DELIVERING RESULTS FOR CHILDREN 2015

Programme of Cooperation between the Government of the Union of Myanmar and UNICEF
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**Foreword**

**Dear UNICEF partners,**

As Myanmar writes a new chapter in its history, and as the World adopts its Sustainable Development Goals agenda, UNICEF Myanmar’s report for 2015 “Delivering Results for Children” is an opportunity to reflect on progress and results within the 2011-2017 Programme of Cooperation between the Government of the Union of Myanmar and UNICEF.

This year, the cooperation has been driven by three main considerations: 1/ the importance of turning policies and plans into tangible changes in children’s lives, as longer term reforms proceed; 2/ the need to respond to humanitarian needs - arising from protracted situations and from the massive floods and landslides that affected the country, while further mainstreaming risk reductions strategies into development plans; and 3/ the central place of children in determining factors for Myanmar’s sustainable development - peace, social cohesion, and human rights.

Releases of children and young people from the armed forces have continued, with more than 146 released this year alone, and falling one child short of the 700 mark since the signing of the Joint Action Plan in 2012. In targeted townships, the proportion of children aged 3-5 years accessing early childhood facilities increased to 37.5% in 2015 from 17% in 2014. More than 95% of children aged 9 to 15 (approximately 13 million) were protected from measles and rubella through vaccination campaigns. More than 280,000 children in 27 townships benefitted from the first ever deployment of social work case managers. The proportion of children under 5 registered continued to increase, reaching 79% in 2015.

Thanks to the prepositioning of supplies and other preparedness activities with pre-established partnerships, UNICEF reached out to 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. The cash transfer modality envisaged in the National Social Protection Strategy was costed and integrated as the post flood and landslide needs assessment was undertaken.

As a result of effectively-built partnerships, and persistent dialogue, parties to the Nation-wide Ceasefire Agreement (NCA) committed to protect children in armed conflicts, in line with UN Resolution 1612, and negotiations are well advanced towards the signing of an Action Plan with 2 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 historic election campaigns, in partnership with the Union Election Commission, systematic advocacy by UNICEF and a coalition of Child Rights organisations convinced political parties to prioritise children. Those who did gained most votes, thus making children a clear winner of these elections. Amidst disturbing public calls fuelling inter-communal and religious tensions, the religious leaders of the 4 main faiths in the Inter-faith Platform for Children issued and disseminated joint calls to respect religious diversity.

UNICEF has strived to further diversify its sources of funding. Along with Australia and the EU, Japan and the 3 MDG fund have now become major partners for UNICEF, in addition to GAVI and UNICEF National Committees (most notably Korea and Australia). All recommendations from the 2014 audit were closed by May 2015, and the roll out of the Harmonised Approach to Cash Transfers accelerated among Government entities. UNICEF 8 Field Offices have moved further in developing, planning and monitoring capacities of States and Regions (Rakhine, Kachin, Chin, Mon, Kayin and Tanintharyi) for children. An Evaluation Specialist, was recruited to strengthen UNICEF’s evaluation capacity.

Progress is underway, yet challenges remain. An estimated 1.8 million children are not covered by the NCA, and restrictions of movement placed on thousands of children in Rakhine must be lifted to enable them to access adequate health care, good nutrition and education. Low indicators affect children from all communities in Rakhine and Chin and call for urgent and comprehensive solutions, so that the rights of all children to survival and development can be upheld. Government’s
budgets for health, education, and even more so for social protection remain too low to address inequities, and give every child the best start in life.

Every effort must be made to leverage new likely actors and resources for the benefit of children in Myanmar. UNICEF Myanmar should strive to strategically evaluate its own contributions and demonstrate its added value to Government and other partners, including donors. Strengthening the evidence base and finding the right balance in advocacy is necessary to ensure every child - regardless of ethnicity, sex, ability, socio-economic or citizenship status of their parents, and any other grounds - can enjoy their rights.

UNICEF Myanmar is thankful to its partners, including public and private donors, for their support. It must continuously improve to remain credible and keep their trust.

In Myanmar, as in the rest of the World, development will be sustainable only if it can be carried on by future generations. Hence the need to invest now in each and every one of those who will carry it in the future - in every child.

Bertrand Bainvel
UNICEF Representative to Myanmar
Improving the lives of children in their communities

In 2015, UNICEF and partners supported service delivery interventions to help fill essential gaps, improving the lives of millions of children in Myanmar. Key results include:

**CHILD PROTECTION:**
146 children and young people were released from the Armed Forces in 2015 and reintegrated with UNICEF support, constituting 20% of all releases since the signing of the 2012 Action Plan.

Three of the seven listed ethnic armed groups listed by the Secretary General’s Annual Report for use and recruitment have taken concrete steps towards signing an Action Plan with the Country Task Force on Monitoring and Reporting (CTFMR), co-chaired by UNICEF.

175 trafficked children were reintegrated successfully to their communities of origin, including those associated with the ‘Andaman Sea Boat Crisis’.

**EDUCATION:**
1,904 children aged 0-5 years benefited from access to facility-based Early Childhood Development (ECD) services; the percentage of schools in targeted townships that have ECD facilities for children aged 3-5 years, increased from 17% in 2014 to 37.5% in 2015.

A total of 5,655 children (53% female) aged 10-17 years, in 11 targeted townships, attended the Extended and Continuous Education and Learning (EXCEL) in remote communities. This represents an increase from 11,000 in 2012 to a total of 50,072 in 2015. 94.5% of the out-of-school adolescents who were reached completed EXCEL in targeted townships.

**HEALTH AND NUTRITION:**
95 per cent of the targeted 13.9 million children aged 9 to 15 years, including many hitherto unreached in remote or non-state controlled areas, were covered by the Measles and Rubella campaign.

94% of children were covered by bi-annual Vitamin A supplementation and deworming with UNICEF support, including through procurement, micro-planning and community mobilisation.

A total of 2,383,905 children benefited from micronutrients, including Vitamin B1, IFA and multiple micronutrient powders (MNP), in all townships of Rakhine, Chin, Kayin and Magway. A total of 60,638 children aged 6-23 months benefitted from multiple micronutrient powders this year in Magway and Kayin regions (50% coverage), which is double the number of children reached last year.

**WATER, SANITATION AND HYGIENE (WASH):**
112 rural villages (12,250 people) have benefitted from the introduction and implementation of community managed household water metering system. This has not only provided access to safe water supply to rural communities but also generated evidence on new ways of thinking about rural water supply schemes.

The Community Led Total Sanitation (CLTS) programme was extended to an additional 337 villages in 8 Townships of 6 States and Regions covering 263,356 people from 50,270 households. Out of 337 targeted villages, 150 were verified as Open Defecation Free (ODF) communities.

**BIRTH REGISTRATION:**
179,000 children under five were registered, increasing the national registration coverage to 79%, as a result of a registration campaign organized in May in 40 townships in Kayin, Kayah and Irrawaddy. Following the partnership between UNICEF and the Ministry of National Planning Economic and Development, the Vital Registration Electronic Platform was launched, starting the process of creating a system of electronic permanent archiving of vital registration at the Union level, all States/Regions and Districts.

1. The Myanmar Quality Basic Education Programme (QBEP) is supported by the Multi Donor Education Fund (MDEF), comprising Australia, Denmark, the European Union, Norway and the United Kingdom, and by UNICEF in partnership with the Government of Myanmar.
Improving the lives of children in their communities

Quick facts and figures

- **283,362** Children covered by public social welfare systems
- **175** trafficked children were reintegrated
- **94%** of children under five receiving at least one high dose of Vit A in the last six months (55.9% in 2009)
- **88%** of one year old children immunised with DPT/Penta3
- **94.8%** of children between 2-5 years receiving at least once deworming tablet (70% in 2009)
- **97%** of HIV-positive pregnant women in PMTCT- covered areas received ART to reduce the risk of mother-to-child transmission
- **150 villages** certified as open defecation free (25 villages in 2013)
- **1,148,212** students provided with essential supplies and textbooks, including humanitarian support.
- **37.5%** of schools in targeted townships with ECD facilities for 3-5 year olds (10% in 2012)
- **1,148,212** students provided with essential supplies and textbooks, including humanitarian support.
- **79%** of pregnant women receiving antenatal care were tested for HIV and know their result
- **79%** of birth registration coverage
- **97% of HIV-positive pregnant women in PMTCT-covered areas received ART to reduce the risk of mother-to-child transmission
- **553** former child soldiers reunified and reintegrated since 2012
- **103,480** children (0-5 years) in targeted townships accessing facility-based ECD services (8,300 in 2012)
- **79% of pregnant women receiving antenatal care were tested for HIV and know their result
- **94.8% of children between 2-5 years receiving at least once deworming tablet (70% in 2009)
- **13.2 million children covered by the measles and rubella campaign
- **1,148,212** students provided with essential supplies and textbooks, including humanitarian support.
- **2,383,905** children benefitted from micronutrients in all townships of Rakhine, Chin, Kayin and Magway
- **13.2 million children covered by the measles and rubella campaign
- **1,148,212** students provided with essential supplies and textbooks, including humanitarian support.
- **2,383,905** children benefitted from micronutrients in all townships of Rakhine, Chin, Kayin and Magway
UNICEF has continued providing humanitarian assistance to conflict and communal violence-affected populations across Rakhine, Kachin and northern Shan states, where at least 96,000 children continue to be displaced. In addition to these protracted crises, UNICEF also supported victims of massive flooding, landslides and coastal winds in July/August, which displaced nearly 1.7 million people, including over 578,000 children. Donors have so far provided USD $11,033,586 to fund UNICEF’s humanitarian response in Myanmar, amounting to 24% of the USD $46.6 million Humanitarian Action for Children (HAC) appeal.

Rising to humanitarian challenges

**Fast facts:**

**HEALTH AND NUTRITION:** Around 360,000 children, mainly from Rakhine, received two rounds of polio vaccination in December, as part of a mass polio vaccination campaign that will continue in January/February 2016. 86,285 people had access to basic maternal, newborn and child health services. Additionally, 5,095 people, including women and children, received basic health services in flood affected areas from August to November 2015.

9,443 children with severe acute malnutrition were treated with a cure rate of 80.7%. More than 20,000 children under five and 10,034 pregnant and lactating women benefitted from multiple micronutrient supplementation. Additionally, 11,836 pregnant and lactating women received infant and young child counselling support. MoH’s rapid response to strengthen nutrition screening and micronutrient supplementation in 21 worst flood affected townships reached around 53,876 children and mothers with UNICEF support.

**WASH:** 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 INGOs and local NGOs, UNICEF reached 21% (52,538 people) of the overall population reached in Rakhine and 40% (34,356 people) in Kachin. UNICEF together with partners was able to provide an immediate, substantial response to 173,701 people affected by the floods with lifesaving WASH supplies and services.

**EDUCATION:** In Rakhine, UNICEF and its partners 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 in IDP camps/communities, host communities, and surrounding villages. An additional 3,400 adolescents were reached with the construction of non-formal Temporary Learning Spaces (TLS), provision of essential learning supplies, recruitment and training of volunteer teachers/community facilitators, and training of school committee members.

In Kachin, more than 7,100 children continue to access education in IDP camps and conflict-affected communities and benefit from the provision of teaching learning supplies. UNICEF and partners extended support to around 3,000 students at post-primary level with focus on strengthening volunteer teacher training on child rights, inclusion, and life-skills education, as well as parental education through mobilization of school committees.

In the aftermath of the floods and landslides 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 supported the provision of 46 temporary school tents, construction of two TLS, and rehabilitation of 36 schools.

**CHILD PROTECTION:** Due to the recent floods, Child protection risks have increased, and UNICEF quickly scaled up its partnership with the DSW to enable case management services to over 33,000 children, and strengthened its relationship with the Myanmar Police’s Anti-Trafficking Unit to spread key messages to mitigate trafficking risks. 40,000 children received psychosocial support.
Community-based child protection mechanisms such as Child Protection Groups were strengthened in emergency-affected areas to scale-up prevention and ensure immediate referrals of children survivors or at risk of violence, exploitation and abuse. Over 70,000 children received protection through this work. To further strengthen coverage, quality and responsiveness, UNICEF hired and deployed a national officer to Northern Rakhine State in 2015 based on the high vulnerabilities in this area.

**DISASTER RISK REDUCTION (DRR):** UNICEF is participating in the ongoing review of Environmental Impact Assessment Guidelines to ensure that the specific vulnerabilities of children are considered. Ahead of the 2015 Paris Climate Conference, UNICEF worked 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.

Despite progress, Myanmar remains one the poorest countries in South East Asia and the most exposed to natural disasters. The 2015 floods affected 12 of the country’s 14 States and caused severe destruction of social sector infrastructure, including schools and health facilities (USD$ 45,3M of losses). Chin State was especially hard-hit with production losses equivalent to 14% of the state’s gross product. From the onset, UNICEF was active in the four officially-declared disaster zones (Chin and Rakhine states, and Sagaing and Magway regions), participated in most inter-agency assessment missions, and led the mission in Chin State. Information on the floods’ impact obtained through these assessments has highlighted the need to ‘build back better’ as a way to reduce the vulnerability of both people and infrastructure to future disasters, and has encouraged UNICEF to promote effective and sustainable recovery efforts.

**Mainstreaming DRR into development strategies**

DRR activities and approaches are now mainstreamed in UNICEF’s sectors and the priorities for 2015-2017 are well defined. In education, UNICEF and partners will ensure that DRR is effectively integrated in the basic and teacher education curricula, support education disaster management planning and promote safer construction. UNICEF is supporting DSW to strengthen public awareness of child protection concerns in emergencies, and in linking community DRR volunteers and case management services. In WASH, UNICEF is working in strengthening water security programming and ensuring that national strategies and standards are climate resilient, whilst in health, the focus will be on supporting MoH’s supply and cold chain management, and strengthening planning and response mechanisms with a focus on children’s needs.
Rising to humanitarian challenges
Quick facts and figures

86,285 people had access to basic maternal, newborn and child health services

40,000 children received psychosocial support after the floods

Over 70,000 children received protection through Community-based child protection mechanisms

136,188 children under five were immunised against polio

30,000 primary school-age children access education in IDP camps, host communities, and surrounding villages in Rakhine

More than 20,000 children under five and 10,034 pregnant and lactating women benefitted from multiple micronutrient supplementation

136,188 people in humanitarian situations wash their hands with soap before eating meals and after using the toilet

360,000 children under five were immunised against polio

127,543 people in humanitarian situations with access to sufficient safe water

108,047 people in humanitarian situations with access to appropriate sanitation facilities

46 temporary school tents provided, construction of 2 TLS, and rehabilitation of 36 schools in floods-affected areas
Reforms represent a unique opportunity to generate new, at scale, results for children. Key policy and legislative advances for children have benefitted from UNICEF’s support.

**CHILD PROTECTION:**
As a result of coordinated advocacy, the Government signed the Optional Protocol to the Convention on the Rights of Child on the involvement of children in armed conflict.

UNICEF supported a national consultation with civil society on the draft Child Law, the first open consultation with civil society to take place on legislation in recent history. An improved final version is now ready to be submitted to Parliament with significant national awareness and buy-in.

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.

The National Ceasefire Agreement (NCA), which was signed by 8 parties to conflict in 2015, contained key provisions on children and armed conflict as a result of UNICEF advocacy with the Government, the Myanmar Peace Center and ethnic armed groups.

**SOCIAL PROTECTION:**
To support the building of an Integrated Social Protection System, UNICEF rolled out Local Social Planning in Tanintharyi Region to identify programmes for the most vulnerable children. The regional government included these interventions in its FY2016/17 budget submission.

**EDUCATION:**
UNICEF’s technical assistance has strengthened gender mainstreaming in Myanmar’s first draft National Education Sector Plan and built government capacity for integrating gender analysis in planning, monitoring and curriculum development.

The Comprehensive Education Sector Review is completing its third and final phase, resulting in the development of a draft five-year National Education Sector Plan to be reviewed for implementation from the next academic year.

The Basic Education Law, which was submitted to Parliament in 2015, has a section on Non Formal Primary Education (NFPE), and drafting of the National NFPE Policy has begun to guide implementation, accreditation and the role of civil society and private sector providers.

UNICEF is taking a leadership role in the development of a national and state-level multilingual education policy to meet the needs of all ethno-linguistic groups for learning of mother-tongue, national, and international languages, alleviating conflict and promoting social cohesion.

**HEALTH AND NUTRITION:**
Through technical support from UNICEF and WHO, the MoH developed the National Strategic Plan 2015-18 for newborn and child health, incorporating commitments towards the Global Strategy for Women’s and Children’s Health and Every Woman Every Child movement and building on Every Newborn Action Plan and A Promise Renewed global partnerships.

Advocacy contributed to the MoH developing an integrated Reproductive, Maternal, Newborn, Child, and Adolescent Health plus disease control (RMNCAH+) strategic plan.

Technical support resulted in the National Strategic Plan of HIV and AIDS 2016-2018 to have a focus on ensuring that all pregnant women in the country have access to HIV testing services at point-of-care and, if infected, have access to antiretroviral therapy (ART).

**WASH:**
Myanmar’s first Rural WASH Strategy and Investment Plan was developed with UNICEF support, and is expected to contribute towards increased budget allocations to reach the goal of “sanitation and water for all by 2030”. Other policy achievements include a review of the Community-Led Total Sanitation (CLTS) approach and development of National Standards for WASH in schools (WinS).

**GENDER:**
UNICEF’s Gender Working Group has played a key role, 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, CEDAW reporting, and technical support for the Government’s Gender Situation Analysis, which synthesizes evidence of gender disparities nationwide.
Strong systems are needed to deliver good quality services and improve children’s lives. UNICEF has cooperated with the Government to strengthen Education, Social, and Health government systems:

**CHILD PROTECTION:**

Through continued advocacy, 2-3 full-time social work case managers were deployed to the Department of Social Welfare (DSW) offices in 27 Townships in Myanmar. In 19 townships, UNICEF also supported NGO partners to coordinate with government, adding an additional 71 NGO social workers to work alongside the case managers.

In cooperation with the training school of the Supreme Court, UNICEF 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. UNICEF worked with the Myanmar Police Force (MPF) to train 135 police in child friendly procedures.

In addition to training another 64 labour inspectors, UNICEF used the entry point of the child labour monitoring checklist to prepare and conduct a stakeholder workshop with government partners on the initiation of a pilot child labour project in Hlan Tha Yar Township in Yangon, a heavily industrialized area.

The Mine Risk Working Groups (MRWG) at National and State Levels (co-Chaired by UNICEF and the Government) field tested and finalized the common toolkit on Mine Risk Education based on the KAP study findings. The toolkit will be rolled out by all mine action partners in 2016 through State level working group platforms in Kachin and Kayah.

**SOCIAL PROTECTION:**

With collaboration among social policy, child protection and emergency teams, UNICEF and partners supported the Government to formulate a costed social protection response to the 2015 floods, 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.

**EDUCATION:**

UNICEF contributed to enhancing social cohesion through the Peacebuilding, Education and Advocacy (PBEA) initiative. PBEA bridged non-state schools being operated by ethnic armed groups with the formal government school system through joint head teacher 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.

14,047 primary teachers received training in 2015; over 188,000 students received textbooks and essential learning materials; and 677 teachers were trained to implement a secondary life-skills curriculum. The combined Language Enrichment Programme and Child-Friendly Space (CFS) Refresher face-to-face training was introduced to 4,180 teachers from 23 target townships in October 2015 and teachers from 6 townships from Rakhine State received the training in December 2015.

With UNICEF support, the MoE initiated the new curriculum for Kindergarten for 5 year olds which is consider for every primary school nationally (45,000 in total) in 2016. In partnership with the MoE and 65 language and cultural committees, Kindergarten Guides for teachers were developed in 65 ethnic languages in preparation for a potential national roll out in 2016.

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.
**WASH:**

112 Department of Rural Development (DRD) engineers, community facilitators and technical facilitators were trained for testing the priority parameters of the National Drinking Water Quality Standard. A total of 47 trainees from Government Departments and NGO representatives were trained for testing microbiological contamination, and chlorination methods in Kachin state. UNICEF also provided township level WASH planning training to 32 Government Department staff members.

Over 380 teachers received training and 6,389 students became members of Than Shin Star clubs to practice handwashing and become agents of change for hygiene promotion.

**HEALTH AND NUTRITION:**
UNICEF supported the Ministry of Health (MoH) to increase its vaccine storage capacity almost four-fold from 82,993 litres in 2014 to 312,399 litres in 2015. UNICEF procured more than 500 Direct Solar Driver vaccine refrigerators, which are more environmentally friendly and can be installed in remote areas without requiring a trained technician.

With a focus on improving the 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 is being tested in three hospitals. This electronic patient management system facilitates medical follow up, treatment adherence and generates evidence for planning, and monitoring quality of care in order to improve the system.

With UNICEF technical support, MoH engaged men in prevention of mother-to-child transmission of HIV, which resulted in more men and pregnant women coming forward for HIV testing.

UNICEF supported 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. As a result of the training, health staff reached around 440,000 caregivers of children under 5 with nutrition messages.

UNICEF supported MoH to update the Baby-Friendly Hospital Initiative module and train 150 hospital managers and clinicians from 50% of the largest tertiary hospitals in Myanmar.

UNICEF supported MoH to accelerate the update of guidelines, protocols and standardised job-aids, including for supportive supervision and monitoring, for community infant and young child feeding (cIYCF) and Integrated Management of Acute Malnutrition (IMAM). Supplies, equipment and materials were procured to reach 2,855 health workers in the first quarter of 2016.

UNICEF and MoH facilitated the first sub-national multi-stakeholder workshop on nutrition in Magway, involving over 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.

**BIRTH REGISTRATION:**
As a result of a birth Registration study trip to the Philippines, 10 Myanmar government officials from 6 departments gained valuable insights into policies and legal frameworks, organizational structures, and roles of government agencies related to birth registration processes and mechanisms at national and local levels and the use of technology in birth registration.
Strengthening government systems

Quick facts and figures

- Vaccine storage capacity - from 82,993 litres in 2014 to 312,399 litres in 2015

- 512 (out of 1150) Judges trained since 2009

- 14,047 primary teachers trained in 2015

- 2,500 basic health staff in Magway and Rakhine trained on interpersonal communication and counselling

- 440,000 caregivers of children U5 reached with nutrition messages

- 112 DRD engineers, community facilitators and technical facilitators trained on water quality testing

- 135 police officers trained in child-friendly procedures

- Kindergarten Guides for teachers developed in 65 ethnic languages

- 380 teachers and 6,389 students trained to become agents of change for hygiene promotion
Evidence is key to guide action for children. The release of the main results of the 2014 Census helped the Government, UNICEF and partners to better understand the situation of children and find solutions to improve their lives.

PUBLIC FINANCE FOR CHILDREN:
Using the 2014 Myanmar Census data, UNICEF analysed the specific situation of children and used the findings as a platform for policy dialogue on increased social investments in children.

UNICEF together with Spectrum NGO, developed the first publicly available budget guide for children and youth - to raise public awareness of government spending on social sectors.

The situation analysis of children with disabilities provided preliminary findings for the International Day of Persons with Disabilities. UNICEF supported the certification system for disabilities by developing a tool for non-medical personnel to identify impairments.

HEALTH AND NUTRITION:
The capacity of the health system was built to analyse immunization and prevention of mother-to-child transmission (PMTCT) of HIV, stratify townships based on performance, prioritize geographic areas of focus, plan, and develop strategies to reach every community. As a result, HIV testing rate increased from 65% in 2014 to 79% of pregnant women attending antenatal care services in 2015.

Real-time Monitoring & Information Systems: deployment of CommCare and RapidPro was initiated to improve real-time data collection, two-way communication, and coordination across selected sectors. The initial focus is on the Health sector, with 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, HIV and nutrition interventions. The application will be introduced for scale-up in early 2016.

Using Census data and the MoH study on causes of under-five mortality, UNICEF analysed patterns of under-five child mortality and ranked states/regions according to mortality and disease burden rates. As a result, the MoH targeted states/regions with the highest rates, directing intensive planning and programming to reduce child mortality.

Through UNICEF support, the MoH introduced a Child Death Surveillance and Response system providing more comprehensive and reliable information on child survival, and therefore contributing to child mortality reductions in Myanmar. It will be initially implemented in 30 townships.

UNICEF supported MoH in planning the national micronutrient and food consumption survey to be rolled-out in 2016.

WASH:
The WASH sector situation analysis, completed in 2014, was officially endorsed by the Ministry of Health (MoH) in 2015. It includes medium and long term recommended actions, some of which are already being implemented.

EDUCATION:
To support the education sector reform 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 has also supported 7 major education studies and evaluations to strengthen the evidence base for policy reform.
Rakhine

Held on 18 December in the presence of the Chief Minister, the 2nd Annual Review of the 2014-15 Rakhine Plan for Children acknowledged the importance of reaching out to all children from all communities in the 17 townships through various context-based interventions.

Fast facts on UNICEF’s work in Rakhine:

- The first-ever case management system was established under the DSW, and rolled out in 2 townships to better protect all children against violence, abuse and trafficking. More than 14,000 persons have now a better understanding of violations and reporting mechanisms. By expanding the case management system into conflict-affected areas, UNICEF could assisted more than 500 additional children and enrolled 11,000 children in psycho-social activities;

- In education, UNICEF expanded its work to 6 new townships through the Township Educational Management System (TEMIS) and Township Education Improvement Plan (TEIP) processes that will be expanded to all 17 Townships starting in 2016. In addition, more than 130,000 Grade-1 students now benefit from a more child-focused pedagogy with improved teaching practice and enhanced teaching materials. UNICEF piloted an evaluation to Measure Learning Achievements with one township education team to raise the very low achievements across the State. An additional 300,000 students in government and monastic schools, and TLS benefited from receiving essential learning materials, including when those were destroyed by floods.

- In partnership with the state administration, universal access to quality maternal, new born and child health care services has been promoted. Around 930,000 children aged 0-15 received the measles and rubella vaccine during the national campaign supported by UNICEF. Over 12,000 severely acute malnourished children received treatment, 271,600 children aged 6-59 months received vitamin A doses across Rakhine; and basic health staff in 17 townships improved their inter-personal communication skills.

- UNICEF’s response in WASH is another example of a combined approach. Its humanitarian assistance reached 84,049 flood-affected people and 36,850 displaced persons living in and near IDP camps with immediate life-saving WASH support, while 32,500 people in rural villages could access improved water sources. Across the State, more than 350,000 people improved their knowledge in hygiene practices, and 2 villages achieved the nationally approved “Open defecation Free” status. Close to 10,000 school children gained better hygiene knowledge and improved WASH facilities in their schools.

Way Forward in 2016-2017:

UNICEF looks forward to further building on gains from the 2014-2015 Rakhine State Plan for Children, and contributing to improve access and quality of basic services in health, nutrition, education, water & sanitation, and protection to all children living in Rakhine State regardless of their ethnic, religious background or their parents’ citizenship status. Through better evidence, UNICEF will strengthen its advocacy to lift restrictions on freedom of movement that severely undermine children’s access to quality services.

In 2015, UNICEF has also initiated dialogue with religious leaders from all major faith groups in order to bring these together mirroring the national Inter Faith Platform at Rakhine State level to advocate for child rights and social cohesion among all communities. This work will continue and be expanded in 2016-17, particularly to ensure equitable access to health and nutrition services with immunization as an entry-point, and in education.

Through a Whole State Approach in education, and health and nutrition specifically, UNICEF will support all 17 Townships with capacity building initiatives, supplies, and mentoring to enable service providers at all levels to deliver better quality services to more children.
Kachin

Kachin is the state that has been most affected by conflict in recent years, where around 100,000 people continue to be displaced. The resurgence of conflict since 2011 has caused many victims and interrupted services and livelihoods. Only a few actors are able to provide social services in areas affected by the conflict, limiting service quality and reach.

Fast facts on UNICEF’s work in Kachin:

- Supporting routine immunisation and nation-wide immunisation campaigns, benefitting children across conflict lines;
- Advocating for the protection of children affected by armed conflict and educating key actors and communities about the risks that land mines and unexploded ordnances are posing, especially for children;
- Training health staff, especially from remote areas, to improve maternal, newborn and child health services.

Shan

Shan has the largest population of children, covering 55 townships and five of the country’s six self-administered areas of ethnic minority groups. To this day, many children in Shan are affected by violent conflict between ethnic armed groups and the government and are deprived of essential services. UNICEF is partnering closely not only with the Shan but also with the Kayah authorities. At the same time, UNICEF is reaching out to other actors still active in the two states and the self-administered areas to make sure interventions can reach all children, regardless where they live.

Fast facts on UNICEF’s work in Shan and Kayah:

- Training basic health staff to ensure they are able to provide counselling and testing services for the prevention of mother to child transmission of HIV/AIDS;
- Supporting birth registration campaigns to ensure all children receive birth certificates and are registered, enabling them to access and participate in social services;
- Dialoguing with non-state actors to end the recruitment of child soldiers and other Grave Violations against children.
Chin

Chin is Myanmar’s least developed and most remote state. Almost three quarters of its population live in poverty and its children achieve the lowest health and nutrition outcomes in the whole country. The flood disaster of July and August 2015 has put a further burden on an already poor and deprived population. More than 18,000 people have been displaced, over 3,700 houses have been completely destroyed and entire communities were forced to re-build their villages in different locations because landslides have completely devastated their old homes. The devastation was felt acutely in terms of contaminated water sources and destroyed or damaged schools, hospitals and sanitation facilities.

Fast facts on UNICEF’s work in Chin:

- Training for community-based health volunteers to enable them to provide life-saving newborn care.
- Supporting the construction and renovation of Early-Childhood Development (ECD) centres and training for ECD teachers to allow children to access quality services.
- Helping re-establish and improve education and health services and water supply interrupted by the flood disaster.

South-East

UNICEF is supporting the almost 2 million children living in the South-East (Mon, Kayin, Tanintharyi) through its Field Office in Mawlamyine (Mon) and Sub-Office in Dawei (Tanintharyi). The economic and social situation of children in Mon state is most influenced by migrant workers with many parents leaving to work in Thailand. Almost 2 in 5 children in Mon live without a biological parent, the highest rate in Myanmar, and more than a quarter of households are headed by a woman. Another concern are the high rates of children dropping out of school.

Kayin is among the most conflict-affected states in Myanmar, with several Non-State Actors maintaining a parallel administration and service delivery structure to the official Government authorities. UNICEF contributes to peacebuilding in the South-East by strengthening non-discriminatory education, health and child protection services as well as coordinating distinct Government and Non-State Actor service systems.

Fast facts on UNICEF’s work in the south-east:

- Training Government and Non-State Actor education administrators and teachers together to improve the quality of education and build professional relationships between both sides;
- Empowering communities across the South-East to improve their sanitation facilities through Community-Led Total Sanitation;
- Ensuring that more and more children affected by violence or abuse have access to social support services and are protected through building the capacity and providing on-the-job support to Government child protection case managers;
- Advocating for participatory and child-focused planning across health, education and social welfare.
Dry Zone

UNICEF is supporting the over 5 million children living in the Dry Zone (Mandalay, Sagaing, Magway) through its Field Office in Mandalay. Although it is one of the more developed regions in Myanmar, the poorest and most vulnerable children live in 25% of Mandalay’s households. Sagaing’s townships at the region’s northern border are among the most remote and difficult to reach in Myanmar. Families living in Sagaing were hit hard by the August 2015 floods that destroyed livelihoods and infrastructure across the region. Located in the heart of the dry-zone, Magway is the region in Myanmar where families most frequently face water scarcity and particularly need assistance to ensure regular supply of clean water—essential for children’s health and nutrition.

**Fast facts on UNICEF’s work in the dry zone:**

- Supporting the expansion of water supply and responsible water use through water metering and by adding new water boreholes;
- Advocating for integrated planning essential to improve children’s nutrition, by convening Government and development partners in a common planning exercise;
- Making sure children are ready for school by supporting the expansion of Early Childhood Development centres;
- Supporting Department of Social Welfare child protection case managers respond to and address cases of violence, abuse and neglect of children by providing on-the-job support, training, and materials.
Partnerships are critical to delivering results for children and to realising their rights. UNICEF expanded its partnership with Parliamentarians to ensure children’s rights are promoted across all Parliament’s work and to develop politicians as champions for children in Myanmar. UNICEF provided capacity building through a series of workshops on their roles in: shaping and enforcing laws, oversight, scrutinising the budget from a child rights perspective, and representing the interests and voices of children in their constituencies.

UNICEF established a partnership with the Union Election Commission and the NGOs Child Rights Working Group to engage with all 91 political parties contesting in the historic Myanmar elections of 2015, to ensure child rights featured prominently in their political manifestos.

Following the ceasefire agreement in October, UNICEF engaged with Ethnic Armed Organisations (EAOs) on initiatives for children in the South-East of Myanmar, including joint Mine Risk Education and WASH initiatives between Government and Ethnic Groups. UNICEF strengthened relationships between MoH and health departments of other non-state entities, resulting in services being provided to women and children such as immunization (measles and rubella campaign) water and sanitation in Kayin, HIV prevention, nutrition, and maternal and child health in Kachin Special Regions.

UNICEF partnered with the Tourism and Hotel industry to prevent the proliferation of “orphanage tourism” and child sex exploitation. Over 50,000 branded materials on prevention of orphanage tourism were distributed through hotels, tour operators, tour guides, and at key tourist sites. Key messages were also printed in inflight magazines of two domestic airlines. Awareness-raising activities reached over 250 travel and tourism professionals, including the Myanmar Tour Guides Association.

UNICEF Myanmar is committed to engaging children, adolescents and young people in decision making, and ensuring they have an active voice in the process of transition in Myanmar. With this in mind, UNICEF is launching U-Report, an SMS programme, to enable young people to express their views from a basic mobile phone, and foundational work was completed in 2015, including establishment of a Steering Committee, Youth Content Group, and technical set-up. UNICEF also launched the Myanmar Social Innovation Lab, which is designed as an open, collaborative space that brings together young people, private sector, academia, government, and civil society to create sustainable solutions to the challenges facing marginalized children and young people. In the first Social Innovation Weekend, the winning group invented an inflatable balloon as a floods response solution. Following the 2015 Paris Climate Conference, 35 youth from across the country discussed and presented innovative solutions on the impact of climate change in Myanmar and tips on communicating with children.

Promoting religious tolerance and diversity

Amidst disturbing public calls fuelling inter-communal and religious tensions, UNICEF has encouraged the top religious leaders of the 4 main religions, through the Interfaith for Children platform, to issue joint calls in support of religious tolerance and diversity for the benefit of children.

“We, religious leaders from Myanmar Interfaith for children (MIC), representing the Buddhist, Christian, Islam and Hindu … owe our children the duty to give them the best possible start in life – to help them grow up well-nourished and healthy, get a good education, and protect them from conflicts and violence. It is also incumbent upon us to build an environment where children can have a peaceful, happy, healthy and harmonious life with respect, love and value of each other’s religions. As religious leaders of four major different religions united across our faiths we resolve to do the utmost for the betterment of our children. We reaffirm our commitment to respect each other’s faiths, promote interfaith dialogue among us to achieve unity in diversity"

Interfaith For Children, October 2015
Being fit for purpose

UNICEF Myanmar took major initiatives to improve operations and programme management performance, including addressing areas of weakness identified in audit reports. The Office was audited in 2014 and received satisfactory ratings. Six out of 14 recommendations were closed in February 2015 and the remaining 8 were closed in May 2015.

UNICEF Myanmar has made significant progress towards enhancing its evaluation function and capacities in 2015 - the International Year of Evaluation. This is evidenced by the establishment of a Planning and Monitoring Evaluation Unit, the recruitment of two evaluation specialists, the beginning of five significant evaluations, and the development of internal standard procedures for research, evaluations and studies to ensure that evidence generating activities produce credible, relevant and useful reports.

Internal and financial controls and work processes were effectively implemented and monitored. UNICEF ensured efficient and effective utilization of organizational resources in a transparent manner. Efficiency and effectiveness has been ensured throughout the process of procurement of goods and services and in all transactions. Additionally, UNICEF actively collaborated with other agencies to harmonising operational needs and carried out joint activities such as procurement, capacity building, and common services namely security and medical support.

UNICEF has worked closely with the Government and increased opportunities to channel its resources through government systems, through the implementation of the UN Harmonized Approach to Cash Transfer (HACT) from 1 January 2015. A HACT plan was prepared, and spot checks and scheduled audits were undertaken meeting minimum requirements. Support to the government for supplies was intensified during the third and fourth quarters as a direct response to the floods emergency including procurement, warehousing, clearance and distribution to the affected areas, worth US$1.5 million (723.74 metric ton).

During 2015, UNICEF utilised USD 76.25 million, out of which approximately USD 15.15 million was for the humanitarian response.
1950 marked the beginning of UNICEF Myanmar. At that starting point, Myanmar’s BCG campaign to prevent tuberculosis, supported by UNICEF, vaccinated about one million children a year, or roughly 80 per cent of annual births. As the decade of the 1960s came to a close, UNICEF’s Executive Director announced Myanmar’s Leprosy project, conducted through years of mass campaigning, as the most successful in the world. This was just the beginning of UNICEF’s activities and partnership with Myanmar’s governments. For the last 65 years, UNICEF has been working to positively change the lives of every child throughout the country. Through its Programme of Cooperation in the country, UNICEF has had a strong relationship with government, whilst at the same time engaging with other partners from civil society and the private sector in order to strengthen its efforts to improve children’s lives.

The ongoing political and economic reform process, including decentralization, is an excellent opportunity to achieve major gains for all children. UNICEF’s current country programme (2011-2015) had been extended to 2017 to ensure that the opportunities provided by various reforms address children’s needs and accelerate results for every child in the country, especially the most marginalized. UNICEF is also looking forward to establishing and building a close working relationship with the new Government in 2016.

In this context, UNICEF’s support will focus on equitable service delivery, strengthening systems in education, health and child protection and make them accessible to the most vulnerable children across the country. It will support capacity building at Union, State and Township levels to develop and implement plans and budgets for children. UNICEF will also support sector reforms towards the development of policies and legislation that will enable accelerated realisation of children’s rights. Strengthening partnerships at national and state/regional levels with other organizations, civil society and Non-State Actors will be fundamental to delivering results for children.

UNICEF Myanmar has been implementing a comprehensive advocacy strategy to influence a range of decision makers and other relevant audiences. Increasing public finance for children; protecting and promoting the rights of all children in Rakhine State; children affected by armed conflict; and the first 1000 days of a child’s life’s were the four office-wide advocacy priorities identified for the period 2014-2017. Children with disabilities has been added to the office’s advocacy strategy, thus becoming a fifth UNICEF advocacy priority for the next two years.

To successfully meet the goals set for the next years, UNICEF and the Government of Myanmar cannot do this work on their own. Partnerships with donors, international and national NGOs, the private sector, media and civil society have shown that by working together we can create real and lasting change.

Within the UN Country Team, wherever synergies will bring better, bigger and more sustainable results for children, UNICEF has and will continue to coordinate its support with sister UN agencies: in health with WHO, UNFPA and UNAIDS; in support of the National Plan for Food and Nutrition with WFP, WHO and FAO; in social protection with ILO, WB, WFP, IOM; in child protection with ILO, IOM, and UNHCHR, in education with UNESCO, in decentralisation and governance for children with UNDP, in DRR with UN-Habitat, and in emergency with the whole HCT family. Such agencies have also played a key role in promoting child rights within their own mandates.

INGOs have been crucial partners in the emergency response, especially in Rakhine. UNICEF has and will continue to lead or co-lead the following sectors or clusters in 2015: WASH cluster, Education Sector Working Group, Social Protection Working Group, Nutrition and Child Protection sub-sectors, Country Task Force on Monitoring and Reporting (Child Rights violations - with a focus on use and recruitment of child soldiers).

Last but not least, the above mentioned results have only been possible thanks to the generous and effective partnership UNICEF Myanmar enjoys with the international development partner community, including donors.
In 2015, UNICEF Myanmar programme has been financed with support from:*

- UNICEF (FOR GR ALLOCATIONS ONLY), 23%
- Australia, 15%
- European Commission/EC, 14%
- 3MDG, 11%
- UNICEF-National Committees, 4%
- CERF, 4%
- GAVI, 8%
- Netherlands, 4%
- UK, 3%
- USA (USAID) OFDA, 2%
- Denmark, 2%
- Germany, 1%
- Switzerland, 1%
- Turkey, 0.4%
- EAP/US Dept Bureau of EAP, 0.4%
- UNDP - MDTF, 0.3%
- Canada, 0.3%
- Norway, 0.1%
- UN Habitat, 0.08%
- United Nations Foundation Inc., 0.08%
- Canada/IHA, 0.06%
- Micronutrient Initiative, 0.04%
- Donor Pooled Fund (mixed donors), 0.01%

*Amounts include rolled over from 2014