



Situation Analysis

MYANMAR CRISIS

Period: 30/03/26 – 05/04/26

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Introduction

Purpose

This report provides a comprehensive overview of the current humanitarian situation, focusing on both operational environment factors and sectoral analysis. It aims to support informed decision-making for humanitarian partners and stakeholders.

About GANNET

GANNET is a Generative AI Initiative from Data Friendly Space, offering AI-powered tools built to make knowledge and real-time information accessible to our community in a resource-efficient and ethical way. It provides tools such as the GANNET Virtual Assistant and GANNET SituationHub to help humanitarian actors access, analyze, and utilize critical information for their operations.

GANNET SituationHub

The GANNET SituationHub is a generative AI-powered digital public good designed to identify and analyze humanitarian data from thousands of trusted sources in real time. By transforming complex data into clear insights, it enables faster, more effective response strategies and improved coordination among stakeholders.

GANNET Virtual Assistant

The GANNET Virtual Assistant is a verified chatbot designed for humanitarian quick decision-making. Built on cutting-edge Generative AI and trained with humanitarian expert-reviewed data, it provides real-time information. The GANNET Virtual Assistant facilitates rapid data access and synthesis for crisis response.

Methodology Overview

The Situation Hub's analytical process uses a structured Human-in-the-Loop workflow that combines automated analysis retrieval through GANNET Virtual Assistant, DFS's AI-powered humanitarian assistant, with expert review by the DFS analysis team. GANNET automates the extraction and generation of crisis-related insights based on structured prompts, which are aligned with a tailored analytical framework. These outputs are then reviewed, validated, and refined by analysts to ensure accuracy, contextual relevance, and operational utility. The workflow is organized into four key phases: planning and setup, ongoing operations, quality assurance, and system evolution, ensuring a balance between speed and analytical rigor.

Planning, Setup & Quality Control

In the planning phase, analysts develop a contextualized analytical framework, largely based on the Joint Intersectoral Analysis Framework (JIAF), and convert it into structured prompts for AI-assisted data extraction. These prompts are refined over time to improve output quality. Data sources are vetted for reliability, and translations are reviewed for accuracy. Using a centralized Content Management System (CMS), analysts review and curate AI-generated outputs, validate them against external sources, and make refinements to enhance clarity and relevance. The CMS enables collaborative editing and version tracking, ensuring outputs align with humanitarian needs.

Bias Mitigation

To minimize bias, the team diversifies data sources, cross-verifies information, and continuously evaluates the AI's performance. Analysts are crucial in identifying and correcting inaccuracies, especially in automated categorization. Future improvements aim to enhance source credibility checks and sentiment analysis, further strengthening the reliability of the Situation Hub's outputs.

Crisis Overview

The SituationHub landing pages use a standardized yet customizable template to deliver consistent, comprehensive crisis overviews. These pages integrate static content with dynamic data from sources like ACLED and DTM via open APIs, enabling interactive visuals with real-time updates. Regular reviews and verification with in-country partners ensure accuracy, while manual updates are used for sources not connected to APIs.

Media Monitoring

The media monitoring process has evolved from a manual, list-based approach to an AI-assisted system integrated into the CMS. This allows analysts to efficiently review, filter, and contextualize media narratives, while automation helps track emerging trends.

Overview

The following overview has been generated using the information available up to April 13, 2026. It provides a synthesized summary and key insights into the crisis based on the most recent data accessible at that time.

Summary

Myanmar has been in crisis since February 1, 2021, when the military (Tatmadaw) overthrew the democratically elected government. This coup sparked widespread protests and armed resistance, leading to a severe political, economic, and humanitarian crisis. The military junta, known as the State Administration Council (SAC), has responded with brutal force, resulting in thousands of civilian deaths and widespread human rights abuses.

As of December 2025, approximately 3.6 million people are internally displaced across the country—a dramatic increase from roughly 300,000 pre-2021—with displacement projected to rise toward 4 million in 2026. Intensified clashes continue in Sagaing, Magway, northern Shan, Kayah, and Mandalay, where junta forces have launched renewed ground and air offensives ahead of military-run elections starting December 28, 2025. The Arakan Army now controls all but three of Rakhine State's 17 townships, while resistance forces including the Karen National Liberation Army have consolidated influence across much of central and southeastern Myanmar. The UN's 2026 Humanitarian Needs and Response Plan, released December 10, projects over 16 million people will require humanitarian assistance.

Recovery from the March 2025 earthquake remains slow, with an estimated 3.5 million tonnes of debris and reconstruction hampered by insecurity, shortages of heavy machinery (43%) and labour (40%), and limited access. Many affected communities, particularly in Magway, Sagaing, and Mandalay, continue to live in temporary shelters, while essential services remain disrupted. Approximately 24,200 houses were damaged (24% completely destroyed), and 132 health facilities were damaged—half in Mandalay.

The Rohingya crisis continues to worsen, with the junta's blockade of Rakhine preventing international aid delivery since late 2023, leaving hundreds of thousands of IDPs with severely limited assistance. On December 10, 2025, a military airstrike destroyed Mrauk-U General Hospital, killing at least 33 people and injuring 76–80—one of the deadliest attacks on healthcare in the conflict. Chronic poverty now affects over 80% of the population, the World Bank projects GDP will contract 2.0% in FY2025/26 with inflation remaining above 20%, and market disruptions have deepened food insecurity nationwide. The 2026 HNRP appeals for approximately \$890 million but reflects severely constrained funding and narrowed operational space, forcing agencies to prioritize only 2.6 million people with the most severe needs for life-saving support.

Key Insights

1. Myanmar's humanitarian crisis continues to deepen amid persistent conflict, economic collapse, and the lingering impacts of the March 2025 earthquake. An estimated 16 million people—nearly one in three citizens—are projected to require humanitarian assistance in 2026, as conflict-driven displacement, natural disasters, and funding shortages exacerbate vulnerabilities nationwide.

The March 28 earthquake remains a defining event in the humanitarian landscape. Official figures confirm 3,745 deaths and over 5,000 injuries, with the Early Recovery Cluster reporting over 24,200 houses damaged (24% completely destroyed), 4,857 apartments affected, and 132 health facilities damaged. An estimated 3.5 million tonnes of debris blocks roads and markets, with clearance impeded by shortages of heavy machinery (43%) and labour (40%). Nearly three-quarters of the most affected townships continue to face critical shelter and livelihood gaps—64% of communities reported job losses and 30–31% reported damage to crops and workplaces—while disrupted water systems (44% of groundwater sources contaminated) have fueled outbreaks of cholera and dengue.

2. Conflict has escalated dramatically ahead of junta-run elections starting December 28, 2025. The military has intensified air and ground offensives, conducting 2,165 airstrikes between January and November 2025—up from 1,716 in all of 2024. On December 10, a military airstrike destroyed Mrauk-U General Hospital in Rakhine State, killing at least 33 people and injuring 76–80—prompting UN, WHO, and Amnesty International condemnation and calls for investigation as a possible war crime.

Total displacement has reached approximately 3.6 million people as of late 2025, with projections indicating it could rise to 4 million in 2026. The Arakan Army now controls all but three of Rakhine's 17 townships, while resistance forces have captured extensive border areas in the southeast. Attacks on healthcare are widespread: Insecurity Insight recorded 1,815 attacks on health care between February 2021 and November 2025, with WHO verifying 67 attacks in 2025 alone. Access restrictions, including the junta's blockade of Rakhine since late 2023, continue to endanger civilians—particularly Rohingya communities facing persistent protection risks, restricted mobility, and limited access to aid.

3. Humanitarian access remains severely limited by insecurity and deliberate obstruction. The 2026 HNRP appeals for approximately \$890 million but reflects severely constrained funding and narrowed operational space, prioritizing only 2.6 million people with the most severe needs at a cost of \$521 million. Partners reached some 5 million people in the first nine months of 2025, but access constraints—including roadblocks, landmines, telecommunications blackouts, and the Rakhine blockade affecting 600,000 IDPs—force reliance on low-profile, community-led delivery modalities. WFP warns that hunger has reached "unacceptable" levels, with over 400,000 young children and mothers surviving on nutrient-deprived diets of plain rice or watery porridge.

4. The Food Security Cluster estimates about 8.5 million people face moderate-to-severe food insecurity in 2026, driven by conflict, displacement, rising food and fuel prices, reduced market access and supply-chain disruptions. September 2025 analyses reported "Serious" to "Critical" Global Acute Malnutrition in multiple conflict-affected townships, notably in Northern Rakhine, Kachin, Sagaing, Southern Shan, and Kayah—with nutrition and treatment services suspended or operating at minimal capacity due to access constraints.

Economic conditions continue to deteriorate: the World Bank projects real GDP will contract 2.0% in FY2025/26, with inflation remaining above 20%. Rising poverty and fear of forced conscription have driven male migration, leaving women, girls, and older people as household heads. More than four in ten households identify lack of income as their top challenge, and 83% of internally displaced families can meet half or less of their basic needs. The convergence of conflict, disaster, and economic decline continues to erode coping capacities, pushing Myanmar further toward a protracted humanitarian emergency with no signs of de-escalation.

5. International condemnation has intensified following the December 10 airstrike on Mrauk-U Hospital. The UN High Commissioner for Human Rights called for an investigation, warning the attack could amount to a war crime. WHO's Director-General condemned the strike as among dozens of verified attacks on healthcare in 2025. Amnesty International and the Burma Human Rights Network have urged the UN Security Council to refer Myanmar to the International Criminal Court, impose an arms embargo, and authorize emergency cross-border humanitarian aid.

Peace negotiations remain effectively stalled: resistance leaders and the National Unity Government publicly rejected Chinese-brokered terms for northern Shan State. The junta has cancelled voting in thousands of wards where it cannot secure control, while nationwide "silent strikes" signalled popular rejection of the military's December elections. EU and Australia have declared the vote "not credible" amid junta repression. The junta denies responsibility for civilian casualties, accusing "terrorists" of being targeted, while humanitarian organizations warn the pre-election environment is driving further escalation rather than de-escalation.

Economy

Current Economic Situation

Myanmar is facing a worsening economic situation driven by a regional energy shock that has raised fuel and fertilizer prices, threatened cultivation and food security, and increased inflationary and household stress across the country [1][22][11]. The country imports about 90% of its fuel, and de facto authorities have imposed odd-even vehicle restrictions and other rationing measures to cope with shortages [1][22]. Economic power remains concentrated in military-linked entities, with the armed forces operating their own banks and companies, reinforcing the junta's control over key sectors [25]. Official development assistance to lower-income Southeast Asian states, including Myanmar, has declined amid political instability, with analyses noting falling aid flows and a projected regional ODA reduction of more than US\$2 billion by 2026 [19][7]. Humanitarian planning under the Myanmar HNRP estimates 16.2 million people in need, 4.9 million people targeted, and \$890 million required for the response [1].

Conflict Economic Landscape

The March 2025 earthquake caused severe economic disruption across Myanmar. Key figures include:

- 9.1 million people affected in the hardest-hit areas, including large numbers of women and girls [2].
- An estimated 3.5 million workers faced immediate unemployment due to disaster impacts on livelihoods [2].
- Around 41,000 houses were damaged or destroyed, and over 1,800 schools and many health facilities were hit, constraining recovery of services and local economies [2].
- IFRC, ICRC and 32 national societies provided assistance to more than 213,652 people across 31 townships, while the IFRC Emergency Appeal for Myanmar was only 29.4% funded, limiting scale-up of rehabilitation and livelihood support [17][9].

Multipurpose cash and community-led shelter have been central to early recovery, but thousands still require support to rebuild livelihoods, water and sanitation systems, health care and schools, delaying economic normalisation [17][9][2]. Hostilities in northwest Myanmar — including airstrikes, clashes and movement restrictions in March 2026 — continue to cause civilian harm, displacement and damage to civilian infrastructure, further limiting access to markets and services [11].

Declining ODA and announced donor aid cuts for 2026, combined with low appeal funding, are constraining international support for reconstruction and livelihoods, risking deeper development and regional disparities [7][19]. Gendered and protection-related impacts show women, persons with disabilities and LGBTIQ+ people face disproportionate barriers to recovery, heightened GBV risks and reduced access to services, limiting equitable reintegration into the workforce and livelihoods [14][2].

Stability of Currency and Bank System

Myanmar's monetary and financial environment is under significant stress. Thailand's refined oil exports to Myanmar fell by approximately 20%, while rising energy and fertilizer prices and port labour shortages are threatening the upcoming cultivation season, compounding food insecurity, inflation and household stress [1]. Maritime uncertainty and airspace restrictions are further disrupting commercial and humanitarian logistics and increasing the cost of humanitarian operations [1][11].

Border trade through the Myawaddy gate has collapsed dramatically, illustrating the fragility of Myanmar's trade-dependent economy:

- 2019–20 fiscal year: US\$1.2 billion [6].
- 2023–24: US\$1.1 billion [6].
- April–June (last reported period): US\$63 million [6].

Authorities have signalled a possible reopening of the Myawaddy–Mae Sot crossing in early April 2026, but the situation remains volatile, with alternative routes being used via Ranong while the Asian Highway remained insecure [6]. Official aid flows to Myanmar have also declined amid donor reallocation and cuts following the 2021 coup, further reducing available financial support for humanitarian and recovery needs [19][7].

Employment

The 28 March 2025 earthquake severely disrupted employment across Myanmar, with an estimated 3.5 million workers facing immediate unemployment [2]. Women and girls were disproportionately affected — approximately 4.8 million women and girls were recorded in the hardest-affected areas — exacerbating economic pressure on female-headed households [2]. Multipurpose cash grants have been a key recovery tool, with households using them to repair homes, buy food or cover medical fees, though livelihoods support remains a critical and underfunded recovery need, with the IFRC Emergency Appeal only 29.4% funded [9][17].

Rising fuel and fertilizer prices, odd-even vehicle restrictions and port labour shortages are threatening cultivation, agricultural inputs and household incomes ahead of the upcoming planting season [1][22]. Cross-border trade disruptions have also had knock-on effects on employment in trade-dependent communities, with activity through the Myawaddy border gate falling sharply and alternative routes through Ranong being used while the Asian Highway remained insecure [6].

Politics

Governance Structures and Rule of Law

Myanmar's military leader Min Aung Hlaing was elected president on 3–4 April 2026 by a parliament dominated by military appointees and USDP loyalists, following coordinated moves that began around 30 March 2026 [127][125][123][126]. The legislature is effectively stacked to preserve junta control — speakers Khin Yi (lower house) and Aung Lin Dwe (upper house) were installed in March, and the constitution reserves military-appointed seats that bolster executive authority [105][104][123]. The regime simultaneously created parallel governance mechanisms, including a Union Consultative Council expected to be chaired by Min Aung Hlaing to oversee security, foreign policy and legislation, while he handed direct military command to a handpicked loyalist, Ye Win Oo [105][117]. Observers, rights groups and former UN officials have described the transition as a superficial "rebrand" that consolidates military rule rather than restoring civilian governance, and have warned against recognising the process as legitimate [105][96][112][108]. The shift followed widely condemned December–January elections held in limited areas, criticised as sham processes that excluded major opposition parties and delivered an overwhelming victory for pro-military forces [127][125][112].

Since the 2021 coup, the country remains in large-scale armed conflict, with independent estimates citing nearly 93,000 killed and more than 3.6 million displaced, highlighting a collapsing rule-of-law environment and weakened separation of powers [127][126]. State security forces face widespread allegations of systematic abuses — including torture in detention and crimes against humanity — and Min Aung Hlaing is subject to international criminal scrutiny over actions against the Rohingya, underscoring deep deficits in law-enforcement accountability [117][112][127]. In opposition, the NUG-backed Steering Committee for the Emergence of a Federal Democratic Union (SCEF) has unified several ethnic armed groups and pro-democracy forces, pledging to end the military's political role, scrap the 2008 constitution and pursue transitional justice, evidencing a de facto contest over legitimate authority [109][110]. Regional and parliamentary human-rights bodies — including ASEAN Parliamentarians for Human Rights, which issued statements on 31 March 2026 — publicly condemned the junta's manoeuvres and urged ASEAN and the international community to take decisive action to uphold human rights and prevent legitimisation of junta rule [96]. Reports from Rakhine indicate ongoing arbitrary detention, forced recruitment and unresolved citizenship for Rohingya populations, further undermining legal protections, accountability and prospects for safe, voluntary repatriation [88].

Political Freedoms and Recent Laws

The December–January elections and the subsequent parliamentary vote were widely denounced as sham manoeuvres to entrench junta control, prompting condemnation from regional bodies including ASEAN Parliamentarians for Human Rights and calls to withhold recognition [112][96]. Analysts warn the shift to a nominally civilian presidency functions as an elite management strategy — providing cover for foreign engagement and investment while preserving military control — rather than any genuine democratic transition [105][104]. Min Aung Hlaing is sought by the International Criminal Court on allegations of crimes against humanity related to the Rohingya, raising serious concerns about continued impunity under his presidency [112].

The conflict's human toll remains severe. Between 20–22 March 2026, airstrikes in Sagaing and Katha townships reportedly killed more than 20 civilians, struck a monastery sheltering displaced families, and hit schools in Kani and Ayadaw townships, while movement restrictions left thousands unable to flee affected areas [72]. UN estimates place the number of internally displaced persons at more than 3.7 million, while independent monitoring groups report nearly 93,000 deaths since the 2021 coup [113][116]. Reports also document arbitrary detention, forced recruitment including pressures on youths and risks to minors, unresolved Rohingya statelessness, and ongoing ICJ proceedings that heighten international scrutiny [88][76]. ASEAN Parliamentarians for Human Rights and other bodies urged ASEAN, the UN and international partners to condemn the junta's consolidation and avoid re-engagement that would legitimise ongoing atrocities [96].

Influence of Non-State Actors and Political Factions

Min Aung Hlaing secured 429 of 584 votes in the 3 April 2026 parliamentary election, with the legislature dominated by military-aligned lawmakers [108][104][126]. He has preserved influence through elite management and patronage — placing loyal generals in lucrative military-linked businesses and using officer-corps pacts to contain rivals — while handing direct military command to loyalist Ye Win Oo [116][117][105].

On the opposition side, the NUG launched the Steering Committee for the Emergence of a Federal Democratic Union (SCEF) to align military and political leadership among several resistance groups. However, major actors — including the National Unity Consultative Council, the Arakan Army and some large ethnic forces — remain outside the coalition, leaving the alliance significant but incomplete [109][110]. The Arakan Army has expanded its influence in northern Rakhine, with reports of militarisation, arbitrary detentions, recruitment pressures and movement restrictions that undermine prospects for safe, voluntary return of Rohingya civilians [76][88]. On 31 March 2026, hundreds of Rohingya staged a peaceful protest in Camp 24 LMS, Cox's Bazar, against proposed food-ration cuts and a vulnerability categorisation process amid funding shortfalls flagged by agencies including WFP and UNHCR, reflecting deteriorating camp conditions and heightened risk of social tensions [76][92].

Public Trust in State Institutions

International observers, rights groups and former UN officials have consistently described the late March–early April 2026 parliamentary process and the broader political transition as a manufactured "rebrand" designed to create a civilian façade while preserving military authority, urging governments not to recognise the resulting administration [105][108]. The parliament itself — stacked with former military officers and junta loyalists, with lower-house speaker Khin Yi and upper-house speaker Aung Lin Dwe appointed in March — reinforces perceptions of a militarised and unaccountable state [105]. The establishment of parallel mechanisms such as the Union Consultative Council, along with the promotion of loyalists including Ye Win Oo into senior military roles, further erodes confidence in the impartiality of state structures [105][116][113][117][108].

Continued civil war, large-scale displacement and heavy casualties since the 2021 coup have compounded declining institutional legitimacy, with independent and international reporting consistently framing these developments as substantially undermining public confidence in Myanmar's executive, legislative and judicial institutions [105][108].

Role of Marginalized Groups

Rohingya remain stateless and lack enforceable legal protections in Myanmar. Reports from northern Rakhine cite arbitrary detentions, forced recruitment and movement restrictions imposed by both junta forces and the Arakan Army that undermine prospects for safe, voluntary returns [88][76]. On 31 March 2026, hundreds of Rohingya refugees in Cox's Bazar protested proposed food ration cuts as funding and policy shifts squeezed humanitarian assistance, reflecting deteriorating conditions and heightened social tensions in displacement settings [76][92].

The Myanmar Gender in Humanitarian Action (GiHA) Working Group, co-led by UN Women and UNFPA, reported that one year after the 28 March 2025 earthquake, women, girls and other marginalised groups were disproportionately affected – an estimated 9.1 million people were impacted, including 4.8 million women and girls – and that decision-making structures remained largely male-dominated, excluding women, older persons, people with disabilities and LGBTIQ+ persons from consultations and recovery planning [78][111]. GiHA documented high and ongoing protection risks for women and girls including increased GBV, severely limited GBV and clinical services, disrupted care for older persons and people with chronic conditions, loss of assistive devices, and shelters and communications inaccessible to persons with disabilities and other marginalised groups [78][111].

The opposition SCEF coalition, while seeking to coordinate political and military resistance, remains limited in inclusivity – key actors including the Arakan Army, the National Unity Consultative Council and several Mon and Shan groups remain outside the alliance, constraining its representativeness [109][110]. Falling aid flows to Southeast Asia, with Myanmar identified among countries facing declining assistance, compound exclusion and reduce resources for inclusive recovery and basic services for marginalised populations [91].

Security And Stability

Security Overview

Since mid–late March 2026, the junta has intensified air, drone, naval and artillery strikes on Arakan Army–held coastal towns in Rakhine, causing civilian deaths and injuries and prompting AA condemnation of what it describes as war crimes [179]. Between 20–22 March and in late March, airstrikes across northwestern Myanmar (Sagaing, Katha, Ayadaw, Kani and Magway) reportedly killed dozens, struck monasteries and schools, and left thousands unable to leave affected areas due to movement restrictions [156]. Specific incidents in March include drone strikes in Kyaukphyu and fighter-jet bombing in Paletwa (Chin State) that caused multiple civilian deaths, injuries and destruction of homes [179]. Non-state armed actors—most notably the Arakan Army—control significant territory in northern Rakhine and are reported to be involved in arbitrary detentions, recruitment pressures and governance measures that undermine civilian rights and conditions for safe return of Rohingya refugees [139][134]. Transnational trafficking and smuggling networks continue to threaten Rohingya and other migrants through maritime routes and jungle detention systems, contributing to high migration fatalities (IOM/Missing Migrants recorded approximately 935 fatalities of Myanmar nationals in 2025, mainly Rohingya) and persistent cross-border security risks [133][150][148]. Reports of new use of antipersonnel landmines in Myanmar further raise civilian protection risks and complicate displacement, humanitarian access and return prospects [172][176]. Bangladesh has shared data on 829,036 Rohingya with Myanmar and reported that Myanmar verified about 354,751 people by January 2026, but Dhaka states repatriation cannot proceed while conflict continues [187][186]. Political moves by the junta to consolidate power have been condemned by regional parliamentary groups as entrenching repression and increasing instability across the country [157].

Security Forces and Law Enforcement

The junta's leader, Min Aung Hlaing, was elected president in a parliament vote on 3–4 April 2026 after stepping down as commander-in-chief and installing loyalists while handing formal military command to Ye Win Oo [170][169][143][146]. This formal transition is widely seen as consolidating military control rather than producing substantive change in command, reinforcing a security architecture in which the armed forces retain significant autonomy and economic power [146][160]. International and regional rights groups have condemned these political manoeuvres alongside documented patterns of mass killings, arbitrary detention and torture in detention centres, and systematic attacks on civilians [157][136][143][160]. Independent monitoring groups estimate very high human costs since the coup—on the order of approximately 93,000 killed and millions displaced—underscoring the severe protection implications of ongoing security force operations [170][160].

On the ground, junta security forces conducted heavy offensive operations and air campaigns in late March 2026. In Sagaing (including Katha, Ayadaw and Kani townships), airstrikes between 20–22 March reportedly killed dozens of civilians and struck monasteries and schools, with movement restrictions limiting civilians' ability to leave affected areas [156]. In Rakhine and neighbouring Chin State, junta air and naval strikes in late March killed civilians, including children in Thandwe and Paletwa, in attacks reported on 23 and 29 March as resistance-held coastal towns were targeted [179]. Local reports also document destructive tactics including the torching of villages and use of heavy weapons and drones—one Karenni village had an estimated 16 houses burned on 28 March after junta troops occupied the area—leaving displaced populations unable to return amid landmine threats [181]. Despite constrained logistics and jet-fuel shortages, the junta escalated strikes, indicating operational prioritisation of offensive air campaigns even amid resource constraints [145][152].

Demography

Demographic Overview

Myanmar's 2026 Humanitarian Needs and Response Plan (HNRP) estimates 16.2 million people in need [190]. The 7.7 magnitude earthquake of 28 March 2025 affected an estimated 9.1 million people in the hardesthit areas, including about 4.8 million women and girls, roughly 223,000 pregnant women, about 41,000 houses damaged or destroyed, and an estimated 3.5 million workers who faced immediate unemployment [189][194]. One year after the quake, international support through the Myanmar Red Cross and partners reached some 213,652 people across 31 townships [212][209]. Since the 2021 coup, large-scale conflict-driven population movements have resulted in more than 3.6 million internally displaced and nearly 93,000 killed as of early April 2026 [204][202]. Renewed airstrikes in northwest Myanmar between 20–22 March 2026 killed civilians and constrained movement, leaving thousands unable to leave affected areas [192]. Approximately 1.18 million Rohingya refugees remain registered in Bangladesh camps (UNHCR: 1,177,962 as of 31 December 2025), with 51.5% female [215]. Bangladesh shared data on 829,036 Rohingya with Myanmar for repatriation and, as of January 2026, Myanmar had completed verification for 354,751 people and identified 253,964 as "persons previously residing in Myanmar" [208][207]. IOM's Missing Migrants Project recorded 935 Myanmar nationals dying or disappearing during migration in 2025 and at least 860 Rohingya deaths or disappearances at sea in 2025, underscoring ongoing crossborder maritime risks [196].

Socio-Cultural

Socio-Cultural Overview

The Rohingya remain denied citizenship in Myanmar and effectively stateless, a structural condition that undermines legal protection and contributes to transnational vulnerabilities including trafficking and exploitation through Bangladesh, Thailand and Malaysia [227][232][237]. Armed actors, notably the Arakan Army, have expanded influence in northern Rakhine, creating recruitment pressures, arbitrary detentions and movement restrictions that analysts say fundamentally undermine prospects for safe, voluntary return [227][237]. At regional diplomatic talks the EU reaffirmed that any repatriation must be voluntary, safe and dignified, while observers note on-the-ground coercive dynamics — including forced recruitment and detention of youths — that contradict those criteria [237]. The junta's political consolidation under Min Aung Hlaing and the installation of loyalists have deepened social fractures and perpetuated repression and targeting of ethnic and religious minorities across Myanmar [236][242][256].

In the refugee response, UNHCR-facilitated community activities — including 16 Days of Activism sports events in November–December 2025 — sought to promote social cohesion and increase women's public participation, while biometric registration of new arrivals identified 141,532 people in 2025 who now make up approximately 12% of the camp population, altering community composition and assistance dynamics [248][251]. Hundreds of Rohingya staged a peaceful protest in Camp 24 LMS, Cox's Bazar on 31 March 2026 to oppose proposed food-ration cuts and a new vulnerability classification system that refugees warned would create unequal access and internal tensions in the camps [227]. Humanitarian funding shortfalls and shifts toward targeted aid models have intensified contestation over assistance in camps and risk exacerbating intra-community divisions and protection vulnerabilities if reductions continue [227][248].

One-year assessments following the March 2025 earthquake show disproportionate impacts on women and girls, women-headed households, persons with disabilities and LGBTIQ+ people, who face barriers to participation, limited access to services and heightened GBV risks amid largely male-dominated decision-making structures [224][226]. Local social structures — village leaders, community committees and women-led organisations — have been central to recovery and shelter reconstruction, with Myanmar Red Cross and IFRC-supported community-led approaches and multipurpose cash helping restore choice and social agency in many communities [229][228].

Gender Dynamics

The Myanmar Gender in Humanitarian Action (GiHA) Working Group and Rapid Gender Analysis findings (30 March 2026), marking one year since the 28 March 2025 earthquake, document disproportionate impacts and heightened protection risks for women, girls and marginalised groups [224][226]. Key figures include:

- 9.1 million people affected, including 4.8 million women and girls [224]
- 223,000 pregnant women in affected areas [224]
- Less than 25% of women and girls could access menstrual hygiene products [224]
- IFRC/MRCS and partners provided assistance to over 213,652 people across 31 townships one year after the quake [228]

Overcrowded shelters elevated GBV risks and harmful coping mechanisms including family violence, child marriage and trafficking, while access to life-saving GBV services — including clinical management of rape — was severely limited [224]. Sexual and reproductive health care and mental health support were also severely disrupted in affected areas, further increasing protection vulnerabilities for marginalised groups [224]. Participation and decision-making remained male-dominated and low overall, with approximately 31% of male-headed and 29% of female-headed households consulted, 26% of older persons and about 20% of persons with disabilities consulted, while LGBTIQ+ persons were largely invisible in community activities [224]. The GiHA Working Group, co-led by UN Women and UNFPA and inclusive of local and women-led organisations, calls for gender-responsive, inclusive recovery to address sexual and reproductive health, GBV, disability and participation gaps identified one year on [224][226][247].

Impact of Socio-Cultural Drivers on Aid

Cultural norms and social hierarchies have significantly shaped humanitarian access and aid distribution in both the earthquake response and refugee settings. In earthquake-affected areas, male-dominated decision-making structures and the exclusion of women-headed households, older persons, persons with disabilities and LGBTIQ+ people from consultations – driven by stigma, mobility barriers and lack of targeted outreach – have undermined inclusive participation in recovery [224][226]. Limited accessible communication, loss or damage of assistive devices, and inaccessible shelters further impeded evacuation, information access and service use for people with disabilities [224][247]. Community-led responses – including multipurpose cash, community-led shelter and strong Myanmar Red Cross networks supported by IFRC – increased choice and local ownership in recovery, though thousands of families still require support to rebuild water and health systems and restore livelihoods [228].

In the Rohingya refugee context, protests on 31 March 2026 against proposed food ration cuts and a new vulnerability categorisation signalled deep mistrust of aid reductions and fears these measures would produce unequal distribution and internal divisions within displaced communities [227][279]. Persistent statelessness, arbitrary detentions, armed-actor activity and recruitment pressures in northern Rakhine continue to exacerbate discrimination and exclusion that shape community acceptance of assistance [237]. UNHCR operational updates show continued reliance on biometric family registration and UN-led assistance modalities alongside community cohesion activities, indicating that access to assistance and protection remains mediated through formal UN systems while registration and protection gaps persist [251][263].

At the structural level, commentators have warned that pooled-fund allocations and US fast-track funding have disproportionately flowed to UN agencies and large international NGOs in Myanmar – reported allocations of 54.6% to UN agencies and 45.4% to nine international NGOs – limiting direct funding to local actors and weakening locally led response capacity [258].

Environment

Environmental Conditions

A 7.7 magnitude earthquake on 28 March 2025 affected about 9.1 million people across multiple central and northern states/regions of Myanmar (including Chin, Rakhine, Sagaing, Kachin and Shan), causing widespread structural damage, displacement, and approximately 41,000 houses damaged or destroyed [314][325]. One year on (March 2026), recovery and humanitarian access remain constrained by overlapping environmental hazards – seasonal flooding and extreme heat – compounded by ongoing conflict and economic difficulties that worsen living conditions and impede rebuilding [321][311]. Priority reconstruction needs include restoring water and sanitation systems, health services, and shelter to enable recovery in hard-to-reach and conflict-affected areas [321][325].

Environmental Challenges

One year after the earthquake, IFRC/ICRC/MRCS and partners had reached more than 213,652 people across 31 townships, but thousands still require reconstruction of water, sanitation, and health services [325][321]. Community-led shelter reconstruction has incorporated Build Back Safer measures – including rainwater harvesting, improved ventilation, sanitation facilities, and solar energy – but significant gaps in WASH and service restoration persist [321][325]. Damaged or distant water sources, inadequate sanitation, and high shelter density increase protection risks and heighten the potential for waterborne disease and unsafe coping practices during water collection [314][321]. The Myanmar Gender in Humanitarian Action (GiHA) Working Group, co-led by UN Women and UNFPA, highlighted disproportionate impacts on women, girls, and marginalised groups, including very limited access to menstrual hygiene products and disrupted sexual and reproductive health services [311][314]. Ongoing conflict, seasonal floods, and extreme heat are compounding recovery needs, increasing risks to livelihoods and public health [321][325][314]. Myanmar imports roughly 90% of its fuel; de facto authorities have imposed fuel rationing and odd-even vehicle restrictions, reducing energy availability for households, agricultural machinery, and relief logistics [313][328]. Rising energy and fertilizer prices, restricted fuel access, and port labour shortages are threatening the upcoming cultivation season, exacerbating food insecurity and inflation [313].

Environmental Risks and Mitigation

Thailand's refined oil exports to Myanmar fell by 20 percent, further exacerbating domestic fuel shortages, while higher fuel and transport costs, increases in maritime war-risk insurance, and airspace restrictions are disrupting supply chains and raising humanitarian operational costs across the region [313][287]. WFP projects that if the Middle East crisis persists until mid-2026 with oil above US\$100/barrel, nearly 45 million additional people could face acute food insecurity, with direct implications for Myanmar's food security risks [313][287][301]. IFRC's recovery and mitigation efforts after the March 2025 earthquake have emphasised multipurpose cash assistance and community-led "Build Back Safer" shelter grants incorporating rainwater harvesting, improved ventilation, sanitation, and solar energy, supported by digital tools to improve transparency and aid delivery [321][325]. However, IFRC warned its Emergency Appeal for Myanmar was only 29.4% funded, limiting the scale-up of rehabilitation, livelihoods, sanitation, and disaster-preparedness activities needed to reduce future environmental and disaster risks [321][325]. Additionally, LPG shortfalls have forced some households to revert to firewood collection, causing local environmental degradation and associated health risks [316].

Conflict

Overview of the Ongoing Armed Conflict

In late March 2026, the junta intensified air and ground operations across multiple fronts—notably Sagaing, Rakhine, Chin, Magway, Bago and Kachin—causing civilian deaths, displacement and damage to civilian infrastructure [355][390][349]. Between 20 and 22 March 2026, airstrikes in Sagaing reportedly killed more than 20 civilians, struck a monastery sheltering displaced families in Katha and hit communities in Ayadaw and Kani townships, with additional strikes in Magway reported mid-March [355][349]. On 23 and 29 March 2026, junta air and naval attacks struck Arakan Army-held coastal towns in Rakhine—including Thandwe and Kyaukphyu—and bombed a village in Paletwa, Chin State, killing civilians including children and injuring others [390]. Observers reported more than 300

people killed in March 2026 alone, and independent local monitoring groups estimate at least 90,000 deaths since the 2021 coup [390][349]. A junta bombing of a prisoner-of-war detention site in Ann Township killed 116 detainees and injured 32 [390].

The junta has deployed fighter jets, naval artillery and drones, and carried out reported "double-tap" strikes frequently targeting areas without nearby fighting, amplifying civilian harm and rescue risks [349][390][387]. Health and education facilities have been directly hit—a hospital in Budalin was struck killing at least three people, and schools and monasteries in Kani and Katha were damaged or destroyed [349][355][390]. Movement restrictions and ongoing insecurity are constraining mobility and humanitarian access, with thousands reportedly unable to leave Katha and other affected areas, complicating evacuations and aid delivery [355][397].

The conflict environment is multi-front: the Arakan Army holds most of Rakhine while the junta retains key towns including Sittwe, Kyaukphyu and Manaung, and resistance/NUG-aligned forces captured and held multiple townships in recent operations—37 townships reported in 2025 [390][389]. Resistance forces face logistical strains including ammunition shortages and rising desertions, while effective junta drone use contributed to setbacks such as the withdrawal from Tigyain on 26 March 2026 [389][387]. Regional disruptions, including a global energy and logistics crisis, are raising operational costs and hampering humanitarian logistics into Myanmar, further limiting response capacity [359].

Conflict Stakeholders

The ruling junta is consolidating power through a military-stacked parliament, transitioning Min Aung Hlaing into the presidency, creating a Union Consultative Council and installing loyalists—placing Ye Win Oo as commander-in-chief to preserve military dominance [393]. External political and military backing from China, and continued support from Russia, has bolstered the junta's ability to hold or regain limited territorial gains [393][353]. The National Unity Government's human rights ministry recorded 2,293 airstrikes nationwide from February 2021 to January 2026 [390].

On the opposition side, the NUG launched the Steering Committee for the Emergence of a Federal Democratic Union (SCEF), bringing several major ethnic armed organisations—including the Kachin Independence Army, Karen National Liberation Army, Karenni forces and the Chin National Front—under a coordinated six-point agenda to dismantle military rule, end the military's political role, scrap the 2008 constitution, draft a federal charter and pursue transitional justice [348]. However, significant anti-junta actors remain outside SCEF—most notably the Arakan Army, Mon revolutionary forces and several large Shan State groups—highlighting ongoing factional divisions within the resistance [348][390]. The Arakan Army controls large parts of Rakhine State and shapes local security and return dynamics for displaced populations [390][342].

Local community defence groups remain active: the Chinland Defence Force—Kalay-Kabaw-Gangaw (CDF-KKG) called on adults to join the resistance on 29 March 2026 and held its second general assembly on 11–13 March 2026 to amend its draft constitution and set strategic policy [379]. Resistance formations are under strain from supply shortfalls and morale problems, with rising desertions driven by ammunition shortages, rationing and family pressure—one unit reported approximately 20 departures in two months from roughly 100 members [389].

Regional and parliamentary advocates have publicly condemned the junta's manoeuvres to entrench Min Aung Hlaing's rule and urged ASEAN and the international community to avoid legitimising the regime, including a statement released by the ASEAN Parliamentarians for Human Rights on 31 March 2026 [383].

Peace Negotiations

Formal peace negotiations and repatriation-related processes are effectively stalled due to ongoing conflict inside Myanmar and fragmentation among anti-junta and ethnic actors [341][347]. Bangladesh has shared biometric data on 829,036 Rohingya with Myanmar; as of January 2026, Myanmar verified approximately 354,751 individuals and identified 253,964 as "persons previously residing in Myanmar," yet Dhaka states repatriation cannot begin because security conditions are not conducive for return [341][356]. The European Union has insisted returns must be safe, voluntary and dignified, and warned that reports of arbitrary detention, forced recruitment and movement restrictions by armed actors—including the Arakan Army—fundamentally undermine conditions for return [354].

Bangladesh highlighted international engagement at a UNGA high-level event on 30 September 2025, held a UNHRC side event on 12 March 2026, and referenced the ICJ "Gambia vs Myanmar" merits hearings (12–29 January 2026), reflecting active diplomatic and legal pressure from international actors [341][356]. Anti-junta forces have formed the SCEF unified command structure to coordinate military and political objectives, but several major groups—including the National Unity Consultative Council and the Arakan Army—remain outside the alliance, limiting inclusivity for any unified negotiating front [347][348].

Despite jet-fuel shortages, the junta has intensified airstrikes and analysts report it may seek ceasefire agreements with some ethnic armed groups in borderlands while deploying more ground troops to retake resistance-held central areas—actions that undercut prospects for negotiated settlements [358][349]. The junta's diplomatic backing from China and Russia further sustains its bargaining position [353][386][393]. ASEAN's convening role and regional diplomatic forums remain tested by the crisis, as member states struggle to balance non-interference with the need for credible regional leadership on Myanmar [364].

Conflict Outlook

As of 3 April 2026, Myanmar's Humanitarian Needs and Response Plan (HNRP) lists 16.2 million people in need, 4.9 million people targeted and \$890 million required for the response [359]. WFP warned that sustained increases in fuel, transport and food prices—combined with shrinking funding—are raising humanitarian operation costs and heightening food insecurity risks if global shocks persist into mid-2026 [359]. Myanmar imports approximately 90% of its fuel; de facto authorities have imposed odd-even vehicle restrictions, Thailand's refined oil exports to Myanmar fell roughly 20%, and rising energy and fertilizer prices together with port labour shortages are threatening the upcoming cultivation season and food security [359].

External shocks—notably higher oil prices and increased maritime and insurance costs from Middle East escalation, together with projected donor aid cuts—are constraining logistics, increasing operational costs and worsening funding shortfalls for Myanmar responses [359][362][370].

On the military trajectory, the junta is pressing strikes on population centres to weaken resistance support and plans to pursue ceasefire agreements with some ethnic armed groups in borderlands while deploying more ground troops to retake resistance-held central areas [358]. With at least 90,000 deaths estimated since the 2021 coup, sustained high levels of violence reduce the likelihood of rapid nationwide de-escalation absent major political change [339]. Taken together, current trends point to continued intensification in central areas alongside possible localised ceasefire or accommodation deals in some borderlands, with limited prospects for a comprehensive negotiated settlement in the near term and heightened risks of worsening civilian harm, food insecurity and further displacement [358][359][362].

Displacement

Displacement Overview

One year after the 7.7 magnitude earthquake of 28 March 2025, assessments estimated about 9.1 million people were affected in the hardest-hit areas, with roughly 12,500 displaced and some 41,000 houses damaged or destroyed [407][420]. Recovery remains uneven and ongoing displacement persists, with women-headed households, persons with disabilities and other marginalised groups particularly affected, according to the Myanmar Gender in Humanitarian Action (GiHA) one-year review [407][420]. The regional humanitarian overview recorded Myanmar as having 16.2 million people in need, with 4.9 million targeted and \$890 million required, as of 3 April 2026 [414].

Intensified hostilities across northwestern Myanmar in March 2026 — including airstrikes between 20–22 March that reportedly killed more than 20 civilians, strikes on monasteries and schools, and movement restrictions that left thousands unable to leave Katha Township — have driven new civilian harm and displacement [426]. Independent reports indicate junta air campaigns in March 2026 caused mass casualties across Rakhine, Sagaing, Magway, Bago and Kachin, with more than 300 people reportedly killed in March alone [452][459].

Cross-border displacement remains protracted: Bangladesh continues to host about 1.17 million registered Rohingya refugees in Cox's Bazar camps, while trafficking and dangerous maritime movements of Rohingya across the Bay of Bengal and Andaman Sea persist [410][409][417]. Analysts warn that conditions in northern Rakhine — including arbitrary detentions, recruitment pressures and unresolved citizenship for Rohingya — fundamentally undermine prospects for safe, voluntary returns [408]. Humanitarian actors and local responders have delivered targeted assistance — IFRC, ICRC and partners reached more than 213,000 people across 31 townships in earthquake-affected areas — but access, protection and funding constraints continue to limit returns and durable solutions [416][410].

Living Conditions of the Displaced Population

One year after the March 2025 earthquake, local and international responders report ongoing displacement, unsafe or damaged shelters, disrupted essential services, and high protection risks across affected areas in central Myanmar [416][420]. The IFRC Emergency Appeal for Myanmar remained only 29.4% funded, limiting scale-up of recovery activities [416][406]. Cash shortages, loss of tools, stock and savings, and disrupted informal work have reduced livelihoods and income opportunities, leaving many families dependent on multipurpose cash and in need of sustained funding to rebuild homes, restore WASH and health systems, and re-establish livelihoods [407][416].

A Rapid Gender Analysis and GiHA infographic (30 March 2026) documented that women, girls and marginalised groups face disproportionate impacts, including overcrowded and unsafe shelters that elevate GBV risks, limited safe spaces, and severely constrained clinical and case-management GBV services [420][407]. Sexual and reproductive health and mental health services were found to be disrupted, with clinics collapsed and barriers to care — including distance, cost and damaged facilities — interrupting critical services for older persons and people with disabilities [407][420]. Water, sanitation and hygiene remain inadequate: water sources are often far from shelters, sanitation lacks privacy and accessibility for people with disabilities, fewer than 25% of women and girls could access menstrual hygiene products, and nutrition is stressed with 36% of women reporting skipped meals versus 28% of men [407][420]. People with disabilities lost assistive devices and faced evacuation and mobility barriers, while pooled fund support and rehabilitation, physiotherapy and assistive-device provision have been cited as part of recovery efforts [407][405].

Drivers of Displacement

Intensified hostilities across northwestern Myanmar — including reported airstrikes in Sagaing, Katha, Ayadaw and Kani between 16–22 March 2026 — have killed civilians, damaged civilian infrastructure and restricted movement, driving new displacement and trapping populations in affected areas [426]. On 28 March, junta troops burned a village on the Hpruso–Bawlakhe border, destroying an estimated 16 houses and preventing returns [426][446]. The 7.7 magnitude earthquake of 28 March 2025 continues to shape displacement dynamics one year on, with tens of thousands of homes damaged or destroyed and many families carrying ongoing shelter, recovery and protection needs [407][416].

In Rakhine State and along the Bangladesh–Myanmar frontier, Rohingya statelessness, expansion of armed actors (including the Arakan Army), reports of militarization, arbitrary detentions and recruitment pressures are undermining prospects for safe, voluntary return and increasing risks of cross-border displacement and exploitation [411][408][409]. Analysts warn that repatriation without structural reforms — restoration of citizenship, demilitarization, independent monitoring and accountability — would likely re-expose returnees to abuse and perpetuate cycles of displacement [408].

Economic shocks linked to the global energy crisis and the Middle East escalation — including rising fuel, transport and fertilizer costs — have compounded vulnerabilities in Myanmar; the country imports about 90% of its fuel, authorities have imposed odd–even vehicle restrictions, and reduced refined fuel flows (notably a reported ~20% fall in Thai exports) are threatening cultivation, food security and livelihoods ahead of the planting season [414]. Shrinking international funding, supply-chain disruptions and higher operational costs are further constraining humanitarian response and recovery, leaving thousands needing shelter, WASH and livelihood support and increasing the risk of secondary displacement and protracted needs [406][416][414].

Integration

UNHCR identified 141,532 newly arrived people (37,244 families) from Rakhine State between 1 January and 31 December 2025 through a biometric identification exercise; these new arrivals now comprise about 12% of the registered Rohingya population and remain without individual refugee identity documents while UNHCR continues to advocate for their full registration [410][422]. Bangladesh's closed-border policy and limited legal recognition continue to constrain access to asylum, movement and durable rights for Rohingya, keeping most dependent on humanitarian assistance rather than local labour market integration [410][411]. The UNHCR Bangladesh operation had received about USD 106.2 million (approximately 42% of a USD 255.5 million plan) as of 31 December 2025, prompting more targeted aid approaches [410].

As part of operational rationalization, UNHCR completed partner transitions for 2026–2029, reducing NGO partners from 16 to 12 and prioritising national NGOs while streamlining health, nutrition and protection partnerships [422][410]. Education and skills interventions include a UNHCR-supported six-month English and basic ICT programme in which 113 participants sat the IELTS in December 2025 to support future education and complementary pathways [422]. Livelihoods support on Bhasan Char showed resilience in July 2025: 88.8% of 240 UNHCR-supported refugee-led enterprises remained operational, though women-led businesses lag and require targeted market and gender-sensitive support [418]. Site-management changes also affect settlement dynamics: community messaging on the planned Transit Centre closure began on 7 December 2025, services were phased out by end-2025, and BRAC took over management with relocations to other camps from January 2026 [410].

Social cohesion pressures surfaced in a peaceful protest by hundreds of Rohingya in Camp 24 LMS on 31 March 2026 against proposed food-ration cuts and a proposed vulnerability categorisation system, with community leaders warning that cuts and classification could deepen divisions and disproportionately affect children, older people and female-headed households [411]. Inside Myanmar, the IFRC Emergency Appeal remained only 29.4% funded, limiting rehabilitation and long-term settlement support, while the Myanmar HNRP estimates 16.2 million people in need with a response requirement of about USD 890 million, indicating significant gaps that impede long-term settlement and integration prospects [406][416][414]. Rapid Gender Analysis and GiHA findings further highlight that women, persons with disabilities and LGBTQ+ people face persistent barriers to inclusion — including high GBV risks, disrupted sexual and reproductive health services, lost livelihoods and limited participation — undermining inclusive recovery and social cohesion [407][420].

Humanitarian Access

Humanitarian Access Overview

Hostilities in northwest Myanmar, including airstrikes between 20–22 March that reportedly killed more than 20 civilians and struck displacement sites, are constraining movement and leaving thousands unable to leave affected areas, limiting humanitarian access and civilian safety [487]. The 2026 Humanitarian Needs and Response Plan identifies 16.2 million people in need in Myanmar, with 4.9 million people targeted and \$890 million required, underscoring the scale of demand for assistance amid access constraints [478]. One year after the March 2025 earthquake, the Myanmar Red Cross Society with IFRC support reported reaching more than 213,652 people across 31 districts, but the IFRC emergency appeal remained only about 29.4% funded in late March 2026, restricting recovery scale and sustained operations [467][474].

International agencies' physical access is limited in many areas, increasing reliance on local actors for reach, while OCHA pooledfund allocations have been directed predominantly to UN agencies and large international NGOs with little or no direct funding to local organisations, affecting delivery modalities and localisation outcomes [481][480]. Regional logistics pressures — rising fuel and shipping costs, higher maritime warrisk insurance and increased transport times linked to the Middle East escalation — are raising operational costs, risking pipeline breaks and complicating deliveries into Myanmar [478][471].

Refugeerelated access pressures persist: Rohingya in Cox's Bazar protested proposed food assistance reductions on 31 March, reflecting funding shortfalls and changes to WFP's tiered rationing that will reduce assistance for large segments of the refugee population [469][492]. Bangladesh's closedborder stance continues to hinder safe access to asylum from Rakhine, while UNHCR recorded 141,532 newly identified arrivals in 2025 through the joint biometric exercise and continues to advocate for their registration and access to assistance [485].

Barriers to Humanitarian Access

Airstrikes and clashes in northwestern Myanmar in March — including a series of strikes between 20–22 March that hit monasteries and other civilian sites — killed more than 20 civilians, destroyed homes and shelters, and left thousands trapped or unable to leave areas such as Katha Township, sharply restricting movement and access for civilians and responders [487]. Conflict across the country since the 2021 coup has fragmented territorial control and restricted humanitarian access to many areas under nonjunta actors and active frontlines [512][509]. In Rakhine, expansion of armed actors including the Arakan Army, recruitment pressures, unresolved Rohingya statelessness, and reports of arbitrary detention undermine conditions for safe, voluntary returns and complicate protection and access for displaced populations [469][472].

A national energy crisis is further constraining operations: Myanmar imports about 90% of its fuel, de facto authorities imposed odd-even vehicle restrictions to ration supplies, and Thailand's refined oil exports to Myanmar fell roughly 20%, reducing fuel availability for humanitarian transport, markets and agriculture [478]. Regional logistics disruptions and rising transport, insurance and airfreight costs are raising humanitarian operational costs and creating supplychain delays that threaten timely delivery of food, fuel and relief items [471][487].

One year after the March 2025 earthquake, collapsed clinics, unsafe or damaged shelters, disrupted WASH systems and ongoing displacement continue to impede service delivery and necessitate prolonged rehabilitation to restore access to health, sanitation and shelter services [484][467][468]. Access is further compounded for marginalized groups: Rapid Gender Analysis and GiHA findings report womenheaded households, persons with disabilities and LGBTIQ+ persons face stigma, mobility barriers, loss of assistive devices, limited targeted outreach and severely reduced GBV and sexual/reproductive health services, with less than 25% of women and girls able to access menstrual products, limiting equitable aid reach [468][484]. The Emergency Telecommunications Cluster has advanced a "Connectivity as Aid" approach to address communications outages and access restrictions that continue to impede coordination, though gaps persist where national systems fail [488].

Humanitarian Access Gaps

Access gaps are most acute among displaced and marginalized populations. Women, girls, persons with disabilities, older persons and LGBTIQ+ people face disproportionate barriers to assistance and participation in recovery planning, as highlighted in the oneyear earthquake response review of March 2026 [484][468]. Gendered protection risks remain high, with overcrowded shelters, limited safe spaces and severely reduced access to GBV services – including clinical management of rape and case management – continuing to undermine protection and lifesaving care [468][484]. Health systems remain disrupted, with access to sexual and reproductive health services (including emergency obstetric care) and mental health services constrained by distance, cost and damaged facilities [468][484]. Sanitation facilities are frequently inaccessible to people with disabilities, and nutrition risks persist for girls and pregnant and breastfeeding women [468][484].

Rohingya refugees remain highly aiddependent and face critical service and funding gaps. The 2025 Joint Response Plan for the Rohingya crisis was reported 38% funded (US\$356.3 million received against a US\$934.5 million appeal), exacerbating prioritization and targeting dilemmas and contributing directly to the food ration cuts that prompted protests in Cox's Bazar on 31 March 2026 [479][469].

At the operational level, international agencies' limited presence in insecure areas forces reliance on local actors, while funding and contracting patterns concentrate resources with UN agencies and international NGOs rather than directly with local organisations, constraining principled reach and locally led delivery in hardtoaccess areas [480][481]. Taken together, critical unmet needs concentrate across GBV and protection, health (including sexual and reproductive health and mental health), shelter, WASH, food and nutrition sectors, with operational effectiveness further limited by insecurity, telecommunications outages and dependence on intermediary delivery mechanisms [468][484][479][488][480].

Information, Communication and AAP

Information Landscape

The humanitarian information landscape is shaped by a combination of UN agency reporting, working group analyses, biometric registration systems, and digital record platforms. The Myanmar Gender in Humanitarian Action (GiHA) Working Group published a one-year gendered-impact infographic on 30 March 2026, drawing on the Rapid Gender Analysis and inputs from local and women-led organisations, highlighting gaps in participation and elevated GBV and accessibility risks for women, persons with disabilities, and LGBTIQ+ persons [522][513]. IFRC and partners published one-year response updates on the March 2025 earthquake, noting assistance to over 213,652 people across 31 townships [525][527]. UNHCR Bangladesh reported that a joint biometric identification exercise (BIE) identified 141,532 newly arrived individuals in 2025 (approximately 12% of the refugee population), and that its Bangladesh operation was roughly 42% funded against a USD 255.5 million plan as of end-2025 [539]. The 2025 Joint Response Plan (JRP) for the Rohingya crisis was reported at 54% funded on the public tracker (USD 491.7M of USD 934.5M), with internal ISCG figures indicating approximately 65% funding coverage [528]. UNHCR has documented operational data-sharing and validation practices including a centralized digital platform to digitize MHPSS records to improve case follow-up and monitoring [514]. Funding shortfalls and operational changes by WFP and other agencies generated community concern and protests in Cox's Bazar on 31 March 2026, underscoring how resource constraints affect both programming and the information environment available to refugees and responders [521][541][550].

Communication Channels

Key communication channels supporting humanitarian operations include VHF radio repeater networks, interlinked VHF security channels, and a humanitarian chatbot averaging 32,780 users per month, as reported by the Global ETC [517]. IFRC and the Myanmar Red Cross deployed digital tools during earthquake recovery to improve transparency, community feedback, and secure support requests [525][527]. In Cox's Bazar, a RRRC-led SIM card pilot distributed 10,000 SIMs on 10 November 2025 to volunteers and elected Rohingya representatives, with UNHCR engaged to draft guidance and FAQs to support transparent selection, registration, and information sharing [514]. Community messaging was also used to communicate operational changes, such as the planned Transit Centre phase-out beginning 7 December 2025 [513][528]. Rohingya refugees in Cox's Bazar used protests and community gatherings to convey grievances about proposed food assistance reductions and classification policies on 31 March 2026, indicating that in-person gatherings and demonstrations remain primary feedback channels where formal mechanisms are insufficient [521][550].

Movement restrictions, ongoing airstrikes, and a national fuel shortage—including odd-even vehicle rationing—in late March–early April 2026 constrained mobility for civilians and responders, limiting face-to-face community meetings and field access [533][537]. Regional supply-chain disruptions tied to the Middle East escalation further raised fuel, transport, and logistics costs, disrupting humanitarian supply and communication lines in Myanmar as of early April 2026 [537][541]. Persistent gaps in consultation and transparency reported by communities and agencies point to ongoing challenges in the timeliness and accuracy of information exchange between humanitarian actors and affected populations [521][513].

Barriers to Information

Multiple structural and contextual barriers limit affected populations' access to critical information. The Myanmar GiHA Working Group (co-led by UN Women and UNFPA) reported on 30 March 2026 that persons with disabilities face limited accessible communication, with assistive devices lost, damaged, or unavailable, and that women, girls, and other marginalised groups face compounding barriers to access and participation in recovery and information channels [522][513]. A Rapid Gender Analysis (April 2025) found consistently low consultation rates across groups:

- Male-headed households: 31% consulted [513]
- Female-headed households: 29% consulted [513]
- Older persons: 26% consulted [513]
- Persons with disabilities: 20% consulted [513]

Ongoing hostilities, airstrikes, and movement restrictions in northwestern Myanmar—notably Sagaing—killed civilians and left thousands unable to leave affected areas, severely limiting mobility and access to information and services during the 17–30 March 2026 period [533]. Access to life-saving GBV and sexual and reproductive health services—including clinical management of rape and emergency obstetric care—remained severely limited, constraining survivors' ability to obtain critical protection information, while evacuation was further hindered by mobility barriers and limited support [513].

Misinformation and Rumors

Hundreds of Rohingya refugees staged a peaceful protest in Camp 24 LMS on 31 March 2026 against proposed cuts to food rations and a new aid categorisation system, arguing the classification would not reflect uniform hardship and could deepen divisions within camps [521]. Refugee leaders called for equal food distribution and transparent consultation processes with authorities and humanitarian agencies [521]. Protesters and analysts warned that funding shortfalls and shifts toward targeted aid models risk reducing assistance and heightening mistrust or tensions if prioritisation and communication are not handled transparently [521][543]. Barriers to information access for women, persons with disabilities, and other marginalised groups—as highlighted by the GiHA Rapid Gender Analysis and one-year infographic following the March 2025 earthquake—increase the risk that these groups may be excluded from accurate updates and are more vulnerable to misinformation [513][522].

Accountability Needs and Transparency

Accountability gaps persist across multiple dimensions of the humanitarian response. The Myanmar GiHA Working Group (co-led by UN Women and UNFPA) documented significant gaps in engagement during the earthquake response, with consultation rates of approximately 31% for male-headed households, 29% for female-headed households, 26% for older persons, and about 20% for persons with disabilities, alongside persistent male-dominated decision-making and the invisibility of LGBTIQ+ persons in community activities [513][522]. Analyses of pooled funding and localisation reveal structural accountability gaps: one review found 54.6% of a USD 136.1 million allocation in Myanmar went to UN agencies and 45.4% to nine international NGOs, with reports that US OCHA-linked funding did not go directly to local NGOs—raising concerns about equitable funding flows and the capacity of local actors to exercise accountability to affected communities [540][536]. The IFRC Emergency Appeal for Myanmar remained only 29.4% funded as of late March 2026, constraining IFRC and Myanmar Red Cross community-led approaches and digital tools aimed at improving transparency and community feedback in the earthquake response [525]. The Emergency Telecommunications Cluster advanced "Connectivity as Aid" standards and technical guidance through inclusive consultations to embed community feedback and accountability into telecommunications responses [517]. In Cox's Bazar, UNHCR was engaged to verify—but not select—recipients under the RRRC-led SIM card pilot, prompting UNHCR to draft guidance and FAQs to strengthen transparent beneficiary selection and safeguards [514].

Legal and Policy

Legal and Policy Framework

The international legal architecture governing the Rohingya crisis draws on a range of instruments, including the Universal Declaration of Human Rights, the International Covenant on Civil and Political Rights, the Convention on the Rights of the Child, customary International Humanitarian Law, and trafficking and child-protection obligations under the UNODC Palermo Protocol and CRC [581][582]. At the centre of accountability efforts, the "Gambia v. Myanmar" genocide case at the International Court of Justice reached its merits-phase hearings from 12–29 January 2026, reinforcing international scrutiny of Myanmar's conduct, with Bangladesh providing diplomatic and financial support via the Organisation of Islamic Cooperation [598][613]. Bangladesh also raised Rohingya conditions at the UN Human Rights Council in a side event on 12 March 2026, and OIC consultations are expected to produce two resolutions on the issue [598][613].

A foundational structural barrier remains Myanmar's 1982 nationality framework, which denies Rohingya citizenship and renders them effectively stateless, undermining enforceable protections and safe repatriation pathways [581][582].

On repatriation verification, Bangladesh has shared biometric records in six phases covering 829,036 Rohingya; as of January 2026, Myanmar had verified approximately 354,751 individuals and recognised 253,964 as "persons previously residing in Myanmar," yet Bangladesh has stated that repatriation cannot proceed while conflict and insecurity persist inside Myanmar [598][613].

UNHCR and partners continue biometric identification of new arrivals—139,378 people identified as of 30 November 2025, rising to 141,532 by 31 December 2025—and advocate for formal registration and access to assistance for those individuals [593][594][591]. Regional and civil society actors publicly called for upholding international human rights and humanitarian law amid junta political moves on 31 March 2026, stressing the link between governance, accountability, and protection obligations [583].

Funding and operational constraints affecting legal-policy implementation were reflected in refugee protests over proposed food ration cuts on 31 March 2026 and warnings from WFP and UNHCR about resource shortfalls. The IFRC Emergency Appeal remained significantly underfunded at 29.4% as of late March 2026, while IFRC/ICRC support to the Myanmar Red Cross is ongoing, limiting recovery and protection capacity [580][588].

Humanitarian Impact of Legislation

Myanmar's 1982 nationality framework, which renders Rohingya stateless, creates a structural protection vacuum exploited by trafficking networks and impedes regional enforcement of refugee and child-protection obligations, leaving affected populations without enforceable rights or safe return options [582][581][580]. In Bangladesh, registration relies on family cards issued through a biometric identification exercise that grant access to assistance but do not provide individual refugee identity documents; UNHCR continues to advocate for full registration of new arrivals [591][593]. Bangladesh's closed-border policy has hindered safe access to asylum for people fleeing Rakhine, while Rohingya in Cox's Bazar remain legally barred from formal employment, deepening dependence on humanitarian assistance [591][594][608].

Active hostilities and airstrikes in northwestern Myanmar—including reported strikes in Sagaing between 20–22 March 2026 that killed civilians, struck displacement shelters, monasteries and schools, and left thousands unable to leave Katha Township—are constraining freedom of movement and impeding humanitarian access [584]. Armed actors in northern Rakhine, including the Arakan Army, along with reports of arbitrary detention and forced recruitment, further undermine the conditions required for voluntary, safe, and dignified returns [581][580].

Funding shortfalls and aid policy changes are imposing legislatively-driven restrictions on entitlements and service access. WFP's tiered food assistance reduced entitlements for many refugees—with some receiving as little as US\$7 per person per month—prompting camp protests on 31 March 2026 [608][610][580]. The 2025 Joint Response Plan was approximately half-funded (reported at 54–65%), with USD 491.7 million received against a \$934.5 million appeal; Priority 1 activities were 93% funded but an overall gap of about \$32 million contributed to reduced services in 2025 and reprioritisation for 2026 [594][591][593].

Regional energy and logistics shocks—notably fuel and commodity price rises linked to the late-February 2026 Middle East escalation—are raising fuel, transport, and insurance costs, threatening humanitarian supply chains into Myanmar and Cox's Bazar [595][597][606]. Operational access and safety for humanitarian personnel remain constrained: 2025 was recorded as an exceptionally dangerous year for aid workers, and limited international access has increased reliance on local actors, raising legal and protection implications for programming and funding allocations [619][603]. Recovery and response policies also exhibit persistent inclusion shortfalls: Rapid Gender Analysis and GiHA findings one year after the March 2025 earthquake document disproportionate impacts on women, girls, persons with disabilities, and LGBTIQ+ people, limited GBV and clinical services, and exclusion from decision-making structures [586][585][588].

International Agreements Impacting the Crisis

The European Union reiterated political and financial support to Bangladesh following the 9th EU–Bangladesh Joint Commission meeting, with EEAS Deputy Managing Director Paola Pampaloni stressing that returns must be peaceful, voluntary, and based on consent [581]. The Myanmar Humanitarian Needs and Response Plan listed 16.2 million people in need, 4.9 million targeted, and \$890 million required, while WFP and regional briefs warn that rising fuel and logistics costs from the late-February 2026 Middle East escalation will further increase humanitarian operating costs across the region [595][597].

The junta's political manoeuvres to consolidate power—culminating in Min Aung Hlaing's election as president in early April 2026—have been widely criticised as legitimising military rule. Key regional partners such as China publicly congratulated him, complicating unified international engagement and weakening accountability mechanisms [599][609][583][612]. Targeted sanctions on junta figures exist, with Min Aung Hlaing sanctioned by several Western states, but efforts to restrict jet fuel have had limited effect; reports indicate jet fuel shipments to the junta from Iran since December 2025 that could sustain air operations for months, undermining measures intended to limit military capacity and affecting civilian protection [614][607].

The ASEAN crisis response framework continues to be tested: the ASEAN Parliamentarians for Human Rights condemned junta manoeuvres on 31 March 2026 and called on ASEAN, the UN, and the ASEAN chair to take urgent, coordinated action to uphold human rights and avoid premature re-engagement with the junta [583].

Limitations of Current Policies

Current legal and policy frameworks fail to establish the conditions for safe, voluntary, and dignified return of Rohingya. Arbitrary detentions, forced recruitment, movement restrictions, and unresolved citizenship collectively render returns unsafe and effectively non-consensual, despite verification progress in the bilateral repatriation process [581][580][598][613]. The gap between diplomatic commitments to "voluntary" repatriation and on-the-ground realities—lack of citizenship, limited accountability, militarised areas, restricted movement, and inadequate monitoring—continues to widen [581][598].

International accountability mechanisms remain constrained. Sanctions on junta figures have had limited deterrent effect, jet fuel continues to reach the military enabling sustained airstrikes on civilian infrastructure, and the junta's consolidation of political power further erodes enforcement of human rights and humanitarian obligations [614][607][583][612]. Statelessness and legal exclusion perpetuate protection vacuums exploited by trafficking networks and impede regional enforcement of refugee and child-protection obligations [582].

Shrinking donor support compounds these gaps: the 2025 Joint Response Plan was approximately half-funded (54–65%), prompting agencies to reduce services and re-calibrate responses for 2026, while concurrent regional shocks—fuel and commodity price rises linked to the Middle East escalation—are increasing logistical costs and threatening supply chains for Myanmar operations as of early April 2026 [591][594][593][595]. Border management and closed-border policies have hindered safe asylum access and complicated registration of new arrivals [591][594]. Overall, the combination of legal exclusion, underfunded response mechanisms, deteriorating security conditions, and weakened international enforcement produces a persistent and widening gap between policy intent and operational feasibility across all dimensions of the crisis [581][598][582].

Food Security and Livelihoods

Access to Food and Market Functionality

Myanmar's food and market access is under severe strain from compounding energy, conflict, and economic pressures. The country imports roughly 90% of its fuel, and de facto authorities have imposed odd-even vehicle restrictions while Thailand's refined oil exports to Myanmar fell by about 20%, constraining fuel availability and raising transport costs [639]. Diesel retail prices jumped to approximately 3,800 kyat per litre by mid-March 2026 (up from ~2,450 kyat in February), reducing affordability and increasing costs for transport, agricultural inputs and trade [644]. Rising energy and fertilizer prices, restricted fuel access, and port labour shortages are threatening the upcoming cultivation season and compounding food insecurity, inflation, and household stress [639]. Maritime uncertainty and higher fuel, transport, and insurance costs are also increasing logistics expenses, raising the cost and risk of humanitarian food operations affecting Myanmar [639]. Hostilities — including clashes and airstrikes in north-west Myanmar — and movement restrictions continue to limit civilian mobility and access to markets and services, with large numbers reported unable to leave affected areas [636]. Myanmar's Humanitarian Needs and Response Plan (HNRP) records 16.2 million people in need, 4.9 million targeted, and US\$890 million required, indicating large unmet needs for food and livelihoods support [639].

Coping Mechanisms

Funding shortfalls and supply-chain constraints have forced agencies to tighten assistance, increasing household reliance on targeted humanitarian aid and raising risks of resort to negative coping strategies [638][642][634]. A Rapid Gender Analysis (30 March 2026) found households cutting food intake, with 36% of women reporting skipping meals versus 28% of men, and documented rising protection-related harmful coping mechanisms including family violence, child marriage, and trafficking [635]. In the Rohingya refugee response in Bangladesh, WFP introduced a tiered distribution system in which approximately 17% of the camp population will receive as little as \$7 per month, while roughly one third classified as "extremely food insecure" will continue to receive \$12 per month [656][647]. Rohingya refugees in Cox's Bazar protested these proposed reductions on 31 March 2026, stressing that most families are entirely dependent on humanitarian aid and warning that cuts would disproportionately harm children, older people, and female-headed households [643]. Community testimony links these changes to increased consideration of dangerous coping options, including attempts to return to Myanmar or risky sea journeys to other countries [656][647]. On Bhasan Char, UNHCR recorded an LPG shortfall that temporarily excluded about 2,200 of 5,700 households from distribution, with affected families observed reverting to firewood, rationing fuel use, and undercooking food [641][642]. Broader regional energy and supply disruptions — including fuel rationing in Myanmar and rising transport and fertilizer costs — are further aggravating food-security pressures and increasing the likelihood of households adopting negative coping strategies [637][639].

Livelihood Disruption

Conflict, economic shocks, and energy constraints have severely disrupted livelihoods across Myanmar. A Rapid Gender Analysis coordinated by the Myanmar Gender in Humanitarian Action (GiHA) Working Group found that jobs and incomes were lost rapidly, families lost tools, stock, and savings, and cash shortages and banking disruptions limited recovery. Women-headed households and women in informal work faced greater barriers to restarting livelihoods [635]. De facto authorities implemented fuel rationing, alternate-driving days, and mandatory remote work for public officials to conserve supplies, further constraining economic activity [637]. Local resistance units have also reported rising desertions in recent months linked to shortages of rations and insufficient income, underscoring wider economic strains on households and community-level income sources [682]. IFRC and the Myanmar Red Cross reported that multipurpose cash grants were used by families to repair homes, buy food, replace belongings, or pay medical fees, but thousands still require support to rebuild livelihoods. The IFRC Emergency Appeal for Myanmar was only approximately 29.4% funded in late March 2026, limiting the scale-up of recovery and livelihood support [645][646]. Declining international aid flows and projected donor cuts further increase the risk of reduced external support for livelihoods and economic recovery [652][654].

Impact on Agricultural Activities and Production

Agricultural production in Myanmar faces overlapping threats from energy constraints, conflict, and incomplete disaster recovery. Rising fuel and fertilizer prices, restricted fuel access for machinery, and port labour shortages are threatening the upcoming cultivation season [639]. Regional disruptions to ammonia and nitrogen shipments are constraining fertilizer supplies, with knock-on risks for Myanmar farmers who depend on imported fertilizers [640]. Hostilities across northwestern Myanmar in late March caused civilian harm, displacement, and damage to civilian infrastructure, with movement restrictions limiting mobility and market access for farming communities in areas including Sagaing and Katha Township [636]. One year after the March 2025 earthquake, recovery remains incomplete and thousands of families continue to need support to rebuild livelihoods, slowing the restoration of agricultural activities in affected areas [645].

Food and Livelihood Needs and Current Response

Humanitarian food and livelihood assistance in Myanmar has centered on multipurpose cash transfers, emergency shelter and household items, shelter grants for community-led reconstruction using "Build Back Safer" techniques, and technical support for livelihoods, WASH, and sanitation recovery [646][645]. Through IFRC, ICRC, and partner national societies, the Myanmar Red Cross Society reached more than 213,652 people across 31 townships with early relief and cash-based support one year after the March 2025 earthquake (reported 27 March 2026) [646][645]. MRCS operations are supported operationally and technically by IFRC/ICRC and partner societies, including the use of digital tools to improve transparency [646][645][642]. Despite this reach, the IFRC Emergency Appeal remained only 29.4% funded, limiting capacity to scale up recovery and livelihoods interventions [646][645]. In the connected Rohingya response in Bangladesh, UNHCR and partners coordinate assistance with government counterparts (RRRC, APBn) under the

Joint Response Plan, which remained only partially funded in 2025 – reported at 54–65% by different trackers [641]. WFP’s new tiered assistance – reducing some beneficiaries from \$12 to as little as \$7 per month – triggered protests in Camp 24 on 31 March 2026 and increases risks of heightened food insecurity among refugees dependent on aid [643][656][647]. Persistent gaps include funding shortfalls, unmet needs for WASH, health and livelihood restoration, limited access for persons with disabilities and other marginalised groups, and agricultural risks from fuel and fertilizer constraints that could undermine recovery and food security [646][645][635][639].

Education

Learning Environment and Facility Conditions

The 28 March 2025 earthquake damaged or destroyed approximately 1,800 schools across the hardest-hit areas, where more than 9.1 million people were affected [687][693]. One year on, recovery remains uneven: many schools and learning spaces are still unsafe or repurposed, sanitation at sites often lacks privacy and is not accessible for persons with disabilities, and less than 25% of women and girls could access menstrual hygiene products after the quake [687][693]. Separately, ongoing conflict and airstrikes in March 2026 have directly hit schools and other civilian infrastructure—including a school struck in Kani Township on 21 March and attacks on monastery shelters and schools in Katha and other locations—causing civilian casualties and further disrupting education access [691][717][719]. Despite community-led shelter and reconstruction efforts supported by Myanmar Red Cross (MRCS) and IFRC, access constraints and funding shortfalls limit the pace of school reconstruction and the scaling of safe learning environment interventions [689][690]. IFRC’s Emergency Appeal for Myanmar was funded to only 29.4% in late March 2026, constraining the scale-up of recovery activities including reconstruction of education facilities [689][690].

Access to Education and Barriers

One year after the earthquake, thousands of families remain displaced with education facilities destroyed or damaged, slowing enrolment and return to classes while funding gaps constrain reconstruction and education services [687][690][689]. Ongoing hostilities and airstrikes in March 2026—including strikes between 20–22 March that hit a monastery sheltering displaced people and an attack on a school in Kani Township on 21 March—caused civilian deaths and further disrupted children’s access to education, with movement restrictions preventing many civilians from leaving affected areas [691]. In the Rohingya response, closure of schools and learning programmes following funding shortfalls contributed to surges in child protection risks including kidnapping, child marriage, and child labour, even as the 2025 Joint Response Plan included teacher stipends and other education support in Priority 1 funding [705][692]. Key access barriers documented across contexts include widespread displacement, damaged and destroyed school infrastructure, ongoing insecurity and movement restrictions, and funding shortfalls limiting reconstruction and education service delivery [687][691][690][689][705].

Education Needs and Current Response

Key education needs persist one year after the earthquake, with thousands of families and school facilities still requiring support to restore safe and inclusive learning [687][690]. Reconstruction of water, sanitation, health, and school infrastructure will require continued investment, while ongoing displacement, high protection risks for women and marginalised groups, and persistent underfunding threaten continuity of education services [690][689]. IFRC and Myanmar Red Cross reached over 213,652 people across 31 townships with shelter, health, and essential items in the year following the earthquake [689][690], though the IFRC Emergency Appeal remained only 29.4% funded, limiting scale-up of rehabilitation activities [690][689]. Humanitarian support linked to displacement contexts includes education components in the Rohingya Joint Response Plan—with teacher stipends listed among Priority 1 essential activities—and UNHCR-supported training for 113 participants in an English and basic ICT programme who sat the IELTS exam as part of education and skills efforts for affected populations [694][695]. Coordination on recovery and inclusive response has involved the Myanmar Gender in Humanitarian Action (GiHA) Working Group, co-led by UN Women and UNFPA and including women-led and local organisations, alongside Myanmar Red Cross volunteers working with IFRC, ICRC, and national societies to deliver multi-sector assistance that overlaps with education needs [693][690][689].

Health

Availability and Access to Healthcare Services

One year after the March 2025 earthquake, restoration of water and health systems remains essential. IFRC/ICRC support, together with Myanmar Red Cross Society (MRCS) volunteers, reached more than 213,652 people across 31 townships, though the IFRC Emergency Appeal was only 29.4% funded, limiting scale-up of recovery including health services [737][738]. Families used multipurpose grants to pay medical fees, but thousands still require restoration of access to health care in hard-to-reach areas [737][738]. A GiHA Rapid Gender Analysis (30 March 2026) found that clinics had collapsed in affected areas, access to sexual and reproductive health – including emergency obstetric care and clinical management of rape – was severely limited, critical care for older persons and people with disabilities was disrupted, and menstrual-hygiene access was very low (under 25% for women and girls) [736][744]. Post-earthquake pooled funds supported rehabilitation, physiotherapy, and provision of wheelchairs and other assistive devices for persons with disabilities, though many assistive devices were lost or damaged and needs persist [740][736].

Ongoing conflict has further compounded access challenges. Airstrikes between 20–22 March reportedly killed dozens of civilians and struck a monastery sheltering displaced families in Katha Township, exacerbating damage to local health access points [742][776]. Health facilities and medical personnel have been directly affected by conflict-related attacks, with monitoring noting dozens of health-worker deaths and frequent strikes on civilian infrastructure including medical centres, forcing closures and evacuations [763][776]. Movement restrictions, insecurity, and rising energy and fuel constraints are limiting civilian mobility and complicating humanitarian logistics, further hindering people’s ability to reach functioning health facilities [742][739][753].

Humanitarian priorities identified include restoring health and mental health services, re-establishing inclusive sexual and reproductive and GBV clinical services, and scaling disability-inclusive rehabilitation and assistive-device provision as part of recovery planning [736][737][740].

Disease Outbreaks

WASH deficits in displacement settings significantly raise communicable disease transmission risks. Less than 25% of women and girls could access menstrual hygiene products, water sources were often far from shelters, and sanitation facilities frequently lacked privacy or disability access – conditions that elevate transmission risks for diarrhoeal and other infectious diseases among displaced populations [736]. Médecins Sans Frontières documented cases of severe malnutrition among Rohingya survivors accompanied by malaria and parasitic infections, underscoring ongoing infectious disease risks among displaced and trafficked populations [750].

In refugee settings, UNHCR found that maternal mortality declined from 46 to 37 in 2025 while perinatal deaths increased by 17% (from 491 to 574), indicating worsening perinatal health outcomes that may reflect health-service and referral bottlenecks [743]. Ongoing hostilities and airstrikes in northwestern Myanmar have damaged health infrastructure, caused civilian casualties and displacement, and restricted movement, limiting access to care and complicating outbreak detection and response [742]. Regional fuel and logistics shocks – linked to Myanmar's heavy reliance on fuel imports and measures to ration supplies – are increasing transport and operational costs and threatening supply chains for health commodities, which could impede vaccination and outbreak response efforts [739][753]. Recovery needs remain large and international appeal funding is limited, constraining capacity to rehabilitate health services and WASH systems needed to prevent and control disease outbreaks [738][737].

Health System Challenges

One year after the 28 March 2025 earthquake, many health facilities remain damaged or collapsed, disrupting critical care for older people, persons with disabilities, and other clinical services in affected areas [736]. Attacks on health care have intensified: the WHO Surveillance System for Attacks on Health Care reports Myanmar among countries with the highest numbers of health personnel killed, with 148 reported in the monitoring period [763]. Fuel shortages compound these structural challenges – Myanmar imports approximately 90% of its fuel, and de facto authorities have imposed odd-even vehicle restrictions – raising operational costs and constraining both humanitarian and health service delivery [739].

Shrinking international aid and projected ODA reductions are creating funding constraints that increase reliance on humanitarian assistance and risk slowing health-sector recovery [747]. Pooled funds and the Myanmar Humanitarian Fund have supported rehabilitation, physiotherapy, provision of wheelchairs, and psychosocial services for people with disabilities and earthquake survivors, but gaps in equipment and sustained services persist [740]. Local responders, notably the Myanmar Red Cross supported by IFRC and partners, have sustained first-aid and health support and delivered multipurpose cash and shelter assistance, but reconstruction of water, sanitation, and health systems and full restoration of access to health care remain incomplete and will require continued investment [738][737].

Mental Health and Psychosocial Support (MHPSS)

The Myanmar Gender in Humanitarian Action (GiHA) Working Group's Rapid Gender Analysis (April 2025) and related one-year gender findings (30 March 2026) report high psychological distress and severely limited access to mental health support and GBV clinical services among earthquake-affected communities, with women, women-headed households, persons with disabilities, and LGBTIQ+ people facing specific barriers to participation and services [736][744]. IFRC and the Myanmar Red Cross Society's one-year recovery updates prioritised restoring health and mental health services, with volunteer-led health support reaching more than 213,652 people across 31 townships, while noting ongoing gaps in service restoration [737][738].

The Myanmar Humanitarian Fund supported psychosocial services for people with disabilities and earthquake survivors, including physiotherapy, wheelchairs, and counselling [740]. In refugee settings, UNHCR launched digitalisation of MHPSS records in November 2025 to centralise documentation for community para-counsellors and psychologists, improving case follow-up, monitoring, and technical supervision [743]. Overall, MHPSS services remain limited and unevenly accessible – partially integrated into recovery and protection efforts but insufficient to meet the high psychosocial needs of displaced populations, earthquake survivors, and GBV survivors [736][740][737][743].

Health Needs and Current Response

Key figures from the March 2025 earthquake response:

- An estimated 9.1 million people were affected across hardest-hit states and regions, of whom approximately 4.8 million were women and girls [736][744].
- IFRC/ICRC, together with MRCS and partners, provided assistance to more than 213,652 people across 31 townships as of 27 March 2026 [737][738].
- The IFRC Emergency Appeal remained markedly underfunded at 29.4%, limiting scale-up of recovery activities [737][738].
- Some 223,000 pregnant women were estimated in affected areas, with severely limited access to emergency obstetric care [736][744].

Urgent healthcare needs centre on disrupted sexual and reproductive health services, interruption of chronic disease management for older people and persons with disabilities, and high levels of psychological distress with insufficient MHPSS; many primary clinics collapsed and survivors face persistent distance, cost, and infrastructure barriers to accessing care [736][744]. Protection-related health needs are acute: overcrowded and damaged shelters have elevated GBV risks while access to lifesaving GBV services – including clinical care, case management, and safe spaces – remains limited [736][744].

Current health response modalities delivered by local and international actors include first aid and primary health care by MRCS volunteers, multipurpose cash assistance used by families to pay medical fees and replace lost essentials, emergency shelter and essential items, and community-led shelter initiatives integrating basic WASH and sanitation features [737][738]. Coverage remains limited relative to needs, with assistance reaching only a fraction of the millions affected while reconstruction of health, water, and sanitation systems continues to lag [737][738][736][744].

Key gaps and constraints include under-resourcing and funding shortfalls, damaged and under-resourced health facilities, limited availability of clinical management for sexual violence and emergency obstetric services, reduced access for older people and persons with disabilities, shortages of safe GBV service spaces, and logistic and mobility barriers exacerbated by ongoing hostilities and movement restrictions — including airstrikes and civilian casualties in late March 2026 — in northwestern areas [737][738][736][744][742]. Coordination is led through a mix of national and international actors: the GiHA Working Group is co-led by UN Women and UNFPA and amplifies inputs from women-led and local organisations, while IFRC/ICRC support has enabled MRCS and its volunteer network to deliver health and first-aid services with support from 32 national societies and other partners [744][736][737][738]. Sustained international funding and scaled support are needed to expand health service coverage and specialised care — including SRH, MHPSS, and chronic care — across affected areas [744][736][737][738].

Nutrition

Availability and Access to Nutrition Services

Myanmar's humanitarian needs remain high: the 2026 Humanitarian Needs and Response Plan lists 16.2 million people in need, 4.9 million targeted and \$890 million required as of 3 April 2026 [784]. Movement restrictions, ongoing insecurity and limited humanitarian access in conflict-affected areas continue to impede malnutrition screening, supplementary feeding, and maternal and infant nutrition service delivery [785]. One-year assessments after the March 2025 earthquake report persistent nutrition risks for girls and pregnant and breastfeeding women, severely limited sexual and reproductive health services, and ongoing barriers to care caused by distance, cost and damaged facilities [786][790]. Rapid Gender Analysis findings further highlight coping behaviors including reduced meal intake — 36% of women skipped meals versus 28% of men — alongside continued limited access to essential services [786][790]. The Myanmar Red Cross Society, supported by IFRC and ICRC, delivered first aid, health care, food, safe water, shelter items and multipurpose assistance to more than 213,652 people across 31 townships; however, the IFRC Emergency Appeal was only 29.4% funded, constraining scale-up of recovery and service restoration [787][789]. Regional supply-chain disruptions linked to the Middle East escalation have placed additional pressure on humanitarian logistics and food-aid deliveries, with WFP reporting roughly 70,000 tonnes of aid affected — enough to feed approximately 800,000 people for three months — increasing shipping, insurance and land-route costs [788][793].

Nutrition Needs and Current Response

Operational constraints are compounding food insecurity across Myanmar. Rising fuel and fertilizer prices, restricted fuel access — including Myanmar's reliance on imported fuel at around 90% and odd-even vehicle restrictions — and port labour shortages are threatening the upcoming cultivation season and driving inflation [784][785][793][803]. Ongoing hostilities, airstrikes and movement restrictions in northwestern and other conflict-affected areas are causing displacement, damaging civilian infrastructure and hampering the delivery of nutrition and other life-saving services [785]. Key gaps constraining the coverage and reach of nutrition and community-based responses include underfunded appeals and declining aid flows, logistics and supply-chain disruptions, fuel and agricultural input shortages, and restricted access to health and nutrition services in conflict areas [784][786][789][785][788].

WASH

Availability of Water Sources

UNHCR and partner NGO Forum constructed 20 earthen dams as temporary water reservoirs across five Teknaf camps to mitigate dry-season shortages, with monitoring from December to assess whether the minimum standard of 20 litres per person per day could be met [816]. In 2025, water trucking was required for 80 days—from 10 March to 29 May—to address supply shortfalls in the five affected camps [816]. The Myanmar GiHA Working Group's one-year analysis (30 March 2026) found that water sources were often far from shelters, making collection time-consuming and unsafe and increasing protection risks, particularly for women and girls [818][820]. Earlier displacements and self-evacuations also led residents to dismantle shelters and WASH facilities for materials, undermining sanitation infrastructure and increasing reconstruction needs [816]. IFRC and the Myanmar Red Cross promoted community shelter reconstruction incorporating rainwater harvesting and integrated sanitation through Build Back Safer approaches, noting that rebuilding water and sanitation systems remains a priority for recovery [817][836].

Access to Sanitation Facilities and Hygiene Practices

Sanitation facilities frequently lacked privacy and were not accessible for people with disabilities, while marginalised and displaced groups—especially women-headed households, older persons, and people with disabilities—faced additional barriers to accessing inclusive services [818]. A Rapid Gender Analysis coordinated by the GiHA Working Group in April 2025 found that fewer than 25% of women and girls could access menstrual hygiene products, with shortages affecting health and dignity [818][820]. The GiHA one-year infographic (30 March 2026) reiterated the disproportionate impacts on women, girls, and marginalised groups, highlighting ongoing disruptions to essential services including WASH [820]. Community-led shelter reconstruction supported by the Myanmar Red Cross and IFRC incorporated sanitation facilities and rainwater harvesting as part of Build Back Safer designs, though continued investment will be required to fully restore these systems [836][817].

Waste Management and Vector-Borne Disease Risks

Information on waste management systems and vector-borne disease risks in the affected areas remains limited in available reporting. However, the dismantling of shelters and WASH facilities by displaced residents undermined sanitation infrastructure, creating conditions that heighten risks of waste-related health hazards and disease transmission [816]. Ongoing gaps in sanitation coverage—including facilities lacking privacy and poor accessibility—compound these risks, particularly for vulnerable groups such as women, girls, and persons with disabilities [818].

Main WASH Needs and Humanitarian Response

One year after the 28 March 2025 earthquake, IFRC, ICRC, and the Myanmar Red Cross reported supporting more than 213,652 people across 31 districts, with WASH rehabilitation and reconstruction cited as ongoing priorities as of 27 March 2026 [817][836]. Thousands of families still require support for integrated shelter, sanitation, and disaster-preparedness measures, and rebuilding water and sanitation systems remains necessary to restore services and livelihoods [817][836]. Community-led shelter reconstruction has enabled hundreds of families to build safer, locally appropriate homes through Build Back Safer approaches that incorporate rainwater harvesting and sanitation features [817][836]. Scaling up WASH rehabilitation is constrained by limited funding—IFRC's Emergency Appeal was only 29.4% funded—alongside ongoing conflict, floods, and extreme heat that continue to impede recovery and service restoration [817][836].

Shelter and Non-Food Items (NFI)

Damage to Housing and Shelter Needs

One year after the 28 March 2025 7.7-magnitude earthquake, an estimated 9.1 million people were affected and about 41,000 houses were damaged or destroyed [873][874]. Many households remain unable to return or rebuild and continue to occupy unsafe or damaged shelters, with overcrowding in temporary shelters increasing protection and GBV risks [873][875]. Women-headed households, persons with disabilities, and LGBTIQ+ persons have been disproportionately affected and face barriers to accessing shelter assistance and decision-making in recovery processes [873].

Conflict dynamics and repeated airstrikes in March 2026 have destroyed homes and communal infrastructure—including schools and health facilities—constrained mobility and access for assessments and repairs, and impeded humanitarian shelter interventions [877][899][898]. Local incident reports also document conflict-related shelter losses, including an estimated 16 houses burnt in a Hpruso-Bawlake border village in late March and mass forced evictions affecting 80+ households in Hopong at end-March 2026 [897][909]. Return and reconstruction are further constrained by land-tenure disputes, forced land seizures, the presence of landmines, and limited funding and materials, undermining timely, safe, and durable shelter solutions and the restoration of community services [909][897][875][873].

Living Conditions in Camps or Settlements

A Rapid Gender Analysis by the Myanmar Gender in Humanitarian Action (GiHA) Working Group found that many displaced people—particularly women-headed households, persons with disabilities, and LGBTIQ+ persons—continue to live in unsafe or damaged shelters, face overcrowding with heightened GBV risks, and have severely limited access to sexual and reproductive health, mental health, and protection services [873][879]. Water and sanitation facilities often lack privacy and accessibility, fewer than 25% of women and girls could access menstrual hygiene products, assistive devices were lost or damaged, and evacuation was difficult for people with mobility barriers [873][879].

In Rohingya camps, UNHCR figures as of November–December 2025 placed the camp population at approximately 1.17 million [876][888]. A post-relocation survey of families returning to Block F, Camp 4-Extension (March 2025) found that ~90% considered the rebuilt block well planned, 76% said shelters had improved, and 56% reported insufficient indoor living space due to reduced shelter size [876]. Fire risk remains a critical concern, with 231 incidents recorded in UNHCR-managed camps and 452 in IOM-managed camps in 2025 (683 total), affecting 733 households; key drivers include high shelter density, narrow access roads, water scarcity, and seasonal winds [880]. To address dry-season water shortfalls, UNHCR and partners constructed 20 earthen dams as temporary reservoirs and required 80 days of water trucking from 10 March–29 May 2025, with monitoring targeting a 20 litres/person/day standard [876].

On 31 March 2026, hundreds of Rohingya in Camp 24 staged protests against proposed reductions in food assistance and a new aid categorization system, warning that cuts would disproportionately affect children, older people, and female-headed households and could fuel unrest or risky onward movements [882]. Under the World Food Programme's new tiered system, monthly assistance for about 17% of the camp population was reported to be reduced to as little as US\$7, while roughly one-third classified as "extremely food insecure" continue receiving US\$12 per person per month—a change humanitarian actors warn may push people toward dangerous migration routes [886][887]. Declining funding and regional energy and logistics pressures are further reducing service levels and increasing operational constraints, putting basic shelter, WASH, and food assistance supply chains at risk [888][880][881].

NFI and Shelter Needs and Current Response

IFRC, ICRC, and 32 National Societies—led by the Myanmar Red Cross Society (MRCS)—delivered emergency shelter, health support, essential household items, and multipurpose cash to more than 213,652 people across 31 districts in the year following the March 2025 earthquake [875][874]. MRCS led distributions and multipurpose cash programming, used grants for home repairs, and supported a community-led shelter approach enabling hundreds of families to build safer, locally appropriate homes using Build Back Safer principles, including in hard-to-reach areas through strengthened systems and digital tools [875][874]. Pooled-fund-supported recovery activities also included rehabilitation, physiotherapy, and provision of wheelchairs and assistive devices for people with disabilities affected by the earthquake [878].

Despite this response, significant gaps remain. The IFRC Emergency Appeal for Myanmar was only 29.4% funded, limiting the ability to expand recovery and integrated shelter activities [875][874]. Ongoing hostilities and airstrikes in northwestern Myanmar and Rakhine in late March 2026 have caused new displacement, destroyed homes, and restricted movement, further complicating NFI and shelter deliveries and limiting humanitarian access [877][899]. Thousands of families continue to require support to rebuild homes, livelihoods, and essential services [873][874].

Protection

Impact on civilians

No data available for this section.

Factors Driving protection risks

No data available for this section.

Psychological and mental health impacts

No data available for this section.

Protection Needs and Current Response

No data available for this section.

Child Protection concerns

No data available for this section.

Violence against women and girls

No data available for this section.

Vulnerable Groups / Special Needs Groups

Unaccompanied and Separated Children

Humanitarian sources document growing vulnerability of unaccompanied and separated Rohingya children to transnational trafficking, forced labour and early marriage, with MSF reporting rising numbers of unaccompanied minors reaching Malaysia [927]. Cuts to food assistance and deteriorating conditions in Cox's Bazar are pushing families and children toward dangerous onward movements by sea — routes with high mortality and disappearance rates — heightening risks for separated children [920][940][932][927]. Reports from Rakhine and conflict-affected areas highlight arbitrary detentions and increasing recruitment pressures on Rohingya youths, raising concerns about forced recruitment of minors by armed actors [920][925].

One year after the March 2025 earthquake, the Myanmar Gender in Humanitarian Action Working Group found that overcrowded shelters and disrupted services increased protection risks, including child marriage and trafficking, while access to GBV case management and clinical care remained severely limited [918][924]. UNHCR's biometric identification exercise recorded 141,532 newly arrived individuals (37,244 families) who were issued family cards granting access to assistance, but these do not constitute individual refugee identity documents, limiting formal documentation that can aid tracing and reunification efforts [930][931]. Structured alternative-care capacity and child protection case-management remain constrained across responses, and operational changes such as the planned phase-out of the Transit Centre — with residents relocating to other camps under BRAC management from January 2026 — may further disrupt existing placements and protection arrangements for separated children [931][918][924].

Pregnant and Lactating Women

A one-year Gender in Humanitarian Action (GiHA) assessment (30 March 2026) and an earlier Rapid Gender Analysis found access to sexual and reproductive health (SRH), emergency obstetric care and GBV services severely limited, with damaged clinics, long distances and ongoing displacement restricting prenatal and postnatal care [924][918]. Nutrition and hygiene gaps further heightened risks for pregnant and breastfeeding women: less than 25% of women and girls could access menstrual hygiene products, and 36% of women reported skipping meals, increasing maternal vulnerability [918]. Overcrowded and unsafe shelters are increasing GBV risks, and access to clinical management of rape and case-management services remains severely limited, reducing timely care for survivors including pregnant women [918][924].

In UNHCR-managed Rohingya camps, a social autopsy conducted in November 2025 identified limited blood donors, delays in referral for surgical care and reluctance to seek hospital-based services as key drivers of poor maternal outcomes; maternal deaths fell from 46 in 2024 to 37 in 2025, while perinatal deaths rose from 491 to 574 [926]. Escalating hostilities and movement restrictions across northwestern Myanmar, including airstrikes in late March 2026, have caused civilian harm, constrained mobility to health facilities, and resulted in pregnant women being injured in attacks in Rakhine State [919][935].

Adolescents and Youth

The 28 March 2025 earthquake damaged around 1,800 schools across the hardest-hit areas, disrupting education for adolescents and youth [918]. One year on (late March 2026), recovery remains uneven, with many displaced families still living in unsafe or damaged shelters and limited access to services, constraining youth return to school and livelihood opportunities [918][922][923]. Airstrikes and clashes in northwestern Myanmar between 20–22 March 2026 reportedly killed displaced civilians and struck civilian shelters and a school, further limiting safe mobility and disrupting education and protection for children and adolescents [919]. GiHA Working Group findings document high psychological distress and severely limited access to mental health and GBV case management services, reducing available psychosocial support for young people affected by the earthquake and displacement [918][924].

Reports indicate rising recruitment pressures in Rakhine, with risks of forced recruitment and arbitrary detention undermining prospects for safe returns and exposing adolescents to involvement in violence [925]. Resistance forces reported rising desertions among young fighters in early March 2026, linked to shortages of weapons, rations and low morale, reflecting volatile recruitment and retention dynamics among youth combatants [958]. Investigations also document transnational trafficking routes exposing Rohingya children and unaccompanied minors to jungle detention, ransom, forced labour, sexual exploitation and early marriage during irregular movements [927].

On the livelihood and skills front, UNHCR-supported English and basic ICT training resulted in 113 participants sitting the IELTS in December 2025, and assistance was provided to 240 refugee-led enterprises on Bhasan Char, though women-led businesses lagged behind [930][926][931]. IFRC and Myanmar Red Cross community-led shelter programmes and multipurpose cash assistance reached over 213,652 people across 31 townships by March 2026, indirectly supporting adolescent livelihood recovery [922][923].

People with Disabilities

The Myanmar GiHA Working Group's one-year review (30 March 2026) reported that the earthquake response and recovery disrupted critical and mental health care for people with disabilities and featured limited accessible communication [924][918]. The review further found that assistive devices were lost, damaged or unavailable, evacuation was difficult due to mobility barriers, and shelters and WASH facilities were often inaccessible [918]. Persons with disabilities — including newly disabled survivors — experienced isolation, loss of income and exclusion from assistance driven by stigma, mobility barriers and lack of targeted outreach [918]. Post-earthquake pooled-fund support included rehabilitation, physiotherapy, wheelchairs and psychosocial support for people with disabilities, and recovery priorities explicitly call for ensuring inclusive access to services, shelters and livelihoods [921][918][924].

Elderly

A Rapid Gender Analysis conducted after the March 2025 earthquake found older people were under-consulted — only 26% reported being consulted — and documented disrupted critical care for older persons with chronic conditions, loss or damage to assistive devices, evacuation difficulties due to mobility barriers, inaccessible shelters and services, and exclusion from assistance in the absence of targeted outreach [918]. The Myanmar GiHA Working Group's one-year infographic (30 March 2026), co-led by UN Women and UNFPA, reiterated ongoing barriers for older persons in accessing health, protection and shelter services and highlighted heightened mental health and protection risks in overcrowded, non-accessible shelters [924]. Post-earthquake recovery support from the Myanmar Humanitarian Fund has included rehabilitation, physiotherapy, provision of wheelchairs and psychosocial support, interventions that help mitigate mobility and daily-care needs common among older survivors [921].

Displaced

As of 31 December 2025, UNHCR reported approximately 1.178 million registered Rohingya refugees in Bangladesh's camps [930]. UNHCR recorded 141,532 new arrivals identified through a biometric identification exercise in 2025 — now about 12% of the camp population — and began phasing out a Transit Centre, with BRAC taking over site management from January 2026 [930][931]. Funding shortfalls and reduced service levels in 2025 left camp populations more vulnerable, with the 2025 Joint Response Plan reported at around 54% funded and priority activities variably covered, increasing pressure on basic services [931].

Hundreds of refugees staged a peaceful protest in Camp 24 LMS on 31 March 2026 against proposed reductions to WFP food rations and a vulnerability-classification plan, with protesters noting that most families are entirely dependent on humanitarian aid, face strict movement restrictions and have limited livelihood options [920][940]. A shortfall in LPG supplies on Bhasan Char led to the temporary exclusion of about 2,200 of 5,700 households from LPG distribution, prompting UNHCR appeals over the resulting protection, health and environmental risks [931].

Bangladesh has shared biometric data on 829,036 Rohingya with Myanmar for repatriation verification; by January 2026, Myanmar had verified about 354,751 individuals and recognised 253,964 as "persons previously residing in Myanmar," but Bangladesh stated repatriation cannot begin while conflict and insecurity persist inside Myanmar [934]. Conditions inside northern Rakhine — including arbitrary detention, forced recruitment of minors, movement restrictions and the Rohingya's unresolved statelessness — fundamentally undermine prospects for safe, voluntary and dignified return [925]. Hostilities and airstrikes across northwestern Myanmar in March 2026 reportedly killed dozens of civilians, struck displacement shelters including a monastery sheltering displaced families in Katha, and left thousands unable to leave affected areas [919].

One year after the 28 March 2025 earthquake, many displaced families still live in unsafe or damaged shelters, GBV risks remain high, and critical health and WASH services are disrupted; IFRC/MRCS support reached about 213,652 people while the IFRC Emergency Appeal remained significantly underfunded at approximately 29% funded [918][923]. Transnational trafficking and smuggling networks continue to exploit Rohingya statelessness, with documented cases of severe abuse during maritime and jungle transit, and destination countries lacking formal refugee protection frameworks increase risks of exploitation, detention and limited access to services [927].

Minorities

Rohingya remain effectively stateless and subject to systemic exclusion and persecution rooted in the 2017 mass exodus from Rakhine State, which continues to undermine their rights and prospects for safe return [920][925][953][950]. The World Food Programme's new tiered distribution system reduces assistance for many refugees — with some households facing cuts to around \$7 per person per month — prompting alarm about increased hunger and protection risks [940][941][943]. Hundreds of camp residents staged a peaceful protest in Camp 24 LMS on 31 March 2026 to oppose planned food ration reductions and a proposed vulnerability categorisation, warning such measures would disproportionately harm children, older people and female-headed households [920].

The parliamentary elevation of former junta chief Min Aung Hlaing to the presidency in early April 2026 risks entrenching impunity and further undermining accountability and minority protections, given his international condemnation and ongoing ICC/ICJ scrutiny [952][953][936][950]. IOM/Missing Migrants recorded at least 860 Rohingya maritime fatalities in 2025 and high numbers of Myanmar nationals dying or disappearing on migration routes, underscoring persistent protection gaps for displaced minorities [937][932].

One year after the March 2025 earthquake, a GiHA Rapid Gender Analysis (30 March 2026) found that women, women-headed households, persons with disabilities and LGBTIQ+ people faced exclusion from decision-making, limited access to information, and culturally and physically inappropriate services during the response and recovery [918][924].

Operational Environment

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