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COUNTRY COOPERATION FRAMEWORKS AND RELATED MATTERS

Assistance to Myanmar

Note by the Administrator

SUMMARY

In reporting on activities for assistance to Myanmar since the adoption of Executive Board decision 98/14 of June 1998, the Administrator notes that: (a) the 10 projects comprising the Human Development Initiative-Extension (1996-1998) will be concluded in mid-1999; (b) 11 projects of the Human Development Initiative Phase III (mid-1999 to end 2001) have been approved in accordance with the guidelines of Governing Council and Executive Board decisions 93/21 and 98/14; and (c) an independent review mission of three senior international experts carried out a review on the progress and challenges in the implementation of project activities of the Human Development Initiative from 15 February to 6 March 1999. The mission found that the contents and objectives of all HDI projects are in full conformity with the relevant decisions of the Governing Council and Executive Board and that while projects face certain important challenges, appropriate systems are in place to manage the changes that will be necessary.



I. PURPOSE

1. UNDP assistance to Myanmar has been carried out since 1993 within a programme framework entitled the Human Development Initiative (HDI), in accordance with the provisions of Governing Council and Executive Board decisions 93/21 and 96/1. The first phase of HDI, comprising 15 projects, was undertaken from 1994 to the end of 1996. The second, and current, phase of HDI-Extension (HDI-E) consists of 10 projects and will be concluded in mid-1999. To date, HDI project activities have been funded from the balance of the fifth cycle indicative planning figure (IPF) resources.

2. In its decision 98/14, the Executive Board approved continued funding of HDI project activities from target for resource assignment from the core (TRAC) resources in the sectors previously outlined in Governing Council decision 93/21 for the period mid-1999 to the end of 2001. The TRAC funding allocations will take effect from mid-1999. In accordance with the provisions of decision 93/21, 11 projects within the framework of an HDI Phase III (mid-1999 to end 2001) have been approved by the Administrator following an extensive, in-depth review process. In its decision 98/14, the Board also requested the Administrator to continue to provide the Executive Board, on an annual basis, with a report on the progress and challenges in the implementation of project activities of the HDI.

3. In response to decision 98/14, the present report contains the major findings, conclusions and recommendations of a three-member international mission, which carried out an independent review of the HDI during the period 15 February to 6 March 1999 in Myanmar. The independent international mission carried out a review of the progress and challenges in the implementation of project activities of the HDI during the period 15 February to 6 March 1999. The mission's terms of reference included in-depth analysis of various technical papers, an assessment of the status of projects, their progress in implementation, the degree of success in meeting project objectives since the last assessment in September 1997, and the challenges faced by projects. The mission also reviewed the efficiency and effectiveness of HDI through its change management process, the preparations of Phase III and the overall challenge faced by the UNDP Country Office and project management in the implementation of HDI. The scope of the review also covered comments on the preparations for the Northern Rakhine State programme.

II. INTRODUCTION

4. All HDI project activities have been formulated in compliance with Governing Council and Executive Board decisions 93/21, 96/1 and 98/14. Governing Council decision 93/21 require that UNDP assistance to Myanmar be clearly targeted towards programmes having grass-roots level impact in a sustainable manner in the areas of primary health care, the environment, HIV/AIDS, training and education and food security. HDI projects are being implemented in 23 townships in strategically targeted areas in the Dry Zone, Southern Shan State, the Ayeyarwaddy Delta and Rakhine, Chin and Kachin States, and comprise three clusters of projects in the following areas: human development and humanitarian needs (health, education, water and sanitation);

environment and food security; and activities of an intersectoral nature. Projects are executed by United Nations specialized agencies, namely, the Food and Agriculture Organization of the United Nations (FAO), the United Nations Centre for Human Settlements (UNCHS), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Office for Project Services (UNOPS), and the World Health Organization (WHO). These agencies have assigned full-time international chief technical advisers (CTAs) to manage projects and are accountable for the financial and human resources under HDI projects. Three international non-governmental organizations (NGOs), Grameen of Bangladesh, Groupe de recherche et d'échanges technologiques of France (GRET) and Private Agencies Collaborating Together (PACT) of USA, implement micro-credit activities in different project locations. Several international NGOs in association with national NGOs, are also involved in the delivery of various components of other projects, such as health care.

5. During 1998, extensive evaluations and reviews of individual HDI projects were carried out, including mid-term evaluations of the 10 ongoing projects of the HDI-E, by independent specialists. It also included analytical studies of policy, such as poverty targeting and sustainability, and of cross-sectoral issues, including poverty alleviation and gender. This process was followed by the formulation of project extension documents and in-depth reviews by the UNDP country office in Yangon and UNDP headquarters. In line with decision 98/14, a separate project was prepared on the coordination of United Nations multi-agency assistance in the Northern Rakhine State. This project will facilitate the transition of the UNHCR-led operation for the reintegration of returnees from Bangladesh to a more development-oriented programme, which will be implemented by several United Nations specialized agencies, under the leadership of the Resident Coordinator. All these processes culminated in the approval by the Administrator in February 1999 of 11 projects comprising the Human Development Initiative Phase III.

III. REVIEW AND STATUS OF HDI PROJECTS

6. The mission reviewed the extensive documentation on all projects and programme issues. The three members of the mission separately visited project sites in five townships in three states, namely Kachin, Eastern Rakhine and Southern Shan State. Mission members also met with beneficiaries of projects, representatives of the diplomatic community in Yangon, staff of United Nations executing agencies, project staff, NGOs, and with technical personnel from the relevant line ministries.

7. With respect to the status of implementation of HDI projects, the mission found that the contents and objectives of all HDI projects are in conformity with the relevant provisions of the Governing Council and Executive Board decisions. All 10 projects are performing well and with varying degrees of success. Impacts are now highly visible, particularly in villages where HDI activities have been operating since 1994. Overall, project interventions and priorities are considered appropriate. Villagers and communities are very appreciative of projects that provide employment opportunities, education, credit for income-generation and technical know-how, such as in farming practices or environmental protection. The lack of enthusiasm by some

communities in certain aspects of project activities, such as the priority of latrines in health care, is being addressed through more extensive education and awareness programmes on the benefits of these facilities. By and large project interventions are very well accepted. The most fundamental lesson of HDI is that the community-based approach has been successful. It is noteworthy that some 13,000 community-based organizations (CBOs) have been formed and they serve as the vehicle for grass-roots communities to plan, prioritize and implement development activities. CBOs are guided and supported by projects throughout their various phases of development and implementation. In addition to village-based CBOs, there are groups of CBOs representing clusters of villages with common and shared sectoral interests.

8. The success of HDI activities can be directly attributed to their impact on the lives of the poor in various sectors. Primary health care services have been provided in 11 focus townships through 332 health centres: 277 rural health centres were either constructed or renovated through HDI project interventions. Village health committees have been constituted in 3,693 (or over 98 per cent) of villages in focus townships. In addition, the project targets health issues in many other townships, in particular diseases such as malaria (47 townships), leprosy (40 townships), and tuberculosis (39 townships). A significant contribution has been made through the project to the universal use of iodized salt for the treatment of iodine-deficiency disorders, an area where it is expected to achieve targets in the year 2000.

9. In community water supply and sanitation, a needs assessment survey has been carried out in 3,665 villages; specific interventions have been completed in 1,268 villages. Much attention is focused on community capacity assessment and capacity-building to plan, implement and maintain water and sanitation facilities. The overwhelming need to address the massive problem of HIV/AIDS far outweighs the limited funds available in the project budget. HDI activities have impacted on the development of improved behaviour change at the community level to high priority at-risk groups, and also strengthening of institutional capacity at the local level and in the private sector. The project has contributed in a meaningful way to the training of national primary health care staff at the local level and has assisted civil society organizations in counselling, and has supported blood-screening activities in 11 HDI townships. Social marketing of the use of condoms is aimed at increased demand.

10. Progress through project interventions in education has resulted in improved quality of primary education through training, assistance in curriculum development and training materials. Needs assessments surveys for early childhood care and development pilot programmes have been carried out in 11 project townships. Environmental education curriculums have been developed and were distributed to 323 primary schools in the last quarter of 1998; a total of 135,246 dozen exercise books were distributed to primary and self-help schools; over 700 primary teachers from 55 selected school clusters were trained in the development and use of teaching and learning materials; 264 income-generating micro-projects were funded in September 1998; and over 700 participants from 243 parent teacher associations that oversee school renovation, extension and replacement were trained in the management of school improvement and maintenance.

11. Micro-credit is being delivered through the three NGOs, Grameen of Bangladesh, GRET of France and PACT of the USA. At the end of 1998, some 18,757 households received loans, which equals to approximately 63 per cent of the planned target; repayment rates are almost 100 per cent; and female participation rates are over 90 per cent. The 30,000 households which are being targeted in this first phase project will undoubtedly be doubled by the end of the second phase.

12. The food security projects in the Dry Zone, Southern Shan State and Ayeyarwaddy Delta have provided assistance to approximately 800 villages in the three areas; and 25,000 households in the Dry Zone and Southern Shan State. The projects address issues in agriculture and water-shed management techniques, including small-scale farming, the landless and women, extensive soil-conservation methods, income-generation activities, environmental conservation, and the sustainable use of mangrove forests, which are widely used for charcoal manufacture. HDI project activities have contributed to the construction of 400 sediment-storage overflow earth dams, rehabilitated 250 traditional dam structures, constructed over 6,000 stone check dams, over 500,000 soil and water conservation works to collect and store rainwater around planted trees, and organized 247 active groups with a total membership of over 11,600 men and women in the Dry Zone; in watershed management projects provided the poor with opportunities for generating income through land-based activities in 370 villages with 20,000 households; and in the Delta, a large number of beneficiary groups, of which women form the majority, have been well mobilized to take care of their own development.

13. Lastly, the community development activities in the very remote townships in Chin, Kachin and Rakhine States have provided support to 494 villages populated by ethnic minorities in very remote townships through a highly participatory approach that has enabled these groups to prioritize and implement interventions in various fields of social services, such as food security and income-generation.

IV. CHALLENGES IN THE IMPLEMENTATION OF HDI

14. The HDI assessment mission noted that despite continuing progress in the refinement of systems and improved delivery, all projects face major challenges in implementation. The targeting of poverty and the poorest within villages has improved over the life of HDI but continued attention is necessary to ensure that beneficiaries include the most deprived. This is particularly relevant to aspects of social services, such as community awareness of reproductive health and the difficulties in reaching those who are out of school and the management of resources being channelled for their welfare and development. The projects are faced with very diverse climatic and physical conditions among people of diverse cultures and traditions. Nevertheless, the projects have responded very well to these diversities and have produced many models that are worthy of replication. This has been quite notable and will continue, as in the past, without exclusion or discrimination. In future, more attention will also be given to cross-fertilization and cross-sectoral linkages of project activities. In the earlier phase of HDI, some projects focused on the provision of hardware in the form of buildings and materials. This is less labour-intensive and less

complex than the continuing attention necessary for the development of human resources for the maintenance, management and development of facilities provided by the projects.

15. With respect to management issues, the mission endorsed the proposed HDI approach of transition from management on a sectoral basis to management on an area basis. This would facilitate a more holistic approach to the various project interventions and thereby contribute to the achievement of cross-sectoral objectives. In so doing, community structures will be strengthened to enable greater involvement in development activities. The important issue of the value of continuity by communities in HDI development activities was flagged, especially since HDI did not have the normal range of formal linkages to national counterpart institutions. In these circumstances, the paramount consideration in implementing change is improved impact at the operational or field level. Attention was also drawn to the short time-frame of two and a half years for the duration of HDI projects as compared to the normal UNDP country cooperation framework. This was considered to be a serious constraint for meaningful participatory community-based development projects, such as HDI, which need a longer time-frame for planning, setting targets and implementing project initiatives. A further consequence of the short time-frame was the continuous assessments, reviews, project designs and technical evaluations normally incorporated into each project document at the time of formulation, which take place with twice the frequency of regular UNDP projects, meaning that HDI is in a continuing state of review. The mission was of the view that a longer time-frame for HDI projects should be considered. The mission also noted the preparations for an integrated development programme for Northern Rakhine State and the progress made to meet the timetable for submitting formal proposals for support by the international community in 1999, in line with Executive Board decision 98/14.

16. The mission drew attention to some major strategic issues affecting future assistance to Myanmar. With respect to the issue of sustainability, this was clearly articulated in Governing Council decision 93/21, in which the Council called for projects that have grass-roots level impact in a sustainable manner. However, the modalities for implementation of HDI are different from those of a normal country cooperation framework and have implications for aspects of sustainability. The mission noted a distinction between, on the one hand, sustainability in the sense of strengthening government institutions, and on the other, sustainability at community and individual levels. It was concluded that some activities of HDI are not sustainable in the institutional sense since this is not part of their design, given the Executive Board mandate. More fundamentally, however, HDI is set of people-centred, community-based projects that are contributing significantly to sustainable human development.

17. The second strategic issue focused on village access. Because of the special nature of the mandate, UNDP has been particularly stringent in its application of the term impact at the grass-roots level. This has been interpreted to include infrastructure within villages, such as water supply, or a foot-bridge at the edge of a village, but care has been taken not to include village access roads or assistance for water transport. The mission noted that the quality of access to a village is directly linked to its level of development. It strongly recommended that consideration be given to the need

for access to villages and that assistance for such access could be included where this is critical to the achievement of HDI objectives.

18. As previously mentioned, the magnitude and immediacy of the growing HIV/AIDS problems in Myanmar poses an enormous humanitarian challenge for HDI. Additional donor cost-sharing to supplement limited HDI resources for this project would help to address the overwhelming needs for critical assistance in the prevention and treatment of HIV/AIDS. It is anticipated that a national action plan based on a strategy prepared with the assistance of a UNAIDS thematic working group would help to put the magnitude of the situation in perspective and could serve as a basis for mobilizing non-core resources from interested members of the international community.

19. The mission noted that HDI had accumulated useful lessons since its inception in 1994 and had instituted the necessary systems and structures to continue learning and to improve its delivery. Many HDI activities have potential for replication either within existing project locations or through geographic expansion. Therefore, the scope for co-financing under normal UNDP cost-sharing arrangements could be easily accommodated.

V. CONCLUSION

20. The independent review mission confirmed that the contents and objectives of HDI projects are in conformity with the relevant provisions of Governing Council and Executive Board decisions 93/21 and 98/14. The process of review and approval of the 11 projects comprising the HDI Phase III (mid-1999 to end 2001) by the Administrator has been carried out in accordance with guidelines provided in decisions 93/21 and 98/14. The projects are well targeted with unqualified successes in some areas. While projects face major challenges in implementation, the mission is of the view that management and institutional systems are in place to manage the changes which will be necessary for the next phase. The mission urged the international community to keep in mind the constraints of the mandate and its consequences for sustainable development. This relates to issues of access where the potential of HDI projects is restricted by the physical deficiencies of infrastructure and the critical role played by access to and from villages in meeting HDI objectives; the institutional arrangements under which HDI projects operates because of its special mandate; and the short time-frame of two and a half years for the duration of HDI projects as compared to the normal UNDP country cooperation framework. This was considered to be a serious constraint for meaningful participatory community based development projects, such as HDI, which needs a longer time-frame for planning, setting of targets and implementing project initiatives. The Board is also asked to consider the potential for co-financing arrangements by donors who are interested in assisting the very poorest people through the already established UNDP structures and mechanisms for HDI project activities.

VI. EXECUTIVE BOARD ACTION

21. The Executive Board may wish to take note of the present report and of the conclusions and recommendations of the review mission on the progress and challenges in the implementation of project activities of the Human Development Initiative as requested in decision 98/14.
