



# Myanmar Country Office Humanitarian Situation Report No. 4





Reporting Period: 1 January to 31 December 2025

## Highlights

- Children and families in Myanmar faced an escalating humanitarian crisis in 2025, as conflict, repeated displacement, public health emergencies, and natural disasters—including a major earthquake—left millions of children without access to safe shelter, education, healthcare, and protection services. In 2025, 21.9 million people, including 6.9 million children, were in need of humanitarian assistance.
- A 7.7-magnitude earthquake on 28 March hit central Myanmar, where over half of all vulnerable displaced population reside, destroying water, sanitation, health, and education infrastructure and pushing an additional two million people into acute humanitarian need.
- Despite the challenging environment, and amid funding constraints, UNICEF and its partners reached 4 million people, including 3.2 million children, in 2025. Nearly 2.5 million children received vitamin A supplementation, over 1.2 million people were reached with safe water, 747,375 children accessed learning, and 23,025 children with disabilities were supported with specialized services.
- UNICEF secured only 25 per cent of its US\$ 346.8M appeal, leaving a 75 per cent funding gap that significantly limited scale-up of its critical humanitarian and earthquake-response service.

## Situation in Numbers

-  **6,900,000**  
children in need of humanitarian assistance
-  **21,900,000**  
people in need (HNRP Addendum 2025)
-  **3,639,400**  
Internally displaced people (UNHCR, 29 December 2025)
-  **198,500**  
People displaced to neighbouring countries since 1 February 2021

## Situation Overview & Humanitarian Needs

In 2025, Myanmar remained the world's most fragmented conflict and second-highest globally in conflict intensity,<sup>1</sup> leading to a deepening humanitarian crisis for children and families. By the end of December, over 3.6 million people<sup>2</sup> were internally displaced,<sup>3</sup> an increase of more than 150,000 newly displaced individuals compared to 2024. Most newly displaced populations are from Sagaing, Kayin, Tanintharyi, and Ayeyarwaddy regions, often fleeing multiple times, only to end up in informal shelters with limited access to food, healthcare, and clean water.<sup>4</sup>

Children's rights to education and safety were severely affected. Ongoing conflict, school destruction, teacher shortages, and severe access restrictions limited service delivery, while areas hit by both conflict and the 2025 earthquake faced critical shortages of safe learning spaces, learning materials, and mental health and psychosocial support (MHPSS).

Protection risks intensified as families under extreme stress resorted to harmful coping strategies, including child labour, unsafe migration, family separation, and early marriage. Landmine and explosive ordnance contamination remained a major threat, with children making up over a quarter of casualties in the first half of 2025.<sup>5</sup>

<sup>1</sup> United Nations Office for the Coordination of Humanitarian Affairs, Myanmar Humanitarian Needs and Response Plan 2026 (December 2025), United Nations, Myanmar, December 2025.

<sup>2</sup> The displacement figure as of 29 December included 244,500 people displaced in protracted settings before February 2021, and additional 3,394,900 people displaced after 2021

<sup>3</sup> United Nations High Commissioner for Refugees, 'Myanmar UNHCR displacement overview 29 December 2025', UNHCR

<sup>4</sup> United Nations Office for the Coordination of Humanitarian Affairs, Myanmar Humanitarian Needs and Response Plan 2026 (December 2025), United Nations, Myanmar, December 2025.

<sup>5</sup> [Myanmar Landmine and Explosive Ordnance Incidents Information | UNICEF Myanmar](#), January to June 2025

Displacement continued to rise particularly across Kachin, the northwest and northern and southern Shan, where airstrikes, shifting frontlines, prolonged banking and telecommunications disruption, widespread landmine contamination, and service disruptions heightened risks of exploitation and psychological distress. In Rakhine state, intensified conflict and movement restrictions left an estimated 500,000 displaced people - including a 235,862 stateless population<sup>6</sup> – at risk of harassment and abuse.<sup>7</sup>

The humanitarian crisis severely worsened in March 2025 when a 7.7 magnitude earthquake struck central Myanmar, followed by 262 aftershocks ranging from 5.5 to 3.0 magnitude,<sup>8</sup> damaging more than 10,000 water systems impacting over 92,457 people's access to safe water, damaging 10,471 household latrines in the 401 locations assessed in 29 townships, and depriving 45,812 people of access to safe sanitation facilities.<sup>9</sup> Seasonal disasters compounded the situation: flash floods from late May to July affected 195,000 people across multiple states and regions.

Disease outbreaks, hunger and inadequate WASH conditions intensified the risks to child survival. Health risks heightened in overcrowded displacement settings. In 2025, as per WHO, a total of 2,378 acute watery diarrhoea (AWD) cases were reported<sup>10</sup> across nine states and regions, with the majority occurring in Yangon, Kayin, Chin, and Rakhine. Specific outbreaks were reported in Kayin state, bordering Thailand, in January and Chin state in December.<sup>11</sup> Myanmar remained classified as a hunger hotspot of “very high concern” in the latest global food security update,<sup>12</sup> and 410,000 children under five, along with pregnant and breastfeeding women, were projected to be suffering from acute malnutrition between June 2025 and May 2026.<sup>13</sup> Joint mapping conducted by Health, Nutrition and WASH clusters identified 76 townships at very high risk of AWD outbreaks, primarily located in conflict- and disaster-affected areas.

Humanitarian access remained critically constrained, with over one-third of townships extremely difficult to access (Level 3)<sup>14</sup> due to active hostilities, administrative restrictions, and insecurity. Conflict hotspots like Rakhine, Sagaing, and Magway accounted for 69 per cent of incidents.<sup>15</sup> Furthermore, 58 per cent of the 6.7 million people targeted for assistance reside in high-restriction areas, where airstrikes, landmines, and telecommunications blackouts frequently force the suspension of life-saving operations.

## Summary Analysis of Programme Response

### Health

In 2025, UNICEF and partners (including private sector general practitioners) provided life-saving health care services to people affected by conflict and the March earthquake. Essential supplies were provided to support the safe delivery and essential care of newborns, including inter-agency emergency health kits, clean delivery kits and newborn kits.

In 2025, over 676,000 people were reached with primary health care services, including care of pregnant women, essential newborn care, care of sick children, and emergency referrals, through mobile and fixed clinics and outreach services, in different geographical coverage areas, despite challenges.

Armed conflict continued to hamper access to public sector services, with local communities relying on humanitarian assistance. Community awareness of service availability also increased, with partner presence on the ground and project continuity sustained as much as possible. Compared to the previous year, there was a 31 per cent increase in access to primary health care services, and primary health care consultation reached 97 per cent of the target.



*A near-term pregnant woman receiving Clean Delivery Kit and Newborn Kit, ©UNICEF/2025/ Maung Nyan*

<sup>6</sup> UN displacement figure, last updated 30 June 2025, United Nations High Commissioner for Refugee, accessed on 12 February 2026

<sup>7</sup> *ibid*

<sup>8</sup> [After Shock Earthquake News -262 | Department of Meteorology and Hydrology](#)

<sup>9</sup> Myanmar Earthquake Damage WASH Technical Assessment, WASH Cluster partners, May-June 2025.

<sup>10</sup> [WHO Global Cholera and AWD dashboard public](#)

<sup>11</sup> Health Cluster Bulletin, December 2025, [Myanmar Health Cluster Bulletin December 2025 - Myanmar | ReliefWeb](#)

<sup>12</sup> UN Office for the Coordination of Humanitarian Affairs, 'OCHA Myanmar Humanitarian Update No.50 (17 November 2025)', OCHA, November 2025.

<sup>13</sup> Food and Agriculture Organization of the United Nations and World Food Programme, Hunger Hotspots. FAO–WFP early warnings on acute food insecurity, November 2025 to May 2026 outlook, FAO and WFP, 2025, Rome.

<sup>14</sup> United Nations Office for the Coordination of Humanitarian Affairs, 'Humanitarian Access Severity Overview (As of October 2025), Myanmar', UNOCHA

<sup>15</sup> United Nations Office for the Coordination of Humanitarian Affairs, 'Myanmar Humanitarian Access snapshot – November 2025', UNOCHA

A total of 227 health care providers from Yangon, Shan (south and east), Mandalay, Ayeyarwady, Magway, and Naypyitaw were trained in tracking HIV-positive mother-baby pairs using the District Health Information System (DHIS2 tracker) in January to June 2025. UNICEF engaged with 51 private hospitals from Yangon, Mandalay and Naypyitaw for private sector involvement in preventing mother-to-child transmission of HIV and syphilis. UNICEF contributed dual HIV/Syphilis test kits to achieve at least 10 per cent of national HIV and syphilis testing coverage aims among pregnant women during antenatal care visits in 2025.

UNICEF provided lifesaving services in earthquake-affected areas, and maintained support in working with partners, distributing vital health supplies and sustaining emergency health assistance. At least 413 front line health care providers from seven organizations received peri-natal mental health training.

Throughout 2025, UNICEF helped build the capacity of 445 health care workers from nine partner organizations on key community-based health care service provision for newborns and children aged under 5 years. Essential supplies, including interagency emergency health kits, clean delivery kits and newborn kits were provided to support essential newborn care at home, and essential medicines, including ORS, zinc and amoxicillin were provided to cover the needs of more than 640,000 people.

Throughout 2025, UNICEF supported the Expanded Programme on Immunization (EPI) in Myanmar to maintain essential services and reduce immunity gaps amid population displacement and access constraints. Support focused on sustaining routine immunization, catch-up vaccination, outbreak-prevention activities, strengthening cold chain systems, and conducting an Effective Vaccine Management (EVM) assessment to identify supply chain gaps and improvement actions. Nationwide, as of December 2025, 546,985 children aged 6–59 months (257,083 boys and 289,902 girls) were vaccinated against measles, through routine and outreach services. Throughout the year, regular cold chain support ensured vaccine quality and safety, including equipment, maintenance, and logistics for immunization sites. In addition, 43,200 children aged 5–11 years were vaccinated with the Pfizer COVID-19 vaccine, while 4.73 million people received Pfizer COVID-19 vaccines.



*Antenatal care service provision during mobile visit in hard-to-reach village, © UNICEF/2025/ UNICEF implementing Partner.*

## Nutrition

During the reporting period, UNICEF and its partners reached nearly 2.5 million children aged 6–59 months with preventive nutrition services, along more than 194,000 caregivers of children under two years of age (achieving 99 per cent of the 2025 target). These services included vitamin A and multiple micronutrient supplementation, as well as the promotion of counselling on infant and young child feeding (IYCF) to support optimal feeding practices.

In addition, over 365,000 children (83 per cent of the annual target) were screened for acute malnutrition, and 8,023 cases of severe acute malnutrition (50 per cent of the target) were identified and treated through life-saving interventions. Multiple micronutrient supplementation was provided to over 114,000 children under five years of age (44 per cent of the target) and more than 255,000 pregnant and lactating women (233 per cent of the target)<sup>16</sup>. UNICEF also supported the provision of essential nutrition commodities, including ready-to-use therapeutic food (RUTF), anthropometric equipment and multiple micronutrients, to ensure effective implementation nationwide, including during the earthquake response.



*Child nutrition screening by a UNICEF staff during earthquake response © UNICEF/UNI869119/Htet*

As the technical lead, UNICEF provided critical support for integrated management of acute malnutrition (IMAM) and IYCF capacity-building initiatives, reaching over five hundred staff in 2025. Despite these achievements, progress was constrained by limited operational access, challenges in transporting supplies to conflict-affected areas, and funding constraints.

<sup>16</sup> This overachievement included the results delivered through the public system, including those related to the earthquake response.

## Nutrition Cluster

From January to December 2025, the Nutrition Cluster and its partners worked across the country to prevent and treat malnutrition among children and mothers affected by conflict, displacement, and poor access to services.

A total of 403,055 children aged 6–59 months (71 per cent against the target) were screened for acute malnutrition to ensure early detection and treatment. Some 4,757 children received treatment for severe acute malnutrition (SAM), and 19,420 children were treated for moderate acute malnutrition (MAM). Preventive services reached 503,912 people (58 per cent of the target), including 77,754 children (45 per cent) with vitamin A, 69,845 (15 per cent) with micronutrient powders, and 61,961 (31 per cent) through the Blanket Supplementary Feeding Programme (BSFP). In addition, 101,488 caregivers (37 per cent) received counselling on infant and young child feeding (IYCF), 27,738 pregnant and lactating women (12 per cent) were reached through micronutrient supplementation, and 15,894 (16 per cent) benefited from BSFP support.

Capacity building remained a priority. 144 staff joined Nutrition Cluster Coordination blended trainings, and 406 partner staff received IMAM and IYCF refresher training. Furthermore, 100 field staff attended a refresher on Weight-For-Height-Z score, 22 staff in Kachin completed a Nutrition Awareness Training of Trainers, and 34 participants took part in Multi-sector Initial Rapid Assessment (MIRA) training in Hpa-An with area Inter-agency Cluster Coordination Group/AoR support.

To support data-driven decision-making, the Cluster conducted the Nutrition Vulnerability Assessment (NVA) in some areas and played a key role in 2025 Integrated food insecurity and malnutrition analysis. Insights from these exercises deepened contextual analysis and contributed to more precise identification of priority areas and response targets.

Despite progress, access challenges, supply shortages, and limited funding continued to affect service delivery. In 2026, the Cluster will focus on expanding community-based services and improving coordination and early action.

## Child Protection

Throughout 2025, UNICEF and its partners reached 1,413,661 children and caregivers with mental health and psychosocial support (MHPSS), achieving 198 per cent of annual target<sup>17</sup> (714,499) across conflict-affected and earthquake impacted areas. UNICEF and partners provided services encompassing comprehensive child protection interventions, ranging from prevention to response. Prevention services included community awareness raising sessions, dissemination of child protection and prevention messages, explosive ordnance risk education (EORE), Gender-based violence (GBV) risk mitigation, protection from sexual exploitation and abuse (PSEA). Response interventions were provided through case management for violence against children (VAC), age-appropriate child survivor response services, and victim assistance for explosive ordnance (EO) incidents and monitoring and responding to grave violation under Monitoring and Reporting Mechanism (MRM).



*Children participating in child friendly activities*  
©UNICEF/UNI784858/Htet

General child protection awareness raising reached 62 per cent of the target, strengthening community-level prevention capacities. EORE and victim assistance achieved 87 per cent of target, contributing to reduced risk and increased community awareness. In addition, 15,841 age- and gender-appropriate child protection kits were distributed to earthquake affected children, benefitting 23,663 children and adolescents – 113 per cent of the target.

UNICEF provided child protection interventions through enhancing capacity and quality assurance of implementing and strategic partners, in managing VAC and GBV cases. Quality case management services had reached 113 per cent of the target. This resulted from UNICEF enhancing its localization through strengthened capacity of community groups, increased knowledge of referral pathways, with communities gradually familiarizing and making use of existing child protection referral mechanisms. UNICEF continued investing in partnerships with local civil society organizations and

<sup>17</sup> This was achieved primarily through digital platforms, which reached more than 954,000 people, while community-based MHPSS interventions reached nearly 460,000 children and caregivers.

networks, and local procurement of supplies, which was scaled up across additional regions and states. Collaboration with private legal aid service providers improved children’s access to essential services.

Furthermore, across the entire UNICEF programme implementation in 2025, more than 960,000 community members (77 per cent of the target) – both children and adults – had access to safe, confidential, and accessible channels to report sexual exploitation and abuse (SEA) by humanitarian personnel. Of these, over 166,000 children and caregivers were reached through child protection partners.

The integration of Child Protection programming with Education, Health and Nutrition, and WASH further expanded both geographic coverage and the number of beneficiaries reached. Collaborative efforts through the Child Protection Area of responsibility (CPAoR), the Mine Action AoR, and other sectors further strengthened coordination, improved referrals, and wider reach across the country.

### Child Protection Area of Responsibility (CP AoR)

CP AoR partners reached 1,278,966 individuals (54 per cent of the 2025 target), including 777,575 children, 501,391 adults, and 2,424 persons with disabilities. This included 582,605 people receiving MHPSS support, 12,401 children receiving case management, 558,956 people reached with CP risk reduction awareness, 59,562 community members engaged in community-based CP initiatives, and 20,780 adolescents supported through life skills and peer support programming.



Children participating in child friendly activities ©UNICEF/UNI871887/Htet

In 2025, the Child Protection Area of Responsibility (CP AoR) strengthened guidance, coordination, and partner capacity building, including the development and dissemination of a Tip Sheet on Child-Friendly Accountability to Affected Populations and Complaints and Feedback Mechanisms (CFM) in English and Myanmar languages. Myanmar was selected by the Global CP AoR as one of five global pilot countries for child-friendly accountability and strengthening children’s participation in CFMs; a national task team was established to lead this initiative.

The CP AoR provided technical guidance to the Protection Cluster, GBV AoR, and Mine Action AoR to reinforce child-focus protection mainstreaming. Following the March 2025 earthquake, the CP AoR contributed to inter-cluster Protection Mainstreaming training, developing the capacity of 26 participants.

Capacity-building activities continued at scale with a Child Protection Minimum Standards (CPMS) Training of Trainers delivered to 26 participants from 21 organizations, and a nationwide 5Ws reporting orientation reaching 38 participants, aimed to strengthen data quality and reporting consistency. Community-level child protection support expanded in hard-to-reach areas, conflict-related child protection messaging was disseminated to the GBV AoR. Service mapping and referral pathways were completed for Mandalay, the Northwest region, and Kachin State, with expansion planned to all subnational hubs.

### Mine Action Area of Responsibility (MA AoR)

The Mine Action AoR advanced efforts in 2025 to address explosive ordnance risks by mobilizing resources, integrating Explosive Ordnance Risk Education (EORE) into wider humanitarian activities. The Mine Action Area of Responsibility (MA AoR) continued to strengthen coordination at national and subnational levels, enabling more coherent planning, improved information sharing, and reduced duplication of efforts across Myanmar. Through these coordinated approaches, the MA AoR reached 929,391 beneficiaries with EORE and 3,227 people received victim assistance interventions, despite persistent access constraints and an evolving security context.

Technical quality remained a key focus throughout the year, with EORE and victim assistance materials undergoing continuous review, revision, and contextual adaptation to ensure relevance, accuracy, and appropriateness for diverse affected populations. Field feedback informed of iterative improvements, enhancing the effectiveness of risk-reduction messaging and service delivery.

In response to the March 2025 earthquake, the MA AoR undertook targeted actions to raise community awareness of heightened explosive ordnance risks, including the potential exposure and displacement of mines and explosive

remnants of war due to ground movement and structural collapse. These timely interventions contributed to increased risk awareness and safer behaviours among affected communities.

## Education

Between January and December 2025, UNICEF and its partners supported 854,401 children (435,804 girls, 418,597 boys) – 92 per cent of the target - in accessing formal and non-formal education, including early learning. This support included providing basic literacy, numeracy, and social and emotional learning, particularly benefiting internally displaced children. UNICEF and its partners also provided 389,023 children (196,363 girls, 192,660 boys) with individual learning materials, including Essential Learning Package (ELP) kits. To improve the quality of learning, 24,538 educators (19,757 women, 4,781 men) were trained and incentivized with stipends. 1,328 temporary learning spaces were also established or maintained to support learning continuity.



*Essential Learning Package (ELP) kit distribution to earthquake affected children from Zaygone village, Amarapura Township, Mandalay Region, Myanmar ©UNICEF/2025/ Kyi Soe*

In response to the earthquake, between April and December 2025, in six earthquake-affected states and regions (Bago, Kayin, Mandalay, Nay Pyi Taw, Sagaing, and Shan), UNICEF and its partners provided 162,158 children (81,190 girls, 80,968 boys) with access to formal and non-formal education, including early learning. Additionally, 108,317 children (53,943 girls, 54,374 boys) received individual learning materials, including ELP kits. Some 1,936 educators (1,682 women) were trained and their knowledge and skills in child protection, early childhood development and MHPSS were improved; 145 temporary learning spaces and centres were renovated and set up to provide safe learning environments; 33,073 children and educators (17,456 females, 15,617 males) had access to MHPSS, and those children were provided with recreational opportunities, such as through art and drawing activities.

UNICEF is committed to accelerating its efforts to strengthen the continuity of learning for all children affected by conflict and disasters.

## Education Cluster

In 2025, the Education Cluster and partners reached a total of 1,098,592 people, including 908,881 children (461,892 girls, 446,989 boys) and 189,711 adults (111,736 women, 77,975 men) with various education in emergencies (EiE) services, achieving 76 per cent of the Cluster's 2025 HRP targets. Over half of the targeted children received learning services and education supplies through a comprehensive, inclusive and gender sensitive approach designed to maximize learning outcomes. This response also covered 109,997 people affected by the earthquake in Bago (east), Kayin, Mandalay, Sagaing and Shan (south), who were supported by Cluster partners.

A core achievement of Education Cluster was the rapid and sustained delivery of essential educational supplies to conflict- and disaster-affected regions. In response to escalating conflict and the earthquake, the cluster partners delivered over 50,000 ELP kits, 13,439 roofing sheets, key structural materials used to construct temporary learning spaces, as well as support for learning centres to provide safe and conducive learning environments. As a result, over 120 schools and learning centres reopened across multiple regions, including Mandalay, Sagaing, Naypyitaw and Rakhine. Additionally, more than 21 latrines and three temporary learning centres (TLC) were constructed or rehabilitated in Sagaing, Mandalay and Naypyitaw, restoring safe access to learning following the March earthquake.

Partners were supported to better understand the Myanmar Humanitarian Fund (MHF) 2025 SA2 call, enabling them to prepare and submit competitive proposals. Additional guidance was provided to local partners through a webinar titled, "Localization Pathways: Navigating ECW Funding Requirements for National Actors," organized by Education Cannot Wait (ECW) and the Inter-agency Network for Education in Emergencies (INEE) to strengthen partners' understanding of how to access ECW resources.

A total of 184 staff (90 women, 94 men) from 59 local partner organizations were equipped with EiE technical competencies to strengthen the delivery of safe, inclusive, and high-quality programming, covering EiE fundamentals, explosive ordnance risk education, inclusive education, social emotional learning and MHPSS.

The Cluster conducted national and sub-national consultations with partners across all hubs to promote inclusive and collaborative planning for the 2026 Humanitarian Program Cycle. These consultations informed strategic directions for the 2026 HNRP. This participatory process strengthened collective ownership, enhanced inclusion, and improved alignment around education needs, priorities and response strategies.

## WASH

In 2025, UNICEF and partners delivered lifesaving WASH assistance across Myanmar in response to earthquake, disease outbreaks, flooding, and protracted humanitarian needs. Support included treated water, household filtration, safe storage, purification chemicals, and rehabilitation of damaged systems. The programme exceeded its emergency water access goal, achieving 142 per cent of the target, which significantly improved reliable access to safe water in protracted camps and host communities. Essential WASH supplies reached 70 per cent of planned coverage, reinforcing hygiene practices and reducing AWD and cholera risks.

Despite escalating conflict, market volatility, and natural disasters, UNICEF adopted adaptive delivery systems, diversified monitoring modalities, and strengthened partnerships with local actors. These measures allowed continuity of services in hard-to-reach areas. Localized procurement and community-based implementation were key in navigating movement restrictions and supply chain disruptions.

Progress in emergency sanitation was constrained by

increased construction costs and logistical restrictions, with 41 per cent of the sanitation target achieved. Provision of safely managed and gender-segregated facilities continued where possible, though behaviour change interventions were hindered by fear of public gatherings, reaching 46 per cent of intended coverage. As WASH needs shifted toward long-term recovery in schools and health facilities, programming increasingly emphasized comprehensive, safely managed services, rather than short-term emergency interventions.

Throughout these challenges, UNICEF and partners rapidly deployed water treatment solutions, expanded localized supply production, and strengthened outbreak preparedness, particularly in AWD prone regions. Operating within a dynamic and constrained environment, UNICEF remained committed to equitable, lifesaving WASH services—supporting resilience, preventing disease outbreaks, and safeguarding the wellbeing of crisis-affected children and families.

## WASH Cluster

Following the 28 March earthquake, the WASH Cluster coordinated a rapid and effective response across the northwest, Bago east, and Shan south. Coordination efforts prioritized rapid and multi-cluster assessments, including a dedicated WASH technical assessment, to inform immediate lifesaving interventions as well as early recovery and reconstruction planning. Emergency assistance, including water trucking, hygiene kit distribution, emergency sanitation, and hygiene promotion, reached 1,026,000 people. However, major gaps remained in recovery and reconstruction, highlighting the urgent need for additional resources to address longer-term needs in affected areas.

In Rakhine, chronic water scarcity remained a major concern. The Water Scarcity Technical Working Group provided early support in prioritized townships, reaching 62,456 people through water trucking, remote pumping, and water boating. The Accountability and Quality Assurance initiative continued to provide evidence on program quality, highlighting persistent sanitation gaps in Sittwe camps, including insufficient child-friendly and gender-segregated latrines and high levels of open defecation among children under five. These findings are guiding advocacy and response adjustments to improve sanitation outcomes in 2026.

In 2025, the WASH Cluster maintained effective coordination at both national and subnational levels, despite operating in a highly complex and constrained environment marked by continued displacement, seasonal flooding, and the earthquake and associated aftershocks. Through largely one-off emergency interventions and more limited sustained support in protracted camps, the cluster reached 2,254,000 people against a target of 3,252,000 (69 per cent). Funding remained a major constraint, with the cluster receiving only 17 per cent of its USD 204 million requirement, a significant decrease from 29.2 per cent in 2024. The focus on short-term emergency actions partly explains the relatively high



*UNICEF provides daily safe water distribution in Sagaing, which benefits the children attending No. 15 Primary School, © UNICEF/UNI875805/Htet*

reach despite limited funding. To improve transparency and planning, the 2026 framework separates one-time emergency responses from sustained interventions.

Strengthening partner capacity was a key focus throughout the year. More than 200 frontline staff were trained on WASH in emergencies. This included two AWD preparedness and response trainings at national level and in Rakhine, reaching a total of 66 partners from WASH, health, and nutrition sectors. These trainings enhanced technical capacity, harmonized response approaches, and improved readiness in high-risk areas, leading to the establishment of AWD working groups at subcluster level. Additional WASH in Emergencies trainings supported financially by a partner reached 90 partners across the northwest, southeast, Shan, and Kayah, while a data management training in the northwest improved reporting and information quality among 21 partners.

To support risk-informed planning, the cluster, in collaboration with Health and Nutrition, finalized an inter-cluster AWD severity mapping exercise integrating the three cluster indicators with contextual vulnerabilities. The analysis identified 76 townships at very high risk of AWD and was presented to donors to inform prioritization for the 2026 planning cycle. The cluster also established a Northwest Earthquake Recovery Technical Working Group to review hygiene kits and hazard-resilient WASH designs for earthquake-affected communities, supporting more durable and appropriate recovery solutions.

At strategic level, the National WASH Strategy for 2026 was updated to reflect increasing displacement, access restrictions, and growing exposure to multiple hazards. The cluster also advanced development of a Cash and Voucher Assistance guideline in collaboration with the Global WASH Cluster, which has been shared with partners for operationalization. An annual cluster meeting held in December 2025 brought together 34 national and subnational partners to review performance, refine coordination tools, align priorities for 2026, and strengthen shared understanding for implementation and resource planning. Resource mobilization emerged as a critical priority, alongside improved communication with donors on needs, risks, and impact.

### **Social Protection and Cash-based Programming**

In 2025, UNICEF and partners reached vulnerable children and families across Myanmar with humanitarian assistance and social protection. After the earthquake, UNICEF conducted a rapid needs assessment of families with disabilities in earthquake-affected areas, ensuring that vulnerabilities were promptly identified.

As part of the earthquake response, UNICEF was able to rapidly provide assistance for vulnerable families in collaboration with its local partners. UNICEF facilitated access to assistive devices, such as wheelchairs, walkers and crutches, to strengthen inclusion, dignity and independence for some 2,000 children and adults.

UNICEF expanded its humanitarian assistance and social protection to a total of 62,398 households (51 per cent of the target)—representing 311,990 individuals, which included 94,001 children, 113,356 women and 16,016 people with disabilities across 274 townships in all states and regions, helping families meet essential needs and build resilience.

Some 23,025 children (124 per cent of the target) benefited from disability-specific services mobility aids, assistive technologies, physical rehabilitation and psychosocial services that help to promote inclusion, independence and dignity. These achievements underscore UNICEF's commitment to advancing humanitarian cash assistance and social protection to help meet the basic needs of the most vulnerable populations.



*Mother and child who received assistance with her other children in their home. ©UNICEF/2025/Nyan Zay Htet*

### **Social and Behaviour-Change (SBC) and Accountability to Affected Population (AAP)**

UNICEF delivered timely, accurate, and actionable life-saving information across Health, Nutrition, WASH, Education, and Child Protection sectors, reaching 4.1 million people through integrated communication approaches, including social and mass media, and community engagement.

Through Risk Communication and Community Engagement for the earthquake response, community concerns were integrated into programme response priorities, affected communities were supported with lifesaving supplies, and psychosocial support messages were disseminated through digital and mobile platforms.

UNICEF tailored communication strategies reaching diverse populations, including ethnic-language groups, internally displaced people, and communities in media-dark areas, through partnerships with community-based and ethnic service providers. These efforts sustained outreach in hard-to-reach and insecure areas. Through community engagement, 448,366 people (148,127 men, 300,239 women) were reached, with a focus on childcare and family practices to prevent communicable diseases and contain AWD/cholera transmission following the earthquake.



*Community engagement activity: Sharing tips on correct usage of water purification tablets with people affected by the earthquakes at Yamethin Township, Mandalay Region, Myanmar. ©UNICEF/2025/UNICEF Photographer*

To strengthen evidence generation, behavioural study on gender-related barriers to health was conducted. Findings informed programme design, capacity building, and social listening interventions to monitor and respond to rumours and misinformation during humanitarian response.

Capacity development was central to SBC/AAP efforts, with 1,342 partners and frontline workers trained on interpersonal communication, community engagement, risk communication, and AAP principles. UNICEF expanded community feedback mechanisms, reaching 264,794 people, with 190,333 (71,556 male, 118,777 female) providing feedback that informed course-correction, promoting inclusive approach, and accountable humanitarian actions.

## Humanitarian Leadership, Coordination and Strategy

UNICEF's humanitarian strategy focused on working with communities, local and international partners and all stakeholders to deliver life-saving humanitarian assistance and to ensure critical services reached children in need. The protracted and complex nature of the crisis impacting Myanmar required UNICEF and partners to address acute humanitarian needs while investing in community resilience through a risk-informed approach. This is in line with the inter-agency Humanitarian Needs and Response Plan Flash Addendum 2025 that UNICEF contributed to, along with other agencies.

UNICEF, in collaboration with the Myanmar Humanitarian Country Team, and through its cluster coordination role, contributed to the 2026 Humanitarian Programme Cycle process and to the development of the 2026 HNRP prioritizing the most vulnerable people, with the most severe needs, in light of resource constraints and severe access restrictions. The WASH, Education and Nutrition Clusters, CP AoR and MA AoR participated in both national and subnational level cluster discussions, and throughout humanitarian reset discussions. UNICEF developed its Myanmar Humanitarian Action for Children appeal for 2026 in alignment with the humanitarian reset. The appeal prioritized responding to areas with the greatest severity of needs, while also investing in emergency preparedness and strengthening community resilience.

UNICEF continues to support the expansion of humanitarian assistance to the most vulnerable people through its leadership roles in the Nutrition and WASH Clusters, the Child Protection and Mine Action AoRs, and co-leadership of the Education Cluster with Save the Children, at national and subnational levels, to strengthen emergency preparedness and to implement a multisectoral response to address needs arising from the ongoing conflict, the impact of natural hazards, and public health emergencies.

In coordination with other United Nations agencies, partners and stakeholders, UNICEF continues to maximize national coverage prioritizing all vulnerable children and families, including those in communities that have been displaced and non-displaced communities affected by natural disasters and conflicts. UNICEF also participates in the Myanmar Cash Working Group and facilitates the in-country inter-agency network for Protection from Sexual Exploitation and Abuse with the United Nations Population Fund (UNFPA). UNICEF continues to co-lead the Risk Communication and Community Engagement (RCCE) Working Group and participates in the Humanitarian Access Working Group.

## Human Interest Stories and External Media

### Stories

#### **The Devastating Toll of Conflict on Children in Myanmar**

*"I want peace to return swiftly so I can go back to my home," - 16-year-old Kyang Sau.*

<https://www.unicef.org/myanmar/stories/devastating-toll-conflict-children-myanmar>

#### **Together through the tremors**

*Supporting children and families hardest hit by the devastating earthquake in Myanmar*

<https://www.unicef.org/myanmar/stories/together-through-tremors-Eng>

#### **Children heal through play following Myanmar's earthquake**

*UNICEF's recreation kits bring play, learning and healing to children affected by Myanmar's devastating earthquake*

<https://www.unicef.org/myanmar/stories/children-heal-through-play-following-myanmars-earthquake-Eng>

### Social Media

#### **Earthquake safety information from Parenting Hub.**

<https://www.facebook.com/477179694445343/posts/1062185155944791>

**Video: UNICEF Myanmar Rep Yasumasa Kimura shows why support from partners is a critical lifeline, giving children a chance to learn, heal, and survive in these uncertain times.**

<https://www.instagram.com/reel/DOnI7YxgHRH/>

**Video: UNICEF Myanmar's Julia Rees reports from the ground as UNICEF water trucks arrive with clean water and purification tablets for families in need.**

<https://x.com/UNICEFMyanmar/status/1908098623977791686>

**Video: UNICEF Myanmar Representative Highlights Critical Children's Needs Following Devastating Earthquake**

<https://www.youtube.com/watch?v=zQXNtu0bKT8>

## Next SitRep: May 2026

UNICEF Myanmar Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/myanmar>

Who to contact for further information: Yasumasa Kimura  
Representative  
Myanmar Country Office  
Tel: (+95) 12305960  
Email: [ykimura@unicef.org](mailto:ykimura@unicef.org)

Julia Rees  
Deputy Representative  
Programmes  
Myanmar Country Office  
Tel: (+95) 9883768865  
Email: [jrees@unicef.org](mailto:jrees@unicef.org)

Faika Farzana  
Emergency Manager  
Myanmar Country Office  
Tel: (+95) 9883768871  
Email: [ffarzana@unicef.org](mailto:ffarzana@unicef.org)