

# MYANMAR

## HUMANITARIAN NEEDS AND RESPONSE PLAN 2024

YEAR-END DASHBOARD (JAN - DEC 2024)

### OVERVIEW

2024 was marked by relentless political instability in Myanmar, with a spiralling humanitarian crisis that pushed millions into deeper vulnerability. Ongoing conflict, economic hardships, and disasters compounded already severe humanitarian needs, driving the crisis to unprecedented levels. Since the 2021 military takeover, the number of people in need has surged dramatically reaching 18.6 million in 2024, highlighting an alarming escalation over the last four years.

By the end of 2024, more than 3.5 million people were internally displaced, approximately one-third of them children. Many displaced people remain in temporary shelters, informal camps or jungles, where they face severe shortages of food, clean water, protection assistance and healthcare. Economic instability, soaring inflation, and widespread job losses pushed countless households deeper into poverty and food insecurity. Intensified clashes in multiple locations increased

displacement and resulted in additional restrictions on humanitarian access. The impact of the crisis increasingly extended beyond Myanmar, fuelling human and drug trafficking and disease outbreaks, requiring international support.

Simultaneously, the collapse of the health system in conflict-affected areas and the widespread lack of clean water led to several outbreaks of acute watery diarrhoea, increasing health risks for already vulnerable communities. Meanwhile, monsoon rains and the remnants of Typhoon Yagi triggered severe flooding, affecting over one million people across the country, further eroding the coping capacity of affected people. These overlapping crises underscore the urgent need for sustained humanitarian support and a coordinated response to address Myanmar's escalating emergency.

### KEY ACHIEVEMENTS BY CLUSTER

CLUSTER	PEOPLE IN NEED	PEOPLE TARGETED	PEOPLE REACHED	WOMEN	% CHILDREN, ADULTS, ELDERLY (<18yrs, 18-59yrs, 60+yrs)	FUNDING REQUIRED (US\$)	FUNDING RECEIVED (US\$) <sup>1</sup>
EDUCATION	4.5M	1.4M	57% 784K	53%	89%   11%   0%	94M	10% 9.8M
FOOD SECURITY	12.9M	2.3M	104% 2.3M	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% 317K	61%	73%   27%   0%	58M	24% 13.8M
PROTECTION	12.2M	3M	78% 2.3M	52%	32%   57%   11%	161M	39% 62.3M
General	10.4M	2.8M	28% 782K	52%	32%   57%   11%		
Child Protection	8M	2.0M	41% 821K	52%	32%   57%   11%		
Gender Based Violence	8.8M	1.6M	15% 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
WASH	5.6M	1.7M	137% 2.3M	52%	37%   55%   8%	106M	29% 30.4M
COORDINATION AND COMMON SERVICES						7M	121% 8.5M
CLUSTER NOT SPECIFIED							102.2M
<b>TOTAL</b>	<b>18.6M</b>	<b>5.3M</b>	<b>79% 4.2M</b>	<b>53%</b>	<b>39%   52%   9%</b>	<b>994M</b>	<b>39% 389M</b>

<sup>1</sup> Based on FTS records as of 12 Feb 2025.

For more information, please visit [www.unocha.org](http://www.unocha.org) | <https://reliefweb.int/country/mmr> | <https://www.facebook.com/OCHAMyanmar>

18.6 MILLION  
PEOPLE IN NEED

5.3 MILLION  
PEOPLE TARGETED

4.2 MILLION (79%)  
PEOPLE REACHED 2024

\$994 MILLION  
FUNDING REQUIRED

\$389 MILLION (39%)  
RECEIVED<sup>1</sup>

293  
PARTNERS

### STRATEGIC OBJECTIVES

- 1 Protection risks and needs are identified, monitored, mitigated, and met for 3 million people, while the centrality of protection is upheld across the humanitarian response including through promotion of respect for human rights, international humanitarian law and humanitarian principles
- 2 Suffering, morbidity, and mortality is prevented or reduced among 3.7 million displaced, returned, stateless and other crisis-affected people experiencing or at risk of food insecurity, malnutrition, and health threats
- 3 At least 2.5 million, returned, stateless and other crisis-affected people have safe, tailored, timely and dignified access to the essential services and support to ensure their survival and prevent deterioration of their humanitarian needs

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YEAR-END DASHBOARD (JAN - DEC 2024)

Humanitarian operations faced severe constraints due to insecurity, bureaucratic hurdles, and targeted attacks on aid workers, limiting access to conflict-affected areas. Recovery from Cyclone Mocha, which devastated parts of the Northwest and Rakhine in May 2023, remained slow throughout 2024 due to critical funding shortages. Vulnerable groups including women, children, and persons with disabilities bore the heaviest burden, facing heightened risks and limited access to essential services.

## Analysis of reach

Despite these challenges, humanitarian actors used a range of aid modalities to reach at least 4.2 million people with assistance at least once. 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 substantial under the circumstances, this reach falls short of the planned depth, quality 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 requested funding (the 6<sup>th</sup> lowest funded humanitarian response plan globally). This meant that 1.1 million highly vulnerable people targeted for assistance were not reached. Urgent attention and a substantial increase in financial support for both humanitarian and development actors are imperative to bridge this gap moving into 2025.

By the end of 2024, humanitarian activities successfully reached 79 per cent of the targeted population at least once, albeit not at the envisioned depth, quality or frequency due to the severe underfunding. A notable achievement was the substantial 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 activities.

Humanitarian partners continued a specific focus on women and girls, reaching 2.3 million of them (53 per cent out of all people who received assistance). Similarly, persons with disabilities were consistently prioritized, with 12 per cent (490,000 people) reported to benefit from assistance. These achievements illustrate sustained commitment to inclusivity and addressing the specific challenges faced by these groups.

## KEY FIGURES BY POPULATION GROUP

### Internally displaced persons (IDPs)



3M people in need  
2M people targeted  
2.2M people reached

### Non-displaced stateless people



510K people in need  
396K people targeted  
105K people reached

### Returned, resettled and locally integrated IDPs



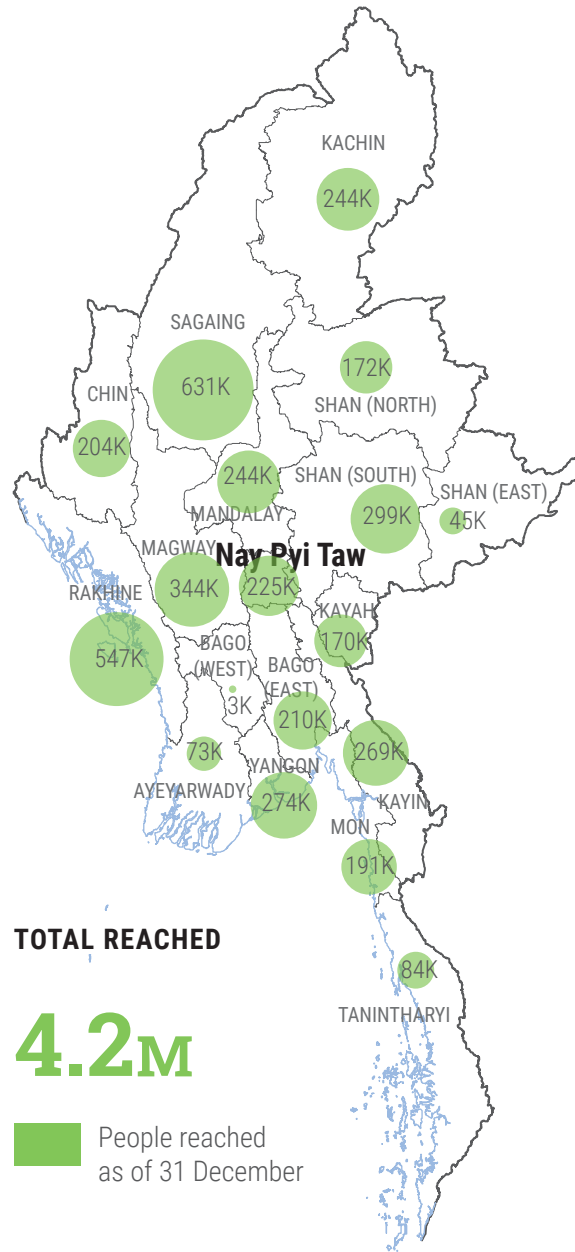
571K people in need  
311K people targeted  
271K people reached

### Other crisis-affected people with humanitarian needs



14.5M people in need  
2.6M people targeted  
1.6M people reached

## PEOPLE REACHED BY STATE/REGION

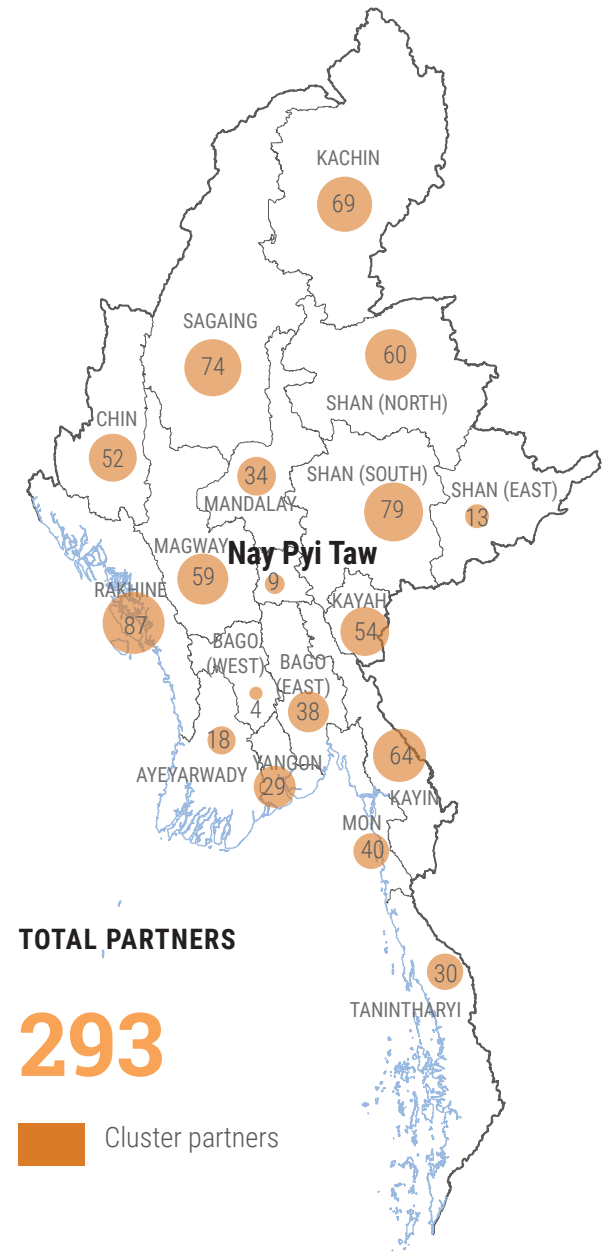


### TOTAL REACHED

4.2M

People reached as of 31 December

## PARTNERS BY STATE/REGION



### TOTAL PARTNERS

293

Cluster partners

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The geographical coverage of the response aligned with the prioritization of the most vulnerable groups, including IDPs, returned, resettled and locally integrated IDPs, and non-displaced stateless people. In the Northeast, 94 per cent of the target population was reached. The Northwest and Southeast regions also saw a significant scale-up, reaching 80 per cent and 76 per cent of their respective targets. Comparatively, the number of people reached in the Northwest rose from 540,000 people in 2023 to 1.6 million in 2024. Similarly, reach in the Southeast increased from 770,000 people in 2023 to nearly 1.3 million.

The clusters covering Food Security, Protection, Shelter/NFI/CCCM, and WASH noted high numbers of people reached, respectively reaching 104, 78, 95, and 137 per cent of their targets by the end of 2024. However, severely limited funding often resulted in reduced frequency, quality and depth of assistance. Still, these achievements highlight the effective response by clusters to

escalate needs through strong coordination, a more localized response, and improved reporting to deliver critical aid where it is needed most. Significant gaps persist in other critical sectors such as Health, Gender-Based Violence, and Mine Action, where reach levels ranged between 13 and 30 per cent, necessitating urgent attention and scaled-up efforts to address shortfalls.

Efforts to enhance cluster partner capacity and reporting mechanisms have yielded positive results. The number of partners reporting progress increased from 269 to 293 in 2024, enabling more comprehensive tracking of humanitarian activities. This improvement reflects the collective commitment to transparency and accountability in the humanitarian response and is the result of an increased focus on a more localized response. Despite formidable access and bureaucratic constraints, humanitarian operations expanded into hard-to-reach areas and demonstrated remarkable resilience.

### CLUSTER HIGHLIGHTS



**696K**

children accessed formal and non-formal education, including early learning



**685K**

people received primary health care health services, the majority of which were life-saving



**605K**

people (camp/displacement/solutions site/township) reached with protection monitoring



**178K**

women, girls, men and boys reached through gender-based violence awareness-raising activities



**737K**

people reached through distribution of NFI assistance (in-kind/cash)



**2.2M**

people received food assistance (in-kind and/or through cash)



**211K**

children aged 6-59 months screened for wasting



**442K**

girls, boys, women and men reached through child protection awareness raising activities



**462K**

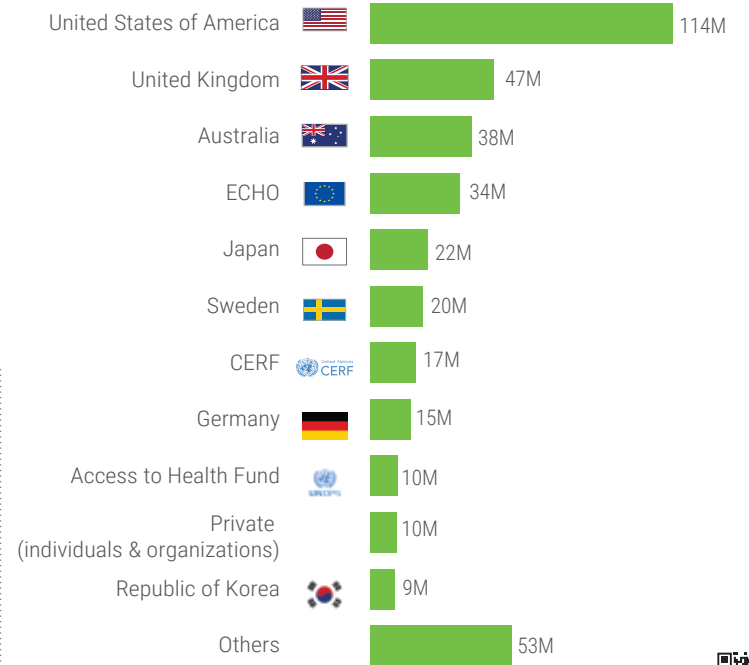
people received explosive ordnance risk education



**1.4M**

crisis-affected people have equitable, inclusive and safe access to safe/improved drinking water

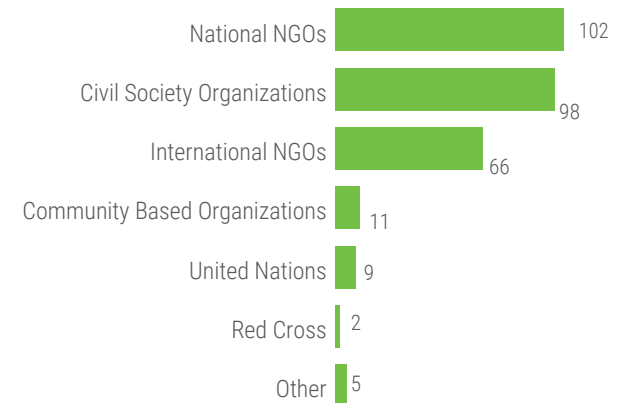
### FUNDING BY DONOR (US\$) as of 12 February 2025



For a detailed funding breakdown, visit: <https://fts.unocha.org/plans/1160/summary>



### HUMANITARIAN PARTNERS BY TYPE



# MYANMAR: HUMANITARIAN RESPONSE PLAN 2024

## CONSEQUENCES OF UNDERFUNDING

In 2024, while collective endeavours managed to reach 4.2 million people out of the 5.3 million targeted with some form of assistance at least once, this support was not nearly as deep or sustained as intended. Oftentimes, people had only been reached once and with one form of support (frequently food), instead of a full package of different types of aid that meet the full spectrum of their needs, leaving significant gaps among those reached. In total, 1.1 million people targeted for assistance were not reached at all due to severe under-funding and access constraints. An additional 13.3 million people with some level of humanitarian need were not prioritized for assistance in 2024, falling outside the HNRP target, and thus also have ongoing unmet needs.

These funding shortfalls and related response gaps – now repeated over successive years since the military takeover in February 2021 – are having cascading impacts from one year to the next. As a result, not only has the absolute number of people in need been consistently increasing since February 2021, to 19.9 million people in 2025 (the fourth highest in the world), but simultaneously, the severity of their needs has significantly worsened.

During 2025, nearly 5 million people are expected to fall into the highest category of needs severity (catastrophic), compared to close to 2 million people in 2024.

Four years since the military takeover, the crisis in Myanmar risks becoming a forgotten emergency with devastating implications for the well-being of millions of people and for regional security if the low funding levels of 2024 are repeated in 2025. The situation demands immediate attention and increased international support to address the humanitarian and development challenges faced by the civilian population. Humanitarians are requesting a record \$1.14 billion in 2025 to support 5.5 million people with life-saving assistance. In addition to increased humanitarian funding towards this plan, urgent funding for complementary development action is also required to reverse the growth in humanitarian need and build the resilience of communities in the face of persistent shocks. Increased advocacy is needed to address critical gaps in the response and provide a lifeline to those in desperate need.

### IMPACTS OF UNDERFUNDING

#### Preventable death and prolonged suffering



Underfunding directly increases the risk of lost lives, particularly among vulnerable children suffering from acute malnutrition and people denied access to critical health services.

#### An escalating health crisis



With a large portion of the population deprived of essential health services, preventable diseases are likely to escalate, posing a severe threat to public health and well-being with potential regional consequences.

#### Stunted development and lost opportunity



Educational and developmental opportunities for children are being stifled, perpetuating a cycle of disadvantage and hampering the nation's long-term growth and stability.

#### Increased vulnerability



The underfunding and subsequent response gaps amplify the vulnerability of already marginalized communities, exposing them to heightened risks of exploitation, abuse, and displacement.

## UNMET NEEDS

As a result of the dire humanitarian funding situation (39 per cent of required funding received in 2024), clusters report the following consequences for affected people whom they had planned to reach in the 2024 HNRP but were unable to support.



More than 800,000 children missed out on education support, increasing their risk of child marriage, child labour, sexual exploitation and abuse, as well as recruitment into armed groups.



164,000 people lacked life-saving emergency food production and livelihoods assistance.

218,000 other crisis-affected people did not receive critical emergency food aid.



1.9M people missed out on essential health care services, supplies and emergency referrals, resulting in severe illness or death from preventable disease, maternal and child health complications, and psychological and social distress.



15,000 children under age 5 face heightened risk of illness or death in the absence of life-saving treatment for severe acute malnutrition throughout 2024.

60,000 children under age 5 with moderate acute malnutrition likely deteriorated to severe acute malnutrition, raising their risk of death from preventable causes by up to five times, when compared to normal children.

Micronutrient deficiencies, particularly iron deficiency anaemia, will likely result in 112,000 babies born with low birth weights.

454,000 children under age 5 likely suffered irreversible impacts on their growth and development due to micronutrient deficiencies.



2.1 million people were denied protection services, further exposing them to risks and more likely to adopt negative coping mechanisms.

1.1 million people missed gender-based violence services, leaving survivors more vulnerable and at greater risk of further violence, exploitation, and abuse.

1.1 million children went without protection, increasing their exposure to violence, exploitation, abuse, neglect, and a lack of essential protection services.

1.6 million people lacked mine action support, heightening their risk of landmine injuries and fatalities with no access to life-saving assistance.



235,000 people in hard-to-reach areas went without shelter and NFI assistance, forcing many to risk their lives building makeshift shelters to protect their families from harsh weather conditions, increasing their exposure to health risks.



260,000 people lacked access to safe drinking water, leaving vulnerable households unable to meet basic water needs and increasing their risk of waterborne diseases.