

## Myanmar

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### Executive Summary

In 2015, Myanmar wrote new important chapters in its history: the Government and eight ethnic armed groups signed a Nationwide Ceasefire Agreement (NCA), and successfully held elections that saw a landslide victory for the National League for Democracy.

Despite progress, children in Myanmar continue to suffer from higher levels of mortality and malnutrition, lower enrolment and completion of primary education; and higher risks to trafficking, labour, violence and recruitment and use by armed forces, than children in the region.

In this year's context, cooperation between Myanmar and UNICEF has been driven by three main considerations: turning policies and plans into changes in children's lives, as longer-term reforms proceed; responding to humanitarian needs arising from both protracted situations and massive floods and landslides, while further mainstreaming risk reduction into development plans; and placing children at the centre of determining factors for Myanmar's sustainable development – peace, social cohesion and human rights.

The programme delivered direct results. More than 95 per cent of children 9 months to 15 years old were protected from measles and rubella through vaccination campaigns. In targeted townships, the proportion of children 3–5 years old accessing early childhood facilities doubled between 2014 and 2015, and hundreds of thousands of children benefited from child-centred teaching methodologies applied for the first time by more than 14,000 primary school teachers. Approximately 280,000 children in 27 townships benefited from the first-ever deployment of social case management workers. The proportion of children under 5 registered continued to increase, to reach 79 per cent this year. Releases of children and young people from the armed forces have continued, with an additional 146 released, falling one child short of the 700 mark since the signing of the Joint Action Plan in 2012.

Under its four-theme advocacy strategy (children affected by armed conflict; children in Rakhine; public finance for children; and the first 1,000 days), UNICEF contributed to building an environment more supportive of child rights. Parties to NCA committed to protect children in armed conflicts, and negotiations are well advanced towards the signing of an Action Plan with two listed major ethnic armed groups; joint interventions in Kachin and the South-East allowed actors across ethnic lines to deliver better health care and nutrition to children; in the election campaign, the Union Electoral Commission, UNICEF and a coalition of Child Rights organizations convinced political parties to prioritize children. Those who did gained most of the votes, making children a clear winner of these elections. Amid inter-communal and religious tensions, the religious leaders of the four main faiths issued joint calls to respect religious diversity. In Rakhine, UNICEF's pioneering approach to reach all children through combined humanitarian assistance, development work, promotion of social cohesion, and advocacy against targeted discrimination is now making consensus among international development partners.

UNICEF implemented additional mitigation measures against key identified risks. It diversified its sources of funding. All recommendations from the 2014 audit were closed by May 2015, and the roll-out of the Harmonized Approach to Cash Transfer accelerated among Government entities. Through its eight Field Offices UNICEF strengthened planning and monitoring capacities of states and regions (Chin, Kachin, Kayin, Mon, Rakhine and Tanintharyi). An Evaluation Specialist was recruited. UNICEF continued to advocate for the implementation of the National Social Protection Strategy and sensitized political parties on need to capitalize on investment made in reforms, and accelerate results for children. Pre-positioned supplies and pre-established partnerships prepared UNICEF well to assist victims of floods and landslides within 48 hours. A national child vulnerability assessment and a risk-assessment road map were completed ahead of the floods. Cash transfer modalities envisaged in the National Social Protection Strategy were costed for pending implementation.

Yet, challenges remain. An estimated 1.8 million children are not covered by the NCA, and restrictions of movement for thousands of children in Rakhine hinder their access to adequate health care, nutrition and education. Low indicators affect children from all communities in Chin and Rakhine and call for comprehensive solutions. The Government's budgets for health, education and social protection remain too low to address inequities and give every child the best start in life.

UNICEF must leverage likely available new resources and programmes in support of the new administration for the benefit of children, and continue to demonstrate its added value to the Government and other partners. Strengthening the evidence base and finding the right balance in advocacy are necessary to ensure that all children – regardless of their or their parents' status including ethnicity, sex, ability or citizenship – can enjoy their rights.

## Humanitarian Assistance

In 2015, UNICEF responded to the needs of 96,000 children displaced in protracted situations in Kachin, Rakhine and northern Shan, and an additional 578,000 children displaced by this year's massive floods and landslides. The latter generated loss and damage estimated at 3 per cent of the country's gross domestic product (GDP) and 14 per cent of Chin's GDP, with implications for communities on their ability to recover in the longer term.

A new child-centred risk assessment and road map, jointly published by UNICEF and the Relief and Resettlement Department, confirms high levels of risks for children in Ayeyawady, Bago and Sagaing regions, as well as concerning levels of child vulnerability in Chin and Rakhine states. In Rakhine, UNICEF continues to advocate for reaching all children through combined humanitarian assistance, development work, promotion of social cohesion, and advocacy against targeted discrimination. The approach is gaining consensus among international actors.

UNICEF raised approximately US\$21.5 million in support of its humanitarian response, i.e., 46 per cent of its US\$46.6 million Humanitarian Action for Children (HAC) appeal. Measles immunization covered an additional 28,000 children in critically underserved areas, such as northern townships of Rakhine State and 'hard-to-reach' areas of Kachin/Northern Shan. More than 9,400 children under 5 in Rakhine were treated for severe acute malnutrition (SAM). Some 85,000 people benefited from clean water, sanitation and hygiene services. Joint Education and Child Protection programming expanded opportunities for life skills training and access to non-formal education to 98,271 adolescents in Rakhine and Kachin/Northern Shan states. Thanks to a rolled-out Early Warning Early Action system, the pre-positioning of supplies, training of its human resources, and pre-established partnerships, UNICEF was able to provide additional

support to victims of floods and landslides within 48 hours, and to further expand its response to reach 255,805 people with water, sanitation and hygiene (WASH) interventions, approximately 34,000 children with social welfare case management services, and 30,000 children with repaired education facilities and supply provisions. UNICEF was able to better capture such results this year thanks to the introduction of a UNICEF Myanmar Humanitarian Response Monitoring System.

Government leadership in the nutrition and education sectors, the WASH cluster and child protection sub-sector at national and sub-national levels was promoted.

The flood and landslide response was also an opportunity to promote awareness on children's vulnerabilities to natural disasters so frequently affecting Myanmar. Support was provided to the Government to draft the Post Flood and Landslide Needs Assessment, with UNICEF co-leading alongside the Japanese International Cooperation Agency and the World Bank, in the education and WASH sectors. The cash transfer modality envisaged in the National Social Protection Strategy was costed ready for implementation. Substantial contributions were also made to the recovery planning process in the social protection, health and nutrition, and disaster risk management sectors. Strong linkages were promoted between recovery strategies and national risk-informed sectoral plans and policies. UNICEF actively contributed to the successful inclusion of the Chin civil society in the Post-Floods and Landslides Needs Assessment.

Building on lessons learned from the floods, UNICEF partnered with the Relief and Resettlement Department to determine areas for capacity building to prevent, mitigate and prepare for the negative impacts of disasters, climate change and conflict on children. UNICEF has outlined clear areas of added value to the development of risk-informed policies and programming across sectors for 2016, including, among others, disaster risk reduction (DRR) integration in basic and teacher education curricula, safer construction, public awareness of child protection in emergencies concerns and links between community DRR volunteers and case management services, climate-resilient WASH strategies and standards, disaster-resilient supply and cold chain management, coordinated development of a Humanitarian Partners' Nutrition Sector Guide and Advocacy Plan to strengthen coherence among humanitarian partners while strengthening linkages to routine government services, and integration of nutrition cluster coordination into the Myanmar Nutrition Technical Network.

Yet, challenges remain. Due to the poor fund-raising performance of the HAC, UNICEF reached only 29 per cent of its target of 370,000 children with access to psychosocial support and case management services through safe spaces and individual counselling, and only 48 per cent of 66,700 children younger than 2 years old targeted for measles immunization. In Rakhine, chronic poverty and under-development exacerbate vulnerability, further compounded by the recent flooding. Discrimination and restriction of movements on thousands of children prevent them from accessing adequate health care, good nutrition and education. In Kachin/Northern Shan, sporadic conflict between Myanmar Government forces and non-state armed groups have continued, forcing frequent displacements and instability in access to services. Unpredictable and sporadic access by UNICEF and other United Nations agencies to non-government-controlled areas remains an obstacle to improvement of capacities and independent monitoring.

## Summary Notes and Acronyms

ART – antiretroviral therapy

ASEAN – Association of South East Asian Nations  
BCP – Business Continuity Plan  
BMS – baby milk substitutes  
C4D – Communication for Development  
CBO – community-based organization  
CCCs – Core Commitments for Children  
CDSR – Child Death Surveillance and Response  
CFS – child-friendly school  
ciYCF – community infant and young child feeding  
CLTS – Community-Led Total Sanitation  
CMT – Country Management Team  
CRC – Convention on the Rights of the Child  
CSO – civil society organization  
DBE – Department of Basic Education  
DCT – direct cash transfer  
DHS – Demographic and Health Survey  
DoH – Department of Health  
DPH – Department of Public Health  
DRD – Department of Rural Development  
DRR – disaster risk reduction  
DSW – Department of Social Welfare  
EAPRO – UNICEF East Asia and Pacific Regional Office  
ECD – early childhood development  
EMIS – Education Management Information System  
EPI – Expanded Programme on Immunization  
EXCEL – Extended and Continuous Education and Learning  
FAO – Food and Agriculture Organization of the United Nations  
GDP – gross domestic product  
HAC – Humanitarian Action for Children  
HACT – Harmonized Approach to Cash Transfer  
HMIS – Health Management Information System  
HRP – Humanitarian Response Plan  
ICT – information and communication technology  
IMAM – Integrated Management of Acute Malnutrition  
IMEP – Integrated Monitoring and Evaluation Plan  
IPV – inactivated polio vaccine  
IYCF – infant and young child feeding  
KAP – Knowledge, Attitudes and Practices (survey)  
LEP – Language Enrichment Programme  
LTA – Long-Term Agreement  
M&E – monitoring and evaluation  
MDG – Millennium Development Goals  
MNCH – maternal, newborn and childhood health  
MoE – Ministry of Education  
MoH – Ministry of Health  
MoRES – Monitoring Results for Equity System  
MRE – mine risk education  
MoSWRR – Ministry of Social Welfare, Relief and Resettlement  
NCA – Nationwide Ceasefire Agreement  
NDMA – National Disaster Management Agency  
NESP – National Education Sector Plan

NGO – non-governmental organization  
NSPS – National Social Protection Strategy  
PBEA – Peacebuilding, Education and Advocacy  
PCA – Programme Cooperation Agreement  
PCV – pneumococcal conjugate vaccine  
PMTCT – prevention of mother-to-child transmission of HIV  
PRIME – Planning for Research, Impact Monitoring and Evaluation  
QBEP – Quality Basic Education Programme  
REACH – Renewed Efforts Against Child Hunger  
RMNCAH – Reproductive, Maternal, Newborn, Child and Adolescent Health  
SAM – severe acute malnutrition  
SDGs – Sustainable Development Goals  
SITE – School-Based In-Service Teacher Education  
SMS – short message service  
SUN – Scaling Up Nutrition  
TEIP – Township Education Improvement Plan  
TLS – Temporary Learning Spaces  
UNDSS – United Nations Department for Safety and Security  
UNHCR – United Nations High Commissioner for Refugees  
WASH – water, sanitation and hygiene  
WFP – World Food Programme  
WinS – WASH in Schools

## Capacity Development

Capacity building was a key feature of health, education and child protection programmes. UNICEF's support to the Ministry of Health (MoH) increased staff capacity to analyse data and implement differentiated strategies, improving the HIV testing rate for pregnant women newly attending antenatal care services from 65 per cent in 2014 to 79 per cent in 2015. The development and implementation of a comprehensive Communication for Development (C4D) strategy for the measles rubella campaign resulted in 95 per cent coverage of the targeted 13.9 million children. Vaccine storage capacity increased from 82,993 litres in 2014 to 312,399 litres. Support to the Government to roll out Integrated Management of Malnutrition continued through development of guidelines, protocols and job aids covering supportive supervision.

In education, UNICEF continued to support development of language policy to improve student learning through the use of mother-tongue instruction in early grades and promote social cohesion. Building on early successes in Mon, work was expanded to include Kayin State and conflict-affected Kachin. Lessons from this experience will be reviewed by experts in a conference scheduled in 2016.

In Child Protection, a new social work case management system was rolled out, with capacity building and mentoring support for government deployed case managers in 27 township accompanied by awareness raising among 367,000 people about the system. During Cyclone Komen, it was evident that these case managers were valued as front-line responders. Myanmar, being the third-highest mine-contaminated country in the world, capacity building of communities in mine risk awareness and mitigation is a politically sensitive but high-priority concern. UNICEF supported the field testing of a Mine Risk Education (MRE) toolkit, jointly developed by the Government and civil society. The toolkit, designed based on findings from the Knowledge, Attitude and Practice (KAP) survey, will be rolled out in 2016 by mine action partners in Kachin and Kayah.

## Evidence Generation, Policy Dialogue and Advocacy

UNICEF combined budget trend analysis with child disparities data from the 2014 census to make a case for increased and geographically equitable social investments for children with a range of partners, including parliamentarians, the Government, civil society and development agencies.

An equity-based barrier and bottleneck analysis was applied to newborn care; institutional health facility; social protection policy and children with disabilities. Using 2014 census data and the MoH study on under-five mortality, UNICEF analysed patterns and ranked states/regions according to mortality and disease burden rates, leading the MoH to prioritize interventions with a high impact on reducing child mortality, and renew focus on deprived geographic areas. Impact of training on classroom practices is analysed to inform education human resource management policy and practice.

A situation analysis of children with disabilities was initiated to guide UNICEF's programming and advocacy in 2016.

The National Ceasefire Agreement (NCA) contains key provisions on children and armed conflict as a result of advocacy on the part of UNICEF and partners with the Government, the Myanmar Peace Centre and ethnic armed groups, including on ending the use and recruitment of children and elements of the other six grave violations as per United Nations Security Council Resolution 1612.

A UNICEF-supported national consultation on the draft child law promoted interactions between more than 70 civil society organizations and members of Parliament, the National Human Rights Commission and key line ministries, and resulted in improvements and increased buy-in of the draft law.

In the election campaign, UNICEF partnered with the Union Electoral Commission and the National Coalition on Child Rights to place children at the centre of the election debate. Children have been a clear winner of the elections, as parties which prioritized children gained most seats. UNICEF follows up with elected parties to turn their commitments into actions.

## Partnerships

A key pillar of UNICEF Myanmar's Advocacy and Communication Strategy is to expand its partnerships and engage them in taking actions for children's rights in Myanmar.

Leveraging the historic 2015 Myanmar elections, UNICEF partnered with the Union Election Commission and a national child rights coalition to engage with all 91 contesting political parties to ensure child rights featured prominently in their manifestos. This was followed by publicly available analysis of party manifestos on commitments for children and a post-elections call to action for winning parties.

UNICEF expanded its partnership with parliamentarians to develop politicians as champions for children. Capacity-building support was provided to parliamentarians on representing the interests and voices of children in their roles in shaping laws; oversight; budget scrutiny; and constituency engagement.

Following the NCA, UNICEF supported joint action between the Government and ethnic armed groups, including joint MRE and water, sanitation and hygiene (WASH), immunization, nutrition,

and prevention of mother-to-child transmission (PMTCT) of HIV to benefit women and children in non-government controlled areas.

The Multi Donor Education Fund partnership comprising Australia, Denmark, the European Union, Norway, United Kingdom and UNICEF continued to support policy reforms and deliver results for children across schools and in their communities.

Joint advocacy under Scaling-Up Nutrition (SUN) with United Nations agencies resulted in the President's decision to draft a new Food and Nutrition Security Plan, currently being developed. Through the SUN movement, UNICEF strengthened multi-sectoral partnerships for nutrition at national and sub-national levels. UNICEF was instrumental in the set-up of Renewed Efforts Against Child Hunger (REACH) facilitation support in Myanmar to build United Nations coherence on nutrition. Commitments from A Promise Renewed global partnerships were incorporated in government-led National Strategic Plan 2015–2018 for new-born and child health.

Amid calls fuelling religious tensions, UNICEF has successfully encouraged the top religious leaders of the four main religions to issue joint calls in support of religious tolerance and diversity for the benefit of children.

## External Communication and Public Advocacy

Within its overall Advocacy and Communication Strategy 2013–2015, UNICEF Myanmar has established four office-wide advocacy and communication priority issues, developing a comprehensive advocacy plan for each that includes a monitoring and evaluation framework.

Reframing the debate on Rakhine, UNICEF's early adoption of and broad advocacy for an approach based on 'all rights for all children' across the ethnic divides is rallying greater support among international development partners and within the United Nations. In addition, UNICEF has worked with the Interfaith for Children religious platform to issue public statements addressing religious intolerance.

In terms of advocacy for increased investment in children, while the April 2015–2016 budget remained at the same level as 2014–2015, increased political and public will is apparent, with increased debate among Parliamentarians and in the media on the national budget. UNICEF, together with a local non-governmental organization (NGO), Spectrum, developed the first publicly available budget guide for children and youth – to raise public awareness of government spending on social sectors.

Orphanage tourism is a seasonal phenomenon fraught with risks for children. UNICEF has partnered with the Tourism and Hotel industry to prevent the proliferation of 'orphanage tourism' and child sex exploitation. More than 50,000 branded materials on prevention of orphanage tourism were distributed through hotels, tour operators, tour guides and at key tourist sites, and key messages were also printed in the in-flight magazines of two domestic airlines. Awareness-raising activities reached more than 250 travel and tourism professionals, including the Myanmar Tour Guides Association.

More broadly during 2015, UNICEF media partnerships expanded to increase coverage and debate on the four advocacy priorities among the public. At the same time, public engagement through social media has trebled with a social media fan base of 9,063 (1 November 2014) to a fan base of 29,476 in November 2015.

## South-South Cooperation and Triangular Cooperation

As Myanmar transitions and reforms, it has embraced lessons and reflections on systems strengthening and improved service delivery through South-South collaboration.

The Ministry of Education (MoE) engaged with the Association of South East Asian Nations (ASEAN) on sector planning and learning metrics. The Malaysian MoE senior delegation visited Myanmar to share its Education Blue Print. Consultations focused on the process of developing sector plans, identifying transformational shifts and defining indicators and targets. In partnership with the South East Asia Ministers of Education Organization, Myanmar has joined the Primary Learning Metrics initiative, and is working to develop a local version of Grade 5 tests in language, math and global citizenship to be rolled out in 2016.

With the objective of facilitating learning on WASH in Schools (WinS) among countries in the region, the WinS International Learning Exchange Event was hosted in Sri Lanka, with participation from the Myanmar MoE and the Ministry of Health (MoH). Good practices were shared on improving the enabling environment, implementation at scale, and establishment of effective monitoring systems. The event was timely to reinvigorate inter-ministry relations after recent restructuring, while introducing best WinS practices in the region. The workshop helped accelerate Myanmar's finalization of the national standards and guidelines to be implemented in 2016.

## Identification and Promotion of Innovation

Myanmar's reforms offer opportunities for both technology and non-technology-based innovations. UNICEF has initiated several innovations to improve child rights and child participation.

**Real-time Monitoring and Information Systems:** CommCare and RapidPro were initiated to improve real-time data collection, two-way communication, and coordination across selected sectors. The initial focus is on the health sector, where UNICEF's technical and financial support to the MoH has resulted in the development of a mobile phone-based patient management system that will enable midwives to provide better quality of care for reproductive, maternal, newborn, child and adolescent health (RMNCAH), HIV and nutrition interventions. Focus will be on strengthening capacity of the MoH to lead the initiative. The application is currently being customized based on inputs from various stakeholders, and will be introduced for scale-up in early 2016.

**Access to Information:** To ensure meaningful access by communities to information, opportunity and choice regarding maternal and child health-care services, the Messaging Life programme has been developed, with the aim of targeting mothers with critical information throughout their pregnancy and through the first two years of their child's life.

**Youth Engagement, Participation and Feedback:** UNICEF is launching U-Report to ensure meaningful involvement of young people in decision-making and development. In 2015, foundational work was completed, including establishment of a Steering Committee and Youth Content Group, engagement with mobile network operators and regulatory bodies, and technical set-up.

The Myanmar Country Office has launched the Myanmar Social Innovation Lab as a collaborative space that brings together young people, the private sector, academia, the Government and civil society to co-create sustainable solutions to the most pressing challenges

facing marginalized children and young people. The lab has generated ideas for emergency preparedness for children and communicating with children and youth on climate change.

### Support to Integration and Cross-Sectoral Linkages

UNICEF has leveraged its multidisciplinary technical assistance to support cross-sectoral engagement for social protection, water and sanitation and nutrition.

Linkages between social protection, child protection and disaster management are clearly articulated in the National Social Protection Strategy that UNICEF supported the Government to launch in 2014. Unprecedented floods in 2015 provided an opportunity to operationalize this vision. With collaboration among social policy, child protection and emergency teams, UNICEF and partners supported the Government to formulate a costed social protection response, which included the implementation of cash transfers and social work case management to lay the foundations for a national social protection system. The plan highlights the need to scale up Department of Social Welfare presence at decentralized level.

UNICEF has facilitated cross-sectoral engagement for Myanmar's first Rural WASH Strategy and Investment Plan, currently being developed, covering rural water supply and sanitation and initiated joint nutrition-WASH analysis. In coordination with the MoE, MoH and Ministry of Rural Development, WinS, WASH in health facilities and WASH in emergencies, including disaster risk reduction (DRR), are included in the plan. The strategy development process opened policy dialogue among line ministries and development partners.

Continued advocacy by the United Nations network on nutrition contributed to the President's decision to establish a new Myanmar National Action Plan on Food and Nutrition Security (2016–2020). In support of this new high-level plan, UNICEF supported the Government to conduct a technical review of the MoH-led National Plan of Action on Food and Nutrition (2011–2015). The review findings, including gaps in evidence and effective multi-sectoral governance for nutrition, were used to inform the new plan's development, expected to be endorsed in 2016. Technical support led to the inclusion of nutrition-sensitive interventions in education and social welfare and other cross-sectoral issues, including gender and DRR.

### Service Delivery

In 2015, UNICEF systematically applied theories of change across its programme. A new planning, monitoring and reporting system now allows UNICEF to easily identify, track and address barriers and bottlenecks impeding children's access to quality services.

Such an approach was applied to the newborn care and the ongoing institutional health-care facility assessments, and helped build a birth registration campaign to increase registration rates from 72 per cent to 79 per cent, as well as a more sustainable e-vital registration system in Mon and Chin states and Magway region. Social case managers were deployed in 27 townships to fill in a gap in protection services, benefiting approximately 280,000 children.

A Communication for Development (C4D) strategy for the measles rubella campaign helped achieve a 95 per cent coverage rate, reaching nearly 13.2 million children 9 months to 15 years old. Increased government capacity supported the expansion of routine immunisation services in difficult to access areas, through UNICEF's support to vaccine management, cold chain capacity enhancement and brokering of alliances between state and ethnic armed group actors in conflict areas in Wa, northern Shan and Kachin.

A KAP survey helped tailor an MRE manual relevant to knowledge and community contexts in two contaminated states.

In education, newly introduced early childhood development (ECD) services and improved teaching methodologies expanded. Coverage for children 3–5 years old with early childhood facilities doubled between 2014 and 2015. Approximately 14,000 primary school teachers applied child-centred teaching methodologies for the first time.

In some townships, the monitoring system allowed UNICEF Field Offices to alert state authorities to a human resource gap and successfully advocate for a temporary government staff deployment.

The newly introduced barriers and bottlenecks quarterly based field monitoring system strengthens the evidence that UNICEF needs to more efficiently inform policy and programme engagement.

### **Human Rights-Based Approach to Cooperation**

UNICEF has used a number of tools and reporting mechanism to further the human rights agenda in Myanmar – namely, the 2015 Universal Periodic Review of Myanmar; visits of the United Nations Special Rapporteur on the situation of human rights in Myanmar; and the visit of the United Nations Secretary-General's Special Representative on Children and Armed Conflict.

During 2015, UNICEF actively participated in the Universal Periodic Review of human rights in Myanmar, submitting recommendations in a joint United Nations Country Team report, and engaging with the Ministry of Foreign Affairs to advise on quick wins ahead of the reporting process. UNICEF will make the best use of the last outgoing parliamentary session to push for recommendations that have been agreed by the Government to be implemented, and will work on others once the new government is installed in April 2016.

UNICEF facilitated a successful visit of the United Nations Secretary-General's Special Representative on Children and Armed Conflict, which helped to open up more space for child rights engagement with the Government and ethnic armed organizations. As a result of coordinated advocacy and growing commitments, in September the Myanmar Government signed the Optional Protocol to the Convention on the Rights of Child (CRC) on the involvement of children in armed conflict, and three of the seven listed ethnic armed groups listed by the Secretary-General's Annual Report for use and recruitment took concrete steps towards signing an Action Plan with the Country Task Force on Monitoring and Reporting. Formal signature of at least one Action Plan is anticipated in early 2016.

The United Nations continues to apply the Human Rights Upfront Initiative to the situation in Rakhine, developing Early Warning Early Action systems, as well as monitoring tools. The Early Warning Early Action system has already helped to quickly diffuse rumours around violent events, and prevent further escalation.

### **Gender Mainstreaming and Equality**

In 2015, UNICEF's Gender Working Group has played a key role in leveraging influence within the United Nations Gender Theme Group, ensuring incorporation of a cross-sectoral child-rights focus into strategic national processes for advancing gender equality. These include the drafting of the Law on the Elimination of Violence against Women, reporting on the Convention on the Elimination of All Forms of Discrimination against Women, and technical support for the

Government's Gender Situation Analysis, which synthesizes evidence of gender disparities nationwide. With UNICEF technical assistance, the draft Amended Child Law raises the marriage age for girls to 18 years old, a major step for preventing child marriage and key advance for gender equality.

UNICEF's gender analysis of National Census Data has supported evidence-based advocacy with political parties prior to and post-election, building political will to consider gender and other dimensions of disparity in children's well-being. A new generation of young leaders are being empowered to mobilize their peers for civic engagement through UNICEF's adolescent participation programme, which includes a focus on gender awareness and girls' social inclusion.

UNICEF technical assistance has strengthened gender mainstreaming in the draft National Education Sector Plan – Myanmar's first – and built government capacity for integrating gender analysis in planning, monitoring and curriculum development. With UNICEF technical support, the MoH has engaged men in PMTCT, which has resulted in more men and pregnant women coming forward for HIV testing.

Mainstreaming of gender into humanitarian action has also been enhanced through strengthened gender marking in project proposals, and capacity development of partners through the sector/cluster system. Women's participation in management decisions related to WASH in camps for internally displaced people has also been strengthened, following a joint gender review of WASH programming by UNICEF, the United Nations Office for the Coordination of Humanitarian Affairs and the WASH cluster. Recommendations are being incorporated into new programmes and cluster monitoring frameworks, and state-level capacity for implementation has been developed through gender training.

## Environmental Sustainability

In 2015, the Government of Myanmar strengthened its environmental policy framework through the drafting of Environmental Impact Assessment Guidelines. UNICEF is participating in the ongoing review of the guidelines to ensure that the specific vulnerabilities of children are considered. Ahead of COP21, UNICEF worked in close collaboration with the Myanmar Climate Change Alliance of the Ministry of Environmental Conservation and Forestry to ensure that Myanmar's Intended Nationally Determined Contribution includes a reference to the importance of addressing the needs of vulnerable groups, in particular children, when tackling climate change. Building on COP21, Myanmar will develop a number of Climate Change Adaptation strategies and plans and UNICEF, together with key partners (Myanmar Climate Change Alliance, ActionAid), has developed a concept note to support the meaningful involvement of adolescent and youth in the development and implementation of such policies.

Furthermore, UNICEF worked close with the MoH to strengthen immunization waste management which could contribute in reducing environmental hazard resulting from inadequate practices related to disposal of immunization waste. The measles rubella campaign produced a lot of waste which was properly managed based on the newly developed waste management guidelines. In addition, UNICEF procured more than 500 Direct Solar Driver vaccine refrigerators that have been proven globally to be more environmentally friendly due to the fact that they do not use batteries and can be installed in remote areas with minimal supervision, and do not require a trained technician for installation. UNICEF has invested nearly US\$3 million in these types of solar refrigerators. Not only will this investment make the cold chain system more effective and easier to handle, it should additionally increase access to

vaccines throughout the month, rather than just a few days per month, especially in hard-to-reach areas – directly benefiting nearly 150,000 children younger than 1 year of age.

## Effective Leadership

The UNICEF Myanmar Country Management Team (CMT) provided strategic direction to ensure that the Country Programme is aligned with the changing context and is risk-informed, and that planned results are achieved effectively and efficiently. Major 2015 initiatives include: 'Delivering Results for Children in 2015' – a consultative office-wide agreement on priorities shared with development partners – and the Annual Management Plan; review of the advocacy strategy; launch of innovations; reaching consensus on children in Myanmar's 2015 elections; Humanitarian Performance Monitoring system; Integrated Monitoring and Evaluation Plan; response to emergencies including peace building efforts; follow-up on Global Shared Services Centre preparatory actions; monitoring of key performance indicators; efficiency and effectiveness; risk control and self-assessment; business continuity; resource mobilization strategy; staff learning and development; review of feedback from the Global Staff Survey; Harmonized Approach to Cash Transfer (HACT) implementation; and closure of audit recommendations.

Management and Oversight Committees, including the CMT, Joint Consultative Committee, Contract Review Committee, Programme Cooperation Agreement (PCA) Review Committee, and Central Review Body were constituted and fully functional with the right mix of staff, experience and gender diversity.

As part of risk-informed management, UNICEF initiated HACT with government counterparts; built staff capacity on HACT implementation; reviewed its risk control self-assessment; conducted a staff training on engaging with non-state actors and developed a guidance note on engaging with ethnic armed groups. The Business Continuity Plans (BCPs) in nine UNICEF locations were finalized.

The programme and operations teams regularly monitored effective programme implementation, reviewed programme risks and mitigation strategies as part of the theory of change articulation, introduced the Monitoring Results for Equity System (MoRES) approach and the barriers and bottleneck monitoring and reporting framework, with guiding questions to inform quarterly programme review and planning, HACT implementation, response to emergencies, key performance indicators, internal and financial controls work processes, implementation of audit recommendations, budget preparations, and efficiency and effectiveness initiatives.

## Financial Resources Management

UNICEF Myanmar rolled out the HACT with government authorities in 2015. A HACT Assurance Plan is regularly reviewed by the CMT. The Programme and Operations Group ensured effective contribution management; budget allocations; budget control and utilization; and follow-up on outstanding direct cash transfer (DCT) advances. The CMT provided oversight and addressed any critical issues or bottlenecks. The relevant key performance indicators set by the CMT and Regional Office on funds utilization were vigorously monitored and achieved.

Internal and financial controls and work processes including release strategy, table of authorities and segregation of duties were effectively implemented and monitored. The Country Office ensured efficient and effective utilization of organizational resources in a transparent manner. Efficiency gains are explained below.

Bank reconciliations were prepared, reviewed and electronically submitted in the system within the deadlines. There were no outstanding reconciling items for more than two months throughout the year. All accounting schedules and activities were efficiently managed.

During 2015, the Myanmar Country Office received US\$19.6 million against Regular Resources (RR), including set-aside funds and roll-over from 2014, with a 100 per cent utilization rate. About 94 per cent of Other Resources (OR) funds allocated for 2015, including 2014 commitments, were fully utilized. The remaining funds have been re-phased to 2016. All of the US\$16.4 million in expiring grants were fully utilized. Of the US\$10.9 million emergency funds (OR – Emergency) allocated for 2015, including 2014 roll-over, 97 per cent were fully utilized. The remaining amount of US\$320,990 will be re-phased for 2016. The Institutional Budget allocated to the Country Office was fully utilized. The Country Office has no DCT over nine months and only 1.2 per cent DCT over six months.

The Myanmar Country Office was audited in 2014 and received satisfactory ratings. All recommendations were closed by May 2015.

### **Fund-Raising and Donor Relations**

UNICEF Myanmar made a special effort to expand its fund-raising base with a focus on under-funded programmes, namely health and nutrition, WASH and child protection. To strengthen government health systems and promote the Promise Renewed, Every Woman Every Child and SUN movements, UNICEF raised US\$16.2 million from the Three Millennium Development Goal Fund, the Peacebuilding Fund and the United States Department of State. Child Protection raised US\$1.95 million from the Government of Australia, continuing a partnership to strengthen child protection systems support.

Overall, the Country Office successfully mobilized OR US\$19.6 received for 2015, 55 per cent against an annual target of US\$35.7 million. Also, US\$21.5 million was raised against UNICEF's Humanitarian Action for Children (HAC) appeal, reaching 46 per cent of the target. Of this, US\$13.7 million has been re-phased to 2016, as they are multi-year grants.

In addition, 94 per cent of OR (including 2014 roll-over) for the regular programme has been fully utilized. The remaining 6 per cent (US\$2.5) consists of multi-year grants which will be re-phased to 2016. Of the emergency funds, US\$10.9 million (97 per cent) was fully utilized (including 2014 roll-over).

UNICEF Myanmar continues to negotiate with the Government of Turkey towards emergency funding. UNICEF organized missions from the UNICEF National Committees of Australia, Sweden and the United States of America.

The CMT monitored the timely and quality submission of donor reports. The office successfully managed to submit 53 donor reports within given deadlines (100 per cent time compliance). No negative feedback was received from any donor on the submitted reports.

UNICEF Myanmar's fund-raising strategy, developed in 2014, will be reviewed in 2016, responding to the changes that will likely follow once the new administration is in place.

## Evaluation

UNICEF Myanmar made significant progress towards enhancing its evaluation function and capacities on evaluation in 2015.

This is evidenced in the establishment of a Planning, Monitoring and Evaluation Unit; recruitment of an shared evaluation specialist reporting to the Representative to ensure independence of the function as per evaluation policy; and recruitment of an evaluation specialist for the Developmental Evaluation of Peacebuilding, Education and Advocacy (PBEA) activities to facilitate real-time, evidence-based reflection for adaptive implementation.

Developmental Evaluation highlights include the documentation/adaptation of (i) state-level language policy development to support future roll-out; (ii) UNICEF's education activities in Rakhine; (iii) early success and follow on use of UNICEF's MRE KAP survey; and (iv) PBEA's underlying logic and the section's ability to monitor and report on results.

Three additional evaluations are being implemented and expected to be finalized in early 2016. Management responses from past evaluations were closed, and proper recording of budget use for evaluation was applied in line with the evaluation policy, which stands at close to 0.9 per cent – almost reaching the global 1 per cent target. An Evaluation Dashboard visualizing key indicators for the evaluation function is monitored by the CMT every quarter.

Internal Standard Operating Procedures for research, evaluations and studies were developed to clarify accountabilities in line with the evaluation policy, and to ensure that evidence generating activities produce credible, relevant and useful reports. The Standard Operating Procedures also reflect UNICEF's new Ethics Procedure. A costed evaluation plan was developed for 2016–2017.

A Long-Term Agreement (LTA) was set up with a partnership of two Myanmar-based evaluation firms, requiring at least one national expert on the evaluation team, as well as the establishment of a Reference Group consisting of relevant Government staff to encourage greater awareness, ownership and buy-in.

Additional opportunities to engage with the Government, parliamentarians and civil society organizations around national evaluation systems and capacity building will be explored in 2016.

## Efficiency Gains and Cost Savings

Efficiency and effectiveness at the Myanmar Country Office has been ensured throughout the process of procurement of goods and services and in all transactions. Some areas included: effective planning to reduce low-value purchases and transactions which led to efficiency gains in staff time and overtime; use of LTAs to expedite procurement, especially for emergencies, and reduce transaction costs for bidding process; and achieved value for money when hiring consultants and service providers through adequate sourcing strategies. Other measures which resulted in cost saving were: use of technology such as Skype for Business to reduce communication costs, powered-off offices and air conditioning when not in use to reduce utilities costs, and rationalized travel to reduce carbon footprint and fuel consumption.

Quarterly reviews of savings and of efficiency gains were carried out. Additionally, the Country Office actively collaborated with other agencies to harmonize operational needs and carried out joint activates such as procurement, capacity building, and common services, namely security and medical and, on the programme side, shared functions, namely the Evaluation and C4D

with other offices. Micro-assessments are shared among United Nations agencies, thus generating savings and eliminating duplications. The Country Office is exploring sharing of premises with UN Women to reduce operational costs and improve programme cooperation.

## Supply Management

Supply plan implementation was regularly monitored. Supplies worth US\$32.8 million, inclusive of offshore, regional and local procurement, were managed.

The Country Office also contracted institutions for complex programme as well as routine administrative services, including evaluations, research, information technology services, HACT assurance, guarding services, transportation, worth US\$4.3 million. In addition, 13 LTAs were signed for essential goods and services.

UNICEF Myanmar 2015	Value in US\$
Programme supplies	15,228,978
Operational supplies	1,650,863
Services	4,346,748
<b>Total</b>	<b>21,226,589</b>

During the third and fourth quarters, direct response to the flood emergencies included procurement, warehousing, clearance and distribution to the affected areas, amounting to US\$1.5 million (723.74 metric tons).

Procurement services with a value of about US\$8.6 million were managed, including US\$7.4 million through GAVI funding.

UNICEF leases a warehouse primarily for pre-positioning supplies. For the GAVI support, the Country Office procured cold chain equipment and secured bigger warehouse capacity for consolidating these supplies for further in-country distribution to all townships. Some 70 per cent of all offshore supplies transited through the UNICEF warehouse and in-country transport arranged due to challenges at the MoH – weak systems, and limited physical and human resource capacity.

The current value of warehouse stock is approximately US\$1 million, comprising US\$236,812 for programme supplies and US\$524,804 towards emergency pre-positioning. The total value of supplies issued during the year was US\$428,015 and the overall value of supplies managed was US\$1.43 million.

S&L is also part of the MoH-led process to formalize a comprehensive national supply chain strategy for the health sector in the country.

Four programme and supply staff attended Supply Dashboards and Procurement Services trainings organized by the UNICEF Supply Division. Programme staff were trained on use of dashboards for effective monitoring of supplies.

## Security for Staff and Premises

The Country Office considers staff safety and security a top priority and works closely with the United Nations Department for Safety and Security (UNDSS), Senior Management Team and Operations Management Team to ensure that all precautionary measures are undertaken, emergency preparedness guidelines are adhered to and security advisories are timely and shared with staff.

The Country Office, with support from UNDSS, completed the Minimum Operating Security Standards compliance check on the Yangon Office in February 2015 and was assessed as compliant, with few areas of improvements in compound and building access controls, emergency procedures and equipment, which were successfully implemented. Strengthening the security access control was achieved through installation of an X-ray machine to screen the bags of visitors and a walk-through metal detector at the main gate. Enhancing the emergency equipment was done through the procurement of 10 sets of satellite phones and digital VHF systems.

Similar assessments were done for the seven field offices, and items required to improve Minimum Operating Security Standards compliance were identified. A closed-circuit television security system and smoke detectors were installed in seven field offices, and extra Trauma Kit bags and first aids boxes were procured for office vehicles and offices. Additional items are pending, such as purchase of three 15 KVA generators and installation of blast resistant film on office windows. The estimated cost of US\$40,000 will be requested from the Regional Office.

The Country Office updated the BCP plan for the Yangon Office and prepared and incorporated the BCP plans for the eight Field Offices. The communication tree was kept current and was tested. All incoming staff took part in the security briefing offered by UNDSS and were required to complete Basic and Advanced Security in the Field Trainings.

As part of BCP preparedness, the Country Office tested the ability of essential staff to work remotely, including access to Vision, email, etc. (from home and from the alternate designated location, which is the United Nations Development Programme's Office). In addition, the alternate communication SAT phones/radio were tested.

## Human Resources

In 2015, the Myanmar Country Office experienced a high staff turnover, partially related to the 2014 Programme Budget Review submission, which resulted in a number of new positions being created. In total, 45 staff joined the office and 30 separated. Also in 2015, the office submitted a Programme Budget Review focused largely on the Education programme. In total, 22 positions (16 encumbered) were abolished and 14 were created. Extensive discussions were held with impacted staff members; CBI trainings have been scheduled and internal and external vacancies are being shared directly with staff on abolished positions.

The Country Office's capacity to respond to emergencies in-country and to support others in the region was enhanced through skills built during the Regional Rapid Response Mechanism training attended by three staff, including a co-facilitator from the Myanmar office.

Regarding global indicators on performance management, the office did well, with 99 per cent of staff completing their 2014 Performance Evaluation Reports by the end of March. Meeting the recruitment indicators has been more challenging, with a number of contributing factors – such as constraints in scheduling testing and interviews as well as obtaining references and approval

turnaround times. Approval through the UNICEF East Asia and Pacific Regional Office (EAPRO) for national positions has been very efficient.

Based on the Global Staff Survey, the office developed a work plan around five dimensions – Work-Life Balance, Career and Professional Development, Empowerment, Office Efficiency and Effectiveness, and Staff Association. Action continues in this regard to strengthen systems, introduce new initiatives and redirect resources to address issues and concerns identified. The office has also developed a rolling learning plan. One focus in 2015 has been on Integrity and Ethics. The Ethics Adviser provided a half-day training and the United Nations provided a one-day Sensitization relating to Integrity and Ethics to the majority of staff. Compliance to mandatory training has been prioritized, as has the use of online learning through Agora.

### Effective Use of Information and Communication Technology

The information and communication technology (ICT) team continues to contribute to programmatic activities, providing technical support to establish the use of mobile applications through the RapidPro platform to engage with different audiences. The office is currently in negotiations with three mobile network operators and the Government to implement U-Report, targeting adolescent engagement and 'Messaging life' to engage with communities on health-related issues.

Connectivity in Myanmar continues to be a major challenge, as the lack of reliable local Internet Service Providers and restrictions on importation of telecommunication equipment limits the Country Office's ability to provide reliable connectivity for its field offices in line with Information Technology Solutions and Services global standards. However, partnering with the World Food Programme (WFP) and the United Nations High Commissioner for Refugees (UNHCR) to share VSAT equipment, the Country Office has managed to substantially improve Internet access for three of its eight field offices, enabling these offices to take advantage of UNICEF cloud-based applications in a cost-effective and efficient manner. UNICEF's move to cloud-based systems has triggered a high demand on bandwidth, and the ICT team is exploring measures to improve Internet performance and enable the office to further benefit from Office 365 collaboration tools.

The launch of two international telecommunication companies in late 2014 has improved access to social media in the country via mobile phones. The office observed a 25 per cent increase in Myanmar Country Office Facebook followers in the past 11 months. As the most popular social media network in the country, the Country Office uses Facebook to address its key advocacy priorities, which include:

1. Children in armed conflict;
2. Rakhine inter-community violence;
3. 1,000 days; and
4. Public finance for children.

The Country Office has two daily posts on its Facebook page, one in English and one in Myanmar, the latter being at 5 p.m., when page experiences peak hits. Analysis has shown participation increases when posts include interesting pictures which are more likely to be shared.

## ANALYSIS BY OUTCOME AND OUTPUT RESULTS

**OUTCOME 1** Malnutrition is prevented and treated among women of reproductive age and children under 5 through increased access to sustainable, quality and integrated nutrition interventions.

### **Analytical statement of progress:**

Despite structural reforms at the MoH impeding the pace of implementation during the year, notable progress on nutrition for children and women was made.

At the national level, stronger coordination among United Nations agencies (UNICEF, WFP, the Food and Agriculture Organization of the United Nations (FAO), WHO) has led to Presidential commitment to develop a multi-sectoral action plan on food and nutrition security. Along with establishment of a REACH and undernutrition country team, this plan strengthened the United Nations' high-level engagement with relevant ministries, donor and civil society alliance networks under the SUN movement. When the plan is endorsed in 2016, an increased budget for nutrition is expected under the new Government.

Despite limited enforcement of legislation on nutrition in 2015, a critical milestone was reached. With continued technical and advocacy support from UNICEF, the Government established a national designated body to monitor and enforce breast milk substitutes (BMS) code violations, an enforcement mechanism that did not exist before.

UNICEF helped strengthen sub-national coordination through mainstreaming nutrition into existing government coordination mechanisms. Partnerships were strengthened to reach children in remote areas through integrated nutrition/Expanded Programme on Immunization (EPI) outreach and intensified infant and young child feeding (IYCF) and severe acute malnutrition (SAM) management in high-burden and flood-affected areas. Although the Government's roll-out of key nutrition interventions (community infant and young child feeding (cIYCF) and Integrated Management of Acute Malnutrition, or IMAM) has been delayed, the MoH is now ready for implementation in early 2016. Coverage of other interventions, such as micronutrient supplementation, has continued to increase. In humanitarian action, targets for UNICEF have been met, but limited freedom of movement for thousands of children in Rakhine prevent access to adequate health care and nutrition. UNICEF has initiated support to mainstream emergency preparedness and response in routine government nutrition programming.

UNICEF made progress in addressing nutrition data and evidence gaps by developing tools for routine health, nutrition and WASH programme monitoring and analysis of Health Management Information System (HMIS) nutrition indicators. These tools facilitated engagement of UNICEF field offices with local authorities to access routine data and inform advocacy, prioritization and planning based on under-performing areas. Nutrition surveillance through NGO partners in Rakhine state has also been established to monitor trends.

UNICEF supported the MoH in planning the national micronutrient and food consumption survey to be rolled out in 2016, after the Demographic Health Survey (DHS), the first such evidence generation exercise to better tackle and prevent malnutrition. Updated national and sub-national data from UNICEF's support will be vital in assessing the impact of nutrition programmes and

investments over the past years, informing future policies, and the situation analysis leading up to UNICEF's next Country Programme.

**OUTPUT 1** Strengthened political commitment, accountability and national capacity to legislate, plan and budget for scaling up nutrition interventions for women of reproductive age and children under 5.

**Analytical statement of progress:**

United Nations coherence on nutrition was strengthened this year, with establishment of a United Nations network for nutrition under SUN (FAO, UNICEF, WFP, WHO) and REACH country facilitation team. Joint advocacy resulted in the President's decision to draft a new Myanmar National Action Plan on Food and Nutrition Security (2016–2020) in response to the Zero Hunger Challenge. The plan prioritizes core interventions for food and nutrition security, including from WASH, Social Protection and Education, while mainstreaming governance, gender and DRR. The United Nations network worked closely with the Ministry of Planning, which is coordinating plan development, and with line ministries. The Plan, which is expected to be finalized in 2016 for implementation under the new Government, was informed by the review of the National Plan of Action of Food and Nutrition (2011–2015) with UNICEF's technical support. With support of REACH, a United Nations inventory on nutrition actions in Myanmar has been completed and a set of joint advocacy and information products are under development to be available for the new Government.

The MoH's budget for nutrition continues to gradually increase, with double the funding in 2015–2016 compared with 2014–2015. As a result, UNICEF has been able to scale back its support for nutrition commodities, and invest resources in technical assistance. UNICEF and the MoH facilitated the first sub-national multi-stakeholder workshop on nutrition in Magway, a state with one of the highest child malnutrition rates. The two-day event involved more than 100 local authorities and partners from Health, Rural Development, Agriculture, Livestock and Social Welfare. The workshop resulted in a local plan to scale up nutrition specific and sensitive interventions. This process will be replicated next year to other states/regions and serve as a platform for multi-stakeholder collaboration under a decentralized SUN framework, to support implementation of relevant national plans for nutrition.

Given reforms in the MoH's structure in 2015, enforcement of key legislation, including BMS code and salt iodization, has been limited. Only recently in October, the Government designated an official body for monitoring and enforcing the National Order on Marketing of Formulated Food for Infant and Young Children, with clear division of roles and responsibilities between the Food and Drug Administration and the National Nutrition Centre. UNICEF supported the MoH and Ministry of Mines to strengthen salt iodization monitoring in markets, households and border areas. While most salt was found to be iodized, it was not adequately iodized. Changes in the salt industry (declining lucrativeness of salt production vis-a-vis increased salt importation) requires UNICEF to evaluate its support to universal salt iodization. In collaboration with EAPRO, an expert mission is planned in 2016 to support this process.

**OUTPUT 2** Increased national and sub-national capacity to provide equitable access to nutrition interventions that prevent and treat malnutrition among pregnancy and lactating women and children under 5.

**Analytical statement of progress:**

UNICEF supported the MoH to accelerate the update of guidelines, protocols and standardized job aids, including for supportive supervision and monitoring, for cIYCF and IMAM. Although

health workers are yet to be trained, the Training of Trainers for cIYCF has already been rolled out. The training curriculum is informed by gender roles and practices that inform young child feeding practices. Trainings at state/region and township levels are planned in early 2016, along with IMAM roll-out. Supplies, equipment and materials are procured, ready to support the first phase of cIYCF and IMAM, where 2,855 health workers (20 per cent in targeted states/regions) are planned to be reached in the first quarter of 2016.

UNICEF continued to support to the Government in maintaining high national coverage of bi-annual Vitamin A supplementation and deworming (94 per cent and 94.8 per cent, respectively) through procurement, micro-planning and community mobilization. However, limited disaggregated administrative data and low coverage in hard-to-reach and non-government controlled areas remains a challenge. In some hard-to-reach townships in Kachin, UNICEF has partnered with a local NGO and worked with local health authorities to integrate vitamin A supplementation and deworming with EPI outreach, which has so far reached 7,884 children (100 per cent in targeted areas) and will continue to expand to additional townships. Lessons learned from the 'EPI+' approach will inform scale-up of similar integrated approaches in other hard-to-reach areas, such as in Chin and Rakhine states. As cIYCF and IMAM programmes roll out next year, integrated IYCF support and nutrition screening could also be considered in EPI outreach to maximize coverage of essential health and nutrition services, especially in low-coverage, hard-to-reach areas.

UNICEF continued to support the Government in procurement of micronutrients to address supply gaps, including vitamin B1, iron folic acid and multiple micronutrient powders in all townships in the four high-burden targeted states of Chin, Kayin, Magway and Rakhine. From available HMIS data, coverage of adequate doses of vitamin B1 and iron folic acid supplementation among pregnant/lactating women is 74 per cent and 64 per cent, respectively. A total of 60,638 children 6–23 months old benefited from micronutrient powders this year in Kayin and Magway regions (attaining 50 per cent coverage), which is double the number of children reached last year. UNICEF also procured anthropometric equipment to cover 100 per cent of health facilities (2,158 in number) in four targeted states, which are prioritised for cIYCF and IMAM programme roll-out over the next two years.

**OUTPUT 3** Appropriate IYCF practices are adopted by more mothers/caregivers.

**Analytical statement of progress:**

Collaboration with the MoH and partners was strengthened in 2015 on IYCF advocacy and communication around the 'First 1,000' days. UNICEF supported the MoH to train, for the first time, 2,500 Basic Health Staff in Magway and Rakhine on interpersonal communication and counselling for effective behaviour change on nutrition, including IYCF and hygiene. Materials from updated cIYCF guidelines and job aids were used for hands-on practice. These staff are prioritized under the roll-out of cIYCF in early 2016. As a result of the training, the staff were able to reach around 440,000 caregivers of children under 5 (40 per cent of their catchment) with nutrition messages this year.

UNICEF supported the MoH to update the Baby-Friendly Hospital Initiative module and train 150 hospital managers and clinicians from 50 per cent of the largest tertiary hospitals in Myanmar. These hospitals are currently being assessed against the initiative's criteria. Training, assessment and certification of additional hospitals is planned with the MoH in 2016. As part of mainstreaming and integration, key criteria were integrated into the draft of the MoH's Quality Assurance Checklist for newborn care for all hospitals.

In partnership with Alive & Thrive and Save the Children, UNICEF facilitated sharing of findings on BMS code violations to national authorities, from media scans and field monitoring using the mobile app 'KoBo Collect'. It is expected that partner monitoring will inform action and decision-making of the new national designated body to monitor and enforce the BMS code.

Standardized, tailored communication materials on BMS and the code are under development with support from UNICEF. With Alive & Thrive, an advocacy brief on the 'Economic Cost of Not Breastfeeding study' in Myanmar was developed and disseminated. A communication assessment of existing nutrition-related strategies and materials for behaviour change on IYCF was conducted under the Alive & Thrive–UNICEF partnership this year, based on a desk review and stakeholder consultations. This is currently under review by stakeholders. The next step will be to support the MoH to develop a national communication strategy for IYCF involving all stakeholders based on gaps identified and recommendations from the assessment. UNICEF, through the SUN network, has reached out to the 'LEARN' consortium of NGO partners funded by the multi-donor fund 'LIFT', which has funding to conduct formative research on behaviour change for nutrition. Current discussions are ongoing about how LEARN could help address some of the research gaps identified under Alive & Thrive–UNICEF's communication review.

**OUTPUT 4** Preparedness and response for nutrition meet the core commitments for children in humanitarian action.

**Analytical statement of progress:**

UNICEF scaled up nutrition in humanitarian contexts while supporting mainstreaming of emergency preparedness and response in routine government nutrition programming in protracted conflict-affected areas. As agency lead of the nutrition cluster, UNICEF mobilized significant funds in 2015 for Humanitarian Response Plan (HRP) implementation, which outlines targets for the nutrition sector as a whole. Funding helped address gaps in management of moderate acute malnutrition and an increasing SAM caseload after adoption of WHO growth standards.

UNICEF achieved targets set in the HAC, which highlights UNICEF's contribution. For example, in 2015, a total of 9,443 children under 5 with SAM were treated in Rakhine (96 per cent of HRP target; 135 per cent of HAC target) with a cure rate of 80.7 per cent. Additionally, 11,836 pregnant and lactating women (65 per cent of HRP; >100 per cent of HAC) received IYCF counselling support, which represents a coverage of 53 per cent and 59 per cent in targeted townships in Rakhine and Kachin states, respectively.

More than 20,615 children under 5 (32 per cent of HRP; 92 per cent of HAC) and 10,034 pregnant and lactating women (55 per cent of HRP; >100 per cent of HAC) were reached with micronutrient supplements this year. Micronutrient supplementation coverage for women and children was 100 per cent and 77 per cent in targeted townships in Rakhine and Kachin states, respectively. These results show that while UNICEF has met its targets, and that the overall nutrition sector performance has been modest, especially in the context of freedom of movement restrictions for children and their families in Rakhine state.

Additional and existing partners need to expand coverage and scope of nutrition programming in humanitarian areas. To strengthen coherence among humanitarian partners, UNICEF coordinated development of a Humanitarian Partners' Nutrition Sector Guide and Advocacy Plan, which highlights consensus on technical, operational issues and priorities in humanitarian situations, while strengthening linkages to routine government services.

Increased government leadership in humanitarian action for nutrition was evident when the MoH

prioritized Rakhine for initial roll-out of national IMAM and cIYCF programmes, and in the MoH's rapid response to strengthen nutrition screening and micronutrient supplementation in the 21 worst flood-affected townships, which reached around 53,876 children and pregnant and lactating women (53 per cent coverage) with support from UNICEF. The MoH has also integrated nutrition cluster coordination into the Myanmar Nutrition Technical Network. Coordination job aids (e.g., templates, checklists, best practice guide) were developed for UNICEF field offices to support local health and food sector authorities to integrate nutrition into routine sector and humanitarian coordination in all states/regions.

UNICEF worked with United Nations agencies (FAO, WFP) and the Food Security and Livelihoods Cluster to monitor food and nutrition security situation post floods under the Crop and Food Security Assessment Mission. Findings will be complemented by UNICEF/MoH-supported SMART surveys in most vulnerable areas. These assessments will provide an entry point for Integrated Phase Classification in 2016 to support the Government in prioritizing humanitarian response.

**OUTCOME 2** Increased equitable access and use of quality high-impact maternal, newborn and child health (MNCH) services.

**Analytical statement of progress:**

Based on 2014 census data, released in May 2015, Myanmar has the highest infant and under-five mortality rates (62 and 72 per 1,000 live births, respectively) among the Member States of ASEAN. UNICEF's technical support to further analyse census data in 2015 contributed to Myanmar prioritizing and intensifying a programmatic focus at sub-national level. As a result, five states and regions making up the largest burden of mortality – notably Ayeyarwady, Magway, Mandalay, Sagaing and Shan – have been prioritized, along with townships in these states and regions. These areas have subsequently received extensive support for review of performance, programme planning, additional capacity-building interventions, introduction of innovative technologies to improve quality of care, and increased financial allocation.

Based on evidence from the 2014 census and the 2014 study on causes of under-five mortality, reiterating the need for greater focus on reducing newborn mortality, advocacy by UNICEF resulted in a momentum among technical experts to increase facility-based childbirth. While major national-level policy and programmatic actions aimed at increasing facility-based childbirth (currently estimated at just 30–40 per cent) have not yet materialized, UNICEF, along with other technical partners, will continue to support the MoH in moving forward in this direction in 2016. The restructuring of the MoH, and the challenges this had, has been one of the major constraints in moving forward the agenda of facility-based childbirth, in addition to non-availability of funds.

UNICEF's assistance has resulted in the MoH introducing a Child Death Surveillance and Response (CDSR) system providing more comprehensive and reliable information on child survival, and therefore effectively contributing to child mortality reductions in Myanmar. The national CDSR Technical Guide has been launched in 2015 for initial implementation in 30 townships in 2016.

In line with UNICEF's advocacy on universal health coverage, the Government of Myanmar continued to provide a minimal package of MNCH services without user fees. This is likely to have reduced out-of-pocket expenses by increasing budgetary allocation, including for procurement of MNCH commodities in 2015–2016. UNICEF advocacy also resulted in the Government including vaccine procurement in its 2016–2017 fiscal year budget, an initial step

towards enabling sustainable government financing of traditional vaccines, like Bacillus Calmette–Guérin (BCG). In collaboration with WHO, UNICEF provided assistance to the MoH on planning, supply and procurement, communication strategies, strengthening cold chain systems and training health staff. This resulted in 95 per cent coverage among children aged 9 months to 15 years (reaching a total of 13.2 million) for the measles and rubella campaign, which was conducted during the first quarter of 2015. High rates of coverage were achieved even in non-government controlled areas of Kachin and Shan States, by fostering partnerships between the MoH, NGOs and health authorities of non-state entities, facilitated by UNICEF.

Building on support provided to the MoH in 2015 for developing the communication strategy and plan of action for strengthening routine immunization and the Reaching Every Community strategy, UNICEF will support their implementation in 2016. This is expected to significantly increase equitable coverage of immunization.

**OUTPUT 1** Strengthened political commitment, accountability and national capacity to plan and budget for the scaling up of equity-based, high-impact MNCH services.

**Analytical statement of progress:**

In 2015, with technical support from UNICEF, the National Newborn and Child Health and Development Strategic Plan (2015–2018) was costed. This has increased opportunities to leverage additional funds for newborn and child health, from both the Government and donors. UNICEF's advocacy, jointly with WHO and UNFPA, contributed to the MoH developing an integrated RMNCAH+ strategic plan. Incorporating various existing vertical plans, the strategy will serve as a platform for the MoH, donors and partners to provide harmonized support for an integrated service delivery approach. Joint support from UNFPA, WHO and UNICEF also resulted in improved coordination of the MNCH Technical Strategic Group.

UNICEF's technical assistance for assessment, analysis and planning resulted in Myanmar developing an effective vaccine management improvement plan. This plan (2016–2018) will guide Myanmar to: increase its vaccine storage capacity to support current and new vaccines introduced; improve quality of vaccine storage; increase coverage by improving service delivery; reduce vaccine wastage; and mobilize resources.

Myanmar was able to increase its vaccine storage capacity by nearly four-fold, from 82,993 litres in 2014 to 312,399 litres in 2015, with support from UNICEF for mobilizing resources from GAVI and the Three Millennium Development Goal Fund, and procurement and installation of cold chain equipment. This was a result of the cold chain capacity and gap analysis and the cold chain equipment expansion plan developed in 2014, with support from UNICEF and WHO for the introduction of pneumococcal conjugate vaccine (PCV).

In partnership with John Snow International, UNICEF's support resulted in the MoH introducing a mobile health application as part of its overall health information management system to improve the quality of care provided by midwives for RMNCAH services. This has resulted in the MoH developing protocols for the mobile application and initiating the customization of the application. This support will be followed, in 2016, by introducing the application in a few townships before scaling to rest of the country based on evidence from the initial introduction. This mobile application will guide midwives to: provide quality interventions at point of care by using an algorithmic approach; remind service providers and supervisors to reduce loss to follow-up using in-app tools and web-based report generation; educate both service providers and clients to improve knowledge and change practices using in-app messages and multimedia

features; and collect and analyse real-time cohort data of clients to track and improve programme performance.

**OUTPUT 2** Increased national and sub-national capacity to provide equitable access to quality, high-impact MNCH services.

**Analytical statement of progress:**

MoH, with support of UNICEF and WHO, was able to vaccinate 95 per cent of children aged 9 months to 15 years against measles and rubella, through a nationwide campaign. Conducted in the first quarter of 2015, this was the first campaign introducing the rubella vaccine and the country's biggest ever immunization campaign, reaching more than 13.2 million children. The campaign was followed by introduction of measles rubella as part of routine immunization in May, replacing the previous dose of measles alone at 9 months. UNICEF and WHO provided support on planning, capacity building, procurement, supply, logistics, strengthening of cold chain, community mobilization, and resource mobilization for both the campaign and the introduction of measles rubella as part of routine immunization. From January to September 2015, based on interim analysis of data, 468,178 children younger than 1 year old (indicating a coverage of 68 per cent) have been immunized against measles/measles rubella as part of routine immunization. Final figures will become available in the first quarter of 2016.

Similar support from UNICEF and WHO resulted in the MoH adequately preparing for the introduction of the injectable inactivated polio vaccine (IPV), switch from trivalent to bivalent oral polio vaccine, and commencement of PCV. The planned introduction of PCV in 2016, in addition to the previously introduced haemophilus influenza component of pentavalent vaccine, is expected to have a significant impact on reducing under-five mortality due to pneumonia (currently estimated at nearly 12 per cent).

A notable challenge has been the low coverage for immunization in areas affected by conflict and communal violence. Though progress was made in some conflict-affected areas of Kachin (achieving a coverage of 62 per cent from January to September 2015 for three doses of pentavalent vaccine), coverage has been persistently low in some townships of Rakhine. This resulted in two cases of vaccine-derived polio virus type 2 being reported from Maungdaw Township in Rakhine. With support from UNICEF and WHO, MoH is implementing an outbreak response campaign (mop-up) to cover this and other townships in Rakhine and other states and regions with similar low coverage and susceptibility.

UNICEF's support for procurement and logistics resulted in supplies for maternal and child health interventions being available in the country to reach 127,000 pregnant women and newborns with clean delivery kits and 7.1 per cent chlorhexidine for clean cord care.

**OUTPUT 3** More mothers and/or caregivers adopt appropriate newborn and child health practices.

**Analytical statement of progress:**

The multi-channel communication strategy, developed and implemented by MoH with UNICEF support in 2015, was a key contributor to the measles rubella campaign's attainment of 95 per cent coverage among children aged 9 month to 15 years. A similar approach has been/will be followed, factoring in lessons learned from implementation, for introduction of IPV and PCV in December 2015 and early 2016, respectively.

MoH, with technical and financial support from UNICEF, standardized the communication

messages for various public health programmes, including child survival and development. This was done through a consultative process and disseminated among all stakeholders. The standardized messages to be used by all partners are expected to result in more harmonized communication, with a focus on synergy and maximum impact on behaviour change among communities and families.

For the first time, the MoH, with support from UNICEF, established technical working groups for C4D at sub-national levels in Rakhine and Kachin states. This is expected to foster identification and implementation of tailored, appropriate sub-national variations of national communication strategies. UNICEF will continue to provide support to ensure that this mechanism has an evidence-based and equity focus.

An evaluation of the Seven Things This Year initiative implemented in 2013–2015 was initiated by the MoH with support from UNICEF. Due to various reasons, like the general elections and delays in getting internal approvals within the MoH, it could not be completed as planned. The results, expected by mid-2016, will inform future policy and potential scale-up of this innovative peer support intervention.

In 2015, a decision from the MoH to introduce a short message service (SMS) gateway with support from UNICEF could not be implemented due to delay in negotiations with mobile network operators for free SMS. UNICEF will continue to support the MoH to establish this in 2016. If established, it will enable MoH to leverage expansion of mobile networks by delivering customized health-related messages through SMS to families and caregivers.

**OUTPUT 4** Preparedness and response for maternal and child health meet the Core Commitments for Children (CCC) in humanitarian action.

**Analytical statement of progress:**

With support from UNICEF, in partnership with local NGOs, the Myanmar Nursing and Midwifery Association, the MoH and health personnel of non-state actors in the humanitarian-affected areas of Kachin and Rakhine, 86,285 people had access to basic MNCH services, and 57,748 women and children were immunized with polio, measles, pentavalent and tetanus toxoid vaccines, from January to September 2015. Additionally, UNICEF's support in partnership with the Myanmar Health Assistant Association bolstered the Government-led response that resulted in 5,095 people, mostly women and children, receiving basic health services in flood-affected areas from August to November 2015.

While significant progress has been made in conflict-affected parts of Kachin (achieving a 62 per cent coverage for third dose of pentavalent vaccine from January to September 2015 and an 87 per cent coverage of measles rubella vaccination campaign) and Shan, challenges remain to access health services due to active conflict in some areas. These conflicts, though of small scale, hindered the development of long-term sustainable solutions by affecting the trust between the parties in conflict. Meanwhile, certain parts of Rakhine, such as Buthedaung and Maungdaw, have consistently had lower coverage rates. The outbreak of vaccine-derived polio virus type 2 this year is an indication of this low coverage. A mop-up campaign followed by a focus on intensifying routine immunization has subsequently been planned, starting from December 2015. UNICEF continues to provide technical and financial assistance in planning and implementing these initiatives both at national and sub-national levels. It is crucial that the MoH continues to focus on increasing access and providing services in these townships not only for routine immunization, but also for other MNCH services as well. UNICEF will continue to advocate for and prioritize these geographic areas with low coverage in 2016.

**OUTCOME 3** Water and excreta-related diseases in children under 5 are equitably reduced.

**Analytical statement of progress:**

The WHO/UNICEF Joint Monitoring Programme 2014 update indicates that Myanmar met the 2015 MDG targets for both water supply and sanitation, with access to improved water supply reported as 86 per cent nationwide and 77 per cent for sanitation, with open defecation at just 5 per cent. However, long-awaited data from the 2014 census, released in May 2015, paint a slightly less favourable picture – reporting that 19 per cent of rural households have no facilities of any description. There remain significant geographical and wealth disparities, especially in rural areas.

In response, in 2015, UNICEF continued to support the Government to improve the enabling environment and to strengthen the supply and demand for WASH services and practices in Myanmar. The WASH sector situation analysis – completed in 2014 – was officially endorsed by the MoH in 2015. Based on one of its key recommendations, UNICEF has supported the Government to develop Myanmar’s first Rural WASH Strategy and Investment Plan, which is expected to contribute towards increased budget allocation for reaching the goal on ‘sanitation and water for all by 2030’. Other policy-related achievements include a review of the Community-Led Total Sanitation (CLTS) approach and development of National Standards for WinS.

In addition, UNICEF worked with key government partners such as the Department of Rural Development (DRD), the MoH and the MoE to support evidence generation and testing of new approaches for effective and scalable service delivery in a sustainable manner. Introduction and implementation of community-managed household water metering systems in 112 rural villages has not only provided access to safe water supply to rural communities but also generated evidence on new ways of thinking of rural water supply schemes – an approach subsequently adopted by DRD for sustaining water supply schemes in rural areas.

As part of the Rural WASH Strategy and Investment Plan development, a national baseline exercise on WinS, WASH in Health Facilities and rural water supply systems was initiated with technical support from UNICEF. This will provide the most comprehensive WinS database in the country, covering approximately 40,000 schools. Establishment of Thant Shin Star (Three Star) Clubs and promotion of group hand-washing in 220 schools, with emphasis on capacity development of school teachers, is making slower progress than expected as a means of systemically strengthening WinS in 2015. Nevertheless, based on lessons cumulatively learned over the past two years, UNICEF is working with the MoE, MoH and other key government partners to embed the TSS approach as a central theme in the National Standards and guidebook for WinS. This is expected to be completed in 2016.

As part of behavioural change communication, good hygiene behaviours such as stopping open defecation practice, hand-washing with soap at critical times, and drinking safe water were promoted in rural communities and schools. UNICEF has worked with the MoH to strengthen Rural Health Centres’ institutional and human resource capacity so that they will become hubs for sanitation and hygiene promotion at the local level.

UNICEF continued to provide WASH cluster leadership at national and sub-national levels. Even with limited access to non-government controlled areas in Kachin and underserved areas in Rakhine, key activities were carried out through local partners. The WASH cluster continued to support WASH coordination in protracted emergencies in Rakhine and Kachin, reaching

255,805 and 85,861 beneficiaries, respectively. In 2015, UNICEF reached 21 per cent (52,538 people) of the overall population reached in Rakhine and 40 per cent (34,356 people) in Kachin. Significant immediate response was also provided to 173,701 flood- and landslide-affected people with life-saving WASH supplies and services.

**OUTPUT 1** Evidence-informed policies, standards and guidelines are developed and implemented to build and sustain hygienic and healthy living conditions for women and children in Myanmar.

**Analytical statement of progress:**

In 2015, the WASH sector situation analysis completed in 2014 was approved and endorsed for dissemination by the MoH. Based on recommendations to reduce the inequities experienced by Myanmar's rural majority population, development of the country's first-ever Rural WASH Strategy and Investment Plan has started under the leadership of a multi-sectoral task force chaired by DRD. Comprised of representatives from DRD, Department of Basic Education (DBE), Department of Public Health (DPH) and other relevant line ministries, the task force provides oversight and guidance to the consultative strategy development process. Covering 2016–2030 and aligned with the Sustainable Development Goals (SDGs), the strategy and investment plan include rural water and sanitation, WinS and WASH in Health Facilities. In 2015, UNICEF provided technical and financial assistance, while ensuring broad national and sub-national stakeholder participation. In tandem, National Standards (minimum requirements) for WinS are under development. Under the leadership of DBE, a Technical Working Group with representatives from DBE, DPH, DRD and other relevant line ministries and NGOs has been formed to provide guidance and support to the consultants.

With the objective of reviewing CLTS programmes implemented by UNICEF and WASH partners, and identifying lessons learned and best practices, a CLTS review was conducted in 2015. It is expected that the review recommendations will help inform evidence-based and more strategically tailored scaling up of the CLTS programme, while positioning it in the wider WASH sector response. This is informing the rural WASH strategy development. At sub-national level, evidence-based township-level WASH plans in all five townships of Kayin State are being developed. WASH data collection and analysis, led by government counterparts with the involvement of non-state actors, is completed, and the report is being finalized.

**OUTPUT 2** Targeted rural communities in the Dry Zone, conflict-affected children and women in Mon and Kayin states practice key hygienic behaviours (consistent use of toilet – stop open defecation practice), hand-washing with soap at critical times, and drinking safe water).

**Analytical statement of progress:**

In 2015, the CLTS programme was extended to an additional 337 villages in 8 townships of 6 states and regions, covering 263,356 populations from 50,270 households. Out of 337 triggered villages, 150 were verified as Open Defecation Free communities, with 275 villages yet to be verified. UNICEF, together with its implementing partners, was able to reach and implement sanitation and hygiene programmes in non-government controlled areas in close collaboration with non-state actors and local authorities, yielding peace as well as WASH-related dividends. Implementation, using the CLTS approach in Kayin state under the Peacebuilding Fund project, has contributed to healthier environments through the elimination of open defecation while strengthening engagement between state and non-state actors.

The Than Shin Star (Three Star) approach initiated in 2015 suffered some setbacks due to restructuring of the MoE and MoH that delayed implementation. Nevertheless, in 2015, just over

380 teachers received training and 6,389 students became members of Than Shin Star clubs to practice hand washing and become agents of change for hygiene promotion. With the collaboration of MoE, awareness-raising WinS IEC materials (vinyl posters, DVDs, stickers and hygiene promotion education kits) were distributed to 8,589 primary schools in 70 townships under 15 states and regions, as well as to 280 schools in non-government controlled areas. Applying lessons cumulatively learned over the past two years, UNICEF is working with the MoE, MoH and other key government partners to embed the TSS approach in the National Standards and guidebook for WinS. This is expected to be completed in 2016.

While the behavioural change and impact assessment of this initiative is being carried out, Global Handwashing Day was celebrated in different states and regions, including schools in October and November 2015, reaching more than 100,000 children. Through community-based programmes, hand-washing promotion campaigns and water safety planning, good hygiene messages such as stopping open defecation practice, hand-washing with soap at critical times, and drinking safe water are being progressively promoted.

**OUTPUT 3** Communities, schools and health centres have access to sufficient safe water in targeted rural communities in the Dry Zone, as do conflict-affected children and women in Mon and Kayin states.

**Analytical statement of progress:**

Under the WinS programme, UNICEF reached 222 schools (67,947 children) in 2015 with WASH activities across four states and regions as a means of generating evidence to inform policy so that change can be achieved at scale. After continued advocacy, UNICEF supported the MoE to put a multi-sectoral National Task Force in place for development of National Standards for WinS.

In September, the MoH, MoE and UNICEF staff attended the regional WinS International Learning Event hosted in Sri Lanka, which reinvigorated inter-ministry relations, especially vital after the restructuring affecting both ministries in earlier 2015. Public pledges to further develop standards, technical manuals and improved collaboration are expected to accelerate commitments to joint programming between the two key ministries.

As part of the Rural WASH strategy development, a national WinS baseline exercise has been initiated by MoE with technical support from UNICEF. The MoE received data from all schools, and data entry and analysis are being done. This will provide the most comprehensive WinS database in the country, covering approximately 40,000 schools.

Limited progress continued to be made on WASH in health centres, due to funding limitations and MoH structural reform. Through a project funded by the United Kingdom's Department for International Development, 12,250 people from 112 communities built household water metering systems in which community contribution ranges from 40 to 55 per cent of total cost. This approach has been adopted as a successful model for Myanmar and key government counterparts and NGO partners have started replicating it. Some 70 Water User Committees were trained on book keeping, water meter reading, meeting minute writing, etc. With UNICEF support, DRD built 27 water supply systems, benefiting 19,853 people from 15 townships. Moreover, 112 DRD engineers, community facilitators and technical facilitators were trained for testing of 8 out of 16 priority parameters of the National Drinking Water Quality Standard. A total of 47 trainees from DRD, DPH, Food and Drug Administrative of Government Departments and NGO representatives were trained for testing microbiological contamination, measuring of residual chlorine, E.C and pH and chlorination methods in Kachin State.

UNICEF provided township-level WASH planning training to 32 DRD, DBE, DPH and Department of Planning staff. Systematic data collection and analysis by using appropriate formats and software such as QGIS are the key aspects this training. Based on this experience, UNICEF will support the Government to replicate similar planning processes in all townships in Myanmar.

**OUTPUT 4** Preparedness and response for sufficient safe water, sanitation facilities and improved hygiene practices meet the core commitments of children and women in humanitarian situations.

**Analytical statement of progress:**

In 2015, the UNICEF-led WASH cluster continued to support WASH coordination of the protracted emergencies in Rakhine and Kachin, reaching 255,805 and 85,861 beneficiaries, respectively. Specifically, in partnership with 15 international and local NGOs, UNICEF reached 21 per cent (52,538 people) of the overall population in Rakhine and 40 per cent (34,356 people) in Kachin. In this regard, UNICEF continues to fulfil its cluster role as provider of last resort and support WASH partners in some of the hardest-to-reach camps for internally displaced people.

Primary focus has gone into ensuring operation and maintenance, upgrading and replacing existing emergency WASH facilities constructed during earlier stages of camps for internally displaced people, and capacity development of camp management committees to take more responsibility for ongoing maintenance.

UNICEF supported the cluster to build capacity of local partners in Kachin through deployment of international and national capacity-building consultants who worked to improve monitoring of camp operating costs, harmonize KAP surveys and strengthen partner capacities in service delivery.

UNICEF maintained WASH cluster leadership at the national level and within Kachin and Rakhine states, where regular meetings, communication and capacity development opportunities were organized. Monthly reports and situation analyses were prepared and distributed to cluster partners to guide interventions. In Rakhine, the WASH cluster initiated a gender equity review of WASH programmes and launched a study to assess the effectiveness of ceramic water filters that have been widely distributed as part of the response.

Widespread flooding and landslides between July and September led to a state of emergency being declared in parts of the country. UNICEF, together with partners, was able to provide an immediate, substantial response to 173,701 people with life-saving WASH supplies and services. UNICEF additionally supported the WASH section of the Post-Disaster Needs Assessment (Post Floods and Landslide Needs Assessment), which is expected to leverage resources to advance the recovery stage, while providing an invaluable capacity development opportunity to inform emergency preparedness.

**OUTCOME 4** Increased access to HIV prevention, treatment and care services for key adolescent populations, pregnant women and children living with HIV.

**OUTPUT 1** Strengthened political commitment, policy and data management systems to reduce new HIV infection in children, improve quality treatment for mothers and children, and reduce stigma and discrimination.

**Analytical statement of progress:**

UNICEF's advocacy and technical support in 2015 resulted in the MoH's increasing focus on HIV testing among adolescents. A multipronged approach was adopted, which facilitated existing HIV testing centres to test more adolescent key populations and introduced innovative testing strategies in mass gatherings like festivals and other events likely to attract adolescent girls, boys and transgender people in key populations. In addition to HIV testing, effort was also provided to increase antiretroviral therapy (ART) access to HIV-positive adolescents by strengthening referral mechanisms.

Data on adolescent key populations remains limited, and more so on sex disaggregation. As a strategy to address this, the MoH, with support from UNICEF and other partners, developed a reporting tool that will collect age- and sex-disaggregated data on HIV testing. The tool will provide information on adolescent HIV testing and is expected to be rolled out at scale in early 2016. While this will not address all data gaps related to HIV and adolescents, it is a good start. Efforts are under way, with support from UNICEF, to digitalize reporting (including for PMTCT of HIV) in 2016, and ensure that all data are electronically interfaced with the District Health Information System 2, a web-based platform of the HMIS. The incorporation of key PMTCT indicators in the HMIS is a key expected result in 2016.

With a focus on improving quality of HIV care and data management for ART, UNICEF's partnership with the Clinton Health Access Initiative resulted in a web-based patient management system being developed that will be field-tested in four ART centres. Based on experience from the field testing, the system will be re-customized and scaled up to all ART centres. It is expected to provide quality interventions at point of care by enabling service providers to use an algorithmic approach for HIV care; remind service providers and their supervisors of follow-up visits and reduce loss to follow-up using in-app tools and web-based report generation; and collect and analyse real-time cohort data to track and improve programme performance, generate evidence for planning, and monitor quality of care and generate evidence to improve it.

**OUTPUT 2** Capacities are strengthened and communities are mobilized to increase access for HIV prevention, treatment and care services for adolescent key populations, pregnant women and children living with HIV.

**Analytical statement of progress:**

As lead technical agency on PMTCT supporting the MoH, UNICEF contributed to the following results: Between January and September 2015, 79 per cent of pregnant women attending antenatal care in facilities received HIV counselling and testing as part of services for PMTCT (583,048 pregnant women tested), compared with 65 per cent in 2014 (500,432 pregnant women tested). During the same period, 97 per cent of HIV-positive pregnant women were provided with ART, which is consistent with the proportion in 2014 (reportedly 100 per cent). The testing of HIV-exposed infants using polymerase chain reaction technology increased from 17 per cent in 2014 to 37 per cent in 2015 (January to September). Finally, 54 per cent and 11 per cent of male partners of HIV-positive and HIV-negative pregnant women were HIV tested, respectively, compared with 49 per cent and 5 per cent in 2014.

Despite significant progress to test more HIV-exposed infants in 2015, the gap in this component of the continuum of care remains large. UNICEF, in partnership with the Clinton Health Access Initiative, will therefore continue to support the MoH in 2016 to improve this coverage. In 2015, this partnership resulted in establishing a laboratory information management system that improved the quality of data on testing of HIV-exposed infants and

reduced the time in delivering test results to care providers and hence, caregivers. The introduction of a SMS printer in a few high-volume sites has also helped to reduce the time required to deliver reports to service providers. Despite these efforts, the time taken to deliver the reports is still unacceptably high. Additional initiatives like decentralizing HIV polymerase chain reaction testing to an additional site in northern Myanmar are being explored and will be prioritized in 2016. In addition to the above interventions, establishment of expert clients in high-volume sites will continue to be used to reduce loss to follow-up.

In partnership with the Kachin Baptist Association, UNICEF support resulted in 24 HIV-positive pregnant women from non-government controlled areas of Kachin who were identified, given ART for PMTCT, and are under active follow-up. This partnership, for the first time in many years after the onset of conflict in Kachin, resulted in volunteers from non-government controlled areas being trained by the MoH and reporting back on performance. UNICEF will continue to focus on increasing access in non-government controlled areas that have a high prevalence of HIV, through this partnership as well as exploring other long-term sustainable solutions.

**OUTCOME 5** Increased number and proportion of children accessing and completing quality basic education in targeted townships.

**Analytical statement of progress:**

In 2015, the Basic Education and Gender Equality programme placed greater focus and advocacy on core education activities as a ‘whole state approach’, targeting all townships in selected disadvantaged states. This required extensive discussion with the MoE and with key development partners over the course of the year, as well as the development of a 2016–2017 Multi-Year Work Plan, which was signed in October 2015.

The US\$84 million Quality Basic Education Programme (QBEP), supported by the Multi Donor Education Fund comprising Australia, Denmark, the European Union, Norway and the United Kingdom, was extended until June 2016, to align with the Government reform process, which includes the development of a five-year National Education Strategic Plan (NESP) beginning in June 2016. In 2015, QBEP continued to support the Government to improve access to quality school readiness and primary-level education for all children in Myanmar by ensuring that national education policies and plans are inclusive, informed and actionable; and delivering quality education services to children in 34 core townships throughout the country.

The Government of Myanmar is undergoing a process of education sector reform, which includes a review of the national education system and development of new legislation, policies and sector plans. This included a restructure of the MoE into eight departments in April 2015. To support this process, a major Capacity Gap Analysis process was initiated by UNICEF in October 2015, which will feed into the national Human Resource Development Plan. UNICEF is also supporting seven major education studies and evaluations in 2015 to strengthen the evidence base for policy reform and to support the NESP finalization.

UNICEF contributed to enhance social cohesion through the PBEA initiative. PBEA worked at state level to bridge non-state schools being operated by ethnic armed groups with formal government school system through joint head teach and teacher training, which was expanded to include provision of school grants through Township Education Offices to non-state schools as a successful pilot in 2015. At the policy level, language of instruction and its links to ethnic identity remain key drivers of conflict, and the development of state- and national-level multilingual education policies has received additional momentum with the signing of the NCA in October 2015.

Provision of humanitarian assistance for Education in Emergencies included co-leading the development of the Post Floods and Landslide Needs Assessment in response to the floods and landslides which affected 12 of 14 states/regions in June 2015. An estimated 40,000 children benefited from UNICEF's initial education support. In response to civil strife and sectarian conflict, collaboration with education partners increased access to primary/pre-primary learning opportunities in emergencies. Some 34,000 primary and pre-primary school-age children in conflict-affected setting (24,000 in Rakhine and 10,000 in Kachin – 50 per cent girls) benefited from the provision of Temporary Learning Spaces (TLS), supplies and capacity building of volunteer teachers/parents. An additional 7,300 adolescents (5,000 in Rakhine and 2,300 in Kachin) received similar support.

**OUTPUT 1** Expansion of coverage of quality ECD services and strengthening systems.

**Analytical statement of progress:**

The status of indicators during the reporting period shows reasonable progress. In 2015, 1,904 children 0–5 year olds (821 boys, 1,083 girls) in targeted townships benefited from access to facility-based ECD services; the percentage of schools in targeted townships that have ECD facilities for children 3–5 years old has increased from 17 per cent in 2014 to 37.5 per cent in 2015; and 4.4 per cent of school-based ECD facilities now meet minimum quality standards. Additionally, significant demand for ECD has been created among the communities, resulting in an increase in preschools that have been set up by communities with minimal external support. Small grants to school-based preschools are being matched by local resources and labour, resulting in 600 preschools being established in 2015.

In 2015, the MoE initiated a number of activities with UNICEF support, including the preparation of a new curriculum for kindergarten for 5-year-olds to be introduced in every primary school nationally (45,000 in total) in preparation for a national roll-out next year in 2016. In partnership with the MoE and 65 language and cultural committees, kindergarten teacher guides were developed in 65 ethnic languages in preparation for the national roll-out in 2016. The Ministry of Social Welfare Relief and Resettlement is initiating the development of National Early Childhood Intervention System to identify children with developmental delays, disabilities and chronic illnesses early in their lives and to provide family based support. Early Peace Education is introduced to families through parenting education programmes and through peace education centres established in three conflict-affected areas.

**OUTPUT 2** Enhanced coverage, quality and relevance of second chance alternative education.

**Analytical statement of progress:**

The status of indicators during the reporting period shows significant progress. For example, 10,422 out-of-school children aged 10–14 were enrolled in non-formal primary education (NFPE) across 94 townships in 2015 (5,440 in Level 1 and 4,982 in Level 2). Additionally, in 2015, a total of 5,655 children (53 per cent female) 10–17 years old in 11 targeted townships are attending the Extended and Continuous Education and Learning (EXCEL) circles in remote communities. This represents an increase from 11,000 in 2012 to 50,072 in 2015. According to the latest available figures, 94.5 per cent of reached out-of-schools adolescents completed EXCEL in targeted townships.

NFPE is recognized among senior MoE officials as a viable alternative delivery system for primary education. The Basic Education law, which was submitted to Parliament in 2015, has a section on NFPE, and efforts started to draft the National NFPE Policy to guide implementation,

accreditation and the role of civil society and private-sector providers. Following MoE approval of the adaptation of accredited NFPE materials into three local languages, UNICEF has been working to develop these materials throughout 2015 and expects to finish in early 2016. A study on the process, effectiveness and causes for drop-out of NFPE activities in five selected townships commenced in early October 2015. A reference group comprising education personnel from DBE, DMER, MLRC, Montrose and UNICEF was formed to ensure the quality assurance of the study as well as to provide feedback and advice on the findings.

Increased collaboration and cooperation between stakeholders – notably state and regional authorities, DBEs, NGO/community-based organizations (CBOs) and private business sectors – have resulted in greater demand for NFPE. A preliminary discussion was held with the MoE, the United Nations Educational, Scientific and Cultural Organization and NGOs, and an agreement was reached for the pilot testing of Non-Formal Middle School Education in October 2015.

While EXCEL is downsizing under the QBEP, an increasing number of civil society organizations (CSOs)/NGO partners within other sectors, including Child Protection, are implementing the EXCEL life skills programme to address the education needs of 10–17-year-olds in conflict-affected areas. A consultation was carried out with the four NFPE partners in October and November 2015, and agreement was reached for the exploration of targeting NFPE centres in five states in Chin, Kachin, Kayah, Mon and Rakhine for 2016–2017.

**OUTPUT 3** Improved quality teaching and learning practices in basic education in targeted townships in government and monastic schools and in both mono-grade and multi-grade schools.

**Analytical statement of progress:**

The status of indicators during the reporting period shows significant progress and being on-track to achieving targets. For example, an additional 6,383 teachers received face-to-face training and 7,664 received in-service training in 2015; more than 188,000 students have received textbooks and essential learning materials; and 677 teachers have been trained to implement a secondary life skills curriculum.

In 2015, upstream policy engagement by UNICEF to establish national teacher and head teacher competencies has been a breakthrough. Without clear competencies for teachers and line staff of the ministry, it is difficult to establish a unified teacher training system. UNICEF support to teacher training reform has resulted in School-Based In-Service Teacher Education (SITE) being viewed as a potential framework for delivering accredited in-service training to teachers, leading to their certification. Measuring impact of training on classroom practice is being monitored through a very innovative approach and an evaluation of SITE will be completed in early 2016. SITE activities for 2015 cohort substantially improved based on the review done in February 2015. The head teacher training and its Training of Trainers sessions were extensively revised to better prepare head teachers in taking instructional leader and mentor roles at school-level SITE activities. SITE is being considered as a viable option to provide continuous professional development to all primary school teachers nationally.

The combined Language Enrichment Programme (LEP) and child-friendly school (CFS) Refresher face-to-face was introduced to 4,180 teachers from 23 target townships in October 2015, and teachers from 6 townships from Rakhine State will receive the training in December 2015. The workbooks introduced under LEP have been continued, and provide an excellent bridge for ethnic minority children in early grades to master Myanmar language literacy. The LEP/CFS training will also be independently reviewed in early 2016.

While the distribution of supplies is not tracked on a gender-disaggregated basis, female teachers are receiving training on secondary life skills on average at a rate of nearly 7:1 compared with male teachers. This is reflective of the demographics and proportion of female/male teachers and also the fact that female teachers are more likely to teach soft subjects, such as life skills, at the secondary level. With the CFS/LEP training, lessons on gender sensitivity and gender equality in the classroom have also been developed and delivered to teachers.

**OUTPUT 4** Enhanced planning, management, monitoring and evaluation and mentoring capacity of key education actors at all levels.

**Analytical statement of progress:**

The status of indicators during the reporting period are mostly on-track to achieving targets. In 2015, the number of Township Education Improvement Plans (TEIP) developed has reached its target of 34 townships. Engaging state/regional-level education officers in the TEIP process has resulted in the increased interest of TEIP at state/regional level. TEIP evaluation has been started and the final report is expected in February 2016. The use of gender-disaggregated data for analysis has been emphasized within the TEIP process.

Experiences gained from UNICEF's previous support providing school grants, based upon School Self Assessments and School Improvement Plans, has guided the new national School Grants programme supported by the World Bank. In 2015, UNICEF initiated a new school grant system for non-state schools, with agreement on all sides for the MoE to distribute the funds to non-state head teachers following the same principles and procedures as of government schools. This has been possible due to a conflict-sensitive approach to improve the quality of schools in non-government controlled areas by building trust in the MoE's national system.

Support to school-based management – including head teacher training and Parent Teacher Association orientations – continued throughout 2015, resulting in 2,203 head teachers being trained. As part of the transition strategy, all government and monastic schools in QBEP townships completed the new training by mid-2015. Support for Parent Teacher Association orientations have included emphasis on gender balance on school management committee members and on the importance of education for both boys and girls.

As a result of technical support provided in 2015, the re-written TEMIS software can now successfully produce analytic reports. Up to now, the data of last three years was entered for 15 townships. A new web-based Education Management Information System (EMIS) is planned to be implemented by the MoE in 2016. A new module with maps is to be added to the new EMIS when the Myanmar Information Management Unit completes the school mapping (GPS data). EMIS will be integrated into TEIP workshops in 2016.

**OUTPUT 5** Education emergency preparedness and response are implemented in accordance with the CCCs.

**Analytical statement of progress:**

In 2015, UNICEF, with partners, continued to support the MoE to provide education to emergency-affected children. Advocacy for the inclusion of TLS in camps for internally displaced persons in Rakhine State resulted in the MoE taking important measures such as the inclusion of children in such camps in the Government-led end-of year exam and receipt of education certificates for children who passed. In Kachin State, UNICEF, in collaboration with local NGO

partners, played a major role in providing humanitarian assistance to displaced populations in conflict-affected and hard-to-reach areas.

To enhance sector coordination, UNICEF continued to co-lead the Education in Emergencies sector group with Save the Children, and to provide strategic guidance and support harmonization among partners. Key results achieved in 2015 include the implementation of an education-focused conflict analysis, conflict-sensitivity review, a study on inclusiveness of TLS, and an education sector assessment in selected townships in Rakhine State. In Kachin, partners trained on sector coordination and assessments now meet quarterly to discuss issues and concerns.

In Rakhine, UNICEF and its partners – Save the Children, Plan International and Lutheran World Federation – continued to fill gaps in the delivery of education in Sittwe, Pauktaw, Minbya and Mrauk U townships, reaching around 30,000 primary school-age children (13,400 girls) in camps/communities for internally displaced people, host communities, and surrounding villages. In Kachin, more than 7,100 (3,400 girls) children continue to access education in camps for internally displaced people and conflict-affected communities, and benefit from the provision of teaching learning supplies, with support of UNICEF and Kachin Baptist Convention/Karuna Mission Social Solidarity.

In Rakhine, an additional 3,400 adolescents (1,300 girls) were reached with the construction of non-formal TLS, provision of essential learning supplies, recruitment and training of volunteer teachers/community facilitators, and training of school committee/PFA members. In conflict-affected areas of Kachin, UNICEF and partners extended support to around 3,000 students (1,300 girls) at post-primary level, with focus on strengthening volunteer teacher training on child rights, gender equality, inclusion, and life-skills education, as well as parental education through mobilization of school committees. Rakhine is affected by low girls' enrolment across the state, and emphasis is placed in camps for internally displaced people to have all girls enrolled in school through camp-wide advocacy campaigns.

In the aftermath of the floods and landslides that hit Myanmar in mid-2015, UNICEF, with partners, assisted emergency-affected children to return to schools through the provision of about 24,600 pre-positioned essential learning supplies to the most heavily affected areas and support to the repair of TLS in areas of Rakhine State. UNICEF, closely working with partners and the MoE, supported the provision of 46 temporary school tents, construction of two TLS, and rehabilitation of 36 schools, and in the recovery phase UNICEF co-led the development of the Post Floods and Landslide Needs Assessment with the Japanese International Cooperation Agency. In this process, mainstreaming of DRR and comprehensive school safety in the education sector became areas of key focus.

**OUTCOME 6** Children in need of support, care and protection are identified by and have access to public social welfare systems.

**Analytical statement of progress:**

Increasing the numbers of children covered by and accessing public social welfare systems requires improved legislation and policies on child protection and social welfare; increased government investments in social welfare services and social work; and improved coordination and synergies across government ministries and departments concerned with the welfare of children, as well as with the growing number of NGOs and civil society organization providing services. In addition, continued understanding of the social norms and practices that drive violence and exploitation of children need greater understanding and integration across all

efforts. In 2015, the Government deployed, for the first time in its history, full-time social work case managers into the Department of Social Welfare at decentralized level. UNICEF provided intense support to this deployment, assisting in the development of tools, forms and guidance to structure the work. UNICEF also supported four NGOs to back-stop these state social workers in most of the locations where they have been deployed.

The Department of Social Welfare only has a presence in 27 locations across the country. To achieve full coverage, it needs to have a presence in 330 locations. Despite this limited coverage, the initial result is positive, with more than 360,000 people engaged to understand how to identify and report violence against children, and nearly 1,000 cases of violence against children being managed through this new system of referral and response. This coverage of 27 locations has increased the overall outcome coverage indicator to 2,198,015, which is mostly attributable to the total number of children in those locations who now have access to social work case management.

Many gaps remain, and a focus on prevention needs strengthening. Improved coordination with police and judiciary, as well as education and health, are critical to increase the effectiveness of the work. Continued scale-up of the social work case management approach will require intensive work with the Government to increase financial allocations to social welfare. Work with the police and judiciary alternative care continues to be a priority for UNICEF. In addition to continuing ongoing trainings and capacity building for police and judges, UNICEF secured agreement to bring these streams of work more closely together with the social welfare case management system, and initiated trainings of social workers and police at decentralized level.

The Child Law went through a national consultation with the Government and civil society, improving the draft significantly. It will now make its way to Parliament in early 2016 for adoption. New areas of work were agreed with the police and judiciary to revamp their internal trainings to be in line with the new Child Law once adopted. In the absence of adequate oversight to institutional care, as well as the absence of family based formal alternatives, the proliferation of orphanages remains a concern. UNICEF worked with the broad range of partners to roll out awareness-raising activities through hotels, tour guide associations and airlines. A new partnership was finalized with the Government and an NGO partner to initiate foster care for the first time in the country.

As Co-Chair of the Country Task Force on Monitoring and Reporting, UNICEF continued to lead the collaboration and monitoring with the Government on the Joint Action Plan. Some 146 children were released from the Armed Forces in 2015 and reintegrated with UNICEF support, constituting 20 per cent of all releases since the signing of the Action Plan in June 2012. UNICEF also facilitated a high-level visit of the Special Representative of the Secretary-General for Children and Armed Conflict in 2015, opening up space for further acceleration of the Action Plan as well as engagement with listed non-state armed groups. Action Plans are now being developed (or are under discussion) with KNPP/KA, KNU and KIA.

UNICEF's humanitarian work in response to Cyclone Komen resulted in more than 40,000 children reached with psychosocial support. This emergency response (led by the Government) in part explains the high numbers of children reached with social welfare services in 2015. UNICEF was given the overall protection lead in four of the five disaster zones by UNHCR and worked with the Department of Social Welfare, which deployed social work case managers temporarily into these areas to coordinate the response. UNICEF's support to the ongoing humanitarian response in Kachin and Rakhine expanded in 2015, reaching more children with critical protection services, and increasing presence into northern Rakhine to provide assistance

to children affected by 'out-migration' and to better prevent protection violations in this area with discriminatory freedom of movement restrictions. This included the development and dissemination of safe migration and anti-trafficking materials with the Police Anti-Trafficking Task Force.

UNICEF scaled up its focus on adolescent engagement in 2015, linking this engagement to child protection and innovation. A partnership with a group of young innovators in the south-east was formed and will aim to strengthen collaboration between social workers and young people in their communities. A large initiative with Action Aid to engage adolescents in life skills and civic engagement, coupled with UNICEF's increased focus on reaching adolescents affected by conflict and displacement, is building a large network of young people who can increasingly speak out around issues that impact them, including protection.

**OUTPUT 1** Strengthened policy and programmatic decisions on alternative care for children.

**Analytical statement of progress:**

This past year was a year of continued advocacy on the issue of alternative care for children, positioning new interventions on family based care alternatives with the Government and key partners. Building on 2014 results, work accelerated around preventing orphanage tourism – a key issue identified during UNICEF's mid-term review in 2013 and at the national consultation on prevention of family separation to prevent the increasing numbers of children in institutional care. A core constituency continued to coalesce in 2015, including the Ministry of Hotels and Tourism, the Department of Social Welfare (DSW), and the Myanmar Tourism Federation. More than 50,000 branded materials on the prevention of orphanage tourism were distributed through hotels, tour operators, tour guides, and at key tourist sites, and key messages were also printed in the in-flight magazines of two domestic airlines. Awareness-raising activities reached more than 250 travel and tourism professionals, including the Myanmar Tour Guides Association.

The first initiative on alternatives to institutional care was crafted with the Government and key NGO partners, and will include formal foster care and supported kinship care, the first time this will be done in the country. The Child Law was finalized, and will be submitted to Parliament in 2016 for further discussion and adoption. It contains the necessary legal framework for foster care, supported kinship care, and improved domestic adoption procedures.

In the coming year, UNICEF will support the Government to develop a comprehensive study on institutional care. In addition, increased advocacy with the Government to develop family based alternatives will be undertaken, along with the pilot on foster care and supported kinship care. Increased engagement with the public on the issue, both domestic and international tourists, will also continue.

**OUTPUT 2** Increased social welfare system capacity to respond to child protection cases.

**Analytical statement of progress:**

The work continued to accelerate in 2015 with significant UNICEF advocacy and technical support. In May and June, 78 DSW case managers completed a three-week comprehensive training course in case management, developed in 2014. In July 2015, in all 27 DSW offices across the country (15 state and regional and 12 district offices), two or three full-time social work case managers were deployed by DSW. This is the first time in Myanmar's history that statutory social workers have been deployed by the Government. Their salaries are paid for with existing DSW resources, with UNICEF supporting travel and communication costs.

Across all 27 townships, UNICEF supported the Myanmar Red Cross Society to raise awareness of more than 367,000 people about the new social work case management system. In 19 of these townships UNICEF supported NGO partners to provide support and coordinate with the Government through the training and deployment of 71 NGO social workers. Standard Operating Procedures detailing the roles, responsibilities and work-flows of the social work case management system were finalized, adopted and disseminated by the Government to township offices; case management forms to track case responses and outcomes are adopted and being used, and are harmonized across the Government and NGOs; and an end-user satisfaction survey is being used to track the performance of the social workers and perceptions of families and communities about the support. In the six months since the system was launched, an average of 50 new cases per month are being referred that are being actively followed up by the social workers.

During Cyclone Komen, which affected 1.6 million people, the DSW deployed a cadre of trained social work case managers to flood locations in order to coordinate a protection response, a strong signal that these case managers are valued as front-line responders. Work to continue building social work knowledge and capacity in Myanmar continued through support to the Yangon University Post-Graduate Diploma in Social Work; discussions have commenced with the University and DSW on revising the existing curricula with the aim to make it more practical and applicable to Myanmar's evolving social work context. A number of participants in all Case Management awareness-raising sessions with communities, CBOs, CSOs, as well as recruiting of implementing partners' staffs are in line with the gender equality perspective.

**OUTPUT 3** Strengthened legislative and institutional capacity to provide adequate care and protection to children in contact with the law.

#### **Analytical statement of progress:**

This past year saw accelerated action on the re-drafting of the national Child Law. The full draft was finalized by the Ministry of Social Welfare, Relief and Resettlement (the lead Ministry), with significant support from UNICEF. A Child Law Review Taskforce composed of representatives from each ministry involved in implementation of the Child Law (established with the encouragement and advocacy of UNICEF) met in April 2015. Several weeks before the Taskforce meetings, each ministry received a copy of the draft law and was asked to submit written feedback in advance of the workshop, and all responded. Also present at the Taskforce were several large national and international NGOs working on child rights issues. These NGOs were instrumental for further advocating for more rigorous protection norms, such as increasing the age of marriage.

In early June, DSW held a two-day National Consultation Forum in the capital, Nay Pyi Taw. This forum included more than 70 representatives from national NGOs and CSOs from states and regions of Myanmar, international NGOs, United Nations agencies and development partners, as well as Child Law Taskforce members, government staff from line ministries, and parliamentarians. The comprehensive and consultative nature of the revision process resulted in a gradual capacity building of the staff and decision makers in the line ministry responsible for the law revision. Involvement of NGOs and CSOs at various stages of consultation resulted in generation of shared knowledge and understanding of the law revision process, an increased focus on gender, particularly in the chapters of the law concerning violence, and cultivation of Myanmar-specific examples of challenges that are related to missing or non-child-friendly legal provisions in current legislation.

In 2015, progress was made in enhancing capacity-building initiatives for justice system actors, including linking the emerging social work case management system to the justice interventions. In line with ongoing support, the UNICEF Child Protection team, in cooperation with the training school of the Supreme Court, trained 90 judges on child rights in the context of the justice system and child-friendly judicial proceedings, bringing the total number of judges trained well over the target of 500 since 2011. Though the centralized training of police, UNICEF worked with the Myanmar Police Force to train 135 police in child-friendly procedures. UNICEF engaged the Supreme Court and the Myanmar Police Force in its strategic planning exercises, agreeing to reform the entire curriculum for judges and police in line with the new Child Law, once adopted, and linking interventions to provide targeted capacity building in townships where DSW has social work case managers working, as these townships are identifying a large number of children as victims and witnesses. In 2015, targeted trainings started at centralized and decentralized levels for police and DSW in Kachin, Mon and Nay Pyi Taw, where 100 participants received training. Materials for raising awareness of children and communities on their rights (and responsibilities) as victims, witnesses and perpetrators were finalized with the Government and key partners, and will be rolled out in 2016.

**OUTPUT 4** Increased efforts to protect children from exploitation, including child labour, trafficking and the commercial sexual exploitation of children.

**Analytical statement of progress:**

Continued work with the Factories and General Labour Laws Inspection Department of the Ministry of Labour to increase capacity of the Government to identify and respond to children working in shops and factories showed continued progress. In addition to training another 64 labour inspectors, UNICEF used the entry point of the child labour monitoring checklist (developed in 2014 with the Government) to intensively prepare and conduct a stakeholder workshop with government partners on the initiation of a pilot child-labour project in Hlaing Tha Yar Township in Yangon, a heavily industrialized area. Agreement was reached with the Department to begin working in 2016 around four pillars: strengthening social work services through DSW case management expansion to the area; investment in informal and vocational education in the township; strengthening the work of the labour inspectors and the commitment of factories to identify children below the minimum working age and seek solutions for these children; and ensure that children above the minimum working age have their rights fulfilled. A partnership with H&M Foundation is now in place to support the implementation. The final draft of the Child Law sets the minimum age of child employment at 14, in line with international standards, and clearly outlines the most hazardous forms of child labour in line with International Labour Organization Convention 182.

A new draft of the Anti-Trafficking Law has been prepared, including a revised chapter on child victims of trafficking taking into account UNICEF's technical inputs. UNICEF provided intensive support to the 'Boat Crises' in 2015, where children were discovered at sea (among adults) in route to destinations across South East Asia. UNICEF supported 175 trafficked children to reintegrate successfully to their communities of origin, including those associated with the 'Boat Crises'. Seizing the political opportunity of the crises, UNICEF worked with the Anti-Trafficking Task Force of the Government to update safe migration and trafficking materials, paying close attention to gender in the development and delivery of the materials, and disseminated these to 310,000 individuals via information sessions in close collaboration with partners. UNICEF and the International Organization for Migration finalized a study on migration in the South East, and are now reviewing the final draft with the Government prior to dissemination.

**OUTPUT 5** National and international standards are implemented to prevent and respond to grave violations against children as per United Nations Security Council Resolutions 1612/1882 and to contribute to ongoing peacebuilding, including responding to emergencies.

**Analytical statement of progress:**

Implementation of the Action Plan with the Government of Myanmar to end the use and recruitment of children continued in 2015. UNICEF facilitated a successful visit of the United Nations Secretary-General's Special Representative on Children and Armed Conflict, which helped to open up more space for engagement. Some 146 children and young people were released from the ranks of the Armed Forces, which constitutes 20 per cent of the children released since the signing of the Action Plan in 2012. UNICEF continues to support and oversee the social-economic reintegration of all released children. UNICEF also continues to co-chair the national working group on reintegration, and is taking steps to merge this group with the broader child protection social work case management response. The decrease in children released is to some extent reflective of the positive steps the Government continues to make in the implementation of the Joint Action Plan, which shows that overall recruitment of children has slowed considerably, although some critical remaining steps are needed.

As Co-Chair of the Country Task Force on Monitoring and Reporting, UNICEF and the United Nations Resident Coordinators' office made significant advancements (with assistance from the Special Representative's visit) in developing Action Plans with three non-state armed groups, which will likely be signed in 2016. UNICEF supported the Government's protection response to Cyclone Komen, supporting and backstopping government social worker deployments and ensuring that the Government's flood recovery plan is linked to the strategic scale-up of key protection interventions across the humanitarian and development agendas. The Mine Risk Working Groups (MRWGs) at national and state levels (co-chaired by UNICEF and the Government) field-tested and finalized the common toolkit on MRE based on the KAP study findings, and will roll this out in 2016 across all implementing partners. Further decentralization of the national Mine Risk Working Groups will likely take place in 2016, with establishment of a government-led platform in Kayin and Shan.

Victim assistance work is also expected to ensure that international standards are applied in Myanmar and the different components are available for both victims and survivors. Community-based child protection mechanisms such as child protection groups were maintained and strengthened in emergency-affected areas to scale up prevention and ensure immediate referrals of child survivors at risk of violence, exploitation and abuse. More than 70,000 children received protection through this work in 2015.

To further strengthen coverage, quality and responsiveness, UNICEF hired and deployed a national officer to the northern part of Rakhine State in 2015 based on the high vulnerabilities in this area. A specific focus on adolescents, especially girls, continues to be strengthened, with revision of the life skills curriculum for emergency settings completed and being rolled out in Kachin and Rakhine. A dedicated approach is being tested to reach adolescent girls living in conservative environments preventing them from accessing established safe spaces.

**OUTCOME 7** By the end of 2017, boys and girls benefit from increased budget allocations under health, education, social welfare and protection, addressing the needs of the most vulnerable.

**Analytical statement of progress:**

While the Government allocations to health and education reached the targeted shares of GDP, the continued low allocation to social welfare remains a concern.

The complexity of influencing budget allocations in Myanmar guided UNICEF to broaden its advocacy beyond ministries to parliamentarians and civil society. The 2014 analysis of public finances provided a platform for reaching out to both stakeholders. Given their evolving influence, the initiated relationships are also foundations for long-term engagement to build coalitions for increased social sector investments.

The limited social welfare budget is a barrier in implementing key new programmes for children. Despite the launch of the landmark Social Protection Strategy in 2014, low funding related to the perceived weak absorptive capacity of the responsible ministry hinders its implementation. UNICEF has therefore continued strengthening the Ministry of Social Welfare, Relief and Resettlement's technical readiness in anticipation of future allocations.

At the subnational level, a non-linear decentralisation process has created some difficulties in funding programmes for vulnerable groups identified through local social planning in Chin State in 2014. In 2015, UNICEF helped develop a Local Social Plan in Tanintharyi Region for FY2016/17. The documented processes will support advocacy with the Government to institutionalize the methodology.

While data availability is improving with the release of the Census and a number of surveys underway, the use of evidence in planning and budgeting is still limited. UNICEF continued to support to government to build a civil registration and vital statistics system recognising the importance of vital and up-to-date data for planning and budgeting. Preliminary findings on the situation of children with disabilities will be a cornerstone in advocating for inclusive policies.

To address some of these constraints, especially the very low social protection budget allocation, UNICEF will support the Ministry of Social Welfare, Relief and Resettlement to strengthen its Public Financial Management Capacity through dedicated technical support over a two-year period.

**OUTPUT 1** The situation of children, with focus on disparities and vulnerabilities, is defined and analysed at national and regional levels.

**Analytical statement of progress:**

Despite two critical posts (Chief of Section and Child Rights Monitoring Specialist) being vacant for most of the year, progress was made supporting data generation and analysis on disparities and vulnerabilities affecting children.

The situation analysis of children with disabilities, although facing delays due to the floods and associated data collection challenges, provided preliminary findings for the International Day of Persons with Disabilities. This assessment will create a platform to advocate with the new Government for inclusive policies for children.

On child-focused township profiles, the update of indicators in Mon State is expected to be completed at end of the year, reflecting the Government's continuous commitment. Efforts in Sagaing Region were postponed due to ongoing recovery from July floods. In Kachin State, where escalated conflict caused delays, work will resume in December 2015, with profiles to be ready in early 2016.

A number of surveys, which were expected to provide data for secondary analysis of children's situations, were delayed – including the World Bank's Poverty and Living Conditions Survey and the DHS. However, UNICEF ensured that the situation of children was updated using the new census data. This provided a platform for engagement with civil society and development partners, and for continued advocacy with the Government to increase equitable social investments.

Recognizing the importance of institutionalizing data collection, UNICEF continued to support system building for civil registration and vital statistics. With UNICEF's assistance, the Government launched an electronic platform in some districts to permanently record and generate continuous data on birth registration. A series of trainings have prepared the system's capacity to administer the e-platform. This technical cooperation with the Government reinforces advocacy on appointing a Civil Registrar General.

**OUTPUT 2** By the end of 2015, national and sub-national policies and strategies are strengthened to address identified vulnerabilities of children.

**Analytical statement of progress:**

Through evidence generation, technical support and advocacy, UNICEF strengthened government national and sub-national frameworks to identify and address the needs of vulnerable children.

To support the roll-out of the National Social Protection Strategy (NSPS) launched in late 2014, UNICEF developed a costed package of Maternal and Child Cash Transfers (a flagship programme in the strategy) in 2015 with Save the Children. This provided a good basis for providing assistance to the DSW in the timely design of a set of emergency cash transfer options, along with an operations manual to guide implementation, in areas worst hit by the 2015 floods. These models have reinforced the Government's readiness for the NSPS's implementation, even as financing options are being identified.

Further progress was also made in efforts to ensure meaningful social inclusion for children with disabilities in Myanmar. UNICEF supported the formulation of a national law on the rights of persons with disabilities that was adopted in June 2015. As a new member of the Steering Committee leading the roll-out of this law, UNICEF is now supporting the drafting of detailed by-laws to guide its implementation. UNICEF also accelerated advocacy around adopting a social model for certification/registration – which non-medical personnel can use – for persons with disabilities. The tool will be field-tested next year, building programmatic synergies with the school-based Early Childhood Interventions programme.

At the sub-national level, UNICEF rolled out the Local Social Planning approach in Tanintharyi Region to identify programmes for the most vulnerable children. The regional government included these interventions in its Fiscal Year 2016/17 budget submission. Alongside the experience from Chin State in 2014, this forms a basis to advocate for needs-based local planning approaches across states and regions.

Finally, further progress was also made in generating evidence and in advocacy around relatively low social-sector budgets. In collaboration with a prominent local NGO, UNICEF developed the first publicly available citizen's budget guide – for children and youth – to raise public awareness on this issue. It was welcomed by CSOs and teachers will be trained on it to

ensure its messages are conveyed to children. As well, the winning party of the 2015 national elections requested UNICEF to provide copies to all of their new parliamentarians.

Concomitantly, a series of discussions was held with the Government and civil society regarding inadequate financing of policies for children. Exchanges with parliamentarians, including the Public Accounts Committee, on this topic also laid a foundation for future advocacy as parliamentary influence rises.

**OUTCOME 8** The regular and humanitarian response is effectively supported through enhanced management, planning, monitoring and evaluation (M&E), advocacy and partnership, communication, supply and operational support.

**Analytical statement of progress:**

Implementation of regular programmes and humanitarian response was efficiently and effectively supported by all cross-cutting programmes, including supply and operational support. Governance structure and advisory office committees including the CMT, Contracts Review Committee, PCA Review Committee and Joint Consultative Committee ensured sound decision-making, oversight and smooth functioning of the office. With regard to the Global Staff Survey results, the office developed a work plan around five dimensions – Work-Life Balance, Career and Professional Development, Empowerment, Office Efficiency and Effectiveness, and Staff Association, and progress was followed through the CMT.

The relevant key performance indicators set by the CMT and Regional Office were vigorously monitored and achieved. Internal and financial controls and work processes including release strategy, table of authorities and segregation of duties were effectively implemented and monitored.

More than 90 per cent of management and operations priorities and more than 90 per cent of programme priorities identified as part of the Annual Management Plan were implemented. As of December, 100 per cent of the Assurance Plan, including micro-assessment, audit and spot-check, were implemented. The Country Office was audited in 2014 and received satisfactory ratings. The 24 recommendations were successfully closed in 2015.

In 2015, the Country Office experienced a high staff turnover, partially related to the 2014 Programme Budget Review submission which resulted in a number of new positions being created. In total, 45 staff joined the office and 30 separated. Meeting the recruitment indicators has been more challenging, with a number of contributing factors, such as constraints in scheduling testing and interviews, as well as in obtaining references and approval turnaround times. Approval through EAPRO for national positions has been very efficient.

This year, the office submitted a Programme-Based Review focused largely on the Education programme. In total, 22 positions (16 encumbered) were abolished and 14 created. In addition, proposal for reduction of the institutional budget was submitted and approved. Funds released were made available to the Regional Office to use for core resources and shared functions.

Regarding global indicators on performance management, the Country Office did well, with 99 per cent of staff completing their 2014 Performance Evaluation Reports by the end of March.

The Country Office has no outstanding DCT over nine months and only 1.2 per cent DCT over six months. The HACT has been rolled out with government partners with effect from 1 January 2015.

Contributions were efficiently managed and funds utilization was regularly monitored. In all, 100 per cent of Regular Resources funds and 94 per cent of Other Resources funds allocated for 2015 were fully utilized, with the remaining 6 per cent (multi-year grants) to be re-phased to 2016. All donor reports were submitted on time. An effective resource mobilization strategy was in place and its implementation was monitored especially to ensure fund-raising for underfunded programmes.

Supply plan implementation was regularly monitored to ensure timely procurement and delivery of supplies. Supplies worth US\$32.8 million inclusive of offshore, regional and local procurement, and direct orders were managed in close collaboration with programmes. Support to the Government for supplies was intensified during the third and fourth quarters as a direct response to the flood emergencies, including procurement, warehousing, clearance and distribution to the affected areas, amounting to US\$1.5 million (723.74 metric tons).

As part of the Country Office's Advocacy and Communication Strategy 2013–15, the office has established four office advocacy priority issues – public finance for children, Rakhine, children affected by armed conflict, and the first 1,000 days of a child's life. UNICEF has developed comprehensive advocacy plans for each issue. During 2015, the office expanded its partnerships with parliamentarians, 91 political parties contesting in the elections, religious leaders, the NGO Child Rights Working Group and the media – to engage them in taking actions in support of these priority issues.

Under technical leadership of the newly established Planning, Monitoring and Evaluation Unit, theories of change for the 2016–2017 Country Programme extension period were developed and relevant processes and systems were put into place and strengthened to support the generation of quality evidence in line with global policy and guidelines. This includes the establishment of a Research Steering Sub-Committee to ensure adherence to minimum quality standards in evidence generation, the regular review of IMEP implementation by the M&E Committee, and the development of Standard Operating Procedures for research, evaluations and studies. In addition, the Monitoring Results for Equity System (MoRES) approach was introduced and applied to monitoring and reporting from the field, to systematically identify, address and monitor the removal of barriers and bottlenecks towards results achievement.

Field Operations strategic leadership and programme coordination enhanced management, planning and M&E to support regular and humanitarian response at the decentralized level. Supported by country-level technical assistance, training and guidance, Field Operations' ability to monitor the situation of the most disadvantaged and guide decentralized actions was strengthened through a new planning, monitoring and reporting system modelled after UNICEF's global MoRES approach. In humanitarian and development contexts, Field Operations continued to play a key role in assessing needs, engaging partners, and guiding UNICEF support.

**OUTPUT 1** Operating costs for staff and non-staff for C4D and UNICEF capacity for supply and logistics.

**Analytical statement of progress:**

Effective and efficient supply, logistics and C4D support was provided in 2015.

**OUTPUT 2** Social norms and behaviours related to child survival, development and protection are improved through effectively coordinated C4D initiatives, technical oversight and institutional capacity building.

**Analytical statement of progress:**

In 2015, UNICEF continued its partnerships with the Interfaith Platform for Children, Ministry of Information and Broadcasting, and University of Public Health to promote social norms and behaviours related to child survival, protection and development.

UNICEF partnership with the Interfaith Platform for Children, initiated in 2015, was supported to develop and disseminate public health and child protection-related messages. Through the platform, in the context of rising discrimination against Muslim minorities, UNICEF has encouraged the top religious leaders of the four main religions that are part of the Platform to issue joint calls in support of religious tolerance and diversity for the benefit of children. Leveraging its partnership with the Ministry of Information and Broadcasting, free of charge messages about the prevention of family separation, Thant Shin hand washing and the measles rubella campaign and birth registration continued to be broadcasted in 2015 by FM radio stations and Myanmar Radio and Television.

In 2015, institutional capacity on C4D was strengthened through implementation of a training needs assessment and a tailor-made C4D course attended by 33 participants from the Government, including representatives from the University of Public Health. Experience from the training led to a joint decision by the University of Public Health and UNICEF to develop a fully-fledged C4D curriculum in partnership with a recognized external university. This will be taken forward in 2016.

A rapid assessment for Phase 1 of the Measles and Rubella Communication Campaign was conducted, and a Government-led assessment for the campaign, including an assessment on communication, was supported.

For the first time, the MoH, with support from UNICEF, established Technical Working Groups for C4D at sub-national levels in Kachin and Rakhine states. This is expected to foster identification and implementation of tailored, appropriate sub-national variations of national communication strategies. UNICEF will continue to provide support to ensure that this mechanism has an evidence-based and equity focus. The C4D Technical Working Group at national level was also revitalized.

**OUTPUT 3** Decentralized actions for the most disadvantaged children are guided by effective programme coordination and strategic leadership at sub-national level.

**Analytical statement of progress:**

In 2015, Field Office strategic leadership and programme coordination successfully guided decentralized actions for the most disadvantaged, supported by country-level technical assistance, training and guidance.

Field Offices have taken a lead role and engaged sub-national authorities on social-sector planning and budgeting, collecting valuable information to inform UNICEF programming and positioning UNICEF as a strategic counterpart at state/region level. Conflict sensitivity and peacebuilding have been mainstreamed across UNICEF programmes, especially in areas affected by conflict (Kachin, Shan, Kayah, South-East) or communal violence (Rakhine). In the South-East, UNICEF programmes convened the Government and non-state actor service

providers in sector coordination bodies to improve services, generate peace dividends, and build relationships across dividing lines. At the country level, a review of experiences and lessons enabled the development of comprehensive UNICEF programme guidance on conflict sensitivity and peacebuilding. In the flood emergency in July/August 2015, Field Offices acted as first responders on the ground and played an essential role in assessing needs and guiding support.

The ability of Field Offices to monitor the situation of the most disadvantaged and guide decentralized actions was strengthened through a new planning, monitoring and reporting system. Modelled after UNICEF's global MoRES approach, the system focuses monitoring efforts on identifying barriers and bottlenecks that impede children's access to quality services, and helps to identify and implement mitigation measures.

Continued conflict in parts of the country, difficulties in timely recruitment of qualified staff and lack of reliable Internet connectivity in Field Office locations posed challenges for activities in 2015. Especially in Kachin and Shan, repeated outbreaks of fighting jeopardized children's lives and interrupted programmes. For 2016, UNICEF is readying itself for building partnerships with new state/region counterparts and using the opportunities of the anticipated Government transition by preparing State/Region Plans for Children of UNICEF-supported activities in six states and regions across the country to serve as platforms for engagement.

**OUTPUT 4** Effective and efficient management of Country Programme results.

**Analytical statement of progress:**

In 2015, under the technical leadership of the Planning, Monitoring and Evaluation Unit, major efforts were made by all programme teams to develop theories of change for the extension period 2016–2017. Focus was placed on illustrating the type of change targeted, the interim results and implementation strategies leading towards that change, as well as the assumptions, risks and mitigation measures related to the causal link between the different results levels. Theories of change were operationalized through Multi-Year Work Plans signed with partner ministries at the national level.

The M&E Committee, bringing together M&E focal points from each programme, played an important role in coordinating the development of theories of change and corresponding results frameworks, as well as in monitoring the implementation of the IMEP and its e-version, PRIME – updated and reviewed by the CMT on a quarterly basis. The M&E Committee also led the review of existing monitoring and reporting practices for alignment with HACT requirements on programme visits.

Efforts were made to strengthen monitoring and reporting from the field in collaboration with the Field Service Unit, introducing the MoRES approach to systematically identify, address and monitor the removal of barriers and bottlenecks towards results achievement. This resulted in the development of a guidance note and sector-specific monitoring questions in alignment with UNICEF's Guidance on Field Monitoring Visits. UNICEF Myanmar committed to be part of the first e-Tools release to strengthen management for results through better travel planning, reporting and partnership management, among others.

Significant headway was made in putting into place relevant processes/systems to support the generation of quality evidence in line with global policy and guidelines. A Research Steering Sub-Committee was established under the M&E Committee to ensure adherence to minimum standards as per the UNICEF Procedure for Quality Assurance in Research and UNICEF Ethics

Procedure. A Standard Operating Procedure for research, evaluations and studies was developed and a research and evaluation planning workshop was implemented to prioritize a few strategic, high-impact activities for 2016–2017.

**OUTPUT 5** The rights of Myanmar children are better promoted through effective advocacy and communication, resource mobilization and partnerships.

**Analytical statement of progress:**

UNICEF has established four office advocacy priority issues and developed comprehensive advocacy strategies for each.

In its advocacy to increase public finance for children: UNICEF used the 2014 census data as a platform for policy dialogue. While the April 2015–2016 budget remained at the same level as 2014–2015, increased political and public will is apparent with increased debate among parliamentarians and in the media on the national budget. UNICEF and Spectrum developed the first budget guide for youth to raise public awareness of government spending on social sectors.

On its advocacy for children’s rights in Rakhine State, UNICEF’s early adoption of and broad advocacy for an approach based on ‘all rights for all children’ across the ethnic divides is rallying greater support among international development partners and within the United Nations.

On its advocacy for children affected by armed conflict, the Government of Myanmar signed the CRC Optional Protocol on the involvement of children in armed conflict, and three of seven ethnic armed groups listed by the Secretary-General’s Annual Report for use and recruitment took concrete steps towards signing an Action Plan with the Country Task Force on Monitoring and Reporting.

UNICEF used a number of tools to further the human rights agenda in Myanmar. UNICEF actively participated in the 2015 Universal Periodic Review, submitting recommendations in a joint United Nations Country Team report, and engaging with the Ministry of Foreign Affairs to advise on quick wins ahead of the reporting process. UNICEF regularly submitted updates to the United Nations Special Rapporteur on the situation of human rights in Myanmar.

**OUTPUT 6** Increased capacity at national and sub-national levels to incorporate child-sensitive elements in DRR (and resilience) platforms and actions.

**Analytical statement of progress:**

UNICEF continued its work on DRR in 2015, with a focus on strengthening the Country Office’s partnership with the National Disaster Management Agency (NDMA). A multi-year work plan for 2016–2017 was signed in October 2015, with the aim of strengthening the NDMA’s capacity to prevent, mitigate, prepare for and respond to the negative impacts of disasters and conflict on children. Collaboration between the two agencies led to the publication of a child-centred risk assessment and the development of a road map for a national risk assessment. UNICEF was elected on the Steering Committee of the DRR Working Group and contributed child-sensitive inputs in the DRR policy dialogue pre- and post-Sendai. As part of its support to the National Disaster Management Training Centre, UNICEF and partners developed and rolled out a training on inclusive disaster risk management. Finally, UNICEF and the United Nations Development Programme supported the NDMA in developing a strategic framework to strengthen its DRR youth volunteer programme.

In 2015, a DRR indicator was incorporated across the Education, Young Child Survival and Development and Child Protection programmes work plans; as well as in becoming a common cross-cutting issue in their theories of change. Substantial progress was made in education, where DRR is integrated in the draft National Education Sector Plan, supported by a dedicated budget. In Education, all aspects of comprehensive school safety are highlighted, with progress on devising national safe school construction standards, and better integrating DRR in the curriculum, teacher training system and EMIS. In WASH, DRR and climate change adaptation will feature prominently in the forthcoming National Rural WASH Strategy. Progress is also ongoing on disaster-resilient standards for WinS. Following up on the adoption of a National Social Protection Strategy in 2014, technical support was provided to the Ministry of Social Welfare for the utilization of social protection systems in flood response. Finally, DRR features prominently in the draft National Action Plan on Food and Nutrition Security.

The Country Office maintained its investment in preparedness in 2015, as well as extended support to the NDMA in that area. A total of 2,800 family kits were transferred to the Department, and have all been utilized. UNICEF upgraded its warehousing capacity and ensured greater quality and movement controls over its pre-positioning supplies. Trainings on Emergency Preparedness and Response continued in all Field Offices, and a new module on cash in emergencies is being developed. Investments in preparedness enabled the Country Office to respond faster to unprecedented floods in July–August 2015.

**OUTPUT 7** Management and operation support.

**Analytical statement of progress:**

Effective and efficient management and operation support was provided in 2015.

**Document Centre**

**Evaluation and Research**

<b>Title</b>	<b>Sequence number</b>	<b>Type of report</b>
Faith for Children Initiative; Baseline Assessment Report	2015/008	Review
Study on Cause of Under-Five Mortality	2015/020	Study
KAP Survey on WASH in 16 Townships of Myanmar	2015/019	Survey
Myanmar Water, Sanitation and Hygiene Sector Situation Analysis	2015/018	Study
Health Facility Assessment: Quality of maternal, newborn and child health care	2015/016	Study
KAP Study: The Impact of Landmines and other Explosive Remnants of War in South Eastern Region of Myanmar	2015/014	Study
Social Protection in Myanmar: The impact of innovative policies on poverty – An empirical investigation	2015/011	Review
Feasibility Study: Technical options to implement a universal maternal and child and cash transfer program in Myanmar	2015/004	Study

**Other Publications**

<b>Title</b>
Myanmar: Urgent appeal for flooding disaster, updated 18 August 2015, Leaflet

Myanmar Child-centred risk assessment (English and Myanmar versions)
Let's call for one clear winner: Children
Birth registration right for the start
NO to child labour - YES to quality education, Pamphlet and Booklet
Meeting the humanitarian needs of children in Myanmar 2015
Myanmar: Rakhine and Kachin State, Leaflet
Children in the 2014, Myanmar Population and Housing Census, Leaflet
Myanmar Quality Basic Education Programme, Pamphlet
Social Protection in Myanmar; The Impact of innovative policies on poverty – An empirical investigation
Delivering Results for Children in 2014
Universal Health Coverage Position Notes
Faith for Children Booklet (2nd edition)
Making the National Budget (2015/2016) Works for the Children, Brochure (Myanmar and English)
Be Careful: Important facts on human trafficking and exploitation
Awareness on Demobilization and Reintegration of Child Soldier, Pamphlets
Leaflet on Our Children are NOT For Sale
Leaflet on Children are NOT Tourist Attractions
World Statistics Day – Better data, better lives

## Lessons Learned

Document type/category	Title
Innovation	Vital registration electronic platform
Innovation	Myanmar Elections 2015: Let's call for one clear winner: Children campaign
Lesson learned	Success from measles-rubella campaign as catalyst for strengthening routine immunization in low-performing, hard-to-reach and self-administrative areas