Healthcare denied: Medical facilities under attack
The impact of the conflict on medical facilities across Myanmar

REPORT BY MYANMAR WITNESS, 06 September 2023

Key Event Details

- **Case Study locations**: Incidents in 16 locations and four in-depth case studies in the following locations:
  - Ma Le Thar village (မေလိုသာရ်) in Ayaw township (အိုးဝေး), Sagaing region (စိဗိုင်းတိုင်းဒေသကြီး) [22.115030, 95.455742]
  - Pa Dat Taing village (ပေဖေထွင်) in Myinmu township (မြေငွေ), Sagaing region [22.074769, 95.448303]
  - Ma Gyi Kan village (မေကြက်ကွန်) in Myawng township (မြောင်), Magway region [21.724870, 94.813232]
  - Pekon township, (ပွေါင်) Shan state (ရှမ်းပြည်ထောင်စု) [19.669828, 96.889449]

- **Date/Time of Incident**:
  - 16 events between 1 February 2023 and 30 April 2023

- **Alleged Perpetrator(s) and/or Involvement**:
  - Myanmar Air Force (MAF)
  - Myanmar Military
  - Myanmar Police
  - People’s Defence Force (PDF)

- **Summary of Investigation**:
  - The healthcare sector has been impacted by the ongoing conflict. Medical facilities and medical personnel have been the subject of airstrikes, raids, arson, looting, arrests, harassment, and an array of other violation types.
  - 16 incidents impacting medical facilities across Myanmar in the three-month time frame between February and April 2023 were identified and analysed by Myanmar Witness.
  - Most of the incidents happened in official medical facilities, half of them
involved the use of fire, and airstrikes were reported in seven cases.

- The majority of the incidents were located within the dry zone — the epicentre of the conflict, which has been consistently reported on and monitored by Myanmar Witness. Of the 16 incidents, half were in Sagaing, a state located in the dry zone. This aligns with previous investigations which show increased violence in these areas.

- Of the 16 incidents, four case studies were investigated in more depth. User generated content (UGC) showing the damage to medical facilities in Ayadaw, Myinmu, Myaing, and Pekon townships was geolocated and verified.

- This report demonstrates that hospitals and clinics have previously been targeted by the MAF and Myanmar military, thus minimising access to medical services in hard-to-reach places and impacting medical provision for civilians.

- Of the 16 incidents, the PDF were reported as an involved actor but no mentions of the PDF being the perpetrators were recorded.
Executive Summary

Since the occurrence of the February 2021 coup, access to essential services has continued to increase across Myanmar, largely being driven by the instability of ongoing conflict. Medical facilities throughout the country, from small rural clinics to large city hospitals, have been widely affected both by violence and the harassment of medical staff.

Through the collection and analysis of user generated content (UGC), alongside data from Armed Conflict Location & Event Data (ACLED), Myanmar Witness has investigated, verified, and reported on human rights interferences associated with conflict impacts on medical facilities across Myanmar. In 2019, the incumbent Burmese government released a map of public hospitals and clinics within Myanmar; as this was the most contemporary data set available, it was used to visualise known and documented facilities. The map itself is still available on the Myanmar government’s official website, of which is now under the control of the SAC, giving reason to believe that the SAC is aware of the locations of most public medical facilities.

Between February and April 2023, 16 incidents of conflict impacts on medical facilities were identified and analysed by Myanmar Witness. A majority of these cases appear in isolated, rural and regional areas of Myanmar, particularly across the Dry Zone1. Given the relative isolation of some of the facilities, and the ongoing conflict that surrounds them, the need for unobstructed medical care is all the more dire.

In half of the analysed incidents, there were reports of the seemingly intentional use of fire, leading to widespread destruction across the facilities, and in extreme cases, to whole villages. Airstrikes, which the Myanmar Air Force (MAF) are the only actor capable of conducting, were reported in seven of the analysed incidents. Previous reporting by Myanmar Witness has clearly shown the interconnected and strategic use of fire and airstrikes in the Myanmar military modus operandi. Since well before the February 2021 coup, the intentional use of fire has been a mainstay of conflict in Myanmar.

From these 16 incidents, four case studies in Ayadaw, Myinmu, Myaing, and Pekon townships were investigated in more detail. Through the use of airstrikes, fire and raids, these examples clearly show how the conflict across Myanmar is impacting medical facilities - sites that come with special protections under international law.

While there is information to suggest that all sides to the conflict bear some responsibility for attacks which have impacted medical facilities, and the disruption of the services they provide, the involvement of the Myanmar military has been widely apparent throughout this investigation, more so when compared to other parties to the conflict. Pro-Myanmar military media channels and outlets have also explicitly stated that the violence documented in some of these case studies was targeted towards the People’s Defense Force (PDF) and ethnic armed organisations (EAOs). The targeting of parties to the conflict should not detract from

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1 The Dry Zone covers more than 54,000km, encompassing 58 townships which span from lower Sagaing region, to the western and central parts of Mandalay region and most of Magway region. It is estimated that approximately one-quarter of the country’s population live in this area. Source: Mindu
the impact such violence has on places where civilians seek medical attention and assistance.

The provision of medical treatment is clearly impacted following such attacks. Additionally, violence specifically towards medical personnel has been referenced in this report. Three examples, one from May 2021 and two more recently in 2023, emphasise the direct targeting of healthcare services that were associated with the Civil Disobedience Movement (CDM) or connected to the National League for Democracy (NLD) party — which was ousted during the February 2021 coup.

These sites hold special protections under international humanitarian law, yet the provision of public health services continues to be impacted by the ongoing conflict.
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Methodology

Myanmar Witness follows a methodology of digital preservation and rigorous, replicable analysis. Digital evidence is collected and archived in a secure database and preserved with hashing to confirm authenticity and prevent tampering.

Myanmar Witness applies a four-tier classification system to describe the extent to which footage has been independently verified by Myanmar Witness. This is as follows:

- **Fully verified**: Footage independently geolocated and chronolocated by Myanmar Witness.
- **Verified**: Footage has been geolocated by Myanmar Witness. Other sources concur on the time and date of the footage, with no evidence following to suggest that the footage was taken earlier or later. However, it has not been possible for Myanmar Witness to independently chrono-locate the footage.
- **Unverified / Under investigation**: Myanmar Witness has not been able to geolocate or chronolocate footage at the present time.
- **Inauthentic**: The geolocation and chronolocation process has shown the location or timing of the footage to be inaccurate.

For the avoidance of doubt, this verification system only refers to Myanmar Witness’ ability to independently geolocate or chronolocate footage. Incidents marked as unverified may still be substantiated by multiple eyewitness reports. Sources are cross-referenced in this report to indicate where this is the case.

This report contains images showing how footage has been geolocated. Coloured boxes show how landmarks or distinguishing details in each piece of footage or data correspond with each other.

Geolocation is conducted using a varied array of open source online tools such as Google Earth to match satellite imagery with visual features identified in the footage or images. Geolocations are cross-checked and peer-reviewed before they are credited as verified.

Chronolocation is typically conducted by analysing UGC timestamps to determine hard end limits for the possible time frame. This is followed with contextual analysis, for example comparing against known indicators such as events or clocks visible, weather, and shadows. Shadow angle is determined after geolocation and its orientation is used to determine the position of the sun and thus time. Chronolocation is included as specifically as possible without incorrectly attributing time in order to account for limitations with some of these methods. Sentinel satellite imagery was also used to determine a timeframe of chronolocation.
If dealing with unverified information, such as witness testimony or third-party reporting, Myanmar Witness has made known that these inclusions are claims and that they have not been independently verified by Myanmar Witness. In order to uphold ethical standards, Myanmar Witness has obscured identifying information about the individuals involved, censored private information and images where appropriate, removed links to private individual accounts and archived said information securely. Where appropriate, Myanmar Witness has also blurred or excluded graphic imagery.

**ACLED Data: Methodology and Limitations**

To understand how the conflict is affecting medical workers as well as medical facilities, Myanmar Witness accessed ACLED data referring to events between February 2021 and January 2023 that had been tagged as an event that impacted medical staff. The ACLED data was limited to events of political violence towards health workers (per [ACLED methodology](https://acleddata.com/methodology)).

The ACLED data used within this investigation was acquired on 25 May 2023 and included events between 1 February 2021 (the coup) and 19 May 2023. The data was filtered so that only entries mentioning health workers were included, under the 'assoc_actor_1' category.

A map was created using ACLED data. The map compares the events identified by ACLED as impacting medical workers, as well as Myanmar Witness' data for events impacting medical facilities and personnel for three timeframes: February and April 2021, February and April 2022, and February and April 2023.

ACLED collects claims from a variety of sources, including traditional media and local partners. While useful for understanding trends, it is important to note that the data is not verified and consists of textual reports only (with no accompanying imagery). As a result, further analysis was conducted by Myanmar Witness on a number of the claims made within the ACLED data. Three of these events were included in the background section of this report (see: early attacks on medical facilities) as they showcase the various tactics allegedly employed by the MAF and Myanmar military. Additional information on ACLED methodology can be found on the [ACLED](https://acleddata.com) website.

**Facebook Data: Collection and Methodology**

For the primary data collection portion of this investigation, Myanmar Witness used [whopostedwhat.com](http://whopostedwhat.com) to conduct manual searches across Facebook for content, utilising relevant keywords in Burmese, broken down by month (between February 2023 and April 2023). Keywords used for this investigation included:

- အိမ် (Hospital)
- အိမ်အနိုင် (Clinic)
- နယ်စိမ်းဗုံး (District Hospital)
- ရက်ဦး (Rural Clinic)

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2 whopostedwhat.com is a non-public Facebook keyword search for people who work in the public interest. It allows you to search keywords on specific dates.
Additional keywords were pulled from the collected posts and used for further data gathering across multiple platforms and analysis on specific cases. The data collection timeframe was limited to between 1 February 2023 and 30 April 2023. Once collected, the data was then logged in a central database, along with key information, including:

- Claimed date of incident
- Keyword used to identify the content
- Source of data
- Graphic warning alert (if the post is of a graphic nature)
- Location of alleged incident (state, township, and village)
- The name, type, and location of the medical facility (if known)
- Type of impact affecting medical facilities (including airstrikes, fires, and more) and medical supplies (including destruction, seizing, and more)
- Claimed number of casualties
- Actors allegedly involved

The data collection started on 17 May 2023 and ended on 13 June 2023. Only posts which contained visual open source UGC, such as photos or videos, were included for analysis. This was to ensure that any allegations encountered could attempt to be assessed through processes such as geolocation and chronolocation. After the initial collection was complete, all 77 identified Facebook posts were further analysed to determine if the content could be classified as verified, partially verified, or unverified. Additionally, several instances of witness reports or local PDF statements being released were identified. These responses were taken into consideration but were not used to confirm and/or verify events. After the initial analysis of the 77 Facebook posts collected, 16 individual incidents were identified and investigated further.

Of the 16 incidents, four detailed case studies are expanded upon in the body of this report. The four case studies are either partially or fully verified. A further two examples of the impact on medical professionals are also explored in the ‘Attacks on Medical Personnel’ section. All 16 cases identified are listed in the report’s annex.

During the UGC verification process, geolocation and chronolocation were attempted using online tools including Google Earth, Satellites Pro, Fire Information for Resource Management System (FIRMS), and Sentinel satellite imagery. Additionally, some of the UGC collected contained timestamp information - this was subsequently used within chronolocation attempts. All 16 cases were graphically mapped and added into a visual timeline.

**Limitations**

The information obtained by Myanmar Witness comes from an area of ongoing conflict so it is assumed that there is a selection bias, due to factors including fear of repercussions for uploading, unavailability of information from official sources and availability, or lack thereof, the internet — which has also restricted the amount of media available to be verified by Myanmar Witness. Myanmar Witness strives to eliminate as much of this bias as possible by
using both focused and broad search terms in multiple languages across open sources as well as identifying media from multiple sources, such as pro and anti-regime news and social media.

There were also a number of limitations specific to this investigation. These include:
- Data collection was conducted between 17 May 2023 and 13 June 2023. This timeframe could lead to collection bias, as content may have been removed prior to the commencement of data collection.
- Data was collected only from Facebook and ACLED, meaning that content shared on other platforms may have been missed.
- While there were multiple allegations throughout Myanmar on medical facility damage and further impacts, not all visual content collected was suitable for a visual analysis to be conducted.

Background and Context

This report by Myanmar Witness seeks to provide insight into this modus operandi of the Myanmar military by assessing data and specific case studies. This paper reviews what are alleged to be intentionally set fires in Myanmar, which has been a consistent feature of the conflict, led by Aung San Suu Kyi, and replaced it with members of the military, through the SAC. In response to this, thousands of people took to the streets in protest and a civil disobedience movement formed across Myanmar. Since then, the conflict in Myanmar has evolved and spread; what started as the violent repression of largely peaceful pro-democracy protests in major urban areas has developed into a country-wide civil war. Together with the increasing assault from airstrikes, fire, and ground troops, there appears to be a concerted, escalating effort to violently suppress opposition to the military regime.

Myanmar Witness has actively monitored events following the February 2021 coup and continually investigated cases where alleged human rights interferences have occurred. Additionally, Myanmar Witness has monitored the use of specific tactics directed towards an essential public service: the healthcare sector. These tactics, which include unguided airstrikes, fires, raids, destruction of property, confiscation of medical supplies, arrests, and targeted intimidation of medical workers, amongst an array of other violation types, all increase the risk of harm to local communities. Myanmar Witness has documented the use of similar tactics against schools, religious buildings and public administration and concert events.

Medical facilities are sites where "...sick or injured people are given care or treatment (as a hospital, urgent care centre, or a clinic)". In a resolution adopted by the United Nations General Assembly in 1970, it was stated that "places or areas designated for the sole protection of civilians, such as hospital zones or similar refuges, should not be the object of military operations". There are a plethora of international agreements and laws which outline the shared understanding that there is not only a need to protect medical facilities, but also an obligation. This includes rule 28 of the International Committee of the Red Cross’s (ICRC) International Humanitarian Law (IHL) database, which states that "intentionally directing attacks against “hospitals and places where the sick and the wounded are collected,"
provided they are not military objectives” constitutes a war crime in non-international armed conflict (NIAC).

Attacks on hospitals, clinics, and other medical facilities have been reported and documented repeatedly since the February 2021 coup, with several locations allegedly being intentionally targeted, as explored in the Attacks on Medical Personnel section of this report. There continue to be airstrikes, raids, fires, and forced closures on such sites throughout Myanmar. In a previous investigation into the MAF’s use of airstrikes, Myanmar Witness reported on an incident which impacted a medical facility. This is documented within Myanmar Witness’s report Eyes on the Skies (published on 31 January 2023).

Since the February 2021 coup, Myanmar Witness has regularly identified and verified incidents where medical facilities have been impacted as part of the conflict. In May of 2023, the focus on this type of violation became far more pronounced, leading to the construction of this report and the verification of the events within it. Shortly after this, in July 2023, in-depth reporting from SkyNews continued to shine a light on the issue of medical issues being impacted as part of the conflict, further highlighting how dire the conflict has become, even for places which carry special protections under international law. Shan state, located in the east of Myanmar, was subject to frequent attacks impacting medical facilities, according to the Sky News reporting. One of the case studies analysed by Myanmar Witness, Pekon hospital airstrike, lends support to this reporting. The coverage produced by Sky News can be viewed here. The coordinated, yet unintentional, reporting on this violation type continues to lend credence to its importance in the conflict. Places where everyone should be able to seek medical attention are being attacked.
Early attacks on medical facilities following the February 2021 coup

The quantitative aspect of this report focused on events which had occurred from February to April 2023; however, the impact the conflict in Myanmar has had on medical facilities far predates these parameters. The allegations below highlight that both medical facilities, and those that work with them, have been impacted since the coup occurred.

Near the beginning of the 2021 coup, some facilities that had been impacted by the conflict had close ties to the CDM; for example, their donors or employees may have shown support for the CDM online. One such example allegedly occurred in Taunggyi city (တောင်ကြီးမြို့), Taunggyi township (တောင်ကြီးမြို့နယ်), Shan state (ရှမ်းပြည်), on 15 February 2021. Employees of Sao San Tun Hospital (စံဘွမ်းနှင့်သွားရုံကြီး) [20.803647, 97.036313] began posting images and messages of support for the CDM online, as early as 3 February 2021 (source redacted due to privacy concerns). Following this, 100 armed police officers raided the hospital, reportedly looking for CDM supporters; they used grenades and other weapons on the facility during the raid. Despite the heavy police presence, no-one was officially arrested or injured, though damage to the buildings was reported. According to Myanmar now, employees and locals near the hospital prevented the police from entering and allowed CDM-supporting employees to escape. The police presence was live-streamed online by Kanbawza Tai Broadcasting.

A further incident where a medical facility was allegedly targeted occurred on 24 January 2022. Reports from Myanmar Now state that Myanmar Military and Police members carried out a joint raid on a charity clinic in Dawei city (ဒေါ်ဝါးမြို့), Dawei township (ကျွန်းကျော်မြို့နယ်), Tanintharyi region (သန့်ဗျာပြည်), arresting seven healthcare assistant volunteers. An ambulance, various medications, and other medical supplies were confiscated during the raid. The reason for the raid is unknown, but Mohinga Matters published claims that the volunteers were associated with the CDM.

Extensive damage was also reported in Gar Ga Law village (ကျိုင်ကျော်လေးကျေးလွား), Kanbalu township (ကျိုင်ကျော်လေးမြို့နယ်), Sagaing region (စိစ်ဝန်းရှိုက်ချောင်း) on 17 December 2022. Both Radio Free Asia (RFA) and Myanmar Pressphoto Agency reported on this event, claiming that 23 homes, a monastery, and a rural clinic were burnt down. Pyu Saw Htee (Pro-military supporting militia) and Myanmar military forces were allegedly responsible, specifically the 368th Light Infantry Battalion. The fire damage appeared extreme, with building structures entirely destroyed.

These three examples demonstrate a range of impacts on medical facilities and medical staff, including material damage (from grenades and fire), the confiscation of property and medical supplies, and the arrests of employees. These events affect local communities by hampering the ability to provide medical services.
Myanmar’s Medical Services

As part of this investigation, Myanmar Witness accessed an official listing from the Myanmar government’s Department of Medical Services website. This page was last edited on 18 March 2019, with the embedded maps being last updated between 1 April 2019 and 2 April 2019. Of note, the website of the Department of Medical Services (forming part of the Ministry of Health) has been updated multiple times since the February 2021 coup, indicating that it is now being operated by the SAC. This also indicates that the SAC is aware of the locations of most public medical facilities, with the exception of emergency clinics that have been established since the coup. Other medical facilities that might not appear on this map are military hospitals, private hospitals, and those built after April 2019.

The availability of this type of information to a party to the conflict has the ability to be used for nefarious reasons - such as in a targeting list. As the maps have not been updated since the 2021 coup, limited access to information on the availability of medical care continues to impact the people of Myanmar. The frequent post-coup updates to the Department of Medical Services site, but the absence of updates to the embedded maps, suggests the SAC may have access to more updated information on medical facilities across the country, but is not sharing this information publicly.

Myanmar Witness used these maps to compare locations where medical facilities were allegedly attacked with the presence of a facilities listed location. The map below presents all the hospitals, numbering over a thousand, that were included within the above listed site.

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3 Note: This is an unsecured link to a website of the Myanmar government which is now under the control of the State Administration Council (SAC).
Figure 1: Map of public medical facilities in Myanmar created using data released in April 2019. Map created by Myanmar Witness using Quantum Geographic Information System (QGIS) (WARNING: data was sourced from an SAC controlled website).
**Timeline of Events**

**Medical Facilities Timeline**

16 Incidents affecting medical facilities between February and April 2023 including the 4 case studies

- **3 Feb 2023**
  War Yi Kaw Khu village, Loikaw, Kayah.
  An alleged MAF airstrike affected the clinic, which also hit an IDP camp and local school.

- **05 Feb 2023**
  Dagon Myothit (South) township, Yangon.
  Facility closure following pro-SAC raid searching for CDM employees.

- **16 Feb 2023**
  Tu Ywin Bo village, Myingyan, Mandalay.
  Two employees were allegedly shot in the medical facility.

- **19 Feb 2023**
  Nwe Inn village, Pale, Sagaing.
  Claims that the Myanmar military burnt down the clinic.

- **25 Feb 2023**
  Ma Le Thar village, Ayadaw, Sagaing.
  Hospital damaged due to MAF airstrikes and a raid on the village.

- **23 Feb 2023**
  Case Study 1
  Pa Dat Taing village, Myinmu, Sagaing.
  Rural hospital burnt down reportedly due to a Myanmar military raid.

- **1 Mar 2023**
  Kone Yawar village, Yinmarbin, Sagaing.
  Claims that the military burned down a village including the health centre and a monastery.

- **12 Mar 2023**
  Tedim city, Tedim, Chin.
  Claims of PDF attacking members of the Myanmar military who were occupying the hospital.
MEDICAL FACILITIES TIMELINE

23 MAR 2023
Ye-U town, Ye-U, Sagaing.
Hospital reportedly used to launch artillery fire by the Myanmar military.

24 MAR 2023
Daw Ta Ma Gyi village, Demoso, Kayah.
Alleged airstrike on hospital.

31 MAR 2023
Nyaung Pin Thar village, Tigyaing, Sagaing.
Claims the Myanmar military burned down the hospital.

5 APR 2023
Si Thar village, Shwegu, Kachin.
Alleged airstrike by MAF which damaged the hospital.

8 APR 2023
Ta Laing village, Sagaing, Sagaing.
Alleged MAF airstrike and Myanmar military raid on health centre and monastery.

18 APR 2023
CASE STUDY 3
Ma Gyi Kan village, Myaing, Magway.
Reports of a hospital raid with the use of a helicopter and ground troops causing violence.

22 APR 2023
Lay Twin Zin village, Kanbalu, Sagaing.
Health centre burnt down alongside other village buildings.

25 APR 2023
CASE STUDY 4
Pekon township, Shan.
Alleged targeted airstrike on rural health centre due to claims of resistance group(s) occupying the facility.
The impact of the conflict on medical facilities

Myanmar Witness has monitored attacks on medical facilities since the coup in February 2021. During this investigation, Myanmar Witness has sought to identify and investigate a number of incidents which impacted medical facilities (and in some cases health workers) between February and April 2023. The research has relied upon three streams of data: the Burmese government list of hospitals; ACLED’s data on events impacting health workers; and, Myanmar Witness’ primary research which identified a number of incidents through a deep analysis of UGC posted on Facebook. The result of this research is the identification of 16 key incidents and the creation of four in-depth case studies which are partially or fully verified.

16 incidents that warranted further investigation

During this investigation 16 specific incidents, which occurred between February and April 2023, were identified as requiring further analysis. This was done in order to understand if these locations appeared to have been specifically targeted and/or if attribution could be determined.

Frequency and location of the incidents

The 16 incidents analysed by Myanmar Witness were spread fairly equally over the time period. Six cases were reported in February 2023, five cases in March and five cases in April 2023. This data suggests that an incident impacting a medical facility happened approximately every five and a half days.

Myanmar Witness analysed ACLED data between February 2021 and February 2023 to establish whether this reflected a broader trend. While ACLED data is largely not verified, it did reveal a continuous trend in reported attacks against medical workers during the timeframe. For example, 22 events impacting health workers were reported between February and April 2021 and 17 incidents were reported between February and April 2022.
Figure 2: Map of incidents logged by ACLED as impacting medical workers in Myanmar. The incidents are from February - April 2021 and February - April 2022. Additionally, 16 incidents that were analysed by Myanmar Witness are shown in this map; however, the pins for Ma Le Thar and Pa Dat Taing overlap in the Sagaing Region. Map created using QGIS.
The location of the 16 incidents can be seen on the map below (Figure 4). Most of the incidents were located in the dry zone area of Myanmar. More specifically, half (eight) of the incidents were reported within Sagaing state. The rest of the cases were reported in seven different states across the country. Six states had a single incident while Kayah state had two.
Map of the 16 incidents analysed which impacted medical facilities

February 2023
March 2023
April 2023

Figure 4: Map showing the locations of 16 incidents where medical facilities were impacted by the conflict between February and April 2023 as identified and investigated by Myanmar Witness. Map created using QGIS.
Incidents in the dry zone

Nine of the 16 cases occurred in Myanmar’s ‘dry zone’ area. This dry zone consists of regions from Magway, Mandalay, Naypyidaw, and Sagaing — a large expanse that stretches over the central area of Myanmar. Proportionately, this area only makes up roughly 8% of the country, according to Myanmar Information Management Unit (MIMU) data. Despite this, the region encompasses more than 50% of the case studies identified by Myanmar Witness in this investigation.

Analysis of the data from the Burmese government shows that a large number of hospitals are located within the dry zone. While most of the incidents happened in the dry zone, the number of incidents impacting medical facilities in this area are disproportionate to the number of hospitals in comparison to the rest of Myanmar. Interestingly, an analysis of the data from the Burmese government on hospital locations reveals that there are a large number of hospitals in the dry zone area. While the dry zone has been the site of most attacks, it has a higher than average number of medical facilities. Figure 6 shows the case studies analysed by Myanmar Witness in the dry zone region.

4 MIMU: “... provides information management services to strengthen analysis and decision-making of the humanitarian and development community in Myanmar. It maintains a common data and information repository with data from various sources on all sectors, countrywide, at the lowest administrative unit for which it is available. This information is then made widely accessible to UN, NGO, donor and other stakeholders in the form of maps, databases and other tools which support the coordination, planning and implementation of humanitarian, development and peace-focused activities.”
The intensity of the conflict across the dry zone has, by and large, been proportionately more severe and regular when compared to other areas across Myanmar. A high density of PDF operations in this area, a notable historic lack of a structured EAO having control in Sagaing, and the small geographic distance to Mandalay all go some way in explaining this increased intensity.

Specifically in Sagaing, a heavy amount of violence has been documented, particularly in the Southeast.

Myanmar Witness has frequently reported on events in the dry zone, including the use of fire, airstrikes and beheadings; for example, a number of significant cases include the Tabayin school attack, village burnings in Sagaing, and a spate of beheadings in Sagaing. The Myanmar military has used violent tactics to quell the rebellion in this region, including through the dismemberment of alleged enemies.
Further reading on specific MAF and Myanmar military violence and intimidation tactics can be found in Myanmar Witness’ reports: eyes on the skies, tortured, beheaded, and dismembered, and villages burn in Sagaing. This region is closely monitored by Myanmar Witness due to frequent human rights violations and risk to civilian lives, and will continue to be monitored in order to investigate and report on further human rights abuses.

Official and unofficial medical facilities

The incidents analysed impacted official and unofficial medical facilities. In this investigation, Myanmar Witness defined official medical facilities as sites that are both publicly and visually identifiable as medical facilities. These marks are either physical (including hospital signs and medical cross signs), or publicly viewable, such as through an online presence in Google Maps or in the government’s official hospitals list.

Unofficial medical facilities were defined as medical facilities that did not have any visual indications of the sites being used for healthcare. Unofficial medical facilities are common in areas of violent conflict and are usually used by impacted civilians and parties of the conflict. In order to not disclose their purpose, unofficial medical facilities are often not publicly indicated as medical facilities.

Although this approach was applied through the analysis, Myanmar Witness could not always determine the status of a facility not beyond any doubt due to limited information availability for the sites.
Map of the 16 incidents impacting official or unofficial medical facilities

Figure 7: Mapping of the 16 incidents, broken into official and unofficial medical facilities. Map created using QGIS.
Type of incident

During the analysis of the incidents, Myanmar Witness identified a variety of incident types. In order to simplify the analysis, several categories including (non-exhaustively) airstrikes, fires, occupation and ‘other’ were used to track the type of impact on the facilities. When a relevant category was lacking, the details were written down under ‘other’. Seven of the incidents had more than one type of impact reported and were logged accordingly.

Reports of fires and airstrikes were prevalent in the cases examined; for example, half of the analysed incidents reported on the use of fire. Seven incidents mentioned the occurrence of airstrikes, which the MAF is the only actor capable of perpetrating as they possess aircraft.
Four Case Studies of Attacks on Medical Facilities

After identifying 16 incidents within the timeframe of analysis, four case studies were selected for deeper investigation both due to the intensity of the event, alongside the presence of verifiable open source content. These case studies are outlined below. Each case involves a physical attack on a medical facility, allegedly by the Myanmar military and/or MAF. Airstrikes, fires, raids, destruction of property, and even claims of employee detainment have been referenced below.

All four cases are partially verified through the process of geolocation, whilst chronolocation was completed on three of the cases. Figure 10 below shows the location of these four events.

Map showing the four case study locations

Figure 10: Map showing the locations of the four case studies of medical facilities that were damaged between February to April 2023. Map created using QGIS.
1. Ma Le Thar District Hospital [22.113646, 95.451554]

Ayadaw, Sagaing, 23 February 2023

On 23 February 2023, MAF reportedly launched airstrikes against Ma Le Thar village (မောလိမ် ဖိုး) [22.115030, 95.455742] in Ayadaw township, Sagaing, with an Mi-35 helicopter. This violence was allegedly followed by, or coincided with, a Mi-17 helicopter delivery of ground troops who conducted a raid on Ma Le Thar District Hospital (မောလိမ် ဒေသအုပ် ရုက္ခီ) [22.113646, 95.451554] — also referred to as Cottage Hospital (စီးပါပုံ) on Google Maps. Footage surfaced in the following days showing damage to the hospital structure, multiple locations of fires and destroyed medical equipment.

A local news media site claimed that the attack started around 1400 local time. Myanmar Witness has geolocated UGC showing damage to structures and vehicles in the village, but could not verify if the attacks occurred on 23 or 24 February 2023 as the posts were published on 25 and 26 February 2023. Other reports stated that a Myanmar military column arrived in Ma Le Thar on 24 February 2023, after the airstrikes and troop incursion the previous day had cleared a path for them.

![Image of Ma Le Thar District Hospital damage](image-url)

*Figure 11: Imagery from the claimed airstrike on Ma Le Thar. (Left) Damage to Ma Le Thar District Hospital wall [22.113461, 95.452112]. (Right) Damage to a nearby medical facility building [22.114029, 95.451988] connected to the hospital (source: Ayadaw Post).*
Figure 12: Graphic showing UGC which has been geolocated by Myanmar Witness to the Ma Le Thar Hospital (source: Ayadaw Post).
Analysing the Incident

The Ayadaw Post released images purporting to show the aftermath of the attack (including figures 13 and 14 below). Myanmar Witness confirmed that the images show various locations within the hospital gates and multiple locations where the remnants of fires are visible.

The images show the destruction of medical supplies. Piles of burnt medical supplies and equipment, including syringes, IV bags, and surgical tools can be seen surrounded by ash. The localised nature of the burn markings on the ground suggests that the fires were set intentionally. The images also suggest that vehicles were piled together and set on fire near the medical centre. The destruction of medical supplies and vehicles prevents the delivery and provision of basic medical care, by reducing the capability of mobilising medical supplies into the village or mobilising people to other healthcare facilities nearby.

![Medical equipment and supplies, geolocated by Myanmar Witness to be within the hospital yard, show signs of destruction through fire and physical damage (source: Ayadaw Post).](image)

Images of the hospital yard reveal further isolated incidents of fire, damage to structures and intimidating graffiti. The damage to the wall and roof of the hospital building suggest that heavy machinery was used, which supports the claim that an air attack took place.

One of the images shows graffiti in the hospital grounds (figure 14 below) that translates to “will kill the informants/spy first” (အိုလွန်သောလူ့ကြည်ကို ကကောက်ကည်) The cross on the wall, which appears to have collapsed (fallen or been pushed down) during or after the attack (see figure 11 above for initial imagery), indicates that the graffiti marks are in front of Ma Le Thar hospital gate.

Although imagery from the hospital grounds prior to the attack does not appear to have the same graffiti, Myanmar Witness cannot confirm whether the graffiti was left by the Myanmar military during this attack. Despite this, intimidation in the form of graffiti has been seen in other cases; for example, Myanmar Witness has investigated other cases where intimidating
graffiti has been left, likely by Myanmar military forces. For more information, see the Myanmar Witness report School teacher killed and body mutilated.

Figure 14: Graffiti seen across from the entrance to Ma Le Thar District Hospital translates to “will kill the informants/spy first” (အသွားရေးတာဝင်သုံးချင်း) [22.113266, 95.452186]. The other side of the wall before it collapse can be seen in figure 11 (source: Ayadaw Post).

Further analysis and attribution reporting has been conducted on this event in Mar Le Thar village in the Myanmar Witness Report Tortured, beheaded and dismembered, which focussed on multiple beheadings cases in Sagaing region in early 2023.

2. Pa Dat Taing village medical clinic [22.075511, 95.449803]

Myinmu, Sagaing, 25 February 2023

On 25 February 2023, it is claimed that Myanmar military troops set fire to a clinic in Pa Dat Taing village (ပျိုင်ကော့), Myinmu township, Sagaing region. UGC and claims reported by Insecurity Insight suggest that a library and 65 houses were also destroyed in the attack. Damage to the medical clinic was geolocated by Myanmar Witness (see figure 16 below).

The date and time of the incident could not be determined by Myanmar Witness, but Sentinel satellite imagery did show a large fire in the village between 24 February and 1 March 2023, lending support to the claim that the fire took place on 25 February 2023.

Myanmar Now reported (warning: graphic link) that two PDF members were arrested near Pa Dat Taing and that their arrest could have been the reason for the military raid and fire; however, this is not confirmed.
PA DAT TAING VILLAGE MEDICAL CLINIC
(ပဒ်တောင်းသောက်ထွက်ကိုးယူရောက်ခြင်း)

Pa Dat Taing village, Myinmu, Sagaing. 25 February 2023.

MEDICAL CLINIC AND NEARBY BUILDINGS BURNT DOWN REPORTEDLY DURING A MILITARY RAID.

A building adjacent to the clinic was burnt. Ash marks above the windows and lack of fire damage to the building's exterior likely indicate that the fire was set from within the building.

The front gate of Pa Dat Taing medical clinic.

Geolocated image reveals the extent of the fire damage across the village.

Sentinel false colour imagery reveals widespread fire damage between 24 February and 1 March 2023. The black area shows the burnt area of the village.

GEOLOCATION 22.074769, 95.448303

Figure 15: Graphic of the attack on Pa Dat Taing Village medical clinic (sources: Myingmu Township news agency, additional source was redacted for privacy)
Analysing the Incident

Footage following this event shows extensive fire damage to a medical clinic. From the geolocated footage, the front entrance gate (shown at the top right of figure 15) states the clinic name — Pa Dat Taing village medical clinic (ပက်တာသောင်ကျေးရွာ ဝါက္ကလေးကျောက်) — confirming that the site is a medical facility.

Myanmar Witness geolocated an image showing damage to a green walled building adjacent to the medical facility. The image showed ash/burn marks above the windowsill of the windows on the first floor, likely to be the result of smoke escaping from the building's interior. Additional imagery confirms that there was a lack of scorch marks, or other fire debris including ash, outside the building, suggesting the fire was set alight from the inside. Myanmar Witness was unable to determine if the medical clinic was intentionally set on fire or not. With that said, the proximity of the green walled building indicates that it is likely that the clinic was burnt from an intentionally set fire.

This event is allegedly linked to case study 1 in Ayadaw, as it was reportedly perpetrated by the same military troops. The event has been further investigated in the Myanmar Witness Report Tortured, beheaded and dismembered, which focussed on the beheading cases in Sagaing region beginning in February 2023. The attack and widespread destruction to the village allegedly resulted in the displacement of many villagers. For those who stayed behind, access to medical care will be greatly hampered.

3. Ma Gyi Kan village hospital [21.722567, 94.811919]

Myaing, Magway, 18 April 2023

On 18 April 2023, Myanmar military troops reportedly launched a ground raid and an airstrike with an Mi-35 helicopter near a hospital in Ma Gyi Kan village (မောဂျင်ကန်) [21.722567, 94.811919], Myaing township (မြို့၊ မော့မြို့), Magway region (မြို့နယ်၊ မိုးမိုးဝါကျော်). While Myanmar Witness has been unable to verify that an airstrike took place, UGC showing significant damage to the hospital building (as well as surrounding buildings and vehicles) was geolocated to the hospital grounds. According to a sign on the hospital wall, the hospital was donated in 2014 by the Japanese government (sign shown in figure 16 and 18 below).

The ground troops reportedly set buildings on fire during the raid. Local eyewitnesses reported that medical staff and patients were captured and taken away in a helicopter. Myanmar Witness also identified and analysed a video showing individuals — likely Myanmar military ground troops — leaving the area in a Mi-17 from a field near the hospital. This could align with claims that the military took medical personnel with them; however, this cannot be confirmed due to the granularity of the video (figures 16 and 17 below). The helicopter was located about 150 metres from the hospital. A number of people in the video
appear to be carrying a heavy, unknown object — possibly medical equipment seized from the hospital.

**Ma Gyi Kan Hospital**

Ma Gyi Kan Village, Myaing, Magway. 18 April 2023.

**Ground Troops with Helicopter Support Reportedly Violently Raided a Hospital.**

A sign states that the hospital was donated by the Japanese government.

**Geolocation** 21.724870, 94.813232

**Geolocation of Burnt Structures North of Ma Gyi Kan Village Hospital**

*Figure 16: Graphic of geolocated UGC from Ma Gyi Kan village hospital (sources: Myanmar Labour News; MYGPDF; Red News Agency).*
Myanmar Witness geolocated time-stamped images showing the destruction of the hospital, nearby structures and vehicles. The time stamps were consistent with Sentinel 2 imagery (see figure 20 below) which showed fire damage from between 15 and 20 April 2023 (as can be seen in figure 16 above).

The video showing the soldiers moving towards the helicopter was also geolocated, as shown by figure 17 below.

![Figure 17: An Mi-17 helicopter that landed in a field [21.722826, 94.810762] in Ma Gyi Kan village (source: Myanmar Image Revolution Team), showing several soldiers walking towards the helicopter from the hospital direction. Bottom right image shows the video zoomed in on the Mi-17 helicopter with ground troops entering the aircraft (source: Red News Agency).](image)

Myanmar Witness also geolocated imagery showing a sign which revealed that the hospital had been supported by the Japanese Government (figure 18).

![Figure 18: Sign seen from the hospital wall announcing the Japanese ties to the facility from 2014, which translates to: "Health infrastructure and equipment development project in Central Myanmar. The project is](image)
**Analysing the Incident**

UGC from the hospital suggests that the fire was set alight from within the building. This can be deduced because there are no visible burn marks around the outside of the hospital building. For example, the vegetation along the hospital’s exterior walls (as seen in figure 19 below) do not appear to be burnt, while the inside of the building has suffered from extensive fire damage.

The damage and dispersal of material and equipment across the ground also lends support to the claim that a raid occurred within the hospital before it was set alight.

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*Figure 19: Damage shown from the exterior and interior of the facility shows that the vegetation outside has not been burnt and more fire damage is shown internally and not on the outside walls, suggesting the fire most likely was set from inside (source: [Myanmar Labour News](https://www.myanmarlownews.com)).*
Multiple vehicles that were located 100 metres north of the hospitals were also set alight. UGC showed multiple burnt motorcycles that were piled up near to a car and set on fire (figure 21). On 19 April 2023, Fifty Two news, a pro Myanmar military telegram channel, posted images of the vehicles before they were burnt. The same cars were visibly parked at the same position as in the images taken after the motorcycles were burnt, likely indicating that the images were taken a short time before the fires. Additionally, the motorcycles weren’t positioned by the cars in the earlier imagery, indicating they were moved there later.

Multiple motorcycles were seen in another image posted by Fifty Two news, but Myanmar Witness could not verify if these are the same motorcycles. Fifty Two news has frequently posted images of vehicles or structures prior to their destruction or prior to arson events. Myanmar Witness also investigated this trend in the report *Tortured, beheaded and dismembered*, where Fifty Two news posted images of the deceased before and after decapitation.
Figure 21: Two vehicles that were burnt near Ma Gyi Kan village hospital [21.722574, 94.812111]. Both of the images were posted on the same day. (Sources: left - Fifty Two news; right - MYGPDF).

Figure 22: Two separate signs outside the medical facility, one stating that the location is a ‘department of rural health’ centre (left) and the other stating the facility’s objective of health care responsibility (right) (source: Private, available on request).

An analysis of the UGC from this event reveals extensive airstrike and fire damage. Scorch marks, ash, and heavy damage to the roofing and walls of structures are all present within the footage. The presence of a Mi-17 helicopter, geolocated nearby, which is known to be regularly used by the MAF to transport Myanmar military ground troops, also adds weight to the claims of fires and military raids. The use of fire by the Myanmar military has been frequently documented in other cases, lending support to the notion that the fire in the medical facility was likely perpetrated by the Myanmar military. The additional claims that staff were arrested, and that a facility which had been donated by Japan, could increase the gravity of this attack.
4. Pekon Hospital [19.669828, 96.889449]

Pekon township, Shan - 25 April 2023

On 25 April 2023, an airstrike was reportedly conducted by the MAF over a Kayan National Health Committee (KNHC) medical facility in Pekon township, Shan state, affecting a rural medical facility and an internally displaced persons (IDP) camp. Unlike the other case studies included in this report, this facility was not located within a village.

RFA claimed that a military Mi-35 attack helicopter was responsible for the damage, but local Karenni Nationalities Defense Force (KNDF) media stated that a fighter jet was used. The attack allegedly impacted civilians in the area, injuring three people including a nurse. People Media, a pro-military media outlet, states that the airstrike was conducted because local PDF and Karenni National Progressive Party (KNPP) members were present at this location. Myanmar Witness has been unable to verify this claim, but has verified damage to a medical facility in the area and identified at least one injured individual in a nearby IDP camp.
Figure 23: Graphic of the Pekon township airstrike that affected the local rural hospital (sources: Karen’s Voice; additional sources were redacted for privacy).
Analysing the Incident

A video shared online (still image in figure 26) shows a sign at the entrance to the hospital that translates to 'Kayan National Health Committee' (ကန်နား နိုင်ငံတော် ဖိုးဝါရေး အဖွဲ့) followed by the distinct blue and white cross used to signal that a location is a medical facility in Myanmar. There are claims that this facility is funded by Kayan National Unity and run by the KNPP, but this has not been independently verified by Myanmar Witness.

![Figure 24: Blue cross on the sign indicating the role of the facility as a hospital and/or medical facility (source: redacted due to privacy concerns).]

Myanmar Witness geolocated UGC of the aftermath, revealing the extent of the damage to the hospital. The hospital walls were largely destroyed, with debris and glass scattered throughout the hospital's interior. The outer walls appear to have come under fire, with countless bullet holes visible, some of which had pierced through the concrete walls. In one of the rooms, a hanging bottle of saline was seen above one of the beds. The bed was made and personal belongings are visible by it, indicating that it was likely in use at the time of the strike.

![Image of the interior of the hospital after the incident]
Due to the hospital’s rural location, the lack of surrounding buildings (the facility was not located within a village, like the other examples analysed), and the acknowledgement by pro-SAC media that the attack was targeted due to the presence of resistance fighters in the area, it is likely that the airstrike was intentional. Additionally, the footage of ordnance in the field next to the hospital supports claims that an airstrike took place.

Further analysis of the incident can be found in Myanmar Witness’s Spot Report: Pekon Hospital Bombing published on 2 May 2023.

**Attacks on Medical Personnel**

During this investigation, Myanmar Witness also identified other types of incidents beyond physical attacks (including airstrikes, fire, and other physical damage) on medical facilities. For example, medical professionals have been arrested, prevented from treating patients and some facilities have been closed down in cases where their funding came from anti-SAC sources.

For example, in May 2021, in one of the first cases following the coup, pro-SAC groups (potentially police and/or Myanmar military members) arrested several medical professionals and patients at the National Aids Centre (NAC) in Yangon, under claims that the centre was making bombs. The centre was known to be funded and run by an NLD politician named Daw Phyu Phyu Thin, leading locals to believe that the raid was both calculated and targeted.

More recent cases, in 2023, show that these same tactics are being used across a wider area of Myanmar. In February 2023, Delta News Agency reported that medical staff in various townships around Yangon were being checked by the SAC for ties to the CDM. A range of facilities from large public hospitals to small private clinics were searched. Similar claims were made in Mandalay. Also in February 2023, in Myingyan township, Mandalay, two midwives (a mother and son) were shot and killed within a rural medical facility in Tu Ywin Boet village. Online UGC claims that five people arrived on two motorcycles, they ran into the facility and left shortly after the attack.

It is hard to quantify the impact of this form of intimidation and the increased risk for medical personnel. Closures of facilities, as well as the arrests and killings of medical staff can cause long term damage to the delivery of medical care, and thus risk the health of society at large. Hospitals and medical facilities are protected under an array of international legal instruments; thus, this activity warrants further investigation and verification.

**Conclusion**

This report has revealed the efforts taken by the Myanmar military as it struggles to maintain control and quell opposition across the country. Physical damage to medical facilities in the form
of airstrikes and fire, and the harassment or detention of medical personnel has become a key part of the Myanmar military's offensive, occurring regularly since the February 2021 coup.

Through a mixed methods approach, this research has helped to shine further light on the modus operandi of the Myanmar military. The Myanmar military, which is heavily reliant upon aircraft manufactured in Russia and China, is putting the population of Myanmar in a precarious position by targeting medical facilities with fighter jets and helicopters. As traditional air assets are only available to the MAF, and several events investigated involved helicopters and fighter jets, it remains highly likely that the SAC is responsible for these attacks.

The case studies also reveal the use of fires, raids and the resultant destruction of medical facilities by ground troops. Areas of known resistance, namely the dry zone of Myanmar — an area that has been widely reported on by Myanmar Witness as it represents the epicentre of the conflict — have suffered from a concentration of attacks. While the extent of the impact on medical provision across Myanmar remains unknown, it is clear that the conflict is having a sustained and long-term impact on civilian's access to medical support.

Myanmar Witness will continue to monitor, identify, verify, analyse and report on the events which impact medical facilities and other essential services across Myanmar, with a particular focus on how they impact the daily lives and safety of civilians. Myanmar Witness seeks to shed light on atrocities and determine attribution so that the responsible parties are held to account.

List of Abbreviations

- Armed Conflict Location & Event Data - ACLED
- Civil Disobedience Movement - CDM
- Ethnic Armed Organisation - EAO
- Fire Information for Resource Management System - FIRMS
- Internally Displaced Persons - IDPs
- International Committee of the Red Cross - ICRC
- International Human Rights Law - IHRL
- Karen National Progressive Party - KNPP
- Karen Nationalities Defense Force - KNDF
- Kayan National Health Committee - KNHC
- Myanmar Air Force - MAF
- Myanmar Information Management Unit - MIMU
- National Aids Centre - NAC
- National League for Democracy - NLD
- People's Defense Force - PDF
- Quantum Geographic Information System - QGIS
- Radio Free Asia - RFA
- State Administration Council - SAC
Further Reading

- Eyes on the skies
- Tortured, beheaded and dismembered
- Villages burn in Sagaing
- The Tabayin School Attack
- School teacher killed and body mutilated

Annexe: 16 incidents impacting medical facilities

1. Clinic in War Yi Kaw Khu (ဝေရှင် ကျား) village, Loikaw, Kayah.
   03 February 2023.
   Coordinates unknown.
   An alleged MAF airstrike affected the clinic, which also hit an IDP camp and local school.

2. Clinic in Dagon Myothit (South) township (ဒေါ်တောင်မြို့သို့များ), Yangon.
   05 February 2023.
   Coordinates unknown.
   Facility closure following pro-SAC raid searching for CDM employees.

3. Tu Ywin Boet Rural Clinic (တွေ့ရှင်ဘောက်စောင်းကျော်တော်ကြီး), Tu Ywin Boet (တွေ့ရှင် ဘောက်စောင်း) village, Myingyan, Mandalay.
   16 February 2023.
   Coordinates Unknown.
   Two employees were allegedly shot in the medical facility.

4. Nwe Inn Rural Clinic (နေဝင်းစောင်းကျော်တော်ကြီး), Nwe Inn (နေဝင်း) village, Pale, Sagaing.
   19 February 2023.
   21.968868, 94.671261
   Claims that the Myanmar military burnt down the clinic.

5. District Hospital for Mar Le Thar (မေရှင်စောင်းကျော်တော်ကြီး), Ma Le Thar (မေရှင်) village, Ayadaw, Sagaing.
   23 February 2023.
   22.113664, 95.451456
   Hospital damaged due to MAF airstrikes and a raid on the village.

6. Pa Dat Taing Rural Health Division (ပေဒဒသည်ကျော်တော်ကြီး) medical facility, Pa Dat Taing (ပေဒဒသည်) village, Myinmu, Sagaing.
22.075511, 95.449803  
Rural hospital burnt down reportedly due to a Myanmar military raid.

7. Kone Ywar Rural Health Division (ကြောင်းရော ရုံးစိုက်ခွင်း) medical facility,  
Kone Ywar (ကြောင်းရော) village, Yinmarbin, Sagaing.  
1 March 2023.  
Coordinates unknown.  
Claims that the military burned down a village including the health centre and a monastery.

8. Tedim General Hospital (သာဒီမြို့ အထိမ်းအမှတ်) Tedim (သာဒီ) city, Tedim, Chin.  
12 March 2023.  
23.368949, 93.650828  
Claims of PDF attacking members of the Myanmar military who were occupying the hospital.

9. Traditional Medicine Hospital (အမေဇာလျင် အထိမ်းအမှတ်), Ye-U, Sagaing.  
23 March 2023.  
22.752106, 95.424672  
Hospital reportedly used to launch artillery fire by the Myanmar military.

10. Daw Ta Ma Gyi District Hospital (တောမောအိမ် ဒေါ်မောဆည်), Daw Ta Ma Gyi (လေးထေလေးမြောက်) village, Demoso, Kayah.  
24 March 2023.  
19.317499, 97.357402  
Alleged airstrike on hospital.

11. Nyaung Pin Thar District Hospital (နယူးယူးဗီးဗား ဒေါ်မောဆည်), Nyaung Pin Thar (နောင်အိမ်) village, Tigyaing, Sagaing.  
31 March 2023.  
23.680469, 96.083095  
Claims the Myanmar military burned down the hospital.

12. Si Thar District Hospital (စားထို ဒေါ်မောဆည်), Si Thar (စားထို) village, Shwegu,  
Kachin.  
5 April 2023.  
24.128808, 96.745465  
Alleged airstrike by MAF which damaged the hospital.

13. Ta Laing Rural Health Center (တာလှင် ရုံးစိုက်ခွင်း), Ta Laing (တာလှင်)  
village, Sagaing, Sagaing.  
8 April 2023.  
22.191254, 95.965999  
Alleged MAF airstrike and Myanmar military raid on health centre and monastery.
14. Ma Gyi Kan Rural Health Department (မိမိရွေးချယ်ရေးဝန်ဆောင်မှု့အဖွဲ့) medical facility, Ma Gyi Kan (မိမိရွေး) village, Myaing, Magway.
18 April 2023.
21.721884, 94.812052
Reports of a hospital raid with the use of a helicopter and ground troops causing violence.

15. Lay Twin Zin Rural Health Division (လေးသာဝင်းရေးဝန်ဆောင်မှု့အဖွဲ့) medical facility, Lay Twin Zin (လေးသာဝင်း) village, Kanbalu, Sagaing.
22 April, 2023.
Coordinates unknown.
Health centre burnt down alongside other village buildings.

16. KNHC (ကန်းမြို့ကျောင်း) medical facility, Pekon township, Shan.
25 April 2023.
19.669828, 96.889449
 Alleged targeted airstrike on rural health centre due to claims of resistance group(s) occupying the facility.