

MYANMAR

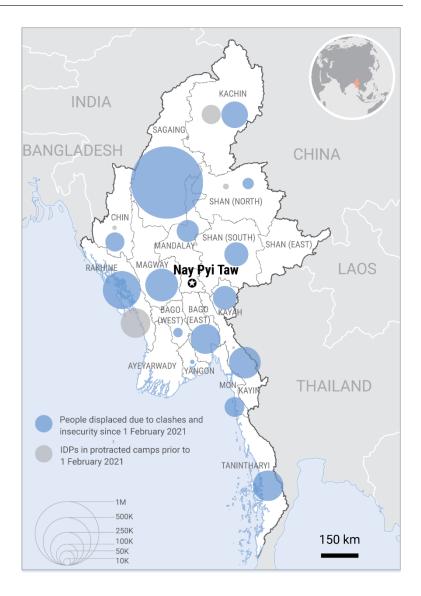
Humanitarian Update No. 44

19 February 2025

This independent update, covering humanitarian developments up to 18 February, is produced by OCHA Myanmar under its global mandate, in collaboration with the Inter-Cluster Coordination Group and UN agencies. Response figures are based on self-reporting by organizations to clusters.

HIGHLIGHTS & KEY MESSAGES

- Four years after the military takeover, Myanmar continues to struggle with ongoing conflict and increasing humanitarian needs, with internal displacement estimated to have reached a record high of more than 3.5 million and growing concerns for civilian protection.
- Clashes between the Myanmar Armed Forces (MAF) and various non-state armed groups continue across several states and regions, particularly in the country's Northeast, Northwest and Southeast.
- In addition to widespread conflict, multiple crises are simultaneously affecting civilians, including disasters, disease, food insecurity, inflation, loss of livelihoods, and disruptions of critical public services.
- This escalating crisis has resulted in Myanmar having the highest number of landmine and explosive ordnance casualties globally, surpassing other highly affected countries.
- Over 15 million people face acute food insecurity, while education and health services are severely disrupted, and millions of people are without safe shelter or drinking water.
- Despite severe underfunding and other challenges, humanitarian partners reached at least 4.2 million people with assistance in 2024.
- Through the 2025 Humanitarian Needs and Response Plan, aid workers aim to reach 5.5 million people with life-saving assistance, which will require US\$1.1 billion.



KEY FIGURES

4.2M

People reached by the end of 2024, covering 79 per cent of the target

19.9M

People in need in 2025

5.5M

People targeted in 2025

4.6% FUNDED

The 2025 HNRP has received \$52M against the \$1.1B appeal.

SITUATION OVERVIEW

Civilians facing unprecedented humanitarian crisis amid expanding conflict

Four years after the military takeover in February 2021, Myanmar continues to grapple with widespread conflict, a primary driver of record-high internal displacement and escalating humanitarian needs among people. The country hosts an estimated 3.5 million displaced people. Civilians in Myanmar are bearing the brunt of the conflict while struggling to survive other compounding crises, including disasters, disease outbreaks, food insecurity, inflation, loss of livelihoods, electricity shortages, interrupted or limited internet and telecommunications services, and disrupted public services.

While clashes between the MAF and various non-state armed groups have continued across multiple states and regions, particularly in the country's Northeast, Northwest and Southeast, the geographic scope of conflict is expanding. Since early 2025, the conflict between the Arakan Army and the MAF has spread beyond Rakhine into neighboring Ayeyarwady, Bago and Magway regions. Ayeyarwady is experiencing the conflict for the first time since the military takeover. This expansion means that 13 of Myanmar's 15 states and regions are now affected by the ongoing conflict. People in northern Shan and Rakhine continue to face a fragile and unpredictable security situation, with sporadic fighting, persistent protection risks from airstrikes and shelling, and the threat of landmines and unexploded ordnance.

Myanmar leads globally in landmines and explosive ordnance casualties

Myanmar is currently at the global epicenter for landmine incidents, a dire situation exacerbated by ongoing conflict and the complex legacy of past wars. This escalating crisis has resulted in Myanmar having the highest number of landmine casualties globally in 2023, surpassing other highly affected regions. The rise in incidents reflects the increased use of landmines in ongoing fighting, affecting civilians and complicating efforts for peace and recovery in the future. The persistent threat posed by these devices not only endangers lives, but also severely disrupts agricultural activities and displaces communities, perpetuating a cycle of poverty and instability.

Despite the critical needs associated with landmines and explosive ordnance contamination, Myanmar's mine action response is severely underfunded, covering only 38 per cent of the required amount in 2024. This significant gap hinders the ability of local and international organizations to effectively respond to the crisis. Civilians in Myanmar need the international community to recognize the urgency of the country's landmine issue and increase support to address both the immediate and long-term challenges. Increased funding for mine action is critical to improving mine risk education and supporting the victims of landmines.

Increasing concerns for protection of civilians

Protection of civilians is a serious concern in Myanmar, with recurring reports of casualties from airstrikes, shelling, and drone attacks, as well as alarming threats from landmines and unexploded ordnance. Civilians continue to bear the heaviest brunt of the conflict. Reportedly, a number of civilians were killed or injured due to airstrikes and other attacks in Kachin, Rakhine, northern Shan and across northwestern and southeastern Myanmar. Civilians, aid workers, and critical infrastructure, including homes, schools, hospitals, and religious structures, must not be targets in conflict and must be protected in accordance with legal obligations under international humanitarian law and international human rights law.

Transport of humanitarian supplies to Kachin and Rakhine

Ongoing conflict and roadblocks, coupled with checkpoints, have severely restricted the movement of essential humanitarian supplies and civilians seeking safety, and increased security risks for aid workers. This exacerbates the vulnerabilities of people in need of humanitarian assistance. Recently, humanitarian supplies successfully reached the capital of Kachin, while other supplies are expected soon to reach Rakhine, with the facilitation of various stakeholders at national and subnational level. The transportation from Mandalay to Kachin was the largest UN humanitarian convoy on this route since 2016, delivering high-energy biscuits, essential household items, dignity kits, winter kits, and shelter and WASH supplies for immediate distribution and stock replenishment. Despite formidable challenges, efforts continue to deliver life-saving assistance to the people in need wherever accessible and humanitarian workers, especially local responders, play a critical role.

Key achievements in 2024

Despite facing many challenges, humanitarian actors used a range of aid modalities to reach at least 4.2 million people with assistance at least once in 2024, which is 79 per cent of the targeted population. The actual reach is likely even higher due to underreporting of assistance in conflict areas, but this remains difficult to quantify. While the number of people reached is significant under the challenging circumstances, this reach falls short of the planned depth, quality

¹ Landmine Monitor 2024

and sustainability due to severe underfunding. As of 12 February 2025, funding for the 2024 Myanmar Humanitarian Needs and Response Plan had reached \$389 million, only 39 per cent of the funding requested. This meant that 1.1 million highly vulnerable people targeted for assistance were not reached.

A notable achievement was the increase in the number of internally displaced people (IDPs) reached, rising from 1 million in 2023 to 2.2 million by Q4 2024 — a 120 per cent increase. This reflects a concerted effort to prioritize the needs of this highly vulnerable group, the vast majority of whom are living in hard-to-reach areas. Additionally, nearly 1.6 million other crisis-affected people received assistance, underscoring the broader challenges faced by communities experiencing the collapse of basic services in the absence of large-scale development interventions.

KEY ACHIEVEMENTS BY CLUSTER

		PEOPLE IN NEED	PEOPLE TARGETED	PEOPLE REACHED	WOMEN	% CHILDREN, ADULTS, ELDERLY (<18yrs, 18-59yrs, 60+yrs)	FUNDING REQUIRED (US\$)	FUNDING RECEIVED (US\$) ¹
	EDUCATION	4.5M	1.4M	57% 784K	53%	89% 11% 0%	94M	10% 9.8M
*222	FOOD SECURITY	12.9M	2.3M	104% 2.3 M	52%	33% 56% 11%	289M	30% 87.1M
\$	HEALTH	12.1M	2.7M	30% 820K	64%	28% 62% 10%	130M	27% 35.1M
	NUTRITION	2.2M	0.6M	52% 317 K	61%	73% 27% 0%	58M	24% 13.8M
9	PROTECTION	12.2M	3M	78% 2.3 M	52%	32% 57% 11%	161M	39% 62.3M
	General	10.4M	2.8M	28% 782 K	52%	32% 57% 11%	 :	
	Child Protection	8M	2.0M	50% 821 K	52%	32% 57% 11%		
	Gender Based Viole	ence 8.8M	1.6M	13% 252K	52%	32% 57% 11%		
	Mine Action	5.6M	2.0M	23% 463K	52%	32% 57% 11%		
	SHELTER/NFI/CCCM	4.3M	1.3M	95% 1.3M	52%	32% 57% 11%	149M	27% 39.8M
F	WASH	5.6M	1.7M	137% 2.3M	52%	37% 55% 8%	106M	29% 30.4M
7 K	COORDINATION AND COMMON SERVICES						7M	100% 8.5M
3	CLUSTER NOT SPECIFI	ED						102.2M
TOTA	TOTAL		5.3M	79% 4.2M	53%	39% 52% 9%	994M	39% 389M

HUMANITARIAN RESPONSE

Humanitarian Access

The humanitarian community continues to face severe access restrictions across Myanmar, primarily due to escalation of conflict, threats of violence, and administrative impediments including delays and denials of travel authorizations. Clashes between the MAF and non-state armed groups continue in multiple states and regions, with a high number of incidents in the Northeast and Northwest, causing significant delays in the delivery of essential services, including food, water, sanitation, and healthcare. Administrative obstacles, such as denials of travel authorizations and heightened scrutiny at checkpoints, particularly in Rakhine, Sagaing and northern Shan, have further impeded aid delivery.

Needs, Response, Gaps and Challenges by Cluster

The progress updates below are provided by each of the seven operating clusters and their sub-working groups/areas of responsibility in Myanmar. Information is self-reported by aid organizations to the relevant clusters on a quarterly basis for inclusion in this update. Accordingly, this section is not necessarily reflective of all humanitarian interventions undertaken on the ground but rather those voluntarily shared by partners with their cluster. All partners are encouraged to share updates on their progress via the relevant clusters to ensure good visibility of gaps and response and support

resource mobilization. The Inter-cluster Coordination Group (ICCG)'s Information Sharing Protocol allows for this information to be shared in a non-identifiable manner.



Photo: Children and adolescents actively engaging in Child Friendly Space Activities at an IDP site in the Southeast. Credit: Child Protection Area of Responsibility partner.

Education in Emergencies

Needs

- In 2024, over 4.5 million people nationwide needed education support, including students, teachers and parents. Twelve per cent of those in need were IDPs. Nearly 1.4 million people were targeted for assistance in 2024.
- In the Northwest, essential learning package kits and nearly 800 roofing sheets are needed for almost 7,000 students and 47 learning centres across 5 townships in Sagaing.
- In Rakhine, 400 primary students in Ponnagyun Township urgently need education support, including temporary learning centres and teaching materials. In Kyauktaw Township, there is a critical need for school rehabilitation in a Rohingya village to restore education for affected children.
- Education across 125 IDP sites in Kachin is severely disrupted, with many schools either damaged or used as shelters. This situation significantly limits access to safe and effective learning environments for children and demands urgent intervention.
- In the Southeast, there have been significant education needs among communities in Kayah and southern Shan due to shortages of essential learning materials. The region has a critical shortage of teachers, impacting access to quality education.

Response

• By the end of 2024, the Cluster provided education support to nearly 784,000 people nationwide, representing 57 per cent of the 2024 HNRP target. The reach is 36 per cent lower compared to 2023, primarily due to the escalation of conflict, funding limitations, increased access restrictions, and severe internet challenges.

- In the Northwest, over 5,600 students in Chin and 12,000 in Magway and Sagaing received student kits.
- In the Northeast, 240 individuals in Hpakant Township in Kachin and over 260 displaced students in northern Shan received essential educational materials.
- In the Southeast, 30 volunteer teachers in Nyaungshwe Township in southern Shan received monthly stipends. The Cluster provided a training session for 34 volunteers in social emotional learning and mental health and psychosocial support and vocational training for 50 youth. Additionally, 50 teachers from Pekon Township in southern Shan and Demoso Township in Kayah underwent classroom management training.
- In Rakhine, monthly incentives were provided to nearly 300 volunteer teachers, almost 100 early childhood education (ECE) facilitators, and 23 non-formal education facilitators in Ann, Mrauk-U, Pauktaw, Ponnagyun and Sittwe townships. More than 1,600 children were enrolled in ECE across multiple townships. More than 200 students received recreational activities and psychosocial support, 150 adolescents received life skills training, and more than 100 students received catch-up classes.

Gaps & Constraints

- 2024 year-end data revealed that almost 640,000 children prioritized for assistance in 2024 were not reached with any kind of support due to severe underfunding and access restrictions. Without sufficient funding and expansion of access in 2025, children risk falling further behind in their education, suffering long-term developmental consequences and losing hope for a stable future.
- In the Northwest and Southeast, armed conflict, airstrikes, landmine risks, and security concerns severely
 restricted access and stakeholder engagement. This led to delays in educational activities and the relocation of
 learning spaces. The turnover of volunteer teachers further disrupted education in these regions. Four schools
 for early childhood care and development (ECCD) in Kayin in the Southeast have been closed for months due
 to security concerns.
- In the Northeast, military checkpoints, tight scrutiny, forced recruitment, and closure of roads all limit mobility in Kachin. Rising transportation costs and internet disruptions add to the logistical difficulties, making it hard to deliver education services efficiently.
- Forced recruitment and insecurity have resulted in high teacher turnover in multiple states and regions, particularly in the Southeast, where the displacement or departure of trained ECCD teachers led to school closures. These issues have intensified the shortage of qualified educators in conflict-affected areas.

Food Security

Needs

- According to the latest Food Security & Nutrition Analysis from September 2024, 15.2 million people across Myanmar risk food insecurity, representing 26 per cent of the country's total population.
- Severe flooding in September 2024 affected 1 million people across 70 townships, submerging 25 per cent of arable land and destroying crops.
- Monsoon rice output is estimated to be 5 per cent below average, while soaring inflation pushed basic food basket prices up by 361 per cent compared to the levels prior to the military takeover (WFP, December 2024).

Response

- By the end of the fourth quarter of 2024, the Food Security Cluster reached well over 2.3 million people, achieving 104 per cent of the 2024 HNRP target of nearly 2.3 million people. This represents a substantial increase from the third quarter, when 1.6 million people were reached. The increase was primarily driven by an intensified response to new displacement and expanded support to over 500,000 flood-affected people. The response notably expanded beyond initial HNRP target areas to address urgent needs in regions such as Mandalay and Nay Pyi Taw.
- The Cluster achieved varying levels of progress against annual targets. Nearly 1.6 million IDPs, returnees, and stateless people were reached, while nearly 586,000 host community members were reached.
- Food assistance emerged as the primary response modality, reaching nearly 2.2 million people. This was delivered through three channels (monthly rations, one-time support, and quarterly assistance).
- Livelihoods assistance reached over 186,000 people. This response component faced funding challenges, with
 future agricultural/livelihood programs still under discussion among partners. The higher achievement in food
 assistance, particularly to displaced populations, reflects partners' prioritization of immediate life-saving support
 in response to escalating displacement and flood impacts.

Gaps & Constraints

- Despite progress in reaching displaced and flood-affected populations, significant gaps persist, especially in meeting host community needs and supporting sustainable livelihoods.
- Access challenges, funding constraints, and banking disruptions continue to limit operations. Inflation and
 market disruptions hinder effective assistance. Without additional flexible funding, the quantity and frequency
 of distributions are at risk, affecting food-insecure communities already dealing with rising living costs.
- Typhoon Yagi and subsequent flash floods in 2024 severely affected agricultural communities, with more than
 one in three farmers reporting significant losses in stored seeds, fertilizers, and agricultural assets. The impact
 on livestock has been equally devastating, with substantial losses in poultry and feed stocks across several
 regions, further eroding community resilience and productive capacity. Ongoing coordination and increased
 resource mobilization are essential to sustain gains, extend livelihoods support, and prevent further deterioration
 of food security across Myanmar.



Needs

- By January 2025, acute watery diarrhoea (AWD) cases were reported from 9 of 15 states in Myanmar, after the
 first cases were reported in Yangon in June 2024. A confirmed AWD outbreak in neighbouring Thailand during
 December 2024 was reportedly linked with cases originating from Myanmar, showing the high risk of crossborder transmission.
- Malaria cases surged almost 300 per cent nationwide from 2020 to 2023, with some areas experiencing an over 700 per cent increase as of November 2024. The increase disproportionately affects children under five years and pregnant women; driven by disrupted vector control, severe shortages of malaria supplies including mosquito nets, testing kits and essential medicines for treatment, as well as a lack of trained healthcare workers.
- Outbreaks of preventable diseases like measles, diphtheria, whooping cough, and polio remain a significant threat due to the persistent low vaccination coverage for childhood illnesses. Since 2018, an estimated 1.5 million children under five have never received vaccinations.
- Attacks on healthcare facilities and health workers are on the rise, including reports of detainment and killing.

Response

- In 2024, health partners delivered essential health services to more than 820,000 people, achieving over 30 per cent of the HNRP target. This includes nearly 242,000 people in Rakhine and southern Chin, more than 220,000 in the Southeast, more than 182,000 in the Northeast, and nearly 142,000 in the Northwest. Additionally, 1.14 million people were reached with health activities. This included nearly half a million life-saving consultations, health awareness initiatives for 291,000 people, financial support to nearly 55,000 patients and the provision of essential medicines to more than 11,000 patients.
- In collaboration with the WASH Cluster, the Health Cluster responded to AWD cases. Efforts include the prepositioning of relevant supplies, awareness raising for health and hygiene promotion, training and planning sessions for health and WASH partners, and response to any suspected cases.
- For partners, training sessions are planned to conduct quality checks and for information management for enhanced gap analysis for health service delivery.

Gaps & Constraints

- The lack of a comprehensive health surveillance system in the country has limited data availability to allow for rapid detection of and response to disease outbreaks.
- Severe shortages of medical supplies are impeding the prevention of diseases, as well as effective treatment of cases, increasing the risk of preventable deaths.
- There is an increasing risk of poor-quality medicines in the absence of a list of pre-qualified suppliers.



Needs

- Acute malnutrition continues to rise among vulnerable children due to conflict, displacement, and food insecurity.
 Limited healthcare access and service disruptions have worsened severe acute malnutrition (SAM) and moderate acute malnutrition (MAM) cases, requiring urgent intervention to prevent further deterioration.
- The need for life-saving nutrition supplies remains critical, particularly for ready-to-use therapeutic food (RUTF) for treating SAM. The Nutrition Cluster urgently requires 1,500 cartons of RUTF to address 1,500 expected SAM cases for the first quarter of 2025, including 1,200 cartons for 1,000 cases in Sittwe Township in Rakhine.
- Approximately 1,300 cartons of ready-to-use supplementary food (RUSF) are required for 2,000 cases of MAM across the country, with 950 cartons urgently required in Rakhine for the first quarter of 2025.

• The Cluster received \$13.8 million (24 per cent) of the \$57.7 million requested in the 2024 HNRP, leaving a \$43.9 million funding gap that put vital nutrition services at risk. In 2025, approximately \$500,000 is urgently needed for local organizations to continue nutrition services in the Southeast during the first quarter.

Response

- By the end of 2024, more than 317,000 people (52 per cent of the 2024 HNRP target) had received preventive and curative nutrition services. This included:
 - Treatment for nearly 3,100 children with SAM (17 per cent of the target) and more than 7,700 children with MAM (12 per cent of the target).
 - Preventative interventions were provided for nearly 312,000 people (52 per cent of the target). This included more than 211,000 children who were screened for acute malnutrition (45 per cent of the target), almost 70,000 caregivers (49 per cent of the target) who received infant and young child feeding counselling, and more than 104,000 children (38 per cent of the target) who benefited from blanket supplementary feeding programs. Additionally, 24 per cent of targeted pregnant and lactating women received essential micronutrient supplementation.
- Performance indicators reveal a 74 per cent cure rate, slightly below the minimum SPHERE standards. The proportion of children or individuals who do not show improvement or recovery after receiving nutritional treatment is 22 per cent, exceeding the acceptable threshold of 15 per cent. Effort is ongoing to address the high non-respondent rate and identify solutions.

Gaps & Constraints

- Funding gaps threaten the sustainability of nutrition programs, leaving significant service delivery gaps in 45 townships in Shan and Kayah.
- The lower coverage rates are also due to ongoing conflict, access constraints, and transportation difficulties, which continue to hinder the delivery of essential nutrition services. Persistent shortages of RUTF, RUSF, and preventive supplements combined with high staff turnover exacerbate these challenges.
- Preventive measures, including Vitamin A supplementation and micronutrient distribution, remain inadequate, leaving children under five and pregnant and lactating women highly vulnerable.



Needs

- Nationwide, 12.2 million people needed protection assistance in 2024, including 3.5 million IDPs. Among them, 3 million people were targeted for protection assistance in 2024.
- With a dire protection situation across the country, conflict-affected populations continue to need protection services such as legal aid, child protection, gender-based violence (GBV) case management services, mine risk education, victim assistance, assistance for older people and persons with disabilities, as well as mental health and psychosocial support (MHPSS).
- In the fourth quarter of 2024, the Cluster recorded that more than 240,000 civilians (37 per cent children) experienced violations across the country. This included extortion, indiscriminate attacks, forced recruitment, harassment, intimidation, killing, physical injuries from landmines, arbitrary arrests and detention, torture and inhuman treatment, destruction of properties and other violations. The safety and security of women and girls remains a major concern in the midst of the ongoing conflict.
- Child Protection is a critical concern, with rising grave violations, particularly in areas with intensified fighting.
 Other persistent risks include child labour, child marriage, irregular migration, and violence in the home and communities. Support is urgently needed for prevention of child recruitment by parties to the conflict and life-saving case management services.
- In Rakhine, restrictions of movement and trade continue amid persistent conflict, exacerbating the suffering of civilians by depriving their access to basic needs. They urgently need humanitarian assistance and protection services, including legal support, mine-victim assistance, healthcare, hygiene, clean and safe water, and psychosocial support. Cash assistance is an urgent need. In urban Sittwe, there is a huge need for sanitary pads and dignity kits for newly displaced women and girls sheltering in monasteries. In northern Rakhine, women and girls are at high risk of sexual and verbal harassment by men in public areas and there is a lack of private shelters and bathing and toilet facilities for IDPs.
- In the Northeast, protection services are needed in several hundred newly set-up temporary displacement sites. In Kachin, conflict-affected women and girls need urgent healthcare assistance, education support, and aid to meet other basic needs. Children require warm clothes, and capacity building is needed for partners to deliver quality child protection response.
- In the Southeast, conflict-affected populations are at risk of unsafe movement due to landmines and unexploded ordinance. Displaced people need food, NFIs, legal aid, livelihoods and cash assistance. They are also facing inadequate healthcare and unsafe shelter conditions.

 Prolonged conflict, being displaced multiple times, and living in spontaneous IDP sites have led children, adolescents, and parents and caregivers to face a high level of psychosocial distress. More community level MHPSS interventions are needed.

Response

- By the fourth quarter of 2024, the Cluster provided protection assistance to more than 2.3 million people across Myanmar, or 78 per cent of the HNRP target.
- During the fourth quarter, GBV partners reached more than 99,000 people through various GBV interventions.
- The Child Protection Area of Responsibility (CP AoR) reached nearly 257,000 children, caregivers and communities with child protection services in the last quarter of 2024. This included nearly 127,000 people with community awareness, over 116,000 people with MHPSS, almost 2,000 children with case management, over 7,200 adolescents with adolescent programming, over 2,500 community members with community-level child protection and over 2,100 people with capacity building to continue to strengthen quality response.
- Throughout 2024, the CP AoR supported the capacity development of its partners through online and in-person
 trainings, providing 20 participants with the training of trainers on child protection minimum standards, more
 than 50 participants on disability inclusion in child protection, and more than 50 participants on community-level
 child protection, as well as on the gender and age marker. The CP AoR convened quarterly trainings to enhance
 reporting and ensure all beneficiaries reached are reflected in the HNRP monitoring dashboard. The CP AoR
 also completed its 2024-2025 Strategy.
- In Rakhine, more than 138,000 people received protection assistance in 2024. In northern Rakhine, GBV AoR partners provided 850 sanitary pads to newly displaced people in IDP sites and provided nearly 700 women's essential kits to affected people. The distributions were followed by awareness sessions on GBV, sexual reproductive health, menstrual hygiene management and MHPSS.
- In the Southeast, more than 38,700 conflict-affected people received protection assistance in the fourth quarter of 2024, including dignity kits, case management services, child protection, victims' assistance, legal aid, GBV and MHPSS support, protection from sexual exploitation and abuse sessions, and mine risk education. The referral pathway for victim's assistance in the Southeast was finalized by the Mine Action AoR. GBV safety audits were conducted in the Southeast to identify and mitigate potential GBV risks and GBV AoR partners conducted various capacity strengthening activities to ensure service quality.
- In the Northeast, more than 12,100 people were supported with targeted protection assistance, including legal aid and capacity building training sessions. In Kachin, GBV AoR partners conducted psychosocial support, including engagement with various peer groups, case management services and safety audits, and distributed nearly 700 sanitary pads, 160 lamps, and 30 solar lamps.
- In the Northwest, nearly 9,500 people including persons with disabilities received protection assistance, including specialized support for persons with specific needs.

Gaps & Constraints

- Quarter 4 data revealed that more than 700,000 people prioritized for assistance in 2024 were not reached with
 any kind of protection support due to severe underfunding and access restrictions. By the end of 2024, only 78
 per cent of the people targeted by the Cluster were reached. Without urgent financial support and expansion of
 access, protection partners will be forced to deprioritize more expensive protection activities, including case
 management and the provision of targeted/specialized support to persons with specific needs in 2025 –
 increasing vulnerability and protection risks among affected people.
- Forced recruitment, airstrikes and other attacks remain a major concern for protection of civilians and aid workers
- Limited or lack of telecommunication and internet services hinders rapid protection assessments and communication with affected communities and aid workers on the ground. The lack of access and information has led to underreporting of human rights abuses and violations of international humanitarian law and humanitarian rights. It has also significantly impacted the delivery of essential services, particularly GBV and child protection services.
- GBV survivors have limited multi-sectoral support, especially health care and legal services.
- In Rakhine, restrictions on transportation of humanitarian supplies, especially medicine, dignity kits and sanitary pads, have further exacerbated the suffering of vulnerable populations, including women and girls, older persons and persons with disabilities.
- In the Southeast, the transportation of basic supplies like food, medicine, and fuel are severely limited and sometimes confiscated at checkpoints.
- In the Northwest, there is a gap in GBV response services in Sagaing. There is also a gap in legal support across northwestern Myanmar, except Mandalay.

Shelter, Non-Food Items (NFIs), Camp Coordination and Camp Management (CCCM)

Needs

- In 2024, 4.3 million people needed shelter, NFI and CCCM support. Of them, 1.3 million were targeted for assistance.
- In conflict-affected areas, tensions escalated during the dry season, exacerbating humanitarian needs. The need to replace tarpaulin, for winterization kits, blankets, and sleeping mats remains high across the country.
- CCCM capacity is required in many displacement sites.
- Urban IDPs are struggling to cover rental costs, which are rising due to inflation and high demand. A significant influx of people from northern Shan has also contributed to the pressure on housing. Limited employment opportunities further hinder the IDPs' ability to find sustainable solutions.
- An estimated 5,000 protracted IDPs in southern Shan face pressure to return or settle in secondary locations
 due to restricted access to basic services and social needs in collective centers, which are communal or public
 buildings and other temporary shelters used to host IDPs.
- The situation in camps continues to deteriorate in Rakhine, especially in terms of shelter conditions. More than 1,200 shelters are needed in Rakhine, for an estimated additional budget of \$10 million.

Response

- In the fourth quarter of 2024, the Cluster reached more than 411,000 people countrywide, which is 32 per cent of the HNRP target.
- Overall in 2024, nearly 1.3 million people received emergency life-saving shelter and NFI support. The assistance provided was on a one-time basis and inadequate for the needs of the affected people.
- Among those assisted, 80 per cent were IDPs, 12 per cent were other crisis-affected people, 7 per cent were IDP returnees, and 1 per cent were non-displaced stateless people.

Gaps & Constraints

- In 2024, nearly 73 per cent of the HNRP funding target was unmet. With \$36 million of the required \$149 million received, the assistance provided often did not meet technical standards and cluster requirements and some planned Cluster activities were deprioritized.
- Activities planned for transitional solutions such as NFI replenishment, shelter construction, reconstruction and repair were deprioritized due to operational constraints and funding limitations. Assistance was limited to a few locations, including Chin, Kachin, Magway, Mon, northern Shan, Rakhine and Sagaing.
- Cluster partners have lacked the capacity to provide full NFI kits to families, as the cost of a complete NFI kit is nearly \$200 per household. In place of full kits, the NFIs have typically been distributed as individual items based on community needs.

Water, Sanitation and Hygiene

Needs

- In 2024, more than 5.6 million people needed WASH support and 1.7 million were targeted for assistance. The WASH Cluster received 29 per cent of the required \$106 million, which significantly restricted the overall response capacity.
- Contingency stock including water purification tablets and hygiene kits is needed to respond to AWD cases in affected regions and states.
- There were shortages of WASH items in Kachin and southeastern Myanmar to support newly displaced people.

Response

- By the end of 2024, the WASH Cluster exceeded their target by reaching 2.3 million people through a series of
 one-time interventions designed to address various urgent needs. However, severe funding shortfalls limited
 both the quality and duration of the services provided.
- Nationwide, nearly 1.9 million people received critical WASH supplies, approximately 1.4 million people accessed safe or improved drinking water, around 589,000 people benefited from functional excreta disposal systems, and an estimated 632,000 people participated in handwashing behaviour change programs.
- Additionally, critical WASH supplies were provided to 123,000 people in flood affected areas and for the acute water diarrhoea (AWD) response in Yangon water services were delivered to 272,000 people and essential WASH supplies reached 250,000 people.
- In response to AWD outbreaks, the WASH Cluster enhanced coordination both within and outside the sector, including establishing a Technical Working Group, creating a cholera toolkit, and conducting trainings to bolster outbreak response and preparedness.

Gaps & Constraints

- Activities were severely constrained by underfunding, with only 29 per cent of required funds received in 2024.
- Significant challenges continue to impede the delivery of critical WASH support. Widespread conflict limits
 access to many affected areas, and damaged roads and infrastructure cause delays in the delivery of essential
 supplies.
- The ability to secure access agreements and preposition critical WASH supplies was severely constrained by both underfunding and complex negotiations.