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The State of Food Security and Nutrition in Myanmar, 2021-2024

Findings from eight rounds of the Myanmar Household Welfare Survey

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Key Highlights

- **Rising Hunger:** Hunger affected over 3.0 percent of households in late 2024, and was highest in Kachin (6.5 percent), Kayah (6.3 percent), and Chin (6.0 percent).
- **Increasing Urban Vulnerability:** Urban households had higher hunger levels (3.5 percent) and a faster decline in diet quality compared to rural households.
- **Declining Diet Quality:** Over a quarter of adults (26.0 percent) and a fifth of children under 5 (21.0 percent) lack adequate dietary diversity. Women's diet quality has worsened faster than men's.
- **Multiple Factors Affecting Risk & Resilience:** Low income, conflict, and high food prices drive insecurity; remittances reduce food-related risks.

This working paper explores the state of food security and nutrition in Myanmar using eight rounds of nationally representative household panel data collected from December 2021 to December 2024. Overall, the state of food security and nutrition has deteriorated in Myanmar from 2021-2024. More than three percent of households were in moderate to severe hunger in September-December 2024. Hunger was highest in Kachin (6.5 percent), followed by Kayah (6.3 percent) and Chin (6.0 percent) in the latest survey round. Households with a low Food Consumption Score increased from 9.4 percent in December 2021-February 2022 to 14.2 percent in August-November 2023 and remained high at 14.2 percent in October-December 2024. The shares in October-December 2024 were highest in Chin (34.6 percent), Kayah (25.4 percent), and Shan (19.3 percent).

Inadequate diet diversity among adults rose from 20.5 percent to 26.0 percent between December 2021-February 2022 to October-December 2024. Women saw a faster decline in diet quality (7.3 percentage points increase in poor diet quality compared to 3.2 percentage points for men). Decreases in diet quality among adults were driven by lower consumption of animal sourced food and vegetables. In the latest round of the survey, 30.7 percent of all children aged 6-23 months and 21.3 percent of all children aged 6-59 months had inadequate diet quality.

Of note during October-December 2024, urban households faced greater food insecurity than rural households, with higher hunger rates (3.5 percent vs. 2.8 percent), and lower dietary diversity among both adults (26.0 percent vs. 25.0 percent) and children aged 6–59 months (23.2 percent vs. 20.4 percent). Regression analysis reveals low income and limited assets to be important risk factors for food security and adequate diet quality. Wage workers and low wage communities were particularly vulnerable. Rising food prices, conflict and physical insecurity increase the likelihood of poor diet quality. Receiving remittances was a source of resilience; remittance-receiving households were less likely to experience hunger or poor dietary diversity at the household, adult, and child level.

To avert a full-blown nutrition crisis in Myanmar, effective multisectoral steps are required to protect nutritionally vulnerable populations. Expanded implementation of nutrition- and gender-sensitive social protection programs, including maternal and child cash transfers, particularly to vulnerable groups is called for. Further, given the importance of remittances as an effective coping mechanism, supporting migration and the flow of remittances would help to improve the welfare of the Myanmar population.

1. INTRODUCTION

In this working paper, we provide an overview of the state of food security and nutrition in Myanmar using household datasets collected across eight rounds over three years from December 2021 to December 2024. We examine food security using the Household Hunger Scale and the Food Consumption Score. To examine the state of nutrition, we examine the diet quality of individuals across Myanmar for three separate but important sections of the population: (1) adults (18+ years), (2) women of reproductive age (15-49 years), and (3) children (6-23 and 6-59 months).

We explore these indicators using eight rounds of the Myanmar Household Welfare Survey (MHWS) collected over the phone from December 2021 to December 2024 – hereafter R1, R2, R3, R4, R5, R6, R7, and R8 – across more than 12,000 households in 310 townships of Myanmar. MHWS is a nationally, urban/rural and state/region representative phone survey (MAPSA 2022). Four rounds of data collection were spread out roughly over the four quarters in 2022, with two more rounds in 2023 and a further two in 2024. This update on the food security and nutrition status in Myanmar primarily focuses on the eight round which was conducted from October to December 2024. The timing of survey coincides with that of comparable periods in the year during the first, fourth and sixth round of data collection in 2021, 2022 and 2023.

It is important to note that the estimates presented in this report are likely underestimates of the true situation on the ground, particularly in states affected by high levels of conflict and disruptions to electricity and telecommunications infrastructure. In regions such as Kayah, Kachin, and Rakhine, ongoing violence and damage to electricity and telecommunications infrastructure have severely limited our ability to reach populations most impacted by conflict and economic shocks. As a result, Round 8 sample sizes in these areas were below target. Conversely, we now have a larger sample of urban households, allowing for more statistically robust estimates of trends in urban areas.

We use standard food security and diet diversity measures for each of the three subpopulations to examine trends over the eight rounds as well as explore heterogeneity with respect to gender, location of residence, and asset and income-based welfare indicators. We also look at disaggregated consumption of the different food groups that constitute the dietary diversity measures to investigate the change in the consumption pattern of individuals. Finally, we use regression analysis to look at predictors of food insecurity and inadequate diet diversity, including household wealth and income, self-reported shocks, food prices, and household characteristics.

Myanmar's economy remains in a fragile state in late 2024 and early 2025. GDP is estimated to have contracted by approximately 1.0 percent in the fiscal year ending March 2025. This downturn is attributed to ongoing conflict, natural disasters, and macroeconomic instability, leaving GDP approximately 11.0 percent below pre-coup levels (World Bank 2025a). Poverty has deepened significantly, with the national poverty rate reaching 32.0 percent in early 2024, levels last observed in 2015 according to the World Bank (2025b). Amid escalating conflict and economic pressures, migration and displacement have surged (MAPSA 2024). As of May 2025, over 3.5 million people were internally displaced, with more than 1.1 million refugees hosted abroad (OCHA 2025). Food insecurity has intensified, with approximately 15.2 million people, 28 percent of the population, projected to face high levels of acute food insecurity in 2025, up from 13.3 million in 2024 (FAO 2025). Regions such as Rakhine are particularly affected, where conflict and trade blockades have led to severe food shortages (UNDP 2024) while the earthquake, at the end of March 2025 (after round 8 of the MHWS was fielded), severely affected Mandalay and Sagaing. Currency depreciation, import restrictions, and power outages have further raised costs, disrupted supply chains, and increased reliance on expensive diesel generators. Amid this challenging situation, this report

provides an update on the food security and nutrition status in Myanmar, drawing on the latest data from a nationally representative phone survey.

2. TRENDS IN FOOD SECURITY INDICATORS

2.1 Household Hunger Scale

The first food insecurity indicator we examine is the household hunger scale (HHS), which measures the experience of hunger in the household based on three questions related to the lack of food at home, going to sleep hungry, and going an entire day without food (Ballard et al. 2011). Based on the frequency of occurrence, i.e. “did not occur”, “rarely” or “sometimes”, and “often”, answers are scored and used to classify households into three groups: "little to no" (0-1), "moderate" (2-3), or "severe” (4-6) hunger.

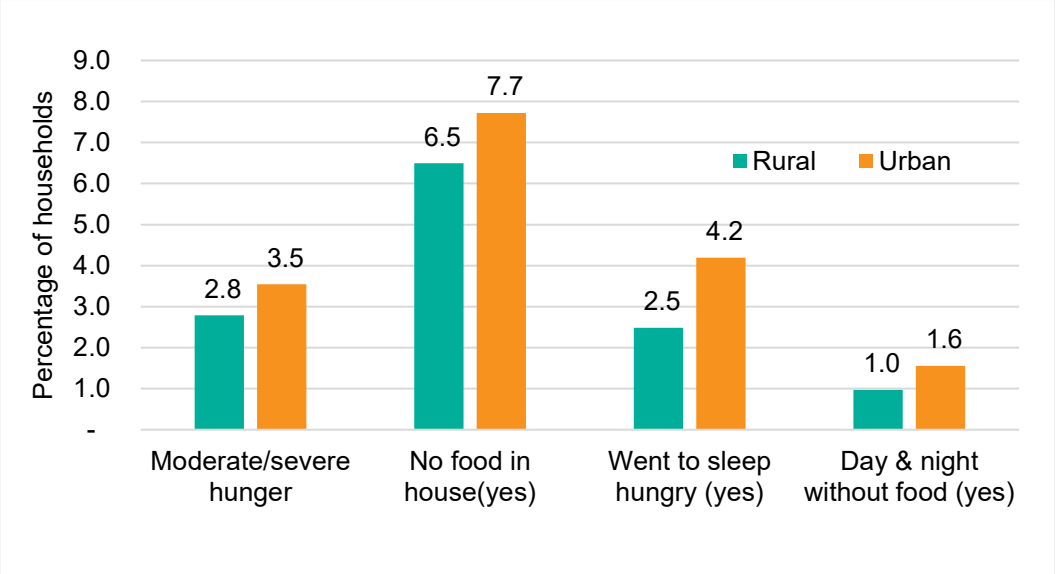
Table 1. Composite categories of Household Hunger Score (HHS) and 30-day recall questions, percentage of households

	Percentages (%)					Percentage Points Changes		
	R1 (Dec 21-Feb 22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
HHS classifications								
Little to no hunger	95.6	96.0	96.5	96.8	97.0	0.5	1.0***	1.4***
Moderate hunger	4.2	3.7	3.1	3.0	2.4	-0.8*	-1.3***	-1.8***
Severe hunger	0.2	0.3	0.3	0.2	0.6	0.3**	0.3	0.4**
Moderate to severe hunger	**4.4**	**4.0**	**3.5**	**3.2**	**3.0**	**-0.5**	**-1.0*** **	**-1.4*** **
No food of any kind in the house	11.5	9.4	9.0	7.9	6.9	-2.2***	-2.5***	-4.6***
Rarely (1-2 times) [a]	48.6	38.7	44.7	43.4	32.3	-12.4***	-6.4**	-16.4***
Sometimes (3-10 times) [a]	47.8	49.9	46.9	45.1	47.0	0.2	-2.8	-0.7
Often (more than 10 times) [a]	3.6	11.4	8.5	11.5	20.7	12.2***	9.3***	17.1***
Went to sleep hungry	4.9	3.9	3.6	3.1	3.0	-0.6*	-0.9***	-1.9***
Rarely (1-2 times) [a]	46.2	45.5	47.7	49.9	37.0	-10.8*	-8.5*	-9.2*
Sometimes (3-10 times) [a]	50.6	49.6	46.0	43.5	45.9	0.0	-3.7	-4.7
Often (more than 10 times) [a]	3.2	4.9	6.3	6.6	17.1	10.8***	12.2***	13.9***
Went full day & night without food	2.1	1.7	1.5	1.2	1.1	-0.3	-0.5**	-1.0***
Rarely (1-2 times) [a]	45.0	50.3	47.9	50.9	48.6	0.7	-1.7	3.5
Sometimes (3-10 times) [a]	50.0	45.2	44.0	41.9	38.6	-5.5	-6.6	-11.4
Often (more than 10 times) [a]	5.0	4.5	8.1	7.3	12.9	4.8	8.3*	7.9*
No of observations	12,100	12,924	12,898	13,163	12,058			

Source: Authors’ calculations from the Myanmar Household Welfare Survey.
Note: a. The frequency of occurrence questions is for the subsample of households that answered “yes” to the three hunger related questions. Asterisks refer to the level of statistical significance in the difference in means between Rounds: * p < 0.10, ** p < 0.05, *** p < 0.01. “Went to sleep hungry” and “went full day & night without food” refer to any household member undergoing these experiences.

Table 1 presents the prevalence of hunger at the national level for the selected rounds of the survey as explained in the introduction. Although moderate or severe hunger was consistent at around 4.0 percent of households throughout 2022, hunger fell to 3.3 percent in 2023 and stayed the same, at 3.0 percent, about a year later in 2024. This is about 1.4 percentage points lower compared to about two years earlier when we started surveys (i.e. R1). Nearly 7.0 percent of households reported that there was no food to eat of any kind in their house because of lack of resources to get food, 3.0 percent reported that themselves or another household member went to sleep at night hungry because there was not enough food, and 1.1 percent of households reported that she or another household member went a whole day and night without eating anything at all because there was not enough food, on at least one day in the four weeks preceding the survey interview day in R8. These figures have fallen compared to R1. However, among households that reported hunger, the frequency of such events has risen sharply. In Round 8, 20.7 percent experienced a lack of food at home, 17.1 percent had a member go to sleep hungry, and 12.9 percent had someone go an entire day and night without food more than 10 times in the past four weeks.

Figure 1. Difference in moderate/severe hunger by location



Source: Authors' calculations from the Myanmar Household Welfare Survey.

Hunger continues to affect poorer households disproportionately. **Notably, in contrast to earlier rounds, the latest survey shows a reversal in the urban-rural pattern: 3.5 percent of urban households reported hunger, compared to 2.8 percent in rural areas (Figure 1).** Additionally, disparities in moderate to severe hunger are deepening. Appendix Table A.13 indicates a 3.7 percentage point gap between income-poor and non-poor households, and a 4.9 percentage point gap between the asset-poor and asset rich[1] in Round 8.

At the state level, the rate of moderate to severe hunger continues to be very high for Kachin (6.5 percent), Kayah (6.3 percent), and Chin (6.0 percent) going into R8 (Appendix Table A.1). This is a likely consequence of increased conflict in these regions. On the other hand, Ayeyarwady and Bago saw a fall in hunger over the last two years.

[1] We generate three different categories of asset level using a count of 10 items, where a household is classified as asset-poor if it owns between 0 to 3 items, asset-low if it owns between 4 to 6 items and asset-rich if it owns 7 or more items. Income poverty status of poor or not poor is calculated from the self-reported income level relative to national poverty lines from 2017 updated for inflation trends.

2.2 Food Consumption Score

The second indicator we look at is the household Food Consumption Score (FCS). The FCS is a measure of dietary diversity and food frequency, considering the nutritional importance of the food consumed. It is calculated as the weighted sum of the frequency of food groups eaten over the seven days prior to the survey where weights reflect the relative nutritional value of the food group (Arimond et al. 2010). A higher FCS is considered to be associated with a higher probability that a household's food intake is adequate. Based on the score, households are classified into three groups: poor (0-24.5), borderline (24.6-38.5), or acceptable food consumption status (>38.5). We follow the threshold values as typically agreed upon for Myanmar (Robertson et al. 2018). For some analysis, we further aggregate poor and borderline food consumption (i.e. FCS<=38.5) to generate a dichotomous indicator of inadequate or low FCS.

Table 2. Frequency of food groups consumed, and Food Consumption Score (FCS) based on 7-day recall, household level

	Percentage (%)					*Percentage Points Changes*		
	R1 (Dec 21-Feb 22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Main staples	7.0	7.0	7.0	7.0	7.0	0.0***	0.0***	0.0***
Pulses/legumes/nuts	3.1	2.5	2.5	2.4	2.5	0.0	0.0	-0.6***
Milk/dairy products	1.2	0.7	0.7	0.7	0.6	-0.1***	0.0	-0.6***
Meat, fish, and eggs	5.0	4.3	4.5	4.5	4.5	0.1*	0.2***	-0.5***
Vegetables	5.3	5.5	5.7	5.7	5.7	0.0	0.2***	0.4***
Fruits	2.5	2.4	2.1	3.1	2.1	0.0	-0.3***	-0.4***
Oil, fats, and butter	6.6	6.7	6.8	6.8	6.9	0.0*	0.1***	0.3***
Sugar or sweet	3.3	2.1	2.1	3.2	2.8	0.8***	0.7***	-0.4*
Food Consumption Score (0-112)	60.9	53.7	54.6	55.9	54.8	0.2	1.0***	-6.2***
Acceptable food consumption	90.6	84.3	85.8	86.5	85.8	0.1	1.5**	-4.8***
Borderline food consumption	8.9	14.8	13.5	12.8	13.5	0.0	-1.3**	4.7***
Poor food consumption	0.5	0.9	0.7	0.7	0.7	-0.1	-0.2	0.1
No. of observations	12,100	12,924	12,898	13,163	12,058			

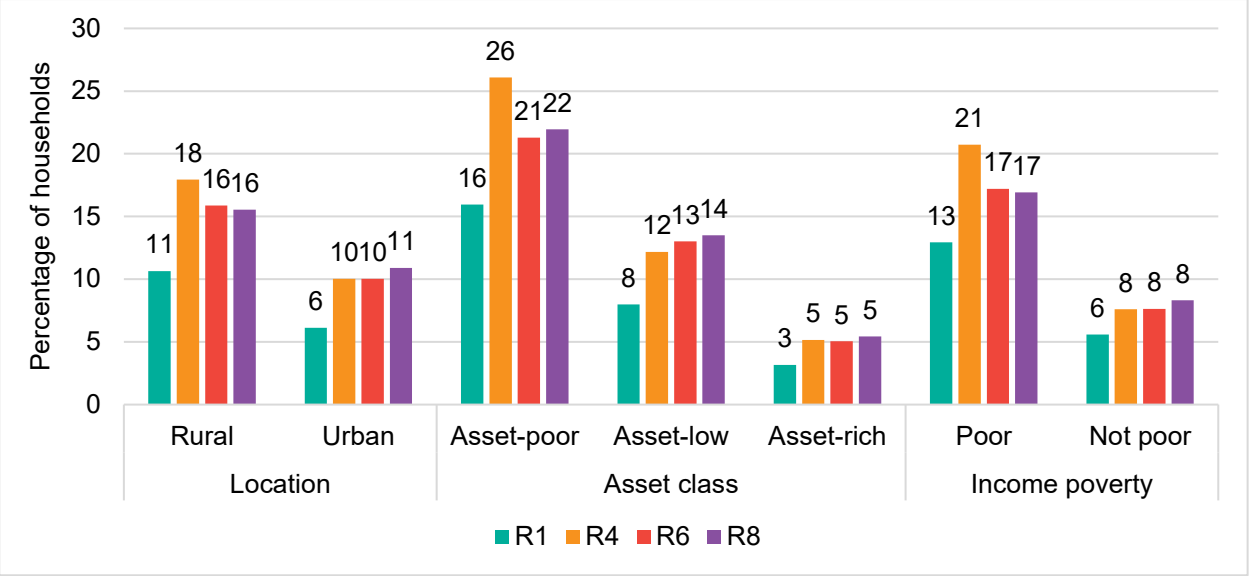
Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Statistics for food groups are number of days households have consumed in 7 days prior to survey. Food Consumption Score is the average score in the population (out of 112). Acceptable, borderline, and poor food consumption is based on cutoff as described in text; statistics presented are percentage of households in each category of food consumption. Asterisks refer to the level of statistical significance in the difference in means between Rounds: * p < 0.10, ** p < 0.05, *** p < 0.01.

Table 2 shows the frequency of food groups consumed over the past seven days as well as the aggregate measure of FCS. **At the national level, the percentage of households with inadequate food consumption has remained constant over the past year, from R6 to R8 of our survey**. Currently, 13.5 percent of households have borderline food consumption, while 0.7 percent of households have poor food consumption in R8. Consumption of meat, fish and eggs, and vegetables (which are weighed highest in the calculation of the FCS because of their nutritional value) has remained unchanged. Consumption of milk and dairy products is low and has halved over the survey period from 1.2 days per week in R1 to 0.6 days in R8. In R8, 76.7 percent of households also

reported not having consumed any milk or dairy products in the preceding seven days of the survey. There has also been a large increase in the consumption of sugar or sweets by 0.7 days per week over the last two years, which may be a cause for concern. Consumption of sugar and sweets has increased significantly in urban areas over the last year, from 2.6 days/week in R4 to 3.6 days/week in R8, which is higher compared to rural areas, from 1.9 days/week in R4 to 2.5 days/week in R8 (see Appendix Tables A.3 and A.2).

With respect to location, asset class, and poverty status, **households in rural areas and those in asset and income poverty are more likely to have low food consumption scores, and these levels have remained consistently high over the past year (Figure 2).** About 15.6 percent of households in rural areas had a low FCS compared to 10.9 percent in urban areas in R8. Twenty-two percent of asset-poor and 13.5 percent of asset-low households have a low FCS in R8 – a statistically significant increase of 6.0 and 5.5 percentage points over the past three years. The prevalence of a low FCS among income-poor households also saw an increase from 12.8 percent in R1 to 16.9 percent in R8.

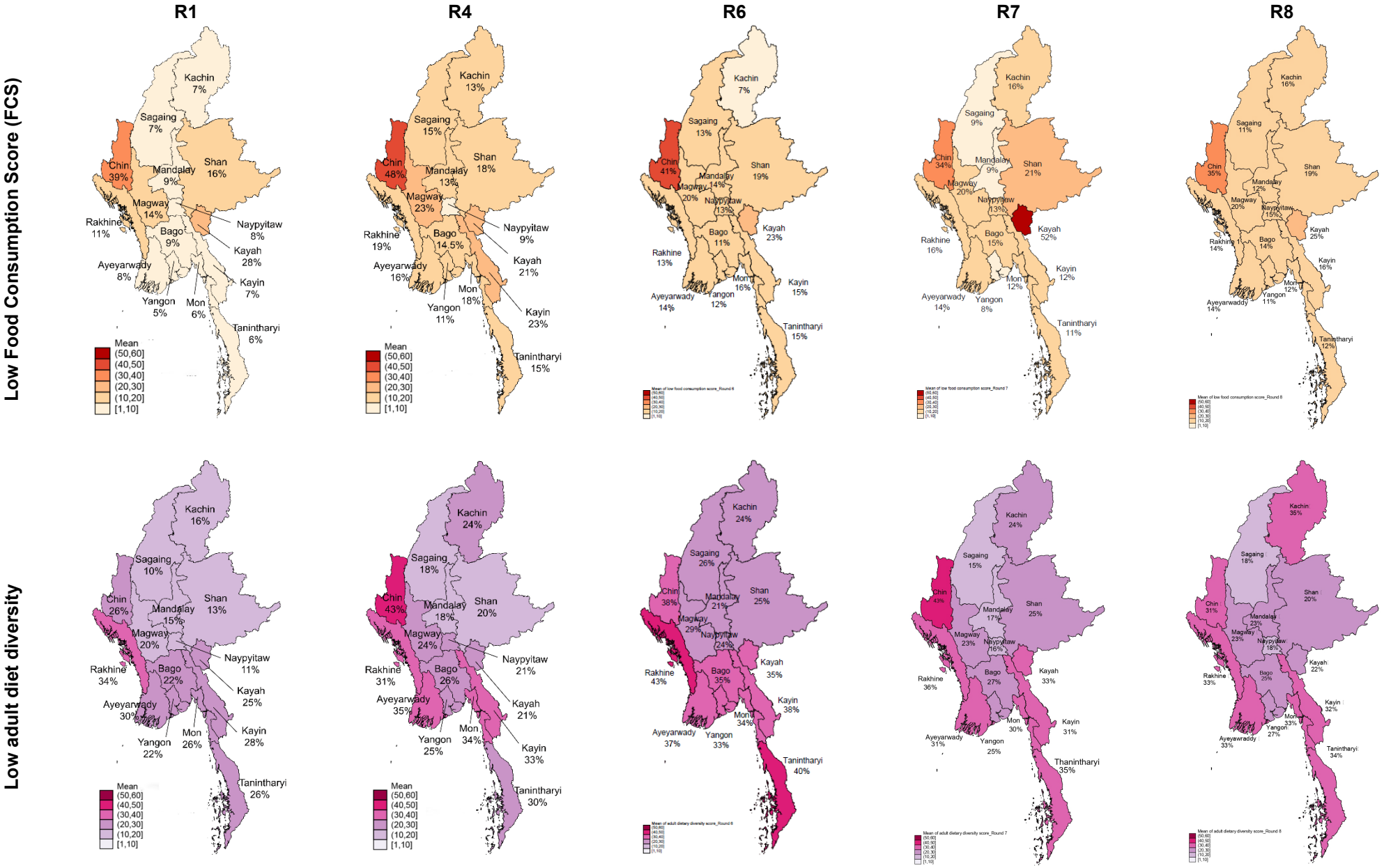
Figure 2. Proportion of households with low food consumption score (FCS<=38.5)



Source: Authors' calculations from the Myanmar Household Welfare Survey.

There were large differences in the FCS across states/regions (see Appendix Table A.4/Figure 3). **The prevalence of a low FCS is highest in Chin (34.6 percent), Kayah (25.4 percent), and Magway (19.5 percent) in R8. There was a large increase in the prevalence of a low FCS in Kayin (8.8 percentage points), Kachin (8.7 percentage points), and Nay Pyi Taw (6.6 percentage points) between R1 and R8.**

Figure 3. Proportion of households with low food consumption score and adult diet diversity by state/region



Source: Authors' calculations from the Myanmar Household Welfare Survey.

3. TRENDS IN DIETARY DIVERSITY INDICATORS FOR ADULTS AND YOUNG CHILDREN

In this section, we present results from two indicators of diet diversity to measure diet quality amongst adults (18+ years), women of reproductive age (15-49 years) and children (6-23 and 6-59 months). The Minimum Diet Diversity (MDD) measure for adults is calculated as whether an adult has consumed at least 5 of 10 food groups (grains/root/ tubers, pulses (beans, peas and lentils), nuts/seeds, dairy, meat/poultry/fish, eggs, dark green leafy vegetables, other vitamin A-rich fruits and vegetables, other vegetables, and other fruits) in the 24 hours prior to the survey (FAO and FHI, 2016).

We also explore diet diversity in women of reproductive age since women's diet quality has a significant impact on their children's birthweight and their probability of being stunted or wasted. The MDD for children, aged 6-23 and 6-59 months, is calculated as whether a child was offered at least 4 of 7 food groups (grains/root/tubers, legumes/nuts, dairy products, eggs, flesh foods, vitamin-A rich vegetables/fruits, and other vegetables/fruits) in the 24 hours prior to the survey (WHO 2007). The population level indicator is then calculated as the proportion of children with low diet diversity amongst all children in the age group.

3.1 Minimum Diet Diversity of Adults (18+ Years)

Table 3. Percentage of adults with inadequate diet diversity, 24-hour recall

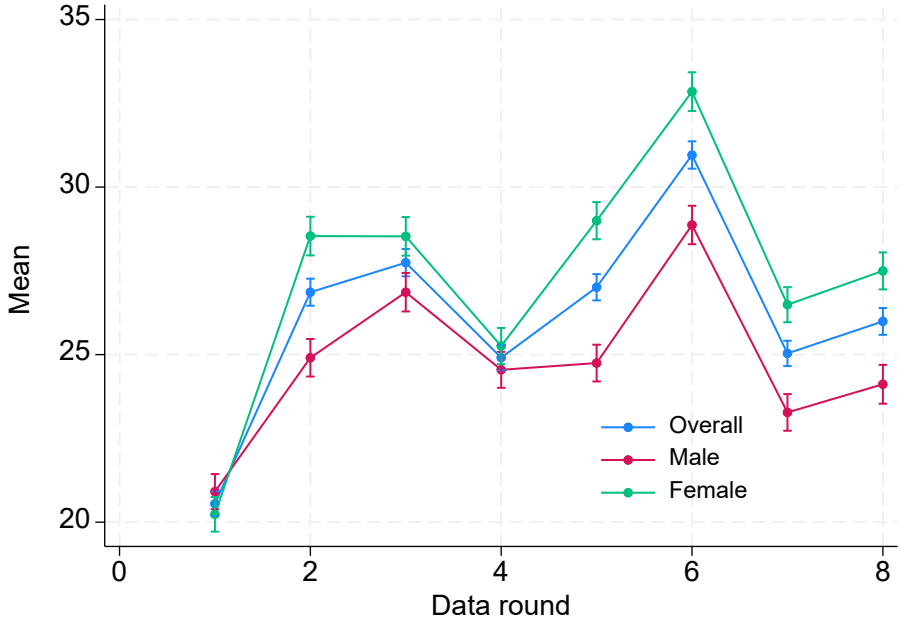
		Means (%)					Percentage Points Changes		
		R1 (Dec 21-Feb 22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
National	Overall	20.5	24.9	31.0	25.0	26.0	-5.0***	1.1	5.4***
	Male	20.9	24.5	28.9	23.3	24.1	-4.8***	-0.4	3.2***
	Female	20.2	25.3	32.8	26.5	27.5	-5.3***	2.2	7.3***
Rural	Overall	21.3	26.1	32.0	25.5	26.0	-6.0***	-0.1	4.8***
	Male	21.2	26.0	29.6	23.9	23.7	-5.9***	-2.3*	2.6*
	Female	21.3	26.2	34.2	26.8	27.9	-6.3***	1.7	6.6***
Urban	Overall	18.8	21.8	28.3	23.9	26.0	-2.4	4.1***	7.1***
	Male	20.2	21.0	26.8	21.6	25.1	-1.8	4.1*	4.8**
	Female	17.6	22.7	29.6	25.8	26.6	-3.0	3.9**	9.0***
National	Asset-poor	30.5	35.0	41.1	34.8	35.9	-5.3***	0.8	5.3***
	Asset-low	18.4	21.5	28.5	23.4	24.5	-4.0***	3.0**	6.1***
	Asset-rich	12.6	16.3	21.0	16.1	17.2	-3.7**	0.9	4.6***
National	Income poor	23.8	28.8	34.2	28.6	28.4	-5.8***	-0.4	4.6***
	Income not poor	16.5	17.9	22.9	19.1	20.0	-2.9*	2.1	3.5**
No. of observations		12,100	12,924	12,898	13,163	12,058			

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

Table 3 shows the proportion of adults not consuming a minimum dietary diversity (5 out of 10 food groups) for the selected survey rounds from MHWS. More than a **quarter of all adults (26.0 percent) in Myanmar were found to be without an adequately diverse diet in R8.** There was a large and statistically significant increase of 5.4 percentage points in the prevalence from R1 to R8, with the rate remaining high throughout 2022-2024. **Notably, the urban-rural gap in adult diet quality has closed.** Inadequate diets among urban adults rose by 7.1 percentage points over the

past three years, compared to a 4.8-point rise in rural areas. By R8, both groups had an equal prevalence of inadequate dietary diversity at 26.0 percent. Disparities remain across wealth levels: 35.9 percent of adults in asset-poor households and 28.4 percent in income-poor households had inadequate diets.

Figure 4. Trend in the percentage of adults with inadequate diet diversity by gender



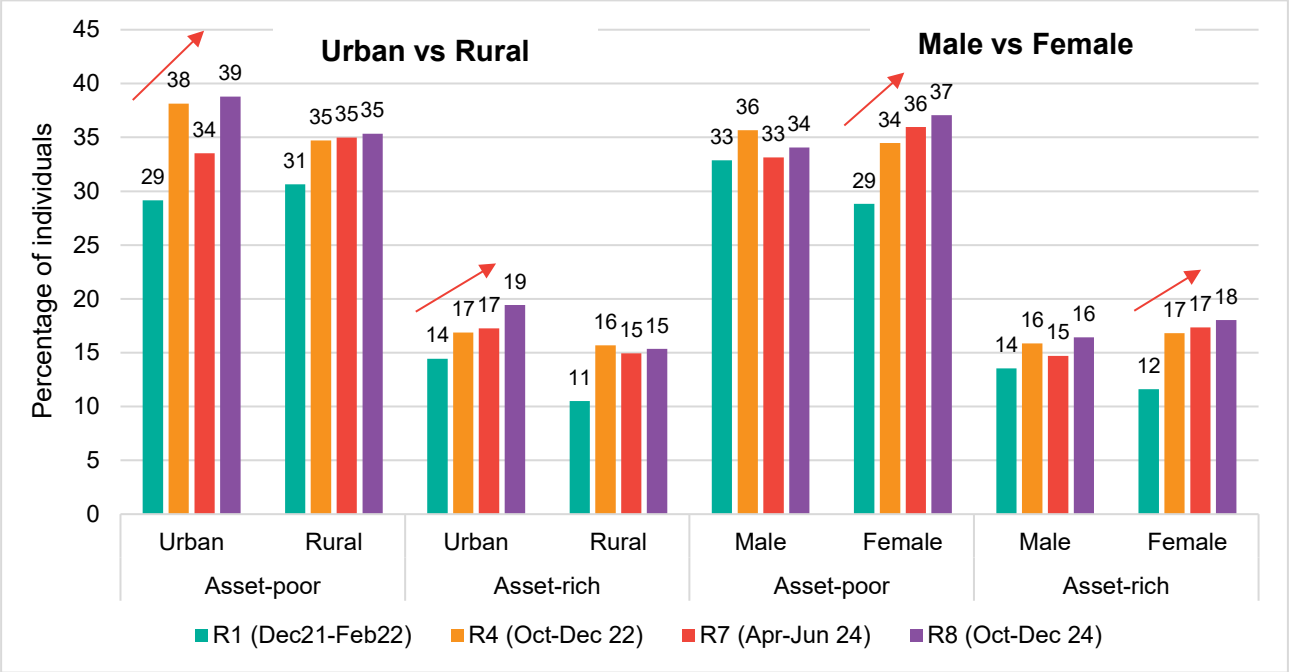
Source: Authors' calculations from the Myanmar Household Welfare Survey.

Over our survey period, there was a divergence in the diet quality of men and women (see Figure 4). **Women saw a faster deterioration in diet quality over the survey periods, with a 7.3 percentage point increase in the prevalence of low diet diversity from 20.2 percent in R1 to 27.5 percent in R8**. This contrasts with men who saw an increase of 3.2 percentage points over the same period from 20.9 percent in R1 to 24.1 percent in the latest round of the survey. This is worrying because poor diet quality can put women at risk of micronutrient deficiencies and various health problems, and can also adversely affect the nutrition, health, and long-term cognitive development of their children.

Figure 5 highlights a concerning trend of deteriorating dietary diversity among urban populations and women. **Across all rounds (R1 to R8), the percentage of individuals not consuming an adequately diverse diet increased more sharply in urban areas than rural, especially among the asset-poor.** Urban asset-poor individuals saw a steep rise from 29.2 percent in R1 to 38.8 percent in R8, an increase of nearly 10 percentage points, while rural asset-poor rates increased by 4.6 percentage points. Similarly, among the asset-rich, the urban population experienced a continuous rise from 14.4 percent to 19.4 percent, whereas rural figures rose only from 10.5 percent to 15.4 percent, suggesting growing urban vulnerability possibly due to inflation, supply chain disruptions, or shrinking informal sector incomes. Gender disparities also intensified over time. Among the **asset-poor, women's dietary diversity worsened more than men's**, with the percentage of females not consuming diverse diets climbing from 28.8 percent in R1 to 37.1 percent in R8—surpassing their male counterparts in later rounds. This gender gap is echoed among the asset-rich, where females consistently reported poorer outcomes than males from R4 onwards. These trends point to a deepening urban nutrition crisis and underscore the increasingly gendered

nature of food insecurity, with women—especially those in asset-poor households—bearing the brunt of declining diet quality.

Figure 5. Trends in dietary inadequacy by asset status and gender



Source: Authors' calculations from the Myanmar Household Welfare Survey.

About 28.3 percent of reproductive-aged women (15 - 49 years) failed to meet the minimum diet diversity (5 of 10 food groups) in Round 8, marking a statistically significant rise of 6.8 percentage points from R1 (Appendix Table A.8). This is higher than the national average for all women, which was 27.5 percent in the same round.

Table 4. Percentage of adults consuming different food groups in the past 24 hours

	Means (%)					Percentage Points Changes		
	R1 (Dec 21-Feb 22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Cereals/grains/roots	99.3	99.6	99.6	99.1	99.4	-0.3*	-0.2	0.1
Beans	53.7	49.5	50.4	53.7	55.0	4.6***	5.4***	1.3
Nuts or seeds	44.0	37.7	35.5	36.7	40.5	5.0***	2.8***	-3.5***
Milk/dairy products	16.4	12.9	13.7	13.3	12.4	-1.3**	-0.5	-4.0***
Eggs	52.6	47.4	47.4	52.2	49.4	2.0**	2.0**	-3.2***
Meat and Fish	89.0	85.3	83.7	88.0	86.5	2.8***	1.2**	-2.5***
Other fruits	40.9	50.9	40.6	53.1	42.7	2.1**	-8.2***	1.8**
Vit-A rich fruit/vegetables	49.4	30.9	33.0	28.4	33.1	0.1	2.1**	-16.3***
Dark green vegetables	84.2	84.2	81.6	84.6	83.8	2.2***	-0.4	-0.4
Other vegetables	82.0	78.3	73.6	73.0	78.0	4.4***	-0.3	-4.1***

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

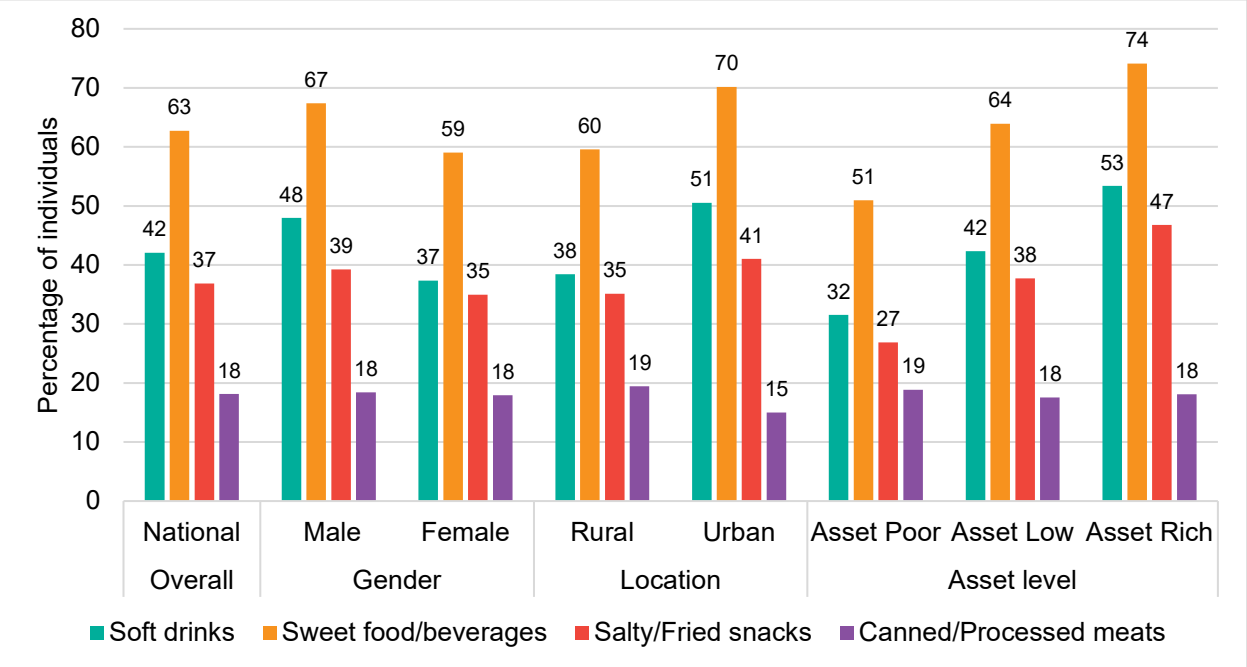
In Table 4, we look at the proportion of adults consuming 10 different food groups for selected rounds of our survey to explore which food groups are driving the decrease in diet quality. **We find that, over the past two years from R4 to R8, consumption of other fruits and milk/dairy**

products fell for adults. On the other hand, when compared between R1 to R8 (i.e. when we first started tracking these changes), we find a large decrease in the consumption of nearly all food groups for adults. Large declines in nutrient-dense foods are a potential risk factor for elevated malnutrition and declining health in the population. We also find significant differences in consumption of food groups by men and women. **In R8, men were more likely to consume almost all food groups with significantly more consumption of nuts/seeds, fruits, and vegetables** (see Appendix Table A.5 and A.6).

Appendix Table A.7 explores the spatial trend in the prevalence of low diet diversity amongst adults. **Kachin (34.7 percent), Tanintharyi (34.1 percent), and Rakhine (33.3 percent) had the highest prevalence of adults with low dietary diversity while Kachin, Mon, Shan and Sagaing saw the biggest *increase* in prevalence over the last three years from December 2021 to December 2024**. These are also states most affected by conflict, restrictions on mobility due to curfews and checkpoints, and increasing transport costs as well as increasing feelings of insecurity and reports of crime.

In the latest survey round, we collected data on consumption of unhealthy food such as soft drinks or fruit-flavored drinks, sweet foods, salty or fried snacks or fast food, and processed meats. **We find a stunningly high consumption of unhealthy food among adults** – 42.0 percent of adults consumed soft drinks, 63.0 percent consumed sweet food/beverages, 37.0 percent consumed salty, fried or fast food, while 18.0 percent consumed processed meats in the 24 hours prior to the survey date (see Figure 6). Consumption of these unhealthy foods is slightly higher among men, adults in urban areas as well as those in wealthier households. Appendix Table A.14 also presents the results by states/regions of Myanmar.

Figure 6. Percentage of adults consuming unhealthy food items in the past 24 hours



Source: Authors' calculations from the Myanmar Household Welfare Survey.

3.2 Minimum Diet Diversity of Children, 6-23 and 6-59 Months

In our survey, for households with children under the age of five years, the primary caregiver is asked questions regarding the food intake of the youngest child. In R1, we asked only for children less than two years old, while in the rest of the rounds, namely R2 to R8, we expanded our sample to include

any children under the age of five. Table 5 presents the estimates for the proportion of children, 6-23 and 6-59 months, not consuming minimum diet diversity (i.e. not consuming 4 out of 7 food groups (FANTA 2006)).

Table 5. Percentage of children with inadequate diet diversity, 24-hour recall

Panel A 6-23 months	Means (%)					Percentage Points Changes		
	R1 (Dec 21-Feb 22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Overall	40.5	34.3	35.4	29.5	30.7	-4.7	-3.6	-9.8**
Boys	39.4	33.3	30.9	29.5	32.0	1.2	-1.3	-7.4
Girls	41.7	35.3	40.5	29.5	29.4	-11.0*	-5.9	-12.2**
No of obs.	684	712	746	779	629			
Panel B 6-59 months	**Means (%)**					**Percentage Points Changes**		
	R1 (Dec 21-Feb 22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Overall	-	21.5	24.3	20.9	21.3	-3.1	-0.3	-
Boys	-	21.6	23.9	22.0	22.3	-1.6	0.7	-
Girls	-	21.4	24.8	19.6	20.3	-4.5	-1.1	-
No of obs.	-	2,398	2,375	2,399	2,053			

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in age adjusted trend between rounds: * p < 0.10, ** p < 0.05, *** p < 0.01.

We find 30.7 percent of all children aged 6-23 months had inadequate diet quality in R8, with some improvement in the prevalence over the past year possibly due to the panel of children getting older and being introduced to more food groups (see Table 5).

Around 1 in 5 children under age 5 (21.3 percent) continued to lack adequate dietary diversity—a figure that has remained high over the past year (see Table 5). Notably, in Round 8, **urban children had poorer diet quality than rural children (23.2 percent vs. 20.4 percent)—a reversal from earlier rounds**. Children from asset- and income-poor households continue to be the most affected.

Next, we look at individual food groups to examine what is driving the changes. For children aged 6-23 months, as we follow the children in our panel who are getting older, we **find an increase in the consumption of almost all food groups, other than milk/dairy products, over the past two years.** Milk/dairy products saw a fall in consumption by 17.7 percentage points for this age group from R4 to R8 (see Table 6A).

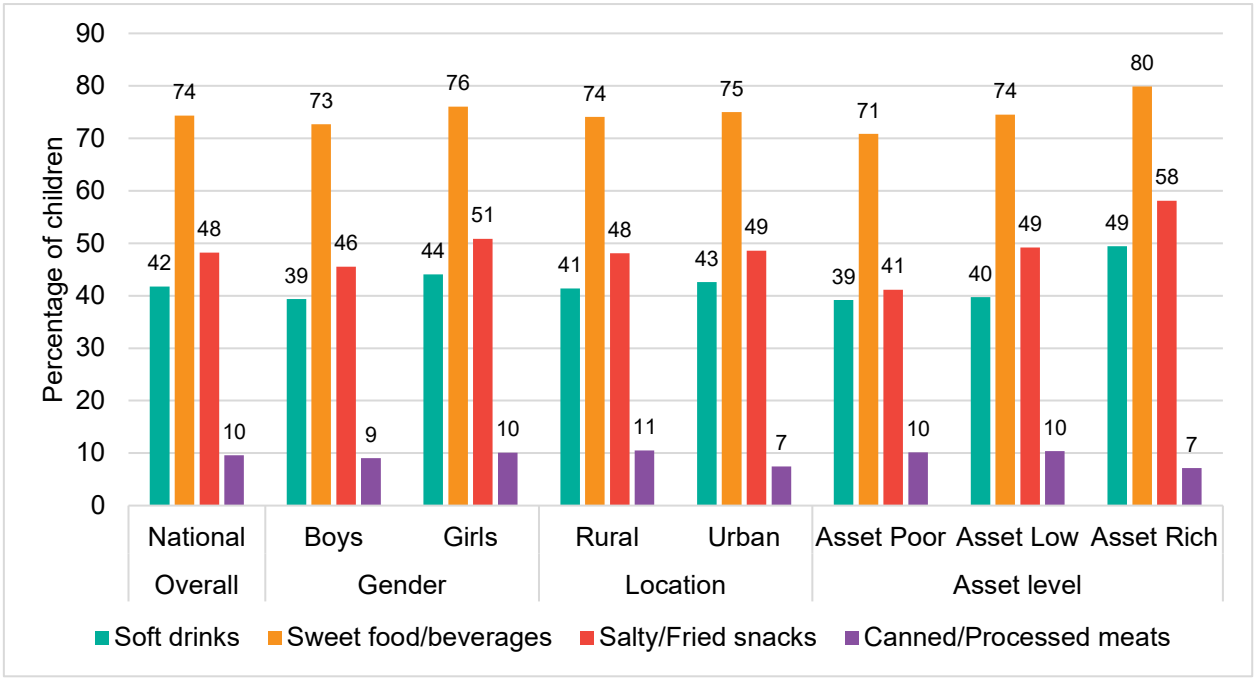
On the other hand, for children aged 6-59 months, we find an increase in the consumption of meat/fish (1.4 percentage points), Vit-A rich fruits/vegetables (10.2 pp), eggs (3.3 pp), and legumes/nuts (6.2 pp) over the past two years from R4 to R8 (see Table 6B). Further, similar to the previous group, we also find a decrease in the consumption of milk/dairy products (11.0 percentage points) over the past two years. The fall in consumption of milk was possibly a consequence of increasing prices in the market over the past years.

Table 6. Percentage of children consuming different food groups in past 24 hours

Panel A 6-23 months	Mean (%)					Percentage Points Changes		
	R1 (Dec 21-Feb 22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Grains	95.0	98.8	98.9	98.8	97.5	-1.4	-1.3	2.5**
Legumes & Nuts	45.2	47.4	51.1	50.2	55.1	4.0	7.7**	10.0**
Milk/dairy products	39.9	34.3	36.0	32.7	16.5	-19.5***	-17.7***	-23.4***
Meat & Fish	54.7	61.6	65.5	67.5	68.3	2.8	6.7*	13.6***
Eggs	50.3	48.8	49.7	62.2	58.6	9.0**	9.8**	8.3**
Vit-A rich fruit/ vegetables	42.2	57.3	56.7	59.0	71.3	14.6***	14.1***	29.1***
Other fruits /vegetables	68.4	68.2	58.8	67.8	60.6	1.7	-7.6**	-7.9**
Panel B 6-59 months	**Mean (%)**					**Percentage Points Changes**		
	R1 (Dec 21-Feb 22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Grains	-	99.4	99.5	99.0	98.3	-1.1***	-1.0**	-
Legumes & Nuts	-	57.4	56.5	59.4	63.6	7.0***	6.2***	-
Milk/dairy products	-	28.5	28.5	28.2	17.5	-11.0***	-11.0***	-
Meat & Fish	-	75.8	76.8	78.3	77.2	0.4	1.4	-
Eggs	-	55.0	55.4	60.8	58.3	2.9	3.3*	-
Vit-A rich fruit/ vegetables	-	66.5	69.0	70.8	76.7	7.7***	10.2***	-
Other fruits /vegetables	-	77.2	70.0	76.5	74.2	4.1**	-3.0*	-

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in age adjusted trend between rounds: * p < 0.10, ** p < 0.05, *** p < 0.01.

Figure 7. Percentage of children (6-59 months) consuming junk food in past 24 hours



Source: Authors' calculations from the Myanmar Household Welfare Survey.

In the latest round of the survey, we also collected data on consumption of unhealthy food for children aged 6 – 59 months. **We find a stunningly high consumption of unhealthy food among young children under 5 years (Figure 7)** – 41.7 percent of children under 5 consumed soft drinks, 74.4 percent consumed sweet food/beverages, 48.2 percent consumed salty, fried or fast food, while 9.6 percent consumed processed meats in the 24 hours prior to the survey date. Consumption of these unhealthy foods is slightly higher among girls as well as those in wealthier households. Appendix Table A.14 also presents the results by states/regions of Myanmar.

3.3 Reduced Coping Strategies Index (rCSI)

In Round 8 (October–December 2024), the survey included the reduced Coping Strategies Index (rCSI), which measures both the frequency and severity of five pre-defined food-related coping strategies employed by the household in the seven days prior to the survey (see Table 7). These strategies remain widespread across Myanmar, with notable differences by gender, location, and asset level. **Nationally, 31.7 percent of households reported relying on less preferred or less expensive foods—more common among women (34.2 percent) than men (28.3 percent), and highest among asset-poor households (41.9 percent) compared to 19.1 percent among the asset-rich**.

Table 7. Reduced coping strategies index (rCSI)

	National	Male	Female	Rural	Urban	Asset Poor	Asset Low	Asset Rich
	% of household utilized coping method							
Relied on less preferred/expensive food	31.7	28.3	34.2	31.0	33.1	41.9	31.4	19.1
Borrowed/relied on food from friends/relatives	12.7	10.2	14.7	12.4	13.5	19.7	12.3	4.6
Reduced number of meals eaten per day	4.9	4.6	5.2	4.8	5.4	8.3	4.4	1.6
Reduced portion size of meals	5.5	4.8	6.1	5.3	6.0	9.8	4.3	2.0
Restricted consumption by adults in order for small children to eat	7.9	6.1	9.3	7.5	8.7	12.6	6.4	4.2
	Average days strategy employed in past 7 days							
Relied on less preferred/expensive food	1.2	1.1	1.4	1.2	1.3	1.6	1.2	0.7
Borrowed/relied on food from friends/relatives	0.4	0.3	0.4	0.4	0.4	0.6	0.4	0.1
Reduced number of meals eaten per day	0.2	0.2	0.2	0.2	0.2	0.3	0.2	0.1
Reduced portion size of meals	0.2	0.2	0.2	0.2	0.2	0.3	0.2	0.1
Restricted consumption by adults in order for small children to eat	0.3	0.2	0.4	0.3	0.3	0.5	0.2	0.2
rCSI Score	**3.2**	**2.6**	**3.7**	**3.1**	**3.5**	**4.9**	**3.0**	**1.6**

Source: Authors' calculations from the Myanmar Household Welfare Survey.

Other coping strategies included borrowing food (12.7 percent), reducing meal frequency (4.9 percent), shrinking portion sizes (5.5 percent), and adults skipping meals so children could eat (7.9 percent). Women consistently reported higher use of these strategies. Rural households showed slightly greater reliance than urban ones, and poorer households employed coping strategies more

frequently. The average rCSI score (out of 56)[2] was highest among asset-poor households at 4.9, and lowest among asset-rich households at 1.6 – signaling greater food-related stress among the poor. On average, households relied on less preferred foods 1.2 days per week and restricted adult consumption for children 0.3 days per week. These findings highlight persistent food insecurity, especially among women and low-asset households.

Appendix Table A.15 highlights significant subnational disparities in the adoption of food-related coping strategies across Myanmar, reflecting varying levels of food insecurity and household vulnerability. **Kayah emerges as the most food-insecure region, with the highest reduced Coping Strategies Index (rCSI) score of 6.6** and widespread use of multiple coping behaviors—over half of households (50.8 percent) relied on less preferred or less expensive foods, and nearly one in five reduced their meal frequency or restricted adult food intake to prioritize children. **Kachin and Rakhine also show elevated rCSI scores (5.9 and 4.9, respectively),** underscoring the compounded effects of conflict, displacement, and market disruptions.

In contrast, regions such as **Ayeyarwady (2.5) and Bago (2.7) report far lower rCSI scores and coping strategy prevalence**, suggesting relatively better household resilience and access to food. These geographic disparities point to deepening inequalities in food access, with conflict-affected and asset-poor areas bearing a disproportionate burden of food insecurity.

4. REGRESSION ANALYSIS OF THE PREDICTORS OF FOOD INSECURITY AND INADEQUATE DIET DIVERSITY

To explore possible risk factors for food security and nutrition, we conduct a panel random effects linear probability model exploring how welfare measures, self-reported shocks, prices, and household characteristics affect the probability of households experiencing moderate to severe hunger, and of having low food consumption scores as well as the likelihood of low diet diversity score for adults and children aged 6-59 months. We also control for principal household income source and other household and respondent characteristics as well as include survey month and state fixed effects in the model. The estimates of the proportional change in risk of hunger and inadequate diet diversity for different associates are presented in Figure 8 and Figure 9 respectively. Full regression results are presented in appendix Table A.17.

Findings from the regression analysis are summarized below:

- **Low income and limited assets are a significant risk for food insecurity and inadequate diet diversity.** Income poor households are more likely to experience moderate to severe hunger as well as low food consumption. Such households are also likely to have adults, reproductive age women and children aged 6-59 months with poor diet quality. Similarly, households that are asset-poor and asset-low have a higher probability of experiencing hunger, having low FCS, have inadequate diet diversity for adults and reproductive aged women as well as young children compared to asset-rich households.
- **Farm households are found to be protected against food insecurity and inadequate diet quality.** Households who have some form of own farm income are less likely to experience hunger and have low household food consumption. Such households are also less likely to have adults, reproductive age women and children aged 6-59 months with poor diet quality. On the other hand, **wage worker households are particularly vulnerable to hunger and low household diet diversity. Non-farm business**

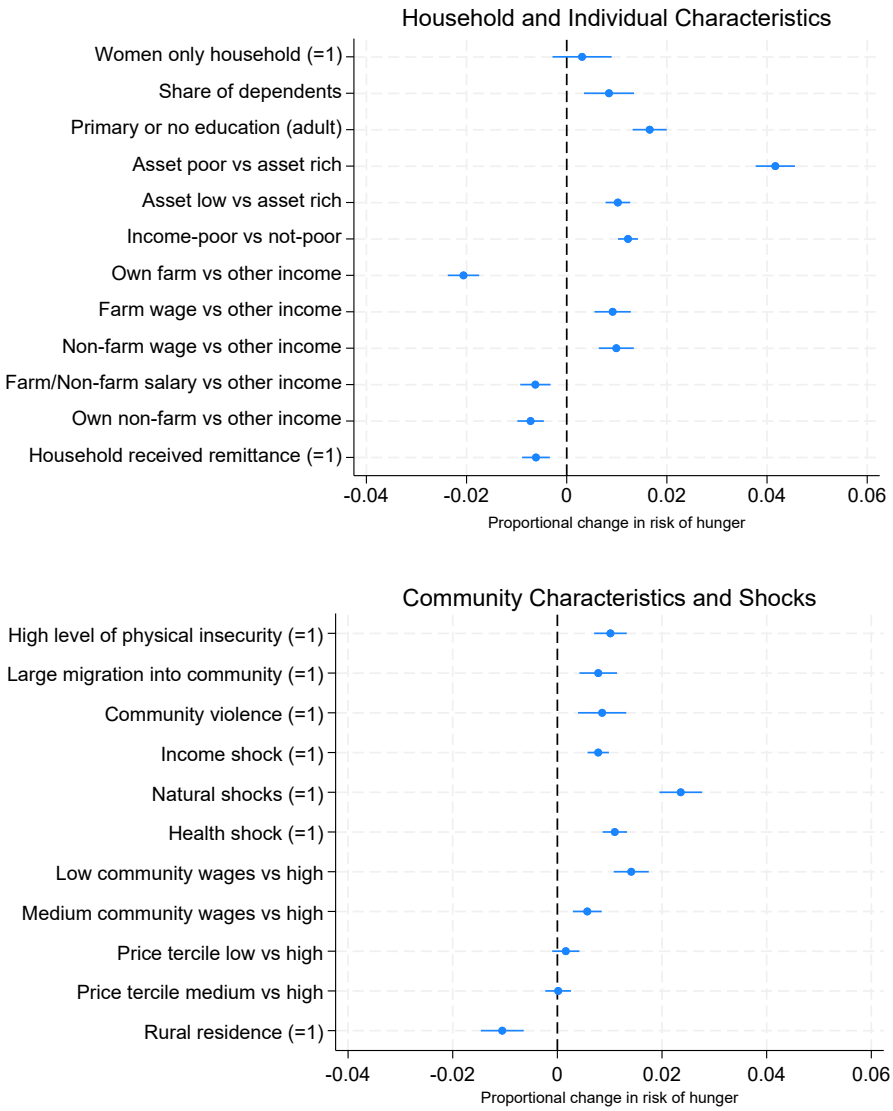
[2] The rCSI is calculated as the severity weight multiplied by the number of days coping strategy was employed. The maximum score is 56; this would happen if a household used all five strategies every day for the last 7 days. Refer to https://resources.vam.wfp.org/data-analysis/quantitative/food-security/reduced-coping-strategies-index for more information.

activities also decrease the likelihood of hunger and low diet quality for adults and children.

- **Households in low-wage communities are more likely to experience hunger and have a low FCS as well have inadequate diet diversity for reproductive aged women.** On the other hand, households in medium wage communities are more likely to be at risk of hunger.
- **Remittance-receiving households have a lower likelihood of experiencing hunger or having adults or children with inadequately diverse diets.** Remittances seem to offer substantial resilience in this sense.
- **Self-reported income shocks increase the likelihood of experiencing hunger and having inadequate diet diversity** both at the household and individual levels**.** Compared to the other kind of shocks considered in the regression framework, only income shocks are found to have a statistically significant association for young children. This indicates that even though households are able to compensate for children's diet in the face of other shocks, such as natural, health or conflict, households are particularly vulnerable and fail to mitigate consumption in the face of income shocks.
- **High levels of physical insecurity are a significant risk factor for food insecurity and diet quality**. Households reporting high levels of physical insecurity are more likely to be hungry and more likely to have inadequate diet diversity at the household level. Community violence also increases the likelihood of households experiencing hunger and the diet quality of adults. No significant association is found for young children.
- **Adults in communities with higher food prices[3] are more likely to have poor dietary diversity.**
- **Women-only households are particularly vulnerable to food insecurity** with higher likelihood of experiencing hunger as well as having inadequate diet diversity for adults and reproductive aged women. However, women-only households seem to provide more resilience for children's diet quality.
- **Having adult members with low education levels is also a significant risk factor for food insecurity and poor diet quality**. A higher share of dependents also increases the likelihood of hunger and poor diet quality at the household and individual level.

[3] We generated a food price index using prices of ten types of sentinel foods: rice, potatoes, pulses, chicken, fresh fish, dried fish, green leafy vegetables, onions, bananas, and oils. We then categorized each household into price terciles by each survey round i.e. households were placed in high-price group, medium-price group, or low-price group.

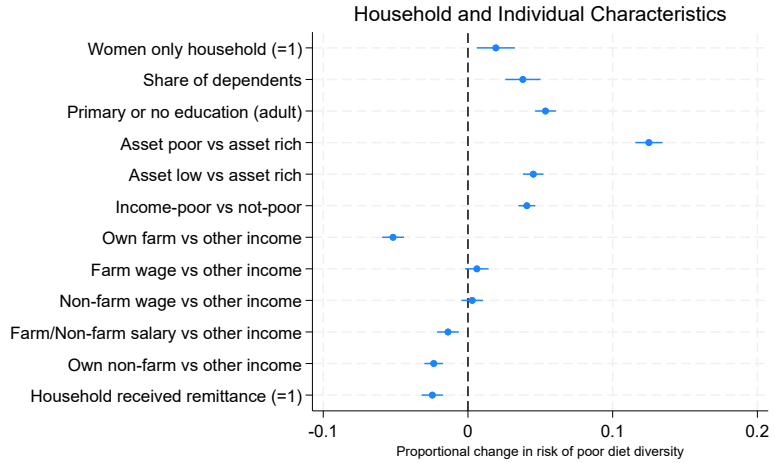
Figure 8. Linear probability model regressions of household and community level predictors of proportional changes in risk of moderate to severe hunger

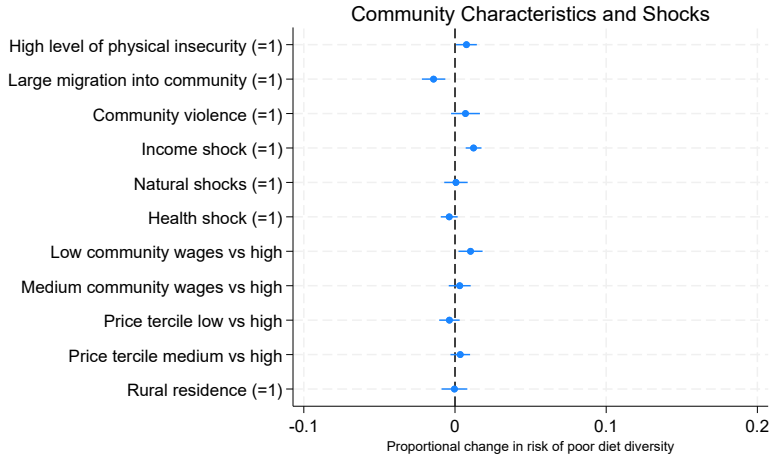


Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Additional controls not presented in the figures are age, female, household size, recall day is a special day, survey rounds and state fixed effects.

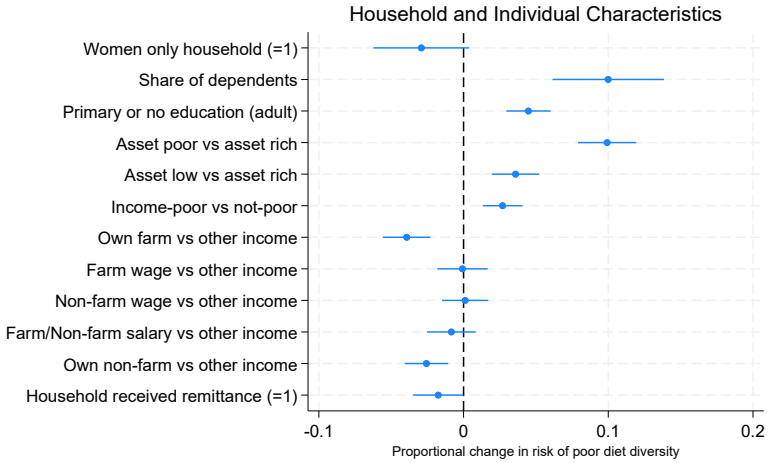
Figure 9. Linear probability model regressions of household and community level predictions of proportional changes in risks of inadequate diet diversity among adults and children 6-59 months of age

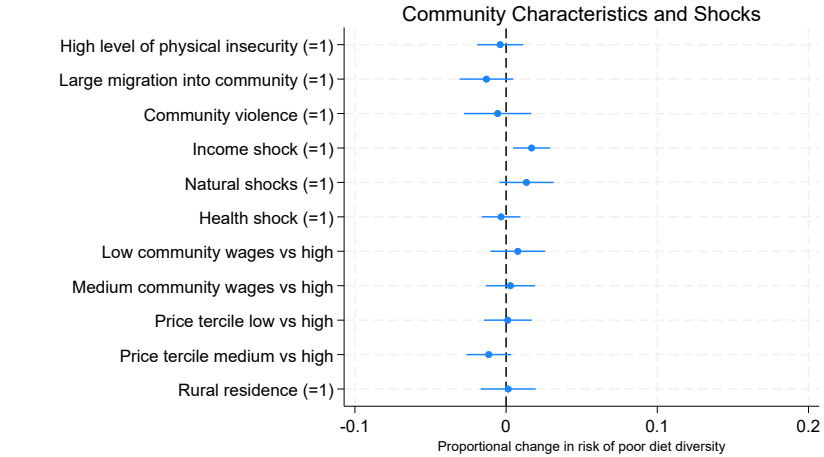
Adults (18+ years)





Children (6-59 months)





Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Additional controls not presented in the figures are age, female, household size, recall day is a special day, survey rounds and state fixed effects.

5. CONCLUDING REMARKS

The combined economic and political crises in Myanmar have adversely affected food security and nutrition. Using eight rounds of the Myanmar Household Welfare Survey (MHWS) collected from December 2021-February 2022 to October-December 2024, we document trends in food insecurity and inadequate diet diversity for different regions, socioeconomic groups and demographic groups. Our six key findings are as follows.

First, the prevalence of moderate to severe hunger is, on average, relatively low nationally at 3.0 percent. It is far more prevalent in poorer households and in more conflict affected regions like Kachin, Kayah and Chin. However, a higher proportion of households in urban areas reported experiencing moderate hunger compared to households in rural areas in the latest round of the survey. At the same time, the gap in incidence of extreme hunger seems to be increasing between rich and poor households.

Second, among households and adults specifically, dietary quality remains poor over the past two years 2022-2024, with more than a quarter of all adults without an adequately diverse diet. We find the largest increase in the prevalence of inadequate diet quality in Kachin, Shan, and Sagaing over the survey period while the highest rates are found in Kachin, Tanintharyi and Rakhine in the latest round of survey.

Third, we find a divergence in the diet quality of adult men and women over our survey period with women experiencing a larger increase in the prevalence of low dietary diversity over the past year with a 7.3 percentage point increase from December 2021 to December 2024 compared to an increase of 3.2 percentage points for men.

Fourth, the urban–rural disparity in adult dietary quality has effectively disappeared. In the past three years, the share of adults with inadequate dietary diversity increased by 7.1 percentage points in urban areas and 4.8 points in rural areas. By December 2024, both groups reported an identical prevalence of 26.0 percent.

Fifth, 30.7 percent of all children aged 6-23 months and 21.3 percent of all children aged 6-59 months do not have an adequately diverse diet in the latest round of survey.

Sixth, regression analysis reveals low income and asset ownership to be important risk factors for food security and diet quality, along with conflict and physical insecurity in the past year. Falling income is found to be a significant shock for hunger and diets and is the only shock that significantly affects young children's diets. Even controlling for various forms of poverty and insecurity, wage workers are found to be especially vulnerable to risks of low diet quality, possibly driven by the decline in real wages over the last year. Adults in communities with higher food prices are also more likely to have poor dietary diversity. In contrast, children and adults from farming households appear to be somewhat less at risk of food insecurity and inadequate diet diversity, as are households that received remittances. Women-only households are found to be vulnerable to food insecurity.

Of note, the deterioration of diets captured through our phone survey is likely to be an underestimation of the true deterioration in diet quality in Myanmar due to various factors. First, the survey struggled to capture some of the most conflict-affected areas due to limited access to cellphones and electricity, especially in Kayah and Rakhine. Second, our ability to survey internally displaced persons (IDPs), which rose to about 3.5 million according to reports from UNHCR[4], was limited since IDPs are in the most precarious situations and have limited access to phones, and thus are under-sampled. Third, dietary diversity indicators do not capture quantities, so households and

[4] As of May 2025 retrieved from https://www.unocha.org/publications/report/myanmar/myanmar-humanitarian-update-no-46-23-may-2025

individuals could continue consuming some food groups, but in smaller quantities, with important implications for nutrient intake that are not fully captured by standard dietary diversity metrics.

To avert an even more severe nutrition crisis in Myanmar, effective multisectoral steps are required to protect nutritionally vulnerable populations. In the face of multiple economic shocks such as falling income and rising prices, there is a need for renewed implementation of social protection programs, including maternal and child cash transfers, to improve food security and diet quality. Cash-plus programs hold considerable promise in providing resilience to vulnerable households with recent evidence from Maffioli et al. (2023) showing that maternal cash transfers and nutrition behavioral change communication (BCC) had sustained benefits on maternal and child diet diversity during 2020-2021 economic crises approximately three years post-program. Remote implementation through digital cash transfers as well as BCC through phone or online sessions - where phone connections still exist - should be piloted and evaluated.

In addition, recent evidence suggests a faster deterioration of diet quality for women, especially in rural areas. This new and worrying trend of a gender gap is disconcerting given the potential threat of intergenerational transmission of inadequate nutrition by this special demographic group, and suggests not just the need for maternal and child transfers in the first 1000 days, but perhaps also the need for combinations of social protection, nutrition and gender interventions for women.

Another potential avenue for improving welfare of the Myanmar population is facilitating emigration overseas, improving remuneration of overseas migrations and their ability to send money to family members back in Myanmar. Improving the welfare, working conditions and legal rights of Myanmar migrants in countries such as Thailand may also help. Remittances are clearly an effective coping mechanism for households in Myanmar’s current political and economic circumstances. At the same time, migration-related disruptions to agricultural production and supply chain functions should be monitored and minimized – such as through support to mechanization services – in order to keep the agri-food system functioning as smoothly as possible.

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APPENDIX TABLES

Table A.1. Prevalence of moderate to severe hunger by state, sorted by highest prevalence in R8

	Means (%)					Percentage Points Changes		
	R1 (Dec21-Feb22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Kachin	3.8	3.9	3.8	3.2	6.5	2.7	2.6	2.7
Kayah	4.5	4.4	5.4	5.2	6.3	0.9	1.9	1.9
Chin	7.1	9.7	9.5	14.4	6.0	-3.5	-3.8	-1.2
Kayin	6.1	6.6	2.9	4.5	4.9	2.0	-1.6	-1.1
Mon	5.7	6.7	4.2	2.6	4.2	-0.1	-2.6	-1.5
Nay Pyi Taw	6.9	2.9	6.0	4.3	4.0	-2.0	1.2	-2.9
Rakhine	6.2	6.5	4.1	8.0	3.9	-0.2	-2.6	-2.3
Tanintharyi	5.7	4.9	7.6	5.1	3.5	-4.1	-1.4	-2.2
Yangon	3.9	3.4	3.6	3.3	3.0	-0.6	-0.3	-0.9
Magway	6.2	4.3	3.1	2.2	3.0	-0.1	-1.3	-3.1**
Shan	3.5	3.3	4.0	2.9	2.9	-1.1	-0.4	-0.6
Bago	2.7	5.2	3.6	1.8	2.8	-0.8	-2.4***	0.0
Mandalay	3.7	2.8	2.1	2.5	2.2	0.1	-0.6	-1.5**
Ayeyarwady	6.4	3.5	2.3	2.9	1.8	-0.4	-1.7**	-4.6***
Sagaing	1.4	2.5	3.2	2.0	1.7	-1.6**	-0.8	0.2
No of obs.	12,100	12,924	12,898	13,163	12,058			

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

Table A.2. Frequency of food groups consumed, and Food Consumption Score (FCS) by rural households based on 7-day recall, household level

	R1 (Dec 21-Feb 22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)
Main staples	7.0	7.0	7.0	7.0	7.0
Pulses/legumes/nuts	3.1	2.5	2.5	2.4	2.5
Milk/dairy products	1.0	0.5	0.6	0.6	0.5
Meat, fish, and eggs	4.9	4.1	4.4	4.3	4.4
Vegetables	5.2	5.5	5.7	5.7	5.7
Fruits	2.4	2.4	2.0	3.1	2.1
Oil, fats, and butter	6.6	6.7	6.8	6.8	6.9
Sugar or sweet	3.0	1.9	1.9	2.9	2.5
Food Consumption Score (0-112)	59.2	52.2	53.1	54.6	53.6
Acceptable food consumption	89.3	82.0	84.1	84.8	84.4
Borderline food consumption	10.1	16.8	15.0	14.5	14.9
Poor food consumption	0.6	1.1	0.9	0.7	0.7
No. of observations	12,100	12,924	12,898	13,163	12,058

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Statistics for food groups are number of days households have consumed in 7 days prior to survey. Food Consumption Score is the average score in the population (out of 112). Acceptable, borderline, and poor food consumption is based on cutoff as described in text; statistics presented are percentage of households in each category of food consumption. Asterisks refer to the level of statistical significance in the difference in means between Rounds: * p < 0.10, ** p < 0.05, *** p < 0.01.

Table A.3. Frequency of food groups consumed, and Food Consumption Score (FCS) by urban households based on 7-day recall, household level

	R1 (Dec 21-Feb 22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)
Main staples	7.0	7.0	7.0	7.0	7.0
Pulses/legumes/nuts	3.2	2.5	2.6	2.4	2.4
Milk/dairy products	1.9	1.1	1.2	1.1	0.9
Meat, fish, and eggs	5.2	4.6	4.8	4.9	4.9
Vegetables	5.3	5.5	5.7	5.7	5.7
Fruits	2.8	2.5	2.3	3.2	2.1
Oil, fats, and butter	6.7	6.9	6.9	6.8	6.9
Sugar or sweet	4.1	2.6	2.5	4.0	3.6
Food Consumption Score (0-112)	65.3	57.8	58.3	59.2	57.6
Acceptable food consumption	93.9	90.0	90.0	90.9	89.1
Borderline food consumption	5.8	9.7	9.7	8.4	10.3
Poor food consumption	0.4	0.3	0.3	0.7	0.6
No. of observations	12,100	12,924	12,898	13,163	12,058

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Statistics for food groups are number of days households have consumed in 7 days prior to survey. Food Consumption Score is the average score in the population (out of 112). Acceptable, borderline, and poor food consumption is based on cutoff as described in text; statistics presented are percentage of households in each category of food consumption. Asterisks refer to the level of statistical significance in the difference in means between Rounds: * p < 0.10, ** p < 0.05, *** p < 0.01.

Table A.4. Prevalence of low food consumption score (FCS<=38.5) by state/region, sorted by highest prevalence in R8

	Percentage (%)					Percentage Points Changes		
	R1 (Dec21-Feb22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Chin	37.8	50	40.7	33.9	34.6	-6.1	-15.4*	-3.2
Kayah	33.2	20	23	52.3	25.4	2.4	5.4	-7.8
Magway	14.1	22.9	19.9	19.8	19.5	-0.4	-3.4	5.4**
Shan	16.2	18.7	18.7	21.1	19.3	0.6	0.6	3.1
Kayin	7.5	21.2	14.9	11.6	16.3	1.4	-4.9	8.8**
Kachin	7.3	12.4	7.4	15.9	16	8.6	3.6	8.7
Nay Pyi Taw	7.9	8.7	13.2	13.4	14.5	1.3	5.8*	6.6**
Rakhine	10.8	18.6	12.5	16.4	14.3	1.8	-4.2	3.5
Ayeyarwady	8.3	15.4	13.7	14	13.8	0.1	-1.6	5.5***
Bago	8.7	14.7	11.3	14.9	13.7	2.4	-1	5.0***
Mon	6.2	16.1	15.6	11.7	12.4	-3.2	-3.7	6.3**
Tanintharyi	5.9	14.3	15.3	11	11.9	-3.4	-2.5	6.0**
Mandalay	9.2	13	14	9.1	11.8	-2.2	-1.2	2.5*
Sagaing	7.3	16.1	13	8.7	11.3	-1.7	-4.8***	4.0***
Yangon	4.9	10.8	11.6	7.8	10.9	-0.7	0	6.0***
No of obs.	12,100	12,924	12,898	13,163	12,058			

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

Table A.5. Percentage of adult men consuming different food groups in the past 24 hours

	Means (%)					Percentage Points Changes		
	R1 (Dec21-Feb22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Cereals/grains /roots	99.3	99.6	99.6	99.2	99.7	0.0	0.1	0.4**
Beans	55.0	51.3	52.3	55.6	55.7	3.4**	4.5***	0.8
Nuts or seeds	43.6	36.9	36.1	36.9	42.0	5.9***	5.2***	-1.5
Milk and dairy products	15.9	12.0	13.7	13.1	12.4	-1.3	0.4	-3.5***
Egg	50.0	47.0	49.3	53.0	50.1	0.8	3.1**	0.1
Meat and Fish	89.3	86.8	85.5	89.1	87.2	1.7*	0.3	-2.2**
Other fruits	38.9	50.7	40.9	53.7	44.0	3.1**	-6.7***	5.0***
Vit-A rich fruit /vegetables	47.4	30.0	33.5	29.7	33.9	0.4	3.9***	-13.5***
Dark green vegetables	85.0	84.3	82.8	86.0	85.4	2.6**	1.2	0.4
Other vegetables	82.1	79.1	75.4	74.8	79.5	4.2***	0.5	-2.6**
No of obs.								

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

Table A.6. Percentage of adult women consuming different food groups in the past 24 hours

	Means (%)					Percentage Points Changes			
	R1 (Dec21 -Feb22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1	Diff: R8 Male – Female
Cereals/grains /roots	99.4	99.6	99.6	99.0	99.2	-0.5**	-0.4**	-0.2	0.5**
Beans	52.6	47.8	48.7	52.1	54.3	5.6***	6.5***	1.8	1.4
Nuts or seeds	44.3	38.5	34.9	36.5	39.2	4.3***	0.7	-5.1***	2.8**
Milk and dairy products	16.8	13.7	13.7	13.5	12.4	-1.3	-1.3*	-4.4***	0.0
Egg	55.0	47.8	45.7	51.6	48.9	3.2**	1.1	-6.1***	1.2
Meat and Fish	88.6	83.8	82.1	87.0	86.0	3.8***	2.1**	-2.7***	1.2
Other fruits	42.5	51.0	40.4	52.7	41.6	1.2	-9.4***	-0.9	2.4*
Vit-A rich fruit /vegetables	51.0	31.8	32.6	27.3	32.4	-0.2	0.6	-18.7***	1.5
Dark green vegetables	83.5	84.0	80.6	83.5	82.5	1.9*	-1.6*	-1.0	3.0***
Other vegetables	82.0	77.5	72.0	71.5	76.7	4.7***	-0.8	-5.2***	2.8**
No of obs.									

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

Table A.7. Percentage of adults with inadequate diet diversity by state/region, sorted by highest prevalence in R8

	Means (%)					Percentage Points Chnages		
	R1 (Dec21-Feb22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Kachin	16.0	23.8	24.1	23.5	34.7	10.6	10.9	18.7**
Tanintharyi	25.8	31.4	40.2	34.9	34.1	-6.1	2.7	8.3
Ayeyarwady	29.5	33.6	36.8	31.0	33.3	-3.5	-0.2	3.9*
Rakhine	34.3	29.7	43.2	36.2	33.3	-9.9	3.6	-1.0
Mon	25.8	32.9	34.0	30.2	33.0	-1.0	0.1	7.2*
Kayin	28.4	33.2	38.3	30.5	32.4	-5.9	-0.8	4.0
Chin	28.2	43.9	37.8	42.9	31.2	-6.6	-12.7	3.1
Yangon	22.1	25.1	32.6	24.8	27.2	-5.4**	2.1	5.1***
Bago	21.7	25.0	34.5	27.4	24.6	-9.9***	-0.4	2.9
Magway	19.5	23.8	28.7	22.9	23.1	-5.6**	-0.7	3.6
Mandalay	15.1	17.8	21.3	16.7	22.6	1.3	4.8**	7.5***
Kayah	24.5	16.7	34.6	33.1	22.2	-12.4*	5.5	-2.3
Shan	13.4	20.4	25.2	25.4	20.1	-5.1*	-0.3	6.8***
Nay Pyi Taw	10.7	21.3	23.9	16.0	18.4	-5.5	-2.9	7.6*
Sagaing	10.0	18.5	25.9	15.3	17.7	-8.2***	-0.8	7.8***
No of obs.	12,100	12,924	12,898	13,163	12,058			

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

Table A.8. Percentage of reproductive age women (15-49 years) with inadequate diet diversity

	Means (%)					Percentage Points Changes		
	R1 (Dec21-Feb22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
National	21.5	25.6	33.7	27.4	28.3	-5.4***	2.7**	6.8***
Rural	22.8	26.4	34.7	27.9	28.0	-6.7***	1.6	5.2***
Urban	18.6	23.7	31.1	26.2	29.0	-2.0	5.3**	10.4***
Asset-poor (0-3)	30.3	34.4	42.6	37.4	37.0	-5.6**	2.6	6.8**
Asset-low (4-6)	20.1	22.0	30.8	25.3	26.1	-4.7**	4.1**	6.0***
Asset-rich (7-10)	12.3	17.3	23.5	17.0	19.8	-3.7	2.5	7.5***
Income poor	24.5	29.1	36.0	30.7	30.1	-5.9***	1.0	5.6***
Income not poor	17.1	18.7	26.2	21.0	21.9	-4.4**	3.2*	4.8**
No of obs.	4,955	5,394	5,486	5,779	5,297			

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

Table A.9. Percentage of reproductive age women (15-49 years) consuming different food groups in the past 24 hours

	Means (%)					Percentage Points Changes		
	R1 (Dec21-Feb22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Cereals/ grains/roots	99.3	99.6	99.7	99.0	99.2	-0.4**	-0.4*	-0.1
Beans	51.7	46.7	47.6	50.1	53.4	5.8***	6.7***	1.6
Nuts or seeds	42.7	38.4	35.0	36.2	38.5	3.5**	0.1	-4.2***
Milk and dairy products	16.3	13.8	13.0	12.9	11.9	-1.2	-1.9**	-4.4***
Egg	53.5	47.5	45.6	50.3	48.0	2.5*	0.5	-5.5***
Meat and Fish	87.9	83.3	81.3	86.6	85.6	4.3***	2.4**	-2.3**
Other fruits	41.2	49.5	39.1	51.0	40.1	0.9	-9.4***	-1.1
Vit-A rich fruit /vegetables	49.8	31.3	31.9	26.4	32.1	0.2	0.9	-17.6***
Dark green vegetables	83.3	83.7	79.8	82.9	82.5	2.7**	-1.2	-0.7
Other vegetables	80.8	77.0	70.4	71.1	76.6	6.2***	-0.4	-4.3***
No of obs.	4,955	5,394	5,486	5,779	5,297			

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

Table A.10. Percentage of reproductive age women (15-49 years) with inadequate diet diversity by state/region, sorted by highest prevalence in R8

	Means (%)					Percentage Points Changes		
	R1 (Dec21-Feb22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Kachin	15.8	23.5	26.0	32.4	42.2	16.3	18.7	26.5**
Ayeyarwady	30.1	34.3	41.3	33.9	41.2	-0.1	6.9*	11.1***
Rakhine	38.5	28.2	47.2	43.1	38.6	-8.5	10.4	0.1
Tanintharyi	32.4	33.9	50.5	33.9	37.1	-13.4	3.2	4.7
Mon	25.7	29.2	35.7	29.3	36.5	0.9	7.4	10.9*
Kayin	25.0	30.6	39.6	31.8	32.2	-7.4	1.6	7.2
Yangon	23.2	26.3	37.4	25.8	28.4	-9.0***	2.1	5.2
Chin	23.9	45.4	35.9	22.8	27.9	-8.0	-17.5	4.0
Magway	19.0	27.6	29.6	22.9	27.1	-2.5	-0.5	8.1*
Mandalay	14.9	20.7	21.1	19.9	26.8	5.8*	6.1*	12.0***
Shan	13.7	19.5	25.2	27.7	24.9	-0.3	5.5	11.3***
Kayah	42.1	18.5	26.7	34.0	24.3	-2.4	5.8	-17.8
Bago	25.3	24.2	38.8	31.2	23.3	-15.5***	-0.9	-2.0
Nay Pyi Taw	10.4	26.1	27.2	19.8	20.8	-6.5	-5.3	10.4*
Sagaing	9.8	19.9	27.5	16.3	18.6	-8.9***	-1.3	8.9***

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

Table A.11. Percentage of boys consuming different food groups in the past 24 hours

Panel A 6-23 months	Means (%)					Percentage Points Changes		
	R1 (Dec21-Feb22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Grains	95.9	99.1	99.2	98.8	96.6	-2.6*	-2.5*	0.7
Legumes & Nuts	43.5	46.3	54.4	52.2	51.7	-2.8	5.3	8.1*
Milk/dairy products	41.9	31.9	39.1	34.0	15.8	-23.3***	-16.1***	-26.1***
Meat and Fish	57.7	63.3	65.8	66.8	64.9	-0.9	1.6	7.2
Egg	49.2	46.6	49.9	64.2	56.8	6.8	10.2**	7.5
Vit-A rich fruits/veg	42.7	56.4	57.8	56.2	69.2	11.4**	12.8***	26.5***
Other fruits/veg	69.1	67.8	60.5	67.9	65.2	4.7	-2.6	-3.9
No of observations	339	366	390	382	312			
Panel B 6-59 months	**Means (%)**					**Percentage Points Changes**		
	R1 (Dec21-Feb22)	**R4 (Oct-Dec 22)**	**R6 (Sep-Nov 23)**	**R7 (Apr-Jun 24)**	**R8 (Oct-Dec 24)**	**R8-R6**	**R8-R4**	**R8-R1**
Grains	-	98.5	98.0	99.2	97.9	-0.1**	-0.6***	-
Legumes & Nuts	-	58.7	55.9	59.3	61.0	5.1	2.4*	-
Milk/dairy products	-	35.0	28.0	27.0	15.6	-12.4***	-19.4***	-
Meat and Fish	-	70.1	73.2	78.4	75.9	2.7	5.8	-
Egg	-	54.8	55.7	59.8	56.0	0.3	1.3	-
Vit-A rich fruits/veg	-	66.6	67.4	69.8	75.2	7.8***	8.6***	-
Other fruits/veg	-	74.7	68.3	75.6	75.5	7.2**	0.8	-
No of observations		1,242	1,185	1,225	1,028			

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

Table A.12. Percentage of girls consuming different food groups in the past 24 hours

Panel A 6-23 months	Means (%)					Percentage Points Changes		
	R1 (Dec21-Feb22)	R4 (Oct-Dec 22)	R6 (Sep-Nov 23)	R7 (Apr-Jun 24)	R8 (Oct-Dec 24)	R8-R6	R8-R4	R8-R1
Grains	94.1	98.5	98.5	98.8	98.4	-0.2	-0.1	4.2**
Legumes & Nuts	46.8	48.6	47.3	48.3	58.4	11.1*	9.8*	11.6**
Milk/dairy products	37.8	36.8	32.5	31.4	17.2	-15.3***	-19.5***	-20.6***
Meat and Fish	51.6	59.9	65.2	68.3	71.6	6.4	11.7*	20.0***
Egg	51.5	51.2	49.4	60.3	60.4	11.0*	9.2*	9.0
Vit-A rich fruits/veg	41.7	58.1	55.5	61.8	73.3	17.8***	15.2***	31.6***
Other fruits/veg	67.7	68.6	56.9	67.7	56.1	-0.8	-12.5**	-11.6**
No of observations	345	346	356	397	317			
Panel B 6-59 months	**Means (%)**					**Percentage Points Changes**		
	R1 (Dec21-Feb22)	**R4 (Oct-Dec 22)**	**R6 (Sep-Nov 23)**	**R7 (Apr-Jun 24)**	**R8 (Oct-Dec 24)**	**R8-R6**	**R8-R4**	**R8-R1**
Grains	-	97.6	98.4	98.9	98.8	0.4*	1.2	-
Legumes & Nuts	-	58.2	57.5	59.6	66.1	8.6***	7.9**	-
Milk/dairy products	-	35.2	29.2	29.5	19.5	-9.7***	-15.8***	-
Meat and Fish	-	73.8	72.7	78.3	78.6	5.9***	4.8	-
Egg	-	49.0	58.4	61.9	60.5	2.1	11.5	-
Vit-A rich fruits/veg	-	67.2	67.7	71.9	78.2	10.5**	11.1***	-
Other fruits/veg	-	73.0	66.1	77.4	72.9	6.8	-0.1	-
No of observations		1,156	1,190	1,174	1,025			

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Asterisks refer to the level of statistical significance in the difference in means across Rounds: *p<0.10,** p<0.05,*** p<0.01.

Table A.13. Household hunger scale (HHS) measures by location, poverty and asset level in Round 8

	Percentage (%)						Percentage Points Changes		
	Location		Poverty		Asset level		Diff:		
	Rural	Urban	Poor	Not poor	Asset poor	Asset rich	Rural – Urban	Income poor – not poor	Asset poor – rich
HHS classifications									
Little to no hunger	97.2	96.5	95.8	99.5	94.3	99.2	0.8	-3.7***	-4.9***
Moderate hunger	2.2	2.9	3.4	0.4	4.2	0.8	-0.8	3.0***	3.4***
Severe hunger	0.6	0.6	0.9	0.2	1.6	0.1	0.0	0.7**	1.5
Moderate to severe hunger	2.8	3.5	4.2	0.5	5.7	0.8	-0.8	3.7***	4.9***
No food of any kind the house	6.5	7.7	9.3	1.9	11.6	1.9	-1.2	7.3***	9.7***
Rarely (1-2 times) [a]	30.7	35.4	31.1	44.2	29.6	49.0	-4.7	-13.1	-19.4**
Sometimes (3-10 times) [a]	47.5	46.0	47.1	42.4	42.9	36.8	1.5	4.7	6.1**
Often (more than 10 times) [a]	21.7	18.5	21.8	13.3	27.5	14.2	3.2	8.4	13.3
Went to sleep hungry	2.5	4.2	3.9	1.1	5.3	0.8	-1.7***	2.8***	4.5***
Rarely (1-2 times) [a]	36.3	37.9	38.5	31.7	35.3	40.5	-1.5	6.8	-5.2
Sometimes (3-10 times) [a]	44.2	48.4	44.1	55.8	42.5	52.9	-4.3	-11.7	-10.5
Often (more than 10 times) [a]	19.5	13.7	17.4	12.5	22.3	6.6	5.8	4.9	15.7
Went full day & night without food	1.0	1.6	1.5	0.3	2.4	0.2	-0.6	1.2***	2.1***
Rarely (1-2 times) [a]	50.6	45.5	54.1	10.0	49.5	62.3	5.1	44.1	-12.8
Sometimes (3-10 times) [a]	32.2	48.0	34.3	59.3	37.7	37.7	-15.7	-25.0*	0.0
Often (more than 10 times) [a]	17.2	6.5	11.5	30.7	12.8	0.0	10.7	-19.2	12.8
No of observations	8,773	4,390	7,351	5,457	3,742	4,069			

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: a. The frequency of occurrence questions is for the subsample of households that answered "yes" to the three hunger related questions. Asterisks refer to the level of statistical significance in the difference in means between Rounds: * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$. "Went to sleep hungry" and "went full day & night without food" refer to any household member undergoing these experiences.

Table A.14. Percentage of adults (18+) and children (6-59 months) consuming unhealthy food by state/region in Round 8

	Adult (18+)				Children 6-59 months			
	Soft Drink	Sweetened Beverages	Salty, Fast or Fried Snacks	Processed Meat	Soft Drink	Sweetened Beverages	Salty, Fast or Fried Snacks	Processed Meat
Kachin	37.2	54.8	33.7	21.4	50.6	86.9	39.4	1.5
Kayah	25.1	41.5	40.9	23.8	12.5	66.6	72.6	43.7
Kayin	61.2	76.1	41.7	19.1	56.1	86.3	64.7	15.9
Chin	35.5	42.0	20.7	13.0	29.0	43.5	27.7	14.2
Sagaing	35.0	60.7	42.6	16.5	31.2	62.8	57.0	12.2
Tanintharyi	50.5	70.7	47.8	18.4	45.7	78.1	46.9	11.3
Bago	39.5	59.7	31.2	21.4	39.8	71.6	45.7	16.3
Magway	30.3	51.2	35.1	14.6	35.6	66.2	47.8	5.3
Mandalay	39.2	63.9	42.7	14.3	45.8	77.4	59.2	7.5
Mon	55.4	77.1	32.3	22.1	49.7	82.8	41.8	12.1
Rakhine	36.0	59.0	34.2	24.8	37.7	80.1	41.3	5.2
Yangon	55.5	71.5	37.4	15.8	47.7	76.2	46.2	6.8
Shan	41.2	59.2	42.1	16.3	36.0	67.1	49.2	8.3
Ayeyarwady	39.9	62.6	28.7	19.8	34.0	75.2	34.6	11.6
Nay Pyi Taw	45.6	65.3	33.1	28.3	63.4	81.2	38.2	14.0

Source: Authors' calculations from the Myanmar Household Welfare Survey.

Table A.15. Percentage distribution of reduced Coping Strategies Index (rCSI) Compontents and rCSI score by state/region in Round 8

	Relied on less preferred/expensive food	Borrowed/relied on food from friends/relatives	Reduced number of meals eaten per day	Reduced portion size of meals	Adults restricted intake for children	rCSI Score
Kayah	50.8	27.0	19.0	12.7	19.0	6.6
Kachin	41.5	18.3	13.1	14.7	11.0	5.9
Rakhine	43.0	21.5	6.8	10.3	10.5	4.9
Tanintharyi	43.9	16.7	4.9	4.5	8.8	3.9
Kayin	29.4	16.3	6.7	8.0	8.9	3.6
Shan	30.7	13.7	6.2	6.2	9.1	3.6
Chin	31.9	10.4	9.7	14.1	14.0	3.6
Nay Pyi Taw	32.8	11.1	8.5	5.7	10.7	3.6
Magway	33.3	12.4	5.2	5.1	8.6	3.5
Sagaing	30.0	12.4	4.1	3.9	7.0	2.9
Mon	27.4	12.9	4.5	6.3	9.2	2.9
Yangon	28.2	11.1	5.1	5.7	7.1	2.9
Mandalay	29.0	10.8	2.8	3.4	6.5	2.7
Bago	31.4	10.5	3.3	4.0	6.0	2.7
Ayeyarwady	29.6	10.9	2.9	3.6	5.9	2.5

Source: Authors' calculations from the Myanmar Household Welfare Survey.

Table A.16. Mean of household and community predictors by survey round

	R1 (Dec 21 to Feb 22)	R4 (Oct 22 to Dec 22)	R6 (Sep 23 to Nov 23	R7 (Apr to Jun 24)	R8 (Oct-Dec 24)
Respondent age (in years)	38.5	38.0	39.0	41.4	41.4
Women only household	9.4	9.4	9.4	9.4	9.4
Share of dependents	47.3	43.5	45.0	44.7	44.8
Household size (number)	4.6	4.1	4.0	4.0	4.0
Primary or no education (adult)	59.4	58.8	55.8	59.4	56.2
Female	54.4	52.4	53.9	56.1	56.3
Asset poor	33.5	37.3	36.7	34.0	32.8
Asset low	39.9	39.4	40.5	40.4	41.3
Asset rich	26.6	23.3	22.8	25.6	66.9
Income-poor	46.1	61.5	68.0	60.5	25.9
Own farm income	37.0	37.8	39.5	34.3	35.5
Farm wage income	24.2	27.0	22.4	19.3	17.9
Non-farm wage income	23.7	26.0	21.9	22.5	20.1
Farm/Non-farm salary income	21.4	22.2	21.7	22.1	22.8
Own non-farm income	43.9	39.7	34.1	32.8	34.0
Other income (gifts, donations)	9.8	11.8	12.3	9.6	18.1
Household received remittance	14.9	16.1	17.5	15.6	11.0
High level of physical insecurity	18.7	23.0	23.1	22.7	16.9
Large migration into community	5.6	8.5	15.9	22.4	24.5
Community violence	6.3	8.8	10.0	9.0	7.9
Income shock	54.6	44.6	39.5	39.1	44.7
Natural shocks	10.9	11.9	14.6	12.5	18.9
Health shock	58.5	44.2	43.0	24.9	31.4
No of observations	12,100	12,924	12,898	13,163	12,058

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: All figures in the table are percentages unless otherwise stated.

Table A.17. Factors associated with household hunger and diet diversity, Panel random effects regression, MHWS R1 – R8

	(1) Moderate/ severe hunger	(2) Low FCS	(3) Inadequate diet diversity (adult)	(4) Inadequate diet diversity (Reproductive age women)	(5) Inadequate diet diversity (children 6-59 months)
Respondent age (years)	-0.000***	-0.000***	-0.003***	-0.003***	-0.005***
	(0.000)	(0.000)	(0.000)	(0.000)	(0.000)
Women only household	0.003	0.027***	0.019***	0.019**	-0.029*
	(0.003)	(0.005)	(0.007)	(0.008)	(0.017)
Share of dependents	0.008***	0.028***	0.038***	0.044***	0.100***
	(0.003)	(0.005)	(0.006)	(0.010)	(0.020)
Household size	0.001***	-0.004***	-0.003***	-0.003	-0.001
	(0.000)	(0.001)	(0.001)	(0.002)	(0.002)
Primary or no education (adult)	0.017***	0.040***	0.054***	0.051***	0.045***
	(0.002)	(0.003)	(0.004)	(0.006)	(0.008)
Female (=1)	-0.001	-0.011***	-0.007**		-0.002
	(0.002)	(0.003)	(0.003)		(0.007)
Asset poor vs asset rich	0.042***	0.106***	0.125***	0.127***	0.099***
	(0.002)	(0.004)	(0.005)	(0.007)	(0.010)
Asset low vs asset rich	0.010***	0.037***	0.045***	0.047***	0.036***
	(0.001)	(0.002)	(0.004)	(0.006)	(0.008)
Income-poor vs not-poor	0.012***	0.042***	0.041***	0.040***	0.027***
	(0.001)	(0.002)	(0.003)	(0.005)	(0.007)
Own farm vs other income	-0.021***	-0.034***	-0.052***	-0.062***	-0.039***
	(0.002)	(0.003)	(0.004)	(0.006)	(0.008)
Farm wage vs other income	0.009***	0.032***	0.006	0.001	-0.001
	(0.002)	(0.004)	(0.004)	(0.006)	(0.009)
Non-farm wage vs other income	0.010***	0.006*	0.003	0.001	0.001
	(0.002)	(0.003)	(0.004)	(0.006)	(0.008)
Farm/Non-farm salary vs other income	-0.006***	-0.017***	-0.014***	-0.013**	-0.008
	(0.002)	(0.003)	(0.004)	(0.006)	(0.009)
Own non-farm vs other income	-0.007***	-0.031***	-0.024***	-0.028***	-0.026***
	(0.001)	(0.002)	(0.003)	(0.005)	(0.008)
Household received remittance (=1)	-0.006***	-0.024***	-0.025***	-0.021***	-0.017**
	(0.001)	(0.003)	(0.004)	(0.006)	(0.009)
High level of physical insecurity (=1)	0.010***	0.017***	0.008**	0.010*	-0.004
	(0.002)	(0.003)	(0.004)	(0.006)	(0.008)
Large migration into community (=1)	0.008***	-0.002	-0.014***	-0.017***	-0.013
	(0.002)	(0.003)	(0.004)	(0.006)	(0.009)
Community violence (=1)	0.009***	-0.002	0.007	0.012	-0.006
	(0.002)	(0.004)	(0.005)	(0.008)	(0.011)
Income shock (=1)	0.008***	0.012***	0.012***	0.016***	0.017***
	(0.001)	(0.002)	(0.003)	(0.004)	(0.006)
Natural shocks (=1)	0.024***	0.010***	0.001	0.009	0.013
	(0.002)	(0.003)	(0.004)	(0.007)	(0.009)
Health shock (=1)	0.011***	0.003	-0.004	0.000	-0.003

	(0.001)	(0.002)	(0.003)	(0.004)	(0.007)
Low community wages vs high	0.014***	0.019***	0.010**	0.014**	0.008
	(0.002)	(0.003)	(0.004)	(0.006)	(0.009)
Medium community wages vs high	0.006***	0.001	0.003	0.003	0.003
	(0.001)	(0.003)	(0.004)	(0.006)	(0.008)
Price tercile low vs high	0.002	-0.000	-0.004	-0.002	0.001
	(0.001)	(0.003)	(0.003)	(0.005)	(0.008)
Price tercile medium vs high	0.000	0.002	0.003	0.005	-0.011
	(0.001)	(0.003)	(0.003)	(0.005)	(0.008)
Yesterday was a special day (=1)	0.000	-0.013***	-0.034***	-0.033***	-0.022**
	(0.001)	(0.003)	(0.004)	(0.006)	(0.010)
Rural residence (=1)	-0.011***	0.016***	-0.000	-0.002	0.001
	(0.002)	(0.003)	(0.004)	(0.007)	(0.009)
Round fixed effects	*Yes*	*Yes*	*Yes*	*Yes*	*Yes*
State fixed effects	*Yes*	*Yes*	*Yes*	*Yes*	*Yes*
No of observations	96,455	96,455	96,455	41,076	16,219
Number of ID	33,877	33,877	33,877	15,816	7,624

Source: Authors' calculations from the Myanmar Household Welfare Survey.
Note: Robust standard errors in parentheses. *** p<0.01, ** p<0.05, * p<0.1.

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