MID TERM REVIEW REPORT
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Executive Summary

The Mid-Term Review of the 2011-2015 Country Programme of Cooperation between the Government of the Republic of the Union of Myanmar and UNICEF, is an opportunity to review progress towards the expected results outlined in the Country Programme Action Plan; to take stock of changes in the programming context; and to review the performance of the UNICEF Myanmar Office and the Government in supporting underlying programme strategies and principles.

Since March 2011, after decades of isolation and centralized administration, Myanmar is going through unprecedented changes. The government has launched ‘four waves of reforms’ since coming to power in 2012- political, economic, public administration and private sector. The economic growth rate is estimated to be 6.5% and is forecasted to reach 6.8% in 2014. Since the publication of the annual public budget in 2012, dialogue on resource allocation has entered the public domain. Political decentralization has unfolded at a rapid pace and is being followed by administrative and fiscal decentralization. For the first time in its history, Myanmar is the ASEAN chair for 2014, which will give the country to promote new regional initiatives to protect children.

Trends affecting the situation of women and children remain difficult to assess, in a context of inadequate data availability and data quality. While the reforms have made poverty reduction and social development a priority, they are too recent to help the country adopt the faster pace it would need to reach most of the Millennium Development Goals by 2015. Widespread disparities imply that children and families in rural areas and/or with a low socioeconomic status are particularly unlikely to benefit targets achieved at the national level.

The current context is fundamentally different than in 2010, when the current Programme was designed. Appetite for reforms can translate in the adoption of new norms and standards for children in Myanmar. In turn, reforms provide new opportunities to build systems and thus provide a basis for acceleration of results, scale and sustainability. In this context, the Programme of Cooperation between the Government and UNICEF will have the following strategic focus in the next 2 years and beyond:

• Support the development of policies and legislation to accelerate realization of child rights, including through sector working groups established under the NPT Accord;
• Continue to deliver immediate tangible results to secure public support for necessary long-term reforms and structural change;
• Build capacities at Union, State and Township levels to develop and implement plans and budgets for children;
• Strengthen health, education and social welfare systems and make them accessible to the most disadvantaged, including through opportunities generated by decentralization and greater cooperation with other UN agencies;
• Contribute to peacebuilding in Myanmar through education, health and other social service programmatic interventions;
• Establish and strengthen partnerships with other key organisations and institutions, CSOs and Non-State Actors to build broad multi-sectoral coalitions to realize child rights; and
• Leverage additional resources for children, from the Government, the private sector and the international community.

1 Asian Development Outlook, ADB, 2013
The results framework of the Programme of Cooperation will be restructured to better capture UNICEF’s contribution to outcomes for children in Myanmar.

1. Purpose and Process

1.1. The Mid-Term Review (MTR) of the 2011-2015 Country Programme of Cooperation between the Government of the Union of Myanmar (GoM) and UNICEF 2011-15, is an opportunity to review the progress to date towards the expected results of the country programme as outlined in the Country Programme Action Plan (CPAP); to take stock of changes in the programming context; and to review the performance of the UNICEF Myanmar Office and the Government in supporting programme strategies and principles underlying the country programme.

1.2. UNICEF has had a continuous presence and programme of cooperation in Myanmar since 1950. The current Country Programme Action Plan (CPAP) for the period 1 January 2011-31 December 2015 was designed in 2010 and agreed and signed in January 2011. Momentous changes have taken place in the country since then. The Government has embarked on historic political, democratic, administrative and social reforms and is making considerable effort to break the isolation of the country. It has set out its Framework for Economic and Social Reforms (FESR, 2011/12 – 20015/16), and at the beginning of 2013 agreed the Nay Pyi Taw Accord with international development partners. It is therefore an opportune moment to conduct the Joint GoM-UNICEF Mid Term Review of the CPAP to seize new opportunities, mitigate new risks, and make adjustments, as required, to accelerate the achievement of equitable and sustainable outcomes for the most disadvantaged children.

1.3. Spanning over a 6-month period, and led by the Foreign and Economic Relations Department, Ministry of National Economic Planning and Development and UNICEF, the Mid-Term Review was guided by the following principles: government ownership, alignment with government-led processes, participation and inclusion, commitment to equity, evidence-based programming, and a results orientation (MTR concept note – Annex I).

1.4. Based on the five main programmatic components of the CPAP, reviews were held in cooperation with relevant government counterparts and involved UN agencies, development partners, INGOs and Civil Society Organisations (CSOs). In addition, a series of multi-sectoral consultations were held in 7 selected states/regions and counterparts at the national level to better understand the on-going decentralization processes’ implications for child rights realization (Annex V). The MTR was also informed by new pieces of research, evaluation and surveys supported within the CPAP- such as on learning outcomes, social budgeting, WASH.

1.5. Finally, the UNICEF Office held several internal reflection exercises in conjunction with a wider UN-effort to review its programmatic response along humanitarian principles, peace building and conflict sensitivity (Annex VI). Recognising the emergence of new players in the society- such as Parliamentarians, media, academic institutions and CSOs, the UNICEF Office simultaneously initiated the development of an advocacy strategy to help better analyse and seize opportunities to build an enabling environment for the promotion and protection of children’s rights. Building
upon reviews and missions by the Inter-Agency Standing Committee on emergencies, the UNICEF Myanmar Office reviewed its programme with a view to further mainstream emergency preparedness, response, and resilience. A review of the recommendations to Myanmar by the UN Committee on the Rights of the Child and the Universal Periodic Review of Human Rights, including gender rights, was also undertaken to inform the MTR.

1.6. To steer the process, an MTR Organizing Committee was established jointly with the FERD, MNEPD (Annex II). An MTR Steering Committee was established within UNICEF for internal coordination and oversight with representation from Staff Association and field Offices and the UNICEF Country Management Team made it a permanent and priority item in all its deliberations since the beginning of 2013. Quality assurance for the process and the content was provided by the UNICEF Regional Office for East Asia and the Pacific, along with key advisers from UNICEF HQ.

1.7. The present MTR report first identifies changes in the Myanmar context that may bear opportunities and risks for children, and provides a brief update of the situation of children and women, based on available data and analyses. It reviews progress and challenges for each main programme component—namely Education, Young Child Survival and Development, HIV and Children and WASH, Child Protection and Social Policy—and identifies lessons learnt and new opportunities and risks to guide programme adjustments. A list of all Proposed Programme Adjustments is attached (Annex X).

1.8. A final strategy meeting with Government, development partners, NGOs, INGOs and the UN, amongst other stakeholders was held on November 11, 2013 to collectively review progress and discuss the way forward until 2015 and beyond (Annex III and Annex IV – List of Participants and Meeting Record). The meeting was opened by His Excellency Dr. Kan Zaw, the Union Minister for National Planning and Economic Development, and Mr. Daniel Toole, UNICEF Regional Director for East Asia and the Pacific, and was also attended by prominent Parliamentarians. The meeting reaffirmed the joint commitment and shared vision of the Government of Myanmar and UNICEF for accelerating efforts and seizing new opportunities for realizing the rights of all children in Myanmar. Feedback and insights received during the strategy meeting have been incorporated in the programme adjustments proposed herein.

2. A New Context for Children’s Rights

2.1. Since March 2011, after decades of isolation and centralized military administration, Myanmar has been going through unprecedented changes. The government has launched ‘four waves of reforms’ since coming to power in 2012—political, economic, public administration and private sector. The economic growth rate is estimated to be 6.5% and is forecasted to reach 6.8% in 2014. The government has begun to develop a far-reaching fiscal reform strategy to mobilize non-resource revenues and revamp public finance management (PFM). Since the publication of the annual public budget in 2012, dialogue on resource allocation has entered the public domain. Political

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2 Asian Development Outlook, ADB, 2013
decentralization has unfolded at a rapid pace through the appointment of Chief Ministers and State/Regional Cabinets in all 14 States and Regions, with their own locally elected parliaments and is being followed by administrative and fiscal decentralization, although not at an even pace across sectors. For the first time in its history, Myanmar is the ASEAN chair for 2014, which will give the country to promote new regional initiatives to protect children.

2.2. The Government is engaged in peace dialogue and attempts at trust building with the longer aim of ending more than 60 years of conflict with various ethnic armed groups. A nationwide ceasefire is anticipated in December 2013 with the 13 main ethnic armed groups, including the Kachin Independence Organisation. Yet, conflict and violence persist in many areas of the country, which take their toll on children. Further resurgence of inter communal tensions in Rakhine State and other parts of the country have added new risks on children’s lives.

2.3. A recent ICG report\(^3\) argues that ‘unless there is an effective government response and change in societal attitudes, violence against Myanmar’s Muslim communities could spread, jeopardizing the country’s transition as well as its standing in the region and beyond’. A consensus on fiscal decentralization, especially in resource-rich post conflict ethnic minority states and autonomous regions, is yet to materialize. While capacities to implement reforms at national and particularly at sub-national levels are increasing, there remain constraints to implementing faster and broader reforms with tangible results for all segments of the population. There is a risk of increased inequality leading to further disparities and exclusion if strategies for economic growth by-pass the current concern for people-centred approach and a political commitment to support the most vulnerable. To achieve equitable development across the region, the ‘people-centred approach’ promoted by government will need to be effectively implemented. With a fast evolving administrative decentralization agenda, roles and responsibilities of different levels of government, as well as resource allocations remain to be defined, adding a risk to greater regional disparities. Compounding these risks is the fact that Myanmar remains highly vulnerable to natural disasters and its preparedness and resilience capacity have some way to go to equal that of other ASEAN countries.

3. Update on the Situation of Children and Women

3.1. Trends affecting the situation of women and children remain difficult to assess, in a context of inadequate data availability and data quality. While the reforms have made poverty reduction and social development a priority, they are too recent to help the country adopt the faster pace it would need to reach most of the Millennium Development Goals (MDG) by 2015\(^4\). Widespread disparities imply that children and families in rural areas and/or with a low socioeconomic status are particularly unlikely to benefit from targets achieved at the national level.

3.2. According to the 2013 National MDG Report (forthcoming), it is considered unlikely that the country will achieve targets related to universal primary education (MDG 2),

\(^3\) ICG Myanmar 2013, The Dark side of Transition: Violence Against Muslims in Myanmar
\(^4\) MDG Report, Forthcoming
reducing child and maternal mortality (MDG 4 and 5) and ensuring environmental sustainability (MDG 7). While many of the national targets on combatting HIV, malaria and tuberculosis (MDG 6) have been met, the country still has one of the highest rates of malaria, as well as tuberculosis, in the world. Gender parity (MDG 3) has been achieved in primary education but remains elusive in secondary education, in the adult workforce and in parliament. With almost a quarter of the population living in poverty\(^5\), and a majority of vulnerable families clustered just above the poverty line, achieving the national target of reducing poverty to 16 per cent will require sustained inclusive growth, strong social protection systems and poverty alleviation initiatives.

3.3. Areas which are home to ethnic minorities, such as Chin, Shan and Rakhine States, tend to be behind on most indicators of child well-being. Data from MICS 2009-2010 showed that deprivation based on ethnicity, wealth and geographic location extend to basic social services such as antenatal care, attendance of skilled personnel during delivery and access to education. Disparities could be even wider than those revealed by MICS and IHLCA data; while the quality of overall data is good, certain locations could not be accessed due to security issues.

3.4. Compared to 2012, public spending in 2013 in the education and health sectors has increased respectively by 30\% and 78\%, but is rising from a particularly low base\(^6\). Investment in the health and education sectors in Myanmar is among the lowest in the ASEAN region, with a total 1.1\% of GDP invested in health (current and capital expenditure), and a 1.7\% of GDP invested for education\(^7\). Even more concerning is the situation of Social Welfare, where only 0.01\% of GDP\(^8\) is allocated to cover services for the most vulnerable and marginalised groups of the population, among which are children and persons with disabilities, the elderly, children deprived of parental care, and women.

3.5. In education, the primary school Net Enrolment Rate (NER) of 84 per cent represents an important national improvement but is still very low compared to the regional average of 94 per cent. More importantly, only 54 per cent of primary school-age children complete a full course of primary education at the correct age and only 32 per cent of children are able to attend high school. About 900,000 children remain out of primary school, encompassing 10 per cent of the number of out-of-school children in the region. Issues of education quality also remain persistent and serious.

3.6. Health indicators in Myanmar are currently well below those of neighbouring countries. Provision of basic healthcare is constrained by a lack of access to services, poor infrastructure, low government expenditure on the sector, a shortage of health personnel as well as weaknesses in their training, poor quality of care and gaps in the availability of basic materials. With a U5MR of 62 per 1,000 live births at present, and large disparities between rural and urban areas as well as between households with different income and educational attainment levels of parents, Myanmar is

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\(^5\) IHCLA, 2009-10, UNDP, UNICEF Myanmar


\(^7\) Ibid.

unlikely to reach its MDG target of 43 per 1,000 live births by 2015. Similarly, the MMR stands at 200 per 100,000 live births at present and is unlikely to be reduced to the target level of 130 per 1,000 live births by 2015.

3.7. HIV and AIDS prevention is also affected by a weak national health system. AIDS-related death of around 18,000 every year is likely to result in increased number of single or double orphans from AIDS. The coverage of HIV testing and counseling, based on program data, barely reached half of all pregnant women in each of the 256 townships with Prevention of Mother-To-Child Transmission (PMTCT) services. Only 25% of all pregnant women in Myanmar were tested for HIV during pregnancy in 2011. Although 85% of HIV–positive pregnant women identified received antiretroviral drugs, only 5% of infants born to HIV-positive pregnant women received a virological test for HIV within 2 months of birth.

3.8. The coverage for water and sanitation in Myanmar is grossly overestimated in household surveys. Evidence from township hospitals and MICS surveys relating to U5 and infant mortality indicates that the health impacts of the assumed sanitation coverage are not reflected on the ground. The minor gains achieved in sanitation since 2000 are not reflected in the diarrhoea rates, in fact from 2003 onwards the diarrhoea rate has been increasing. A KAP study conducted in 2011 by UNICEF revealed that the anomaly of the very high infant and child mortality figures compared to the very high sanitation coverage figures was most likely due to the unsanitary conditions of the household latrines.

3.9. The situation of child protection in the country is only somewhat known due to general lack of data and information. The only form of formal alternative care for children without parental care in the country is monasteries or orphanages. There is no policy on alternative care, and very little if any management of how children come in and out of alternative care. This area of the child protection system is seen as one of the highest risk areas for children, as the unregulated proliferation of orphanage care across a range of actors puts children at extreme risk of trafficking, sexual abuse, violence, and illicit inter-country adoption. A quarter of all children are not registered at birth and only half of these from the poorest families are registered.

3.10. The government has recognized many of these challenges in its Framework for Economic and Social Reform (FESR) and the forthcoming National Comprehensive Development Strategy. The Nay Pyi Taw Accord, signed, in January 2013, calls for ‘people-centred’ and ‘inclusive’ development and has established mechanisms for aid alignment behind government priorities, effectiveness and efficiency. As a result, government is providing leadership to Sector Working Groups, coordinating with development partners to align their programmes behind the FESR.

3.11. The government is making all efforts to increase resources for the social sectors, including education and health. It is implementing Public Finance Management reforms and readying itself to join the Extractive Industries Trade Initiative to effectively utilize public finances. As Myanmar’s national income increases, it is

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9 HIV estimates and projections in Myanmar, 2008-2015, NAP,WHO & UNAIDS
10 Myanmar country report for the Global AIDS Reporting, 2012
expected that budgetary allocations to the social sectors—key for realization of child rights—will also increase.

4. Key Implications for the Programme of Cooperation

4.1. The current context is fundamentally different than in 2010, when the current Programme was designed. Appetite for reforms can translate in the adoption of new norms and standards for children in Myanmar. Evidence is lacking, though, to inform decisions. In turn, reforms provide new opportunities to build systems and thus provide a basis for acceleration of results, scale and sustainability.

4.2. The opening of the society, the new roles played by Parliamentarians, the growing role of media and private sector, the empowerment of institutions at the decentralised levels, and the renewed dialogue with Non-State Actors, can be harnessed to consolidate public support and commitment to child rights, including through priority investments for children. Section 9 of this report describes UNICEF’s renewed focus on advocacy, partnerships and communication to harness these opportunities.

4.3. The rejuvenation of the peace process provides a unique opportunity to place children at the centre of peace building initiatives and reach out to groups of population which have been thus far underserved.

4.4. The MTR offers an opportunity to strengthen the monitoring and reporting of results by developing a revised results structure based on theory of change and with logical links between impact, outcomes, output and activities. Other than the education component, the results structure defined in 2010 proved to be cumbersome, with chain of the results not reflecting the theory of change. Inconsistencies in framing of results across programmes made it difficult to focus on strategy goals (Annex XI and Annex XII – Current and Revised Results Structure).

4.5. In this context, and across its programme component, it is crucial that the Programme of Cooperation seeks to:

1. Support evidence-based policy reforms in line with international norms and standards;
2. Develop Union, State and Township-level and local NGO capacities;
3. Strengthen systems with a focus on resilience and equity;
4. Build partnerships and broad multi-sectoral coalitions for realizing children’s rights;
5. Support child-focused interventions to build trust and peace;
6. Strengthen its results orientation by formulating a chain of results which reflects the theory of change and takes into account risks mitigation measures;
7. Deliver immediate tangible results to secure public support for necessary long-term reforms and structural change.
5. Education

5.1 Progress Review

Education Programme: Progress in Numbers

- 21,146 primary teachers trained on CFS and CCA methodologies
- 4,254 Grade 1 teachers trained on transitions (from home/ECCD center to school) curriculum
- 16,390 secondary teachers trained on Life skills education
- 1,800 education officials and head-teachers trained on/through Instructional Leadership, School-based In-service Teacher Education (SITE), School Self Assessment and School Improvement Planning
- 65,000 stakeholders (including caregivers, parents, community members, management committee members and local administrators) trained on Early Childhood Care and Development
- Over 1,000,000 children supported with basic school supplies up to 2013-14 school year
- 5,400 schools supported with school kits and recreation kits
- 26,777 students enrolled in UNICEF-supported Non-Formal Primary Education programmes
- 34,800 students enrolled in UNICEF-supported EXCEL programme
- 10,799 Essential Learning Packages and 4,100 sets of primary school textbooks distributed in Kachin
- 8,200 children received supplies (Essential Learning Packages, uniforms, raincoats etc.) in Rakhine
- 19,000 benefitted from education response to emergency in eastern Shan

5.1.1 The rapidly changing overall governance landscape in Myanmar has offered unprecedented opportunities to build on UNICEF’s long-standing support to the education sector. UNICEF Myanmar, with extensive support from development partners- especially within the Multi Donor Education Fund\(^{11}\) (MDEF) has improved access and quality of basic education for children in most disadvantaged townships selected based on a composite indicator of vulnerabilities. The programme has supported education reform, system building, national and decentralised capacity development, including in emergencies (Rakhine and Kachin) and zones of conflict. It has built partnerships between Government and NGOs to design an appropriate approach to provide education to most vulnerable children. UNICEF has played a key role in the establishment of a model for education sectoral coordination under the leadership of the Government and with the broad support of international development partners. The Basic Education and Gender Equality programme is on track to meet its objectives. Some specific examples of progress in the areas of policy development, service delivery and capacity building are detailed below.

\(^{11}\) The Multi-Donor Education Fund ('MDEF') comprises Australia, Denmark, DFID (UK AID), the European Union and Norway. In partnership with UNICEF, MDEF supports the Quality Basic Education Programme (QBEP) (2012-2015), which provides the largest contribution to the basic education sector in Myanmar, and also provides significant support for Myanmar’s education sector reform.
5.1.2. **Supporting inclusive policy reforms and systems building:** Responding to the government’s commitment for education reforms that meet the needs of changing Myanmar, the CESR, with coordinated technical support from a coalition of international development partners and UNICEF-MDEF, has supported the Ministry of Education in its efforts to initiate participatory and inclusive policy reform processes. UNICEF-MDEF support to the CESR has entailed through provision of international and national technical assistance; support for a range of analytical studies on teacher education, basic education policy, textbooks, the non-formal primary equivalency programme, ECD costing and finance, and primary education quality and management, with studies on disability and ethnic languages in education forthcoming; as well as support for office establishment and operations. The objective of the CESR is to build strong evidence to inform policy making, planning and the development of a strategic, costed Education Sector Plan (2014-16, 2016-21).

5.1.3. **A first ever multi-sectoral Early Childhood Care and Development (ECCD) policy has been drafted and is in the process of being submitted to Cabinet for adoption,** amongst key outputs of the CESR. The policy was guided by detailed consultations with a range of partners, including Parliamentarians, government counterparts, and political parties, Non State Education Actors, NGOs INGOs, and public and private service providers. To ensure implementation of the policy, a costed ECCD Strategic Plan (2014-2018) was also drafted. The piloting of a kindergarten curriculum has been proposed as a ‘quick win’ in the draft Education Plan 2014-15.

5.1.4. **The Non Formal Primary Education Equivalency framework has been completed and reviewed by Parliament** and its scale up has also been proposed as a quick win in the draft Education Plan. This is a significant achievement as the non-formal programme helps primary school dropouts to acquire equivalency. Sustained advocacy resulted in a significant breakthrough in 2012, with government allowing non-government actors to deliver NFPE. Several other on-going assessments and studies will build capacity the CESR team and will feed into the development of costed education sector plans for 2014-2016 and 2017-2021.

5.1.5. **Support for quality primary education through supply interventions:** Through the partnership between government, UNICEF and MDEF, 1 million children have benefitted from school books and supplies and 5400 schools supported with school kits and recreation kits. With government committing to free textbook distribution for all children, programme resources will be reallocated to increase support to schools with small grants to implement improvement plans in the most disadvantaged schools.

5.1.6. **Capacity building support for quality education:** Over 20,000 primary school teachers have been trained in Child Friendly School and Child Centred Approaches, 4,254 Grade 1 teachers have been trained on a transitions (from home/ECCD center to school) curriculum, and 16,390 secondary teachers have been trained in Life Skills Education. Recognising the need for a more strategic approach to capacity building, the development of a National Teacher Education strategy has been initiated. Rigorous impact evaluation is being
used to assess effectiveness of capacity building interventions. The Measuring Learning Achievement tool has enabled measurement of how teaching quality inputs are translating into impact on learning achievement in Myanmar language and maths. Analysis of cross-correlations with a teacher effectiveness baseline study is highlighting critical success factors, and indicating pathways where adjustment is needed.

5.1.7. **Enabling decentralisation to deliver education services that promote peace-building:** The programme is addressing a recognised capacity gap in terms of planning, management, budgeting and monitoring at the sub national levels. Support has been provided to pilot a Township Education Management System (TEMIS) in all townships in Mon, a previously conflict affected state. This will allow all students in a state as well as in non-state controlled areas, to be counted and for reliable data to inform education management decisions. A ‘whole’ Mon state approach is ensuring capacity building of both state and non-state education actors to deliver quality education services. In a decision that demonstrates the value of the TEMIS approach, government has decided to scale up Township EMIS to State EMIS and a phased scale up of TEMIS has been proposed as a ‘quick win’ in the draft education plan 2014-15.

5.1.8. **Leveraging UNICEF’s convening role:** The CESR has served as a catalyst for MoE and development partners to form a closer, more collaborative partnership which has built trust, positive relations, shared ownership and joint commitment to results in the education sector. It has laid the foundations for medium to long term reform processes. By advocating for linkages between CESR personnel and members of the Education Committee in the Union Parliament, UNICEF is also contributing to building linkages between the CESR process and the development of a national comprehensive basic education law, as well as financing and policy for the sector. The MoE-led Joint Education Sector Working Group, which is co-led by UNICEF together with Australia, and the CESR offer an important model for other sectors at a pivotal time in Myanmar’s evolution towards broad reforms and aid effectiveness.

5.2 **Lessons Learned**

5.2.1 **Lessons from Sector Reforms:** Government leadership has been critical for the CESR, which has been a catalyst for fundamentally strengthening the way the ministry and the development partners work together, though coordination among the 17 Ministries involved in education has been challenging. Recent restructured engagement of the President’s Office in the education reform process is expected to provide the strengthened mandate to improve inter-ministerial communication and collaboration necessary to ensure broad-based government ownership of the proposed reforms. Stakeholder consultations on the recommendations for education reform identified by the CESR’s Rapid Assessment Report have signalled greater transparency and openness, though ongoing public communication throughout the process needs to be stronger. Broadening the consultations to include a wider range of stakeholders and enable more two-way dialogue will be critical in order to strengthen national support for the reform process. While the CESR was designed as a two-year,
systematic process to conduct the technical work needed to build a strong evidence base to inform policy development, it has also had to be responsive to emerging political pressures to deliver ‘quick wins’, or tangible results in a more immediate time frame. Prioritisation, sequencing and costing of the Rapid Assessment recommendations will be essential to develop a plan that matches capacity and resources, and is integrated into the government’s annual planning and budget cycle. Advocacy for integration of key UNICEF-MDEF supported activities in the Costed Education Sector Plans which are to be developed in Phase 3 of the CESR (including institutionalising teacher education initiatives, Non-Formal Primary Education Equivalency Programme and TEMIS scale up) will be important for sustainability. The programme will also need to find practical ways by which the reform process can more explicitly address inclusion, disability and peace building/conflict-sensitive approaches. The participation of a wider range of stakeholders in the design of ECD storybooks is one such example.

5.2.2 Adapting programme strategies: The programme will need to streamline, focus and prioritise. School based ECD quality will need to be improved and efforts will need to be made to ensure that expansion of services for the most disadvantaged is accompanied by commitment to maintaining quality. Involvement of parents and communities will need to be increased through the School Self-Assessment and School Investment Planning and partnership with the World Bank will be explored to scale this up. Partnerships with NGOs and development partners will need to be widened to expand service delivery for under-served population and to strengthen sector performance. Lessons from the delay in initiating education services in emergency setting such as Rakhine need to be taken into account. Capacity of government and UNICEF staff in conflict-sensitive education responses needs to be developed.

5.3 Proposed Programme Adjustments

The Programme has rightly put emphasis since its inception on the need to build a comprehensive framework for reform and invest in the education systems. Lessons learnt and new opportunities call, however, for a series of improvements in the education programme, and for implementation of system building and capacity development interventions recommended by the CESR and the ECCD policy:

5.3.1. Build ‘demand’ for inclusive education reforms and decentralised ‘supply capacity’: The programme has supported a range of ‘supply side’ interventions successfully but needs to do more to build ‘demand’ for inclusive and equitable education policy reforms that meet the needs of a ‘people-centred’ development processes. Towards this end, advocacy and partnerships with a range of stakeholders- parliamentarians, political parties, non-state actors, NGOS, media, parents and communities will be expanded. Building on the Mon ‘whole state’ approach, UNICEF, in partnerships with other actors, will continue to support capacity of duty bearers at state, district, township and school level to provide quality and equitable education services. Given the huge capacity gaps, especially in remote states and regions, this will be a priority. A continuing and complementary focus on building government capacity for policy and planning development will also be essential.
5.3.2. **Expand and deepen opportunities for peace building through education initiatives:** Education has an important role to play in targeting root causes of conflict, which often affects women and children disproportionately. In Myanmar, recognizing ethnic identity and language, supporting peace education and a curriculum that promotes tolerance, respect for diversity, gender equality and civic education can act as ‘connectors’ between groups. UNICEF needs to continue and expand its recently initiated efforts to ensure conflict-sensitive approach and peace building potential of education reforms and programming, linked to policy, planning and legislation development. Partnerships will also need to be fostered between non-state actors and state education authorities. Some examples include; creating linkages between the CESR and non-state actors, Myanmar Language Enrichment Programme, mainstreaming peace education in the curriculum, building evidence and knowledge on peace building through the ‘whole state’ approach in Mon. These efforts were endorsed by stakeholders at the final MTR strategy meeting.

5.3.3. **Strengthen Emergency Preparedness and Response:** In addition to providing support to Education in Emergencies, UNICEF needs to partner with the MoE to strengthen preparedness and resilience to disasters. Incorporating Education in Emergencies component in the Teachers’ Education curriculum will be perused as a means to building government skills in this area. Support to MoE will also be provided to set and regulate school construction standards and support capacity building of teachers and students in their immediate response to disasters. UNICEF, along with partners, will need to pilot in approaches to providing education services in conflict contexts in ways that are conflict sensitive.

6.1 Progress Review

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<tr>
<th>YCSD, HIV/AIDS &amp; Children and WASH Programme: Progress in Numbers</th>
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<tbody>
<tr>
<td>• 51% of pregnant women received 3 months dose of iron/folate at antenatal care as of August 2012&lt;sup&gt;a&lt;/sup&gt;</td>
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<tr>
<td>• 75% of newborn babies received a postnatal care visit within 2 days of birth in selected townships as of June 2012&lt;sup&gt;b&lt;/sup&gt;</td>
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<tr>
<td>• Over 320,000 cases of diarrhoea and acute respiratory infections/pneumonia amongst under-five children were treated in 200 townships during 2012&lt;sup&gt;b&lt;/sup&gt;</td>
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<tr>
<td>• 97% of one year old children were immunized against measles as of December 2012&lt;sup&gt;c&lt;/sup&gt;</td>
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<tr>
<td>• 96% of children 6-59 months received at least one high dose of Vitamin A supplement in the last 6 months as of August 2012&lt;sup&gt;a&lt;/sup&gt;</td>
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<tr>
<td>• 61% of pregnant women attending antenatal care were tested for HIV and received the result in targeted townships&lt;sup&gt;d&lt;/sup&gt;</td>
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<tr>
<td>• 84% of pregnant women identified HIV positive received anti-retrovirals for prevention of mother-to-child transmission of HIV in 20 targeted townships&lt;sup&gt;d&lt;/sup&gt;</td>
</tr>
<tr>
<td>• Community-Led Total Sanitation introduced in 15 townships&lt;sup&gt;e&lt;/sup&gt;</td>
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<tr>
<td>• 6,000 children with Severe Acute Malnutrition (SAM) and 11,400 children with moderate acute malnutrition (MAM) treated in Rakhine emergency&lt;sup&gt;f&lt;/sup&gt;</td>
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<tr>
<td>• 91% water coverage, and sanitation and hygiene promotion activities in Rakhine IDP camps but quality issues remain a concern&lt;sup&gt;f&lt;/sup&gt;</td>
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<tr>
<td>93,000 community members in 5 townships were reached with knowledge on seven key health-enhancing family and community practices through training of 12,500 women</td>
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Sources: <sup>a</sup>Ministry of Health report; <sup>b</sup>HMS; <sup>c</sup>Government report on mass measles campaign; <sup>d</sup>Program data for 2013 up to August; <sup>e</sup>Program monitoring reports; <sup>f</sup>Nutrition sector reports and WASH cluster reports (Note: Quality of data is a concern).

6.1.1 The YCSD programme had a significant vaccine and essential medicines supply focus. This was complemented by pilot approaches for community based service delivery in hard to reach areas, and technical assistance to develop, implement and monitor protocols and guidelines for maternal, neo natal and child health related protocols and standards. While progress is on track with respect to supplies and protocol development, the programme needs to shift from a disease focus towards supporting an integrated package of MNCH services. Data management remains weak posing a challenge for evidence-informed programming, including reporting on outcomes of interventions. The Presidential commitment to under 5 mortality reduction, and the setting up of the government led sector working group offers UNICEF, and sister UN agencies, an opportunity to develop results-focused partnerships in support of systems strengthening.

6.1.2 Vaccines and health commodities procurement: UNICEF has supported the national Expanded Programme of Immunisation in Myanmar since its inception. The programme continued to play a significant role in procurement
of vaccines, essential medicines and other health commodities for improving maternal, neonatal and child health. Support was provided to procure and maintain the vaccine cold chain system and manage this effectively through UNITRACK. Effective partnerships between government, WHO, GAVI and UNICEF resulted in government introducing, and partially co-financing, the pentavalent vaccine in 2012. With the opportunity to take a systems strengthening approach, UNICEF is exploring possibilities with other UN and health development agencies to support an integrated logistics management system.

6.1.3 Steps to Scaling up Nutrition: As a result of advocacy efforts, Myanmar signed up to the Scaling up Nutrition (SUN) initiative in mid-2013. The programme provided technical advice to develop and implement protocol and policies and procure supplements and therapeutic food. Building on its long term partnership with the government convened Myanmar Nutrition Technical Network, UNICEF will strengthen its leveraging role to foster intra-government, development partners, and academia and private sector partnerships to collectively achieve SUN objectives.

Specific examples of technical assistance include support to update the Strategy for Infant and Young Child Feeding (IYCF) and guidelines for implementing the nutrition surveillance system. The IYCF strategy provided the framework to draft rules for extending maternity leave and draft a strengthened local code for marketing of breast milk substitutes. Efforts are on-going to revise the guidelines for management of acute malnutrition along with government and CSO partners. Recognising a gap in its capacity building approach, UNICEF will work with partners to develop a structured approach to assessing use and application of new skills.

6.1.4 Preventing and managing fatal diseases amongst children: UNICEF continued to work in partnership with government to effectively prevent and treat common childhood illnesses (pneumonia, diarrhoea and malaria). The programme used a combination of supply inputs, capacity building for front line staff and development of community based management approaches to treat childhood illnesses. To reach children and pregnant women in hard-to-reach areas, UNICEF provides technical and operational support for the development of area-specific micro-plans that address geographic, climatic and security barriers. Recognising the role of behaviour change in child survival and development, UNICEF supported government to develop an overarching communication strategy focusing on MNCH, nutrition, EPI, malaria and environmental sanitation. The programme needs to move from its current input based reporting to an outcome based reporting structure.

6.1.5 Health services as peace dividend: Extending routine health services in conflict affected areas that have remained deprived of services can contribute to peace building. Breakthrough immunization services were provided in Wa self-administered region, a cease-fire area in Northern Shan State, as part of the sub-national response to the Vaccine Derived Polio Virus outbreak. In Rakhine state, support was provided to the government to resume, after a year’s hiatus, routine immunisation for all communities affected by the
conflict. Support for Government to establish partnerships resulted in piloting of prevention of mother-to-child transmission (of HIV/AIDS) interventions in government controlled areas in Kachin. These health services have provided early, tentative examples of how campaigns targeting all of the population can be delivered safely, building trust in government health workers –a component of long term peace building.

6.1.6 Getting to the ‘three zeros’\textsuperscript{12} : Working in partnership with UNAIDS, WHO, UNFPA and Global Fund, UNICEF has helped the government take several steps towards the ‘three zeros’. It advocated successfully for a commitment by the government to eliminate mother-to-child transmission of HIV by 2015. The government made a decision to adopt a treatment protocol that, unlike other options, provides life-long treatment to keep mothers alive. PMTCT services were scaled up to 78\% of townships in the country. However, only half the women receiving ante-natal care have been tested for HIV and at least 20\% do not access facilities at all. In order to increase the number of pregnant women tested, UNICEF supported the introduction of ‘point-of-care’ HIV testing. This is significant as Myanmar is one of the first few countries in Asia to roll out testing in communities. Efforts will continue to develop a robust monitoring and evaluation tool to assess effectiveness of the intervention. A national, multi-media behaviour change communication plan was rolled out to reduce stigma against children affected by HIV and increase the demand for HIV test during pregnancy.

6.1.7 Renewed focus on WASH as a means to reduce Child Mortality: UNICEF used Knowledge, Attitudes and Practices data to advocate successfully for the introduction of the Community-Led Total Sanitation approach. While so far only 25 villages have been of declared Open Defecation Free (the ultimate goal of the CLTS approach), the programme will continue to advocate for the scale up of this approach. Successful advocacy was also conducted to prioritize sanitation through a year-round National Sanitation Campaign instead of the very limited National Sanitation Week that was being implemented until 2012 with little impact on the national sanitation problem. The development of a comprehensive fluoride mitigation plan in collaboration with 4 ministries, each of which will play a role in its implementation is step in water quality improvement. As a result of sustained advocacy, the government committed to conduct a comprehensive WASH Sector Review with technical support led by UNICEF, along with the World Bank, JICA and ADB.

6.2 Lessons Learned

6.2.1 Move towards a health systems strengthening approach: The programme was designed to provide supply, capacity and technical support within a disease specific framework leading to ‘sub-sector silos’ and fragmentation of resources and efforts. With government now calling for a health systems strengthening approach, UNICEF has an opportunity to restructure its support to achieve sustainable child health outcomes working in partnership with

\textsuperscript{12} Three Zeros refers to the UNAIDS 2011 Goal of Getting to Zero: \underline{Zero} New HIV Infections, \underline{Zero} AIDS Related Deaths and \underline{Zero} Discrimination
UNAIDS, UNFPA, WHO, World Bank and other development partners, including NGOs.

6.2.2 **Equitable service delivery through Community Case Management (CCM) in hard to reach areas:** With government prioritising Universal Health Care, CCM can be used as an interim measure in remote, hard to reach areas to combat pneumonia, diarrhoea and malaria. While data is unreliable, it is well established that access to health infrastructure and services remains challenging, especially for communities in remote/rural areas and those affected by conflict. UNICEF has supported the government to initiate a CCM pilot and findings from this approach are being used to expand the approach in other townships. National Operational Guidelines for CCM have been developed. UNICEF, along with other partners will need to continue advocacy for a nationwide scale up of the model to ensure equitable access.

6.2.3 **Learning to be conflict sensitive and knowing when and how health services deliver peace dividends:** The YCSD and HIV/AIDS and children programme can contribute to peace building by extending services more into conflict-affected areas in a way that encourages interaction rather than undermining the relationships between state and non-state authorities. These efforts need to be synchronised with the peace process, in dialogue with the Myanmar Peace Centre, the line department, and other actors, informed by broad consultations, and carried out impartially. Conflict sensitivity will be important in conflict-affected areas, though the resources being distributed are less likely to be contested.

6.3 **Proposed Programme Adjustments**

The programme, designed to provide supply, capacity and technical support within a disease specific framework, now needs to focus on strengthening health systems in partnerships with government and other actors. It needs to place an increased emphasis on measuring impact of its interventions and build robust evidence on reaching the hardest to reach communities. Responding to lessons learned, the programme will:

6.3.1 **Prioritise a Health Systems based Approach:** UNICEF in partnership with UNAIDS, UNFPA and WHO will prioritise a health systems approach as a means to reaching the MDGs. This also responds to feedback that the UN health support has been fragmented thereby diluting its effectiveness. Government commitment to reducing under five mortality is evidenced by growing allocations for the health sector, commitment to Universal Health Care and signing up to the SUN initiative. UNICEF will make an incremental shift from service delivery to support evidence-informed system strengthening – using equity-based models and operational research in targeted areas to influence policy, planning, budgeting and strategy development that will inform the Government’s drive to equitably reduce young child mortality in Myanmar.

6.3.2 **Support to Scaling up Nutrition:** Building on its previous support, UNICEF, will use its convening role, to bring together a coalition of CSO, development partners, private sector and the media to support the government to plan and
implement the scaling up nutrition initiative. Using its comparative advantage of a multi-sectoral approach, it will help foster linkages between ECD, WASH, behaviour change to work collectively to reduce child malnutrition.

6.3.3. **Move from silo fragmented programmes to supporting integrated services:** Aligning itself with the government commitment to reduce under-5 mortality and scaling up nutrition, the YCSD programme needs to build national and subnational capacity to deliver integrated services and approaches. This will allow it to address inextricably linked determinants influencing maternal and child health outcomes. To this end, in terms of programme structure, the Health, Nutrition, HIV and WASH programmes will be consolidated under the YCSD programme. Not only is this ‘fit for purpose’ from a systems strengthening perspective but it will also allow UNICEF to align closely and strategically with the new integrated approach adopted by the Government to effectively reduce under-five mortality. This approach was endorsed by stakeholders at the final MTR strategy meeting.

6.3.4. **Shift from small scale WASH projects to ‘whole state’ Open Defecation Free approach:** The Government of Myanmar has institutionally recognised the significant role of Water, Sanitation and Hygiene interventions in reducing child mortality and morbidity by moving responsibility for sanitation to the health ministry. Responding to this opportunity, UNICEF will shift from fragmented water supply and sanitation programmes and support Community Approaches to Total Sanitation (CATS) to help states become ‘Open Defecation Free’. UNICEF will support government in conducting a sector Review, the first since 20 years, to develop a comprehensive and strategic plan for WASH in Myanmar.
7. Child Protection

7.1. Progress Review

Child Protection Programme: Progress in Numbers

- A total of 302,083 children (151,726 girls, and 150,357 boys) have been covered by child protection awareness raising activities at the community level since 2011 across 25 townships.
- Since 2011, 707 children (347 girls, 360 boys) have been identified by communities in 25 pilot townships as being in need of protection, and were referred and responded to by township level authorities with support from NGOs.
- 350 children (all boys) have been released from armed forces since 2011. A total of 140 have been provided with reintegration support.
- 13,641 children received child protection assistance in Rakhine during 2012.
- 3,803 girls and 3,481 boys received assistance in Kachin IDP camps between June 2011 to 2012.

7.1.1 A fragmented programmatic approach to child protection (in large part due to the constricted political and social situation in the country) is giving way to a more conducive environment for building inclusive systems that detect and respond to violence abuse and exploitation of children. To capitalize on the change momentum, advocacy, coordination, and investing in models that have government and NGO buy-in, and, can go to scale is critical. Legal frameworks are in need of revision. Over the last two years amendments to the child law have been drafted, but the process has been delayed at various stages. No overarching policy on child protection is in place; however, there is now significant space to draft such a policy framework. Minimum standards on residential care have been drafted, but are not yet adopted in part because there is no national legal and policy framework in which to situate the standards. The results framework developed at the beginning of the country programme cycle have been significantly revised to bring the work in line with the changing environment. Over the coming years, UNICEF will shift its strategic approach to capitalize on opportunities to work with government, UN agencies and civil society in new ways.

7.1.2 Action Plan on prevention and recruitment of children in Armed Conflict: Advocacy initiated in 2007, resulted in the Government of Myanmar and the UN signing a Plan of Action to prevent the recruitment and use of children by the Myanmar armed forces and to allow for the discharge and reintegration of those children. The Plan of Action signalled a strong commitment from the Tatmadaw to engage in a concrete, time-bound process with the inter-agency Country Task Force on Monitoring and Reporting (CTFMR) on preventing and stopping persistent grave child rights violations. The Action Plan, which reinforces UN leadership and inter-agency collaboration, is supporting the Government to fulfil criteria for delisting the Myanmar armed forces from the list of the Secretary General’s annual report on children and armed conflict. It also provides an unprecedented entry point
for the UN to engage with non-state armed groups currently on the Security-Council’s agenda for committing grave child rights violations. So far, 156 children and young adults have been released since the signing of the Plan of Action in June 2012. Reintegration of children in their communities is supported by Department of Social Welfare (DSW) and NGOs. CTFMR monitors are deployed regularly to verify compliance with the action plan. A landmark nationwide communication campaign has been agreed with the Tatmadaw to prevent the recruitment of children. Initial contact has been made with selected non-state actors to disseminate information on the Action Plan. Progress has been made and the commitment of the armed forces is strengthened, and results have accelerated recently. However, an extension of the Plan of Action for one year is recommended in order to continue the positive work and ensure commitments under the Plan are met. During the coming months and years expansion of engagement with Non State Actors will be needed in conjunction with the on-going cease-fire negotiations and wider political dialogue to ensure no child is recruited in Myanmar.

7.1.3 Initiated partnerships on Mine Risk Education: UNICEF used its convening role to set up the Mine Risk Education Working Group. The working group is chaired by the Ministry of Social Welfare, Relief and Resettlement and includes 7 ministries the UN, INGOs, NGOs and the Red Cross. The group has developed and endorsed draft National MRE standards which are with the cabinet for approval. It has also set up a process or approval of MRE materials and is establishing a sub-group on MRE in school settings. A series of advocacy meetings and workshops have been conducted with national and local authorities and non-state actors around the importance of mine risk education and the roles and responsibilities of different partners. To build evidence to inform MRE initiatives in the country, support has been provided to the Department of Social Welfare for the implementation of a Knowledge, Attitude and Practice (KAP) survey on mines. Both the expansion of the Action Plan to non-state areas and MRE could potentially contribute to the peace building agenda.

7.1.4 Child Protection case management introduced: Models for child protection case management at township level are yielding results. Alongside the Department of Social Welfare, UNICEF has mobilized Township Child Rights Committees (TCRCs) in 25 townships to date of which at least 18 (which was the target no. of townships) were found to be fully functional, i.e. operational, with coordination and referral mechanism in place, according to an assessment at the end of 2012. A significant related achievement is that the Department of Social Welfare has now appointed qualified social welfare officers in 20 of these 25 townships, thus surpassing the target no. of appointed social welfare officers at township level the programme had hoped for in the 2011-2015 period. By 2013, this emerging child protection system had identified, referred and followed up on over 1,000 child protection cases since 2009. The model, while promising, has constraints. It requires an increased number of DSW social welfare officers who are capacitated to conduct case management. The model also relies on intensive mobilization of village level child protection support groups – which is both costly and time intensive. In order to go to scale, a modified approach that includes other government sectors as well as
communities needs to be developed that takes into account scalability and cost-effectiveness.

7.1.5 Increased specialization on children in the justice sector: Progress has been possible in some areas of juvenile justice area in recent years although significant challenges remain. Collaboration with the Myanmar Police has led to the development of child-friendly police procedures. Building on this work, the first ever child protection units within the police have been established in Mandalay, Yangon and Nay Pyi Taw. However, there is no overarching policy or strategy, standard operating procedures or other guidance in place to frame their purpose and work, especially in relation to other departments. There are now 2 juvenile courts in the country – one in Yangon and one in Mandalay and UNICEF is supporting these courts to improve data management, as well as providing trainings to judges on child-sensitive court procedures. Over 50 judges have been trained in the CRC and Juvenile Justice. However, the trainings have thus far been ad-hoc and need to be institutionalized into existing training centres. Anecdotal evidence also strongly suggests that informal justice systems are used more frequently at local level than the formal system.

7.2 Lessons Learned

7.2.1. Child Protection programme needs re-conceptualising in the current context: The CP programme will shift further away from ad hoc activities to supporting policy and capacity building of government (especially DSW, but including others as well). There is considerably more room in the changing environment for UNICEF to convene and coordinate a range of diverse partners, at the national and sub-national level, to promote child protection. Policy level engagement and increasing the facilitative role will not mean disengaging with work on the ground, but will necessitate taking a different approach.

7.2.2. A strong link between social protection and child protection required to reduce child vulnerability: Given the high levels of poverty and vulnerability in Myanmar, social protection and child protection are essential to address the needs of the most vulnerable children, reduce inequities and increase resilience. Social protection focuses on the prevention of problems which, if they occur, often lead to child protection issues. Child protection focuses on the identification, response and referral of cases in need of protection (violence, abuse, exploitation). Both areas of work require a strong integrated, inter-sectoral response. Both interventions can effectively address the needs of children and families if implemented though the involvement of a dedicate cohort of professionals – social workers – and the application of principles of case management. Therefore, links with the emerging social protection strategy work have already been made.

7.2.3. A Strengthened Focus on Child Protection in Emergency: An increased number of child protection NGOs on the ground in conflict and emergency affected areas requires UNICEF to increase the focus on coordination, standards setting, and monitoring. In addition to ensuring protection
programmes are in place for the most vulnerable, UNICEF will work to ensure a joined up approach with government child protection systems work wherever possible and appropriate. UNICEF will also work in partnership with other organizations to set up protection monitoring systems where required.

7.3 Proposed Programme Adjustments

The proposed adjustments flow from the strategic shifts required to capitalize on opportunities to work with government, UN agencies and civil society in new ways. It includes facilitating interaction around the development of legal and policy frameworks; encouraging the development of a de-centralized detection, prevention and response mechanism that takes a partnership approach; and advocating at different levels to halt and reverse the proliferation of harmful forms of orphanage care. UNICEF is in a good position to lead from the middle on these developmental challenges. At the same time, Myanmar will continue to need support on the emergency child protection response, and on preventing and responding to grave violations against children, including the use and recruitment of children in the armed forces and armed groups. A robust process related impact assessment which takes the medium term view on change and reform is being explored to measure how the different levels of work (standards, policies, laws, strengthening of systems, social norms) can be measured in direct relationship to outcomes for children.

7.3.1 Focus on prevention of family separation: UNICEF will work to develop a partnership with key partners working on alternative care. It will support a government in developing a national policy on alternative care and support DSW to take leadership in preventing institutionalization of children. It will explore partnerships within the donor community to promote investments in social work, family support services, and family based alternative care and to limit the funds available for more institutional care. Following the 2014 census, evidence will be built on how many orphanages are in the country, their characteristics and dynamics. Evidence will also be collected on children in informal kinship care arrangements to inform future policy. UNICEF will develop a pilot program on family based alternatives to institutional care, potentially starting in DSW nurseries with emergency foster care for infants and toddlers. A white paper on the risks around the proliferation of orphanage care in Myanmar based on experiences across the region (Cambodia, Vietnam) and Proposed Programme Adjustments on how to address the issue will be prioritized to influence government policy and actions.

7.3.2 Focus on building capacity to detect, refer and respond to child abuse, neglect and exploitation: UNICEF Child Protection team will collaborate with Social Policy colleagues to support the development of a cross-sectoral child protection policy at national level with a clear vision of the child protection system; this policy will be linked with the social protection strategy. It will strengthen support to expanding DSW role in case management of child protection. Linkages will be made with education and health sectors that can identify and refer child protection cases – beginning with schools – in townships that have activated and functioning TCRCs and DSW case workers. Playing a coordinating role, UNICEF will pro-actively harmonize the approach to expansion of Community Based Child Protection work and
TCRC/DSW case workers to ensure promotion of that linkage of work between CBCP and government.

7.3.3 **Strengthen work across ministries and departments: Child Labor, Justice, Trafficking:** UNICEF will work in close partnership with ILO on the establishment of IPEC in Myanmar and to take a joined-up approach to supporting the ratification and implantation of ILO convention 182. UNICEF will create linkages around its justice work, particularly with UNDP and JICA, to use wider law reform forums as a means to promote a child friendly judicial system. The police force will continue to be supported in establishment of child protection units, including through intensive regional and international good practice exchange, training, and a policy to articulate the aim and objectives of the units. UNICEF will explore how to ensure a child friendly approach to children in contact with the law is applied across the country. Working closely with government, evidence will be built on how children come into contact with the justice system and their transition through it. Keeping in mind lessons from Cambodia, new work in the area of prevention of child sex tourism and sexual exploitation of children will be initiated building on Myanmar’s recent ratification of UN optional protocol on the sale of children, child prostitution and child pornography in January 2012.

7.3.4 **Develop the capacity of Justice and Social Work Case Management Professionals:** UNICEF will seek partnerships to continue its long term investment in capacity building for child protection by updating the social work diploma course it help set up to incorporate ASEAN and other relevant international best practice in its curriculum. However, the work will shift towards the more practical task of developing pre-service and in-service training for newly hired DSW staff who are anticipated to be hired and deployed to up to 66 townships in 2014. Advocacy with development partners to kick-start the long-term development of a social work B.A. and M.A. program will also be undertaken.

7.3.5 **Accelerate Work on Ending the Use and Recruitment of Children in Armed Forces and Armed Groups:** UNICEF will continue to monitor the commitments of the Action Plan and support the coordination of the CTFMR. It will work closely with other UN agencies and CSOs, taking into account the pace of the peace process, and initiate appropriate steps to open up engagement with non-state actors with the aim of developing an action plan. It will work with partners to develop a comprehensive reintegration strategy for all children in need of reintegration and develop a differentiated approach for reintegration of children from NSAs. As far as possible, reintegration work will be linked to DSW expanded capacity at township level to increase government accountability for child protection. In its reintegration approach, UNICEF will take into account issues of gender, masculinity and identity. Efforts will be made to strengthen MRM systems and linkages with peace building.
8. Social Policy, Monitoring and Evaluation

8.1 Progress Review

The Programme, designed in a context of limited access to information space for dialogue, introduced policy makers to a range of different social policy ideas; birth registration, social protection; knowledge on child rights, systematic data collection through MICS etc. With the launch of the reforms, the programme was able to capitalize on its partnership at the national level and presence at the field level to promote social protection, social budgeting and an understanding of regional child disparities. The programme faces a genuine risk of spreading itself too thin, given limited existing capacity in a context of exponentially increasing opportunities to influence social policies.

8.1.1. Supporting a national Social protection Strategy: In 2012, at a landmark international social protection conference organized by UNICEF, the President committed to develop a systems-based approach for the protection of vulnerable children. In line with the Nay Pi Taw Accord, UNICEF is assisting government to lead and coordinate support from international development partners to develop a multi-sectoral social protection strategy for Myanmar, starting from a common vision on the scope of social protection in the country and a master plan to finalize it. Principles of the Social Protection Floor and integrated social protection will frame the strategy. Along with resource redistribution (cash transfers), UNICEF is advocating for the introduction of professional case management as one of the key pillars of the social protection strategy, underlining the need to focus on multiple vulnerabilities and coping mechanisms of children and families. UNICEF will support the DSW to initiate a national multi-sectoral debate on an inclusive and sustainable strategy that promotes social cohesion in a country emerging from six decades of conflict. Key partners engaged in the social protection strategy development are the World Bank, ILO, WFP and Help Age.

8.1.2. Leading role in promoting data analysis on children and women (MICS and related studies): The 4th round of Multiple Indicator Cluster Survey and the Integrated Household Living Conditions Survey, conducted by UNDP in partnership with UNICEF in 2010, represent the only ‘relatively’ reliable source of information on the situation of children and women in the country. Dissemination events stimulating debate and discussion on regional comparisons were conducted at the national level and in all state and regions. The audience comprised National Parliamentarians, regional government, regional parliament and civil society. UNICEF Field Office staff was trained to use the data in their routine engagement with subnational governments, thus creating further local awareness and ownership of findings. Thematic studies based on the MICS and IHCLA have allowed the further identification of disparities and patterns of inequities. This will help to facilitate informed policy decision-making related to the ongoing sectoral reforms. The

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13 Multiple Indicator Cluster Survey (MICS) is an international household survey programme developed by UNICEF. Statistically sound, internationally comparable estimates of key indicators that are used to assess the situation of children and women in the areas of health, nutrition, education, child protection, water/sanitation and HIV/AIDS

14 Water & sanitation and nutrition, child and maternal health cases, out of school adolescents, urban poverty
programme’s extensive first-hand experience in data collection and analysis will contribute to the development of a national strategy on statistics through involvement in the recently set up National Statistics working group.

8.1.3. **Advocating for increased social investments for children:** With the initiation of the President’s third wave of economic and public administrative reforms, there has been a relative increase in budget transparency and openness. Leveraging this opportunity, advocacy on social investments for children in Myanmar has been initiated. An analysis of budget allocations in the social sector has been produced and disseminated. Opportunities for investment of natural resources income for the funding of social sector interventions that promote child rights have also been explored. The documents produced have been instrumental in initiating a dialogue and partnership with the Ministry of Finance. It will be important to capitalize on this momentum and systematically explore options for adequate and effective social investments in each sector (including continued advocacy for much-needed increases in allocations for the social welfare sector), with particular attention on the fiscal decentralization agenda. UNICEF will prioritise select production of analytical evidence on the implication of national and sub national economic and financial decisions (e.g. modeling cost of universal child benefits etc.) on the life of families and children. Evidence will be used to demonstrate possibility to increase and sustain social investments in a country blessed with an abundance of resources.

8.2 **Lessons Learned**

8.2.1 **Limited progress on supporting national capacity for Monitoring and Evaluation:** Limited progress was made on enhancing national capacity development on monitoring and evaluation. It was difficult to outline a coherent plan, especially for developing an evaluation strategy, in a context where public bodies are struggling to respond to the urgent demand for reform. UNICEF will focus on strengthening the monitoring of impacts and the evaluation of programmes it implements with partners, including in humanitarian settings.

8.3 **Proposed Programme Adjustments**

8.3.1 **Using opportunities to promote birth registration for all children.** Engagement with the Central Statistical Office to improve birth registration (funded by the European Union) presents the key entry point to enhance data systems to monitor the realization of children’s rights in Myanmar. The programme has undertaken a consultative and participatory review of the legal and policy provisions regulating birth registration. The aim is to open a national dialogue on the need to establish a civil registration system in line with international standards. The programme will also support the piloting of improved service delivery mechanisms for birth registration, with the use of appropriate IT technology. The right of all children to be registered at birth will be included as a provision in the revised Myanmar Child Law. Awareness

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15 Snapshot of Social Sector Public Budget Allocations and Spending in Myanmar
16 From Natural Resources to Human Capital: Practical, Feasible, Immediate Resourcing solutions for Myanmar’s children
will be raised amongst the public on the rights of children to be registered at birth.

### 8.3.2 Focus on children with disabilities

Disability issues have remained largely invisible in development policy and programming in Myanmar. To fill this gap, an in-depth situation analysis will be launched to generate evidence on children with disabilities, and enhance the promotion and protection of their rights. The full inclusion of children with disabilities will be promoted through the education reform and within social welfare services. UNICEF’s advocacy and partnerships aimed at increasing equal access to services, and social inclusion, for one of the most vulnerable and marginalized groups in Myanmar, will be accelerated. Strategic alliances will be built with CBOs promoting the rights of people with disabilities, private sector and with the Government agencies mandated to provide the required services.

### 8.3.3 Support to the development of local social plans

In support to the decentralization process, as agreed with national authorities, UNICEF has initiated a dialogue with Chin State for the development of a Local Social Plan. This plan will take as its starting point assessment of specific needs and vulnerabilities of the population. It will promote dialogue among social services and civil society in the provision of the most effective and sustainable response to such identified needs. Together with the social inclusion of the most vulnerable and marginalized families and children, the plan aims at fostering social cohesion, and promoting peace building. Linkages with UNDP, which is leading a decentralized governance reform initiative, are being explored.

### 8.3.4 Production of evidence to monitor the protection and promotion of children’s rights

The programme will focus on the production of evidence as an effective way to monitor the protection and promotion of children’s rights through initiatives such as household surveys (MICS/DHS), urban poverty studies, gender analyses etc. Data availability and quality is likely to improve with the Census and the Demographic Health Survey scheduled for 2014. This offers a unique opportunity for UNICEF to partner and include MICS modules on ECD, child protection and disability in the DHS questionnaire. UNICEF will also advocate for an expanded sample to cover urban areas to better understand urban child poverty and disparities. Through engagement on the National Strategy for Development of Statistics the programme will advocate for sex-disaggregated social sector data (social welfare, education, health, WASH). The programme will utilize the opening up of the telecom sector to harness technological innovation for data collection and monitoring.
9 Advocacy, Partnerships and Communication

9.1 For more than 60 years, UNICEF has been working to positively change the lives of Myanmar’s children. Over successive decades UNICEF’s efforts in Myanmar have primarily been programmatic. Communication possible under the previous context, which included public information services such as the provision of general reference material (books, pamphlets, brochures, human interest stories, program-focused media releases and backgronders, exhibitions, events and provision of information on the internet -website, Facebook) forms a good grounding for complementary, proactive, robust advocacy and communication going forward.

9.2 As earlier mentioned, the opening of society, the new roles played by Parliamentarians, the growing role of media and private sector, the empowerment of institutions at the decentralised levels, and the renewed dialogue with Non-State Actors, can all be harnessed to consolidate public support and commitment to child rights, including through priority investments for children. This section describes UNICEF’s renewed focus on advocacy, partnerships and communication to harness these opportunities and how this will be operationalized.

9.3 At this time in Myanmar, there are five prevalent issues around which political discourse and public debate is taking place. To effectively advocate for the rights of Myanmar’s children, UNICEF will clearly articulate the links between these dominant themes of concern and children.

9.3.1 The political and economic reform process - The past two years in Myanmar, have witnessed a time of considerable transformation. Military rule has all but ended, a new constitution has been put into place, and political and economic reforms have begun with a view to building democracy and a market-oriented economy. At the same, the Myanmar Government is working to end its international isolation - including through the removal of all sanctions – and to decentralize power to states/divisions, townships and villages. Quality of investment in human capital starts with children. Budgeting processes, socio-economic reforms and international exposure have consequences for Myanmar’s children. Democratization processes will need to ensure child and adolescent participation.

9.3.2 Peace processes and national reconciliation - Government, military and armed groups have come together to end the internal armed conflicts that have plagued Myanmar for decades. Nonetheless outbreaks of armed conflict continue including across Kachin State. Women and children are the first to suffer. The role of children, adolescents, and women as peace-builders can be enhanced in Myanmar.

9.3.3 Ongoing inter-communal violence - Inter-communal violence continues to threaten Rakhine State communities and elsewhere. Children are affected not only where they are a member of disadvantaged and discriminated social groupings but also more generally as Myanmar has an opportunity to find ‘Strength in Diversity’ and capitalize on the many varied skills and talents.
difference offers any given society. Falling to capitalize on this strength will represent missed opportunities for children and the country.

9.3.4 Ongoing natural disasters - Myanmar remains one of the world’s countries most vulnerable to natural disasters. Myanmar will need to successfully develop robust institutions capable of pre-planning, responding to and reducing the risk associated with such natural hazards while instituting current changes. Children are most vulnerable in situations of natural disaster.

9.3.5 The broader Asian Story - Myanmar’s transition is part of the larger Asian Story that has witnessed the dawn of the Asian Century where a continent is now entering perhaps its greatest ever period of peace and prosperity. It will be important that Myanmar is able to successfully integrate into the rest of Asia, which will bring great benefits to the children of Myanmar. Myanmar’s chairing of the Association of South East Asian Nations in 2014 is an important turning point in this regard. Regional success will dramatically enhance outcomes for Myanmar’s children.

9.4 Timely, strategic advocacy which capitalizes on current major changes can play a fundamental role in addressing the challenges children face including by bringing children to the forefront of the agenda of opinion and decision makers.

9.5 Some successes have been attained by the newly formed Myanmar Government as detailed in the Convention on the Rights of the Child Committee Report on Myanmar (2012). Within the overall context of the current situation in Myanmar, UNICEF will build upon these successes, seeking to further them in the interests of better respecting, protecting and promoting the rights of Myanmar’s children.

9.6 UNICEF’s advocacy will actively pursue changes in law, governance, policy and institutional functions. UNICEF will promote child rights and social justice; address imbalances, inequities and disparities; better ensure a healthy more fulfilling environment for Myanmar children; and further opportunities for democracy by promoting child, adolescent participation.

9.7 UNICEF’s new advocacy approach in Myanmar constitutes the process by which the Country Office will: engage, mobilize or persuade in the interests of bringing about institutional, legislative, policy and/or resourcing change for children. It will be results-based and seek to reach pre-agreed outcomes rather than undertaking advocacy processes for and of themselves.

9.8 The specific results UNICEF’s advocacy will drive for in Myanmar include:

- Increased capacity of governments and development partners, as duty bearers, to identify and respond to specific challenges related to the protection and promotion of the rights of children and gender equality;
- Strengthened political commitment and national capacity to legislate, develop and institute appropriate policies and procedures, and plan and budget for children;
- Increased national capacity to ensure availability of and access to services and to strengthened systems;
• Increased country capacity and delivery of services to protect and provide for children in both humanitarian and development settings;
• Enhanced enabling environments at the union, state/division, township and village level to realize child rights; and
• Enhanced support for children, families and communities to promote knowledge about and demand for services, and to better ensure genuine opportunities for participation.

9.9 Legislative change – UNICEF will work with parliamentarians and other key stakeholders towards better ensuring Myanmar’s domestic laws conform to international norms and standards with a special focus on the rights of children. This could include for example, ensuring the existing *Myanmar Child Law (1993)* is in full conformity with the CRC; ensuring all relevant domestic laws are in full conformity with a revised Child Law; assisting line ministries, the Attorney-General’s Department and Parliament with drafting new Bills in a way that positively influences outcomes for children; and training and awareness raising including by sharing lessons learnt and best practice examples of good law from other jurisdictions.

9.10 Policy change – UNICEF will advocate with Myanmar Government, civil society and private sector for better policies benefiting children. This includes by, for example, working with government on codes of conduct for industries to protect and support children's rights; introducing new thinking around social protection outcomes; assisting departments with planning exercises; working in partnership with government and donors on common agendas that will improve outcomes for children; and/or working through coordination mechanisms on large-scale policy interventions for Myanmar’s children.

9.11 Institutional change – UNICEF will work to better ensure Myanmar public institutions and private sector businesses more efficiently and effectively respect, protect and promote child rights. This includes, to the best of our ability, UNICEF working to ensure public institutions and private entities in Myanmar introduce, replicate, and innovate around international norms, standards and best practices. Institutional change includes, for example, opportunities for establishing effective mechanisms to develop, implement coordinate and monitor policy and legislation for children; strengthening partnerships between the Government and the Myanmar civil society; and encouraging businesses to adopt ethical practices and ensure supply chains do no harm to children; and/or setting up formal mechanisms for child and adolescent participation.

9.12 Resourcing change – UNICEF will work to increase government and international resources dedicated to outcomes for Myanmar’s children. This includes by working through existing budgeting procedures; partnering with International Financial Institutions such as the World Bank, IMF and Asian Development Bank to ensure budget allocations better support children; working to ensure line ministry budget requests adequately reflect the needs of Myanmar’s children; and leveraging resources of international development partners to prioritise children.
10 Conclusion

10.1 Following an inclusive and participatory process, the MTR has allowed the Government of the Republic of the Union of Myanmar and UNICEF to review progress under the CPAP and identify key recommendations for the way forward.

10.2 Both the Government and UNICEF recognize the limitation of the review due to the paucity of reliable data, and commit to work together to prioritise the gathering and analysis of data on children to keep track of their needs and vulnerabilities as well as measure progress in addressing those. Availability of quality data would also enable much needed evidence-based planning and policymaking.

10.3 In addition, it is recognized that key factors to the acceleration of results for children, including within the CPAP, will be the ability to:

- Support national road maps for long-term reforms and peacebuilding in line with international norms and standards;
- Advocate on the importance of child-centered social development for securing a healthy, prosperous and peaceful Myanmar;
- Build capacities at Union, State and Township levels to develop and implement plans and budgets for children;
- Support the development of policies and legislation that would enable wider and accelerated realization of child rights;
- Strengthen systems and make them accessible to the most disadvantaged, including through opportunities generated by decentralization;
- Partner with other key organisations and institutions, CSOs, Non-State Actors to reduce fragmentation and better protect children’s rights everywhere; and
- Leverage additional resources for children, from the Government, the private sector and the international community;
- Restructure the Country Programme of Cooperation results framework to be able to demonstrate UNICEF’s contribution to outcomes for children in Myanmar.

10.4 Taking into account the feedback received at the November 11 Final MTR Strategy Meeting, the GoM-UNICEF Programme of Cooperation 2011-2015 will be adjusted to:

i) Pursue greater multi-sectoral collaboration, both within Government and within UNICEF, in order to deliver on commitments to children that require holistic solutions and approaches including reduction of undernutrition, elimination of child labour and empowerment and engagement of adolescents.

ii) Systematically implement a comprehensive advocacy strategy to influence a range of decisionmakers such as Parliamentarians, political party members etc.

iii) Broaden partnerships to engage a range of actors at national and subnational levels (including parliamentarians, political parties, non-state actors, development partners, private sector etc.) to leverage political will and resources for children.

iv) Strive for better coordination of efforts with other UN agencies to reduce fragmentation and avoid duplication.

Building a new Myanmar – starts with children, and with the need to invest in and protect every child.
Annexes

Annex I: MTR Concept Note
Annex II: Terms of Reference for the Government of the Union of Myanmar and UNICEF MTR Organizing Committee
Annex III: List of Participants at Final MTR Strategy Meeting
Annex IV: Minutes of the Final MTR Strategy Meeting
Annex V: State/Regional Consultations on Decentralization and its Implications for Children
Annex VI: Internal Reflection Exercise on Peacebuilding and Conflict Sensitivity
Annex VII: MTR Review Note on Emergency Programming
Annex VIII: MTR Review Note on Disaster Risk Reduction
Annex IX: Findings of the Universal Periodic Review and CRC Committee
Annex X: Proposed Programme Adjustments
Annex XI: Programme Results Structure 2011-15
Annex XII: Draft Revised Results Structure (Work in Progress)
Annex XIII: Financial Utilization and Funding Sources