



IOM at Yangon Airport receiving emergency shelter relief items from IOM Global Stocks Warehouse | © IOM 19 April 2025

HIGHLIGHTS



Nearly one month since the earthquake, officials report over 3,700 fatalities, almost 5,000 injured and hundreds still missing¹. Numbers are expected to be higher, linked to underreporting, and challenges in connectivity and data collection.



Response and recovery efforts remain severely hampered by continued aftershocks at magnitudes that cause additional damage to homes and infrastructure, while causing fear, anxiety and distress among affected populations.



Challenging weather conditions, including extreme heat and heavy rainfall pose additional challenges for people residing outside in makeshift camps without protection against the elements leading to their exposure to protection and health risks.



Through its [Flash Appeal](#), IOM urgently appeals for **USD 17.3M** for life-saving assistance to vulnerable earthquake-affected people. So far **USD 5.7M** has been confirmed/pipeline, with a current funding gap of **USD 11.6M**²

SITUATION UPDATE

According to official records, the earthquake has resulted in 3,700 fatalities, almost 5,000 injured and hundreds still missing. OCHA estimates that over 17 million people across 58 of the country's 330 townships have been affected and that 2 million people have been pushed into critical need of assistance, in addition to the nearly 20 million people in need before the earthquake.

Early recovery efforts continue to be severely hampered by aftershocks and a lack of essential resources. Frequent aftershocks have been recorded across affected areas in central Myanmar, further weakening already damaged infrastructure and hindering the delivery of critical assistance. According to the Myanmar [Department of Meteorology and Hydrology](#), more than 140 aftershocks have occurred since the initial event as reported by OCHA, and the United States Geological Survey has noted that aftershocks of varying intensity

¹ AHA Centre, as of 18 April 2025

² The IOM Flash Appeal for the Myanmar Earthquake Response, is in line with Myanmar Humanitarian Needs and Response Plan Flash Addendum, and the IOM Myanmar Crisis Response Plan. For more information, please visit the [Myanmar Crisis Response Plan 2025 | Global Crisis Response Platform](#).

are likely to persist for months, particularly in tectonically active regions such as Myanmar. In **Mandalay**, aftershocks have triggered additional structural collapses and increased displacement, particularly in urban and peri-urban areas already severely affected by the initial quake. In **Sagaing**, widespread damage to housing and community infrastructure has left a large number of households in precarious living conditions, many of whom are residing in overcrowded, informal settlements. In **Nay Pyi Taw**, several government buildings and public facilities remain structurally compromised, limiting the functionality of key public services. Some government departments are considering temporary relocation to Yangon.

Health infrastructure throughout central Myanmar have been severely damaged, leading to major disruptions in the provision of essential medical services. Initial evaluations reveal that a wide range of facilities, including hospitals, township health offices, rural health centres (RHCs) in Mandalay, Sagaing, and Nay Pyi Taw have suffered various levels of structural damage. In several affected townships, core healthcare facilities are no longer operational due to full or partial collapse, while others continue to function at limited capacity because of structural hazards, power disruptions, and shortages of critical medical supplies.

The earthquake is estimated to have destroyed or severely damaged over 65,000 structures, including homes, schools, health infrastructure, bridges and roads, cultural and religious sites. Basic services such as clean water and electricity remain largely unavailable in affected areas and over 75,000 people have been displaced by the earthquake staying in makeshift camps or with relatives or friends.

As confirmed by IOM's Population Mobility and Needs Tracking, 88 per cent of roads remain inaccessible, which hampers delivery of humanitarian aid and resupply of commercial goods. Forty-four per cent of affected areas also report having no, or intermittent, electricity and communications, affecting response coordination, reporting, and community feedback mechanisms.

Adverse weather conditions, including intermittent rainfall and fluctuating temperatures have exacerbated the situation for people in temporary shelters, who have little protection from rain or extreme heat??, and are vulnerable to various health and protection risks. Heavy rain in Mandalay also caused the collapse of a three-story building previously damaged by the earthquake, and similar rainfalls also in Sagaing caused street flooding, and worsened conditions for earthquake survivors living in temporary shelters.

Over 1,570 rapid needs assessments have been submitted by partners on the OCHA portal, of which 229 were from IOM Population Mobility and Needs Tracking partners. Overall, the top needs reported are food, cash assistance, safe drinking water, emergency shelter, and medical care. In response, IOM and humanitarian partners, in coordination with local responders and communities are scaling up the humanitarian assistance provision to provide medical care, cash and non-food items to people in need.

HUMANITARIAN NEEDS

In coordination with OCHA, IOM's Population Mobility and Needs Tracking (PMNT) programme, mobilized its partners to conduct rapid needs assessments (RNAs) to assess casualties, damages, and urgent needs among the most affected communities., PMNT has completed 229 RNAs, covering 130 towns and village tracts across 27 townships in 7 states and regions affected by the earthquake, including Ayeyarwady, Bago East, Kayin, Mandalay, Sagaing, Shan North, and Shan South.

In these locations, 160,029 individuals (37,551 households) were affected by the earthquake, representing approximately 25 per cent of the population living in the affected areas assessed. Thirty-three per cent of those affected reported not having access to safe drinking water, and 72 per cent had not yet received any humanitarian assistance. 75,797 individuals are displaced and residing in evacuation sites, or other spontaneous, camp-like settings, the overwhelming majority of whom are residing in makeshift shelters, calling for urgent shelter and camp coordination and camp management (CCCM) support.

FIGURE I: DISPLACED POPULATION BY SHELTER TYPE

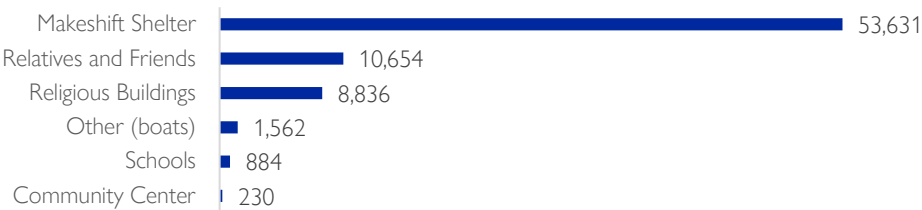
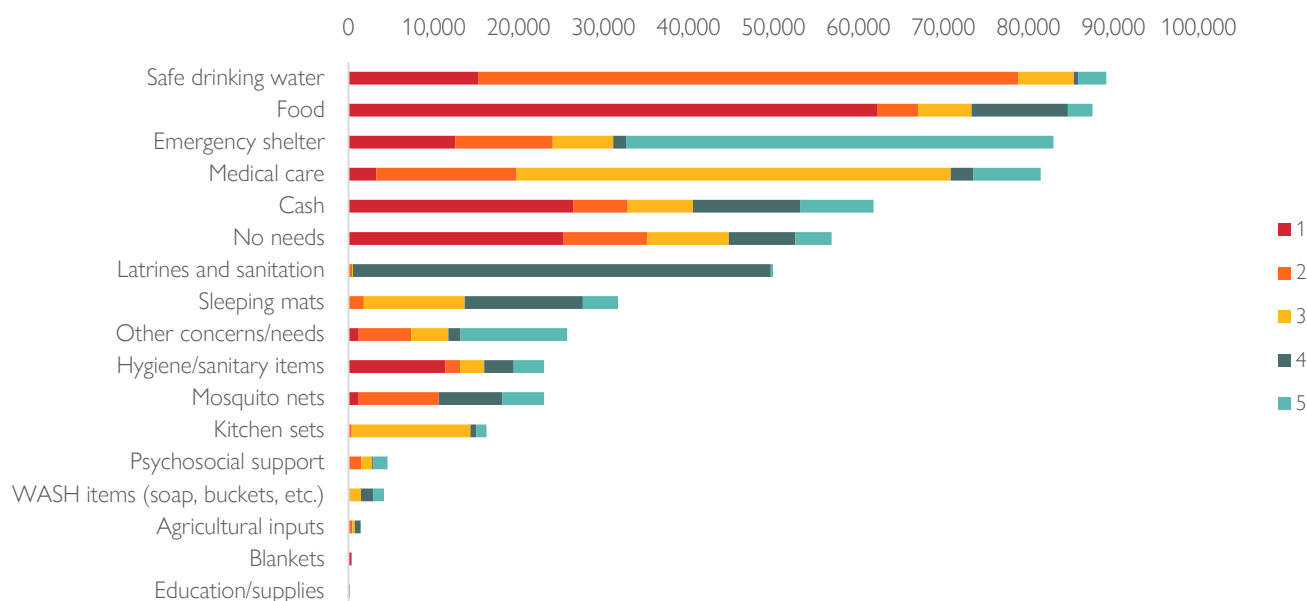
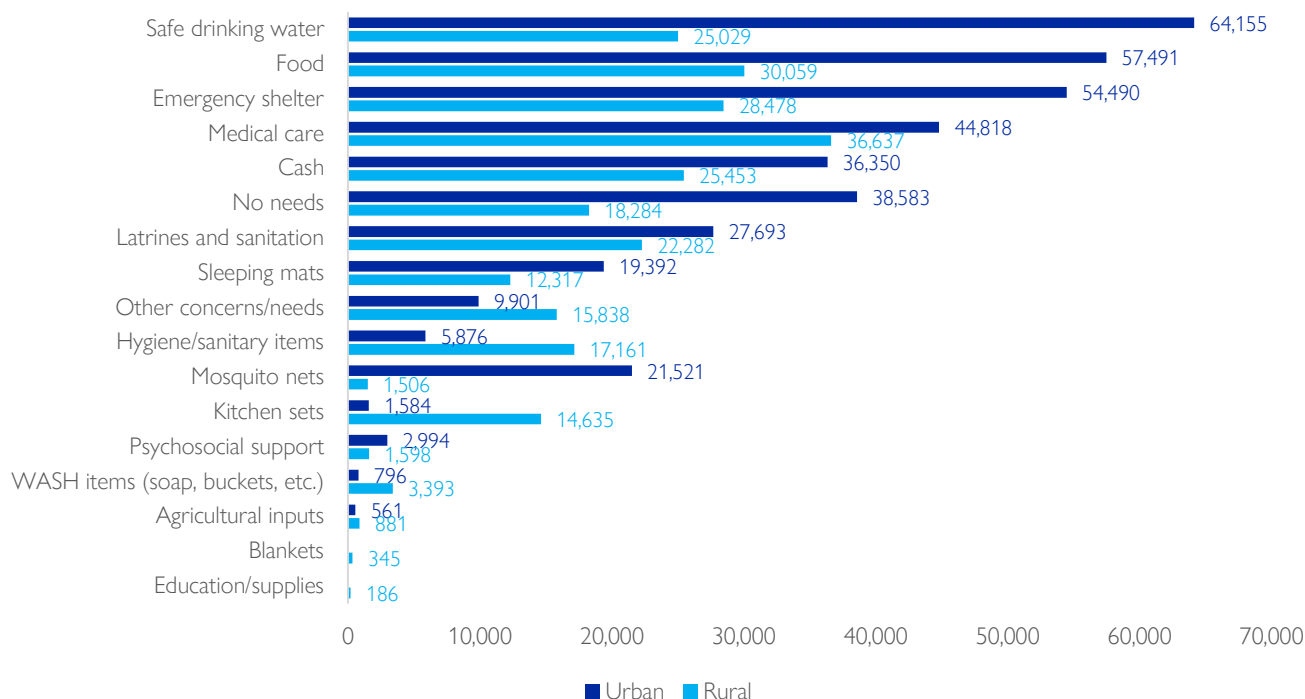


FIGURE 2: PRIORITY NEEDS BY CRITICALITY AND NUMBER OF PEOPLE AFFECTED



The priority needs and the number of people affected vary by location. In urban settings, where larger populations are impacted, the primary needs are safe drinking water, food, emergency shelter, medical care, and cash assistance. Conversely, in rural villages, with fewer affected individuals, the top priorities are medical care, food, emergency shelter, cash assistance, and safe drinking water. s.

FIGURE 3: COMPARISON OF URBAN AND RURAL PRIORITY NEEDS BY NUMBER OF PEOPLE AFFECTED



IOM RESPONSE

31

Local partners in affected townships

60

IOM staff based in Sagaing and Mandalay offices

1,505

350 households, received MPCA in Min Lan, Sagaing

1,992

Patients accessed medical consultations/care by IOM mobile clinics

229

Rapid needs assessments completed by IOM's PMNT partners

DELIVERY OF SHELTER RELIEF ITEMS

IOM has received over 70,000 life-saving relief items to alleviate dire conditions of an estimated 43,000 people. These relief items include tents, mattresses and blankets for those left homeless; jerrycans and water purification tablets for clean water; and mosquito nets to help prevent vector-borne diseases. The deliveries were made possible through IOM's first chartered flights on 18, 19 and 22 April – supported by the European Union Humanitarian Aid (ECHO) and through in-kind donations from Finland, Luxembourg and IOM's global stock. Further airlifts are planned in the coming days, with donations from Bulgaria and Sweden, followed by donations from Poland..



Offloading IOM relief items at Yangon airport. 18 April 2025

IOM is also coordinating donations from the private sector, including companies based in Myanmar for relief items already in-country, as well as with ECHO and UPS for transportation and distribution of items to the most affected areas. This includes hygiene products, water filters, solar rechargeable lamps and batteries, and shelter items.



IOM and ECHO receive emergency relief items at Yangon Airport, donated from Finland and Luxemburg. IOM, April 2025

MULTIPURPOSE CASH ASSISTANCE

IOM and its partner, the ArYoneOo Social Development Association (AYO), also continued the distribution of multipurpose cash assistance (MPCA) in affected families in Min Lan Ward, Sagaing, reaching a total number of 575 households / 2,473 individuals. Fifteen additional local partners are preparing responses for shelter, water, sanitation and hygiene (WASH), cash assistance, protection and MHPSS in Mandalay, Sagaing, Shan, Magway, Bago, and Nay Pyi Taw.

HEALTH RESPONSE

IOM Mobile Clinics, composed of doctors, nurses, midwives, a health educator and a laboratory technician, have since 5 April continued to be deployed to different townships in Mandalay region, providing health services and referrals to earthquake affected populations. During the reporting period, mobile teams covered Bone Ohe village, Apr Damar Yone, Apr Nga Yone Pagoda, Thar Li Swa, Apr mahar Aung Myay, and Apr Tharliswa. Cumulatively, IOM mobile clinics have attended to 1,920 individuals (1,307 female and 613 male), including 18 life-saving referrals. The most common conditions continued to be:

- Trauma and Injuries
- Hypertension
- Acute Respiratory Infections
- Psychosocial Support Needs



Ante-Natal care for pregnant woman in Tharliswa, 21 April 2025

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

IOM deployed Protection and MHPSS staff to Mandalay and continued to assist local networks of volunteers to provide psychological first aid in the aftermath of the earthquake. The IOM team provided MHPSS interventions including MHPSS assessments, psychological first aid and psychoeducation to 27 individuals (16 female, 11 male) in Amarapura township during this period. The MHPSS assessments revealed that most community members are experiencing psychological and emotional concerns such as fear, worry, sadness, hypervigilance, irritability, and emotional distress.



Health educator provides health messages in Mahar Aung Myay, 20 April 2024

IOM MYANMAR EARTHQUAKE RESPONSE IS FUNDED BY:



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the People of Japan



Funded by the
European Union



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