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Myanmar
Earthquake Flash Update No.8

Date: 16 April 2025

Situation Overview & Humanitarian Needs

Following the earthquakes that struck Myanmar on 28 March, more than 9 million people (including 2.7 million children) are estimated to be living the worst affected 58 townships across Bago East, Kayin, Magway, Mandalay, Nay Pyi Taw, Shan South, and Sagaing. Of these, 6.3 million people are calculated to be in urgent need of assistance and protection – over two-thirds of which were already in a dire humanitarian situation before the earthquakes as a result of the ongoing conflict, previous climate-related disasters, displacement and economic hardship.[1]

As of 14 April, there were 3,655 confirmed fatalities, 129 missing persons, more than 4,800 injured people, and almost 199,000 displaced people in Mandalay region alone.[2] The final toll is likely much higher, with the initial results of the more than 700 Rapid Needs Assessments that have been undertaken across 40 townships indicating many more injured and reported missing.

Aftershocks with the potential to do further damage continue. The United States Geological Survey (USGS) has recorded at least 36 magnitude 3 or higher aftershocks, which are strong enough to be felt nearby, and at least 4 magnitude 5 or higher aftershocks, which are large enough to do damage. A new earthquake of 5.5 magnitude at a depth of 7.7 km occurred on the morning of 13 April (08.54 local time) in the Mandalay region of central Myanmar. The USGS PAGER estimates that up to 86,000 people were exposed to severe shaking, while 631,000 were exposed to strong and very strong shaking.

Initial inter-agency rapid needs assessments have been completed in 40 townships across seven states and regions, including Nay Pyi Taw Union Territory. More than 857,000 people have been assessed in both urban and rural areas and their urgent needs include cash assistance, emergency shelter, food, safe drinking water and water sources for domestic use, healthcare, and sanitation support. Forty-four per cent of those assessed had yet to receive some form of assistance.[3]

There has been widespread destruction of water systems, including broken boreholes and damaged piped networks, along with the collapse of over 76,000 latrines. There is a growing concern among communities about the risk of infectious diseases due to improperly managed corpses and the lack of access to safe water and sanitation facilities. A cluster of mild to moderate acute watery diarrhoea (AWD) cases has been reported in Sagaing township and urban areas of Mandalay, though no cases of cholera have been confirmed to date.[4]

[1] UN OCHA, Myanmar Earthquake: HNRP Flash Addendum - Issued April 2025
[2] AHA Centre, Situation Update No. 9 - M7.7 Mandalay Earthquake (Monday, 14 April 2025, 2000 HRS)
[3] UN OCHA, Earthquake Response Situation Report No. 2 (As of 12 April 2025)
[4] WHO, Sagaing earthquake in Myanmar: Situation report - 6th Edition, 14 April 2025

With 640 healthcare facilities now registered as damaged and remaining health facilities overwhelmed and reporting critical shortages of medical supplies[5], there is an urgent need to support access to basic health services (including primary healthcare, maternal and neonatal care), safe drinking water and water for hygiene, and adequate sanitation facilities. Many families are still sleeping outside – exposed to extreme heat and off-season rains (which have already started), as well as vector-borne diseases, including dengue and malaria.

The earthquake has sharply intensified risks of violence, exploitation, and abuse, especially for women and girls staying in overcrowded shelters, where privacy and safety are limited, and it is critical that all sectors integrate gender-based violence (GBV) mitigation measures into their responses. The GBV-Child Protection/CP observational assessments consistently reveal critical child protection concerns, including risks of injures to children playing in dangerous environments, as well as possible exposure to violence, separation and exploitation. Inadequate WASH facilities with a lack of privacy in bathing areas and unsafe alternatives like streams, coupled, insufficient lighting, and no gender separated latrines. These increase GBV risks; as well as heightening anxiety, distress, and fear among both children and caregivers, urgently requiring scaled-up Mental Health and Psychosocial Support (MHPSS) interventions. For children separated from their families, case management, family tracing and reunification needs to be immediately undertaken. Many of the hardest-hit townships were already contaminated with landmines, and the earthquake has shifted or exposed explosive remnants, significantly increasing the danger for families forced to flee their homes.

More than 2,600 schools have reportedly been damaged.[6] Provision of safe spaces for children to learn, play and receive essential mental health and psychosocial support is critical.

Funding Overview

UNICEF is currently revising the initial funding requirement of $28M with the finalization of the Earthquake Flash Addendum and as more comprehensive information is coming in about the immediate response and early recovery and rehabilitation needs. UNICEF's Humanitarian Action for Children Appeal for 2025 will be updated to reflect the higher funding requirements once the earthquake response and recovery plan has been finalised

UNICEF has received a loan from its internal Emergency Programme Fund (EPF) mechanism as well as flexible global humanitarian thematic funds to kickstart the response but urgently requires additional contributions to sustain the initial response. UNICEF Myanmar expresses its appreciation for the generous contributions received from the Government of Japan and UNICEF National Committee partners, as well as the in-kind contribution from the European Union.

UNICEF Response

WASH

As of 15 April, UNICEF and its partners have delivered water purification chemicals, including flocculant and tablets to meet the needs of over 400,000 people to access safe drinking water for 30 days (based on 7.5 litres per person per day). In addition, more than 60,000 gallons of household water have been delivered to support 33,838 people in affected areas in Mandalay and Nay Pi Taw, and drinking water is being delivered daily to 2,500 people in Mandalay. 187,886 people have received essential WASH supplies including hygiene kits, buckets or jerry cans, tarpaulins, and ropes across all earthquake affected states and regions. A total of 112 community water filters have been distributed, providing access to safe drinking water for 112 communities, reaching approximately 11,200 people. 55 drums of bleaching powder have been made available for management of dead bodies and environmental cleaning.

In Naypyitaw, UNICEF has provided 5 emergency toilets, 2 temporary water storage tanks, and 1 bathing shelter in two temporary shelters. Sanitation services are being provided to over 1,000 people in Mandalay. Through partners,

[5] AHA Centre, Situation Update No. 9 - M7.7 Mandalay Earthquake (Monday, 14 April 2025, 2000 HRS)
[6] Ibid

150 twin latrine units and handwashing facilities will be installed in Mandalay town to further improve sanitation services. As part of the expansion of the response, partners are already on ground to reaching even more people in need. Repair and rehabilitation of the water sources and rebuilding sanitation facilities remain critical priorities in the near future.

Health and Nutrition

UNICEF continues to provide essential supplies to local partners who are deploying mobile teams, organizing community distributions, and setting up temporary medical clinics. Notably, prior to the earthquakes, many of the partners in the affected areas had already received pre-positioned supplies from UNICEF to respond to health and nutrition emergencies affecting children under five and pregnant women, such as acute watery diarrhoea, cholera, pneumonia, malaria, and severe acute malnutrition.

Since the earthquakes, preliminary reports as of 13 April indicate that at least 100,000 people living in Sagaing, Mandalay, and South Shan have benefited from medical consultations, community distribution of newborn kits, clean delivery kits, micronutrient supplements, ORS, zinc, nutritional bowls, and screening materials. In areas without partners, such as part of Nay Pyi Taw and Mandalay, UNICEF is ensuring direct distribution of community health and nutrition kits and items.

Partners have received direct financial support and supplies from UNICEF to carry out multiple initiatives such as the deployment of mobile teams, assisting communities through temporary clinics, or direct delivery using community volunteer's network; aimed at assisting the most vulnerable populations in Mandalay, Sagaing, Nay Pyi Taw, and Shan South. Additionally, support was provided to enhance cold chain equipment (CCE) and restore routine and catch-up vaccinations in Sagaing and Mandalay.

UNICEF is now addressing the urgent need to solarise health facilities and ensure the continuity of quality essential health and nutrition services, including immunization, not only in earthquake-affected areas but also in host communities accommodating large numbers of displaced populations.

Child Protection

Child protection interventions and service provisions continued covering – i) MHPSS for children, and caregivers; ii) distribution of Child Protection in emergencies (CPiE) kits and relevant services through referral mechanism with a focus on protection and care of Unaccompanied and Separated Children; and iii) protection risk mitigation measures mainly awareness raising for gender-based violence and EORE sessions.

UNICEF in collaboration with partners undertook several missions to locations across impacted states and regions to sites hosting earthquake affected populations to assess current needs and coordinate upcoming support activities. As part of these missions, Psychosocial Support (PSS) sessions were successfully organized, reaching a total of 409 children across four internally displaced persons (IDP) sites. 294 CP kits were distributed benefitting 1,416 people. In Shan, response planning and standby arrangements with implementing partners has been undertaken for provision of MHPSS, Psychological First Aid (PFA), mobile Child Friendly Spaces, CP kits distribution, case management and awareness section for prevention of sexual exploitation and abuse (PSEA).

In Nay Pi Taw, in absence of local partners, UNICEF is aiming for direct distribution of supplies and implementation of activities in collaboration with local volunteers. The major need of affected populations identified from continued assessments is higher demand for mental health and psychological support. It was observed that many of the children in earthquake affected areas are exhibiting signs of emotional distress, including anxiety, withdrawal, and behavioural changes based on fear. There is a critical and ongoing need for structured mental health and psychosocial support interventions to help them coping with trauma and instability.

Education

UNICEF is mobilizing a comprehensive package of support to ensure learning continues and children are protected. This includes the distribution of individual Essential Learning Packages (ELP kits), teaching and learning materials, recreation kits, Early Childhood Development (ECD) kits and roofing sheets for temporary learning spaces (TLS).

Currently, 2,000 roofing sheets, 5,000 ELP kits, and 250 recreation kits are being distributed to partners in the northwest to support children's continuous learning.

Plans are underway to rehabilitate destroyed or damaged temporary learning centres, including within the monastic education sector, whose schools sustained heavy damage following the earthquake. Recognizing the profound stress and fear experienced by children, there continues to be a critical need for MHPSS to help them feel safe and provide vital opportunities to play, socialize, learn, and simply be children.

UNICEF continues to lead and collaborate with partners on sector assessments, including Rapid Needs Assessments (RNAs) and the Multi-sector Initial Rapid Assessment (MIRA), planned across affected areas. As the new school year approaches in June, there has been a high demand from many schools for tents, tarpaulins, and roofing sheets to establish safe spaces to ensure learning can resume. Communities are also requesting additional support, including ECD kits, recreation materials, and individual learning supplies, to ensure the continuity of learning in TLS.

In collaboration with Child Protection, child-friendly spaces are being established in Mandalay and displacement sites. These safe environments offer structured learning, play, life-skills, protection activities, and parenting sessions – all designed to restore a sense of normalcy, safety, and support for affected children and families.

Social Protection and Cash

UNICEF is scaling up multi-purpose cash assistance for families affected by the earthquake, in partnership with partner organisations. Against the target of 38,075 people (with a focus on vulnerable households with children in Mandalay, Sagaing, and southern Shan—including families with children and persons with disabilities), to date 2,867 households/13,094 people have received cash transfers in the earthquake affected areas. In many areas, UNICEF is delivering cash payments via WAVE mobile money. UNICEF is coordinating with the Cash Working Group and UN partners to align targeting and delivery.

Social and Behaviour Change

UNICEF, in collaboration with WHO and IFRC, is strengthening Risk Communication and Community Engagement (RCCE) to prevent disease outbreaks following the recent earthquake. Efforts include social listening to counter harmful misinformation circulating within affected communities. To expand access to life-saving information, UNICEF is working with media partners—including local radio stations, social media platforms, and community networks—to disseminate key messages. These focus on coping with trauma (for both adults and children), hygiene and sanitation to prevent waterborne and communicable diseases, and protection measures against gender-based violence, especially towards children.

Social listening has revealed worsening health and sanitation conditions in makeshift shelters. In response, additional Public Service Announcements (PSAs) have been broadcast, promoting safe water management using purification tablets and the importance of oral rehydration for diarrhoea treatment.

UNICEF is also distributing hygiene and clean delivery kits, accompanied by health education on the "four cleans"—clean water, food, hands, and toilets—and the use of chlorine tablets to reduce disease risk. Over 9,878 households (nearly 50,000 people) in Mandalay Region and Nay Pyi Taw have been reached to date. Furthermore, approximately

1,500 pregnant and lactating women have received guidance on newborn care and breastfeeding in emergencies, along with clean delivery and newborn kits.

To enhance community engagement in the earthquake affected areas, UNICEF has established community structures in Nay Pyi Taw in Pyinmana, Yamaethin, and Pyawbwe townships, involving community volunteers. The volunteers have received orientation sessions on community engagement with focus on essential life-saving messages, community consultation approaches and tools for collecting community feedback.

SUPPLY AND LOGISTICS

A flight carrying 80 metric tons of Health, Nutrition, Education, Child Protection and Shelter items arrived in Yangon on 12 April. Goods are being prepared for distribution to UNICEF's warehouses in Mandalay and Taunggyi and to partners working on the ground, to expand and accelerate response efforts.

In collaboration with partners, UNICEF is distributing essential supplies such as medicines, health kits, hygiene and sanitation kits, water treatment tablets, and tarpaulins to people and communities affected by the earthquake in locations including Mandalay, Nay Pyi Taw, and Taunggyi.

Humanitarian Leadership and Coordination

The United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA) is coordinating the overall humanitarian response with all clusters through coordination mechanisms established at the national and sub-national levels. UNICEF will continue to provide leadership for the WASH Cluster, Nutrition Cluster, Child Protection and Mine Action AoRs, and is co-leading the Education Cluster (with Save the Children). Cluster discussions at the national and sub-national levels are ongoing to obtain information about immediate needs and to coordinate the response.

On 11 April 2025, UN OCHA issued the Addendum to the Myanmar Humanitarian Needs and Response Plan 2025, which seeks an additional US$ 275 million to deliver principled humanitarian assistance and protection to 1.1 million of the most vulnerable people.[7]

As of 12 April, RNAs conducted in 54 townships reveal that over 76,000 latrines have been destroyed by the earthquake. This highlights a significant gap in access to safe sanitation, especially in displacement sites. Partners are strongly encouraged to prioritize the provision of emergency and semi-permanent sanitation facilities to meet urgent needs and prevent disease outbreaks. The WASH Cluster is currently conducting an in-depth analysis of the RNA data to inform response planning. A dashboard is being developed to map partner activities and track WASH interventions in the earthquake affected areas. Provision of safe water continues in affected areas. From April 10-14, WASH Cluster partners reached an additional 14,045 people with hygiene kits, 77,400 with safe drinking water, and 52,600 with domestic water in the affected townships of Mandalay and Sagaing regions.

The Nutrition Cluster continues to coordinate the response efforts of partners across the earthquake affected areas. Ensuring optimal Infant And Young Child Feeding Practices (IYCF) remains critical, including ensuring infants who cannot be breastfed managed in line with the Breast Milk Substitute (BMS) code and guidance. The lack of adequate facilities and privacy in collective shelters is impacting exclusive breastfeeding and complementary feeding practices, underscoring the need for appropriate IYCF-friendly spaces. The cluster developed a joint statement cautioning against unnecessary use of BMS.

Nutrition Cluster response efforts include distributing fortified biscuits and food kits to over 13,000 households across Mandalay, Sagaing, and Southern Shan. Malnutrition screening is underway, along with IYCF counseling for caregivers. Three training sessions were also held to support frontline workers, including re-lactation during emergencies, non-breastfed children programme and refresher session on strengthening Integrated Management of Acute Malnutrition (IMAM).

[7] UNOCHA, Myanmar Earthquake: HNRP Flash Addendum - Issued April 2025

The Child Protection Area of Responsibility (AoR) partners are rapidly responding in earthquake-affected areas by providing key services such as reunification of separated children, MHPSS, distribution of CP kits, and establishment of child-friendly spaces. Community-level protection is being scaled up where agencies are absent. The GBV-CP observational assessments consistently indicate serious child protection risks, including unsupervised children playing in dangerous areas, inadequate and unsafe WASH facilities, and widespread anxiety among children and caregivers. In response, CP kits and psychological first aid are being distributed, and MHPSS efforts are expanding. So far, at least 4,535 people have received CP services, including 3,912 children. Key interventions include 1,796 CP kits distributed, 298 child protection cases opened, and over 2,300 people reached with psychosocial support. There is a growing need to strengthen family tracing, reunification, and case management for unaccompanied and separated children.

The Mine Action AoR has finalised the standardized EORE messages in both English and Myanmar and shared with AoR partners, child-friendly mine safety messages, and earthquake-specific safety messages outlining the dangers of explosive ordnance following an earthquake. Of the 58 most severely affected townships, 32 of these were already contaminated with explosive ordnance, putting all people affected by earthquakes in immediate danger. Child-friendly EORE one-pager was shared with both MA AoR and CP AoR partners. In Sagaing and Magway, partners are delivering EORE and supporting referrals to communities and responding organizations. Partners are working on creation of audio messages and a social media campaign to reach a wider number of people in affected areas. Additionally, partners are further distributing cash support as Victim Assistance in affected areas. Victim assistance is crucial with particular focus on agency and continuing health, rehabilitation, MHPSS and livelihoods.

The Education Cluster is coordinating with partners on the ground to get critical information on the impact, critical needs and ongoing responses in relation to the provision of education services to children affected by the recent earthquake. Damage has been reported to 1,384 educational facilities in the Northwest Region, including 1,268 Ministry of Education schools and 101 monastic schools, posing major challenges to education continuity. Additional damage has been recorded in Nay Pyi Taw, Mandalay, Sagaing, and the southeast region.

The Cluster has also formed an Assessment Working Group to enhance post-earthquake analysis and guide early recovery planning. Additionally, the MIRA tool has been revised to assess earthquake-related impacts on education. There are urgent needs include engineering teams for safety assessments before the 2025−2026 academic year, temporary learning spaces and tents (with low current stocks), school renovation (including WASH facilities), and psychosocial support and materials for affected children and teachers. Limited funding remains a major challenge, hindering the ability to scale up the response.

UNICEF is also working with partners and the Technical Advisory Group on Disability Inclusion to ensure that the earthquake response is inclusive of persons with disabilities, including through identification of specific needs, provision of assistive devices, and technical support to sectors on inclusive programming.

Human Interest Stories and External Media

PSEA: Aid is free, if not, report.
https://www.facebook.com/share/p/12BSoAj23kw/

https://www.facebook.com/share/p/1E2qyqxSiG/

U-Report poll on landmines:
https://www.facebook.com/UReportMyanmar/posts/pfbid028pYkbF3MPRScE5pUaMfo2XEqDpJAA7Dd1fQPAc2QirnMvhpskjjRWR1ioZ9MtoNyl

UNICEF Italy fundraising tweet:
https://x.com/UNICEF_Italia/status/1911830485803913392

Testimony of a YPAT member from Myanmar.
https://x.com/UNICEF_EAPRO/status/1910542181275672873

Website: https://www.unicef.org/myanmar/

UNICEF Myanmar Facebook: https://www.facebook.com/unicefmyanmar/

UNICEF Myanmar X (formerly Twitter): https://x.com/UNICEFMyanmar

In case of media requests, please contact Eliane Luthi, UNICEF East Asia and Pacific, Tel: +66 654 154 874, eluthi@unicef.org

For further information contact:

Marcoluigi Corsi
Representative
Myanmar Country Office
Email: mcorsi@unicef.org

Julia Rees
Deputy Representative
Programmes
Myanmar Country Office
Email: jrees@unicef.org

Faika Farzana
Emergency Manager
Myanmar Country Office
Email: ffarzana@unicef.org