

GENDER-IMPACT FLASH UPDATE: MYANMAR EARTHQUAKE

No. 1

2 April 2025

This update has been prepared by the Gender in Humanitarian Action Working Group (GiHA WG), based on initial reports from local partners on the ground in Myanmar, including women-led organisations. It provides an overview of the gendered impact of the earthquakes and the specific needs of women and girls.

The GiHA WG is ensuring the needs of women and girls, including pregnant women, women with disabilities, youth and adolescents are prioritised in this humanitarian response.

BACKGROUND

On Friday 28 March 2025, central Myanmar was struck by two powerful earthquakes, causing widespread destruction. A 7.7 magnitude earthquake hit near Mandalay and Sagaing at around 12:50pm local time. Minutes later, a second quake measuring 6.4 struck further south. Both earthquakes were shallow and occurred close to major cities, making the impact especially severe. Affected areas include Mandalay, Sagaing, Nay Pyi Taw, Bago, Magway, and parts of Shan State.

Initial reports indicate that more than 2,800 people have died and more than 4,600 are injured.¹ Thousands of people have been displaced, with many now sleeping outside in makeshift conditions due to damaged homes or fear of aftershocks.

Critical infrastructure has been severely damaged, including health facilities, airports, major roads and bridges, and power and water systems.

This disaster intensifies the challenges for Myanmar's women and girls, who were already living through conflict, political instability and economic collapse. Even before the earthquake, more than a third of Myanmar's people—including 10.4 million women and girls—needed urgent humanitarian aid. The earthquakes add another layer of hardship as they face unsafe conditions, disrupted health services, and heightened risks of gender-based violence and exploitation—especially girls separated from their families.

Prioritizing the safety, dignity, and leadership of women and girls is essential to ensuring an effective, inclusive response that leaves no one behind.

>2,800

PEOPLE KILLED

>4,600

INJURED

>20 million

PEOPLE WERE LIVING IN THE
AFFECTED AREA

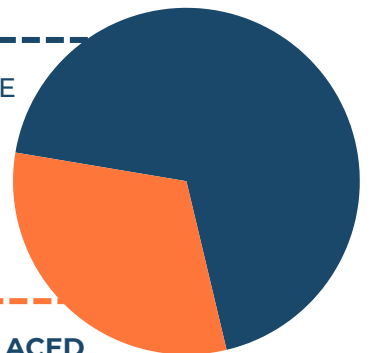
BEFORE THE EARTHQUAKE

>10 million

WOMEN & GIRLS WERE ALREADY
IN HUMANITARIAN NEED

3.5M -----
PEOPLE WERE
ALREADY
INTERNALLY
DISPLACED

1.6M -----
OF THE DISPLACED
WERE LIVING IN HARDEST HIT AREAS



¹ According to publicly reported figures as of 2 April 2025.

IMMEDIATE IMPACT ON WOMEN AND GIRLS

AT A GLANCE



Lack of healthcare

Damaged health facilities limit access to sexual & reproductive health services, including safe childbirth & contraception.



Risks for girls

Family separation & unsafe shelters increase risks of violence & exploitation of girls.



Mental health

Deepened trauma & anxiety for women & girls already affected by Myanmar's severe humanitarian crisis.



Increased risk of violence

Open-air or overcrowded shelters lack privacy & security.



Water & hygiene needs

Lack of safe sanitation facilities & hygiene products.



Food insecurity

Rising prices and food shortages will threaten maternal & child nutrition.

Increased risk of gender-based violence

With homes destroyed and power and communications disrupted, women and girls face heightened risks of gender-based violence. People are seeking safety in overcrowded or exposed shelters—in many cases, they are staying outside in tents or with only blankets or sheets to separate spaces. Lighting is limited and there are no locks on these temporary shelters. The lack of security, privacy, and gender segregated facilities, and the limited access to GBV services, increase the risk of violence.

Child protection risks

Children face acute protection needs, including family separation, psychosocial distress, and heightened risks of trafficking or unsafe migration. Girls are particularly vulnerable, especially when separated from their families or living in overcrowded shelters without adequate privacy or supervision. They face higher risks of sexual violence, early marriage, and being forced into harmful coping mechanisms. With many caregivers injured or killed, urgent efforts are needed to identify, protect, and reunify unaccompanied and separated children.

Disrupted access to healthcare including sexual and reproductive health services

Many hospitals and health facilities have been damaged or destroyed, and those still functioning are overwhelmed by the influx of injured people. There is a severe shortage of medical supplies. Limited transport, and fuel shortages further restrict access to essential services, including those to aid safe childbirth, contraception, and care for survivors of violence.

During the day, temperatures can exceed 38 degrees Celsius, putting exposed women and girls at risk of heat stroke and other health concerns.

Children and families take shelter in makeshift outdoor spaces in Mandalay. With many buildings and critical infrastructures destroyed, many residents fear returning to damaged buildings due to ongoing aftershocks.

Photo: © UNICEF/UNI771831/Maung Nyan



IMMEDIATE IMPACT ON WOMEN AND GIRLS

Water, sanitation, and hygiene challenges

Women and girls lack access to safe, private sanitation and bathing facilities, making it difficult to maintain hygiene—especially during menstruation, pregnancy and postpartum. In one temporary camp, GiHA members observed only 14 toilets available for 1,200 people. Early observations note a lack of sanitation facilities that are accessible for women and girls with disabilities.

Women and girls also lack menstrual hygiene products, which undermines their health and dignity. Water points are not commonly available inside the temporary camps and the lack of electricity means electric water pumps are not working. Contaminated water supplies increase the risk of disease outbreaks.

Growing food insecurity

In many areas, there are no, or very limited functioning markets and most people are sharing their existing household supplies of food. As food becomes scarce, prices are expected to rise, and access to nutritious food—especially for those who are pregnant or breastfeeding—will become more difficult. This increases malnutrition risks for women and children.

Mental Health and Psychosocial Support

The mental health impact of an earthquake on women and girls is profound, as they face immediate trauma, grief, and heightened anxiety due to the sudden loss of loved ones, destroyed homes, and ongoing fear of aftershocks. Prior to the earthquakes, women and girls in Myanmar were already facing significant mental health stress due to prolonged conflict, political instability, and economic challenges. The disaster has deepened this stress. Adolescent girls, especially those separated from their families, are particularly vulnerable to mental health stress, including depression and anxiety, exacerbated by the lack of social support and over crowding in temporary shelters.

*WFP's emergency food assistance reaches earthquake survivors in Pynmana in the immediate aftermath of devastating earthquake in Myanmar.
Photo: © WFP/Diego Fernandez*





Photo: © WFP/Diego Fernandez

PRIORITY NEEDS AND ACTIONS

Conducting gender-sensitive needs assessments

Gender-sensitive assessments are essential to ensure the response addresses gender-specific needs. The GiHA Working Group is coordinating the gender mainstreaming of the earthquake response, including rapid assessments with UN agencies, partners, and local partners. Women, especially from crisis-affected communities, must be actively involved in designing and implementing assessments to ensure their priorities are reflected.

Restoring access to food, water, sanitation, and shelter

Women and girls need safe shelter, clean water, and enough food. Shelters should have locks, lights, and private spaces. They need secure toilets and bathing areas, along with dignity kits and menstrual hygiene products. Adequate lighting near water points and toilets can reduce the risk of gender-based violence, especially after dark. Humanitarian organisations are distributing dignity kits and essential hygiene and safety items. Women and girls also need household items like cooking supplies, sleeping mats, and clothes. Food aid must include nutritious options for pregnant and breastfeeding women and children.

Strengthening GBV prevention and protection

GBV risk mitigation needs to be integrated across all sectors, ensuring safe spaces for women and girls, functioning protection services, and clear referral pathways. Responders are working to provide access to GBV prevention and response services, along with tailored mental health and psychosocial support.

Providing gender-responsive livelihood support

There is a need to deliver emergency cash assistance and recovery programmes that prioritize women—especially those heading households, caring for others, or living with disabilities. In coordination with partners and the Cash Working Group, responders are assessing needs, identifying target groups, and mapping functioning cash agents. Cash support allows families to meet urgent needs with dignity and flexibility, while helping to sustain local markets.

Improving access to healthcare including mental health, and sexual and reproductive health services

There is a need to prioritize life-saving sexual and reproductive health services for women and girls, including safe childbirth, access to contraception, and post-violence support. Organisations are strengthening GBV protection through mental health and psychosocial support.

Mobile health units are being deployed to deliver essential medicines, maternal care, and reproductive health services, especially where facilities are damaged or overwhelmed or routes are cut off. Mobile health units include clean delivery kits, to help pregnant women who do not have access to health facilities have safe deliveries and avoid deadly infections.

Psychological First Aid (PFA), GBV support, and community-led safe spaces are essential to address immediate trauma, grief, and heightened anxiety.

PRIORITY NEEDS AND ACTIONS

Supporting local women's organizations

Local organisations, including women-led and women's rights organisations are on the ground and ready to provide support. They play a vital role as frontline responders, drawing on their deep community ties and understanding of the context to effectively identify and respond to the specific needs of women and girls. Their participation in coordinated response efforts is critical and they need direct and flexible funding to ensure effectiveness, equity, and sustainability of the earthquake response.

Increase funding and remove access restrictions

To sustain the delivery of emergency assistance, humanitarian responders urgently need unimpeded humanitarian access to all affected areas and flexible funding to scale up the response.

A woman affected by the earthquake in Myanmar receives primary healthcare at a UNFPA-supported mobile clinic in Mandalay. Photo: AFXB Myanmar/UNFPA Myanmar



About the Gender in Humanitarian Action Working Group (GiHA WG)

GiHA WG aims to promote integration of gender considerations and gendered technical expertise in humanitarian action across the humanitarian response areas of operation and foster greater coordination and consideration of gender through humanitarian action mechanisms. It is composed of civil society organisations, women led and women's rights organizations, community-based women's organizations, NGOs, UN agencies, donor gender focal points (as observers) and cluster leads/focal points. The GiHA WG is co-led by UN Women and UNFPA.

For more information:

MIMU 2025 Myanmar Earthquake resource page: themimu.info/emergencies/earthquakes

Contact the GiHA Working Group

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