressed for crisis-affected people and stateless people, while the centrality of protection is upheld across the humanitarian response including through the promotion of respect for human rights, international humanitarian law and humanitarian principles.

SO2



Suffering, morbidity, and mortality are prevented or reduced among crisis-affected people through equitable, safe, and dignified access to timely, multisectoral, life-saving assistance—ensuring their well-being and preventing further deterioration of their humanitarian conditions.

Photo: WFP/Arete

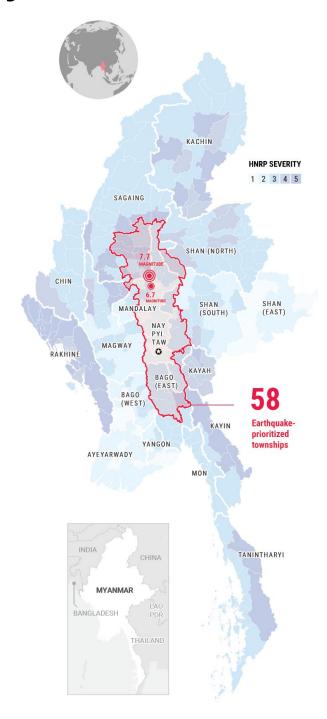


Response Strategy

This addendum to the 2025 HNRP seeks, an additional US\$275 million to deliver principled humanitarian assistance and protection to 1.1 million of the most vulnerable people—out of 6.3 million now in need - affected by the devastating earthquakes in Myanmar, while continuing to address pre-existing needs. The humanitarian community will build on existing response structures and coordination mechanisms to prioritize the hardest-hit areas and reach those most in need. This response plan outlines key priorities and activities to scale up life-saving assistance between April and December 2025, complementing efforts already underway through the broader Humanitarian Needs and Response Plan.

Putting people—including vulnerable and marginalized groups—protection, and gender equality at the heart of the response

This plan puts the rights, safety, and dignity of affected people, especially those most at risk, at the centre of humanitarian action, guided by the Humanitarian Country Team's strategy on the Centrality of Protection. The humanitarian community will ensure that assistance responds to the specific needs of women, men, girls, and boys in vulnerable situations and people in marginalized groups. Recognizing that protection risks often increase after disasters-particularly as people lose their homes, are forced to flee. exhaust their meagre resources and run out of coping mechanisms-humanitarian workers are scaling up efforts to deliver inclusive, gender- and age-responsive, and protection-focused assistance. This includes addressing the urgent needs of women and girls, who face heightened risks of gender-based violence, food insecurity and lack of access to reproductive health care. Safe shelter, cash support, health and psychosocial support are being prioritized, alongside efforts to reunite separated children and prevent



exploitation. The response is also working to ensure the full inclusion of people with disabilities, by removing barriers, supporting local organizations, and applying the Inter-Agency Standing Committee (IASC) disability guidelines. Humanitarian organizations are also strengthening Accountability to Affected People (AAP) by expanding feedback systems, improving information sharing and ensuring communities play a central role in shaping the response. They

are also working closely with women-led and feminist organizations, as well as groups representing LGBTQIA+ populations and other marginalized groups, to promote localization and to ensure the response is locally informed and gender-transformative. Gender and age-sensitive and sex-, age- and disability-disaggregated data (SADDD) will routinely be collected to promote protection through all aspects of humanitarian programming.

Stepping up protection from sexual exploitation and abuse (PSEA)

Humanitarians are taking urgent action to prevent and respond to sexual exploitation and abuse in the aftermath of the earthquake. To this end, PSEA is being mainstreamed across all sectors to uphold accountability and safeguard dignity in every part of the response. With protection systems weakened and vulnerabilities rising, partners are ramping up PSEA training for staff and volunteers, expanding community awareness, and strengthening reporting and referral pathways. Efforts focus on working with communities to build safe, accessible mechanisms for reporting sexual exploitation and abuse, ensuring survivors receive timely, life-saving support. PSEA community awareness, reporting mechanisms, and referral pathways will be aligned with the outreach and communication efforts outlined under AAP systems, using the same trusted community channels to ensure coherence, accessibility, and impact.

Reaching all people targeted by overcoming access challenges and strengthening localization

Reaching all people targeted—including those in hard-to-access areas—is a top priority of the humanitarian response. The earthquake has

further compounded existing access challenges in Myanmar, particularly in conflict-affected and remote communities. Humanitarian partners will redouble efforts to overcome these barriers through sustained access negotiations, flexible delivery modalities, and a strong emphasis on localization. To achieve this, humanitarian actors will leverage Myanmar's extensive network of local responders, including national NGOs, civil society groups, community volunteers, and faith-based organizations. These local actors are often the first—and sometimes the only—responders able to access communities in need. Supporting and working through these networks not only helps expand the reach of aid but also strengthens the longer-term localization agenda. Efforts will focus on expanding presence beyond urban centres, prioritizing underserved rural areas, and ensuring aid is delivered as close to affected people as possible. Affected communities will be at the centre of this approach, with local partners empowered to lead, inform, and shape the response in line with humanitarian principles.

Integrating monsoon preparedness into the earthquake response

With the monsoon and cyclone season approaching, the earthquake response is being designed to anticipate and address the additional risks of flooding, cyclones, landslides, and disease outbreaks. Humanitarian organizations are prioritizing the most exposed communities—especially those living in makeshift shelters—by pre-positioning medical, nutrition and hygiene supplies and with actions to ensure reinforcement of shelter, adequate latrines and water points, in addition to health and awareness campaigns. Monsoon and cyclone preparedness is being fully integrated across sectors to protect lives, prevent further displacement, and ensure continuity of aid.

Emergency Response



Education

Impact and needs

The powerful earthquake and its aftershocks have added another layer of vulnerability for children already affected by conflict and displacement—further disrupting their access to education. More than 1,800 public, monastic, ethnic, and community-based schools have been damaged or destroyed, including critical water and sanitation facilities. Some schools are now serving as temporary shelters, leaving children without safe spaces to learn and exposing them to increased protection risks and psychological distress. Around 2.7 million teachers and school-aged children are estimated to have been affected by the disaster. Children in Myanmar urgently need support—including safe learning environments, trained educators, psychosocial care, and essential learning materials—to prevent them from falling further behind or dropping out of school entirely.

Response

The Education Cluster aims to support 111,000 of the most affected children and teachers. Activities will include establishing safe, protective learning spaces; training teachers and facilitators to provide psychosocial support; and distributing teaching and learning materials. These efforts will ensure children can continue learning and support their mental well-being and continued education.



Impacts and needs

Even before the earthquake, 15 million people in Myanmar were already facing hunger—including 2.8 million people who were food insecure in 2024 and who live in townships most affected by the earthquake (considering only shake intensity zones VII-IX). The disaster has compounded food insecurity by destroying livelihoods, damaging markets, destroying fields, irrigation, and grain stores and displacing thousands. Infrastructure damage and access constraints are making it even harder to deliver food assistance, leaving many without reliable access to a daily meal. Over 500,000 people, who were previously in emergency food insecurity and in dire need of assistance prior to the earthquake, now require urgent food support in earthquake-affected regions.

Response

The Food Security Cluster is implementing a two-phase emergency response, targeting an additional 666,000 people affected by the earthquakes with a combination of food, cash emergency agriculture inputs.

In Phase I, partners will provide life-saving support, including the distribution of ready-to-eat high-energy fortified biscuits to 110,000 displaced people, including those sheltering outdoors or in public spaces,

complemented by general food assistance for 450,000 displaced people living in collective centres or with host communities, multipurpose cash assistance to 450,000 people, and nutrition support to 100,000 pregnant and lactating women and children under age five. The financial assistance to affected households will also be used to meet immediate livelihood, and farming needs, enabling preparation for the coming monsoon season. Phase II will continue supporting around 500,000 people, strengthen market-based interventions, supply essential agricultural inputs, and scale up nutrition and cash-for-work activities.



Impact and needs

The earthquake has severely disrupted access to health care, with dozens of health facilities damaged or destroyed and many more struggling to operate under strained conditions. The lack of essential medicines and adequate treatment for the injured is putting countless lives at risk. Pregnant women face life-threatening barriers to maternal and neonatal care, while the threat of disease outbreaks, including cholera and measles, continues to grow. Cramped living conditions in temporary shelters, and lack of access to clean water and sanitation services risk further fueling the spread of illnesses such as cholera, diarrhoea, dengue and malaria, in addition to measles and tuberculosis—placing already devastated families in even greater danger. At the same time, mental health needs are rising sharply as communities grapple with the emotional impact of loss and distress.

Response

The Health Cluster is scaling up life-saving support to reach an additional 306,000 people—out of 2.4 million in need of health assistance—through mobile medical and surgical teams, the distribution of medical supplies, and efforts to equip and support health centres. The response includes trauma care, sexual and reproductive health services, and disease outbreak prevention. Mental health and psychosocial support (MHPSS), rehabilitation, and coordination with Water, Sanitation and Hygiene (WASH) partners are key priorities. Selected health facilities will also be rehabilitated to restore access to essential services.

Photo: UNICEF





Impact and needs

The earthquake has sharply worsened the nutrition crisis, especially for children under age 5 and pregnant and lactating women—groups already vulnerable before the disaster. Displacement, overcrowded shelters, hunger, and the destruction of health and nutrition services have left many without the support they need to stay healthy and nourished. Disrupted breastfeeding and infant feeding practices—worsened by the emotional impact of the crisis, poor maternal nutrition, and a lack of counselling—are putting babies and young children at serious risk. For many, especially in the first critical 1,000 days of life, the absence of proper nutrition could have lifelong consequences. Without urgent support, the combined impact of malnutrition, disease, and inadequate care will lead to preventable illness—and loss of life.

Response

The Nutrition Cluster aims to reach around 231,000 additional people through a comprehensive response that combines community outreach and facility-based services. Partners will promote optimal infant and young child feeding (IYCF) practices, including breastfeeding and complementary feeding, through caregiver counselling and targeted support. Interventions will include micronutrient supplementation, blanket and target feeding for children and pregnant and lactating women, and support for non-breastfed infants in line with IYCF-E guidelines. Front-line workers will be trained in the early detection and treatment of malnutrition, and nutrition programming will be closely integrated with health, water, sanitation and hygiene, social behaviour change communication, cash assistance and food security interventions to address underlying causes and improve long-term outcomes. At every level, the response will uphold inclusion and dignity—ensuring that disability inclusion, gender equity, and accountability to affected people are woven into every intervention, so no one is left behind.



Impact and needs

The earthquake has sharply intensified risks of violence, exploitation, and abuse, especially for those living in displacement sites and remote, hard-to-reach areas. The number of people in need of protection in areas ripped through by the earthquake has risen to 5.3 million, up from 3 million before the disaster. Damaged infrastructure and ongoing insecurity are making it even harder for communities to access the services they desperately need. Children are being separated from their families, experiencing severe emotional distress, and facing growing risks of neglect and exploitation. Women and girls are especially vulnerable to gender-based violence in overcrowded shelters, where privacy and safety are limited. In mine-contaminated areas, the shaking has shifted or exposed explosive remnants, increasing the danger for families forced to flee. The need for protection is urgent—and growing by the day.

Overall Response

The Protection Cluster aims to reach an additional 582,000 people with crucial protection services. Mobile protection teams will be deployed to deliver case management, legal aid, mental health and psychosocial support (MHPSS), and referrals, particularly in hard-to-reach and severely affected areas. These teams will also support ongoing protection monitoring, share critical information, and connect people to available services. The response will prioritize community-based approaches, working closely with local organizations to strengthen self-protection capacities and ensure inclusive, localized service delivery. Efforts will focus on risk mitigation, support for cash-based protection interventions, and the integration of protection principles across all sectors of the response.

Response by Area of Responsibility

Child Protection

Child Protection AoR follows a socioecological approach to earthquake response, therefore focusing on children, caregivers and communities to support children in the aftermath of the disaster. The AoR will provide case management, family tracing and reunification, mental health and psychosocial support, awareness raising on key child protection risks, and the distribution of child protection kits. Community-based mechanisms will be strengthened, alongside efforts to address negative coping mechanisms such as violence in the home, child labour, and unsafe migration, and to scale up life-saving messages on trafficking, family separation, and other critical risks.

Gender-Based Violence (GBV)

The AoR will scale up mobile service delivery—including integrated GBV and sexual and reproductive health support—distribute dignity kits, and reestablish Women and Girls Safe Spaces to prevent GBV and support survivors. Referral pathways, safe houses, and capacity-building for front-line responders—including increasing the presence of trained female service providers—will be expanded. All interventions follow a survivor-centred approach and are closely coordinated with other sectors to ensure inclusive, effective protection outcomes.

Mine Action

Mine action partners will scale up life-saving explosive ordnance risk education (EORE) and victim assistance in earthquake-affected areas. Many of the hardest-hit townships were already contaminated with landmines, and the earthquake has shifted or exposed explosive remnants, significantly increasing the danger. Urgent efforts will focus on EORE and raising awareness in at-risk communities and scaling up assistance for survivors of mine-related incidents.



Impact and needs

The earthquake caused widespread destruction, damaging or destroying over 40,000 homes and leaving thousands of families with nowhere to return to. The number of people in need of shelter, NFI and CCCM support has surged from 1 million to 5.2 million. Many are now living in overcrowded, makeshift shelters, lacking basic household items and with little protection from harsh weather or access to essential services.

Displacement, unsafe living conditions, and limited resources are further compounding vulnerabilities—particularly as the monsoon season approaches, bringing heightened risks of flooding, disease, and further displacement.

Response

The Shelter/NFI/CCCM Cluster will assist 753,000 people through a two-phase response: an initial phase delivering life-saving emergency shelter and essential household items, followed by transitional shelter support and early recovery activities. This approach aims to protect displaced families from exposure, reduce immediate risks, and strengthen resilience ahead of the monsoon. The Cluster will coordinate closely with local partners and communities to ensure the response is localized, technically sound, and delivered in an accountable and dignified manner.



Water, Sanitation and Hygiene (WASH)

Impact and needs

Following the devastating earthquake in Myanmar, more than 4.3 million people now urgently need WASH support—a staggering rise from 1.1 million before the disaster in the affected areas. Assessments across 189 villages in 31 townships reveal widespread destruction of water systems, including broken boreholes and damaged piped networks, along with the collapse of over 42,000 latrines. Countless families no longer have access to safe drinking water, and power outages are making water pumping impossible. With no functioning sanitation, the threat of disease outbreaks—particularly acute watery diarrhoea—is growing by the day. Early rains in the northwest are already making the situation worse. Urgent, life-saving action is needed now to prevent the spread of disease and restore safety, health, and dignity for families who have lost everything.

Response

The WASH Cluster aims to reach an initial 1 million earthquake affected critically vulnerable people in urban and rural areas with urgent, life-saving support. The WASH earthquake response strategy is structured around two integrated phases of emergency and early recovery. In the emergency phase, the focus is on providing immediate access to safe drinking water, emergency sanitation, handwashing facilities, and hygiene kits to displaced populations, with attention to health facilities to ensure continuity of care and infection prevention.

The early recovery phase will prioritize the rehabilitation and reconstruction of damaged WASH infrastructure, including water systems, latrines, and hygiene facilities in both communities, temporary shelter/transit/relocation sites and health facilities. This phase will emphasize restoring water supply systems, improving storage and access. Hygiene promotion activities, tailored to local contexts, will be rolled out in coordination with local communities to restore hygiene practices, particularly in areas facing early rainfall and poor drainage to strengthen resilience and reduce public health risks.

Cash and Voucher Assistance (CVA) Programming

Impact and needs

The earthquake has deepened already critical vulnerabilities, leaving many families without income or the ability to purchase basic necessities. Years of protracted crisis had already eroded purchasing power, and now affected people are struggling to afford essentials such as food, safe drinking water, clothing, shelter materials, and medicines—particularly in areas where goods remain available but out of financially out of reach. Local markets have also been disrupted, and many traders have been impacted by the disaster. There is a pressing need to restore people's dignity and choice by enabling them to meet their own priority needs in a flexible way, while also supporting local market recovery.

Response

The response will scale up multipurpose cash (MPC) assistance to empower affected people to meet their most urgent needs based on their individual circumstances. The Cash and Markets Working Group (CMWG) will use the Minimum Expenditure Basket (MEB) to guide the value of transfers, currently set at MMK 360,000 (approximately US\$86) per household per month. A one-month cash transfer will be provided to households newly affected by the earthquake, while those already prioritized in the HNRP will receive two months of assistance. Where needed, MPC will be combined with sector-specific assistance—either in-kind or cash-based—to ensure a tailored and comprehensive response. In addition to supporting household needs, this approach will help stimulate local markets through increased purchasing power and contribute to the wider recovery through the multiplier effect.



Impact and needs

The earthquake has exposed serious logistics gaps that are hampering the timely delivery of humanitarian aid. Severe damage to roads, bridges, and commercial infrastructure in affected regions such as Mandalay, Sagaing, Nay Pyi Taw, and Southern Shan has created major physical access constraints. In addition, bureaucratic hurdles—including importation procedures and travel authorizations—are disrupting the smooth flow of humanitarian supplies. Partners have also identified a critical shortage of storage facilities needed to scale up operations. Effective logistics coordination is urgently required to share access information, streamline customs procedures, and avoid duplication of efforts in the response.

Response

The Logistics Cluster will support the earthquake response by providing essential coordination, information management, and logistics services to humanitarian partners. This includes collecting and sharing real-time logistics data, mapping access constraints, and facilitating solutions for transport and storage. The Cluster will engage operational partners to ensure efficient use of available resources and promote joint planning, helping to overcome regulatory bottlenecks and ensure that relief items reach affected communities swiftly and efficiently.

Early Recovery

Impact and needs

The earthquake has left widespread devastation across affected areas, disrupting livelihoods, damaging infrastructure, and limiting access to basic services. Rubble and debris are blocking roads, homes, and public spaces, making it difficult to deliver aid and restore essential services such as healthcare, water, electricity, and waste management. Many community facilities—critical for daily life and local economies—have been damaged or destroyed. The earthquake caused widespread damage to cropland, irrigation infrastructure, storage facilities, agricultural equipment and inputs, severely disrupting food production. The destruction has deepened vulnerabilities, especially for displaced people and those already struggling due to conflict or poverty, and urgent early recovery support is needed to stabilize conditions and enable affected populations to begin rebuilding their lives.

Response

Early Recovery partners will support area-based interventions focused on the rapid removal of debris, restoration of essential services, and rehabilitation of key community infrastructure. Initial efforts will prioritize emergency employment through cash-for-work schemes, enabling affected people to earn income while helping to clear rubble and restore public spaces. The response will include the rehabilitation of infrastructure, irrigation systems, farms roads, and landslide-affected farmland, networks, bridges, and market areas. Partners will provide cash-based assistance and start-up support to vulnerable groups, including women and displaced people, to revive small businesses and support income-generating activities. These efforts will be complemented by support for supply chain recovery, the repair of small-scale infrastructure, and engagement with local tradespeople and market actors. All activities will be informed by multisectoral assessments, satellite imagery, and strong community engagement to ensure the response is inclusive, gender-responsive, and aligned with longer-term recovery goals.

Coordination and Common Services

Coordination will be scaled-up in the earthquake affected areas, with consideration for the creation of new coordination hubs, repair and expansion of meetings spaces as needed, while ensuring that the coordination systems are adapted to be fit to purpose to the earthquake response. The Coordination and Common Services Cluster includes requirements for the United Nations Office for Coordination of Humanitarian Affairs (UN OCHA), as well as support for the Gender in Humanitarian Action (GIHA) Working Group, localization efforts and additional safety and security. Specific funding for scale-up of Accountability to Affected People (AAP) and Prevention of Sexual Exploitation and Abuse (PSEA), have also been included.

Safety and Security

Additional personnel, equipment and resources are required to bolster the existing safety and security capacity to expand services to meet the needs of the response by strengthening the security management system and security in operational areas to ensure humanitarian partners continue implementing life-saving interventions in earthquake response and recovery areas. This will include, conducting security risk assessments to enable access of for passage of vehicles, convoys and personnel and enhancing analytical insight on local and regional security dynamics. The Saving Lives Together (SLT) framework will also be strengthened to expand information-sharing, situational awareness, security coordination and operational arrangements between the UN and NGOs to enable effective operations.

How to support the Myanmar Earthquake Response

SUPPORT PARTNERS PARTICIPATING IN THIS RESPONSE

The Flash Addendum is developed in-country, based on solid analysis of response contexts and engagement with national and international humanitarian partners. Direct financial contributions to reputable aid agencies are one of the most valuable and effective forms of response in emergencies.

To help trusted and vetted humanitarian organizations on the front lines, you can contribute to the Myanmar Humanitarian Fund (MHF). The MHF is a multi-donor pooled fund that supports the highest-priority emergency needs as decided by local communities.

- Individual donors can contribute online at crisisrelief.un.org/myanmar-earthquake.
- Alternatively, donors could also write to ocha.donor.relations@un.org.
- For corporations, foundations, and large individual donations, please email <u>OCHAPrivateSector@un.org</u>.

IN-KIND RELIEF AID

The United Nations urges donors to make cash rather than in-kind donations, for maximum speed and flexibility, and to ensure the aid materials that are most needed are the ones delivered. If you can make only in-kind contributions in response to disasters and emergencies, please send an email with as much detail as possible, including the item(s) and quantities you wish to donate, the estimated market value, time frame for delivery, shipping details, and any other conditions,

to: OCHAPrivateSector@un.org

BY ENGAGING IN PUBLIC SUPPORT, JOINT ADVOCACY AND INNOVATIVE SOLUTIONS

Support employees, families and communities affected by disasters. Partner with the United Nations to undertake joint advocacy and work alongside humanitarian responders to identify and share innovative solutions. Prepare for and respond to disasters and conflict.

REGISTERING YOUR CONTRIBUTIONS

OCHA manages the Financial Tracking Service (FTS), which records all reported humanitarian contributions (cash, in-kind, multilateral and bilateral) to emergencies. Its purpose is to give credit and visibility to donors and partners for their generosity; and support informed decision-making by showing funding and gaps at country, plan and sector level. Governments, corporations and foundations are requested to please report contributions to FTS, as soon as they are signed, by email to fts@un.org. A reporting template is available in multiple languages at: https://fts.unocha.org/content/report-contribution

