



Needs Assessment of Older People in Myanmar

30 April 2025



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Introduction

Purpose

HelpAge International's vision is of a world where older people lead active, dignified, healthy and secure lives. This applies to all older people, including those affected by humanitarian emergencies.

This needs assessment report outlines the specific needs of older people in Naw Piy Taw, Mandalay, Southern Shan and Sagaing states in Myanmar. It was conducted by AGE Myanmar, a member of the HelpAge global network. AGE Myanmar is a local NGO formed through the localisation of HelpAge's Myanmar office in 2024. While their structure has changed, they continue to work in close partnership with HelpAge.

Based on the needs assessment, this report presents key findings, observations and analysis by HelpAge's humanitarian advisers and AGE Myanmar.

The report aims to help all organisations operating in the earthquake affected areas (including humanitarian agencies, donors and coordination mechanisms), to develop and implement age-inclusive programmes and to support advocacy for the rights of older people. HelpAge and AGE Myanmar welcome comments and questions on this report and can offer technical support for inclusive responses based upon its findings.

Context

On 28 March, 2025, a 7.7 magnitude earthquake struck central Myanmar, significantly affecting Mandalay and surrounding regions. The disaster has resulted in more than 3,600 deaths, and over 4,800 injuries¹. Infrastructure damage is extensive, including collapsed buildings, destroyed roads, and disrupted communication networks. The widespread destruction of transportation networks, communication systems, and public facilities—such as hospitals, schools, and places of worship—has severely disrupted access to essential services like water, food supplies, and healthcare².

The hardest-hit areas include densely populated urban centres as well as remote rural villages where rescue and relief operations face significant challenges due to damaged roads and aftershocks. The earthquake has also triggered secondary disasters such as landslides, which have further complicated response efforts³.

With temperatures soaring to as high as 40°C, affected communities face critical health risks. This is compounded by temporary shelters made from fragile materials which are highly vulnerable to harsh weather conditions. Displaced individuals in these shelters are exposed to both intense heat and rainfall, greatly heightening the risk of disease outbreaks among the earthquake-affected populations⁴.

Methodology

Data was collected between 6 and 13 April 2025, through face-to-face, one-to-one interviews using a structured survey developed by HelpAge and translated into the language of Myanmar. The interviews were carried out by data collectors from AGE Myanmar, familiar with the language and culture, following training in the use of the survey and the purpose of the assessment. The

assessment was conducted in Mandalay, Sagaing, Nay Pyi Taw and Southern Shan, the states most affected by the earthquake.

A purposive sampling approach was used to select women and men aged 50 years and above, complemented by snowball sampling to reach marginalised older people who might otherwise be hard to find (because, for example, of difficulties with mobility).

The sample size is 225 older people from four age cohorts: 50-59 years (representing 29 per cent of the total sample, 60-69 years (representing 33 per cent of the total sample); 70-79 years (representing 26 per cent of the total sample); and 80-89 years (representing 11 per cent of the total sample). A few people over the age of 90 were also interviewed but while findings for this age group are included in the overall results, they are not provided separately as the sample size did not reach the threshold for comprehensive data. Of the 225 older people interviewed, 126 (approximately 56 per cent) were female and 99 (approximately 44 per cent) were male. In addition, 97 (43 per cent) of older people who were interviewed identify as people with a disability.

Limitations

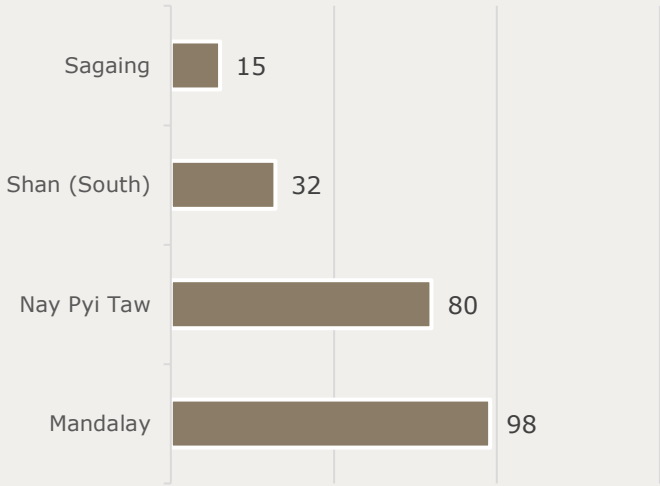
The needs assessment was conducted by HelpAge network member AGE Myanmar using a structured questionnaire developed in English and translated into the language of Myanmar. Although disaggregated by age, sex, and disability, nuances may have been lost in translation. While the assessment targeted older people, 45 of the 270 respondents were under 49 and were excluded from analysis, resulting in a final sample size of 225. Enumerators received training, but potential bias in question delivery and interpretation remains. A high number of 'Respondent chose not to respond' entries were reviewed, and some were reclassified as 'No' after clarifying misunderstandings with enumerators. While this improved consistency, it may have affected the accuracy of some responses. Despite these limitations, findings were strengthened through regular team debriefs, triangulation with secondary data, and efforts to capture diverse community perspectives

Dashboard link

Myanmar RNA Dashboard

Demographics

Interviews by location

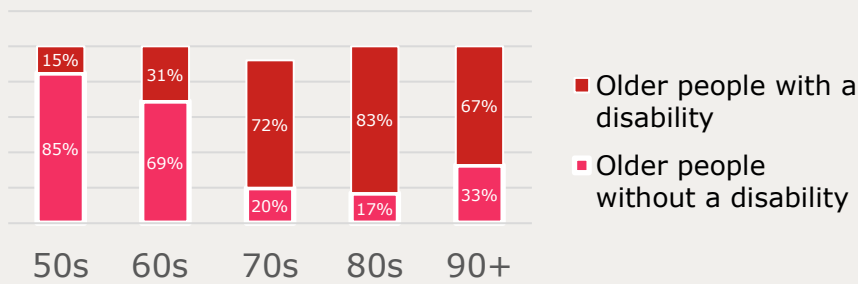


225 older people interviewed

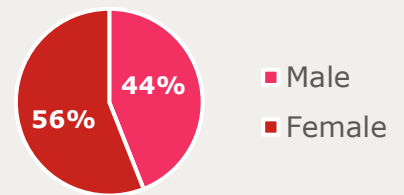
43 per cent of older people have at least one disability

- Walking: 20%**
- Sight: 31%**
- Hearing: 11%**
- Self-care: 30%**
- Remembering: 8%**
- Communicating: 3%**

Age by disability



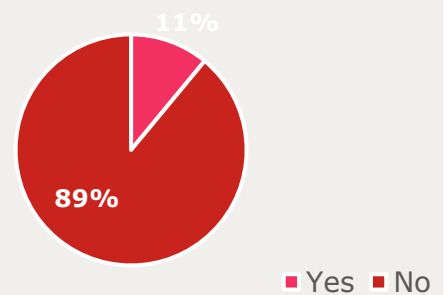
Sex



86 per cent of older people have at least one health condition

- High blood pressure: 48 per cent**
- Diabetes: 32 per cent**
- Joint aches and pains: 32 per cent**
- Heart problems: 17 per cent**
- Cataracts: 12 per cent**
- Gastro: 12%**
- Neurological conditions: 11%**
- Oral and dental issues: 9%**
- Respiratory: 9 per cent**

Older People Living Alone



Key findings

Protection

70 per cent of older people interviewed reported a lack of safe spaces within the community.



Health

40 per cent of the respondents had family members injured and 30 per cent suffered personal injuries.



Mental health and wellbeing

30 per cent of older respondents reported feelings of worry, isolation, or being overwhelmed.



WASH

82 per cent of the older people interviewed do not have safe WASH access at home or in shelters.



Basic Needs

19 per cent of interviewed older people (almost one fifth of the respondents) received no assistance at all.



Disability

43 per cent of older people interviewed have at least one disability.



Shelter

51 per cent of older people had their homes destroyed and 41 per cent reported damage too severe to remain in place.

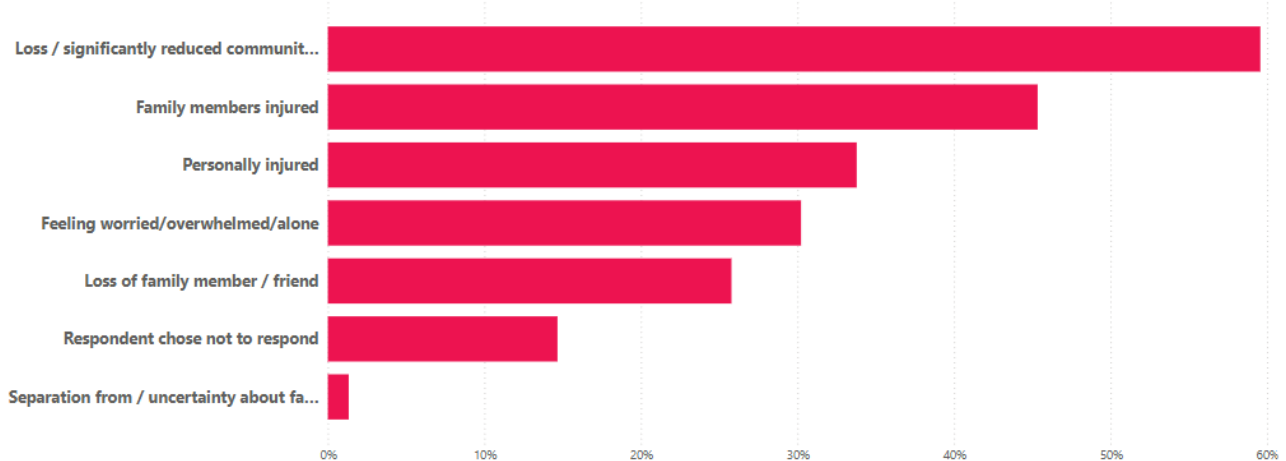


Findings and recommendations

Findings

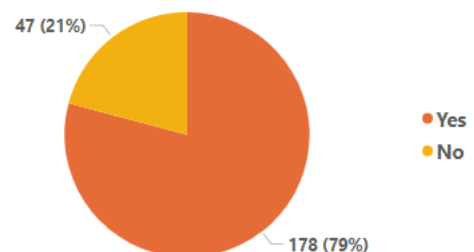
The earthquake had a profound impact on the lives of older individuals, particularly in terms of **loss of social support structures**—60 per cent of respondents identified this as the main consequence, and this rose to 73 per cent among older people with disabilities. Many also experienced family injuries (45 per cent) or personal injuries (34 per cent), and **30 per cent reported feelings of worry, isolation, or being overwhelmed.**

What has the impact of the earthquake been on you?



Living arrangements further compound these challenges, with 11 per cent of older individuals living alone—particularly high among those aged 50–59. A significant **79 per cent of all respondents rely on others to meet their basic needs**, including 84 per cent of those with disabilities and 82 per cent of those with a health condition. **57 per cent provide care for others**, such as children or people with disabilities, and **29 per cent are actively participating in the earthquake response.** This involvement is notably higher among older men (41 per cent) compared to older women (19 per cent), and particularly prevalent among those aged 50 to 59 years (43 per cent).

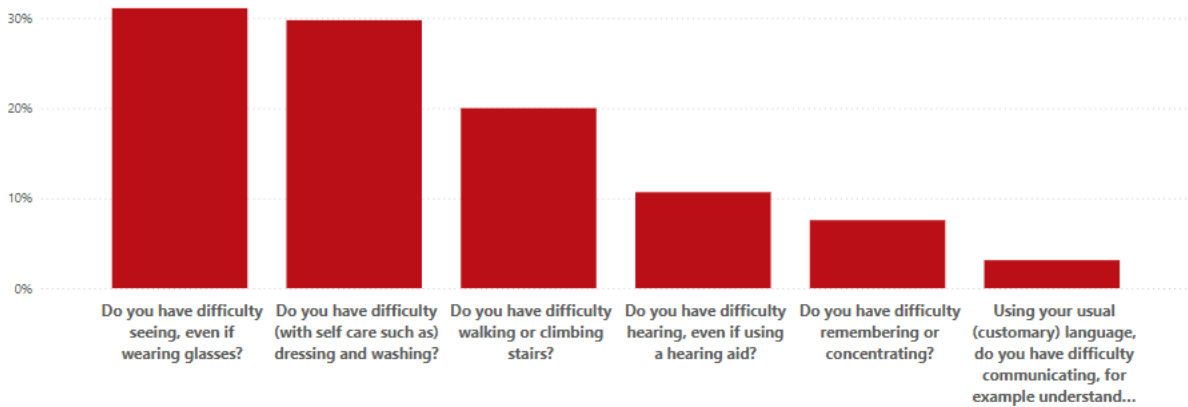
Are you depending on your family or friends to meet your basic needs?



Safety remains a pressing concern. A **lack of safe spaces within the community was reported by 70 per cent of older respondents**, climbing to 80 per cent among those with disabilities. General safety concerns were mentioned by over half the respondents (53 per cent), with financial abuse (20 per cent) and neglect (17 per cent) also reported. Yet, 23 per cent noted no major safety issues.

The challenges faced by older people with disabilities were underscored by data from the Washington Group questions, which revealed that many have substantial difficulties or complete inability to perform daily functions.

Disability

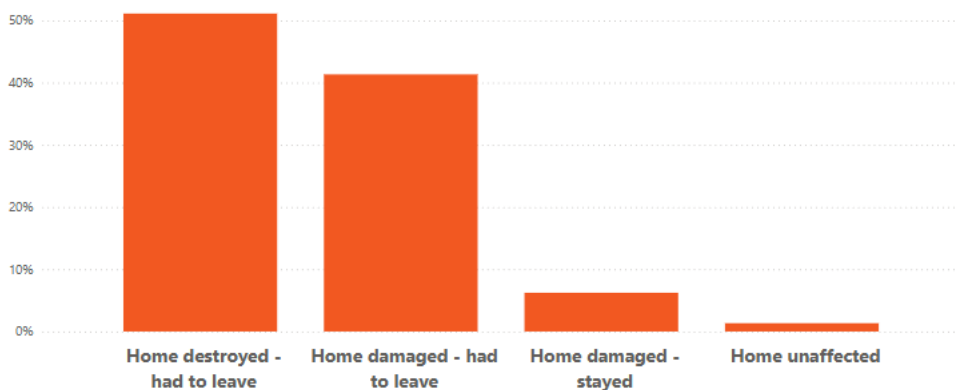


The need for assistive products is high; 51 per cent cited glasses as their primary need. Additionally, over half (52 per cent) noted a need for other types of assistive devices not listed in the survey. Only 11 per cent reported having the necessary assistive product(s), which leaves a lot of older people with the potential need of an assistive product to support their recovery after the earthquakes.

Health-related issues are widespread. 45 per cent had family members injured and 34 per cent suffered personal injuries. Healthcare access is severely limited—44 per cent cannot safely access, and over **50 per cent lack adequate medicine access**, with 20 per cent having no access at all. Chronic diseases are widespread, with nearly 50 per cent reporting hypertension, and 30 per cent each for diabetes and joint problems. Other conditions, such as heart problems, cataracts, and respiratory issues, further complicate care for injured individuals.

Shelter loss and damage is a prevalent issue faced by respondents. **Over half (51 per cent) had their homes destroyed and 41 per cent reported damage too severe to remain in place.** One-third said they had no shelter and are sleeping outdoors—this includes 39 per cent of older people with disabilities and 44 per cent of those over 70. Since the earthquake, **49 per cent of older respondents have been living in a shelter**, while 10 per cent are residing in tents.

How has your home and living situation been affected by the earthquake?

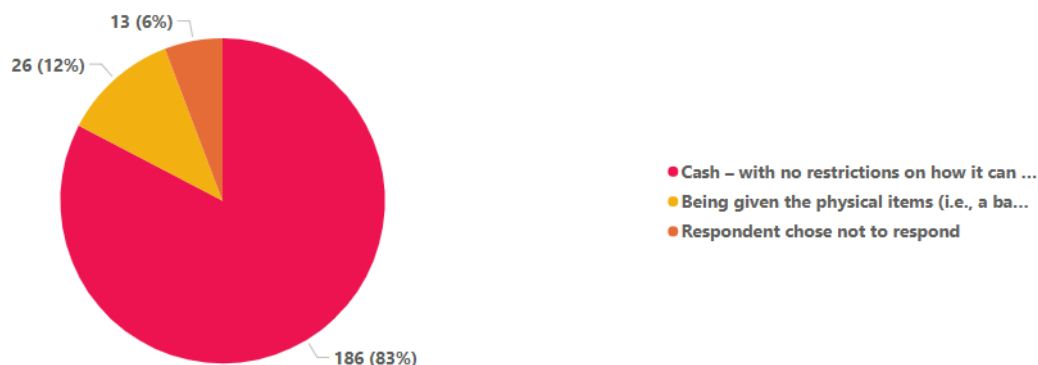


In terms of water, sanitation, and hygiene (WASH), **82 per cent do not have safe WASH access at home or in shelters.** Access to handwashing (25 per cent) and bathing (22 per cent) facilities remains low, and the absence of data on toilet access presents a significant gap. Around 2 per cent have no WASH access whatsoever.

Financial hardship is widespread, with **nearly half (46 per cent) only able to meet “some - less than half” of their basic needs, while 21 per cent cannot meet any of their basic needs.** Men were more likely to have funds to meet some needs, while more women reported being able to meet none of their basic needs with funds. When asked how they would prefer to receive humanitarian support, **83 per cent of older people prefer to receive Multipurpose**

Cash Assistance (MPCA). In fact, a large majority (82 per cent) prefer unrestricted cash assistance over physical items, except in Shan State, where preferences were more evenly split.

What way would you prefer to receive your humanitarian assistance?



Food insecurity is another pressing issue. While 62 per cent report having access to food, **they often feel unsafe doing so—especially in Mandalay**, where 97 per cent reported insecurity. This sense of risk was prominent among those with disabilities. A small but troubling 6 per cent had no food access at all.

Community support has played a critical role in the response so far, with **60 per cent receiving aid through local networks**. This was consistent across all locations but did reduce as people got older (77 per cent for 50-59 age - 25 per cent for 80-89 age group). However, **19 per cent received no assistance since the earthquake**, and this rose sharply among people with disabilities (33 per cent) and the oldest respondents, with **46 per cent of those aged 80-89 reporting no aid**.

Key recommendations

Protection

- Create safe spaces (if possible), group activities, and opportunities to reconnect with others to help reduce isolation and emotional distress.
- Encourage community volunteers to look out for older people who may be grieving or struggling and link them to available services and, where possible, link older people to trusted community volunteers or services who can help with everyday tasks and check on their wellbeing.
- Recognise that many older people are providing care for others, including those who also have disabilities themselves. Make sure they are identified early and supported with what they need – this might be extra food, healthcare, psychosocial support, or help with daily tasks.
- Set up simple, confidential ways for older people to report safety concerns or abuse, and ensure they know their rights and who they can go to for help.
- Involve older people in identifying risks and shaping protection responses – they know what is working and what is not.

Disability

- With the high number of people with visual difficulties and a lack of glasses, consider how to improve access to eye care and ophthalmologists to improve the services.
- In developing communications and information, make sure it is accessible for people with visual and hearing challenges.
- Ensure access to assistive devices such as wheelchairs and crutches, to aid recovery and mobility
- Ensure services and distributions are designed to be accessible for those who are unable come to collection points or move around easily—consider homebased care and support where needed.

Shelter

- Make sure shelter options are safe and accessible for older people, including those with disabilities or health conditions.
- Help older people get the support they need for daily living, especially those who live alone or have mobility issues. Those sleeping outside need urgent support to access safe accommodation.

Health

- Establish rehabilitation programs for older adults with musculoskeletal injuries, including physical therapy and mobility support.
- Strengthen logistics to ensure the availability of essential medications, such as pain relievers, antibiotics, and chronic disease management drugs.
- Combine trauma care with chronic disease management programmes to address the unique health profiles of older adults.
- Train community health workers to deliver basic rehabilitative services for older adults in their homes or local centres.

WASH

- Ensure that temporary and reconstructed WASH facilities are safe, age-friendly, and accessible to older people and persons with disabilities by applying inclusive design principles.
- Conduct age-specific campaigns to improve awareness and practice.
- Include items suitable for older adults in hygiene kits.

Income/Cash

- Prioritise older people as a key “at risk” group, as many have little or no means to meet their basic needs.
- Prioritise the use of MPCA when attempting to meet the basic needs of older people.
- Undertake a protection audit or focus group discussion in Shan state where a large number of respondents are requesting physical items and not cash.
- Investigate the “income gap” for older people and top up MPCA or other CVA based programming as required.

Accountability

- Work with local community leaders and local responding agencies to identify affected older people for support, particularly the older old-age groups (70+) and older people with disabilities who have been less supported than other older people.
- Use communication methods preferred by the community to raise awareness about expected standards of agency behaviour, how to report concerns—including safeguarding or ageism—and what to expect in terms of response, communication, and equal access when issues are raised.

¹ <https://reliefweb.int/report/myanmar/myanmar-and-thailand-earthquakes-update-dg-echo-gdacs-usgs-aha-centre-echo-daily-flash-14-april-2025>

² <https://reliefweb.int/report/myanmar/situation-update-no-9-m77-mandalay-earthquake-monday-14-april-2025-2000-hrs-utc7>

³ <https://reliefweb.int/report/myanmar/myanmar-thailand-77-m-earthquake-update-dg-echo-copernicus-emsr-amnesty-international-adinet-adrc-media-usgs-echo-daily-flash-02-april-2025>

⁴ <https://reliefweb.int/report/myanmar/situation-update-no-9-m77-mandalay-earthquake-monday-14-april-2025-2000-hrs-utc7>

HelpAge International is a global network of organisations promoting the right of all older people to lead dignified, healthy, and secure lives.

AGE Myanmar (Alliance for Generations and Empowerment in Myanmar) is a national NGO working with a network of partners throughout the country to transform the lives of older people, people with disabilities, and their families across the generations.

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