

<b>Emergency appeal No:</b> MDRMM023 <b>Emergency appeal launched:</b> 30/03/2025 <b>Operational Strategy published:</b> 09/04/2025	<b>Glide No:</b> <a href="#">EQ-2025-000043-MMR</a>
<b>Operation Update #2</b> <b>Date of issue:</b> 17/05/2025	<b>Timeframe covered by this update:</b> 28/03/2025 to 03/05/2025
<b>Operation timeframe:</b> 24 months (28/03/2025 - 31/03/2027)	<b>Number of people being assisted:</b> Approximately 153,042 people
<b>Funding requirements (CHF):</b> <b>CHF 100 million</b> CHF 80 million through the IFRC Emergency Appeal CHF 20 million Federation-wide	<b>DREF amount initially allocated:</b> CHF 2,000,000

To date, this IFRC Emergency Appeal, which seeks CHF 80,000,000, is 19 per cent funded. Further funding contributions are needed to enable the Myanmar Red Cross Society, with the support of the IFRC, to continue providing humanitarian assistance to the earthquake-affected population.



Mental Health and Psychosocial Support activities – A Focus Group Discussion focusing on women conducted in Sagaing on 12 April 2025. (Photo credit: MRCS)

## A. SITUATION ANALYSIS

### Description of the crisis

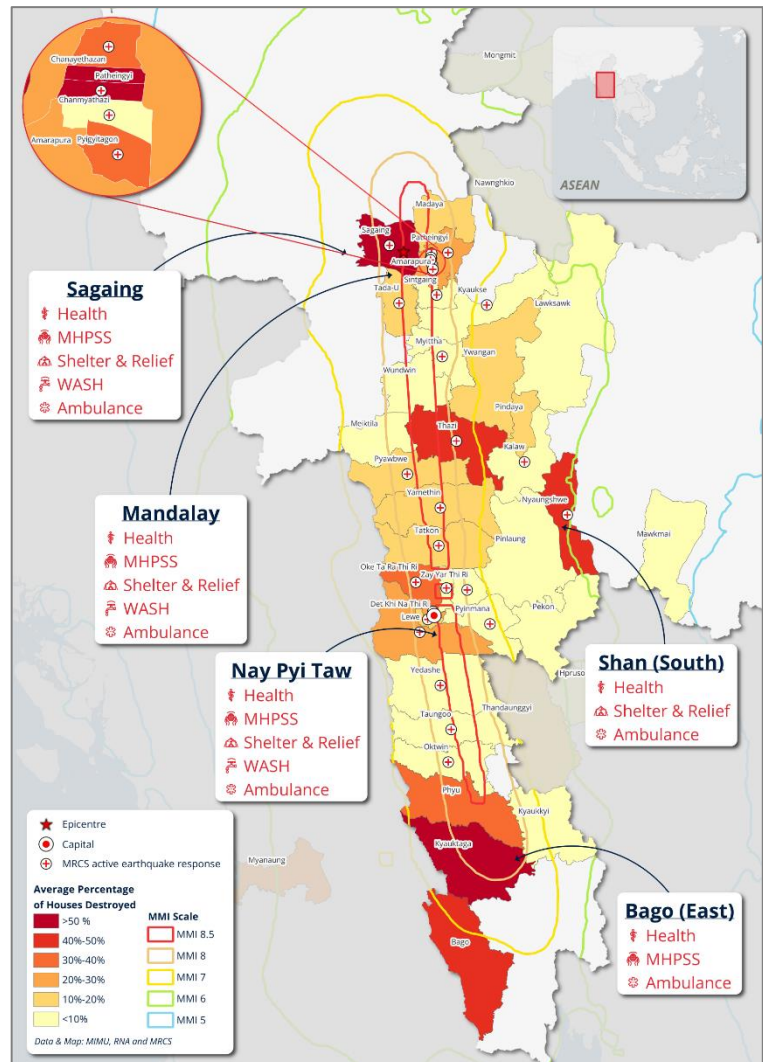
On 28 March 2025, a 7.7-magnitude earthquake struck central Myanmar, with the epicenter located near Sagaing and Mandalay. Twelve minutes later, a strong 6.7-magnitude aftershock followed, exacerbating the destruction caused by the main quake. The tremors resulted in widespread devastation across five regions: Sagaing, Mandalay, Southern Shan, Naypyidaw, and Bago. These areas were already facing complex humanitarian needs with an estimated 17.2 million people residing within the affected zones. As of 22 April 2025, the Department of Disaster Management (DDM) has reported 3,757 deaths, 5,107 injuries, and 116 people missing. Approximately 206,977 people remain displaced, including 41,733 individuals sheltering in 135 temporary sites.

The earthquake caused extensive damage to critical infrastructure, including roads, bridges, hospitals, schools, and water systems. In total, over 120,000 houses, 5,488 office buildings, 640 health facilities, 431 schools, 77 bridges, 38 railways and 405 roads have been reported damaged<sup>1</sup>.

One month on, physical access to the most affected areas has improved with the Yangon to Mandalay corridor functional and operational for heavy vehicles. However, between Mandalay and Sagaing, damaged bridges have limited passage and can only support vehicles under 16 feet in length, necessitating the splitting of loads for humanitarian cargo. Routes between Mandalay and Naypyidaw remain accessible via the highway and standard roads. Traffic congestion persists along key corridors where alternative routes are limited, requiring careful travel planning to ensure the timely delivery of relief supplies and personnel.

Telecommunications and mobile coverage have largely returned to normal. Electricity supply is stable in most locations with many communities supplementing power through solar panels and streetlights functioning in urban areas. In Sagaing, ongoing power disruptions continue to affect the municipal water system which relies on electricity to draw water from the river thereby resulting in water shortages. In Naypyidaw, public utilities have largely resumed normal operation.

Central Myanmar continues to experience frequent seismic activity. The earthquake sequence remains active one



Overview of impact on housing and MRCS earthquake response. (Source: IFRC)

<sup>1</sup> Rapid Needs Assessment as of 13 April 2025.



month after the mainshock, with an average of three to five aftershocks recorded per day during the first two weeks. According to the Department of Meteorology and Hydrology, at least 159 aftershocks had been recorded as of 29 April, with the vast majority concentrated between 20-27 April, particularly in Amarapura, Madaya and surrounding areas. This includes significant tremors measuring 5.9 and 5.6 magnitude near Naypyidaw and Wundwin Township on 29 March and 13 April respectively, as well as additional aftershocks exceeding magnitude 5.0 on 16, 22, and 26 April in Sagaing and Mandalay. This prolonged seismic activity has heightened community safety concerns and posed additional risks to damaged structures which are contributing to further building collapses and continued displacement. As a result, many households continue to shelter outdoors or in open areas.

## Summary of response

### Overview of the host National Society and ongoing response

The Myanmar Red Cross Society (MRCS), operating under the Myanmar Red Cross Society Law (2015), is the oldest and most widely present humanitarian organization in Myanmar. With an extensive branch network and trained volunteers nationwide, MRCS is a key local actor and plays a leading role in the earthquake response.

Immediately following the 28 March earthquake, MRCS activated its national Emergency Operations Centre (EOC) and rapidly mobilized volunteers in affected regions; many of whom were impacted themselves. Staff and volunteers from other states and regions were rapidly deployed to reinforce local response capacity. MRCS teams have since provided search and rescue, first aid, pre-hospital care, ambulance services, emergency relief, water production to provide clean and drinking water, installation of emergency latrines, and the distribution of food and relief items.

MRCS has also supported the installation of emergency latrines and contributed to joint inter-agency assessments, including both Rapid Needs Assessments (RNA) and the Multi-sector Initial Rapid Assessment (MIRA), which collectively assessed damage and needs in 55 townships. As of 3 May, MRCS has deployed 560 local Red Cross Volunteers (RCVs) and reached 153,042 people with humanitarian assistance, including food, household items, health services, water supply, sanitation, hygiene promotion, emergency shelter, and complementary cash assistance. A breakdown of people reached is provided in the infographic above. At least 24 township branches of the Red Cross are actively involved in the response to the earthquake in five affected states and regions

MRCS has concentrated its immediate emergency response resources in the hardest-hit areas of Sagaing, Mandalay, Southern Shan, Naypyidaw and Bago, supported by the township branch-level volunteers. In addition to ongoing emergency relief, MRCS regional and township-level branches in the affected areas are planning early recovery activities to address long term needs.

MRCS continues to coordinate closely with external humanitarian partners, including UN agencies and INGOs,



MRCS Myanmar Earthquake Response people reached data as of 3 May 2025. (Source: IFRC/MRCS)

community organizations and local stakeholders. MRCS has contributed to inter-institutional analysis and field findings and, alongside the IFRC, participates in sectoral coordination mechanisms at both national and sub-national levels.

The IFRC Secretariat, working alongside MRCS headquarters and its Red Cross Supervisory Committees, has established a field presence in Mandalay to support the IFRC Networks in the coordination with internal and external engagement. With support from the IFRC Network, MRCS continues to monitor and analyze evolving needs to ensure that its response remains community-driven, evidence-based, and conflict-sensitive, reflecting the priorities of the people most affected by the earthquake.

## Needs analysis

The earthquake has affected an estimated 1.35 million people, with over 206,977 people being newly displaced. The earthquake resulted in significant infrastructure damage, including 120,000 damaged houses, 64,000 latrines, and hundreds of public buildings, roads, and bridges. Findings from the Rapid Needs Assessment (RNA), followed by a more detailed assessment through the Multi-Cluster Initial Rapid Assessment (MIRA) from mid-April 2025 onward, conducted by multiple agencies including MRCS in Sagaing, Mandalay, Naypyidaw. Southern Shan and Bago confirm urgent multisectoral needs.

- **Shelter and Settlements:** Shelter assistance remains a top priority due to extensive destruction of homes and overcrowding in temporary sites. Multiple humanitarian agencies conducted rapid needs assessments to inform the emergency response. These situational analyses revealed that many affected households are residing in makeshift structures or open spaces. Privacy, safety, and protection concerns particularly for women, girls, and persons with disabilities are escalating. Transitional shelter solutions are urgently required to address these critical needs. MRCS continues to verify the extent of housing damage through visits and phone calls to the identified households.
- **WASH:** Many sites lack access to safe water, latrines, and hygiene facilities. MIRA highlights that 41–44 per cent of people in Mandalay and Sagaing lack adequate daily access to safe drinking water. Key gaps include insufficient facilities for bathing and menstrual hygiene management, and poor waste management particularly affecting displaced populations in rural and peri-urban areas.
- **Health and MHPSS:** The loss of health infrastructure and the scale of displacement have reduced access to medical care and exposed communities to increased health risks including acute watery diarrhea (AWD), dengue fever, respiratory infections, and psychological distress. Rural areas are especially underserved, and the extreme heat and seasonal rains are exacerbating vulnerabilities.
- **Livelihoods and Basic Needs:** The majority of assessed villages cited cash assistance as the top priority need. The disaster has compounded pre-existing economic vulnerabilities, particularly among communities already impacted by ongoing violence and floods caused by Typhoon Yagi in late 2024. Many households have lost income sources, and initial reviews emphasize the need for multi-purpose cash, food, and support for recovery of livelihoods. While inflation is evident, it is noted that local markets remain functional, supporting the feasibility of cash-based assistance.

### Priority Needs



**SHELTER**  
Emergency shelter, and transitional shelter solutions



**HEALTH**  
Essential medicines, primary health, community based health, and mental health and psychosocial support



**WASH**  
Access to clean water, sanitation facilities, and hygiene items



**BASIC NEEDS**  
Food items and cash assistance to meet immediate needs and to support recovery



**PROTECTION, GENDER AND INCLUSION & COMMUNITY ENGAGEMENT AND ACCOUNTABILITY**  
Adopt gender and diversity-sensitive approaches to ensure inclusive support and mainstreaming of CEA

- **Protection:** The protection of vulnerable groups including children, female-headed households, older people and persons with disabilities requires urgent attention. Overcrowding and lack of privacy in collective shelters have increased protection risks, including gender-based violence.
- **Environmental Risks:** The coming monsoon season heightens risks for displaced people living in temporary shelters. Prolonged rain, extreme heat, and poor shelter conditions are likely to increase disease outbreaks and further displacement.

### Operational risks

The following factors affect the speed and efficiency of the response:

- While there has been a substantial improvement in physical access, the access between Mandalay and Sagaing remains limited due to damaged bridges. Heavy trucks cannot pass; only vehicles under 16 feet are operational, requiring cargo splitting and delays in humanitarian deliveries.
- Extreme heat and early rains are worsening living conditions in displacement sites which are heightening health risks, including dehydration, heatstroke, and disease outbreaks, particularly for children, older people, and people with pre-existing conditions.
- The monsoon and cyclone seasons present a growing risk for displaced populations living in temporary shelters. Plans to scale up transitional shelter and flood-resilient infrastructure are increasingly urgent.
- While markets have resumed operations in most of the affected areas, inflation continues to challenge the affordability of basic goods for affected people.
- Volunteer and staff fatigue remains a growing concern as MRCS teams face sustained pressure, particularly in Sagaing and Mandalay. Support through MHPSS and safety and security briefings is ongoing.
- The current MRCS human resource structure needs to be rapidly scaled up to ensure technically sound and high-quality activities, in particular for shelter which is one of the most urgent needs in the earthquake response.

Despite these challenges, MRCS, with the support from the IFRC Network, continues to expand its humanitarian reach. MRCS continues to refine its response strategies that build on input from community level engagement, observation and coordination with other local actors.

## B. OPERATIONAL STRATEGY

The **IFRC Emergency Appeal, launched on 30 March 2025**, directly contributes to the MRCS-led earthquake response operation. The [Operational Strategy](#) for this response was published on 9 April 2025, outlining a Federation-wide, locally led, and needs-driven response in support of the Myanmar Red Cross Society (MRCS). The strategy is designed as a 24-month operation, recognizing the scale and complexity of needs and their overlap with climatic, seasonal, hostilities-related, and economic vulnerabilities. This operation aims to assist 100,000 people (20,000 households) through the collective efforts of the IFRC Secretariat and Red Cross and Red Crescent National Societies.

The strategy prioritizes life-saving assistance in the immediate phase—focusing on shelter, health, WASH, protection, and multipurpose cash assistance (MPCA)—while then swiftly moving to attend community needs for early recovery, shelter, livelihoods, resilience-building, and National Society Development (NSD). It promotes localization, inclusion, climate-smart, and conflict-sensitive programming that ensures MRCS is supported strategically, operationally and technically, including identified rapid response profiles with technical expertise and investment in enhancing MRCS's disaster management.

MRCS, with strategic support from IFRC conducted a Planning Workshop together with IFRC, Red Cross and Red Crescent National Societies and ICRC on 24-25 April 2025 to discuss and plan the immediate response for the next four months. The workshop focused on MRCS priority actions for each sector and the cross-cutting elements

(including National Society Development), resource mobilization needs, procurement plan, workforce planning and complementarity with the ICRC.

MRCS will prioritize the scale-up of integrated sectoral interventions—including health, WASH, shelter, multipurpose cash, and MHPSS across the most affected townships in Sagaing, Mandalay, and Naypyidaw, addressing urgent needs while initiating early recovery. To meet expanding operational demands, MRCS plans to mobilize and deploy sectoral teams comprising over 500 Red Cross Volunteers and newly assigned technical officers in MHPSS, health, First Aid, logistics, and PMER, with local rapid response personnel drawn from branches nationwide. IFRC is also expanding its operational reach alongside the MRCS to ensure continued strategic and technical alignment.

MRCS is gradually transitioning from immediate relief to early recovery actions through the delivery of coordinated, community-driven services across core sectors, expanded local workforce capacity and reliable supply chain, to reach at least 100,000 people affected by the earthquake.

## C. OPERATIONAL REPORT

### STRATEGIC SECTORS OF INTERVENTION<sup>2</sup>

The data on the number of people reached in all sectors provides an overview of the people reached by MRCS. While specific IFRC Secretariat reach data may not be available for every sector, any available information on IFRC Secretariat reach will be provided where applicable.

<div> <b>Shelter, Housing and Settlements</b></div>				
<b>Objective:</b>		Communities in affected areas and displaced individuals restore and strengthen their safety, well-being, and longer-term recovery through shelter and settlement solutions.		
<b>Key indicators:</b>	<b>Indicator</b>	<b>IFRC Fed-Wide Target</b>	<b>IFRC Secretariat Actual</b>	<b>Fed-Wide Actual</b>
	Number of people reached with shelter support. (accommodation and settlements, guidance and awareness)	100,000		TBC
	Number of people (and households) provided with household items that support the restoration and maintenance of health, dignity, and safety, and the completion of daily domestic activities in and around the home.	100,000		37,715
	Number of people who attended training/awareness raising sessions on transitional safe shelter.	5,000		N/A

<sup>2</sup> People reached data is still being synchronized and consolidated. Sectoral people reached figures will be standardized and shared in the coming updates.

## Progress Toward Objectives

One month into the operation, MRCS with the support of the IFRC Network has made gradual but foundational progress toward the shelter objective. The current phase focuses on putting in place the technical, logistical, and community systems necessary for a scalable and inclusive shelter response. While the number of people reached within one month remains modest in relation to the overall two-year goal, MRCS is prioritizing quality, coordination, and the groundwork needed for scale-up.

As of 3 May, MRCS reached 37,715 people with emergency shelter-related assistance, including the distribution of 5,379 tarpaulin, 417 shelter toolkits, and 100 family tents; this also includes a total of 21,265 people (5,075 households) receiving MMK 50,000<sup>3</sup> each (approx. CHF 14) in complementary cash assistance to support immediate household needs. To further

support the dignity, comfort, and safety of affected communities, essential household items such as blankets, kitchen sets, and mosquito nets were also distributed alongside the emergency shelter assistance. These items were delivered across priority areas in Mandalay, Sagaing, Naypyidaw, Southern Shan and Bago. Distributions have been tailored based on local needs and coordinated with WASH and relief teams.

In the early phase of the response, MRCS and **Red Cross Society of China** played an important role in setting up displacement sites in Mandalay and Naypyidaw, delivering four batches of relief items (242.5 metric tonnes) and constructing over 143 tents including at Maha Aungmye football field and Bahtoo Stadium in Mandalay Region.

The Shelter/NFI/CCCM Cluster Technical Working Group in the Northwest has set standards for shelter and household items packages<sup>4</sup>:

- Core Household Kit for a five-member household consists of three blankets, three sleeping mats, three mosquito nets, one solar lamp and one kitchen set.
- Emergency Shelter Kit consists of two tarpaulins or nipa palm leaf, tarpaulin roll or bamboo mat, nylon rope, bending wire, small bamboo, big bamboo and local *myaw* (jungle wood) post.

The kit's content might be adapted based on needs assessments and availability of items.

The MRCS family kit provides basic life-saving assistance to crisis-affected households, distributed based on vulnerability criteria identified through field verification processes. The kit contains the following items: two mosquito nets, two blankets, one kitchen set, two solar lamps and two sleeping mats. In addition to this assistance, MRCS also provides a shelter tool kit and family tents to support the establishment of temporary living spaces in formal settlements.



*MRCS supports the distribution and installation of family tents donated by the Red Cross Society of China in Pwaybwe Township, Mandalay on 21 April 2025. (Photo: MRCS)*

<sup>3</sup> As of May 2025, the official minimum wage in Myanmar is MMK 6,800 per day (approx. CHF 2.71 per day) for an eight-hour workday, established in August 2024 (Source: Notification No. 1/2024 issued by the National Committee for Setting the Minimum Wage, Myanmar Ministry of Labour, Immigration, and Population (MoLIP), 9 August 2024)

<sup>4</sup> MRCS is distributing shelter and household items in reference to the standards but subject to the availability of items and actual needs in the field.

MRCS informed the response based on field reviews, which highlighted the high number of destroyed houses, and the urgent need for household items, including solar lamps, mosquito nets, kitchen sets, blankets, and tarpaulins. These items correspond directly with the household items distributed by MRCS to date. Moreover, with nearly half of the 206,977 displaced people living in makeshift shelters and many taking refuge in religious buildings, the focus on privacy partitions, proper ventilation, and gender-sensitive layouts has been prioritized in MRCS's shelter planning.

In addition to distributions, MRCS—supported by IFRC—is providing technical guidance on safe shelter practices through trained volunteers and IEC materials. While Build Back Safer (BBS) messaging is part of the broader approach, it has not yet been fully integrated into distributions and community sessions due to staffing constraints. Implementation is planned as capacity increases. Early recovery interventions, including transitional shelter support and repair assistance for partially damaged homes, are currently being scoped based on available funding and ongoing needs analyses.

Federation-wide and bilateral support has played a key role in enabling the timely dispatch of relief items to the affected people. Contributions from National Societies including the **Bangladesh Red Crescent Society, British Red Cross, Canadian Red Cross, Red Cross Society of China, Danish Red Cross, German Red Cross, Hong Kong Branch of the Red Cross Society of China, Palang Merah Indonesia, Japanese Red Cross Society, Korean National Red Cross Society, Malaysian Red Crescent Society, Pakistan Red Crescent, Singapore Red Cross, Thai Red Cross Society**, and others have supported the provision of tents, tarpaulins, household kits, solar lamps, mosquito nets, hygiene items, and shelter kits.

### Challenges

Many families prefer to remain near their damaged homes and have begun self-recovery efforts without sufficient technical guidance or material support. Overcrowding, poor ventilation, and the lack of privacy in informal shelters continue to elevate protection risks, particularly for women, girls, and persons with disabilities. The absence of documentation on property poses a major barrier to shelter allocation and longer-term planning.

MRCS also currently faces constraints in staffing for shelter and transport capacity, which will be addressed proactively over the coming weeks. Communities are showing strong resilience, yet this must be matched by structured planning and site allocation to avoid long-term risks. Debris clearance is a major concern. Preliminary satellite-based estimates suggest massive debris volumes, approximately 1.7 million tonnes in Mandalay alone. Field reviews are still validating these figures. Shelter implementation in Myanmar faces risks such as limited access to remote or conflict-affected villages, varying levels of community confidence in external technical approaches, and fluctuating material prices. These challenges are addressed through early and inclusive community engagement, the use of locally available materials, and coordination with local stakeholders to ensure culturally appropriate and accepted solutions.

### Next Steps

- Displaced families need temporary shelter assistance, which includes locally sourced building materials and distribution of shelter toolkits to upgrade existing structures for better protection against heat and rain, or to construct transitional shelters and clear debris. Priority will be placed on transitional shelter solutions that improve comfort, structural strength, and privacy. This support will also involve the development of inclusive transitional shelter designs, Bills of Materials (BoMs), structural calculations, Community Engagement and Accountability (CEA), and on-the-job training for the local population to enhance their shelter construction skills.



- Continue the distribution of tarpaulins, tents, and essential household items across priority sites to address the urgent shelter and basic living needs of displaced families exposed to harsh weather and inadequate living conditions.
- Upgrade existing informal shelters with internal partitioning, lighting, drainage, and sanitation access.
- Preposition additional stocks of shelter items before the onset of the monsoon season in Sagaing, Mandalay, Naypyitaw, Southern Shan and Bago.
- Initiate shelter awareness sessions for staff and volunteers (planned second week of May), covering emergency shelter and mid-term recovery.
- Scale up community-driven awareness sessions on the Participatory Approach for Safe Shelter Awareness (PASSA) and Build Back Safer (BBS) as part of the Community Engagement and Accountability (CEA) approach. Improve planning and coordination for displacement sites to avoid long-term consequences of ad hoc shelter arrangements.



## Livelihoods

### Objective:

*Communities in affected areas and displaced individuals recover their way of life and incomes through sustainable livelihoods assistance programmes promoting socioeconomic integration and economic security.*

### Key indicators:

#### Indicator

**IFRC Fed-  
Wide  
Target**

**IFRC  
Secretariat  
Actual**

**Fed-Wide  
Actual**

*Number of people reached with livelihoods support.*

75,000

N/A

*Number of volunteers and staff trained in livelihoods*

100

N/A

### Progress Toward Objectives

During the first five weeks of the response, MRCS has taken initial steps toward restoring livelihoods in earthquake-affected communities. While implementation is still in the preparatory phase, early actions have focused on needs analysis, coordination, and establishing the groundwork for a scalable livelihoods programme aligned with long-term recovery goals.

MRCS field teams, supported by IFRC and its network members, conducted Rapid Needs Assessments (RNA) across Bago, Mandalay, Naypyidaw, Sagaing, and South Shan to evaluate the earthquake's impact on income-generating activities. Findings confirmed widespread disruption of local livelihoods due to the destruction of marketplaces, mobility limitations, and the loss of productive assets.

Food assistance has been facilitated by community networks and local donors, who continue to play a key role in bridging immediate gaps in Sagaing, Mandalay, and Naypyidaw. The MRCS response complements these efforts to help affected households.

Since the onset of the earthquake on 28 March, MRCS has distributed food assistance to 16,897 people across the affected regions, primarily in Mandalay, Sagaing and Naypyitaw. Food distributions such as rice packages, canned food, cooking oil, drinks, etc. were integrated with other sectoral assistance such as shelter items, hygiene kits, and were coordinated through local-level planning meetings to ensure efficient delivery to the most affected communities. This includes complementary cash assistance as well as relief packages alongside food and emergency shelter assistance.

While complementary cash assistance is delivered under the shelter components, MRCS is currently planning standalone livelihoods programming. This includes support for the purchase of livelihood inputs (such as seed, fertilizer, livestock, poultry feeds etc.), asset replacement, vocational training, and cash-for-work (C4W) assistance. Coordination with national and sub-national stakeholders is ongoing to avoid duplication and harmonize support modalities.



*MRCS providing food items such as rice to earthquake-affected households in Mandalay, on 1 May 2025. (Photo: MRCS)*

### Challenges

Livelihoods recovery is likely to be complex, particularly in contexts of prolonged displacement, disrupted market functionality and diverse nature of livelihood activities. Affected individuals continue to face barriers including damaged infrastructure, limited access to income sources, and constrained financial services. Some communities are also reporting increased food insecurity risks as initial relief mechanisms taper off. Site planning and durable shelter options remain prerequisites for more advanced livelihoods recovery efforts. Furthermore, according to FAO, the planting of the 2025 main season paddy and maize crops typically occurs between May and August. However, many farmers have lost essential agricultural inputs, including seeds, fertilizers, and machinery, as a result of the earthquake. This loss could lead to a reduction in the area planted and negatively affect crop development, compounding crop losses as a result of the flooding caused by Typhoon Yagi in late 2024.

### Next Steps

- Coordinate with relevant stakeholders to avoid overlap and align assistance values.
- Coordinate with relevant partners on market reviews and align assistance.
- Finalize the identification and selection process for livelihoods support.
- Activate local markets and community grants for infrastructure recovery.
- Design and launch early recovery interventions, including cash-for-work (C4W) activities in priority communities.
- Explore delivery mechanism and training for long-term recovery.

MRCS will continue to build its internal capacity and coordinate with the IFRC network, ICRC and external partners to ensure livelihoods support aligns with broader recovery efforts and the economic realities of affected communities.



## Multi-purpose Cash

<b>Objective:</b> <i>Displaced individuals in vulnerable situations have their needs addressed through the use of cash.</i>				
<b>Key indicators:</b>	<b>Indicator</b>	<b>IFRC Fed-Wide Target</b>	<b>IFRC Secretariat Actual</b>	<b>Fed-Wide Actual</b>
	<i>Number of people reached - Cash Transfer Programming<sup>5</sup></i>	75,000		21,265

### Progress Toward Objectives

MRCS, supported by IFRC and the broader IFRC Network, has launched the initial phase of Complementary Cash Assistance (CCA) delivered along Emergency Shelter Assistance. Between 28 March and 3 May, a total of 21,265 people (5,075 households) received MMK 50,000 each (approx. CHF 14) in complementary cash assistance to support immediate household needs. This early cash support, integrated with distributions of household items and shelter kits in Mandalay, Sagaing and Naypyidaw, is considered a critical first step towards scale-up.



*MRCS providing complimentary cash assistance to 248 earthquake-affected households in Nyaungshwe Township, Southern Shan State on 3 May 2025. (Photo: MRCS)*

Following rapid needs assessments completed in April across Sagaing, Mandalay, Naypyidaw, Southern Shan and Bago, MRCS is preparing for three rounds of Multi-Purpose Cash Assistance (MPCA) delivery scheduled from May 2025 onwards. These will cover a three-month period to support the most vulnerable, particularly displaced families living in collective sites and host communities. The transfer value of MMK 400,000 (CHF 114) per household per month includes MMK 360,000 (CHF 103) for basic needs and MMK 40,000 (CHF 11) to cover transportation costs to and from distribution sites, in line with national Cash and Markets Working Group recommendations.

MPCA will be delivered in three phases:

- MPCA 1 (May-June): Immediate rollout in identified wards.
- MPCA 2 (June-July): Refinement based on feedback and synchronized delivery mechanism.
- MPCA 3 (July onward): Top-ups or tailored assistance for at-risk and protection-sensitive households.

Planning is guided by consultations with communities, needs analyses, and coordination through national and regional Cash and Markets Working Groups.

### Challenges

- Incomplete financial infrastructure in remote areas limits digital payment delivery.

<sup>5</sup> The indicator has been revised to include all cash-related activities across sectors.

- Low digital literacy and access to phones among some vulnerable groups may affect equitable access.
- Displacement and informal shelter environments complicate community selection process.
- Community expectations must be carefully managed as cash demand remains high amid market inflation.

### Next Steps

- Finalize identified community lists for MPCA through registration, review, and community confirmation processes.
- Feasibility review of cash delivery mechanisms due to differences in urban vs peri urban areas, accessibility and availability.
- Provide Cash and Voucher assistance training to MRCS staff and volunteers if needed.
- Launch MPCA distribution in May in priority wards of Sagaing, Mandalay and Naypyidaw, ensuring GBV risk mitigation and community feedback mechanisms are fully in place.
- Monitor the effectiveness and impact of distribution through Post-Distribution Monitoring (PDM), community dialogues and exit surveys.
- Expand and improve MPCA coverage by adopting digital and other appropriate delivery mechanisms as operational capacity increases.
- Maintain coordination through the Cash Working Group to harmonize transfer values and avoid duplication of recipients.
- The MPCA approach ensures that affected households have the dignity and flexibility to meet their own priorities during this protracted crisis, while supporting market recovery and local economic resilience.



## Health & Care

(Mental Health and psychosocial support / Community Health / Medical Services)

### Objective:

*Communities in affected areas and displaced individuals in vulnerable situations are provided with high-quality health and care services, including MHPSS.*

Key indicators:	Indicator	IFRC Fed-Wide Target	IFRC Secretariat Actual	Fed-Wide Actual
	<i>Number of people reached by National Societies with contextually appropriate health services.</i>	100,000		5,972
	<i>Number of people reached with mental health and psychosocial support services.</i>	10,000		538
	<i>Number of people reached by community health services (CBHFA).</i>	50,000		-

### Progress Toward Objectives

From 28 March to 3 May, MRCS with support from IFRC and its network members provided essential health and MHPSS support across Sagaing, Mandalay, Naypyidaw, Southern Shan and Bago. These interventions have focused on mobile medical care, psychological first aid, community health outreach, ambulance referrals, and epidemic prevention. Services are reaching people living in displacement camps, informal shelters, and remote communities.



Rapid needs assessment conducted in affected areas highlighted significant health needs. Access to health services remain limited in many peri-urban and rural locations, where emergency medical teams may not be present. Overcrowding, poor sanitation, and extreme heat in displacement sites have increased risks of dehydration, diarrheal diseases, respiratory infections, and vector-borne diseases. The findings from need analysis also identified disruptions in access to medication for chronic illnesses and limited maternal and child health support, particularly for women and girls.

In response, MRCS has reached over 4,735 individuals with basic health services through mobile health clinics operating in Mandalay and Sagaing, providing treatment for trauma injuries, respiratory infections, chronic illnesses, maternal care, and dehydration. The mobile health clinic also includes the provision of health services through home visits and ambulance referral services to health facilities. MRCS primarily delivered these services through its mobile health clinics; two in Mandalay and one in Sagaing. The **Norwegian Red Cross** is supporting the three clinics in Mandalay and Sagaing, and the **Japanese Red Cross Society (JRCS)** has deployed a Health Emergency Response Unit (ERU) team leader to support coordination and technical integration with MRCS.

Following a technical review by the ERU health team leader, the modality of the ERU deployment was confirmed. Since 28 April, the JRCS four-member Health Team has been working alongside MRCS teams to technically support the coordination and supply chain management of the emergency health services, medical equipment and supplies in Sagaing and more broadly. Field teams have observed some non-communicable diseases (NCD) cases (such as hypertension and diabetes) and a decline in disaster-related trauma. However, significant gaps in access to primary healthcare remain, particularly in underserved and rural areas.



MRCS volunteers conducting CFS activities and engaging a total of 26 children affected by the earthquake in various activities in Ywar Htaung Mosque in Sagaing township (Photo: MRCS)

***“Receiving the kit helped my child be a kid again,” said a mother. After everything they had been through, the kit gave her child something familiar and comforting to hold onto — a way to play, draw, and smile again. It reminded them both that even in the middle of crisis, children still need space to be children.”** – Min Lan Village, Payw Bwe Township, Mandalay*

Mental Health and Psychosocial Support (MHPSS) services are expanding and have reached 499 people to date. These include basic psychosocial support (awareness sessions and individual/group support), social and recreational activities conducted in mobile child-friendly spaces (CFS), and the distribution of psychosocial kits for children. The MHPSS services are integrated with health and distribution operations, providing more comprehensive support to affected communities and reinforcing existing social support systems.

In Sagaing, MRCS provided MHPSS services to 499 people, including 60 individuals (54 female and 6 male) through basic psychosocial support and 184 children through structured CFS activities, helping to reduce stress, restore a sense of normalcy, and support emotional recovery through play and connection. In addition, 255 psychosocial kits were distributed to children under 10 years of age. In Southern Shan, 39 community members (35 female, 4 male) participated in MHPSS awareness sessions, improving understanding of stress reactions and available support. In Mandalay, 26 Red Cross youth and volunteers (16 male, 10 female) received MHPSS orientation, strengthening their

capacity to provide safe, supportive engagement with affected populations. These activities have contributed to improved emotional well-being, increased community engagement, and strengthened local coping mechanisms.

Community members expressed feeling more supported and connected, particularly children who benefit from playing with others. The **Danish Red Cross** is supporting the further expansion of MRCS's CFS and recreational activities by providing materials for children and adults, allowing more communities to access supportive, inclusive spaces for healing and recovery.

Early in the operation, the **Red Cross Society of China** deployed 37 search and rescue and medical personnel, providing first aid to over 80 individuals, conducting environmental disinfection, and assisting in respectful handling of deceased individuals. RCSC also trained 271 MRCS volunteers in logistics, water treatment, sanitation, epidemic prevention, and hygiene promotion.

Community health activities, including health awareness sessions on communicable disease prevention, handwashing, and menstrual hygiene, were conducted for those who visited the mobile health clinics in Sagaing. Between 28 March and 3 May, MRCS reached a total of 645 people (165 men and 458 women) with health awareness sessions. In Southern Shan, community engagement activities were integrated into cash distribution activities. A total of 86 individuals (22 males and 64 females) participated in awareness sessions on First Aid and MHPSS. The sessions included practical demonstrations such as CPR, and First Aid pamphlets were distributed to reinforce learning.



*MRCS volunteer sharing knowledge and methods on providing first aid, psychosocial support, and childcare with the earthquake-affected communities in Nyaungshwe Township, Southern Shan State on 3 May 2025. (Source: MRCS)*

Youth volunteers supported outreach in religious sites, temporary shelters, and informal sites. MRCS ambulances remain active in supporting safe patient referrals, particularly for maternal care and elderly populations.

Partner National Societies supporting MRCS in health and MHPSS response include **Red Cross Society of China, Danish Red Cross, Finnish Red Cross, Japanese Red Cross Society, Norwegian Red Cross**, and the **IFRC**.

### Challenges

- Overcrowding, poor ventilation, and lack of water and sanitation in displacement sites elevate health and hygiene risks.
- Emergency medical services and other health actors are concentrated in urban areas, leaving peri-urban and rural communities underserved.
- MHPSS needs exceed current capacity. Remote locations remain difficult to reach due to logistics and capacity.
- Health awareness levels are low in newly displaced populations, requiring continued outreach.

### Next Steps

- Continue operating mobile health clinics in Mandalay and Sagaing with planned scale-up in new sites.
- Sustain and expand MHPSS services, including Child-Friendly Spaces and basic psychosocial support, including capacity building plan to support MHPSS local response.
- Support Caring for staff and volunteers' activities for deployed team.
- Monitor health risks such as water-borne diseases, Acute Watery Diarrhea (AWD), heatstroke, and other seasonal threats.
- Continue rolling out community health awareness campaigns.

- Strengthen coordination with local health authorities and referrals to service providers.

The integrated health and care response aims to reduce morbidity and restore wellbeing in affected communities, with a continued focus on accessibility, dignity, and holistic recovery.



## Water, Sanitation and Hygiene

### Objective:

*Comprehensive WASH support is provided to people in vulnerable situations, resulting in an immediate reduction in the risk of water-related diseases and improvement in dignity for the identified population.*

Key indicators:	Indicator	IFRC Fed-Wide Target	IFRC Secretariat Actual	Fed-Wide Actual
	<i>Number of people reached by the National Society with contextually appropriate water, sanitation, and hygiene services.</i>	100,000		100,000
	<i>Total volume of water distributed (litres)</i>	-		723,000 <sup>6</sup>
	<i>Number of sanitation facilities constructed or rehabilitated.</i>	10,000		42
	<i>Number of people reached through hygiene promotion / awareness</i>	50,000		2,611

### Progress Toward Objectives

Since the onset of the earthquake on 28 March, the Myanmar Red Cross Society (MRCS), supported by the IFRC and Partner National Societies, has delivered essential WASH services to over 100,000 people across Mandalay, Sagaing, and Naypyidaw. These services include the distribution of drinking water, supporting trucking of raw/domestic water, emergency sanitation, hygiene promotion, and installation of basic WASH infrastructure in displacement camps and high-risk communities.

Initial field findings and community feedback highlighted acute needs for clean drinking water, safe sanitation, and hygiene materials particularly in informal and overcrowded displacement sites. Women and girls expressed urgent concerns about access to private bathing spaces, segregated latrines and menstrual hygiene support, while early rains and extreme heat raised the risk of waterborne diseases.



*MRCS staff and volunteers are providing food, cash, relief assistance, clean water, medical support, and psychosocial support in Sagaing, May 2025. (Photo: MRCS)*

<sup>6</sup> 723,000 litres of safe drinking distributed. In addition, MRCS supported the distribution of 608,000 litres of domestic water.

In response, MRCS established five operational drinking water production camps, three in Mandalay (including in Amarapura township), one in Sagaing, and one in Naypyidaw providing over 723,000 liters of drinking water to date. Daily water distributions have been complemented by *E. coli* testing and community messaging to ensure safe consumption. Latrine construction is still ongoing.

Support from Partner National Societies has been valuable in enabling this scale of response. The Initial Response Fund from the **Swedish Red Cross** was utilized during the early phase of the WASH response to cover the costs of deploying three MRCS WASH teams to Sagaing, Mandalay, and Naypyidaw for emergency water production and distribution. The **Red Cross Society of China** donated five water purification units that are operational in Mandalay, Amarapura, Sagaing and Naypyidaw and 100 emergency toilet kits, with installations completed at Sagaing (7), Mandalay (30), and Naypyidaw (4). The **Singapore Red Cross** provided 90 hand pumps with ultrafiltration membrane, to enhance community-level access to clean water, particularly in areas with limited infrastructure. Technical assistance from the **Swedish Red Cross WASH delegate** and the **Austrian Red Cross WASH ERU Team Leader** helped strengthen MRCS field analysis and hygiene promotion strategies during field visits between 22–29 April. IFRC WASH Rapid Response personnel continue to provide surge capacity, planning support, and inter-agency coordination.

To improve sanitation access, MRCS constructed 12 communal latrines (7 in Sagaing, 1 in Mandalay, and 4 in Naypyidaw) in addition to 30 emergency latrines installed in Mandalay Stadium donated by the RCSC, and distributed jerry cans to 1,570 households in Amarapura and 24 units of buckets to two camps in Naypyidaw. Hygiene promotion sessions have reached 2,611 people to date, focusing on menstrual hygiene, safe water handling, and handwashing practices and conducted alongside water distributions and integrated with PGI messages.

### Challenges

- Limited access to rural and hilly areas in Southern Shan and parts of Sagaing.
- Gaps in latrine coverage and as well as dedicated and private bathing space/facilities.
- Limited human resources due to scale of needs.

### Next Steps

- Clarity in identifying areas for recovery to prepare for detailed technical analysis.
- Recruitment of MRCS and IFRC technical staff.
- Continue daily water trucking/distribution and safe water storage support across priority displacement areas.
- Continue installation of latrines.
- Scale up hygiene promotion campaigns and WASH refresher sessions/training for volunteers.
- Strengthen integration with protection and gender initiatives to ensure safety, privacy, and dignity in WASH facilities.



## Protection, Gender and Inclusion

### Objective:

*Communities in crisis-affected areas and displaced individual in vulnerable situations are safe from harm including violence, discrimination, and exclusion, and their needs and rights are met.*



Key indicators:	Indicator	IFRC Fed-Wide Target	IFRC Secretariat Actual	Fed-Wide Actual
	Number of people reached by protection, gender, and inclusion programming.	75,000		4,268

### Progress Toward Objectives

MRCS has embedded PGI considerations across sectors, including shelter design, WASH access, health services, and mental health and psychosocial support (MHPSS). PGI focal points support inclusive, needs-based service delivery, with a focus on safety, dignity, and equitable access.

Since early April, MRCS has applied PGI principles in the distribution of relief items, prioritizing female-headed households, persons with disabilities, and older people. Over 4,268 people have been reached with gender appropriate item such as dignity kits for female and individual kit for male, delivery kit for pregnant mother, infant kit for children below 2 years old and psychosocial kit for children, as part of integrated distributions.

In parallel, MRCS has prioritized safe, private, and accessible WASH facilities. MRCS ensured to build gender-segregated communal latrines in camps as well as at its Field Coordination Office. Privacy concerns particularly among women and girls have led to the installation of partitioned bathing spaces and the distribution of menstrual hygiene materials in Mandalay, Sagaing, and Naypyidaw.

Feedback from field visits conducted in late April confirmed a growing demand for safe bathing and sanitation spaces in densely populated camps. MRCS PGI teams are coordinating closely with Shelter and WASH sectors to integrate these needs into site upgrades and transitional shelter planning.

MRCS has observed the experiences of different groups including little involvement by women in layout and organization of temporary shelters. MRCS MHPSS team conducted a situation analysis in Naypyidaw and in Sagaing to better understand needs and gaps. These insights have shaped service delivery, including the rollout of Child-Friendly Spaces (CFS) in displacement sites. Plans are under way to replicate CFS in additional locations.

On 11 April, MRCS with support from **IFRC** and the **Finnish Red Cross** partnered with a civil society organization supporting parents of children with disabilities. The organization had identified 59 children affected by the earthquake (2 in Sagaing and 57 in Mandalay). MRCS responded with food and household items, including mosquito nets, solar lamps, and dry rations, tailored to these families' needs.

The IFRC regional PGI team continues to provide remote technical guidance, in coordination with Finnish Red Cross, to ensure that sex-, age- and disability-disaggregated data (SADDD) is collected and analyzed across all sectors. These data are being used to inform tailored service planning and ensure support inclusion across all groups.



*Considering preserving community's dignity and protection, MRCS constructed a communal gender-segregated latrines for affected community in Sagaing, May 2025. (Photo: MRCS)*

## Highlights

- Recruitment has commenced for MRCS PGI Senior Officer and for IFRC Senior PGI and Safeguarding Officer.
- Draft GBV referral pathways sourced.
- Observational field visit to Sagaing and Mandalay to identify practical steps for integrating PGI into Shelter, WASH, Health Cash.
- PGI analysis of operating environment and sector issues completed.

## Challenges

- Limited capacity of GBV referral pathway/services to respond.
- Limitations on referral pathways (for example, health, child protection).
- Limited sex, age and disability disaggregated data collected and analyzed.

## Next Steps

- Develop joint plan inclusive of CEA, based on analysis from field visits.
- Collate information on safe and effective support and referrals, to equip and sensitize all staff and volunteers.
- PSEA messages and briefings for all staff and volunteers developed and available for sector training, emphasizing the prevention of sexual exploitation, abuse, and child safeguarding – highlighting that aid is free and misconduct prohibited
- Advocate for the short-term response plan to be informed by SADD and access / analyze existing data.



## Community Engagement and Accountability

### Objective:

*The diverse needs, priorities and preferences of the affected communities guide the response through a people-centered approach and meaningful community participation.*

### Key indicators:

#### Indicator

*Number of staff, volunteers, and leadership trained on community engagement and accountability.*

#### IFRC Fed-Wide Target

300

#### IFRC Secretariat Actual

#### Fed-Wide Actual

Ongoing

## Progress Toward Objectives

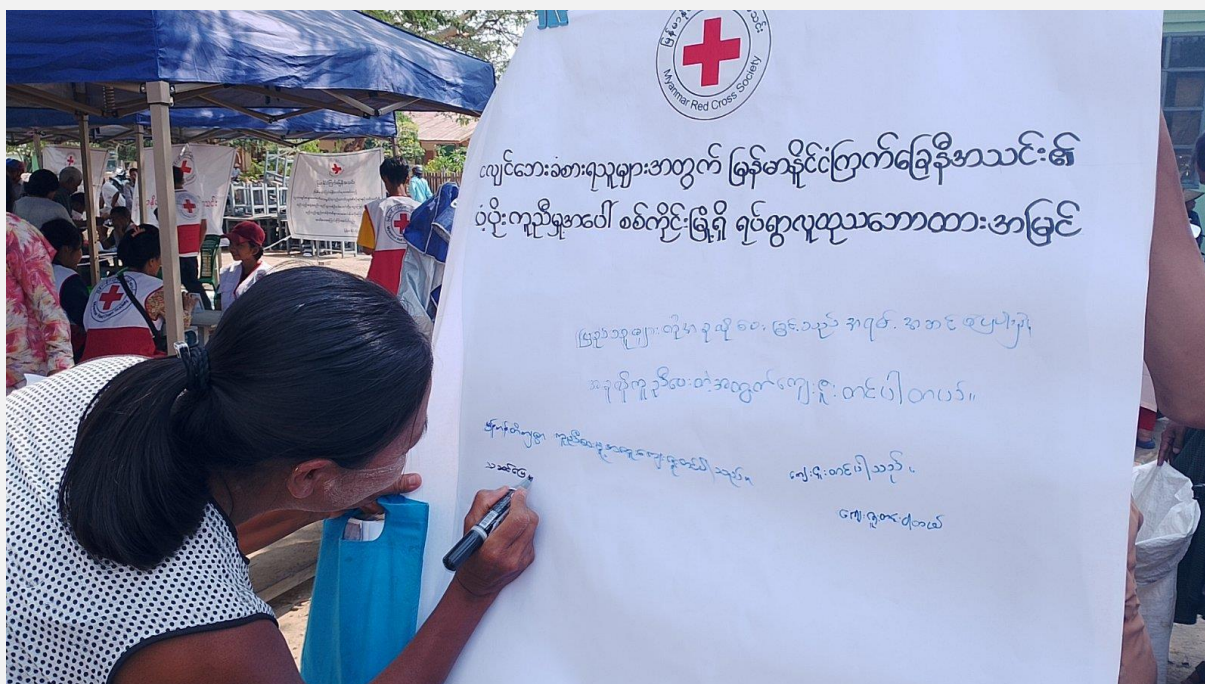
From the onset of the response on 28 March through 3 May, the MRCS, with support from the IFRC and IFRC Network, has placed community engagement at the center of its operational approach. CEA activities have been embedded into distributions, health outreach, MHPSS support, and WASH promotion across Mandalay, Sagaing, Naypyidaw, Southern Shan and Bago. For example, the MHPSS team has conducted focus group discussions and key informant interviews with the community to assess their needs and involve them in further refining MHPSS activities to suit their needs.

To ensure meaningful participation, MRCS has collected feedback through randomized exit interviews during distribution, household visits, and informal conversations during field activities. Community feedback and

information desks were established at key distribution points particularly in Sagaing to provide real-time clarification on assistance and gather input on service gaps.

Importantly, MRCS established a nation-wide hotline to function as a dedicated community feedback mechanism since the beginning of the operation, allowing affected individuals to raise concerns, request information, and share suggestions confidentially. This represents a key step in formalizing a multi-channel feedback system. In addition, MRCS township teams have begun analyzing emerging feedback trends to support adaptive decision-making.

Volunteer teams shared consistent messaging during distributions and health sessions to clarify entitlements, promote hygiene, and raise awareness about mobile services. Caregivers participating in Child-Friendly Space activities in Sagaing received tailored information on psychosocial well-being and community support.



Recipient communities provide feedback via a Community Feedback board and express gratitude for the volunteers' efforts in Sagaing Region on 29 April 2025. (Photo: MRCS)

Across Mandalay and Naypyidaw, communities requested clearer information on registration for assistance and future support, particularly regarding shelter materials, health access and frequency, and cash assistance. These insights were channeled to relevant technical teams for action.

At the regional level, the CEA Regional Coordinator has been participating in the RCCE Inter-Agency TWG coordinated by WHO, which is developing a six-month plan focused on providing RCCE support to the response in Myanmar, with an emphasis on health and water-related issues.

The MRCS and IFRC CEA teams in Myanmar and the IFRC Regional CEA Coordinator held an initial meeting to define a detailed action plan aimed at systematizing the feedback process and supporting CEA mainstreaming across the entire operation, as well as tailored CEA mechanisms, such as adaptation to children.

The team is being supplemented by an IFRC Surge CEA field senior officer.

## Challenges

- Absence of a centralized, digitized system to aggregate and analyze feedback across branches.
- Connectivity issues in some displacement areas limit access to timely information.
- Key population groups still face barriers in providing feedback and receiving updates.

## Next Steps

- Full implementation plan to be developed.
- Scale up promotion of the MRCS feedback hotline in displacement sites and rural areas.
- Finalize deployment of CEA focal staff and roll out minimum CEA packages for field teams.
- Systematize feedback collection, analysis, and referral processes across sectors.
- Systematize (digitalized) feedback documentation / reporting.
- Expand outreach in remote areas such as Southern Shan and Sagaing with tailored tools for inclusion.



## Migration and Displacement

### Objective:

*People on the move, regardless of their background or status, have access to lifesaving assistance and protection they need.*

### Key indicators:

#### Indicator

**IFRC Fed-  
Wide  
Target**

**IFRC  
Secretariat  
Actual**

**Fed-Wide  
Actual**

*Number of migrants and displaced persons reached with services for assistance and protection*

50,000

N/A

*Data collection, research, analysis, or other information management initiatives to better assist and protect people on the move.*

Yes/No

N/A

## Progress Towards Objectives

Since the earthquake struck, the MRCS, supported by the IFRC Network, has prioritized support to displaced populations across Mandalay, Sagaing, Naypyidaw, Southern Shan and Bago. As of 22 April, official figures recorded more than 206,977 people displaced due to the earthquake. Secondary displacement continues to be reported due to extensive damage to homes and infrastructure, particularly in peri-urban and rural areas.

Findings from Rapid Needs Analysis (RNA) and a Multi-sector Inter-Agency Rapid Analysis (MIRA) indicate that temporary shelter capacity is limited, and a significant portion of displacement is due to the destruction or damage of homes. The lack of safe and private shelter compounds exacerbates protection risks, particularly for women and girls. Safety and security concerns have also contributed to secondary displacement in certain areas affected by the earthquake.

MRCS has been providing critical services for displaced people at displacement sites, as well as for host communities, including food, clean water, temporary shelter, health services, and psychosocial support. In Sagaing, field analysis found that many displaced households had been living in makeshift shelters for over a month, underscoring the need for sustained WASH, food, and protection support. Meanwhile, in Mandalay, many



people continue to shelter in damaged religious sites and informal encampments, with limited access to essential services and rising risk of further displacement as the monsoon season approaches.

In response, MRCS has implemented tailored protection and inclusion activities such as child-friendly spaces and psychosocial support in displacement camps, especially for vulnerable groups including women, children, and older persons.

### Challenges

- Ongoing displacement has stretched the MRCS and community resources.
- Limited availability of safe, durable shelter options raises risks during the upcoming monsoon season.
- Displaced people sheltering in schools may need to relocate as the next academic cycle is set to resume in late May or early June, necessitating alternative accommodation and shelter materials.
- Coordination with stakeholders is essential to avoid duplication and ensure equitable service coverage.

### Next Steps

- Further analysis of needs based on displacement, to inform selection process and referral mechanisms.
- Ensure MRCS shelter, WASH, and health, PGI and CEA activities are tailored to the needs of displaced populations and informed by displacement trends and analysis
- Strengthen inter-agency coordination related to internal and multiple displacement to improve identification of risks.



## Risk Reduction, climate adaptation and Recovery

### Objective:

*The immediate needs of the people affected are met, their vulnerability to future disaster and Climate Change impacts are reduced, and the resilience and preparedness of affected communities are strengthened.*

### Key indicators:

#### Indicator

**IFRC Fed-  
Wide Target**

**IFRC  
Secretariat  
Actual**

**Fed-Wide  
Actual**

*Number of people reached with disaster risk reduction*

75,000

N/a

*Number of people reached by environmental awareness and education activities in schools.*

75,000

N/a

*No update during the reporting period, this is planned to occur at a later stage of the operation.*



## Environmental Sustainability

<b>Objective:</b>	<i>The environmental sustainability of the operation is ensured, and no harm is caused to the local environment during the intervention.</i>			
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<b>Key indicators:</b>	<b>Indicator</b>	<b>IFRC Fed-Wide Target</b>	<b>IFRC Secretariat Actual</b>	<b>Fed-Wide Actual</b>
	<i>Number of households provided with a sustainable household energy solution.</i>	15,000		546

### Progress Toward Objectives

MRCS has begun incorporating environmentally conscious practices in response, with a focus on promoting renewable household energy sources. As of early May, 546 units of solar lamps have been integrated into core relief packages distributed to affected households in priority areas such as Mandalay, Sagaing, and Naypyidaw. These efforts improve safety and access to light, while reducing reliance on firewood or fossil fuels, especially in displacement sites with limited infrastructure.

Environmental sustainability has also been prioritized in procurement processes, with Movement partners coordinating to provide solar-powered lighting solutions as part of shelter and household items. MRCS is working to finalize the distribution of solar lamps to an estimated 15,000 households, with updated tracking expected in the coming weeks.

While field-level awareness activities on waste reduction or natural resource use have not yet been reported, environmental considerations have been embedded in the operational design. Packaging standards, selection of materials, and transport logistics are being reviewed to reduce environmental impact, in line with the IFRC's Green Response approach.

### Challenges

- Environmental activities such as household awareness sessions and green procurement are still in the early planning or implementation phase.
- Limited local access to eco-friendly materials at scale and high transport costs poses challenges for wider adoption of sustainable items in shelter and WASH responses.

### Next Steps

- Finalize supply chain and verification of solar lamp distributions to ensure 15,000 households receive those items.
- Coordinate with Movement partners to scale up sustainable procurement practices.
- Integrate environmental monitoring indicators into post-distribution tools and upcoming shelter/WASH field reviews.
- Plan tailored community awareness activities on sustainable energy use and environmental protection as part of early recovery.
- To consider environmental factors across sectors where possible, i.e. checking the quality of basic products in local markets, as well as the availability and costs of household energy sources.



## Education

### Objective:

*To be completed*

Key indicators:	Indicator	IFRC Fed-Wide Target	IFRC Secretariat Actual	Fed-Wide Actual
	<i>Number of people with access to (temporary) safe spaces established or operated by the National Society/IFRC network for the purpose of learning, psychosocial support, or recreation.</i>	TBC	-	184
	<i>Number of schools or other educational spaces constructed or established, rehabilitated or improved that comply with safe site selection, design, and construction regulations (when in place) or international standards.</i>	TBC	-	
	<i>Number of people reached by the National Society's educational programmes and/or the number of people whose access to education is facilitated through the National Society's programming</i>	30,000	-	

### Progress Toward Objectives

In Sagaing, during the reporting period, MRCS provided MHPSS services to 499 people, including 184 children through structured child-friendly spaces (CFS) activities in four CFS facilities set up at displacement sites. This helps to reduce stress, restore a sense of normalcy, and support emotional recovery through play and connection for the children. In addition, 255 psychosocial kits were distributed to children under 10 years of age.

The **Danish Red Cross** is supporting the further expansion of MRCS's CFS and recreational activities by providing technical assistance and materials for children and adults, allowing more communities to access supportive, inclusive spaces for healing and recovery

### Next Steps

- Plans are under way to replicate CFS in additional locations.
- Further information and plans will be outlined in future updates.

## Enabling approaches



## National Society Strengthening

<b>Objective:</b> <i>National Societies respond effectively to the wide spectrum of evolving crises and their auxiliary role in disaster risk management is well-defined and recognized.</i>			
<b>Key indicators:</b>	<b>Indicator</b>	<b>IFRC Secretariat Target</b>	<b>IFRC Secretariat Actual</b>
	<i>The National Society adopted a child safeguarding policy to enforce prevention and support survivors.</i>	Yes/No	
	<i>National Society covers health, accident and death compensation for all of its volunteers.</i>	Yes/No	
	<i>The National Society has a functioning data management system that informs decision-making and supports monitoring and reporting on the impact and evidence of the IFRC network's contributions.</i>	Yes/No	Yes
	<i>The National Society is engaged in structured preparedness and capacity building processes.</i>	Yes/No	Yes
	<i>The National Society has strengthened its integrity and reputational risk mechanism.</i>	Yes/No	Yes
	<i>The National Society reports that it has a system that applies to the entire organization, either its own or shared, for managing the data of volunteers through a digital platform.</i>	Yes/No	Yes

### Progress Towards Objectives

MRCS has taken clear steps to strengthen institutional systems and operational readiness in the aftermath of the earthquake. Working with support from the IFRC and Partner National Societies, MRCS has initiated improvements in data management, risk and integrity systems, and volunteer management:

- MRCS, supported by IFRC PMER and IM teams, conducted a multi-stakeholder planning workshop with Federation partners. This led to the development of a Movement-wide 4-month operational plan, which provided a structured foundation for scaling up capacity across all operational functions. PMER and IM collaboration is ongoing to improve data and reporting quality at the field level and ensure timely, evidence-based reporting.
- MRCS has taken steps to strengthen its integrity and reputational risk management by reinforcing its Code of Conduct, reporting mechanisms, and risk management practices across its operations. These include procedures for reporting concerns, promoting confidentiality and protection for those who raise issues, and integrating risk management into ongoing activities. While these systems continue to evolve, MRCS is working with IFRC and Movement partners to align with wider standards and improve accountability and transparency. IFRC will continue to provide technical support to help MRCS further strengthen these systems as the operation progresses and longer-term institutional development needs are identified.
- MRCS volunteers are covered by IFRC supplementary accident insurance.
- MRCS has been using its existing digital platforms for volunteer engagement, while IFRC is supporting improvements to the volunteer insurance system. Discussions are ongoing to extend digital coverage to deployed volunteers, reinforcing volunteer safety and duty of care.
- MRCS is implementing safeguarding measures, including volunteer briefings, incident reporting protocols and revision of mechanisms. These include active deployment of volunteer insurance and access to psychosocial support (MHPSS) services for frontline volunteers.



- Recognizing volunteer exhaustion as a key operational risk, MRCS has introduced structured volunteer rotation systems to ensure that Red Cross Volunteers are regularly rotated between field activities. This helps manage fatigue, maintain service quality, and sustain volunteer motivation.
- To meet growing operational demands, MRCS and IFRC have rapidly scaled up their human resources, particularly following the Movement-wide planning process. IFRC has initiated local recruitment to support MRCS's expanded response needs, while the workforce plan is under finalization. National and regional surge profiles continue to be deployed in coordination with MRCS.



## Coordination and Partnerships

<b>Objective:</b>	<i>Technical and operational complementarity is enhanced through cooperation among the IFRC membership and with the ICRC.</i>
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Key indicators:	Indicator	IFRC Secretariat Target	IFRC Secretariat Actual
	<i>The National Society uses a Federation-wide approach for planning, monitoring, and reporting the impact of the IFRC network.</i>	Yes/No	Yes
	<i>The National Society has a membership coordination mechanism in place.</i>	Yes/No	Yes

### Progress Toward Objectives

MRCS continues to lead the response in coordination with more than **26 National Red Cross and Red Crescent**, including National Societies from Asia-Pacific, Europe, and the Americas, as well as with IFRC and ICRC. Following ongoing operational coordination exchanges, a formalized Movement operational coordination platform was initiated on 28 April. The MRCS has established this coordination structure to strengthen cohesion and information flow among all Red Cross Red Crescent actors, ensuring harmonized support to MRCS priorities and field operations.

Following two previous Movement partners' calls facilitated alternatively by IFRC and ICRC, IFRC facilitated the third Movement Partners' call on 2 May. It was an opportunity to provide key highlights to the wider membership on, the MRCS earthquake response achievements, priority actions under the Emergency Appeal Operational Strategy, as well as challenges faced on the ground and risk management.

A shared membership leadership architecture is being finalized based on pre-existing shared leadership practice within the IFRC network in Myanmar. The aim is to align efforts and resources to support MRCS response teams to achieve greater collective and shared outcomes, leveraging the respective expertise of partner National Societies and IFRC. It also fosters an environment of mutual trust, where responsibilities are shared, and decision-making is inclusive and transparent. Membership coordination is facilitated through regular coordination meetings and a dedicated Membership Coordinator.

At the technical level, MRCS and IFRC field teams maintain active participation in cluster coordination mechanisms, including Shelter/NFI/CCCM (co-led by IFRC in the Northwest and Southeast), WASH (UNICEF), and Health (WHO).

Additionally, IFRC coordinates with the Logistics Cluster coordination forum to synchronize transport and warehousing strategies. This is particularly important for dispatch planning and market engagement ahead of the rainy season.

Grant management and resource mobilization have remained a priority focus area, with the IFRC Secretariat supporting MRCS in tracking bilateral and multilateral contributions, coordinating donor engagement, and ensuring funding allocations align with the operational budget and response priorities. This includes ongoing coordination with key donors and partners, to align funding flows with operational timelines and procurement requirements.

The Federation-Wide approach is also visible in joint planning and data management. The MRCS 4-month response plan is being consolidated with input from the IFRC Secretariat and PNSs. MRCS' and IFRC's PMER and IM teams are collaborating to align data collection and analysis, facilitating consistent reporting across partners and platforms.

The Secretariat continues to facilitate regular inter-departmental briefings and partner coordination to ensure alignment across the IFRC Network. In-country membership coordination for the earthquake response has been merged with the existing Country Delegation/Partners coordination mechanism. The frequency is set to weekly throughout the month of May.

#### Next Steps

- Sustain Movement partner coordination through the formal platform.
- Finalize Federation-Wide monitoring and planning processes aligned with MRCS's response strategy.
- Continue engagement in sectoral and inter-sectoral clusters at regional and national levels.



## Shelter Cluster Coordination

### Objective:

*The humanitarian shelter and settlements sector are well-coordinated, supporting a comprehensive, high quality, coherent, and consistent shelter and settlements response led by UNHCR with support from the Norwegian Refugee Council and IFRC.*

### Progress Toward Objectives

The Shelter/NFI/CCCM Cluster is led nationally by UNHCR and co-coordinated by the Norwegian Refugee Council (NRC), with four active sub-national coordination hubs. In line with its global co-convenor role in disasters caused by natural hazards, IFRC has deployed Rapid Response personnel to support sub-national Shelter/NFI Cluster coordination in both Northwest (Mandalay and Sagaing) and Southeast (Southern Shan and Bago) Myanmar.

In the northwest (NW) the IFRC Rapid Response Shelter Cluster Coordinator, has focused on coordination efforts on Mandalay and Sagaing. Since the start of the response, five ad-hoc Shelter/NFI/CCCM Cluster meetings and four ad-hoc Shelter/NFI Technical Working Group meetings have been convened, from which four and five respectively, have been co-chaired by NW IFRC Rapid Response Shelter Cluster Coordinator. As co-coordinator in the Northwest, IFRC is also supporting 5W reporting and mapping, contributed to MIRA, and working towards harmonization of tools and process within the sector.

As a result of the NW TWG work, a Guidance on Emergency shelter and household items assistance has been elaborated, including recommended assistance and modalities, technical specifications, selection and prioritization of most- at risk population criteria. As of now, this guidance provides recommendations on contextualized emergency shelter (emergency shelter kits, tents), household items assistance, transitional shelter assistance (inclusive, climate smart and structurally sound shelter designs), environmental guidance and IEC materials; it is a work in progress document that is being updated and revised alongside the response, with a strong focus on Recovery and preparedness for the upcoming monsoon season.

- [Guidance on Emergency Shelter and NFI for Earthquake Response](#)
- [Transitional Shelter Design and Bill of Quantities \(BoQs\) for Earthquake Response](#)
- [Standard Operating Procedures for Cash-Based Interventions for Shelter and NFI](#)

Through co-leading the sub-national Shelter/ NFI/ CCCM clusters, IFRC is actively engaged in the Area Inter cluster Coordination Group (AICCG), strengthening coordination among clusters. Specifically, bilateral coordination meetings with WASH, Protection, Early Recovery, Cash Working Group are ongoing on a regular basis to ensure integrated interventions and mainstreaming of cross-cutting issues.

A Dedicated website for the Earthquake Response is active under the Global Shelter Cluster webpage.

[Myanmar Earthquake Response 2025 | Shelter Cluster](#)



## Secretariat Services

### Objective:

*The IFRC is working as one organization, delivering on its promises to National Societies and volunteers, and leveraging the strength of the communities with which it works as effectively and efficiently as possible.*

### Key indicators:

#### Indicator

IFRC  
Secretariat  
Target

IFRC  
Secretariat  
Actual

*Number of review/evaluation commence for the operation*

3

### Progress Towards Objectives

From 28 March to 3 May, the IFRC Secretariat through the IFRC Country Delegation in Myanmar has provided strategic, operational and technical support across core service functions to the MRCS since the start of the emergency, as had been the case for previous years and scaled up to the magnitude of the earthquake emergency response.

Eleven cargo flights carrying household items have arrived in Myanmar, with transport costs supported by ECHO, Airlink, and KOICA and as well as the in-kind contributions from IFRC Network namely **British Red Cross, Canadian Red Cross, Finnish Red Cross, German Red Cross (bilateral), Japanese Red Cross Society, Hong Kong Branch of Red Society of China, Malaysian Red Crescent (bilateral), Singapore Red Cross, Spanish Red Cross, and Taiwan Branch of Red Society of China**. These flights delivered over 250 metric tonnes of relief items, including tents, hygiene kits, solar lights, tarpaulins, and shelter toolkits. Relief items continue to be dispatched to Sagaing,

Mandalay, Naypyidaw, Southern Shan, and Bago. A Mobile Storage Unit (MSU) was delivered to Sagaing on 3 May and is currently being erected with support from trained MRCS volunteers.

Human resources support has included the deployment of 33 Rapid Response and Emergency Response Unit (ERU) personnel (18 in-country, 10 remote, and 5 based at the Asia Pacific Regional Office) with 5 personnel completing their missions and 1 alert stood down. These deployments cover Situation Analyst, CEA, Clinical Unit/Health, Communications, CVA, Information Management/SIMS, Logistics and Supply Chain, Membership Coordination, Operational and Strategic Leadership, Operational Support Hub (OSH), PMER, PGI/MHPSS, Relief, Resource Mobilization (SPRM), Team Safety and Security, Shelter, WASH, Risk Management and Welcome Services to support implementation. IFRC has also begun local recruitments through the Country Delegation to increase operational continuity and reduce surge dependence.

The IFRC is grateful to its members for the Rapid Response and ERU deployments and contribution of expert personnel, including **Australian Red Cross, Austrian Red Cross, British Red Cross, Canadian Red Cross, Danish Red Cross, Finnish Red Cross, German Red Cross, Hong Kong Branch of the Red Cross Society of China, Japanese Red Cross Society, Norwegian Red Cross, Singapore Red Cross, and Swiss Red Cross.**

In ICT, the IFRC APRO IT Service Desk Officer has provided support to the Myanmar operation. Mobile and internet connectivity have largely stabilized, though monitoring continues in areas with intermittent coverage.

Information Management has been reinforced by SIMS (Surge Information Management Support), with ongoing collaboration between IFRC and MRCS to enhance dashboard visibility and sectoral reporting. Infographics and data snapshots are now issued two times a week, to inform leadership and partners. [IFRC's GO emergency page](#) is live, providing situational updates and key reports.

In addition to several field visits from IFRC leadership and operational staff, IFRC PMER Delegate was deployed to the Mandalay Field Coordination office to support data quality review. Based on findings, observations and recommendations were shared with the MRCS PMER unit. MRCS deployed three team members from the PMER-CEA and IM units to the three Field Coordination Offices to strengthen data collection mechanisms. The IFRC PMER-IM team continues to work closely with sectoral colleagues to improve data quality and presentation.

Security coordination remains active, with a joint MRCS-IFRC framework guiding field deployments. No major incidents have been reported in operational areas. Two volunteer incidents (one fatal due to health issues, one involving a chemical accident) are being addressed through IFRC's volunteer insurance mechanisms and other support mechanisms. Operational risks monitoring is being conducted in Sagaing, Mandalay, Naypyidaw, Southern Shan and Bago.

At the one-month mark following the devastating 7.7 magnitude earthquake that struck, the IFRC took a leading role in its communications in highlighting the ongoing humanitarian crisis and coordinating relief efforts. To raise awareness and garner support, the IFRC engaged with various media outlets. Notably, the IFRC Asia Pacific Regional Director discussed the situation in an [interview](#), emphasizing the critical needs and the organization's response strategies. The IFRC Head of Country Delegation for Myanmar also spoke at the [UN Press Briefing](#). For detailed information on the IFRC's activities and the current humanitarian needs in Myanmar, refer to the one-month mark press release: [Myanmar earthquake one-month on: needs remain massive](#).



## D. FUNDING

As of 3 May 2025, the funding coverage of the Federation-Wide contribution to support the operation is CHF 17,753,707 (18% of the Federation-Wide funding requirement) out of which, IFRC Secretariat total hard and soft pledges (including in kind) for the support of this operation totaled CHF 14,877,146 (19% coverage of the IFRC Secretariat funding requirement). This percentage excludes the bilateral funding of around CHF 2,876,561 (14% of the bilateral funding requirement).

Funding Coverage	Funding Requirement (CHF)	Amount Raised (CHF)	Funding Gap (CHF)	Coverage (%)
IFRC Secretariat	80,000,000	14,877,146	65,122,854	19%
Bilateral (PNS)	20,000,000	2,876,561	17,123,439	14%
Total Federation-wide contribution (Secretariat + bilateral) + in kind	100,000,000	17,753,707	82,246,293	18%

In a country such as Myanmar, with vast humanitarian needs within a complex context, the IFRC's mandate and function in strategic and operational coordination is of prime importance. This includes IFRC's role in Red Cross Red Crescent membership coordination and Movement coordination. Regular resources are invaluable and have considerable impact on the IFRC's ability to strategically coordinate and represent alongside the MRCS, including in mounting a timely response to the earthquake. The Head of Delegation, the Programme Coordinator and the Humanitarian Diplomacy and Partnerships Manager are covered by regular resources.

## Contact information

For further information, specifically related to this operation please contact:

### In the Myanmar Red Cross Society

- **Deputy Secretary General – Programmes and Operations:** Dr Nyo Nyo Wint, [nyonyowint@redcross.org.mm](mailto:nyonyowint@redcross.org.mm)
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### In the IFRC Myanmar Country Delegation

- **Head of Delegation:** Nadia Khoury, [nadia.khoury@ifrc.org](mailto:nadia.khoury@ifrc.org)
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### In the IFRC Asia Pacific Regional Office

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- **Operations Coordinator - Myanmar:** Cassie Stephens, [opsco.myanmar@ifrc.org](mailto:opsco.myanmar@ifrc.org)
- **Communications Manager:** Afrhill Rances, [afrhill.rances@ifrc.org](mailto:afrhill.rances@ifrc.org)

### In the IFRC Geneva

- **Senior Officer Operations Coordination:** Christina Duschl, [christina.duschl@ifrc.org](mailto:christina.duschl@ifrc.org)

### For IFRC Resource Mobilization and Pledges support:

- **IFRC Asia Pacific Regional Office:** [PartnershipsEA.AP@ifrc.org](mailto:PartnershipsEA.AP@ifrc.org)

### For In-Kind donations and Mobilization table support:

- **Manager, Regional Logistics Unit:** Nuraiza Khairuddin, [nuraiza.khairuddin@ifrc.org](mailto:nuraiza.khairuddin@ifrc.org)

### Reference documents



Click here for:

- [Emergency Appeal](#)
- [Operational Strategy](#)
- [Previous Updates](#)

## How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.