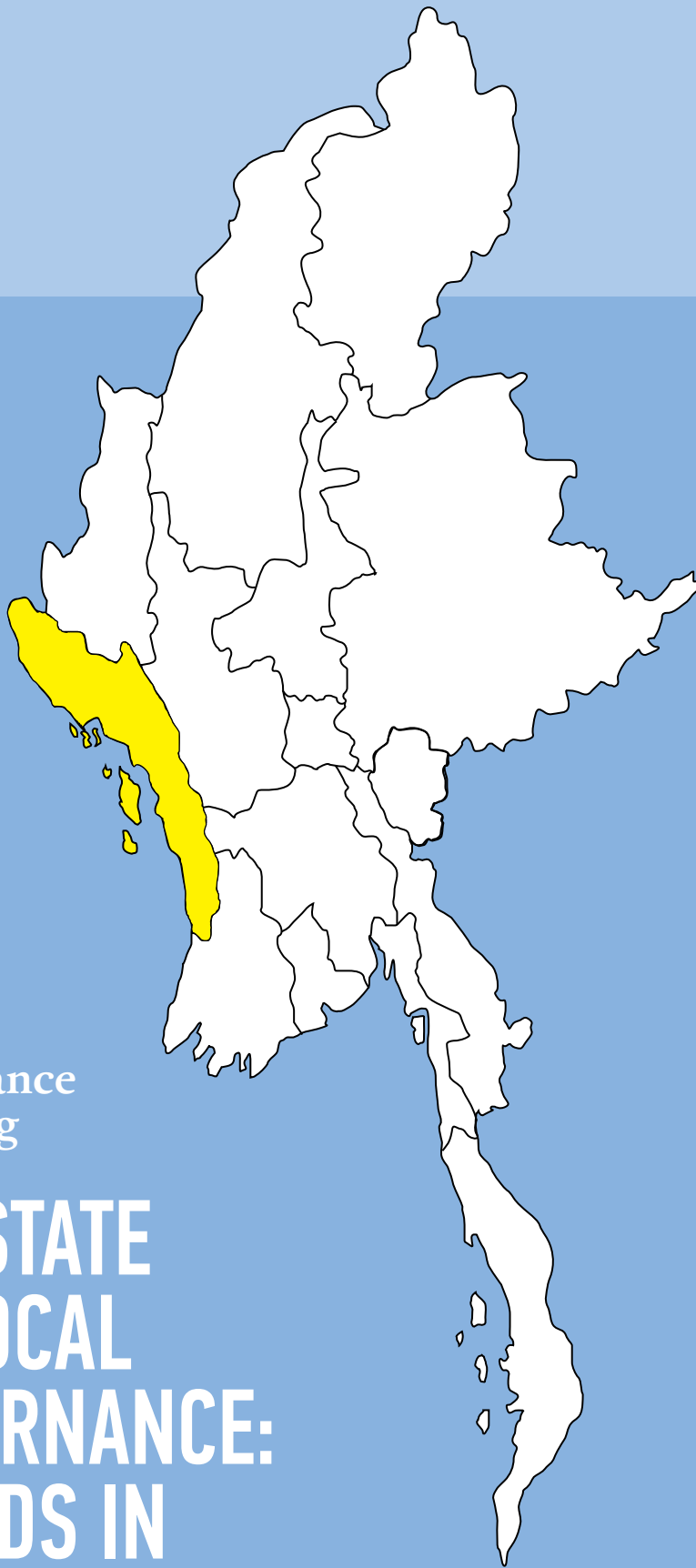




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Local
Governance
Mapping

THE STATE OF LOCAL GOVERNANCE: TRENDS IN RAKHINE



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Local Governance Mapping

THE STATE OF LOCAL GOVERNANCE: TRENDS IN RAKHINE

UNDP MYANMAR

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Acronyms

CD	Community Dialogue
CDF	Constituency Development Fund
CRC	Citizen Report Card
CSO	Civil Society Organisation
DMA	Department of Municipal Affairs
DoE	Department of Education
DoH	Department of Health
DoP	Department of Planning
DRD	Department of Rural Development
DTA	Deputy Township Administrator
GAD	General Administration Department
GoM	Government of Myanmar
HoD	Head of Department
INGO	International Non-Governmental Organisation
LGM	Local Governance Mapping
MoHA	Ministry of Home Affairs
MoLFRD	Ministry of Livestock, Fisheries and Rural Development
MoNPED	Ministry of National Planning and Economic Development
MDRI-CESD	Myanmar Development Resources Institute-Centre for Economic and Social Development
MSR	Myanmar Survey Research
NGO	Non-Governmental Organisation
MoAI	Ministry of Agriculture and Irrigation
MoE	Ministry of Education
MoH	Ministry of Health
PRF	Poverty Reduction Fund
RDF	Rural Development Fund
RHC	Rural Health Centre
SLRD	Settlements and Land Records Department
SRHC	Sub-Rural Health Centre
TA	Township Administrator
TMAC	Township Municipal Affairs Committee
TDSC	Township Development Supportive Committee
TEO	Township Education Officer
TFMC	Township Farmland Management Committee
TLO	Township Land Record Officer (Settlements and Land Records)
TMC	Township Management Committee
TMO	Township Medical Officer
TPIC	Township Planning and Implementation Committee
TPO	Township Planning Officer
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
VT	Village Tract
VTA	Village Tract Administrator
VTA/WA	Village Tract or Ward Administrator
VT/WDSC	Village Tract or Ward Development Support Committee
WA	Ward Administrator



Executive Summary

This report outlines the results of the Local Governance Mapping (LGM) conducted by the United Nations Development Programme (UNDP) in collaboration with the General Administration department (GAD) under Ministry of Home Affairs in Rakhine State in 2014. Based on the perceptions of local people and local governance actors, the mapping has tried to capture the current dynamics of governance at the frontline of state-people interaction and enables an analysis of participation in planning, access to basic services and accountability for local governance that is specific to the State. The results are drawn from four townships; Gwa, Kyauktaw, Rathedaung and Thandwe based on mapping undertaken between September and December 2014 including background studies, state level discussions, interviews using the Citizen Report Card (CRC) methodology, interviews with service-providers, and community dialogues.

Rakhine Region

Rakhine state is the eighth largest of Myanmar's States and Regions and the second most populous State after Shan with a population of 3.1 million. Rakhine is rich in natural resources and its main economic activity is agriculture and fisheries. Poor infrastructure, particularly road infrastructure, poor connectivity to the rest of Myanmar, lack of electricity, poor communication facilities are perceived to be major challenges for Rakhine State's socio-economic development. As such, plans for road upgrades and full electrification in 2015, combined with an expansion of tourism, extraction and energy industries could yield significant development benefits for the State in the future.

After a turbulent history of fighting for independence under British rule and military control, in May 2008, the new Constitution made Rakhine State a constituent unit of the new Union of the Republic of Myanmar, equal in status to the other States and Regions. Accordingly, its institutions were set up following the 2010 multiparty elections but this has again led to rising political tensions in Rakhine State. The situation in the State Hluttaw and among the elected representatives of Rakhine State constituencies has been unusually dynamic in comparison with other States and Regions. The elections to the Village Tract and Ward Administrators in 2012 took place for the first time during 2012 and 2013 as in all States and Regions in Myanmar.

Local development in Rakhine is complicated and affected by the conflict in the State which predates the violent incidents of 2012 that resulted in deaths, significant population displacement, and destruction of public property, loss of livelihoods and the disruption of public services. The conflict is fuelled by a combination of factors including chronic poverty and competition over economic resources, human security and human rights challenges, tensions between national government and local Rakhine interests, and different ethnic groups of the State affected by discrimination.

During the assessment, on the question whether respondents feel safe in their village tract or ward, 83 percent of the respondents feel safe in their community, while 14 percent do not feel safe; the most important reason mentioned by 69 percent was the conflicts between different groups of people (religious, ethnic, language) in their community, followed by lack of law enforcement (20%). To improve the safety situation in the village tract or ward, 52 percent recommended an increase in the number of police or improve law enforcement, while 24 percent stressed the importance of more community action like improved watchfulness, and 22 percent the introduction of safety volunteer groups.

Development planning and people's participation

In March 2013, Township Development Support Committees (TDSC) and the Village Tract or Ward Development Support Committees (VT/WDSC) were established in Rakhine State to achieve one of the objectives of the administrative reform programme of the Government of Myanmar by the introduction of “people-centred” development through “bottom-up planning”. The Township Municipal Affairs Committees (TMAC) were established at the township level in early 2013 after the adoption of the Development Affairs (Municipal Affairs) Law by the Rakhine State Hluttaw.

As a result of the reform at Union level, the planning and budgeting processes at the state level and below are gradually changing in four main areas including planning and budgeting of community level activities related to the various development funds; sector planning and budgeting process; municipal planning and budgeting process; and the township development planning process. While these have resulted in some minor variations in the planning and budgeting process between the various sector ministries, the actual planning and budgeting is still taking place at either the State or Union level as opposed to the anticipated bottom up planning.

In Rakhine State four development funds are available at the moment at the township level: the Poverty Reduction Fund that can be submitted and implemented by village tracts and is used for school and health facility renovation, road improvement or bridges, the improvement of water facilities and electricity (usually solar power); the Rural Development Fund (state fund with part of the revenues collected by the General Administration Department (GAD) at the township level on behalf of the State Government; and, and the Constituency Development Fund (to support township development activities by elected Hluttaw members along with other representatives). In the financial year 2013/2014 and again in 2014/2015, each township received 100 million kyat (100,000 USD) from the CDF irrespective of the population size of the township for the implementation of small projects in both rural and urban areas. The Area Development Fund of the Ministry of Border Affairs also supports similar kind of projects that are supported by PRF and in 2013/2014, Gwa received 69 million kyat (69,000 USD), Rathedaung about 361 million kyat (361,000 USD) and Kyauktaw about 273 million kyat (273,000 USD).

While these funds have been in operation since the financial year 2012-13, the recent introduction of VT/WDSC as well as the TDSC led to a new process of deliberation and decision-making regarding the selection of projects at community and township level with provisions for direct and indirect participation by people in the planning process which is still a task in progress. Compared to other States and Region the TDSCs in the four townships are slowly gathering momentum where the TDSC see their function as a node of communication between community and township administration, advising on the use of funds. While the TDSC in some townships were playing a role in clearance of the proposed priorities, they were more active in monitoring public works implemented by the line departments or projects implemented by the Department of Rural Development and the Department of Municipal Affairs. In some, the TDSC seemed to operate well and were aware of the fund flows from the Union level in planning of investments in different sectors (health, education, tourism etc) and the available development funds specifically for township level. According to the TDSC members interviewed they spend a lot of time on monitoring activities, reporting any irregularities or delays to the Township Administrator. Township Administrators perceived a positive change in their roles from independently taking some of the decisions to being consulting now with the TDSC and the TMAC. Efforts to strengthen the engagement of the TDSC and TMAC in development of the township requires concerted efforts.

39 percent of the respondents expect the Village Tract or Ward Administrator to solve local level development problems, especially in the rural areas despite the fact that his ability to solve them is very limited. This could potentially lead to frustration and friction between the VTA/WA and the community. 30 percent expect the State or Union Government to play an important role in solving community problems. Urban respondents put more emphasis on the role of the State and Union Government as compared to the rural respondents who place more responsibility on the shoulders of the VTA. The Government has realised the need for horizontal and vertical coordination and plans to strengthen the TMC, GAD and TA to focus on people-centered township level planning processes.

Access to Services

Regarding changes in their village tract or ward over the past 3 years, 48 percent of the respondents selected education as the most important improvement made by the government, followed by improvements in health services and roads (physical infrastructure) with 35 percent and 28 percent respectively. Improvement in access to water and electricity were mentioned less often (21 and 8%).

When reflecting on primary education services specifically, across the board, service-providers agreed that primary education services were better now than it was previously due to the increased number of teachers and the growing numbers of student prize-winners at township level competitions as evidence of this trend. Education staff pointed to poor school infrastructure (buildings, furniture and sanitation), teacher shortages, limited or no travel allowances for teachers, and low salaries as the greatest challenges for the primary education sector. The majority of headmasters had reported the need of more school chairs, desks and textbooks, to the TEO and these were for the most part successfully resolved, indicating that the responsiveness of the Ministry of Education to the needs of the actual teaching staff has improved. Standards and practices for monitoring are fairly well-established for primary schools, for which there are regular inspection visits conducted typically by the Assistant and Deputy TEOs. According to the education staff, every child is treated in the same way, but there are no special facilities or programmes for children with learning problems like physical disabilities. 88 percent of the respondents with children at primary school felt that their child was treated in the same way as all the other children. All schools had a PTA mainly involved in implementing small maintenance works and in collecting donations from the parents. Compared to other States this could mean that the government has achieved more in Rakhine State in services delivery or that its achievements are more visible or better communicated to its people.

As elsewhere in Myanmar, primary health care in Rakhine State is partly provided by private health facilities and partly by the Ministry of Health, often with support from various international Non-Governmental Organisations. 93 percent of respondents, both male and female, and from all ethnicities who made use of public health facilities felt that they received the same treatment as any other person in their village tract or ward, i.e. there was no discrimination against particular groups within the community. Conversely, all health workers interviewed mentioned that they treated everybody in the same way irrespective of ethnicity, gender and wealth or (dis)ability. The use of public health facilities is higher as compared to the results in other States and Regions, which can be explained by the lack of private facilities available in Rakhine.

All except one of the 25 health service providers interviewed were of the opinion that the provision of health services in the four townships has improved over the last 3 years due to increased

availability of equipment and medicines; reduction in costs; increase in health staff; and improved health infrastructure. Compared to other States and Regions a shortage of skilled medical staff seems to be more of a problem in these four townships as well as furniture. In most townships in Rakhine State, the TMO plays both a medical and an administrative role, being responsible for staff planning, quality supervision of all health facilities, the distribution of medical supplies, as well as for collecting health baseline data. The TMO can recruit support staff for the various health facilities directly if there is a vacancy, but is not in charge of hiring and firing or the transfer of medical staff between health facilities. While salaries are paid from the recurrent budget and are usually paid out in time, there is very limited operational budget available for the senior staff to actually carry out their duties and functions which contributes to an inefficient use of manpower. In seven out of eight of the six communities included in the mapping there is a VHC with members elected or appointed by the VTA. These VHCs assist the staff by providing labour to carry out small repairs at the health facility and assist with non-medical care for patients.

Access to safe drinking water stood at 79 percent for Rakhine State as a whole in 2010, which is slightly below the national average of 82 percent. The responsibility for drinking water provision is shared by the Department of Rural Development (DRD) and the Municipal Affairs Department (MAD). Contrary to Health and Education, the DRD is involving people in its planning process more actively although the way in which this is done seems to differ per township in Rakhine State. In all townships staff of the DRD consult with the VTA and/or the VTDSC at the Village Tract level to identify potential projects.

Thirty-seven percent of the respondents interviewed said that they got their water from an open water source (river or pond), 28 percent from a shallow well, 17 percent from a private water connection and 9 percent from a deep tube well and 9 percent from a public tap or pump. 50 percent of the respondents mentioned that the quality of the water was good, 36 percent acceptable and the remaining 14 percent found the quality poor with substantial differences between the four townships. 30 percent of the respondents mentioned that the provision of safe drinking water has improved over the last few years, which is much lower than the figures for health care and primary education and lower than in other States and Regions. Only 13 percent had ever been involved in a meeting with government staff about the improvement of water provision in their respective village tract or ward.

Comparison of the urban and rural respondents shows that while both mention improvement in roads quite often, urban respondents mentioned electricity more often (31 %) while rural respondents mentioned improvements in education and health more often (59 and 43 respectively). Based on these figures it seems that over the last few years, rural areas have caught up with the urban areas in education and health services, while at the same time the urban areas made progress on improved electricity connections. Overall, common areas for more improvement mentioned by respondents include poor roads, no access to drinking water and poor health services, not enough jobs, poor education services/facilities and lack of electricity. Urban respondents mentioned poor roads relatively more often as their main problem, while rural respondents mentioned poor health services relatively more often. The differences in response between male and female respondents and respondents from different religions were minimal.

Information, transparency and accountability

In Rakhine State, the traditional hierarchical channels of official information provision (the 10/100 household heads, the Village Elders and Respected People and the VTA/WA) play an important role in the information flow from government to its people. Television and newspapers play a more important role in the urban areas, while in the rural areas radio, face to face contact with 10/100 household heads and other people in the village tract play a more prominent role. In contrast with the view of VTA/WA respondents, 77 percent of the people were dissatisfied with the information provided by the township government about new projects to be implemented in the village tract or ward. CSOs also have an important role although the size and outreach of CSOs operating at the township level in Rakhine State is still limited while the numbers are slowly increasing. Most organisations are active in humanitarian work, with funding from private donations and INGOs. Even though their outreach is limited, it became clear from the interviews that their work is appreciated both by committee members and government staff and they have an important role in connecting local people with their government representatives..

There are new pieces of legislation such as the new Rakhine State Development Affairs (Municipal Affairs) Law and provisions of the Ward or Village Tract Administration Law of 2012 that have a positive impact on the relationship between departments at the township level and their counterparts at the State/Union level for better transparency and accountability. Trust in almost all government institutions has improved, the most in the VTA/WA, and the State government all of whom are now elected, and the least in the judicial system. The number of complaints and requests for conflict resolution by people has increased in the four townships in Rakhine State showing increased confidence from the public that there will be no reprisals in a new environment of openness and an expectation that their grievances are treated seriously and fairly. However, there has been little improvement in accountability to the people by civil servants who are still accountable only to their line managers. Accountability by the township level committees can also be improved through more structured and institutionalized mechanisms for participation by people in planning, budgeting and implementation of development projects.

Conclusion

The findings show that Rakhine state has made improvements in service delivery in the key areas of education, health and clean water as well as in the area of safety and security despite the recent violence in the state. In order to reach the ultimate objectives of reforms for improved service delivery, clean government and people-centred planning, the successes achieved to date need to be followed up with more systemic changes in structures, attitudes and relationships that will require a continued and comprehensive approach to local governance reform from all levels in government. The degree to which Rakhine State will be successful in both reflecting its own ethnic diversity while at the same time delivering basic services in an equitable and effective manner will also depend on other improvements such as achieving peace in the state, enhanced area-based coordination between sector ministry departments, stronger transparency and accountability mechanisms, access to information, and improved responsiveness of government to the needs of the people will require continuous and concerted efforts by stakeholders at the national and local levels.



1. Introduction

Located in western Myanmar, Rakhine shares borders with Bangladesh, as well as internally with Chin, Magway, Bago and Ayeyarwady. Rich in natural resources, Rakhine State is primarily driven by agriculture and fisheries. Rice remains the main crop, occupying around 85 percent of the total agricultural land, while coconut and nipa palm plantations are also important. Fishing is a major industry, with the majority of the catch transported to Yangon. Wood products such as timber, bamboo and fuel wood are extracted from the mountains. In the recent years, there has been significant investment in the tourism sector, and several high-profile development and infrastructure projects are anticipated to transform Rakhine's economy in the medium to longer term. With its long coastline along the Bay of Bengal and large number of islands and rivers, much of the state's territory is highly segmented and difficult to access, which has an impact on service delivery in the state. Local development in Rakhine is also affected by the ongoing conflict in the State with the violent incidents of 2012 that resulted in deaths, significant population displacement, and destruction of public property, loss of livelihoods and the disruption of public services. Poor infrastructure, particularly road infrastructure, weak connectivity to the rest of Myanmar, lack of electricity, poor communication facilities are perceived to be major challenges for Rakhine state's socio-economic development.

This report outlines the results of the local government mapping research conducted by the UNDP and the MoHA in Rakhine between August and December 2014 and draws from a variety of other relevant and available sources. Using community-level mapping, citizen report cards, service provider interviews, and community dialogue sessions, the mapping has captured the current dynamics of governance at the frontline of state-citizen interaction. Based on empirical data collected from four townships; Gwa, Kyauktaw, Rathedaung and Thandwe, the report analyses participation in planning, access to basic services and accountability with respect to local governance in the conflict affected state. The report describes the way in which local governance processes and mechanisms are functioning for developmental planning and participation; people's access to basic services; perceptions on safety and security; and emerging factors of institutional and social accountability. While the focus of the mapping is on local level governance, the roles of the region and union government authorities and their relationships with the lower levels in a broader governance context are also relevant, and reflected upon in this analysis.

The mapping findings include people's perceptions on participation, accountability and responsiveness for service provision at the local level. Citizens' perspectives on recent developments at community level in Rakhine state include the situation on livelihoods, perceptions on safety and security, and, improvements in their village tract or ward as well as challenges. The report goes on to discuss citizen participation in planning, implementation and monitoring of development funds and projects. The section on access to services analyzes basic health care services, primary education and access to drinking water based on the views of service providers and communities. The report concludes with findings on the important areas of information, transparency and accountability with a focus on aspects of institutional and social accountability, transparency and access to information, and civil society's role in enhancing transparency and accountability.



2. Rakhine State

This chapter briefly outlines the socio-economic situation, demographics and historical background of Rakhine's government and institutions to provide a contextual understanding of the State in which the local governance mechanisms operate.

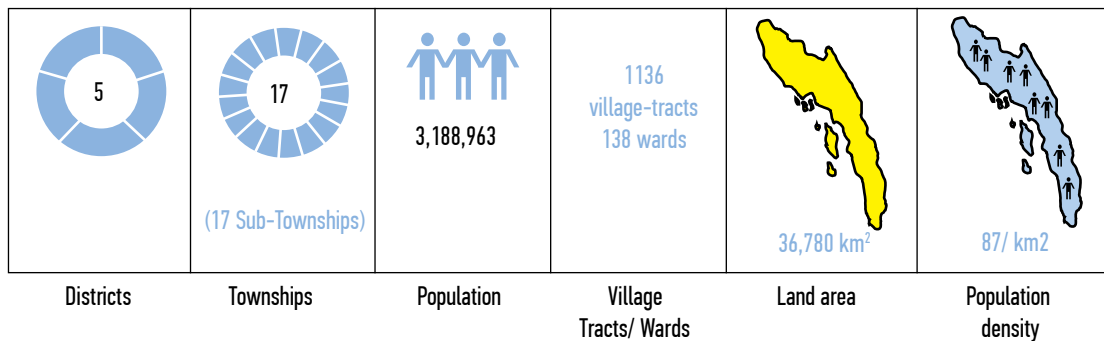


Table 1: Rakhine State at a glance
Source: GAD¹ and Myanmar Census Provisional Results²



Figure 1: Map of Rakhine Region

1. <http://www.gad.gov.mm/en/content/total-list-districts-townships-sub-townships-towns-wards-village-tracts-and-villages-regions#overlay-context=my/content/>
2. Total population is 3,188,963 (Enumerated 2,098,963; not enumerated 1,090,000) http://countryoffice.unfpa.org/myanmar/drive/Census_Provisional_Results_2014_ENG.pdf

2.1 Socioeconomic Background

Rakhine is the most western of Myanmar's States and Regions. With approximately 3.2 million inhabitants, it is the eighth largest of Myanmar's States and Regions, the second most populous State (after Shan) and has a slightly bigger population than Armenia or Mongolia. It is also the eight-largest State or Region by area, with 36,780 square kilometres, which is about the same size as Chin State (or, by comparison, approximately same area as Taiwan, and slightly larger than Moldova). The State's population density is 235 persons per square mile (87 per square kilometre). The State has 5 districts, 17 townships, 3 sub-townships, 138 wards, 1036 village tracts and 3760 villages.

With its long coastline along the Bay of Bengal and large number of islands and rivers, much of the State's territory is highly segmented and difficult to access. Five of its 17 townships are entirely on islands, and several more have parts of their territory on islands. Only three townships do not have their own coastline but can equally be reached by boat, one of the main forms of transport in the State. Rakhine's hinterland is rugged and hilly, and separated from the rest of Myanmar by the inaccessible Rakhine Yoma mountain range. It shares an international border with Bangladesh, and internal boundaries with Chin State, as well as Magway, Bago, and Ayeyarwady Regions.

Rakhine is rich in natural resources and its main economic activity is agriculture and fisheries. Rice remains the main crop, occupying around 85 percent of the total agricultural land. Coconut and nipa palm plantations are also important. Fishing is a major industry, with the majority of the catch transported to Yangon. Wood products such as timber, bamboo and fuel wood are extracted from the mountains. Small amounts of inferior-grade crude oil are produced from primitive, shallow, hand-dug wells, but there is yet-to-be fully explored potential for petroleum and natural gas production. In the recent years, there has been significant investment in the tourism sector, particularly in the historically noteworthy Mruak-Oo and Nagpali beach areas.

Several high-profile development and infrastructure projects are anticipated to transform Rakhine's economy in the medium to longer term. For example, some of the most valuable offshore gas fields, with blocks commissioned to Daewoo, Chinese National Offshore Oil Company (CNOOC)³ and Korea Myanmar Development Company (KMDC), lie just off the Rakhine coast. The Shwe Gas offshore gas production plant lies just a few sea miles from Sittwe. This gas pipeline, along with an oil pipeline, connects Kyaukphyu to Nanning in China, while a railroad connection to China and a further gas pipeline to India are also under discussion. Kyaukphyu is already home to a deep seaport, while the development of a Special Economic Zone (SEZ) is in planning. Current plans focus on sector-centred development activities, such as for example, tourism in Ngapali (Thandwe township), agriculture in Rathedaung township, agriculture and the development of a SEZ in Kyauktaw township, and culture and tourism in Mruak-Oo township. As with projects of this nature, these developments are raising concerns about their potentially harmful impacts both on the environment and local populations.⁴

Poor infrastructure, particularly road infrastructure, poor connectivity to the rest of Myanmar, lack of electricity, poor communication facilities are perceived to be major challenges for Rakhine

3. State-owned Myanmar Oil & Gas Enterprise signed contracts with China National Offshore Oil Company Myanmar Ltd., China Huanqiu Contracting & Engineering Corp. and Golden Aaron Pte. Ltd. of Singapore. Under the contracts, oil and gas exploration will be carried out at the 10,000-square-kilometer Block A-4 in western Rakhine state and the 15,534-square-kilometer Block M-10 in the gulf of Mottama in southern Tanintharyi Division. In October, the companies entered a similar contract to explore for oil and natural gas at 7,760-square-kilometer onshore Block-M in Rakhine state's Kyaukpyu area. According to official statistics, with 19 onshore and three main large offshore oil and gas fields, Myanmar possesses a total of 2.46 trillion cubic meters of gas reserves and 3.2 billion barrels of recoverable crude oil reserves in the country's offshore and onshore areas, the report said. The statistics also show that Myanmar produced 9.79 billion cubic meters of gas and 7.2 million barrels of crude oil in 2003. The country exported 6.45 billion cubic meters of gas in 2003, earning \$655 million. <http://www.energy-pedia.com/news/myanmar/cnooc-signs-new-oil-and-gas-deals>

4. See, for instance, a 2012 report by Arakan Oil Watch, which claimed that the project would endanger the health of thousands of people, and destroy Myanmar's second largest mangrove forest.

State's socio-economic development. As such, plans for road upgrades and full electrification in 2015, combined with an expansion of tourism, extraction and energy industries could yield significant development benefits for the State in the future.

Rakhine State was affected by inter-communal violence in 2012, resulting in deaths, significant population displacement, and destruction of public property, loss of livelihoods and the disruption of public services. The violence displaced 140,000 people across 10 townships who were hosted in 76 camps and camp-like settings across the State.⁵ Restrictions on movement have also impacted people's access to livelihoods, markets and basic services. The conflict in Rakhine State pre-dates the violent incidents of 2012, and is fuelled by a combination of factors including experiences of disenfranchisement and discrimination, chronic poverty and competition over economic resources, human security and human rights challenges, tensions between national government and ethnic Rakhine interests, and mistrust between Rakhines and Muslims. In recent years, humanitarian efforts have focused on the consequences of the 2012 violence, including supporting the needs of displaced and vulnerable populations. Humanitarian efforts of international organizations have met several challenges.

2.2 Demographics

Rakhine has a population of approximately 3.2 million.⁶ The State is primarily rural, with a rural population of 2,717,104 million (84.2%) against an urban population of 505,357 million persons (15.8%).

According to the 2010 Integrated Household Living Conditions Assessment (IHLCA), Rakhine State records the second-highest poverty incidence in Myanmar (second only to Chin State). 2014 poverty data and a recent World Bank reinterpretation of this data suggests that Rakhine State's poverty rate is 78% (against a national rate of 38%) suggesting that Rakhine may be the poorest of all States and Regions in the country.

The majority of Rakhine's population (about 60%) is ethnic Rakhine. The Muslims comprise of about 30-35% of the population, including Kamans and those who identify themselves as 'Rohingya'. There are several other defined ethnic groups living in Rakhine, including the Chin, Mro, Khami etc. The Government of Myanmar 'reject such use of nomenclature unequivocally'.⁷

2.3 Brief Historical Background, including Rakhine State's government and institutions

Rakhine State, known as Arakan to the outside world for centuries, has historically been ruled by a number of independent local kingdoms, which only later came under the influence of Burmese kings.⁸ The country had been invaded several times, by the Mongols, Mon, Bamar and Portuguese,⁹ and was at times more closely connected to Bengal than to Burma, but was essentially able to retain its independence. Only in the 1780s, when Burma expanded southwards towards the Bay of Bengal, the realm of Mrauk-U was conquered by the Konbaung dynasty of Burma.¹⁰ Its capital

5. http://reliefweb.int/sites/reliefweb.int/files/resources/Affected_Map_IDP_Sites_Rakhine_OCHA_Nov2014_Ao.pdf

6. 2014 Population and Housing Census, Ministry of Immigration and Population

7. See the press release from the Ministry of Foreign Affairs 'Myanmar never recognizes such terminology which has never been included among over 100 national races of Myanmar or even in the census records of the British colonial period. Insistence on using this controversial terminology will only pose a barrier on the road to resolving this important issue. Use of such term by the United Nations would certainly draw strong resentments of the people of Myanmar making the government's efforts more difficult in addressing the issue', <http://www.mofa.gov.mm/?p=4464>

8. Rakhine's history is generally described in periods called the Dhanyawadi period (3400 B.C.E. to 327 C.E.), the Waithali kingdom (4th century to 818 C.E.), followed by the Lemro period, and the kingdom of Mrauk U which was founded in 1429 and lasted until the Burmese conquest in 1785. There were periods when the relations of Arakan with the Sultan of Bengal were closer than those with the Kings of Burma.

9. The Portuguese, during the era of their greatness in Asia, gained a temporary establishment in Arakan.

10. The Mrauk U period is seen by the Rakhine people as the golden age of their history, when it served as a commercially important port and base of power in the Bay of Bengal region and involved in extensive maritime trade with Arabia and Europe.

Mrauk-U was destroyed and its elite was either killed or fled to British-controlled Bengal. In 1826, after the first Anglo-Burmese war, the British Empire annexed Arakan and made it, together with Tenasserim (now Tanintharyi and Mon), its first foothold of what would later become the Lower Burma Province of British India.¹¹ Sittwe (then called Akyab) was designated as the new capital and quickly grew into an important trading hub.

Rakhine was the centre of several insurgencies, which fought against British rule, including some led by monks.¹² Disaffection centred in men of property and social standing under the traditional order who had been denied influence under the new colonial regime. Unrest increased after 1829 and in 1836, a serious rebel uprising attempted to expel the British.¹³ The uprising was however put down by the British with the help of Indian Sepoys. The following two decades saw Arakan increasing its rice production four-fold, and provide great employment opportunities, further boosting migration to the region.¹⁴

In 1852, Arakan was merged into Lower Burma as a territorial division. It was administratively divided into three districts along traditional divisions during the Mrauk-U period, and later into four districts, namely Akyab, Kyaukpyu, Sandoway (now Thandwe) and Northern Arakan. The practice was established of dividing the plains and hill areas into zones with different administrative patterns. While direct rule was implemented in the plains, in the hills a system of indirect rule relying on the recognition of traditional chiefs was deemed appropriate as the amount of revenue that could be raised from local taxes was too small to justify more than 'light administration'.¹⁵ In the late 19th and early 20th century the developments in Arakan Division followed the administrative reforms introduced by the British colonial authorities all over Ministerial Burma, including the introduction of headmen, district officers, deputy commissioners, and partially elected councils in some areas.

During World War II, the Japanese advanced into Arakan in 1942, and the area became a front line until the end of the war.¹⁶ Most of the Muslim population tended to be pro-British, while the Rakhine were known to (at least initially) support the Japanese. Under the Japanese occupation, Rakhine was given autonomy and was even granted its own army known as the Arakan Defense Force.

After World War II, the question arose on what terms Rakhine would be incorporated into independent Burma. Eventually, it became part of the newly independent Union of Burma in 1948 as Arakan Division, i.e. without any of the autonomy or self-governing institutions granted to the ethnic States of Shan, Kachin and Kayah. On the eve of independence some Rakhine intellectuals had demanded the formation of an independent "Arakanistan" for the Rakhine people, or at least a State within the new Union of Burma.¹⁷

And yet, soon after independence, the situation in Arakan Division slid out of control of the Burmese civilian and military authorities due to the existence of several uprisings and armed rebellions. Law and order almost completely broke down.

11. Rakhine was ceded to Britain under the Treaty of Yandabo.

12. The most well-known was U Ottama, the first monk who protested against the colonial British rule in Burma in the 1830s. Sittwe is often considered the birthplace of political monks in Myanmar. U Seinda led a large insurgent group in Rakhine for several years during the 1950s. Also, in 2007, it was the monks in Sittwe who started the protest movement against the military-led government.

13. John f. Cady, *A History of Modern Burma* (1958)

14. In 1952, Akyab was known to be the foremost rice-exporting city in the world. Cady described Akyab District, which contained 40 percent of the population of Arakan, as "in many respects a bona fide extension of East India Company Rule from Bengal."

15. Robert H Taylor, *The State in Myanmar* (2009)

16. Rakhine was the site of many battles, most notably the Arakan Campaign 1942-1943 and the Battle of Ramree Island.

17. Maung Maung, one of the architects of the 1947 Constitution, commented that "the Arakanese have clamoured for a separate State, saying that in history they too had their kings and their sovereignty, and their foreign relations were more ancient than those of the Burmese kingdoms. The reply of the Union Government has been that Arakan is an administrative division and though it is true that the Arakanese have their culture and their history they are not so different from the Burmese as to need a separate State. What they need is good roads and better communications so that their isolation may be broken down." Maung Maung, *Burma's Constitution* (1961)

In 1948, a Regional Autonomy Enquiry Commission had been charged with finding ways and means of satisfying ‘all the legitimate aspirations of Mons, Karens and Arakanese nationals’. But at the time, the urgent question was that of the Karens, and the Arakan case was indefinitely put off.¹⁸ However, the six Arakanese members of parliament who opposed the government, calling themselves the ‘Independent Arakanese Parliamentary Group’ and later the Arakanese National Unity Organisation (ANUO), continued to press for a separate State in the early 1950s. A large insurgency led by the Buddhist monk U Seinda equally demanded the establishment of a separate State. And yet, as late as April 1958, Prime Minister U Nu declared that there would be ‘no more new states’. Only after the ruling AFPFL split and U Nu had invited ANUO to join his government, a firm promise for a new State was made in the campaign for the 1960 elections.

At the same time, however, in 1961, the government established a Mayu Frontier Administration in northern Rakhine, administered by army officers rather than Rakhine officials. Following the 1962 coup military-led Security and Administration Committees (SACs) were set up at the local level all over Rakhine State, which were chaired by the regional military commander, and by the (military) Minister of Home Affairs at the centre. The establishment of a new State was again off the agenda.

While in the early 1960s the democratic government still had to make its calculations based on expected electoral support, the post-coup military authorities did not have to consider such factors. In 1971, turmoil broke out on the frontier, as a result of the war of independence in East Pakistan that led to the creation of Bangladesh. Finally, in part to appease the long-standing sentiments of the Rakhine, in 1974, the socialist government under General Ne Win constituted Rakhine State from Arakan Division (at the same time as Mon State was created and the Special Chin Division was upgraded to becoming a State).

The 1974 Constitution introduced the concept that States and Divisions had the same status. Rakhine State thus became one of the ‘constituent units’ of the ‘Socialist Republic of the Union of Burma’, made up of 7 States and 7 Divisions. People’s Councils were introduced at all levels of government administration where the central government had control. The basic units of villages/village tracts and wards, towns and townships were maintained in Rakhine State along the lines of how they had been set up in Ministerial Burma the 1920s. In the 1960s and 1970s, the Burma Socialist Programme Party (BSPP) was built up as a mass organisation following the same territorial structure as the state itself, while all other parties were banned. The party nominally sought to embrace the country’s ethnic diversity, but subordinated any desire for self-governance or even cultural autonomy under central domination. From 1974 onwards, the BSPP’s role in state administration was firmly entrenched in the Constitution itself. In the mid-1980s, the party claimed that over 2.3 million people were involved in fortnightly party cell meetings and other Party activities.¹⁹ In Rakhine State, this new structure was established across the State, and including people from all communities.

The new structure also foresaw the holding of elections to the various administrative bodies at different levels. For these elections, however, only candidates pre-screened and approved by the BSPP were allowed. While it was not mandatory that a candidate must be a member of the BSPP, in practice most of them were. In Rakhine State, such People’s Councils were thus set up at State level and at the level of village tract/ward, and townships. At the central level of government, the Pyithu Hluttaw served as the country’s legislature, with each of Rakhine State’s townships represented by at least one elected member.

18. Maung Maung, *Burma’s Constitution (1961)*

19. Taylor, *The State in Myanmar*

The participatory elements of the state structure were essentially abolished with the suspension of the 1974 Constitution in 1988, when Rakhine State, as all other parts of the country, were again placed under direct military control and administration. The territorial organisation remained the same, the dominant role played earlier by the BSPP was essentially substituted by the military in the form of the State Law and Order Restoration Council (SLORC).

In Rakhine State, the 27 May 1990 elections for 485 seats in a new national parliament demonstrated the strength of the State- and identity-based parties. They resulted in the Arakan League for Democracy (ALD) winning 11 of the 26 parliamentary seats, emerging as the largest party in the State and thus becoming the third largest party countrywide.²⁰ The National League for Democracy (NLD) came second and won 9 seats, and the National Democratic Party for Human Rights (NDPHR), mainly appealing to the Muslim electorate, won four seats.²¹ The Kamans National League for Democracy (KNLD) and the Mro or Khami National Solidarity Organization (MKNSO) won one seat each.²² However, the 1990 elections were not implemented and did not lead to the formation of a national legislature, nor did they have any effect on governance arrangements in Rakhine State.

Instead of forming elected and participatory governance institutions, the SLORC military authorities resumed their actions purportedly aimed at clamping out illegal migration into Rakhine. In 1993, the military regime began to rebuild direct links with the population and established the Union Solidarity and Development Association (USDA). It gradually became the largest state sponsored mass organisation (claiming in 2005 that it had grown to 23 million members). USDA branches were set up in townships across Rakhine State, as in village tracts and wards. Membership was “essentially compulsory for civil servants and those who sought to do business with or receive services from the state.”²³ Division officers of the USDA were often prominent regional businessmen as well as military personnel and civil servants. In 1997, the SLORC was reorganized into the State Peace and Development Council (SPDC), which set up a pyramidal structure of similar committees down to the village tract/ward level.

In May 2008, the national referendum on the new Constitution was held. The new Constitution made Rakhine State a constituent unit of the new Union of the Republic of Myanmar, equal in status to the other States and Regions. Accordingly, its institutions were set up following the 2010 elections. The 2010 multiparty elections again led to rising political tensions in Rakhine State. Many Rakhine Buddhists were angry at pledges by the Union Solidarity and Development Party (USDP), which had emerged from the USDA a few months before the elections to grant Muslim people citizenship, which the Rakhine nationalist parties saw as part of an effort to secure the Muslim vote and thereby limit the electoral success of the Rakhine party.

Notably, in the 2010 election holders of “white cards”, i.e. temporary registration documents that according to the 1982 Citizenship Law did not convey or document citizenship, but nevertheless a legal residence status, were admitted to cast their votes.

The elections for the members of the Rakhine State Hluttaw were contested on the basis of townships, which were each divided in two separate constituencies (see Table 2). As the State has 17 townships, 34 territorial constituencies were formed. In addition, one constituency was set up

20. The largest would have been the NLD and the SNDP. With 160,783 votes cast in its favor, the ALD emerged with one seat more than the NUP, although the latter had garnered a far higher number of votes countrywide (2,805,559).

21. It received 128,129 votes in the 1990 election.

22. They received 10,596 and 22,778 votes, respectively. Several other parties competed and received a sizeable number of votes but did not win any seats: Students and Youth League for Mayyu Development (Arakan) - 57,088 votes, the Arakan People's Democratic Front - 29,115 votes, the Arakan National Unity Organization (allied to NUP) - 8,663 votes, the Arakan Nationalities Democracy Party - 2,033 votes, and the Rakhine National Humanitarian Development Organization - 1,942 votes. No woman member was elected from Rakhine State.

23. Taylor, *The State in Myanmar*

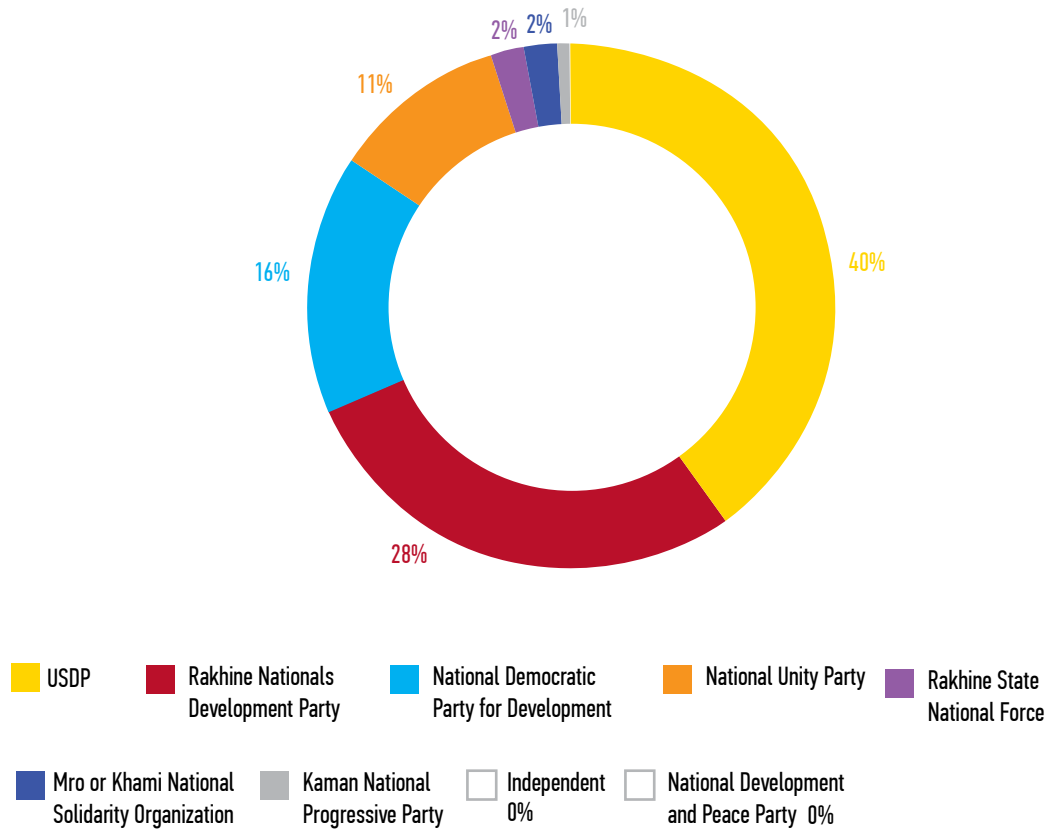
Constituency	Party	Candidate	Votes
Kyauktaw -1	Rakhine Nationalities Development Party	Maung Hla Kyaw	18,542
	National Democratic Party for Development	Ba Tha	9,357
	Mro or Khami National Solidarity Organization	Kyaw Min	5,984
	Union Solidarity and Development Party	Aung Tun Sein	5,463
	National Unity Party	Aung Kyaw Thein	1,428
	Rakhine State National Force	Maung Yin Htwe	1,292
Kyauktaw -2	Rakhine Nationalities Development Party	Saw Nyein	22,712
	Union Solidarity and Development Party	Aung Tun Hlaing	7,319
	National Democratic Party for Development	Mei Lon	5,401
	Mro or Khami National Solidarity Organization	Kyaw Tun Naing	4,501
	National Unity Party	Tun Sein	2,065
	Rakhine State National Force	Hla Saw	1,533
Rathidaung -1	Rakhine Nationalities Development Party	Hla Maung Thein	12,675
	Union Solidarity and Development Party	Thein Maung	10,617
	National Unity Party	Maung Thein Hlaing	4,743
Rathidaung -2	Rakhine Nationalities Development Party	Po Min aka Bo Min	15,587
	National Unity Party	Kyaw Win	7,237
	Union Solidarity and Development Party	Thein Maung	2,843
Thandwe -1	Union Solidarity and Development Party	Hla Han	9,747
	National Unity Party	Tin Maung	6,564
	Rakhine State National Force	Thaung Tun	6,209
Thandwe -2	Union Solidarity and Development Party	Aung Naing Oo	9,413
	National Unity Party	Chit Tin	6,523
	Rakhine State National Force	Ba Shin	5,736
Gwa -1	Union Solidarity and Development Party	Htein Lin	5,538
	National Unity Party	Thaung Aye	4,680
Gwa -2	Union Solidarity and Development Party	Soe Aye	7,471
	National Unity Party	Khin Maung Myint	6,654

Table 2: 2010 Rakhine State Hluttaw election results (selected townships)

for the Chin ethnic community of the State, for whom voters registered as Chin were entitled to cast a vote in addition to their territorial constituency vote. Altogether, therefore, 35 members were elected for the State Hluttaw (see Figure 2).

The **State Hluttaw** is formed by (1) two representatives elected from each township in the State; (2) representatives elected from each national race determined by the authorities concerned as having a population which constitutes 0.1 percent and above of the population of the Union; and (3) representatives who are the Defence Services personnel nominated by the Commander-in-Chief for an equal number of one-third of the total number of Hluttaw representatives elected under (1) and (2), i.e. one quarter of the total number of members.

Figure 2: Votes received (number and percentage) by various parties in the Rakhine State Hluttaw elections in 2010



In the State Hluttaw, the Rakhine Nationalities Development Party (RNDP), although it won only about 28 percent of the popular vote in Rakhine, holds 18 seats, which makes it the only State or Region Hluttaw where the USDP did not emerge as the largest party in terms of seats (see Figure 3). The USDP did get the highest number of votes (40%), but due to the workings of the first-past-the-post electoral system holds only 14 elected seats. The military occupies 12 seats. The National Democratic Party for Development (NDPD), which caters mainly to a Muslim electorate, received about 16 percent of the votes, but only two seats in the Hluttaw. The National Unity Party (NUP), despite garnering 11 percent of the votes cast, has only one a seat. The other parties fielding candidates, the Rakhine State National Force, the Mro or Khami National Solidarity Organization, the Kaman National Progressive Party, the National Development and Peace Party and an independent candidate did not win any seats. The USDP was the only party fielding candidates in all 34 territorial constituencies and the ethnic Chin constituency, which it won unopposed.

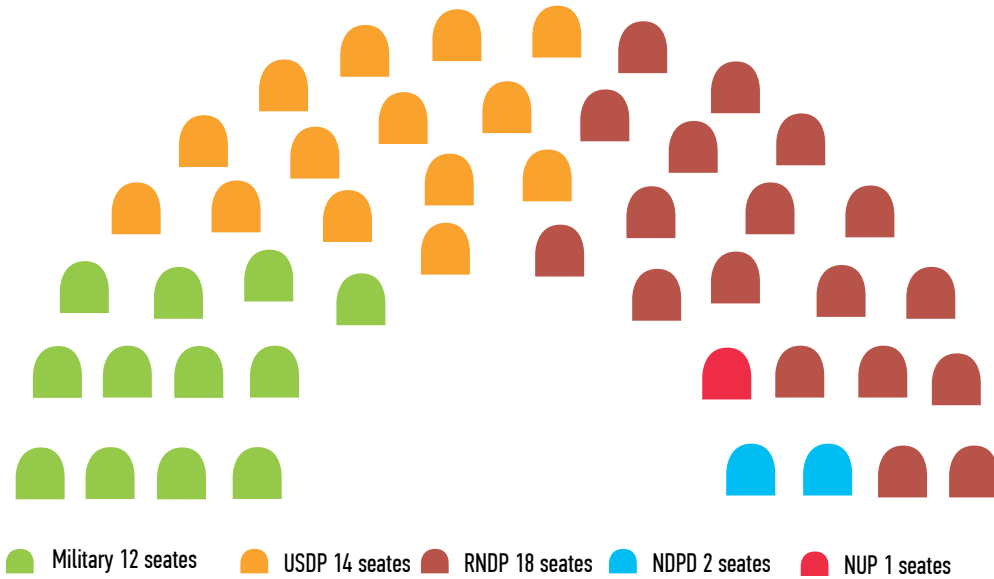
The term of the Region or State *Hluttaw* is the same as the term of the *Pyidaungsu Hluttaw*, i.e. five years. All *Hluttaw* members except one are men. The legislative activity of the Rakhine State *Hluttaw* has been similar to that of other States and Regions. In 2012 and 2013, the required State laws essential for budgetary and planning purposes were adopted.²⁴

The head of **executive branch** of the State is the Chief Minister. Members of the State Government are Ministers of the State. The institutional framework for Rakhine State follows that of other States and Regions and is prescribed in detail in the 2008 Constitution, as well as the respective laws adopted for the State and Region Hluttaws and Governments in 2010. The State Government was established on 31 January 2011. Despite the fact that the RNDP was the single largest party, it did not hold a majority of seats in the State Hluttaw on its own. The State Government was there-

24. These laws essentially comprised of the State Development Plans and the Budget Allocation Law. The Municipal Act was passed in 2013.

Rakhine State Hluttaw
47 seats
(35 elected, 12 military appointed)

Figure 3: Rakhine State Hluttaw Composition



fore established with the support of the votes by the USDP and the military members. However, the RNDP was later also offered three government ministries. Initially, Hla Maung Tin (USDP), a retired colonel, was appointed as Chief Minister, Htein Lin, USDP, as Speaker and Thar Nyunt, USDP, as Deputy Speaker of the State Hluttaw. In June 2014, Hla Maung Tin resigned from his post and was replaced by Major General Maung Maung Ohn.²⁵

In addition to the Chief Minister, the State Government also comprises of 10 Ministers and the Advocate General of Rakhine State (see Table 3).²⁶ The USDP holds 6 ministerial portfolios, and the RNDP has three ministers in the Rakhine State Government (Agriculture and Livestock Breeding, Forestry and Mines, and Electric Power and Industry). The Minister of Security and Border Affairs is by constitutional requirement held by a representative of the military. The single

Name	Function	Party
Maung Maung Ohn	Chief Minister	Military
Col Htein Lin	Ministry of Security and Border Affairs	Military
Kyaw Thein	Ministry of Finance	RNDP now consolidated to ANP
Tha Lu Che	Ministry of Agriculture and Livestock Breeding	USDP
Kyaw Khin	Ministry of Forestry and Mines	USDP
Mya Aung	Ministry of Planning and Economics	USDP
Hla Han	Ministry of Transport	USDP
Aung Than Tin	Ministry of Electric Power and Industry	RNDP
Maung San Shwe	Ministry of Municipal Affairs	USDP
Aung Kyaw Min	Ministry of Social Affairs	USDP
KoKo Naing	Ministry of National Races Affairs (Chin)	USDP

Table 3: Member of the Rakhine State Government Cabinet

25. Maung MaungOhn was Deputy Minister for Border Affairs and head of the Rakhine State's Emergency Coordination Center before he was named to become a military-appointed Rakhine State Hluttaw member by the UEC on 21 June 2014.

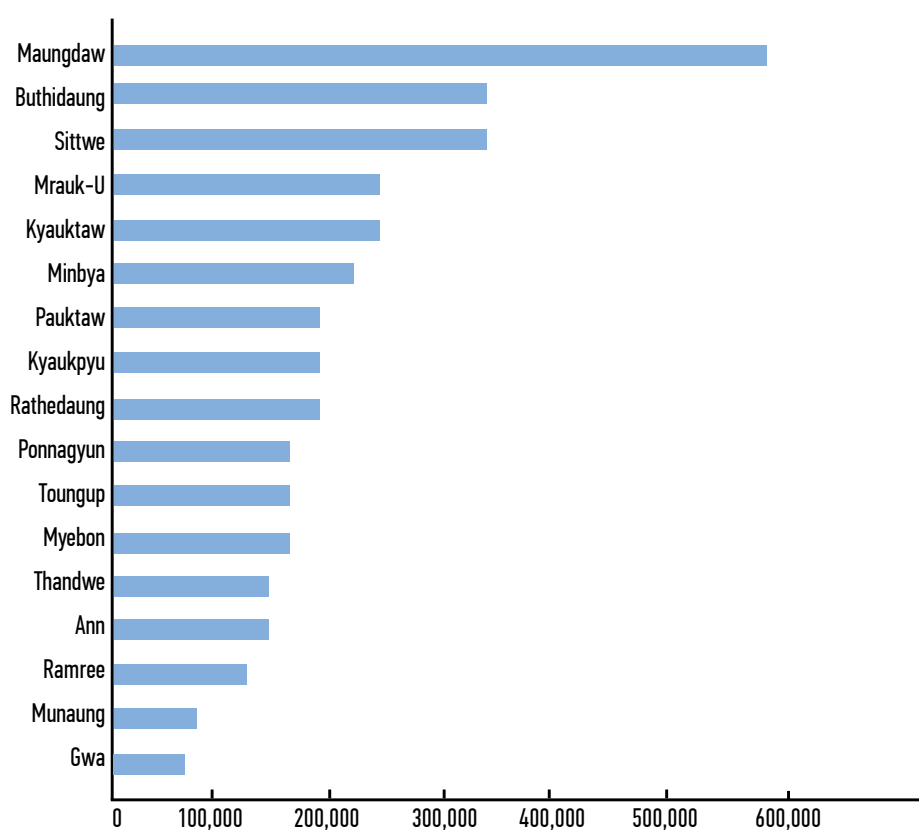
26. August 2014

representative elected for the ethnic minority constituency in the State, i.e. the Chin community is automatically member of the State Government.²⁷ All members of the Rakhine State Government are men.

For the Union legislature, which is composed of the Pyithu Hluttaw and the Amyotha Hluttaw, 17 and 12 representatives were elected for Rakhine State, respectively. The average number of voters per seat/representative in Rakhine State is near the average figure for all States and Regions combined, Rakhine is therefore neither over- nor under-represented in the Pyithu Hluttaw. However, due to the large discrepancies between township populations sizes within Rakhine State, there is a considerable malapportionment within the State, which also explains the disproportional result in the State Hluttaw, described above.

For the seats in the **Pyithu Hluttaw**, each township served as a constituency. Hence, altogether 17 members were elected from Rakhine State to the larger one of the two Houses of the Union legis-

Figure 4: Township/Pyithu Hluttaw constituency populations



lature. Nine of these seats were won by the RNDP, which had won 29 percent of the vote, while 8 seats were won by the USDP, which had taken 43 percent of the vote. (see Table 4) The NDPD and the NUP, despite winning 14 and 9 percent of the vote respectively, did not get any of the Rakhine State seats in the Pyithu Hluttaw. The NLD did not participate in the 2010 elections.

For the Amyotha Hluttaw, each Region and State is assigned 12 seats. These are elected on the basis of groups of townships. In an effort to create more or less equally sized constituencies, and as there are 17 townships in Rakhine State, Pauktaw and Myebon, Rathidaung and Ponnagyun, Kyaukpyu and Manaung, Rambree and Ann as well as Thandwe, Taunggoat and Gwa townships were com-

27. The representative was declared elected as he was an unopposed candidate.

Party	Constituencies contested	Votes	Percent	Seats
Union Solidarity and Development Party	17	453,026	43%	8
Rakhine National Development Party	12	311,875	29%	9
National Democratic Party for Development	4	146,208	14%	-
National Unity Party	15	98,791	9%	-
Independents	4	36,197	3%	-
Rakhine State National Force	2	9,281	1%	-
Kaman National Progressive Party	2	7,741	1%	-
Democratic Party (Myanmar)	1	3,606	<1%	-

Table 4: 2010 Pyithu Hluttaw election results for Rakhine State

bined into single constituencies while Maungdaw, the most populous township, was divided into two. The other townships counted as one constituency each. The RNDP, which received 28 percent of the vote, won 7 of the 12 available seats, while the USDP, which received 41 percent of the vote, won 5 seats. None of the other eight parties won any seats (see Table 5).

The situation in the State Hluttaw and among the elected representatives of Rakhine State constituencies has been unusually dynamic in comparison with other States and Regions. Rakhine has so far been the only State whose Chief Minister was replaced before the end of his term. It is also the only State or Region Hluttaw where the USDP is not the largest party. Rakhine rep-

Party	Constituencies contested	Votes	Percent	Seats
Union Solidarity and Development Party	12	442,726	41%	5
Rakhine Nationalities Development Party	8	303,842	28%	7
National Democratic Party for Development	5	153,273	14%	-
National Unity Party	10	121,255	11%	-
Independents	1	25,640	2%	-
Khami National Development Party	3	21,401	2%	-
Mro or Khami National Solidarity Organization	1	9,995	1%	-
Rakhine State National Force	2	6,551	1%	-
Unity and Democracy Party	2	4,136	<1%	-
Kaman National Progressive Party	1	3,969	<1%	-

Table 5: 2010 Amyotha Hluttaw election results for Rakhine State

representatives in the Union legislature (from the RNDP) have been outstandingly vocal and have proposed a number of important legislative initiatives. Moreover, the Rakhine nationalist political parties have gone through a series of changes and mergers.

The situation also informs and shapes the efforts, undertaken since 2012, of reintroducing popular participation at the local level, in particular the townships and the village tracts and wards. The elections to the Village Tract and Ward Administrators in 2012 took place for the first time during 2012 and 2013 as in all States and Regions in Myanmar.

On 17 June 2013, the RNDP and the just recently re-established Arakan League for Democracy (which had won the 1990 elections) signed an agreement to merge under the name of Rakhine National Party (or Arakan National Party). The RNDP was officially dissolved on 6 March 2014. The merger of these two parties has created a powerful political force in the state, with strong legitimacy and organisational strength that is likely to dominate the 2015 elections in Rakhine State.²⁸

The RNDP is also one of the major actors in the country-wide debates about a possible reconfiguration of the federal structure of the Myanmar Constitution. It has called for renegotiation of the whole constitution with the aim to strengthen the powers and competencies given to States and Regions, an aspiration that can only be expected to grow following the 2015 elections.

The 2015 elections, in particular the Rakhine State Hluttaw election, will be crucially important not only for the further developments with regard to the communal violence and inter-religious tensions, but also for the efforts to further expand and develop the State's institutional mechanisms of local governance.

Questions such as accountability and public participation in local decision-making processes cannot be considered entirely disconnected from the political dynamics in any given locality. While neither this summary, nor the mapping as a whole focus on the political transition in Myanmar, or in any given State or Region, without taking into account the overall context of political reform would not do justice to a comprehensive mapping of the local governance situation on the ground. Increasingly, questions such as the spending of public funds for development projects, and the accountability of office holders for their administrative actions will gain a political dimension, as Myanmar gradually moves closer to a multi-party environment.

In the ethnic States like Rakhine, such questions will also play a key role in the further development of Myanmar's quasi-federal system overall, and the terms of settlement in the peace process specifically. A clear delimitation of roles and a definition of responsibilities between local administrators and civil servants on one side, and political or interest groups representatives on the other side, will be required. The degree to which Rakhine State will be successful in both reflecting its own ethnic diversity while at the same time delivering basic services in an equitable and effective manner will depend largely on the progress made in building local governance institutions and processes that are inclusive and responsive to the situation on the ground.

28. Ibid. In a similar effort to consolidate the Rakhine national movement, in April 2014, a Rakhine National Conference was held in Kyaukpyu. Attended by around 1,500 delegates from Rakhine politics, civil society, armed groups, academics, monks, women and youth, including from the diaspora, it brought the different influential sectors of Rakhine society together to debate and foster a common stance on key issues including politics, peace and stability, socio-economy and natural resource revenue sharing and environmental management.



3. Methodology

3.1 Objectives

In this governance mapping UNDP and the General Administration Department of the Ministry of Home Affairs have worked together to present an overview of the state of affairs in governance in all 14 States and Regions in Myanmar, with the objective to:

- Provide an overview of the quality of governance in general and the quality of governance in service delivery (for a selected number of key basic services) at the township and the village tract or ward level.
- Identify related capacity needs of government and non-government stakeholders to improve their performance for good governance and effective service delivery.

3.2 Mapping Tools

In order to obtain a holistic perspective of governance at local level, the Local Governance Mapping exercise used a combination of relevant instruments to map the quality of local governance from a ward/village-tract, township and Region or State level perspective.

Community-level Mapping (Citizen Report Card, Service Provider interviews and Community Dialogue sessions): In Rakhine State, a sample of 384 people, drawn from 8 Village Tracts/Wards in four Townships (Gwa, Kyauktaw, Rathedaung, and Thandwe) were interviewed using the Citizen Report Card (CRC) methodology. The questionnaire focused on collecting opinions and experiences of people who make use of services provided by government (such as primary healthcare and primary education) and on the way the respondents interact with government (see Annex 1).

In addition, 59 service-providers were interviewed in the same locations, focusing on the service delivery process and on their interaction with people who make use of these services. The objective was not to conduct an in-depth technical assessment of the education, health or water sectors as this was beyond the scope of this mapping. Instead, these interviews were intended to gain insights in the actual process of service delivery by describing and analysing the way in which service providers and service users interact to realise the actual delivery of basic services. The interviews focused on the service delivery process and the interactions of the service providers with people using the services. In Rakhine, the service providers were conducted with 8 Village Tract Administrators (VTAs), 8 school principals, 22 primary school teachers, 9 heads of healthcare facility, and 12 healthcare staff in the selected village tracts/wards.

Similar issues were also discussed during the Community Dialogues (CD), which were held in the same village tracts/wards, in which the 8 selected village tracts/wards, involving over 300 service-users and 153 service-providers participated. The objective of this was to collectively identify issues related to service delivery, state-people interaction and community relations to public administration, and to find solutions for some of the problems identified that could be implemented at the community level by these actors themselves.

Township governance background studies: In order to gain insights in the functioning of government administration at the township level (comprising the GAD, represented through the TA, as well as representatives of the various sector departments and of important governance

processes within Rakhine State) a background study was conducted in each of the four townships. Secondary data were collected and key resource persons were interviewed. In addition, Focus Group Discussions were held at the township level to engage with different groups and to understand their relationship and interaction with government processes at township level. In Rakhine these included the Township Municipal Affairs Committee (TMAC), Township Development Support Committee (TDSC), Ward/Village Tract Administrators (WA/VTA) and Civil Society Organisations (CSOs). These discussions focused, first of all, on the role of these actors in the governance process at township level and the relationship between them and the GAD and the various government departments at the township level. To complete the 360-degree mapping of governance at township level, relevant Directors of Departments at the Regional level were also interviewed.

State level discussions: Interviews were conducted at state level to better understand state level experiences and perceptions regarding the functioning of township level governance and their support to lower level local governance institutions. In Rakhine, state level interviews were conducted with the Secretary of State, GAD, Education Department, Health Department and CSOs.

3.3 Selection of townships in Rakhine State

In consultation with the Rakhine State Government, four townships, namely Gwa, Kyauktaw, Rathedaung and Thandwe townships were selected to participate in the LGM (see Table six and Figure 5).

Township	Village Tract/ Ward
Gwa	Ma Kyay Ngu Village Tract
Thandwe	Ward No. 2
	Kyauk Gyi Village Tract
Rathedaung	Kyauk Gyi Village Tract
	Lay Gwa Sone Village Tract
	Thein Taung Village Tract
Kyauktaw	Pyi Taw Thar Ward,
	Tin Ma Village Tract

Table 6: Selected Townships and Village Tract/ Wards LGM in Rakhine

Figure 5: Rakhine State townships, wards/village tracts included in the mapping



3.4 Introduction to the selected townships ²⁹

3.4.1 Kyauktaw Township

Kyauktaw Township belongs to Sittwe District, located in central Rakhine and connected with the capital, Sittwe and other towns through a network of roads. Water supply and electricity networks are not well-developed. Main economic activities include small farming and fishing. The township experienced inter-communal violence recently and inter-community tensions remain high.

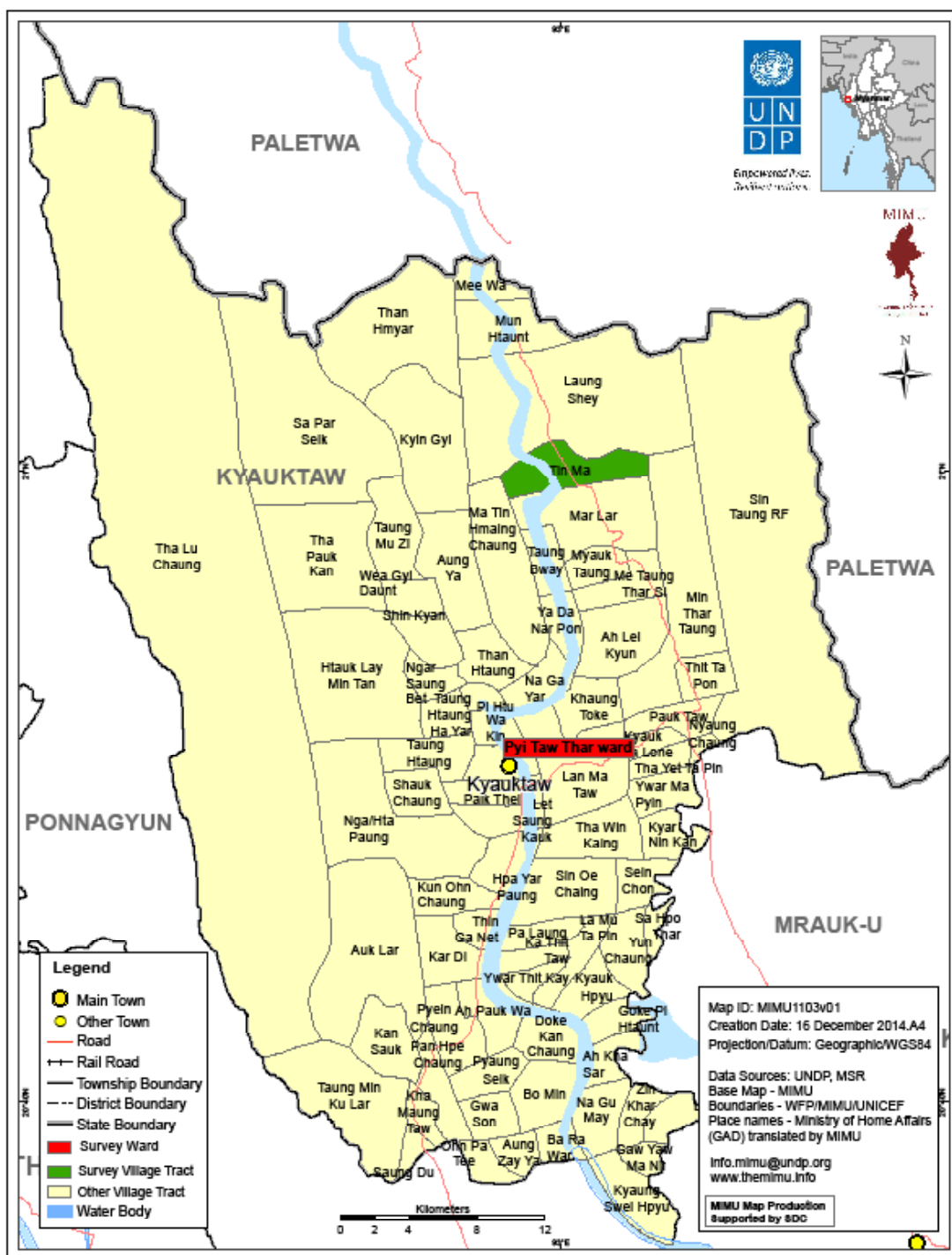


Figure 6: Map of Kyauktaw Township, village tracts

29. An overview of some demographic and socio-economic characteristics of respondents in these township is provided in Annex 1.

Table 7: Kyauktaw Township at a Glance

Basic Facts –Kyauktaw			
	Male	Female	Total
Population urban	8,675	10,667	19,343
Population rural	90,365	105,505	195,870
Population total	99,041	116,172	215,213
GDP	-		
Township Administrator	U Zaw Min Htike		
Village Tracts	79		
Wards	5		
Villages	283		
Main Industry	Agriculture		

Table 8: Thandwe Township at a Glance

Basic Facts - Thandwe			
	Male	Female	Total
Population urban	8,968	10,354	19,322
Population rural	52,466	55,802	108,268
Population total	61,434	66,156	127,590
GDP	-		
Township Administrator	U Than Zaw Han		
Village Tracts	59		
Wards	12		
Villages	244		
Main Industry	Agriculture		

3.4.2 Thandwe Township

Thandwe Township is part of Thandwe District. It is located on the coast and is one of the major seaports. Known during the British colonial era as Sandoway, the township is classified as developing, with tourist and fisheries industries. There is a significant disparity between rural and urban areas. The township is connected with major Myanmar cities via air routes, while road infrastructure and connectivity to others townships is not well developed. Water supply and electricity networks are poorly developed but during the last year, large investments in infrastructure, upgrading of the airport and connectivity to the national electricity grid have been made. The improvements are significant but due to the fact that the sample village tracts for Thandwe townships are pre-dominantly rural those improvements are probably not properly reflected in the respondents answers. In addition there are plans to further develop Thandwe's tourism industry around the picturesque Ngapali beach. The township experienced inter-communal violence both in 2012 and 2013 and inter-community tensions remain high.

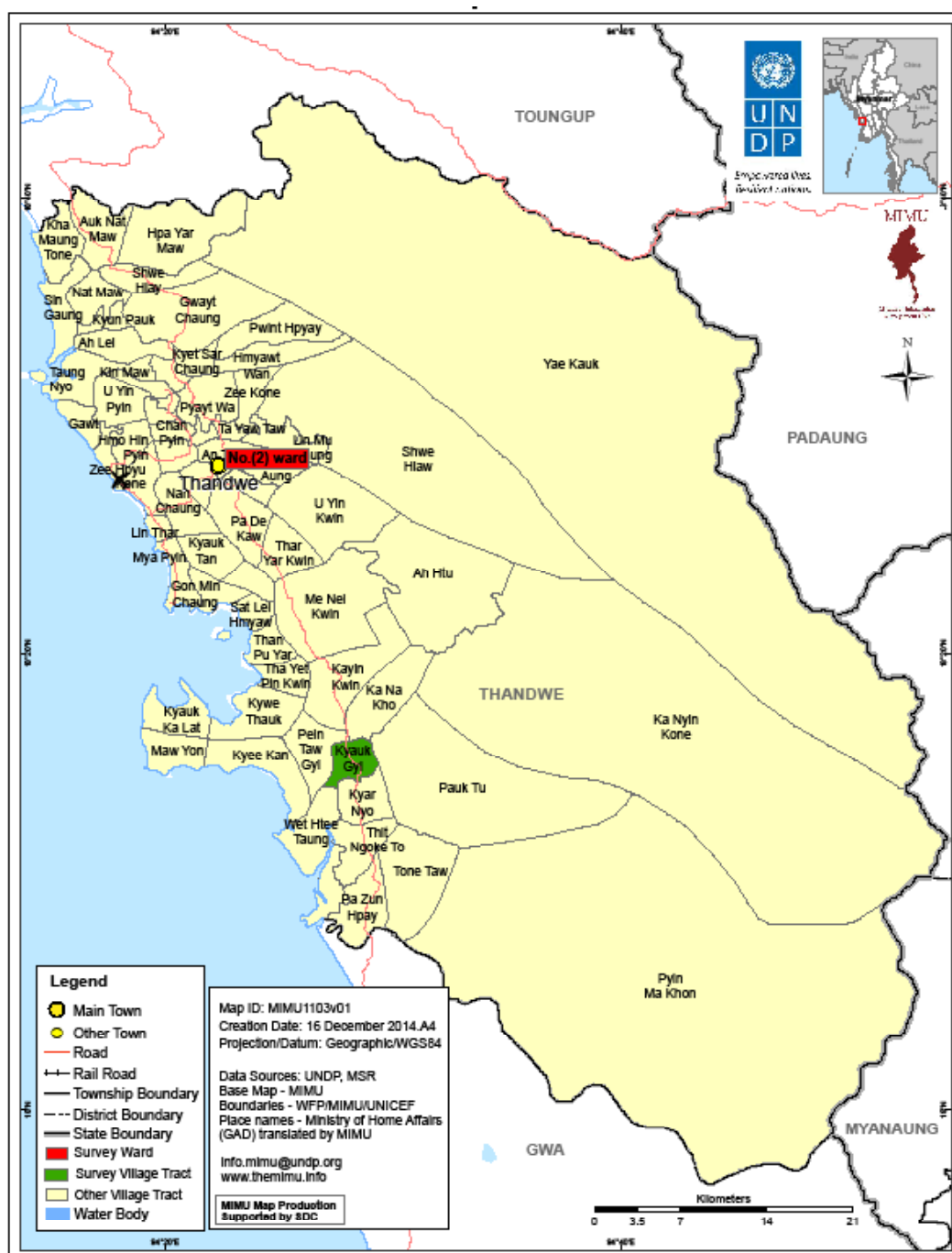
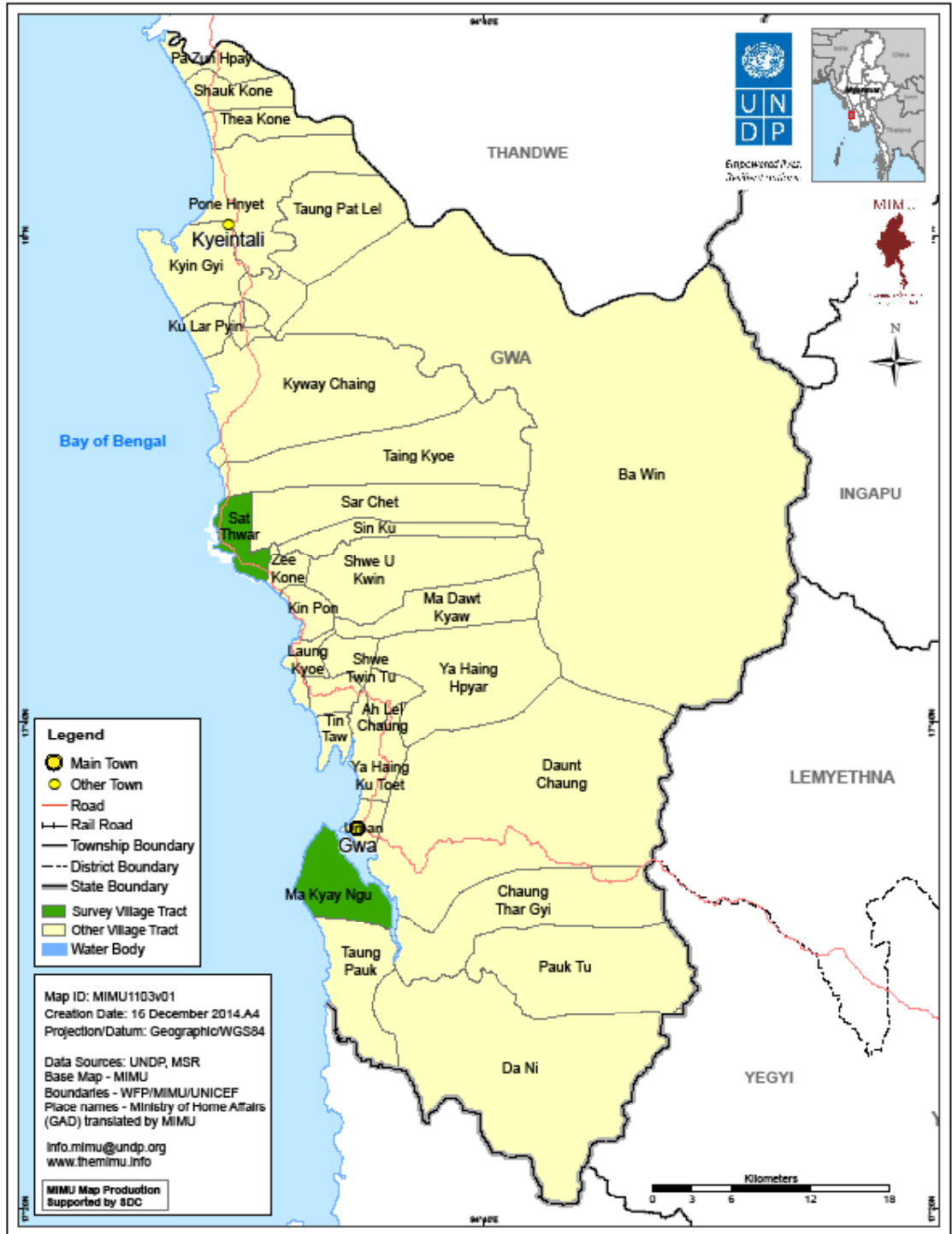


Figure 7: Map of Thandwe Township, village tracts

3.4.3 Gwa Township

Gwa Township is part of Thandwe District. The principal town is Gwa. The township is located in southern Rakhine and is approachable by road (from Yangon) and boat from the coastal areas. The urban area is not well-connected with village tracts due to poor road infrastructure. Generally, infrastructure is in a dilapidated condition in Gwa. Gwa Town has electricity for only a few hours per day. The main economic activity is fishing.

Figure 8: Map of Gwa Township, village tracts



Basic Facts - Gwa			
	Male	Female	Total
Population urban	6,300	6,519	12,819
Population rural	22,376	23,196	45,572
Population total	28,676	29,715	58,391
GDP	-		
Township Administrator	U San Shwe Aung		
Village Tracts	33		
Wards	6		
Villages	156		
Main Industry	Fishing and Trade (future plan for Tourism)		

Table 9:
Gwa Township
at a Glance

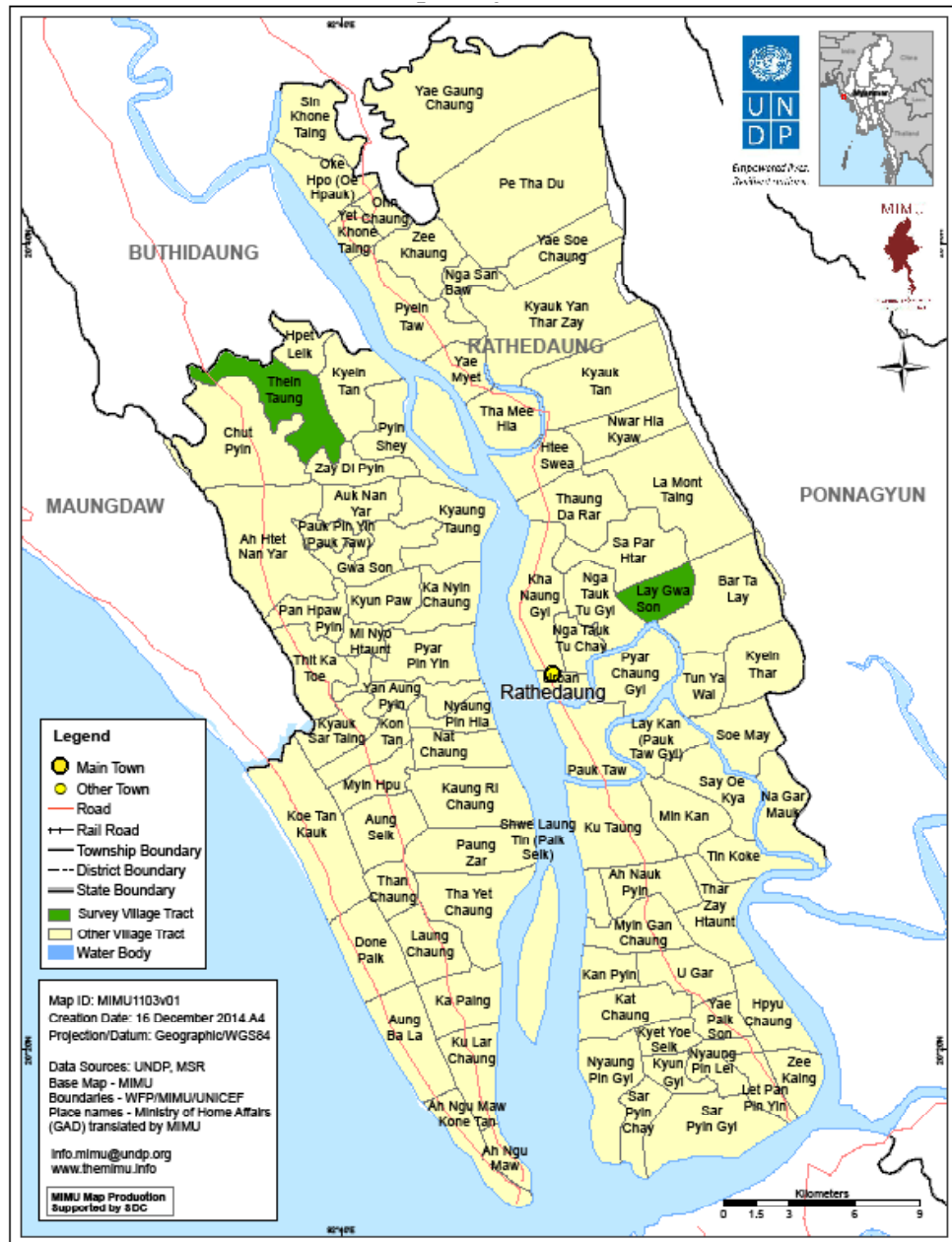
Basic Facts - Rathedaung			
	Male	Female	Total
Population urban	3,448	3,075	7,405
Population rural	75,463	80,050	155,513
Population total	78,911	84,007	162,918
GDP	482,459 Kyats		
Township Administrator	U Maung Maung		
Village Tracts	88		
Wards	4		
Villages	196		
Main Industry	Agriculture		

Table 10:
Rathedaung
Township at a
Glance

3.4.4 Rathedaung Township

Rathedaung is located in Sittwe District in northern Rakhine and is accessible by boat from Sittwe only. The infrastructure (water, roads and electricity) in Rathedaung is in poor condition.

Figure 9: Map of Rathedaung Township, village tracts



Through the selection of a small representative sample of locations from the State this mapping derives a number of general conclusions that are valid for local governance in the State as a whole. One of the purposes to publish this report is to verify those assumptions and to contribute to a State wide debate and further analysis around local governance participation and voice on the evidence collated. The intended approach is to present and discuss the findings in the State itself and further deepen and expand the understanding of the state of local governance in Rakhine. This should also allow comparison with a baseline, across the country and over time, as and when future local governance reforms will be implemented.

It is important to mention that this report does not cover governance structures in conflict areas or in IDP camps.



4. Governance at the front line – participation, accountability and responsiveness for service provision: research findings

4.1 Recent developments at community level in Rakhine State from a people's perspective

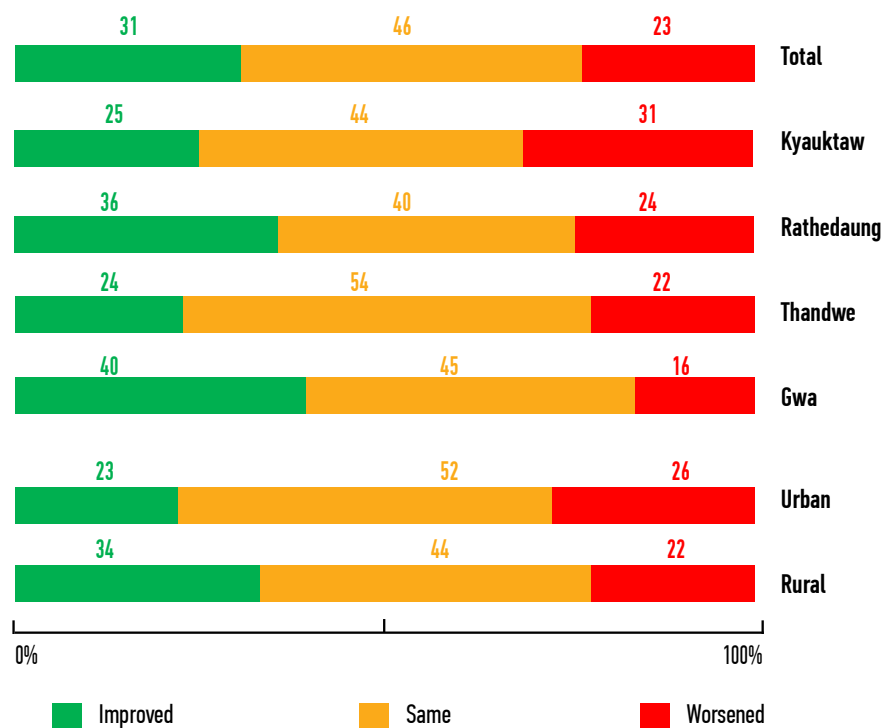
Before focussing on some of the governance issues related to service delivery in Rakhine State, it is worth looking at how the people in the four townships perceive some of the major changes that have taken place over the last few years.

4.1.1 Livelihood situation

With regard to changes in the household income situation of respondents, with slightly more respondents (31 percent) saying that their income situation had improved over the last three years (see Figure 10). Slightly more respondents in Rathedaung and Gwa mentioned an increase in income as compared to Kyauktaw and Thandwe. In addition, more rural respondents mentioned an improvement in their income situation than urban respondents.

Figure 10: Changes in household income situation over the last three years in the four townships in Rakhine State.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 384



The food availability situation for most households of the respondents in the four selected townships has not changed much over the last three years (see Figure 11). For 19 percent of the respondents the food situation has worsened and for 26 percent it has improved, while for the majority (55 percent) it stayed more or less the same. All four townships show a similar pattern except that in Rathedaung a slightly larger part of the respondents mentioned an improvement of their food situation (40 percent), while in Kyauktaw only 9 percent mentioned an improvement in food situation. Rural respondents mentioned more often an improvement in their food situation as compared to urban respondents.

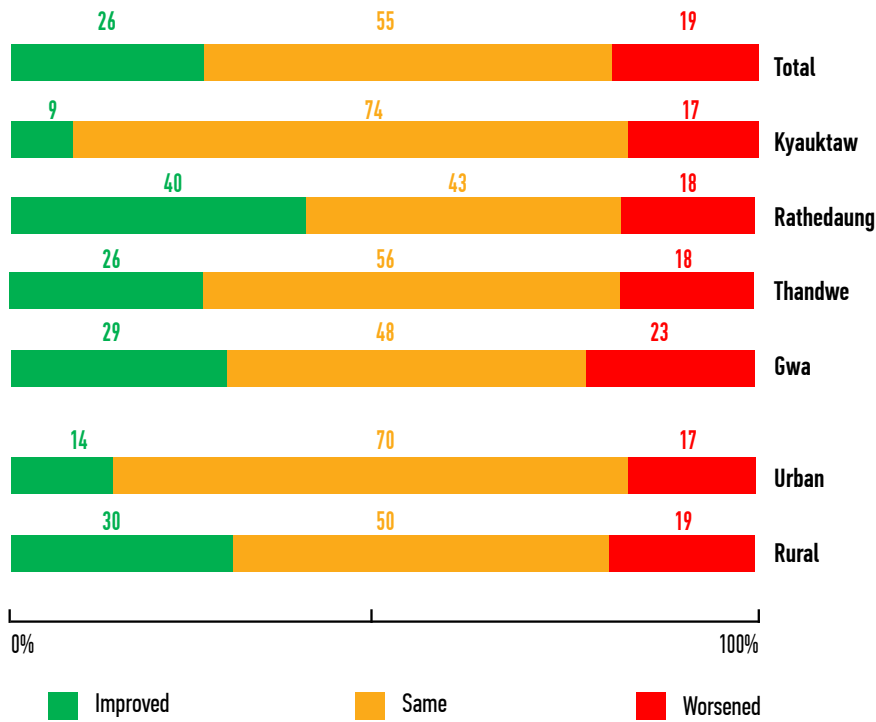


Figure 11: Changes in household food situation over the last three years in the four townships in Rakhine State.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 384

4.1.2 Perceptions on safety and security in Rakhine State

On the question whether respondents feel safe in their village tract or ward, most respondents (83 percent) feel safe in their community, while 14 percent do not feel safe (see Figure 12). Of those respondents who mentioned that they either did not feel safe or felt neither safe nor unsafe (n = 65), the most important reason mentioned by 69 percent of these respondents was the conflicts between different groups of people (religious, ethnic, language) in their community, followed by lack of law enforcement (20 percent) and a deterioration in the morale of people (like more alcoholism, abuse, etc.). The figure of 83 percent feeling safe is positive, but compared to other States and Regions it is rather low. This can be explained by the recent inter-community violence within these townships like e.g. Rathedaung.

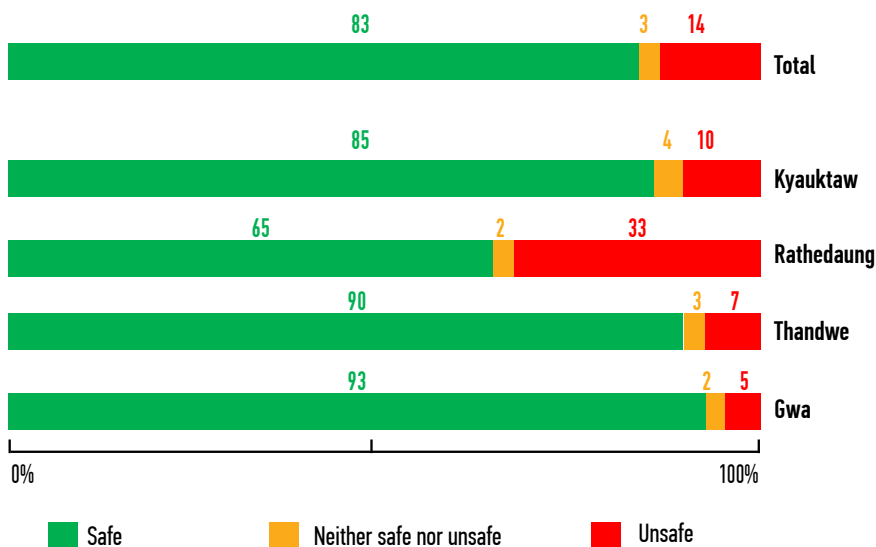
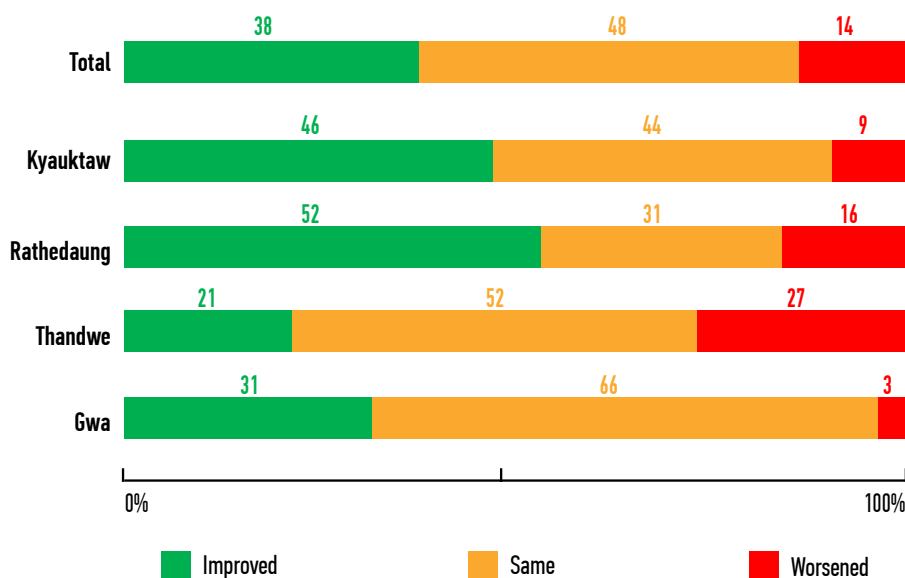


Figure 12: Perception of the safety and security situation in the ward or village tract of the respondents in the four townships.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 384

Eighty-six percent of the people interviewed reported that the safety situation in their immediate area of residence had stayed more or less the same or had improved over the last three years, while only 14 percent had noticed a deterioration in the safety situation (see Figure 13). Comparatively, more Muslim respondents recorded a deterioration of the safety situation (38 percent), but still 62 percent of the Muslim respondents mentioned that the safety situation had stayed the same or had even improved over the last three years. Thandwe recorded the relative highest number of respondents who felt that the safety situation had worsened over the last three years (27 percent) and Gwa the lowest (only 3 percent).

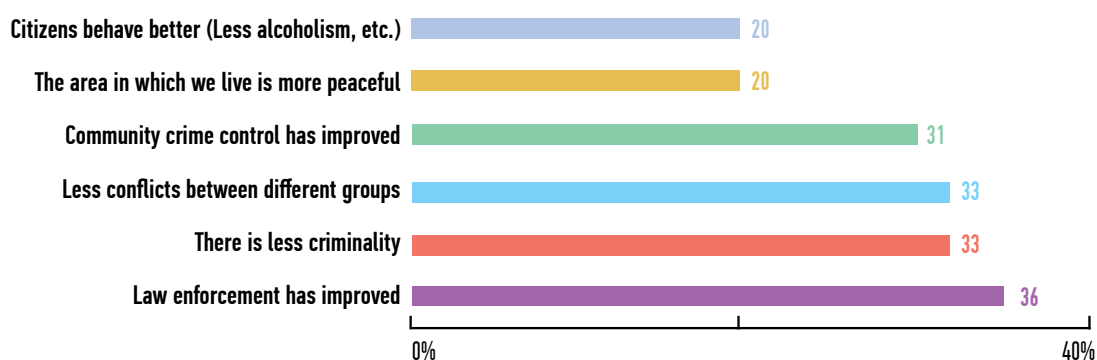
Figure 13: Perceived changes in the safety situation over the last three years in the village tract or ward in which the respondents live in the four townships.



Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 384

According to the 144 respondents who stated that the safety situation has indeed improved, the most common reasons given were related to the local situation in their immediate surroundings like improved law enforcement and reduced criminality in the village tract or ward, while issue related to an improved national or regional peace situation were mentioned less frequently (see Figure 14).

Figure 14: Reasons for improvements in the safety situation in the village tract or ward in the four townships.



Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n=144. More than one answer was possible.

When asked “what could be done more to improve the safety situation in your village tract or ward” most of the respondents recommended to increase the number of police or improve law enforcement (52 percent), while others stressed the importance of more community action like improved watchfulness (24 percent) or the introduction of safety volunteer groups 22 percent).

Another aspect of safety, which the mapping addressed is the perception of freedom of expression. The respondents were asked whether they felt free and safe to express their opinion about government in public. On this aspect of safety the scores were less positive. Only 32 percent of the respondents mentioned that they felt free to say what they want about government while 62 percent feel in some way restricted to express themselves freely, being afraid of the possible repercussions this might have (see Figure 15). This indicates that people still don't have full confidence in government respecting rule of law and basic human rights. The differences between male and female respondents were minimal. This general picture is more or less the same as in other States and Regions. Figure 15 also shows that male respondents feel in general more at ease to express themselves in public about their opinion of government as compared to female respondents (37 vis-à-vis 27 percent). Muslim respondents felt more restricted than other respondents to express themselves freely in public (only 15 percent of the Muslim respondents felt that they could express themselves freely).

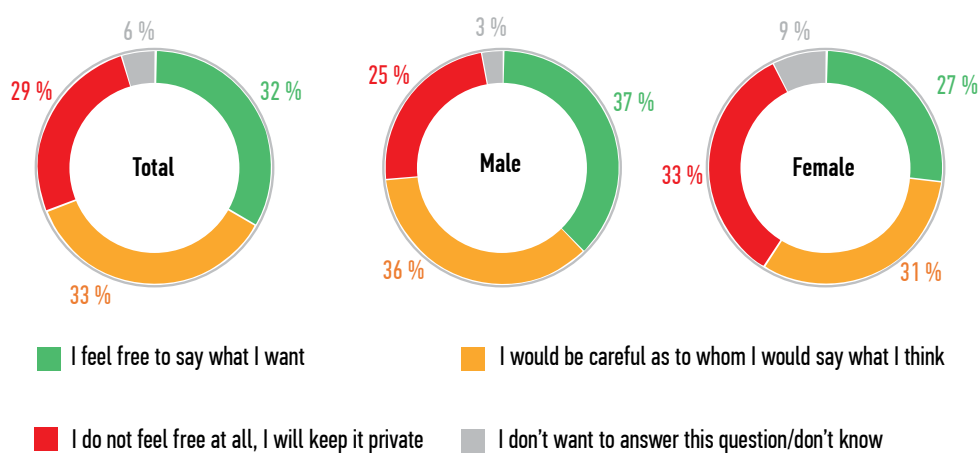


Figure 15: The extent to which respondents feel free to say in public their opinion about the government in general.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 384

4.1.3 People's views on improvements in their village tract or ward

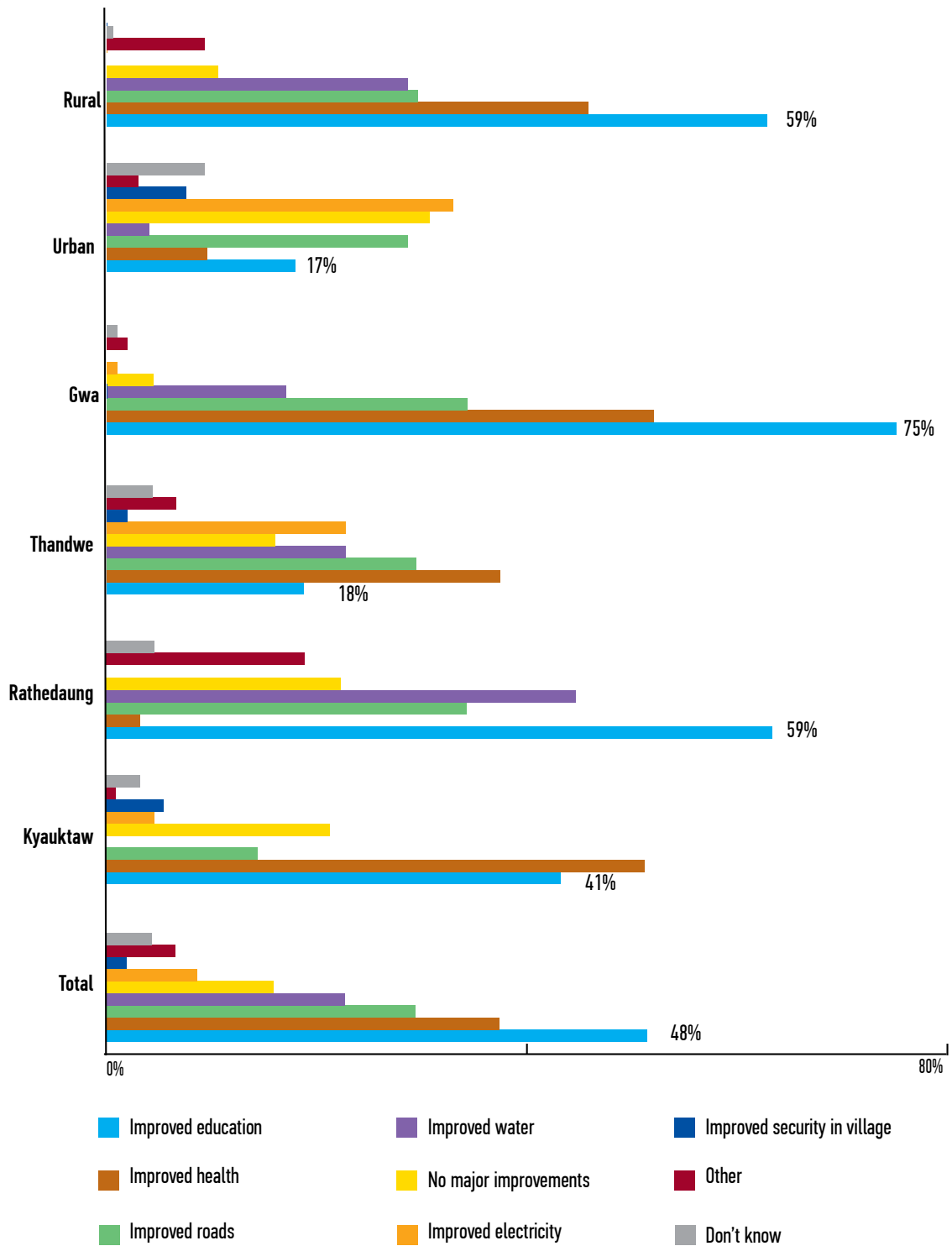
Regarding the situation in their village tract or ward, the respondents were asked "what has been the most important improvement made by the government in your village tract or ward over the last three years".³⁰ The responses are presented in figure 16. Improvement in education was mentioned by 48 percent of the respondents, followed by improvements in health services and roads (physical infrastructure) with 35 and 28 percent respectively. Improvement in access to water and electricity were mentioned less often (21 and 8 percent). Compared to other States and Regions where a larger number of people (usually around 40 percent) have indicated that they have not observed improvements by government, in the State of Rakhine, only a small percentage (15%) of the respondents mentioned that the government had not made any major improvements over the last three years in their village tract or ward. This could mean that the government has achieved more in Rakhine State or that its achievements are more visible or better communicated to its people.

Compared to other States and Regions only a small percentage (15%) of the respondents mentioned that the government had not made any major improvements over the last three years in their village tract or ward.

30. Note that in relation to this question the researchers asked the respondents to name any major improvement themselves without probing. Later on (see section 4.3) when the respondents were asked about improvements in each of the sectors, most respondents were able to identify some type of improvement.

Figure 16: Improvements made by the government in the village tract/ ward over the last three years for the four townships.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 384. Note: More than one answer possible



The differences per township are rather large. In Kyauktaw and Gwa, improvements in health services were mentioned by 48 and 49 percent of the respondents compared to only 3 percent of the respondents in Rathedaung. The respondents in Rathedaung mentioned improvements in education and access to drinking water more often than the respondents in the other four townships. In Thandwe, the connection to electricity was mentioned more often by 27 percent of the respondents.

Comparison of the urban and rural respondents shows that while both mention improvement in roads quite often, urban respondents mentioned electricity more often (31%) while rural respondents mentioned improvements in education and health more often (59 and 43%). Based on these figures it seems that over the last few years, rural areas have caught up with the urban areas in education and health services, while at the same time the urban areas made progress on improved electricity connections.

During the Community Dialogue sessions the following major improvements that have been implemented over the last three years in the village tract or ward were noted (see Table 11).

Village Tract/ Ward	Improvement 1	Improvement 2	Improvement 3
Lay GwaSone VT Rathedaung	<ul style="list-style-type: none"> Received a primary school 	<ul style="list-style-type: none"> Received more drinking water 	<ul style="list-style-type: none"> Embankment road between the pier and VT improved
Theing Taung VT (CD in Muslim areas) Rathedaung	<ul style="list-style-type: none"> No more religious/racial conflicts so we can sleep peacefully 	<ul style="list-style-type: none"> A sub-primary school was permitted 	<ul style="list-style-type: none"> About 30 villagers migrated to Malaysia because of conflict
Theing Taung VT (CD in Rakhine areas) Rathedaung	<ul style="list-style-type: none"> More education staff 	<ul style="list-style-type: none"> More health staff 	<ul style="list-style-type: none"> Poor telecommunications.
No. 2 Ward Thandwe	<ul style="list-style-type: none"> Electricity for 24 hours and at lower unit rates. 	<ul style="list-style-type: none"> More public cooperation. 	<ul style="list-style-type: none"> Arranging mobile phones for communication
Kyauk Gyi VT Thandwe	<ul style="list-style-type: none"> There is a station hospital 	<ul style="list-style-type: none"> School was upgraded to High School 	<ul style="list-style-type: none"> Better roads
Ma Kyay Ngu VT Gwa	<ul style="list-style-type: none"> The school has been upgraded to middle school. 	<ul style="list-style-type: none"> No need to pay for a birth certificate 	<ul style="list-style-type: none"> Free immunization
Sut Twar VT Gwa	<ul style="list-style-type: none"> The hospital has been upgraded to station hospital 	<ul style="list-style-type: none"> The school has been upgraded to high school 	
Tin Ma VT Kyauktaw	<ul style="list-style-type: none"> There are more new school buildings 	<ul style="list-style-type: none"> More medicines are available 	
Pyi Taw Thar Ward Kyauktaw	<ul style="list-style-type: none"> We now have roads and bridge 	<ul style="list-style-type: none"> Water is available at homes. 	<ul style="list-style-type: none"> Able to get electricity

Table 11: Major improvement in village tracts or wards as mentioned by people and service providers in the eight village tracts or wards.

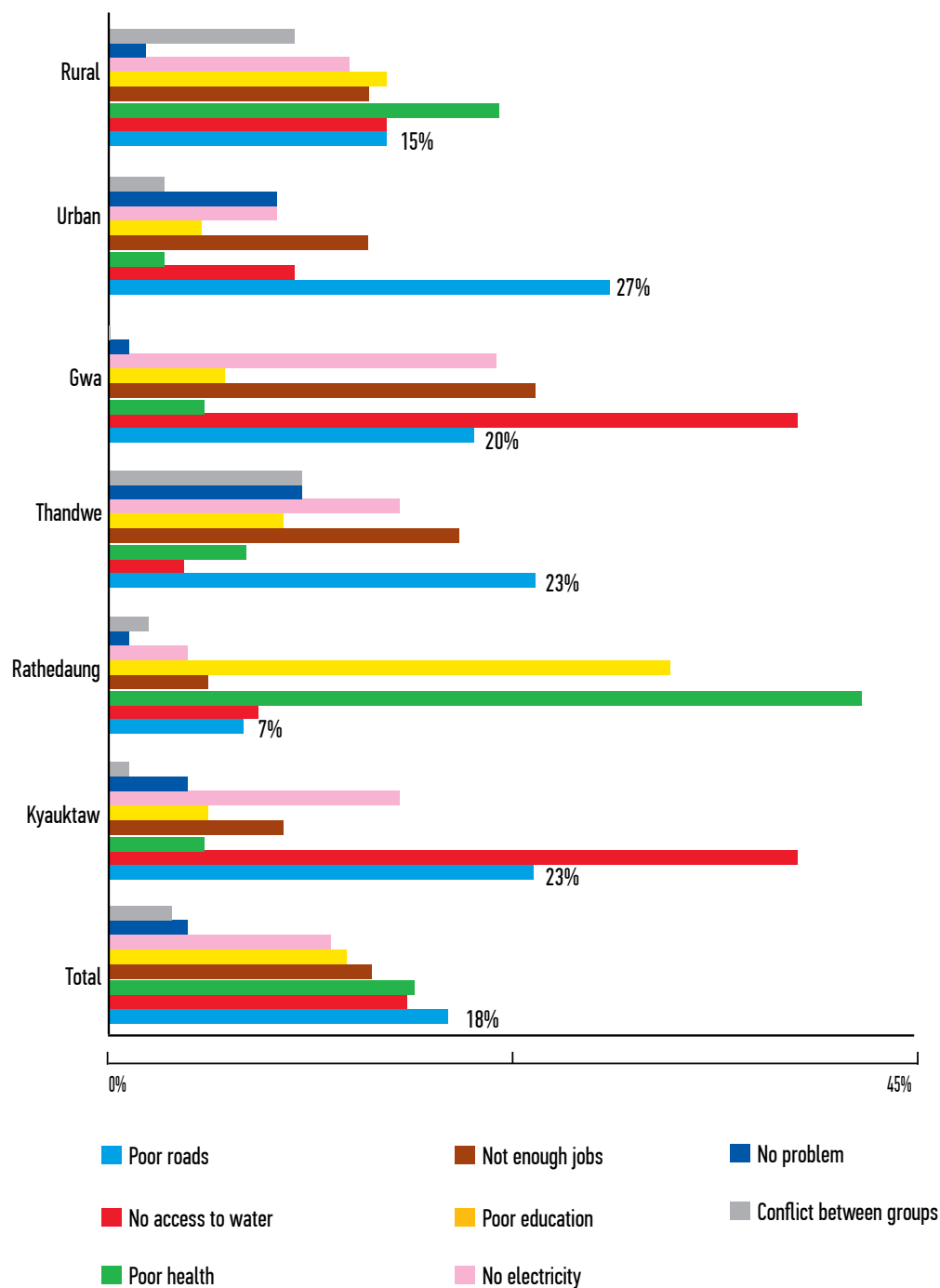
Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014.

4.1.4 People's views on challenges in their village tract or ward

Respondents were also asked to mention the most important problems they experienced at the moment in their village tract or ward (see Figure 17).

Figure 17: Main problem in village tract or ward according to the respondents.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014. n = 384



Overall, there are various issues mentioned by all the respondents combined: poor roads (18%), no access to drinking water and poor health services (16% each), not enough jobs (14%), poor education services/facilities (13%) and lack of electricity (12%). However, the figure also shows that the responses need to be disaggregated in order to obtain a clearer understanding of local concerns. Very high figures for highlighting a problem in one locality can skew the overall result for the total in the four townships, even though it constitutes a serious problem only in one or two of them.

As can be seen from figure 16, there were significant differences between the four townships. In Rathedaung e.g. poor roads was mentioned less often as compared to the other townships (only by 7 percent of the respondents), while poor health services were mentioned far more often in Rathedaung by 41 percent of the respondents. In Kyauktaw lack of drinking water was mentioned relatively more often by 37 percent of the respondents. Urban respondents mentioned poor roads relatively more often as their main problem, while rural respondents mentioned poor health services relatively more often. The differences in response between male and female respondents and respondents from different religions were minimal.

A similar difference in development priorities emerged at the community level during the Community Dialogue meetings (see Table 12). The three most important problems mentioned are similar to the ones raised by the individual respondents and differed across the townships and village tracts and wards.

Village Tract/ Ward	Priority 1	Priority 2	Priority 3
Lay GwaSone VT Rathedaung	• No health clinic in the VT	• No secondary school in the VT	• No fly-proof latrines in the VT
Theing Taung VT (Muslim part) Rathedaung	• Poor primary school building (no walls + thatch roof)	• Not enough drinking water	• No veterinary doctor
Theing Taung VT (Rakhine part) Rathedaung	• inter-village roads and bridges are not good	• Need fence for the pond	• Need fly-proof latrines which meet the standards
No. 2 Ward Thandwe	• Not enough healthcare facility and medicines.	• Not enough quality teachers.	• In need of Multi-ethnic/ religion group meetings for peaceful co-existence.
Kyauk Gyi VT Thandwe	• No electricity.	• No bridges	• No drinking water
Ma Kyay Ngu VT Gwa	• Need better roads	• Need bridge to cross the river	• Need more healthcare workers and medicines
Sut Twar VT Gwa	• No electricity.	• Job opportunities are scarce	• Difficulties in getting drinking water
Tin Ma VT Kyauktaw	• Bridges are made with locally grown bamboos.	• People are drinking contaminated river water	• There is no electricity
Pyi Taw Thar Ward Kyauktaw	• Drinking water is not clean.	• Toilets are not available.	• Not enough job opportunities

Table 12: Most important development challenges for each village tract or ward emerging from the Community Dialogues.

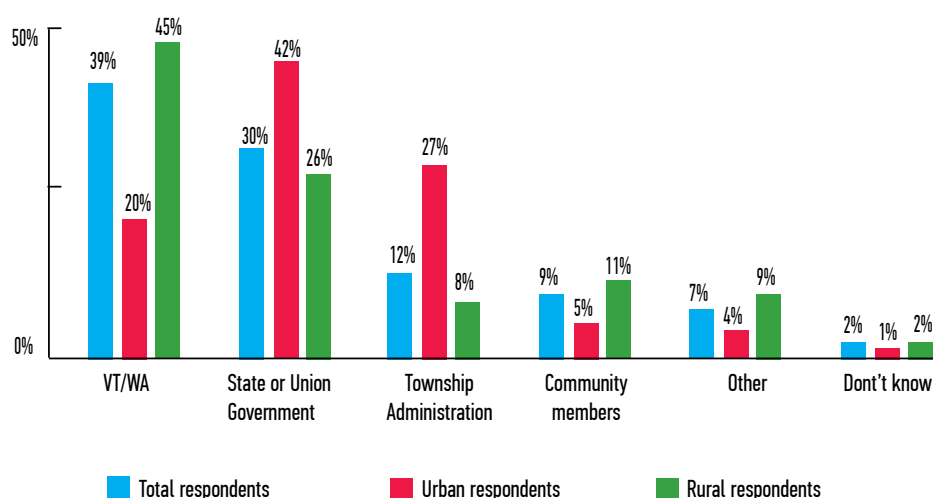
Source: Local Governance Mapping, CD meetings Rakhine State, August-December 2014.

In order to address the development problems, most people (39%) expect the Village Tract or Ward Administrator to solve them especially in the rural areas. This is despite the fact that his ability to solve them is very limited, which could potentially lead to frustration and friction between the VTA/WA and the community as the VTA/WA will not be able to satisfy all the demands from

people. The State or Union Government is also expected to play an important role in solving community problems (30 %). Urban respondents put more emphasis on the role of the State and Union Government as compared to the rural respondents who place more responsibility on the shoulders of the VTA. (See Figure 18)

Figure 18: The person or institution who is according to the respondents first of all responsible for solving the problems in the village tract or ward.

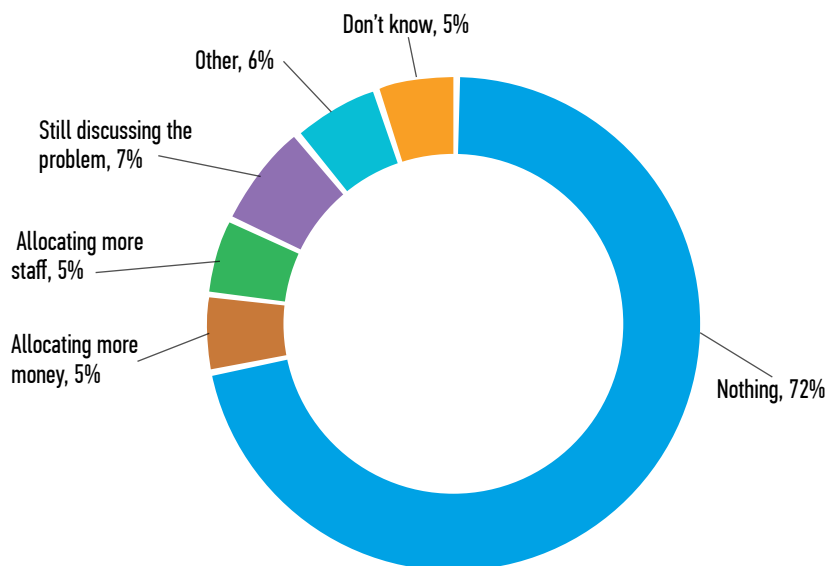
Source: Local Governance Mapping, Rakhine State, August-December 2014 n= 288



When asked what government is doing to tackle these problems the respondents gave the responses as presented in figure 19. These responses are similar to what has been recorded in other States and Regions. The fact that more than two out of three respondents (72 percent) believe that government is not doing anything to resolve the most important problems shows the lack of trust or confidence people have in their government.

Figure 19: Action taken by government to resolve the most important problem in the village tract or ward according to the respondents.

Source: Local Governance Mapping, Rakhine State, August-December 2014 n= 288



While certain similarities emerge across these communities, there are significant differences between the four townships and between village tracts and wards within each of the townships. Since only one village tract and one ward (or two village tracts) were included in this mapping in each township, it is not possible, based on these data, to say whether other village tracts and wards would have similar development priorities or whether they will present different felt needs. What we are however able to conclude from these individual and collective responses and from the interviews with key informants is that the needs and problems of people differ significantly

per township or even per village tract or ward depending on the local context and that therefore tailor-made solutions and responses are required if government wants to become more responsive to these needs and become more “people-centred”. If so, it will be critical for government in general and the various ministries and departments in particular to be able to assess and record these different needs on the basis of transparent and equitable criteria and have the necessary systems in place that enables them to respond to each of these issues fairly, systematically and adequately while at the same time adhering to priorities defined at the national level. Experiences from other countries show that in societies that are becoming more and more complex and with large contextual local differences, it is impossible to plan and respond adequately to these needs from the national level exclusively. Further below, this report will examine whether the township administration (GAD) and the various departments at the township level have the necessary instruments, whether they have sufficient capacity and most of all whether they possess at least a minimum level of autonomy to make them more responsive to the needs of their population.

4.2 Development planning and people participation

One of the objectives of the administrative reform programme of the Government of Myanmar is to transform the development process in Myanmar and make it more “people-centred”. What this means in the Myanmar context is in general described in the **Framework for Economic and Social Reforms of January 2013**, which mentions: “The Government of Myanmar attaches high priority to developing a participatory process of local budgeting, which should reflect local priorities and needs while corresponding with national policy directions”³¹ and “...new forms of public participation are emerging as people seek opportunities to actively participate in shaping the policies that affect their lives”.³² To facilitate this process, new consultative structures at the township and village tract or ward level have been established following Presidential Notification 27/2013 of the President in February 2013.³³ Moreover, each State and Region has adopted a Municipal Affairs Law as per Schedule Two of the Constitution. As a result, the **Township Development Support Committees (TDSC)** and the **Village tract or ward Development Support Committees (VT/WDSC)** were established in Rakhine State in March 2013.³⁴ The **Township Municipal Affairs Committees (TMAC)** were established at the township level in 2013 after the adoption of the Development Affairs Law by the Rakhine State Hluttaw in January 2013. Subsequently, an amendment to the law was passed in September 2013 further detailing the membership of the TMAC.

As a result of the reform at Union level, the planning and budgeting processes at the state level and below are gradually changing as well. There are four main distinctive planning and budgeting processes that affect service delivery at the township level and in which people could be involved. While these processes are more or less similar across the country, there are differences between the various States and Regions that affect the level of involvement of people in these processes. In the following paragraphs an overview is presented as to how planning and budgeting is implemented in Rakhine State and in what way and to what extent people are involved in these processes.

The first type of planning and budgeting process that takes place at the township level is the planning and budgeting of community level activities related to the various development funds that are made available either by the Union or Region/State level Governments to the township. These are managed by the GAD. The details of the related planning process and the implementation in the four townships will be described in this section.

31. See Government of Myanmar 2013, Framework for Economic and Social Reforms, final draft January 2013.

32. Ibid p 37

33. Notification No 27/2013, “Assignment of duties for formation of township and ward/ village tract development support committees. The President’s Office, 26 February 2013.

34. See Annex 3 for details of these and other committees, their composition and functioning in the three townships in Rakhine State.

The second and (in terms of volume of public resources that are involved) most important planning and budgeting process, is the sector planning and budgeting process. Each of the departments at the township level, whether falling under the State Government (schedule two responsibilities) or under the Union level Government (schedule one responsibilities), adheres to its own annual and sometimes multi-annual planning process although the planning framework, including the timeframe and budget formats are more or less the same. The details of this planning process will be briefly summarized in section 4.3 when reflecting on the planning processes in the health and education departments.

Thirdly there is the municipal planning and budgeting process, which is still fairly new. It is similar to the sector planning process and is implemented by the Department of Municipal Affairs (DMA), a newly created department/organisation that exists in each State and Region falling under the Ministry of Development Affairs, but has no parent Ministry at the Union level. Since the revenues for the DMA are generated at the township level, the planning and decision-making process is slightly different from the sector departments however. The details of this planning process will be described in section 4.3 under the drinking water section.

Finally there are elements of an emerging planning process—the township development planning process which takes (or should take) a more comprehensive analysis of the whole township into perspective. It could foresee the drafting of a more strategic mid- or long-term development plan for the whole township and could inform each of the departments of their role in this process and how their sector priorities contribute to the development of the township. The township plans that are currently compiled by the Township Planning Officer (TPO) and the Township Planning and Implementation Committee (TPIC) in those township that have an active functioning TPIC. They often have a 2.5 year perspective (until the next national elections in 2015) or 5 year perspective and are at present merely a compilation of the individual sector plans. No budget is available at the township level for their implementation and they are not used to inform the actual planning process of the sector ministries yet.

4.2.1 Planning, implementation and monitoring of development fund projects

In Rakhine State four development funds are available at the moment at the township level:

1. The Poverty Reduction Fund
2. The Rural Development Fund
3. The Constituency Development Fund
4. Area Development Fund of the Ministry of Border Affairs

The Poverty Reduction Fund

The Poverty Reduction Fund (PRF) was established as a Presidential initiative in 2012 to address rural development and poverty, and is therefore only available for infrastructural projects in village tracts. It was initiated in the 2012-13 financial year. During the first two years, each State/Region received one billion kyats (totally 14 billion kyat-14 million USD) while for the financial years 2014-15 and 2015-16 the total amount available has increased to 50 billion kyat (50 million USD), while the amounts allocated to the various States and Regions varies between one and 15 billion kyat (15 million USD), depending on the poverty situation of each State/Region. Most State and Regions still receives one billion kyat per year, while Rakhine and Kachin receive the highest amount of 15 billion kyat (15 million USD) per year and Chin, Shan and Kayin receive five, four and two billion respectively. The State or Region Government can top up the fund with additional

allocations. The funds were initially both budgeted and executed under the GAD, because State and Region government institutions were newly formed and were considered unable to manage these funds. Starting from the financial year 2013-14 the funds have been budgeted and transferred directly to the State “administrative organization” budget category. The management and administration of the fund is still “delegated” to the GAD Executive Secretary within the State Government and falls therefore under the GAD’s responsibility.³⁵

Projects under this fund can be submitted by village tracts for school and health facility renovation, road improvement or bridges, the improvement of water facilities and electricity (usually solar power). The projects are small (between 2-3 million kyat each -2,000-3000 USD) and should be implemented by the village tract people themselves under supervision of the VTA and the Township Administration. All proposed project should be outside the national plan meaning that they should not be included in any of the sector ministries’ plans for the township. In practice, the sector ministries can also propose small community projects that were either too small to be included in their own plans, that were rejected by the State or Union level Ministries or that have emerged since they submitted their own plans.

While the normal annual planning cycle starts in October of the preceding year, the planning and implementation cycle of the development projects is much shorter and enables the township administration to be more responsive to urgent needs. In Rakhine State, the GAD at the State level requests each of the 17 townships to submit project proposals before July of each year. While exact budget ceilings are not allocated per Township, each Township will at least receive 40 million kyat, around 40,000 USD (1 billion - 1 million USD- divided over 25 townships) while the extra amount depends on the extra allocation and the selection of proposed projects at the State level. Each township will therefore submit proposals for a total amount between 80 and 100 million kyat, 80,000-100,000 USD. At the township level, the PRF is coordinated by a supervision committee and eight sectoral sub-committees. Based on the State guidelines, the Township Administrator (TA) is head of PRF supervision committee, while different Heads of the Department are chairing the sectoral subcommittees. The submitted projects are however further prioritised at the state level. After receiving the project proposals from all townships, the Rakhine State Cabinet meets, discusses the proposals and decides on the allocation. The GAD informs the townships of the decisions made by the State Chief Minister. The GAD administers the project, transfers funds in two quarterly tranches to each of the township GADs accordingly and monitors progress on behalf of the State Government. According to the Deputy Regional Director of GAD in Rakhine, the State Government usually respects the prioritisation of projects made by each township.

At the township level, approved projects are announced during the combined monthly TDSC-TMAC-VTA/WAs meetings while the GAD finance officer informs each VTA individually in writing on the financial details of their approved projects. Implementation of projects takes place during the dry season after crops are harvested and should be completed within six months, i.e. between October and April. The GAD office distributes the available funds in two installments to the VTAs pending the submission of progress reports. The VTAs submit progress reports during each TDSC/TMAC/VTAs meeting.

The TA is responsible for administering and monitoring progress but is assisted by the TMC and TDSC members who conduct regular inspection tours. A selection of completed projects is checked during the annual audit of the GAD.

35. Nixon, Hamish, and Jolene, Cindy; 2014: Fiscal Decentralisation in Myanmar: Towards a Roadmap for Reform page 3

The Rural Development Fund

Next to the PRF, there is a small GAD operated Rural Development Fund (RDF) available in Rakhine State, which is a State fund.. Part of the revenues that are collected by the GAD at the township level on behalf of the State Government (like land, mineral and excise tax) are used for this fund, of which the total amount can differ substantially each year. The allocation criteria and the selection process are the same as for the PRF and is in practice at the township level often combined in a Rural Development and PRF at the township level, even though the funding sources and budget lines are different.

The Constituency Development Fund

The Constituency Development Fund was established by the Union legislature in 2013. Townships form single-member constituencies for the election of members of the Pyithu Hluttaw, the lower chamber of the Union legislature, and are divided in two constituencies for the election of members to the State Hluttaws.³⁶ Several townships form Amyotha Hluttaw constituencies in Rakhine State. Representatives from the two houses of the Pyidaungsu Hluttaw and State Hluttaw are allowed to select township development activities in their constituencies to a maximum of five million kyats per project.

The CDF is now budgeted as current revenue and expenditure under the State Hluttaw budget. Priorities for these projects are to be improved water supply, renovations of rural roads and bridges, renovations of school buildings, renovations of buildings related to health and other township needs. The implementation of CDF projects is to be done by Township Development Implementation Bodies consisting of the four Hluttaw representatives for a township, members of the TDSC and TMAC and several ex-officio members from the GAD and other departments (usually DRD and DMA).³⁷

In the financial year 2013/2014 and again in 2014/2015, each township received 100 million kyat (100,000 USD) from the CDF irrespective of the population size of the township for the implementation of small projects in both rural and urban areas. For this fund, and therefore contrary to the PRF allocation criteria, both village-tracts and wards can submit proposals. The selection procedure is similar to that of the PRF only in this case the budget ceiling of 100 million Kyat per township is known beforehand and the elected Hluttaw members need to approve the projects before they are submitted to the State Government. The final approval for the selected projects comes from the State Government.

As a result of the budget ceilings per township being known beforehand, the prioritisation of project takes place at the township level and the total number of proposed projects per township do not exceed the budget ceiling. The approval at State Level is therefore much more of a formality as compared to the selection and approval process for the PRF/RDF funds, meaning that the CDF is in practice much more controlled by the various actors at the township level and is in practice often used to fund projects that were rejected or too small for funding by the sector ministries or by the PRF/RDF funds or that require urgent attention like the repair of a school roof, which would otherwise take at least a year to be implemented by the sector ministries as they can only include such emergency repairs in their next annual plan.

36. For the election of 12 seats per State/Region in the Amyotha Hluttaw, the upper chamber of the Union legislature, townships are either divided (if fewer than 12 townships exist) or grouped together (for States/Regions with more than 12 townships).

37. Nixon, Hamish, and Jolene, Cindy; 2014: Fiscal Decentralisation in Myanmar: Towards a Roadmap for Reform page 33.

The Area Development Fund of the Ministry of Border Affairs

The Ministry of Border Affairs has its own development fund available for a selected number of townships in all States (those with a significant part of the population being one of the ethnic minorities or former conflict areas). The type of projects considered are similar to those for the PRF (small infrastructure maintenance) but usually more substantial in volume (average costs of a project is 30 million Kyats -30,000 USD). In those townships where there is no Border Affairs office (they are usually only in the district capital), the GAD collects project proposals through its VTA/TDSC meetings, checks if these are not included in other funding, and passes them on to the District Border Affairs office. The Ministry of Border Affairs decides on the selection and implementation. In case the village-tract implements the project, the money is distributed via the GAD to the VTAs involved, but is booked as Border Affairs expenditure. If the project is implemented by a contractor, the Ministry of Border Affairs conducts the tender at State level and contracts and supervises the contractor.

Below is a presentation of the amounts that were actually available for each of the four townships under these four development funds and the extra funds that were made available to Rathedaung of which the origin and purpose were not available to the mapping team (see Table 13, 14 and Figure 20).

	PRF in MK	CDF in MK	RDF in MK	Border Affairs in MK	Other	Total in MK	Population	per capita in kyat
Gwa	117	0	0	0	0	117	58,000	2,017
Rathedaung	4	0	24	250	1,007	1,285	163,000	7,883
Kyauktaw	148	0	0	0	0	148	215,000	688
Thandwe	7	0	0	0	0	7	128,000	54

Table 13: Overview of Development Funds for the four townships for the year 2012/13. (in Million Kyats-MK)

Source: Rakhine State GAD and Population and Housing Census of Myanmar, 2014; provisional results

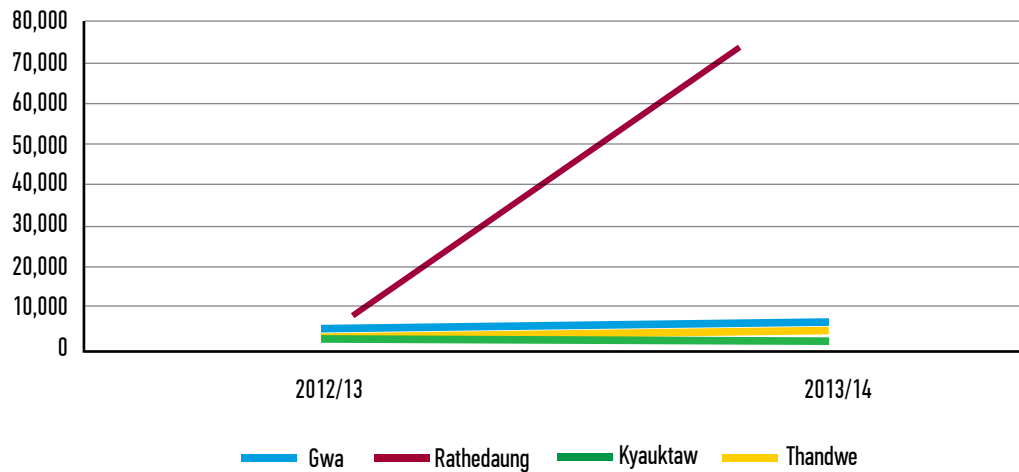
	PRF in MK	CDF in MK	RDF in MK	Border Affairs in MK	Other	Total in MK	Population	per capita in kyat
Gwa	18	100	4	69	0	191	58,000	3,293
Rathedaung	0	100	9,173	361	2,286	11,920	163,000	73,128
Kyauktaw	16	100	1	273	0	390	215,000	1,814
Thandwe	0	100	282	0	0	382	128,000	2,984

Table 14: Overview of Development Funds for the four townships for the year 2013/14. (in Million Kyats-MK)

Source: Rakhine State GAD and Population and Housing Census of Myanmar, 2014; provisional results

Figure 20: Overview of Development Funds (PRF, RDF, CDF, Border Affairs and extra funds combined) for the four townships in (kyat per capita) for the years 2012/13 and 2013/14.

Source: Rakhine State GAD and Population and Housing Census of Myanmar, 2014; provisional results



On the basis of the above tables and figure, we can draw the following conclusions:

The allocation of development funds per township and per year shows no apparent logic and the differences are huge, both in total amount as in amounts per capita. Rathedaung received in 2013/14 62 times the total amount of what Gwa received in development funds, while it received per capita roughly 40 times the amount of development funds compared to Kyauktaw.

It is not known whether the actual allocations are based on a transparent policy with clear allocation criteria or whether decision are taken on an ad hoc base and neither whether the actual allocations are justified to the townships involved. As a result of these seemingly ad hoc allocations, both planning, implementation and administration of these funds at the township level becomes very complicated as there is no logic and no predictability in the amount to be allocated for the next year. This must certainly lead to either over- or underutilisation of staff in these townships, unfulfilled expectation amongst the populations and a shopping list approach to the planning of projects *“let’s just ask as much as we can since we don’t know how much we can expect.”*

Participation of people in decision-making regarding the utilisation of the development funds

While these funds have been in operation since the financial year 2012-13, the recent introduction of Village Tract/Ward Development Support Committees (VT/WDSC) as well as the Township Development Support Committees (TDSC) led to a new process of deliberation and decision-making regarding the selection of projects for this fund at community and township level.

In theory, people can be involved at two levels in the planning process of development fund projects. First, they can be consulted either directly or indirectly at the village tract or ward level during the identification of potential projects for their community by the VTA/WAs or the VT/WDSC, and secondly they can participate indirectly through the participation of their VTA/WA and the TDSC/TMAC during the selection and prioritisation process at the township level.

In Rakhine State, the mapping team noted some differences between the four townships in the way project proposals for the various funds are collected, prioritized and approved. Compared to other States and Region the TDSCs in the four townships are slowly gathering momentum where

the TDSC see their function as a node of communication between community and township administration, advising on the use of funds (see Figure 21).

Box 1: Thandwe TA collaborating with township Committees and WA/VTA

The TA in Thandwe described the planning process, which is similar to all other townships in the country. He possessed a good knowledge of the process as well as had a close collaboration with the WA/VTA and the Township Committees in developing these plans. He had the draft plan ready for the FY 2015/16 to be submitted in November to the District, which will be sent to the State, and finally to the Union level for approval with final decisions communicated in March 2015. Usually 50-75% of the suggested projects in the Township Development plan are approved.

In all cases the VTA/WA (for the CDF fund only) play an important role in collecting the initial project proposals at the village tract level. Most VTAs generally consult their VTDCs and/or the group of elders and respected people (i.e. generally men) and/or the 10/100 household heads³⁸ in their village tract.

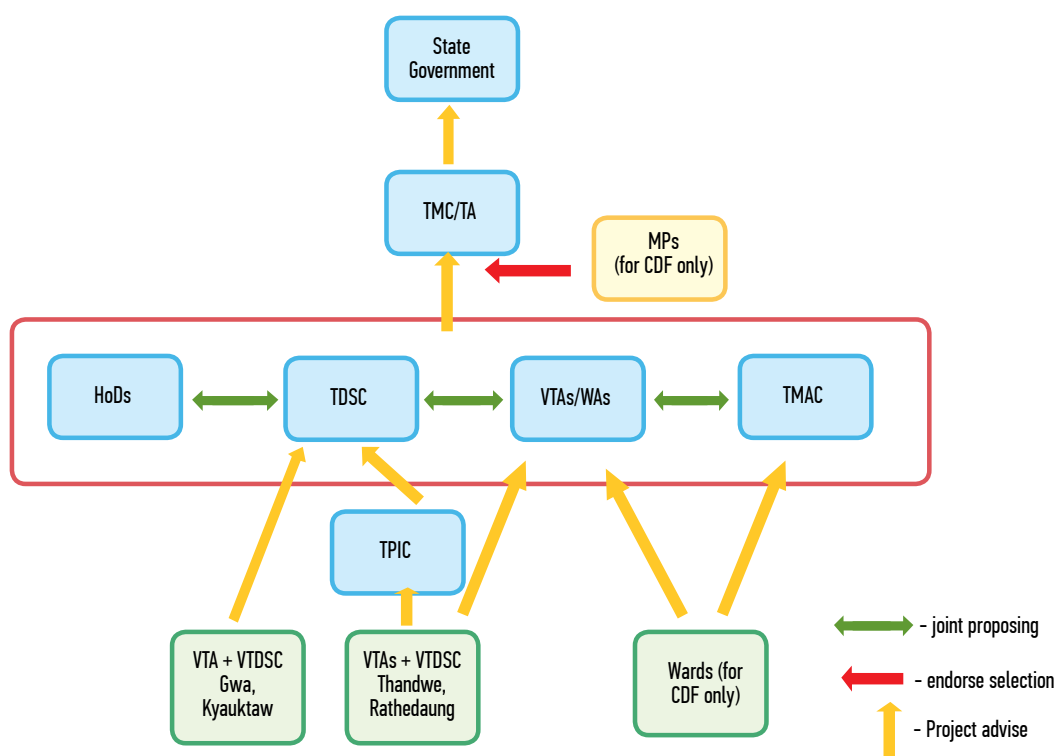


Figure 21: Schematic presentation of different consultation processes for the PRF, RDF and CDF projects in Rakhine State.

Source: UNDP Local Governance Mapping, Rakhine State, interviews with key resources persons. Note that for Mindon the TDSC was not involved in the project selection for the PRF and RDF funds.

38. The 10/100 household heads or village heads or village administrators, have been incorporated in the administrative system during the British colonial rule and still play an important role in assisting the VTA who usually oversees 4-6 villages. They are not part of the formal government structure, and are either elected by the community or self-appointed. The Village Elderly and Respected People (VERP) is a kind of advisory committee to the VTA. There is no division of responsibilities between members but one will often assume the role of chairman. They meet in an informal manner and on an occasional basis. The selection process for VERPs is not clear. Typically, they are chosen by the Village Tract Administrator with advice from other elders in the village or are self-appointed. Most of them are former VTAs/10/100 household heads who automatically assume a VERP position upon leaving their post. In some villages the VERPs occupy a more permanent position than the VTA and so outlast several VTAs. Members are generally older men of a medium to higher socio-economic background. With the establishment of the VT/WDC they are sometimes incorporated in these new committees and sometimes continue to exist next to the VT/WDC. See for more detail: Kempel, Susan 2012; Village Institutions and Leadership in Myanmar: A View from Below, UNDP 2012.

While most VTA/WAs consult their VT/WWSC actively, a few organise one or more meetings for all community members to discuss their needs and priorities. But for the time being, direct consultation of community members in the village tract or ward about their preferences is not taking place consistently in Rakhine State. At the community level, opinions were mixed on the extent to which people were actively involved in project selection (see Box 2 and 3). Some communities were positive about the way they were involved in defining project priorities, while others had not noticed any change.

Source: UNDP, Local Governance Mapping, Rakhine State, August-December 2014

Box 2: Examples of active involvement in decision-making at the community level as mentioned during the Community Dialogues

LayGwaSone VT Rathedaung	<ul style="list-style-type: none"> Villagers are only involved in minor decisions like the location of a new fish pond or health clinic if approved by government.
Thein Taung VT Rathedaung (CD in Muslim areas)	<ul style="list-style-type: none"> In the past, 100 HH were not educated so they did not seek opinions from the villagers and they made their own decisions but now the 100 hh head is educated and he seeks out opinions from the villagers and made decisions with the agreement of the villagers Now the 100 HH forms committees to let the villagers participate in decision making The village 100 HH seeks suggestions from the villagers before building the school in the village
Thein Taung VT Rathedaung (CD in Rakhine areas)	<ul style="list-style-type: none"> projects were implemented by taking opinions of the villagers into consideration VTA held meeting with 10s/100s HH and development committee to get public opinion and suggestion
KyaukGyi VT Thandwe	<ul style="list-style-type: none"> VTAs used to do whatever they wanted to do before. Now the VTA asks the people to get involved in decision making and listens to the voices and opinions of the people.



Box 3: Examples of limited involvement in decision-making at the community level as mentioned during the Community Dialogues

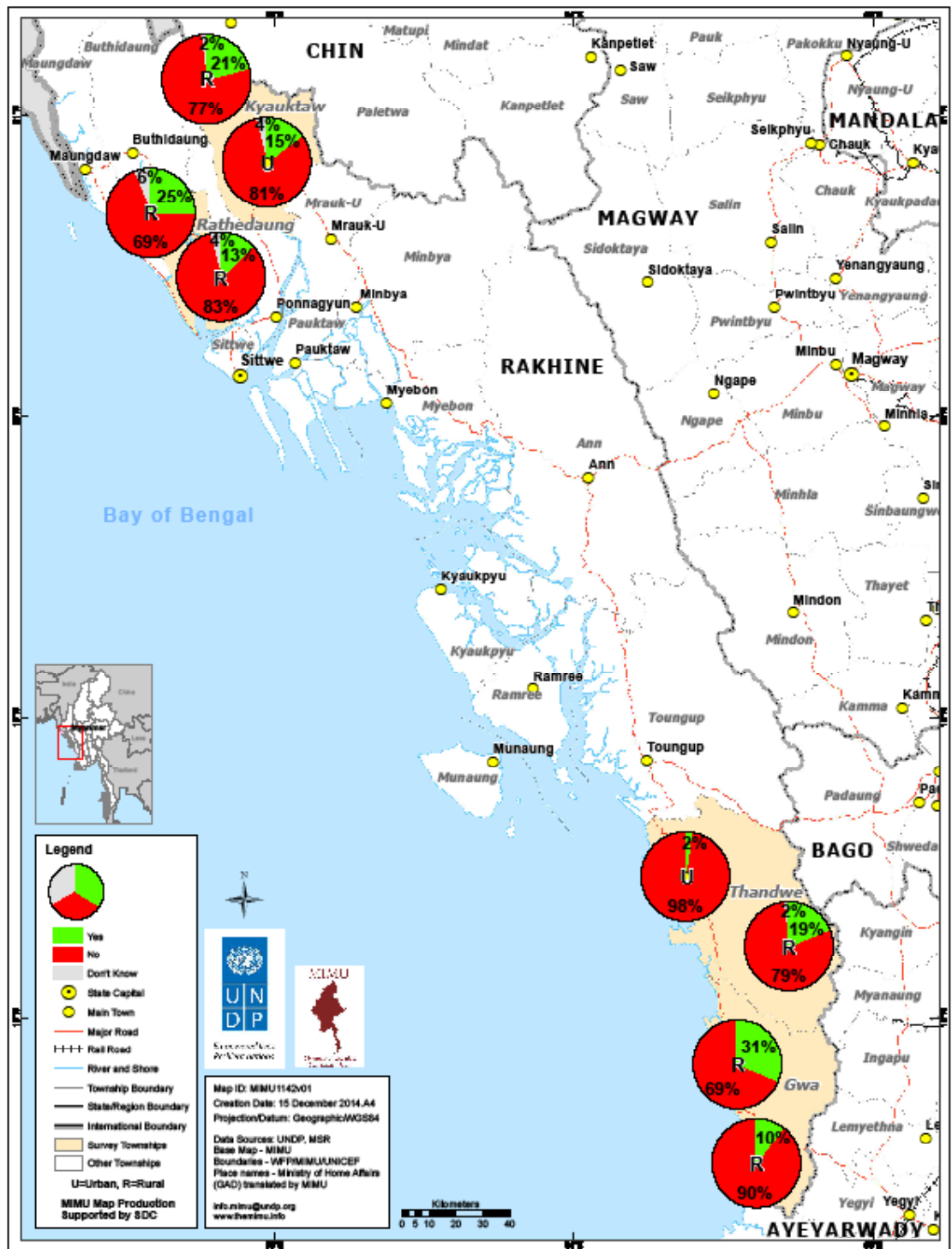
No 2 Ward Thandwe	<ul style="list-style-type: none"> • WA informs the public only when decisions were made.
Ma KyayNgu VT Gwa	<ul style="list-style-type: none"> • VTA does not give the community a chance to participate in the development projects as a result, there is still not much of involvement from the community
SutTwar VT Gwa	<ul style="list-style-type: none"> • When the new school was built, there were no meetings for the community • The donation was collected but nothing was known about the use of the money. • A meeting was held with the community for the Station hospital but they did not have the opportunity to give ideas and opinions. Only had to listen. • When there was drilling of a tube well, we have to provide for food but we didn't know how much the cost or the amount of funds provided was.

On the other hand, even if the VTA/WA organises a village or village tract meeting to consult the community, not many people will attend and contribute actively. Only 48 percent of the respondents participate on a regular basis in village, village tract or ward meetings, which is similar to the percentage of people attending such meetings on a regular basis in other States and Regions. Urban respondents participate less than rural respondents (only 25 percent of the urban respondents participate regularly vis-à-vis 57 percent of the rural respondents). Male respondents participated more often than female respondents (57 percent compared to 48 percent). When those who did not attend were asked why they did not attend these village meetings, 53 percent of the respondents mentioned that they were not invited, did not know about these meetings or mentioned that such meetings were not held in their village or ward, while 43 percent mentioned that they did not have time to attend such meetings.

Figure 22 shows that participation in such meetings is slightly higher in the rural areas as compared to the urban areas and slightly higher in Kyauktaw and Thandweas compared to Rathedaung and Gwa.

Figure 22:
People being invited to meetings organized by government

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014



Active participation by people in project identification seems to depend both on the attitude and skills of the VTA/WA to organise such meetings and to invite and convince every community member to participate, but also on the willingness and ability of community members to participate in such meetings when they are organised by their VTA/WA.

The second level of people participation is taking place during the consultation about the selection of projects during the combined TDSC/TMAC/VTA meeting with the TA. The role of the TDSCs and the TMACs in this process is in accordance with the instructions as mentioned in Presidential Notification no. 27/2013, which says "the TMC, which includes the participation of township level Departmental Staff, must meet, coordinate and seek advice from the TDSC and TMAC...". It seems however from the interviews held in the four townships with the various committee members and government staff that the involvement of the consultative committees in Rakhine is less intensive and active as compared to other States and Regions. At the same time, the TAs indicated a perceived change in their roles from independently taking some of the decisions to being consulting now with the TDSC and the TMAC. This change was being viewed positively as people and other interest groups can participate through these committees.

Township Administrators perceived a positive change in their roles from independently taking some of the decisions to being consulting now with the TDSC and the TMAC.

The actual project selection process is apparently seen more as a technical process in the four townships in Rakhine State, which is therefore either done by the TPIC or the TMC, ensuring that there is a geographical balanced distribution of projects over all VTs and that VT who were left out of the previous year are getting a fair share during the present allocation. The more or less final proposal of projects for each of the PRF, RDF and CDF funds is then presented during the combined TDSC-TMAC-VTA/WA-TA meeting for approval. In all four townships, the GAD at Township and State level has a final say in the selection of projects but usually respects the outcome of the combined meeting. Depending on the total amount available the State Government (through the GAD) decides on the number of projects and the total amount of money available per township (except for the CDF). As a result, the funds available at the township level can differ a lot from one year to the other.

In order to strengthen the link between the State Government and the township representatives, the GAD State Secretary organises three times a year a meeting with all TAs and chairpersons of all 17 TDSCs in Rakhine State. The objective of those meetings is to further guide the TDSCs and to share experiences of their work. This was an initiative by the State Government as a mechanism to enhance the support and coordination to the TA and TDSCs to ensure that local planning becomes more people centered and participatory.

While the TDSC in Gwa were playing a role in clearance of the proposed priorities, they were more active in monitoring public works implemented by the line departments or projects implemented by the Department of Rural Development (DRD) and the Department of Municipal Affairs (DMA). In Thandwe, the TDSC seemed to operate well and were aware of the fund flows from the Union level in planning of investments in different sectors (health, education, tourism etc) and the available development funds specifically for township level. According to the TDSC members interviewed they spend a lot of time on monitoring activities, reporting any irregularities or delays to the TA. Since this is the main responsibility of the TMAC as well (at least for the municipal area of the township), there is a serious risk of overlapping responsibilities and duplication of efforts.

In all townships there is close coordination between the TPIC/TMC and the relevant Heads of Departments regarding the selection of development projects is taking place as well. The more structural investments and maintenance works that can be planned in advance are included in the departmental plans, while the smaller and more urgent works are shifted to the project funds as they can be implemented within a few months after approval. Unfortunately, the Heads of Departments often haven't seen their approved departmental investment plans and capital budget for their townships when the plans for the development fund projects need to be submitted, but

according to the TAs there is enough flexibility to make last minute changes in the use of the development funds if the sector ministries have e.g. more funds available for renovations than expected.

While the TDSCs have been established and are gradually starting to play a role in township management in Rakhine, there are however some questions with regard to their establishment and functioning in general. The people's representatives in the TDSCs and TMACs in the four townships are elected according to a combination of area and group representation. Each ward nominated one or more representatives (usually a 10/100 household head or a member of the group of Elderly and Respected People) and this group of nominees chose 4 or 5 people (from different interest groups like Businesses, CSOs, farmers) among themselves to become member of the TDSC. In Thandwe, the elected Hluttaw members are by default member of the TDSC as well. It was not clear whether this is the same for all townships in Rakhine. For the TMAC, only the wards nominated potential candidates from the people. Subsequently, an amendment to the law was passed in September 2013 further detailing the membership of the Township Municipal Affairs Committee.

The TDSCs and TMACs in the four townships in Rakhine are composed of representatives from the wards and not from the village tracts, thus excluding the majority of the population in the townships in the deliberations on the use of the development funds. While this was done to make it easier for the TDSCs to meet on a regular basis, it excludes a large part of the more rural population in the consultation process regarding the selection of development projects. The argument that they are represented through their VTAs holds little ground as people living in the municipal area can be equally represented through their Ward Administrator. This lack of representation as well as the fact that the members are selected and not elected has a negative impact on the legitimacy of these newly established institutions.

In addition, there are no female TDSC or TMAC members in the various committees in the four townships in Rakhine State, meaning that by default 50% of the population is not represented in these committees. As a result, the TDSCs and TMACs do not reflect the diversity that exists in society and the different interests that different groups do have within society. This is likely to impact negatively on their legitimacy.

It is therefore not surprising that 97 percent of the people who were interviewed as part of the mapping had never heard of either a TDSC or TMAC in their township. When this issue was discussed with the various committees they did acknowledge this issue and they mentioned that it needs to improve. A serious question therefore arises as to how these committees can represent the interests of people if they in most cases don't even know of the existence of these committees, don't know who its members are and are not aware of whether or how these committees represent their interests. The explanation provided by the various TDSC and TMAC members was that the initial establishment and elections were done in a rather hasty way and people were not yet aware of the potential significance of these new committees.

Regarding the allocation of the CDFs the elected Hluttaw members as elected representatives of the people play an important and usually active role both in the selection and monitoring of projects. When visiting their constituencies they meet with people and VTA/WAs to discuss community issues and propose potential small community projects for the CDF. During the combined VTA/WA-TDSC-TMAC-TA meeting when the CDF is discussed the elected Hluttaw members participate actively and propose and select together with the other groups present potential projects for funding under the CDF. The elected Hluttaw members have in theory the last say and if

they want they could push their project proposals through. In practice however they manage to find solutions that are acceptable to everyone.

In conclusion, it should be acknowledged that after years of top-down decision-making, this is only the second year in which people or stakeholder groups, through various committees, are consulted by government. It will take time for all parties involved to play their new role effectively. While the total combined budgets of the development funds per township are still rather small, the planning and implementation of development fund projects could play a very important role in the ongoing reform process at the township level because:

- The results are important to show people that the government is serious on improving service delivery, as was noticed during the Community Dialogues and Focus Group Discussions with CSOs;
- The utilisation of these funds generate very important potential learning processes for all stakeholders involved as they are related to:
 - Collaborative planning of these projects (e.g. TA and VTA/WAs need to work closely together)
 - Integrating the results from consultation with people's representatives into planning at the community and at the township level
 - Government - people's representatives dialogue about balancing local needs with national priorities starts to materialize (e.g. between TA and TDSC)
 - Management and accounting of public funds that are spent locally
 - People involvement in project monitoring

In practice, there is still ample space to improve the planning and implementation process of the utilisation the various development funds. There are four development funds available in Rakhine at the moment that are more or less similar in terms of type of activities that are eligible for funding as well as planning and implementation procedures, while at the same time the DRD and the DMA have their own sector funds to implement similar activities as well (see below). The management of these parallel funds may be confusing for the various stakeholders involved at community, township and even State level, which could hamper proper financial monitoring. Only a few people know which projects are funded by each fund, resulting in limited transparency and increased risks of mismanagement. From a perspective of effectiveness and efficiency as well as transparency it may be better to streamline and consolidate the different funds into one fund and include indicative budget ceilings that are made known to the township administrations in advance. This may facilitate uniform and coherent planning, implementation and monitoring.

4.3 Access to Services

One of the major stated objectives of the reform programme in Myanmar is to improve basic service delivery to the people through an allocation of more public resources and through a more effective and efficient way of service delivery that is more "people-centred".

Most of the basic social services (like education, health care and drinking water) are in Myanmar provided by various sector Ministries at the township level and below, sometimes complemented by NGOs, private sector and/or religious organisations. It is therefore important to describe and analyse the planning and organisation of service delivery at the township level. This section will look at three basic social service sectors (primary health care, primary education and household

water provision) and describe how they are organised and how state service providers interact with people and respond to their needs within the four selected townships in Rakhine State both in planning as well as actual service delivery. The mapping looked at these sectors from a governance perspective and not at the quality of these services from a technical medical perspective. The picture described below presents therefore only a partial overview and should be seen as complementary to the more in-depth and internally focused sector analyses that are taking place at the moment in each of these sectors.³⁹

Before presenting the findings per sector, a description of how service delivery and the related planning is organised at the township level in Rakhine State is outlined. Depending on the size of township, most State or Union Ministries or Departments have their own office and representation at the township level, often in different locations, while some only have offices at the district level. All Heads of Departments in the township are accountable to their supervisor at the district or State level, while all (except for the Municipal Affairs Department) receive their budget and plans from the district or State level departments. The mandates and levels of authority and discretion of the Heads of Departments differ per ministry, but are in general limited to implementing tasks and plans that are handed down from the ministry downwards.

While there are some minor variations in the planning and budgeting process between the various sector ministries, the actual planning and budgeting is still taking place at either the State or Union level. Heads of Departments collect the required baseline data on staff and facilities and provide an estimate of the recurrent budget required for the next year to their supervisors, but they are normally not involved in defining priorities or in the actual planning of investments. The most important sources of information are direct communications with front line service providers like headmasters, nurses, etc., field visits to the various facilities run by the department and occasional information provided by VTA/WAs although the Head of Department hardly attend the combined VTA/WA-TDSC-TMAC-TA meetings.

Increasingly Head of Departments (HoDs) mention that while the formal planning system has not changed, the responsiveness of both State and Union level department to the needs identified by the HoDs has increased substantially over the last few years. It is still a slow and bureaucratic process, but at least most HoDs at the township level have the impression that their voices are heard and responded to. While most Heads of Departments are involved in implementing the operational activities and the recurrent budget expenditures throughout the year, they are only marginally involved in the implementation of the more substantial capital investments that are either implemented by the State Department and the State Government.

The approval for the allocated recurrent budget for each sector department usually comes at the start of the financial year (which runs from April to March) while the actual transfers follow in four tranches. Interlocutors have stated that these are usually late. The capital budget approval usually comes only in June/July, 3-4 months into the financial year. Both the recurrent and the capital budgets come without any explanation or justification, which makes it very difficult for township level officers to explain their budgets to the various committees and to the public in general.

With the gradual expansion and improvement of service delivery and of development support activities by key departments at the township level, the **need for horizontal** (between departments)

39. See for a general overview of government spending on the social sectors: UNICEF, 2013; Snapshot of Social Sector Public Budget Allocations and Spending in Myanmar
See for the health sector among others: SDC, 2013; Health Assessment in Southeast Region of Myanmar, August 2013.
See for the education sector among others: MDRI, 2013; A Preliminary Assessment of Decentralization in Education: Experiences in Mon State and Yangon Region, December 2013 and JICA, 2013; Data Collection Survey on Education Sector in Myanmar, Final Report, February 2013.

and **vertical co-ordination** (between the township government and the VTA/WA and other government representatives at the village tract and ward level on the one hand and government at the district and State level on the other hand) has increased substantially over the last few years. Good horizontal and vertical coordination could improve both the effectiveness and efficiency in service delivery. The structural limitations make it even more important to ensure that the limited resources are used the most optimal way. The Government has realised this need and intends to improve coordination between the departments through the TMC to focus on people-centered township level planning process.

While the TMC has executive responsibilities, it can only manage township affairs through discussion and consultation since it cannot instruct any of the HoDs. As the Gwa TA said *“I am more a coordinator and not the chief.”* In addition, in practice it is up to the discretion of the TA to decide which matters require discussion in the TMC and which matters he can decide upon by himself. Similarly, it is up to the HoDs to decide whether he/she shares the departmental annual plan with other members in the TMC. It is however increasingly custom that all departments send a copy of their annual plan to the TPO who puts them all together in a kind of township development plan. As in all other Regions and States, the TMO is not a member of the TMC and often doesn't attend HoDs meetings either, limiting the ability of the Ministry of Health to coordinate with other departments.

As the main government institution at the township level, the GAD in general and the TA and Deputy TAs in particular, are responsible for both horizontal and vertical coordination of all government activities at the township level and below. The TA being the main responsible person at the township level holds many responsibilities. In the four townships that were covered in Rakhine, the TA focussed mainly on maintaining rule of law, peace and security and broader development of the township. Their coordination role extended to discussions with WA/VTAs on determining new investments in their areas and this took place through regular meetings between them.

In practice, this coordination role focuses on a broad group of functions:

- Coordination of the planning and implementation of projects and activities by the various township departments;
- Coordinating the work of various committees of which there are at least five per township (see annex 3 for an overview) and sometimes organising direct consultations with people;
- Coordinating and supervising the work of the VTAs and WAs;
- Coordinating the planning, implementation and monitoring of development projects not falling under the responsibility of one of the sector departments;
- Coordinating any ad hoc activities taking place in the township (visits of dignitaries, elections, disaster management, etc.).

Despite the awareness that a “coordinating” role must be played by the TA and is inherent to the formation of various coordinating committees (see annex 3), horizontal co-ordination between departments remains a challenge in Rakhine State. Township departments continue to plan and deliver services in a “vertical” fashion, following the instructions from higher levels within their own ministries. They therefore also continue to collect their own baseline data according to their own definitions and requirements, resulting in large differences in very important and basic statistics (including even the total population in the township), which makes integrated planning and coordination almost impossible.

For vertical coordination, the joint VTA/WA-TMAC-TDSC-TA meetings are very important which are often attended by the various MPs as well. They take important matters to the State or Union level parliaments especially for issues that require extra funding from the Union Government.

The establishment of coordinating and support committees at the township level is a good starting point for improved service delivery and people's involvement in planning.

4.3.1 Basic health care services

After decades of stagnation in the budget for public health, the national health budget has increased over the last three years from 92 billion Kyat (92 million USD) in 2010-2011 to 652 billion Kyat (652 million USD) for 2014-2015.⁴⁰ While this is a substantial increase, government expenditures on health as part of total government spending at present still only amounts to 3.38 percent of the total government budget, or only 0.76 percent of the total GDP, which is approximately half of the average amount spent by similar countries in the region on health care. This section aims to shed some light on how the recent 600 percent increase in the health budget has trickled down to the lowest level of health care provision at the village tract or ward level and how people are experiencing changes in the health care services. However, it goes beyond the scope of this study to assess the reasons for these historically low figures. As a consequence of this legacy, the provision of health care by the private sector is more substantial and as a result, the private expenditures by the people in Myanmar for health care rank much higher than elsewhere in the region. Accordingly, 60-70 percent of the health spending in Myanmar is paid for directly by the people according to the Ministry of Health.⁴¹

Besides increasing the public health budget, the Government of Myanmar realises that more structural measures are required to improve the quality of public health care. In its FESR, it mentions that “the government also recognizes the importance of quickly updating its overall health strategy, reviewing current health policies and strengthening the National Health Law”.⁴² Recently, the Ministry published its National Health Plan 2011-2016. According to the WHO, the plan takes account of the prevailing health problems in the country, the need to realize the health-related goals of the MDGs, the significance of strengthening the health system and the growing importance of social, economic and environmental determinants of health.⁴³ The National Health Plan has 11 priority programme areas, but does not mention or propose changes in the way health services are provided in Myanmar, in particular at the local level. In August 2013, the President announced some measures to further de-concentrate major Union ministries. One of these included that the Health Ministry is to continue training nurses and midwives at central level but to make coordination with State and Region governments in assigning them to their home regions; and the State and Region governments to appoint medical staff in remote regions through vacancy announcement in newspapers. Further, the 2013 Presidential Notification has included health-related matters also among the issues township, ward and village tract support committees are mandated to discuss and assist in.

40. Myanmar Times 5 December 2014

41. Based on 2010 health figures see: Myanmar Times 5 December 2014

42. Government of Myanmar, 2013. Framework for Economic and Social Reforms, page 30

43. WHO Country Cooperation Strategy Myanmar 2014-2018, 2014

Basic Health Care Service provision in the four townships in Rakhine State

As elsewhere in Myanmar, primary health care in Rakhine State is partly provided by private health facilities (like private clinics, dispensaries, traditional doctors and auxiliary midwives) and partly by the Ministry of Health, often with support from various international Non-Governmental Organisations (see Table 14). Table 15 presents an overview of the public health facilities available in the four townships in 2014, as well as some key health indicators.

Health information	Gwa	Thandwe	Kyauktaw	Rathedaung
No. of hospital	1	1	1	1
Station Hospital	2	2	2	1
Maternal Child Health care	1	1	1	1
Rural Health Centre-RHC	5	9	6	7
Sub RHC	20	37	33	30
No. of health care staff sanctioned	173	86	142	172
No. of health care appointed	89	76	97	112
No. of vacancies	84	10	45	60
Delivery at home by health staff	45%	53%	33%	
Delivery at health center/hospital	23%	32 %	30%	
AN care	98%	100.8%	62%	
Infant Mortality Rate (under-1 yr)/1000	9.2	26.5	8.98	5.32
Child Mortality Rate (under-5 yr)/1000	11.5	29.8	9.19	0.09
Maternal Mortality Rate	1.11.1	0.7		
Number of in-patient	1844	13810	2302	1199
Number of out-patient	5045	36992	2506	36577
Severely Malnutrition	0.15%	0.0 %	0.3%	
Moderately Malnutrition	2.26%	0.4 %	1.36%	

Table 15: Key health service data for government operated facilities, Rakhine State townships

Source: Township Health Profiles, Rakhine State. 2014

All except one of the 25 health service providers interviewed: 4 TMOs, 9 health facility managers (1 township hospital, 3 station hospitals, 1 Maternal and Child HC, 2 RHC, 2 SRHC, and 12 health staff (1 health assistant, 1 lady health visitor, 8 midwives and 2 nurses), were of the opinion that the provision of health services in the four townships has improved over the last 3 years. The most important reasons for these improvements were according to them:

- Better and more equipment and medicines available (76 percent);
- The costs of health care for people has gone down (68 percent).
- An increase in health staff (48 percent);
- Better/more health infrastructure (48 percent)

All except one of the 25 health service providers interviewed were of the opinion that the provision of health services in the four townships has improved over the last 3 years.

Despite the increase in number of health staff, 4 out of 9 health facility managers experienced last year a structural shortage of medical staff at their facility (one or more vacancies longer than 3 months), while 50 percent of the health staff mentioned there was at the moment a shortage of medical staff at their facility. Compared to other States and Regions a shortage of skilled medical staff seems to be more of a problem in these four townships.

Generally speaking, there is sufficient supply of medicines and medical supplies in the health facilities covered in the mapping as 66 percent of the health managers said they always had enough stock of essential drugs. Compared to other States and Regions, this figure is however below the average of between 80 and 90 percent. When shortages in medicines were reported to the TMO, they were almost always successfully resolved. Shortage of desks, chairs and beds were more common and these shortages were regularly brought up during inspection visits but hardly ever resolved.

All health facility managers and health staff were of the opinion that all health workers in their facility were properly qualified for their job and received regular in-service training, which was confirmed by 83 percent of the health staff. All health workers interviewed mentioned that they treated everybody in the same way irrespective of ethnicity, gender and wealth or (dis)ability. Sixty-seven percent of the health workers mentioned that they received a fair salary which was usually paid in time.

All healthcare facility managers interviewed mentioned that they had received at least one (but sometimes more) inspection visits last year from the TMO or DMO who conducted routine inspections, carried out stock checks, provided in service training and conducted audits

Basic output indicators for the monitoring of healthcare facilities are also in place. Township health administrative staff in Rakhine State visit rural health centres on a regular base to provide oversight and check performance based on key health indicators, although not as often as in other States and Regions. All healthcare facility managers interviewed mentioned that they had received at least one (but sometimes more) inspection visits last year from the TMO or DMO who conducted routine inspections, carried out stock checks, provided in service training and conducted audits. Five out of eight health facility managers qualified the support they received from their supervisors at the township level as good.

Regarding payment for essential drugs, seven managers and all 12 health staff mentioned that patients never have to pay for those drugs, while two facility managers mentioned that patients do have to pay if essential drugs are out of stock. All health staff mentioned that they adhered to the Code of Conduct and didn't sell medicines to patients that should be provided for free.

While the provision of overall health services has improved, there are, according to the service providers several ways in which public health services in these four townships can improve further (see Figure 23).

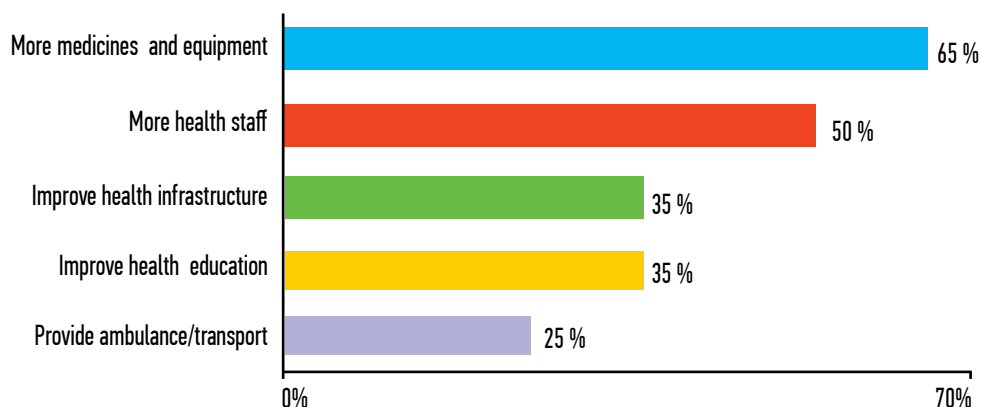


Figure 23: Suggestions made by health staff interviewed as to what could be done to further improve the quality of health services at their health facility

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014. n=20
More than one answer was possible.

4.3.2 Organisation and administration of public basic health care services

In most townships in Rakhine State, the TMO plays both a medical and an administrative role, being responsible for staff planning, quality supervision of all health facilities, the distribution of medical supplies, as well as for collecting health baseline data. The TMO can recruit support staff for the various health facilities directly if there is a vacancy, but is not in charge of hiring and firing or the transfer of medical staff between health facilities. An overview of the more specific tasks of the TMOs is provided in figure 24.

<p>Role and responsibilities</p>	<ul style="list-style-type: none"> • Management and administration. • The Ministry of Health is responsible for two streams of administration— hospital management and public health. In smaller townships the TMO is responsible for both streams and leads operations, management, budgeting and planning. • TMO is responsible for distribution of essential drugs to RHCs • TMO reports on a monthly base to the Ministry of Health through its District offices.
<p>Monitoring and evaluation</p>	<ul style="list-style-type: none"> • Maintain standards, staff code of conduct, but no specific staff performance indicators. • TMO and staff (Health Assistants) visit rural health centres 4-6 times a year to provide oversight, maintain Township Health Profiles and collect key health performance indicators.
<p>Co-ordination</p>	<ul style="list-style-type: none"> • The TMO chairs the Township Health Committee, but is not a member of the TMC, TDSC or TMAC. • The TMO co-ordinates directly with the DMA on the maintenance of hospital buildings in the municipality and with the TEO in delivering basic health education at schools.
<p>Complaints</p>	<ul style="list-style-type: none"> • There is a notice board in every health facility telling the public where to go with complaints • First point of address is the health facility manager. More serious cases are addressed by the TMO who is obliged to investigate, in some cases traveling to the site of complaints.

Figure 24: Key characteristics of township health administration in Rakhine State

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014

While salaries are paid from the recurrent budget and are usually paid out in time, there is very limited operational budget available for the senior staff to actually carry out their duties and functions which contributes to an inefficient use of manpower. While the TMOs are for example supposed to supervise and visit the Rural Health Centres on a regular basis, there is no, or in some cases, only a very limited budget for travel or transport available, forcing the staff to pay for these travel costs from their own pockets. This lack of operational budget combined with a highly centralised decision-making structure in most departments has a negative impact on the efficiency and effectiveness of service delivery and on the optimal use of the limited manpower available. As one TMO mentioned: *“I have more responsibilities than a few years ago, but no extra resources to carry out these extra tasks”*.

In seven out of eight of the six communities included in the mapping there is a Village Health Committee (VHC). Members are either elected or appointed by the Village Administrator or VTA.

These VHCs assist the staff by providing labour to carry out small repairs at the health facility and assist with non-medical care for patients. They are however not involved in the management of the health facility and are also not functioning as an intermediary between the population and the service providers.

Planning and budgeting

The planning and budgeting in the health sector remains very centralized and is mainly taking place at the Union level. Health facility managers draft “micro plans” for their own facility based on their health statistics. These are discussed with the TMO and he/she consolidates them into one township level plan for recurrent expenditures (staff, medicines, operational costs, etc.). The TMO submits this proposal for the annual recurrent budget for township healthcare to the District Health Officer, who collates the various township requests and submits them to the State level. As there are no township strategic (health) plans, most TMOs calculate their recurrent budget needs based on the previous year’s actual expenditure and add to that any additional requirements based on e.g. an increase in number of medical staff in their township. The TMO is not directly involved in the planning and implementation of capital investments (new RHCs, renovations, etc.), which is all dealt with by the MoH at the State and Union level, but can provide suggestions, which are increasingly included in the annual and 5 years plans of the Ministry.

One major change is the delegation of the procurement of medical supplies from the Union to the State and district level, which is now handled and managed by the State DoH with the intention of improving the efficiency of drugs allocation. As a result of these changes, the TMO can now transfer medical supplies between RHCs in order to deal with acute shortages.

While the formal planning and delegation within the Ministry of Health hasn’t changed much, the TMOs interviewed mentioned that the Ministry of Health nowadays is much more responsive to the needs of the TMOs and to the suggestions made by the TMOs. The TMOs also noted that the flow of information to and from the State level has improved and significantly. As a result, financial and budget issues are now more transparent than before. Still, the TMOs are not always provided with copies of the investment budget available for their township and are informed on an ad hoc base about new construction projects.

As a result of the centralised planning system in the Ministry of Health the ability of the TMO to coordinate planning with other sector departments and with other health service providers in the township is very limited and the TMO is not part of the TMC. The TMOs do provide the TPO and GAD with the annual budget and health plans but this is not mandatory and they are not discussed during the HoDs meeting.

People’s views on health services

Use of public health facilities is higher as compared to the results in other States and Regions

Regarding the use of public or private health facilities, 227 respondents (or 59 percent) stated that they usually make use of public health facilities ((Sub) Rural Health Clinics, station and township hospitals), while 157 respondents (or 41 percent) said that most of the time they make use of a private health facility or a traditional doctor (see Figure 25). There is a big difference between urban and rural respondents, with rural respondent predominantly making use of public facilities and urban respondents making more use of private health facilities. In Rathedaung the use of public health facilities is higher than in the other townships, mainly because only two village tracts in Rathedaung were included in the survey and no wards. The use of public health facilities is higher as compared to the results in other States and Regions, in which the majority of respondents (usu-

ally between 60-70 percent) make use of private facilities, which can be explained by the lack of private facilities available in Rakhine.

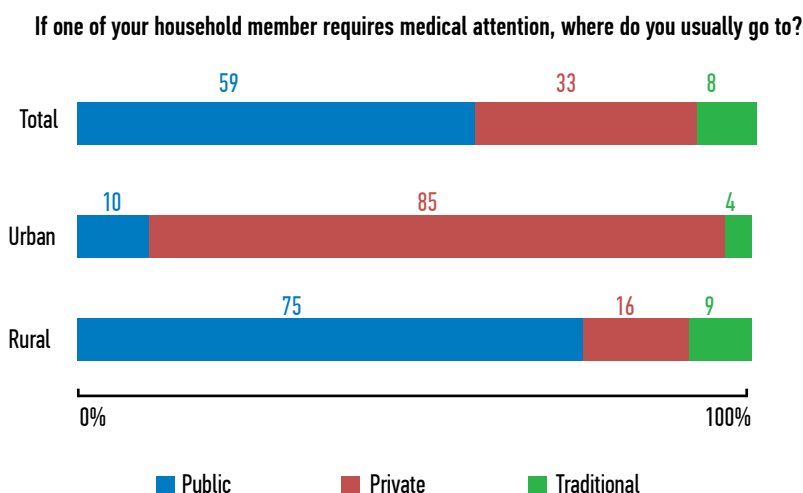


Figure 25: Use of public vs. private health facilities in the four townships.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 384.

Reasons for using a private facility are presented in figure 26 below and are mainly related to factors like distance and convenience.

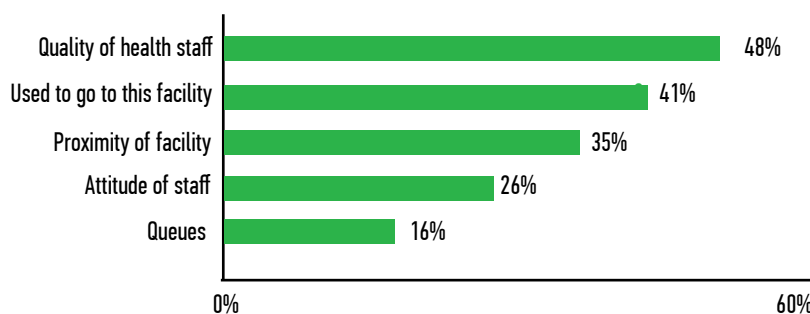


Figure 26: Reasons for using a private health facility

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n=157. More than one answer possible

The reasons were mentioned by people using a public health facility (see Figure 27), although one must notice that most of the respondents who are using as public health facility did not even have the option to go to a private clinic.

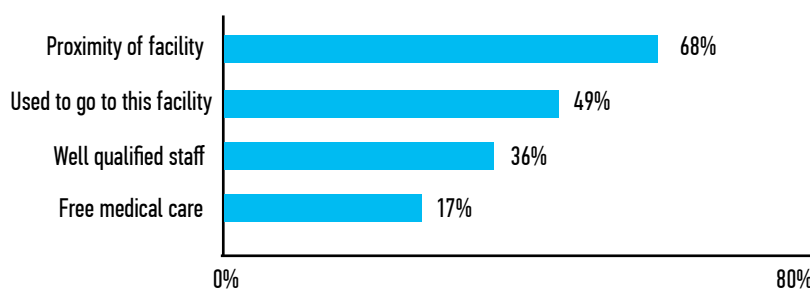


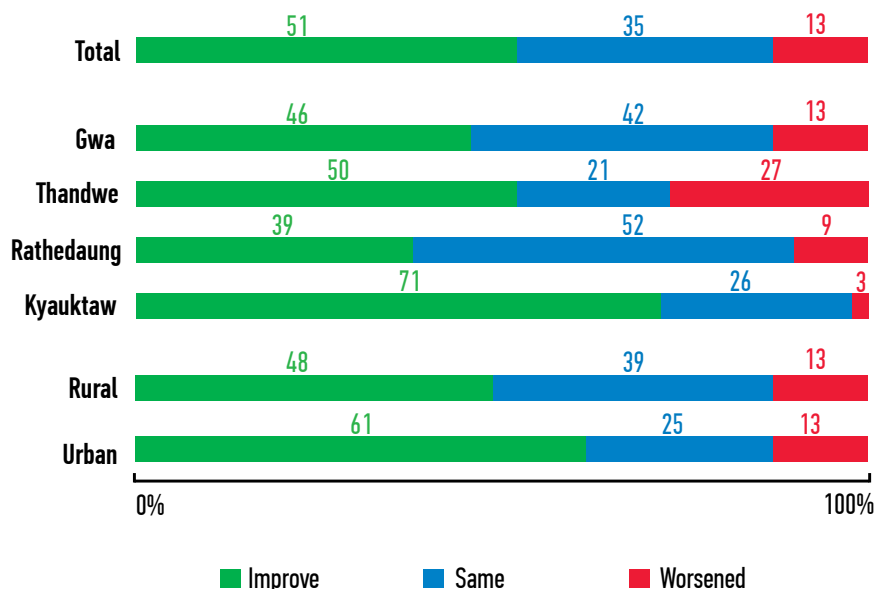
Figure 27: Reasons for using a public health facility

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n=227. More than one answer possible

It is remarkable that cost considerations were only mentioned by 17 percent of the respondents using a public health facility as a reason for choosing to go a public health facility, which is almost the same figure as in other States and Regions.

In order to get an impression of the awareness of people of the improvements made by government in the health care sector, respondents were asked whether health services in general (public and private combined) have improved in their village-tract or ward over the last three years (see Figure 28).

Figure 28: Perceived changes in primary healthcare services over the last three years at the village tract or ward level.



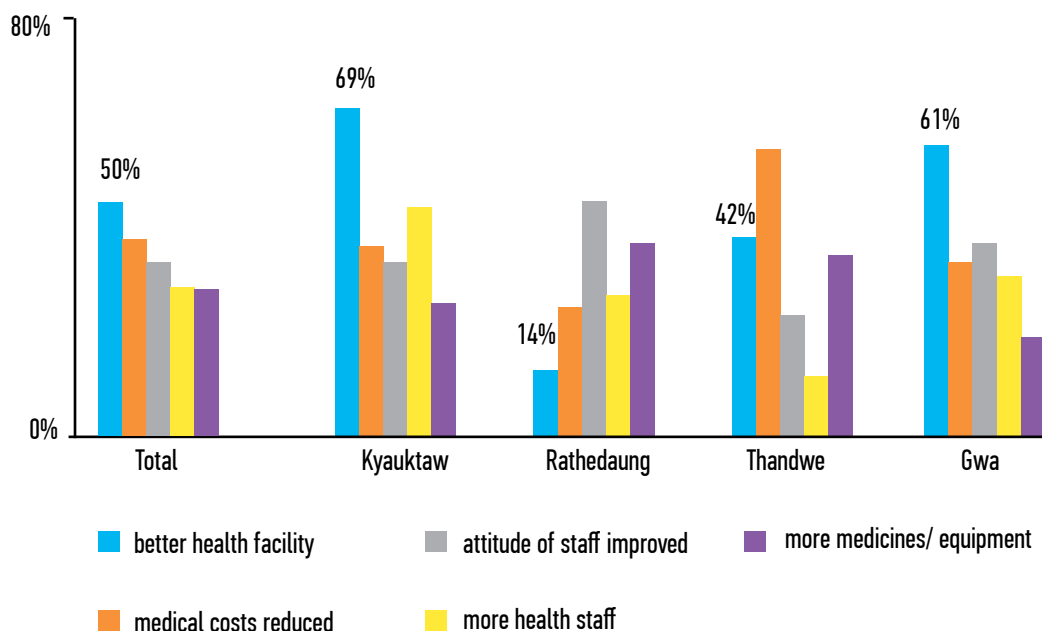
Source: UNDP Local Governance Mapping, Rakhine State, August–December 2014 n= 384.

About half the people perceived improvement in health services although this figure is lower than many other States/Regions

The majority, or 51 percent of the respondents mentioned that the health services in their village-tract or ward have indeed improved, while 35 percent mentioned that the quality of the services had stayed more or less the same. Only 13 percent mentioned that the quality of health services had deteriorated over the last three years. Compared to other States and Regions included in the mapping these figures are slightly below the average. Respondents in Kyauktaw were most positive about the changes in health services with 71 percent mentioning that it had indeed improved. Urban respondents were more positive as compared to rural and rural respondents, while there was not much difference between male and female respondents. Of those respondents who mentioned that the situation had improved, the main reasons mentioned are presented in figure 29.

Figure 29: Reasons for improved health care as mentioned by respondents who were of the opinion that health care had improve in their village tract or ward.

Source: UNDP Local Governance Mapping, Rakhine State, August–December 2014 n= 194. More than one answer possible.



These improvements are more or less similar as those mentioned by the health staff, showing that people are monitoring their health services quite well. There were slight difference between the respondents of the four townships, with those in Kyauktaw mentioning the improvements in the infrastructure more often, while in Thandwe the reduced costs of health care services were mentioned more often.

Taking the changes in health care into consideration, the respondents were asked whether they were satisfied with the quality of health care services in their village tract or ward (see Figure 30).

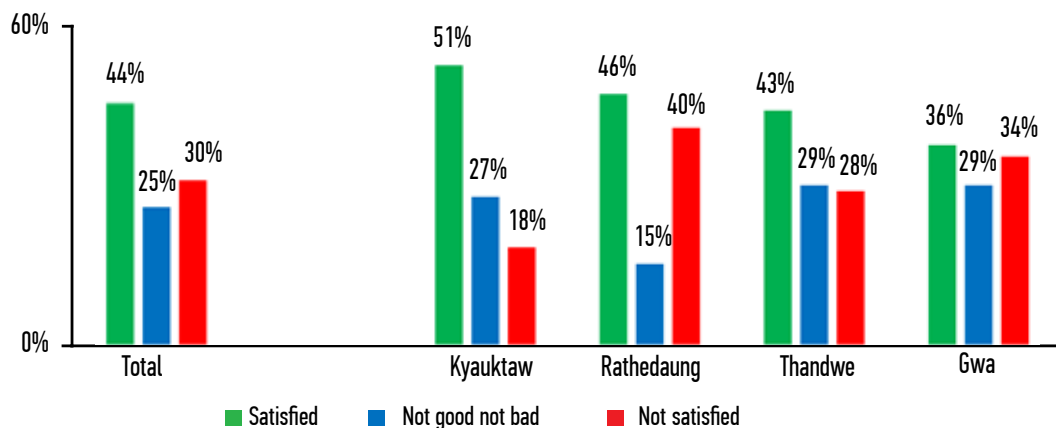


Figure 30: Overall level of satisfaction with health care services in village tract or ward.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n= 288.

Forty-four percent of the respondents (48 percent of the female and 40 percent of the male respondents) said that they were satisfied, 25 percent qualified the services to be “not good, not bad” while 30 percent were not satisfied with the quality of the health care services. Compared to other States and Regions, these satisfaction levels are relatively low. The levels of satisfaction were higher in Kyauktaw and significantly lower in Rathedaung as compared to the other townships (see also Figure 31).

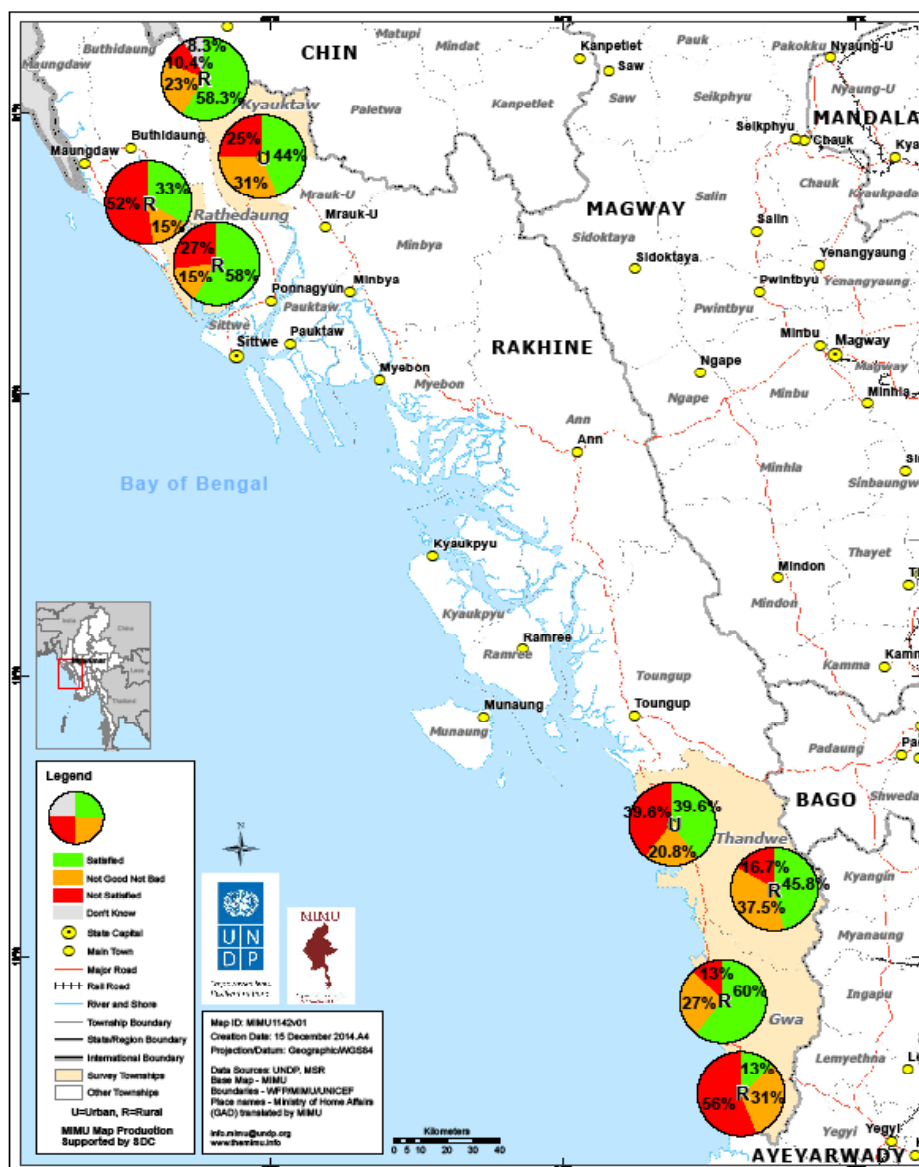


Figure 31: Level of satisfaction with health care services in their village tract or ward.

Source: UNDP Local Governance Mapping, Rakhine State, December 2014.

In box 4 and 5 some of the responses made by the communities during the Community Dialogue session are presented to illustrate some of the progress made and the challenges that are still present at the village tract or ward level.

Source: UNDP Local Governance Mapping, Rakhine State, April 2014.

Box 4: Examples of improvements made in health care services as mentioned by the communities during the Community Dialogues

TiMa VT Kyauktaw	<ul style="list-style-type: none"> • The hospitals are upgraded. • The roads have improved towards the hospital • There are trainings related to healthcare
KyaukGyi VT Thandwe	<ul style="list-style-type: none"> • Sufficient medicines than before. • The building is better • The compound has been fenced • Tube well has been dug • Ceilings are been fitted
TheingTaung VT (Rakhine part) Rathedaung	<ul style="list-style-type: none"> • can get medical treatment because a health staff was assigned in the village tract • the health staff gave all the necessary medical treatments to the children • the health staff provide immunization shots

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014.

Box 5: Examples of challenges in health care services as mentioned by the communities during the Community Dialogues

Pyi Taw Tha ward Kyauktaw	<ul style="list-style-type: none"> • The hospital building is not good. The roof is leaking. • Not enough beds • Not enough employees • Not enough medicine. Have to buy from outside. • Not enough water
TheingTaungVT (Muslim part) Rathedaung	<ul style="list-style-type: none"> • It is difficult to get medical treatment from the nearest SRHC because of long distance and travelling limitations • Not allowed to travel to the village where the clinic is located after 6pm so it is difficult to get medical treatment in emergency cases • The health staff does not make field visits to the village • There are not sufficient medicines and health staffs at the nearest SRHC
MaKyayNgu VT Gwa	<ul style="list-style-type: none"> • Insufficient healthcare workers • Don't have proper clinic • Not much of healthcare talks • Provide medicine during clinic operating hours but have to buy if it is not during operating hours • Ask for donations
No. 2 ward Thandwe	<ul style="list-style-type: none"> • Not enough health staff, health facilities, medicine and medical aids. • Doctors are not available when needed. • No free healthcare. • Not enough space for patients in hospital. • Poor service and attitude of health staff

Subsequently, the 120 respondents who normally make use of a public health facility were asked whether or not they had to pay for the medicines they received from the health staff. Their responses are presented in figure 32.

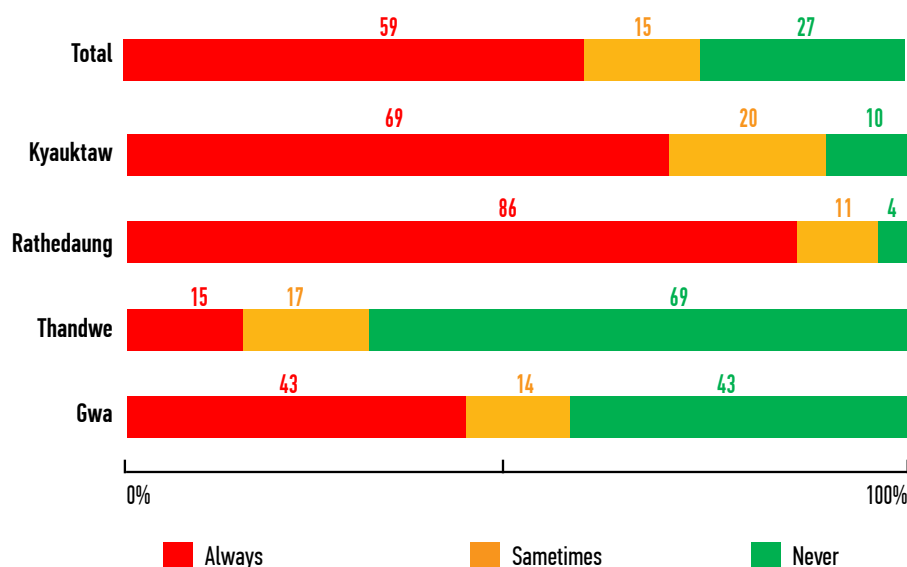


Figure 32: The number of times respondents who are using a public health facility had to pay for medicines.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n=164

Fifty-nine percent of the respondents said that they always had to pay for medicines in a public health facility and 15 percent sometimes, while most medicines (i.e. essential drugs, if in stock) should be provided for free. The differences between the various townships are huge with Thandwe standing out positively (only 15 percent always paying for medicines) and Rathedaung negatively with 86 percent always paying for medicines. It is however not clear from the mapping whether this is related to a lower availability of essential drugs in a more remote township. Of the respondents who mentioned that they always had to pay for medicines 89 percent stated that they did not get an explanation from the medical staff as to why they had to pay for these medicines. These statements seemed to contradict with what the health facility managers and the TMOs had reported.

In 2013, the MoH made generic (non-specialist) drugs available to patients at public-health facilities free of charge. The six public healthcare facility managers interviewed all confirmed that they adhered to the regulations from the Ministry regarding the provision of essential drugs and that health staff at their facility refrained from selling drugs that should be for free.⁴⁴ Only if essential drugs were out of stock patients were charged to pay for replacing commercial medicine. In addition, all facility managers mentioned that essential drugs are almost always available, while they mentioned that they always provide an explanation to the patients in case they deviate from the regulations.

These discrepancies between what patients and health staff are saying indicates that something is wrong in the distribution mechanisms and regulations of essential drugs. It is however not a specific problem for Rakhine State since similar patterns emerged in the other States and Regions as well. Yet, they cannot be used as direct proof of mismanagement of healthcare resources, as the rules related to the distribution of drugs and medical supplies are not always clearly formulated and communicated, and there are some specialist medicines in circulation that are not subsidised by the MoH. In addition, health staff often assist patients with non-government supplied medicines once their regular stock is depleted, and charge people for the actual costs.

44. See Volume I, Chapter 3: Emerging Local Governance in Myanmar for details on existing practices related to drug supplies and patient entitlements.

At the very least, these results are indicative of a poor articulation and understanding on both sides on the rights of patients. This points to gaps in mutual understanding between service providers and users, which, at best, can erode trust between people and the public sector, and at worst, lead to systematic and unchecked corruption in the delivery of basic services. In either case and even if there is no mismanagement of drugs, such lack of clarity will lead to allegations of misuse because people are told that in general drugs provided at the health facility should be free of charge. In order to find out what is exactly going wrong and what could possibly be done to prevent this from happening in future would require a more detailed study.

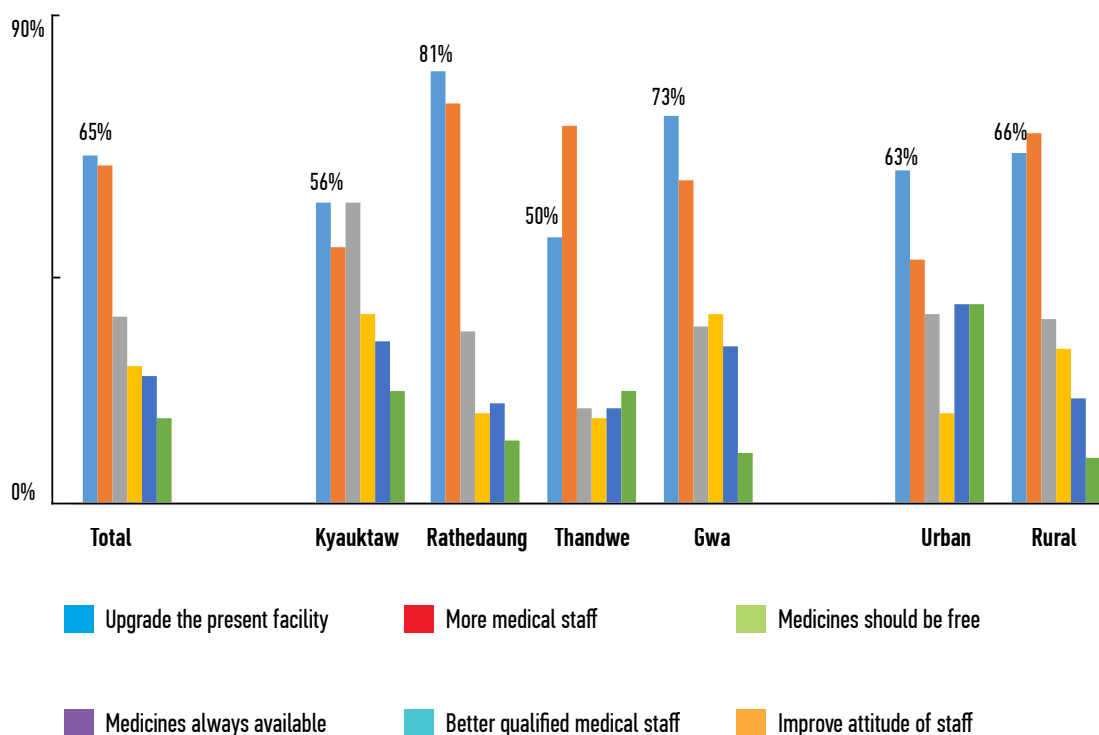
On a more positive note, regarding equity in treatment, almost all respondents (93 percent), both male and female, and from all ethnicities who made use of public health facilities felt that they received the same treatment as any other person in their village tract or ward, i.e. there was no discrimination against particular groups within the community.

Direct participation of people in the planning of health care improvements is still very limited. Only seven percent of the respondents stated to have ever participated in a meeting organised by government to discuss the quality or planning of health services in their village tract or ward. As mentioned above, as long as the TMOs or the health facility managers have no resources to respond to the felt needs and can neither influence the planning of the Ministry of Health even at the lowest levels, such consultations will not be very useful.

Finally, respondents made the following suggestions to further improve health care services in the village tract or ward (see Figure 33). These suggestions are similar to those made by the health staff, but focus more on improving the number, the quality and the attitude of health staff.

Figure 33: Possible improvements to be made to further improve health care services in the village tract or ward.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 384. More than one answer possible.



4.3.2. Primary education

Similar to public health care, the quality of primary education has been very poor in Myanmar for decades if compared to internal standards and performance improvements in other countries.⁴⁵ The Government of Myanmar has recognized this deficit and has started to address this backlog first of all by gradually increasing the education budget from 310 billion kyat (310 million USD) in 2010-2011 to 1,142 billion kyat (1,142 billion USD) for the current year 2014-2015, which constitutes an increase of 368 percent within five years.⁴⁶ Nevertheless, despite this increase, the Government's planned expenditures on education are still only 5.92 percent of the total government's budget for the year 2014-2015, which remains very low if compared to other countries in the region. As a result, in the current fiscal year Myanmar spends a mere 1.33 percent of its GDP on education while other countries in the region spend on average approximately 3 percent of their GDP on education, with Thailand leading the group with more than 5 percent.⁴⁷

In addition to the above mentioned budget increases, the education sector is under revision and based on the initial outcomes of a Comprehensive Education Sector Review (CESR) several minor reforms are already being implemented or in preparation. Regarding the management of education the CESR concluded:

- 1) The relevant ministries, administrative bodies and schools are not fully serving their intended functions without appropriate coordination and demarcation of roles to serve for a unified and coordinated purpose;
- 2) The existing laws and policies have become outdated and do not reflect the realities of the education sector today.⁴⁸

The Constitution of Myanmar guarantees that “the Union shall provide a free, compulsory primary education system.” However, there is no overarching policy document that presents the strategy and concrete approach of how government wants to transform the sector. Together with “national health”, a number of education-related responsibilities are listed in Schedule One of the Constitution.⁴⁹ This is generally interpreted as meaning that these services are to be solely provided by the Union level government. A recent study has found that the inclusion in Schedule One is held as “meaning that the State and Regional Hluttaw cannot enact any legislation in that sector. Nor is there formal provision for the State governments to have a role in education, or practical means for them to do so”.⁵⁰ In Rakhine, this view clearly prevailed as was confirmed during interviews with education sector stakeholders and the township administration.

The government's review of the school system began in 2012 and is expected to be completed this year. The first phase of the review, known as the “rapid assessment,” included a quick look at the current situation to identify priority areas for reforms. Reports for the second phase, which examined the initial recommendations in more detail, have been reported to be completed. The third and final phase of the review will see the development of an education sector plan through

45. Zobrist, Brooke and McCormick, Patrick 2013. A Preliminary Assessment of Decentralisation in Education: Experiences in Mon State and Yangon. Subnational governance in Myanmar Discussion Papers. Centre for Economic and Social Development (MDRI-CESD), December 2013.

46. As mentioned by President U Thein Sein during the 2014-15 fiscal year budget meeting of the Financial Commission on 7 January 2014.

47. UNICEF, 2013; Snapshot of Social Sector Public Budget Allocations and Spending in Myanmar.

48. JICA 2013; Data Collection Survey on Education Sector in Myanmar Final Report. February 2013. Page 10

49. Schedule 1, Section 9. “Social Sector”: (a) Educational curricula, syllabus, teaching methodology, research, plans, projects and standards; (b) Universities, degree colleges, institutes and other institutions of higher education; (c) Examinations prescribed by the Union; (d) Private schools and training; [...]

50. Zobrist, Brooke and McCormick, Patrick. A Preliminary Assessment of Decentralisation in Education: page 8-9.

2021. However, some quarters of the population including civil society and ethnic groups have expressed concerns.⁵¹

The local governance mapping explored how local service providers and users in the four townships in Rakhine State see the quality of primary education and how they appreciate the way in which it is delivered. The results of these findings are presented in the following section.

Primary Education service provision in the four selected townships in Rakhine State

Looking at the figures provided by the TEOs for primary education in the four selected townships (see Table 16), the teacher-student ratio is well below the national guidelines of one teacher per 40 students.

Table 16: Key education data for government operated facilities in the four townships in Rakhine State.

Source: GAD township profiles and information provided by the TEOs

	Gwa	Rathedaung	Kyauktaw	Thandwe
Population	58,000	163,000	215,000	128,000
Primary schools	95	108	196	158
Primary school students	6,427	26,354	30,779	11,556
Primary school teacher: students ratio	1:17	1:29	1:28	1:16
Primary school teachers appointed	376	900	1,068	682
Primary school teachers locally recruited	214	154	221	-

In order to support the government in the provision of basic education there are various (I)NGOs and UN institutions active in the education sector in the four townships included in the survey (see table 18).

When reflecting on primary education services, across the board, service-providers agreed that primary education services was better now than it was previously. They pointed to the increased number of teachers and the growing numbers of student prize-winners at township level competitions as evidence of this trend.

Eighty-one percent of all 33 education staff interviewed (three TEOs, eight headmasters and 22 teachers), mentioned that primary education has improved over the last three years in the four townships in Rakhine State, while the remaining 19 percent had not noticed any significant changes. Most interlocutors identified the improved quality of teaching (better and more trained teachers), better teaching material and improved cooperation between parents and teachers as the main factors contributing to this improvement and to a lesser extend the improved school infrastructure.

Notwithstanding the improvements, education staff pointed to poor school infrastructure (buildings, furniture and sanitation), teacher shortages, limited or no travel allowances for teachers, and low salaries as the greatest challenges for the primary education sector. For example, it was noted that single teacher was assigned to cover up to three grades in some village tracts, pointing to the acute shortage of teachers in the State. When reflecting further on facilities, a large number of

51. The Irrawaddy, 2014

teachers thought that school infrastructure facilities (including playgrounds, bathrooms and access to drinking water) were inadequate, and noted teacher shortages, over-crowded classrooms, low salaries and gaps in the availability of teaching materials as negatively impacting the primary education services.

The majority of headmasters had reported low-cost problems, such as the need of more school chairs, desks and textbooks, to the TEO and these were for the most part successfully resolved, indicating that the responsiveness of the Ministry of Education to the needs of the actual teaching staff has improved. Teaching staff made several suggestions to further improve the quality of primary education (see Figure 34). These suggestions are more or less the same as what has been improved already over the last few years, indicating that the Ministry of Education is on the right track but still needs to do more.

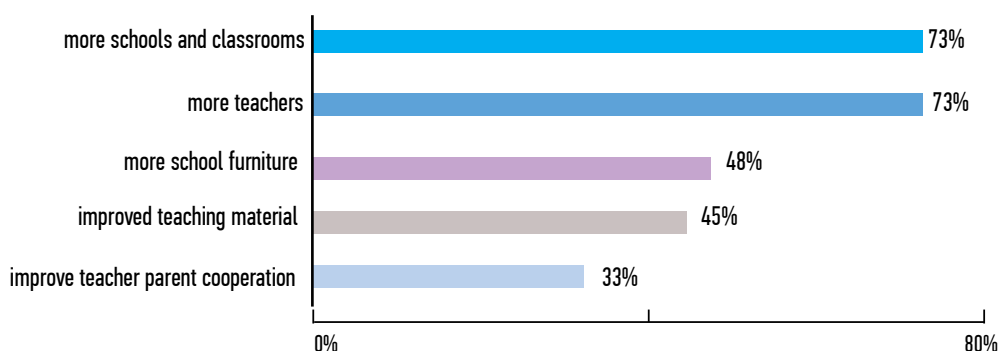


Figure 34: Suggested improvements by teaching staff to improve the quality of primary education

Source: UNDP Local Governance Mapping, Rakhine State, December 2014. n=33
More than one answer was possible

Teachers believed that they adhere to the code of conduct from the Ministry of Education that they are punctual, report honestly on their performance to the education office at the township level, listen to the parents about their children's education and take any complaints from parents seriously. The teachers were divided about the quality of education they are able to provide. Sixty-four percent mentioned that their school was doing as good or even better than other similar schools in the area in providing good quality education, while the other 36 percent were either not sure or mentioned that their school was not doing as good as others. According to the education staff, every child is treated in the same way, but there are no special facilities or programmes for children with learning problems like physical disabilities.

The concept of performance management was understood by education staff as the timely reporting on basic indicators. Standards and practices for monitoring are fairly well-established for primary schools. This includes regular inspection visits that are conducted typically by the Assistant and Deputy TEOs (at least twice a year, but usually at least four times a year). The objective is to conduct routine inspections, evaluate personnel and audit stock, and collect data on 12 basic output indicators for primary schools (seven relate to quality, five to physical infrastructure). Though inspectors are supposed to inspect personnel, no data is collected with respect to staff performance yet (i.e. teacher absenteeism, or quality of teaching).

All schools had a Parent Teacher Association (PTA). These PTAs are mainly involved in implementing small maintenance works and in collecting donations from the parents.

The organisation and administration of primary education.

The administration of primary education at township level in Rakhine State is in line with standard procedures within the Ministry of Education (see Figure 35).

Figure 35: Key characteristics of township primary education administration in Rakhine State.

Source: Interviews with Township Education Officers Rakhine State, July 2014

<p>Role and responsibilities</p>	<ul style="list-style-type: none"> • The TEO is in charge of the management and administration of all education facilities and staff (including salary payments). • The TEO reports on a monthly, quarterly and annual basis to the district Department of Education (DoE). Reports consist of education statistics (enrollment, dropouts, etc.), staffing and infrastructural needs. • The TEO provides data for planning and budgeting to the district and State level Departments. • The TEO proposes teacher transfers based on staffing needs of schools.
<p>Monitoring and evaluation</p>	<ul style="list-style-type: none"> • School inspections (Assistant TEOs for primary schools) are conducted at least twice a year. The inspection focusses more on the state of educational facilities than on actual performance of teachers or students. • TEO also monitors the construction of new buildings in cooperation with GAD.
<p>Co-ordination</p>	<ul style="list-style-type: none"> • TEO is the secretary of the Township Education Committee. GAD chairs, members are TMO, TDSC/TMAC members and NGOs. They meet on an ad hoc basis. • There is ad hoc coordination with the Department of Health on school health programmes and anti-narcotics campaigns. • TEO sends statistics and information to the GAD on request.
<p>Complaints</p>	<ul style="list-style-type: none"> • All complaints that cannot be handled by the headmaster are channelled to the TEO • As required, the TEO will form an enquiry committee (TEO, Assistant and headmaster of another school). After investigation, the committee proposes a decision. The proposed decision is sent to District EO for approval.

Together with a few assistants, the TEO manages roughly 60-70 percent of all civil servants in the township including their salary administration; monitors the quality of all levels of education; collects relevant educational baseline data, supervise all renovation and construction works, organises teacher trainings and, resolves a multitude of practical issues especially with regard to the structural shortage of teachers in the more remote areas. In practice, the TEO handles the largest recurrent budget in the township. While the responsibilities of the TEO are huge, the ability to respond to urgent problems and to influence planning is very limited, due to the fact that the TEO's autonomy is very limited as a result of the centralised way in which the Ministry of Education is organised.

For monthly salary payments, the TEO issues cheques to each primary school headmaster who pays the teachers (or to one headmaster who coordinates salary payments for several schools). They return the signed salary sheets the following month.

According to the TEOs interviewed, not much has changed in the organisation of education over the last few years, although it has become easier for the TEO to recruit local teachers to deal with acute staff shortages, especially in the more remote townships or villages. The TEO can recruit teachers on a daily wage basis (these are unqualified teachers who are not part of the civil service, they do not receive any additional benefits like pensions, and are not paid during school holidays). The need for such daily wage teachers is in the four townships in Rakhine still relatively large as



compared to other States and Regions, indicating that the increase in qualified teaching staff in Rakhine lags behind. The TEOs mentioned however that while their responsibilities and autonomy hasn't changed much, the Ministry of Education now welcomes suggestions made by the TEOs and responds to their needs much faster.

If there is a serious shortage of teachers in a certain school, the TEO can only request other schools/teachers to assist temporarily, as he/she does not have the authority to transfer any of the qualified teachers permanently from one school to another. The last resort to resolve the shortage of teachers is for the Parents-Teachers-Association (PTA) of a school to recruit a teacher locally and pay for him/her by collecting money from the parents. These teachers fall outside the official education system and records. The TEO does not keep a record of these teachers and does not check their qualifications or actual performance.

Planning and budgeting of primary education in the four townships

Using the inputs provided by every school, the TEO drafts a recurrent budget proposal based on the previous year's figures, including the newly arrived teachers, and discusses this with the District Education Officer (DEO) and submits it to the State level Director. A copy of the recurrent budget request is sent to the Township Planning Officer and the TA. In addition, the TEO provides the DEO with the basic data for the Department of Basic Education at the Ministry of Education to conduct its planning. Based on the actual needs, as provided by the headmasters of each school, the TEO can submit requests for capital investments but is not involved in the actual planning of new education facilities. The TEO only knows where and when a new school is going to be built when the actual construction works starts as tenders for these activities are done at the State level. Not knowing the capital investment plans of the Ministry beforehand, and not having a copy of the contract or specifications, makes it very difficult for the TEO to monitor construction progress or consult with the community in this regard. In practice, the inputs from the TEO into the

annual planning process of the Ministry of Education is however more and more appreciated and it somehow finds its way all the way up to the decisions makers at the Union level.

Community members or PTAs are not actively involved in the planning process and they are not consulted either. As one TEO mentioned; “planning is based on statistics, not on people’s needs”. This was confirmed during the Community Dialogue sessions and the individual interviews, which showed that 70 percent of the parent with children at the primary school had never been involved in a meeting with government staff regarding primary education.

School construction projects are supervised by a school construction committee which is formed at both township and village level when required. The committee is chaired by one of the parents and has the headmaster, a VT/WDSC and a PTA representative as members. The committee is mainly involved in progress monitoring, while an engineer from the District Education Office usually does quality monitoring. In order to transfer the instalment payments to the contractor, the headmaster signs the completion certificate on behalf of the school construction supervision committee.

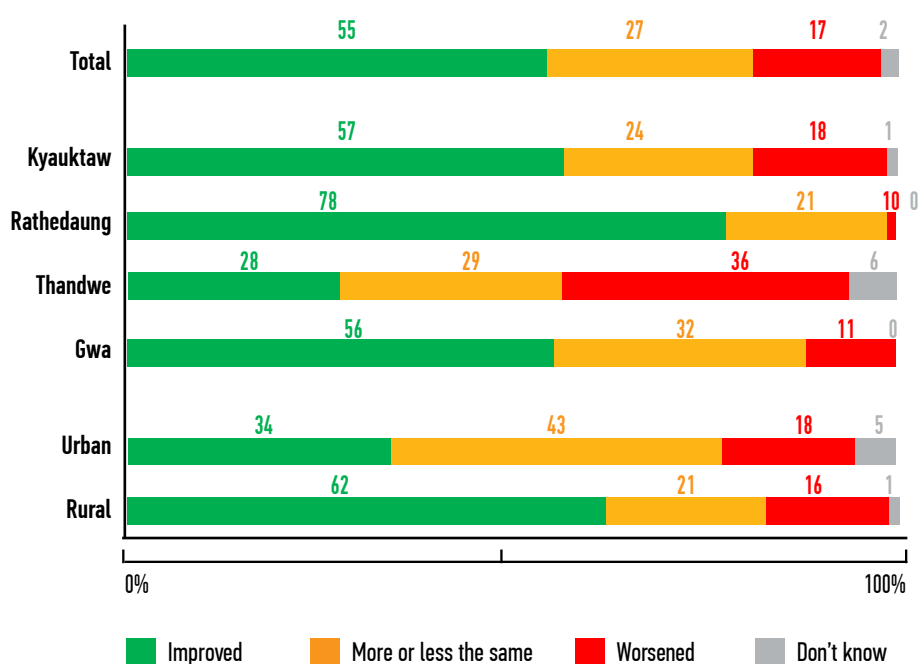
As a result of the centralised planning system, and similarly to the TMO, the TEO is very limited in coordinating planning with other sector departments and with other education service providers in the township beyond very practical coordination of educational activities such as anti-drug campaigns that are carried out jointly with the TMO at primary and secondary schools.

People’s views on primary education

Fifty-five percent of the respondents in the four townships in Rakhine were of the opinion that primary education in their village-tract or ward had improved over the last three years, while 27 percent mentioned that the quality had stayed more or less the same and 17 percent mentioned that the quality had deteriorated (see Figure 36). Compared to other States and Regions, this figure is slightly below the regular score (between 60-70%)

Figure 36: Perceived changes in the quality of primary education at village tract or ward level, over the last three years.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 384.



Contrary to the picture presented under health care, Rathedaung received a higher score than the townships regarding the improvements in primary education (78 percent). Slightly more rural respondents mentioned an improvement (62 percent) compared to urban respondents (34 percent), which can be explained by the fact that the quality of education in the urban areas was already better and that the rural areas are now catching up. The main reasons for improvements as mentioned by the respondents who stated that education had improved (211) are presented in figure 37.

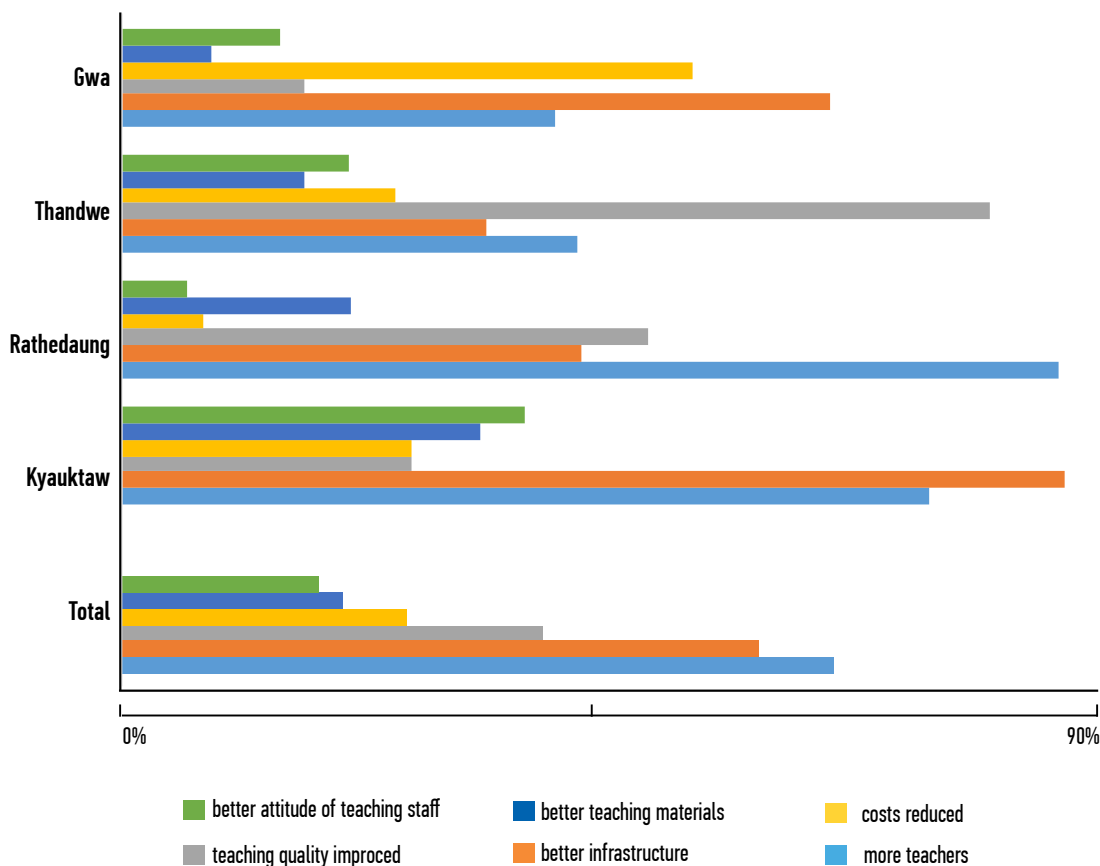


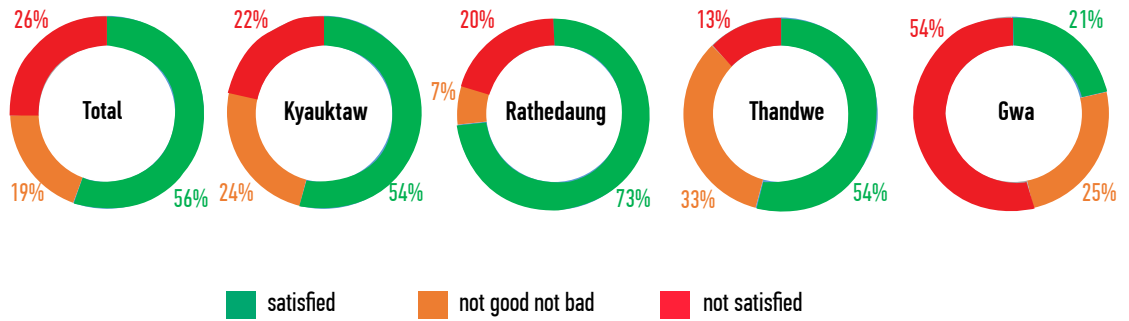
Figure 37: Reasons why according to the respondents primary education has improved.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 211. Note that more than one answer was possible.

Most of the respondents (58 percent) mentioned the increase in number of teaching staff as the main reason for the improvement in education, followed by an improvements in infrastructure, like more classrooms, toilets or more schools (52 percent). Of the 64 respondents who mentioned that primary education had worsened over the last three years, 80 percent attributed this to poor maintenance of the school buildings.

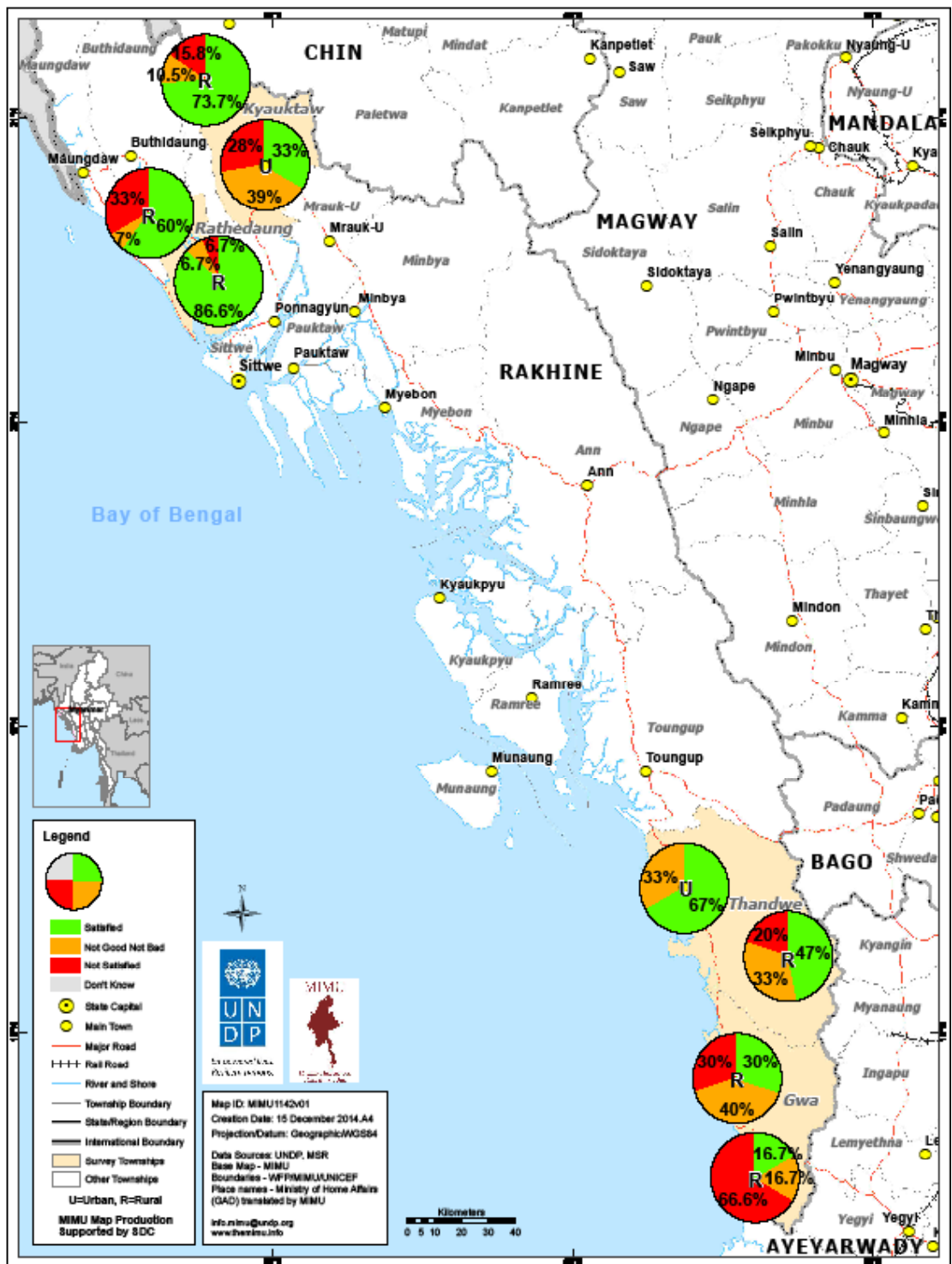
Respondents with children attending primary school (149) were asked about their satisfaction with the quality of education. Fifty-sixpercent of the respondents with children attending primary school were satisfied, 19 percent qualified it as “not good/not bad”, and 26 percent were not satisfied (see Figure 38 and 39). Compared to other States and Regions this is a very high score. There were some differences between the four townships with Rathedaung recording the highest level of satisfaction (73%) and Gwa the lowest with only 21 percent. Female respondents were slightly more satisfied with the quality of primary education of their children (61 percent satisfied) than male respondents (50 percent satisfied).

Figure 38: Overall satisfaction with quality of primary education for respondents with primary school-going children.



Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 149

Figure 39: Overall satisfaction with the quality of primary education for respondents with primary school-going children



Source: UNDP Local Governance Mapping, Rakhine State, December 2014. n = 74

Respondents with children attending a primary school were in general satisfied with the attitude of teachers. Seventy-nine percent of these respondents mentioned that in general the teachers at the primary school were observing regular working hours (i.e. they are present when the school is open), and 73 percent said that the teachers are polite and friendly to the parents and their children.

Forty-six percent of the parents mentioned that teachers were providing extra tuition after school hours for payment. Of these parents, 82 percent mentioned that this should not happen as teachers should receive a decent salary for the regular teaching activities they do and integrate this extra teaching into their normal practice.

Eighty-eight percent of the respondents with children at primary school felt that their child was treated in the same way as all the other children. According to 53 percent of the respondents, different needs of boys and girls (like separate toilets) were always taken care of by the schools, which is lower than in other States and Regions. The Government is not yet actively discussing education-related matters with the parents of children attending school. Seventy percent of all the respondents with children at a primary school had never been involved in such a meeting.

Below in box 6 and 7 are several examples of the discussions that took place in the Community Dialogue sessions about primary education.

Box 6: Examples of improvements made in primary education as mentioned by the communities during the Community Dialogues

Source: UNDP, Local Governance Mapping, Rakhine State, December 2014

LayGwa Sone VT Rathedaung	<ul style="list-style-type: none"> • Number of teachers have increased • Received free teaching aid equipment • Teachers came to school on time • Built the school with the money and labor from the village
TheingTaungVT (Muslim part) Rathedaung	<ul style="list-style-type: none"> • In the past, they could not get permission to build a school building but now they don't need to get permission to build a temporary school building • The government permitted a sub BEPS so the students can now continue their studies for secondary school education • In the past, children don't know how to spell their names, now they can even spell their parents' name
SutTwar VT Gwa	<ul style="list-style-type: none"> • Better school building than before. • The education qualities of children have improved and they are more interested in studying. • The qualities of the teachers also have become better

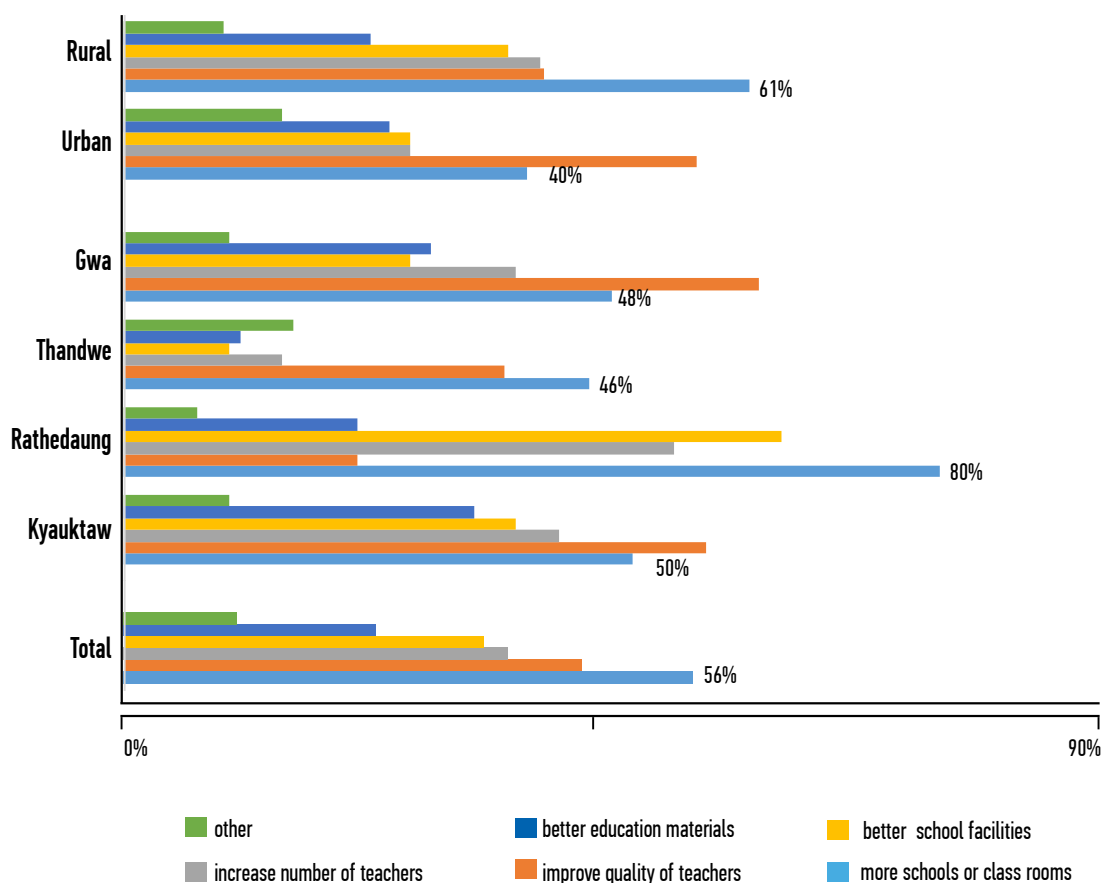
Box 7: Examples of challenges in primary education as mentioned by the communities during the Community Dialogues

KyaukGyi VT Thandwe	<ul style="list-style-type: none"> • The school building is not good • Not enough toilets • Classrooms are small • Not enough classrooms • Not enough furniture • The compound of the school is small.
Pyi Taw Thar ward Kyauktaw	<ul style="list-style-type: none"> • Teachers are providing private tuitions and not teaching well at school. • Teachers arrive late. • Insufficient toilets • The school is not clean
MaKyayNgu VT Gwa	<ul style="list-style-type: none"> • School buildings are not enough • Need toilets • Need more teachers • Need more teaching equipment

Respondents were finally asked whether they had any suggestions as to how primary education in the village tract or ward could improve further. The responses are presented in figure 40 below.

Figure 40: Suggestions made to improve quality of primary education

Source: UNDP, Local Governance Mapping, Rakhine State, December 2014



Additional improvements to the school infrastructure and improving the quality of teachers were mentioned most often, followed by an increase in the number of teachers and school facilities (like chairs and desks) and teaching materials. In the rural areas respondents stressed the infrastructure improvements more, while in the urban areas the quality of teachers was emphasized.

4.3.3. Drinking water

In a development context, ‘access to safe drinking water’ can be defined as having access to a private or public tap, a deep well, a protected hand-dug well or a protected open water source all within 30 minutes walking distance. As per this definition, access to safe drinking water stood at 79 percent for Rakhine State as a whole in 2010, which is slightly below the national average of 82 percent.⁵²

This aggregate figure however does not allow any conclusions for the availability and accessibility of drinking water at the local level in different parts of Rakhine State as this depends very much on local conditions. Providing safe and equitable access to drinking water is a core responsibility of government at the local level. However, government authorities in Rakhine State have only recently begun to invest more resources in this sector, while at the same time, residents of Rakhine State’s urban and rural communities have only recently started expressing their needs for safe drinking water.

The responsibility for drinking water provision is shared by the Department of Rural Development (DRD) and the Department of Municipal Affairs (DMA) (see Figure 41). These departments were only established late 2013 and are still in the process of becoming fully operational in most townships. The main reason to split these departments was to improve service delivery related to water, electricity and infrastructure to the rural areas as they were in past often neglected. The DRD falls under the Union Ministry of Livestock, Fisheries and Rural Development, while the DMA is part of the State Ministry of Development Affairs. Both departments have a multitude of responsibilities including the provision of safe drinking water. The DRD focusses on the rural areas of a township (village tracts), while the DMA is responsible for drinking water provision in the municipal area (wards).

<p>Role and responsibilities</p>	<ul style="list-style-type: none"> • Split between the DMA (urban areas) and the DRD (rural areas), since September/October 2013. • Management and administration of public works and general affairs in municipality (DMA only) • Monthly reporting to district and regional DRD and DMA.
<p>Monitoring and evaluation</p>	<ul style="list-style-type: none"> • The DMA along with the TMAC monitors municipal water supply in the wards. • The DRD monitors the situation in each village through its own staff and through established volunteer groups, comprising of five local people selected to assist the department on the ground.
<p>Co-ordination</p>	<ul style="list-style-type: none"> • The DMA receives requests to work with other departments on joint initiatives in the municipal areas. • The TMAC serves a key coordination mechanism for water supply. • The DRD works closely with the TA and VTAs to identify needs in the village tracts
<p>Complaints</p>	<ul style="list-style-type: none"> • The TMAC is a key mechanism for fielding municipal water-related grievances (though this is not a core role as originally conceived). • In rural areas, the DRD’s volunteer groups will support investigation of complaints.

Figure 41: Administrative set up of water provision.

Source: Township Municipal Affairs Departments and Departments of Rural Development, Rakhine State

52. IHLCA 2011; Integrated Housing and Living Conditions Assessment 2009-2010; Poverty Profile page 64

While they carry out similar activities, the way in which these two departments, plan, operate and implement their responsibilities is quite different as described in this paragraph.

Drinking water provision in rural areas by the Department of Rural Development

The DRD split off from the Department of Municipal Affairs in 2013, but in most cases it inherited the least number of staff. In majority of the townships, it started with a relatively small budget that has increased substantially during the present financial year. It falls directly under the Ministry of Livestock, Fisheries and Rural Development at the Union level that allocates staff and budgets to each of the townships. It is responsible for the construction of roads and bridges, drinking water provision, housing and electricity provision in the rural areas.

Since there was no reliable and updated overview of available facilities (i.e. roads and bridges, water facilities and electricity supply) in all the village tracts in most townships, the DRD started last year with conducting a baseline study of facilities available in each village. Based on this overview and consultations that were held with VtDSCs and VTAs, the DRDs drafted their first full year annual plan for 2014/15. As in other sector Ministries this means that the DRD identifies projects, makes cost calculations and submits a long list of proposed projects to the State level office, which submits it to the Union level Department. No indicative budget ceilings were provided beforehand with the result that most Township DRDs submitted enough projects that would take 10 times their actual allocated budget to implement. The disadvantage of this way of working is that a lot of energy is spent on preparing project proposals that are in the end not implemented while at the same time expectations are raised at the community level when the DRD collects proposals. If throughout the year only 10 percent of the proposed project are actually implemented, there is a high risk that people at the community level get frustrated as they don't see any benefits from their active participation in the formulation of projects, which will also result in demotivation of DRD staff members who constantly have to explain that not enough money is available to implement all projects.

In Thandwe and Kyauktaw, the TDSC is actively involved in the early stages of planning, identification of priority villages and projects together with the staff of the DRD, while in Gwa and Rathedaung the TDSC is only involved at the final stage to clear the final draft of the annual plan of the DRD

For the financial year 2014/15, the budgets (both capital and recurrent) have increased substantially. This increase can partly be explained by the fact that new staff members have been allocated to the departments in December 2014, thus enhancing the implementation capacity of the department at township level, partly by the fact that 2013/14 was in practice only half a year, but it is also the result of the increased attention government is paying to development in the rural areas. The relative low allocated recurrent budget as compared to the allocated capital budget can be explained by the fact that DRD, contrary to the DMA, doesn't implement any of the project activities itself. Once approved by the Union Ministry, similar township projects (like the digging of tube wells or the provision of solar panels) are grouped per district and go for tendering by the State tender board.

Contrary to Health and Education, the DRD is involving people in its planning process more actively although the way in which this is done seems to differ per township in Rakhine State. In all townships staff of the DRD consults with the VTA and/or the VTDSC at the Village Tract level to identify potential projects. In Thandwe and Kyauktaw, the TDSC is actively involved in the early stages of planning, identification of priority villages and projects together with the staff of the DRD, while in Gwa and Rathedaung the TDSC is only involved at the final stage to clear the final draft of the annual plan of the DRD during the combined VTA/WA-TDSC-TMAC-HoDs-TA meetings.

Based on the discussions with the Rural Development Officers in the various townships it seems that in this early stage the planning of activities is done in a very ad hoc manner, collecting as many projects as possible that tackle apparent problems, just ensuring that all village tracts get a fair share of the available budget, without having clear selection criteria or an overall long term plan or strategy. There are indications that this will gradually change once the departments are fully functional as e.g. the DRD in Rathedaung has now developed a more comprehensive 2 year water development plan.

It was also found that in Kyauktaw, Muslim villages are not included into the planning or implementation for DRD. The deputy Rural Development Officers explained that *“it is difficult to collect data from Muslim villages due to restricted access and security issues”*, therefore, these villages are completely excluded from any investments or other DRD activities. As this is the current situation over the last 12 months or longer, there are no initiatives or requests for any change.

Drinking water provision in urban areas by the Development of Municipal Affairs

Rakhine State adopted a new Development Affairs Law in January 2013⁵³ as instructed by the Presidential Notification 27/2013 and as provided for in Schedule Two of the Constitution. The State Municipal Law provides a legal basis for the formation and composition of the TMAC, which now includes people representation, as well as a description of its mandate and responsibilities and its relationship with the township level DMA.

Since the Ministry of Development Affairs and the DMA fall under Schedule Two of the constitution, i.e. under the responsibility of the State Government, revenues of the DMA are exclusively generated locally, while the planning and implementation process of public works and the management of municipal affairs is more or less completely delegated to the township level. In that sense, the DMA differs completely from all other departments present at the township level, which is reflected in, for Myanmar standards, relatively high levels of decisiveness, effectiveness, responsiveness and speed of implementation as described below.

The tasks and responsibilities of the TMAC and the DMA range from urban planning, water supply and sanitation, urban power supply, the management of markets, slaughter houses, business licencing, slow-moving vehicles, construction and maintenance of roads and bridges, inspection of construction works, traffic regulation, road names and building numbers, eviction of squatters, construction of parks and recreation centres, cemeteries, garbage collection and public health as well as other typical municipal functions and duties. Sources of revenue include; licenses from buildings, animal slaughter houses, street vendors and markets and other businesses (contributing on average to 75 percent of its income). Other revenues include income from power supply, various taxes (like building tax, water supply tax, street light tax, waste and sanitation tax, public sanitation tax, and tax on vehicles) and penalty fees. Under the Municipal Affairs Organisation Law, the TMAC has been allocated the status of a statutory body meaning that it can sue and be sued and enter into any type of legal transaction.

As in other States and Regions, the TMACs in Rakhine consist of 7 members, three ex-officio members (GAD (TA or Deputy TA), Head of DRD and the executive officer of the DMA who is secretary of the committee) and four members from the public who represent the wards and specific groups in society (like professionals, business sector, CSOs, etc.) of whom at least one should

53. Rakhine State Hluttaw, 2013; Rakhine Municipal Affairs Organisation Law.

have an engineering background. One of the people representatives is chairperson of the TMAC. The people representatives receive a monthly allowance of 180,000 kyat for the ordinary members and 200,000 kyat for the chairperson, which is similar to the salary of a senior government official at the township level.

The DMA and TMAC together (often called the “municipal group”) are the only body at the local level that generates its own income and can decide (with approval from the State Minister of Development Affairs) how to use that income to implement its functions. The TMAC and DMA draft an annual plan based on the estimated revenues for the coming financial year that is submitted to the State Ministry for approval but that differs a lot per township, based on locally developed priorities and revenues. Before 2013, the Ministry of Development Affairs stipulated what percentage of the revenues should be spent on each of its functions (like 30 percent on roads, 30 percent on water supply, 5 percent on street lighting, etc.). With the adoption of the new Law this condition has been lifted and each DMA/TMAC can decide on how to spend its money according to its own priorities. The only restriction is that the operational costs of the DMA (including staff salaries) should not exceed 35 percent of the planned expenditures. Once approval is obtained, the DMA and TMAC are in charge of implementing all activities, making regular adjustments throughout the year based on the actual revenues received. For temporary cash flow shortages the Ministry is able to assist with low interest short term loans. For bigger investments that surpass the capacity of the TMAC/DMA it can either request via its MPs or the State Ministry an extra contribution from government (supplementary budget) or a low interest loan from the Union Government for which the Ministry acts as guarantor.

Regarding the implementation of works, the TMAC/DMA can implement or outsource activities that have a total estimated costs of less than 5 million kyat (5,000 USD), while they have to tender for any project above that amount. The tender is implemented at the Township level (TMAC + an engineer are the tender board), but the conclusions of the tender need to be endorsed by the State Minister of Development Affairs before the contract can be awarded.

Differences exist in the way in which the TMACs operate in the four townships of Rakhine with some playing a more executive role and others a more advisory role

Similar to the differences in functioning of the TDSCs across the four townships in Rakhine included in this survey, there seems to be big differences in the way in which the TMACs operate in the four townships. In Thandwe, the TMAC plays a more executive role, making the important decisions regarding planning, budget allocations and contract awarding that the DMA subsequently implements. It meets once a week and is well informed. It plays an active role in identifying projects to be implemented by the DMA through consultations with the WDSCs and WAs and it decides which of these projects are included in the Annual Plan of the DMA. As a result, there is good cooperation between the DMA and the TMAC and they are both clear about their role and functions. In the other three townships, and especially in Kyauktaw, the TMAC seems to play a more advisory role to the DMA. The TMAC meets only once a month and the DMA through its executive officer identifies projects, drafts an annual plan for approval by the TMAC and dominates, according to its people representatives, the tendering process. The TMAC is not involved in the identification of CDF projects in the wards either, which is done by the TDSC and the elected Hluttaw members only. One TMAC member in Gwa illustrated this different relationship by stating that: *“the TMAC is accountable to the Executive Officer of the DMA and not to the people”*. As a result, again according to the people representatives, not much has changed in the way the DMA operates and “old” practices still continue. Since both ways of operating fall within the framework of the Municipal Law, it would be good if the State Government would provide more clarity and guidelines as to what role it wants the TMAC to play in municipal affairs.

Table 17 below presents an overview of the municipal revenues over the last two financial years for the four townships.

	Total in million kyat 2012/13	Per capita in kyat 2012/13	Total in million kyat 2013/14	Per capita in kyat 2013/14
Gwa	43	741	42	724
Rathedaung	93	571	106	650
Kyauktaw	179	833	261	1,213
Thandwe	2	16	3	23

Table 17: Municipal revenues for the years 2012/13 and 2013/14 for the four townships (in million kyat) and per capita in kyat.

Source: Rakhine State GAD and Population and Housing Census of Myanmar, 2014; provisional results. Note populations per township are assumed to be the same for 2012/13 and 2013/14 using the 2014 Census figures.

Except in Gwa, the total municipal revenue has increased in the townships between 2012/13 and 2013/14. Per capita revenues differ a lot per municipality. It is not clear whether this is related to the revenue collecting efforts of the TMAC/DMA or the revenue potential of each township or both.

Knowing the estimated budget for the next year in advance makes planning and project selection at the municipal level much easier and realistic. In Thandwe, the TMAC can meet with WDSCs and WAs and negotiate priorities and come to agreements at their level. This makes the TMAC quite powerful but also enhance the decision-making process since people know that at least some of the projects they propose for their ward will indeed be implemented during the next financial year. In this way, consultation at the ward level shift more towards real participation and will motivate WDSC members to attend meetings and present and defend their case for a certain project. In addition giving people a say in the selection of activities and implementing them accordingly will in the end improve tax compliance as well, since people start to understand the relationship between paying taxes/fees and the services they receive in return. Since approval procedures are much shorter than in sector ministries, projects can be implemented much faster which also has a positive impact on the confidence people have in the newly established structures.

Regarding the election process of the people representatives on the TMAC, most representatives interviewed stressed that they would prefer a direct election system in which all the people are involved (like it should be for the VTA/WA election) as this would improve the legitimacy of the TMAC as a whole and their position as well in the eyes of the people and therefore their supervising authority over government staff as well. In addition, direct elections would also reduce the risk of elite capture, which certainly exists at the moment. People representatives of the various TMACs belong in practice to the local elite and are very close to government.

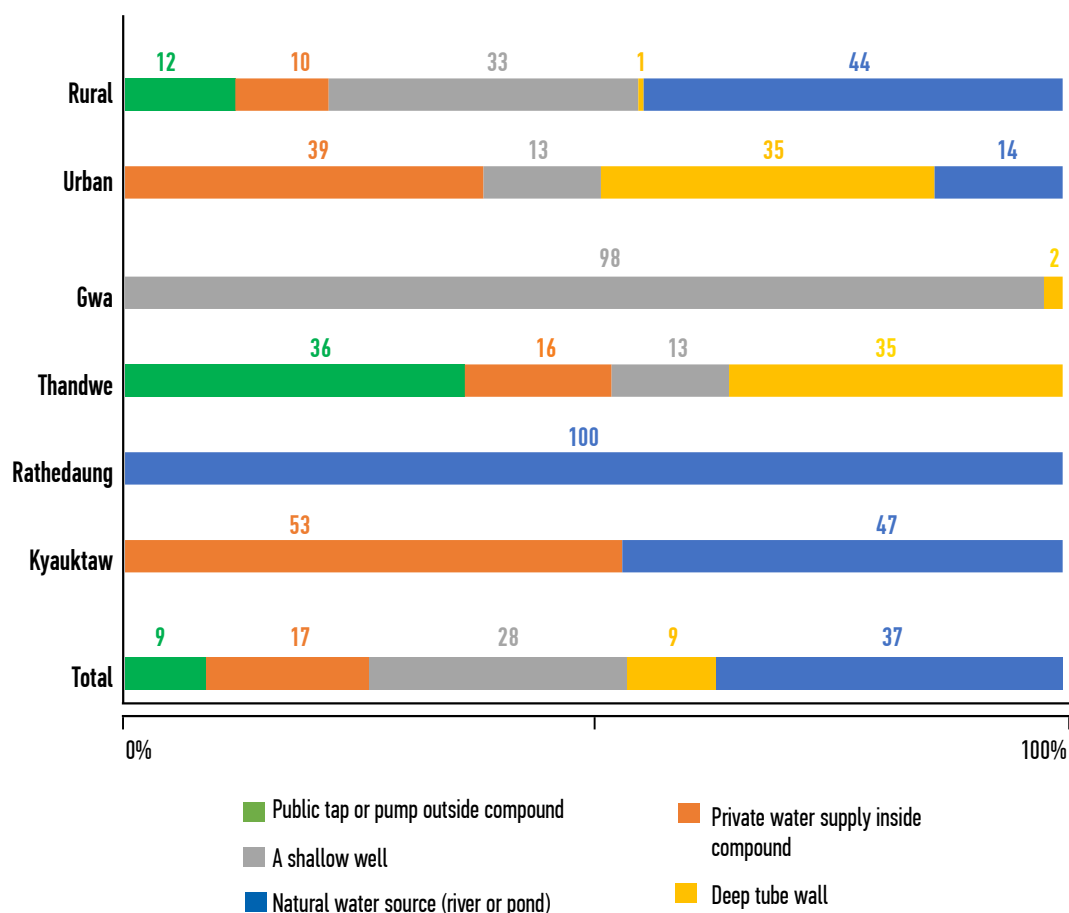
Since the TMACs are only recently established and they are still finding their actual mode of operation, it will be worthwhile to monitor their performance closely over the coming years, especially from the perspective of whether their executive and oversight function can remain combined or whether it should be split, given the oversight function to a separate body at the municipal level. In addition, certain aspects of the way in which the TMACs operates (having a legal framework, executive responsibilities, DMA partly accountable to TMAC) could be considered for the rural areas and the operations of the TDSCs and DRD as well.

People's perspectives on safe drinking water provision

Thirty-seven percent of the respondents interviewed said that they got their water from an open water source (river or pond) 28 percent from a shallow well, 17 percent from a private water connection and 9 percent from a deep tube well and 9 percent from a public tap or pump (see Figure 42).

Figure 42: Main source of drinking water of households in the four townships

Source: UNDP Local Governance Mapping, Rakhine State, August- December 2014 n= 384.



These overall figures don't say much however as the differences between the townships are huge. In Rathedaung, 100 percent of the respondents got their water from an open water source, while in Gwa 98 percent got their water from a shallow well. In Kyauktaw more than half of the respondents interviewed got their water from a private water connection. Note that since differences between VT can be large as well the above results are not necessarily representative for the whole township. They do however illustrate that in order to improve access to drinking water, tailor made solutions are required for each township (or even Village Tract or Ward).

Regarding the quality of their drinking water, 50 percent of the respondents mentioned that it was good, 36 percent mentioned that it was acceptable and the remaining 14 percent found the quality poor (see Figure 43). Again, the differences between the four townships are substantial.

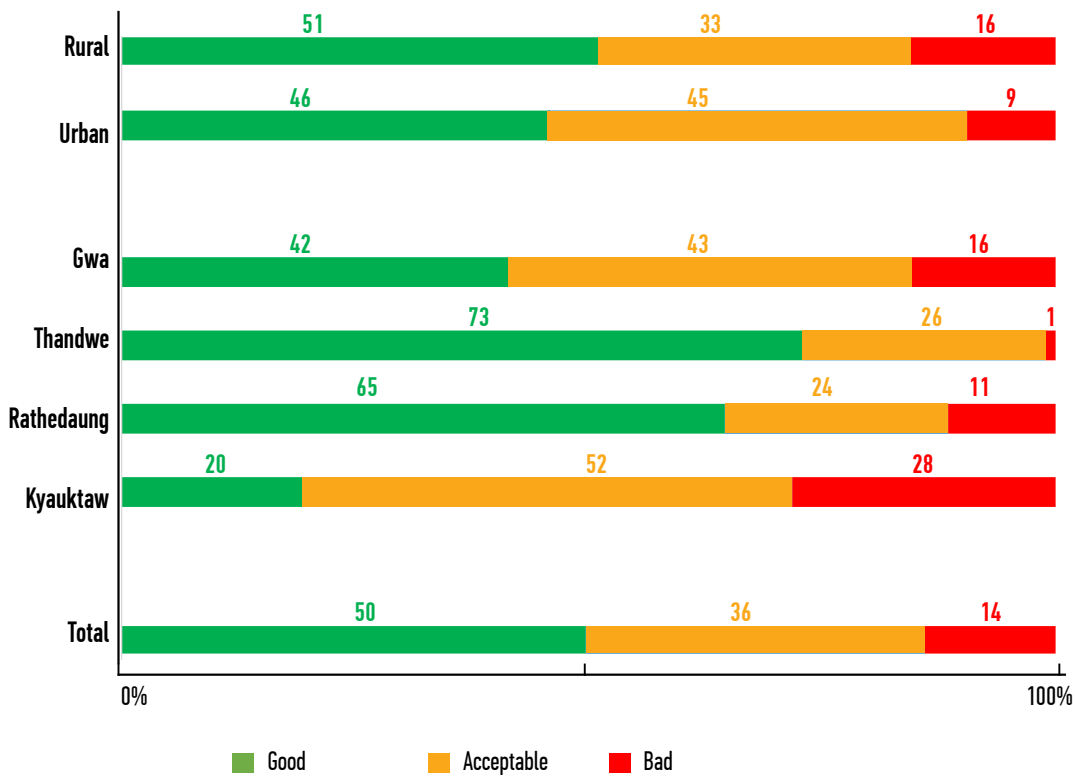


Figure 43: Quality of drinking water from the main source.

Source: UNDP Local Governance Mapping, Rakhine State, August– December 2014 n = 384.

Regarding access to safe drinking water, the respondents were asked whether the drinking water situation has improved in their village tract or ward over the last three years (see Figure 44).

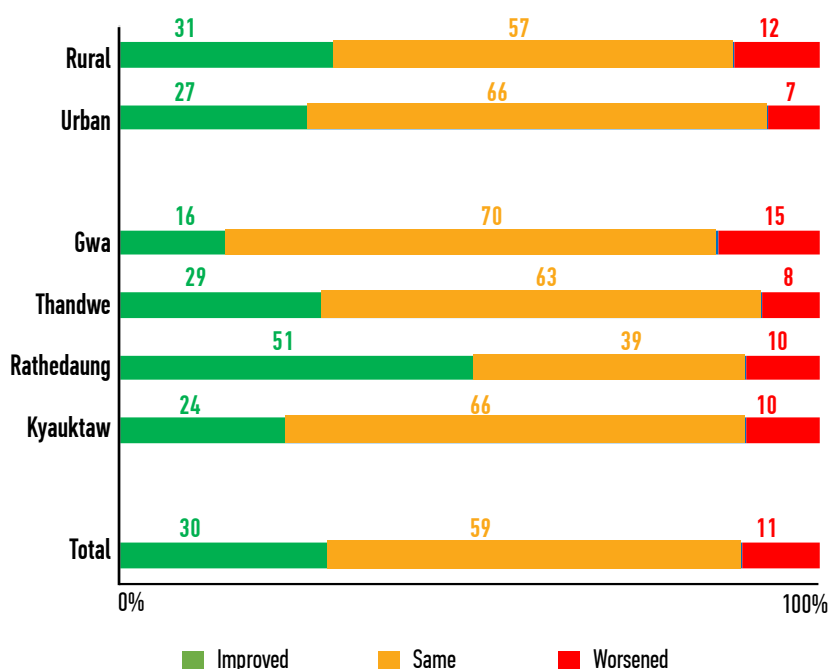


Figure 44: Perceived changes in the provision of clean drinking water in the village tract or ward over the last three years.⁵⁴

Source: UNDP Local Governance Mapping, Rakhine State, August – December 2014 n = 384

Thirty percent of the respondents mentioned that the provision of safe drinking water has improved over the last few years, which is much lower than the figures for health care and primary education and lower than in other States and Regions. 59 percent mentioned that they had experienced not much of a change, while 11 percent mentioned that the situation has worsened.

54. More than one answer was possible.

The main reasons mentioned by the respondents who noticed an improvement in water provision (118) were:

- The water source is nearer (62 percent).
- The water source is protected/cleaner (36 percent).
- New taps or pumps have been installed (25 percent).

For the few people who mentioned that the water situation had worsened the main reasons cited were :

- The water source got polluted (48 percent),
- An increase in distance to their water source (36 percent),
- More people use the same water source (26 percent),
- Poor maintenance of tap, pump, well, etc. (16 percent)

Only a few respondents (only 13 percent) had ever been involved in a meeting with government staff about the improvement of water provision in their respective village tract or ward. Most of the people who were involved in such a meeting (33 out of 50) lived in Rathedaung.

Concluding remarks on service delivery

The figures from Rakhine State on health and primary education are encouraging, as they show that both service providers and people perceive improvements at the community level. However, one has to be cautious using these figures as an indication for the actual quality of primary education or primary health care in Rakhine State or in Myanmar at large. Myanmar continues to perform poorly on a number of international rankings both for primary education and health care, particularly when viewed against global standards set through initiatives such as *Education for All*.⁵⁵

4.4 Information, Transparency and Accountability

Transparency of government and accountability of office bearers are critical elements for a well-functioning and sustainable democratic society. While administrative accountability, the answerability to higher levels within the administration, and the related reporting and accounting mechanisms as well as the minimal internal checks and balances are fairly well developed and implemented in Myanmar, they cannot prevent mismanagement or corruption if they are not complemented by effective political and social accountability mechanisms. Despite the adoption of the *Anti-Corruption Law* in August 2013, both the Support Committee members and CSO representatives mentioned that they had not experienced any changes in practice.

Nevertheless, some changes in the interaction between government and people are taking place at the township level and below that contribute to a restoration of basic mutual trust between the people and the state. Some of these processes as they present themselves in Rakhine State are described in the section below.

55. In education, enrolment rates are still low, and completion rates from primary school remain poor. In health, Myanmar has improved on most MDG indicators but still lags behind as compared to other countries in the region (e.g. the 'under-5 child-mortality' rate is 52.3 compared to 28 as average for the region, maternal mortality ratio (per 100,000 live birth) is 200 compared to 150 as average for the South-East Asia Region). Most recent figures (2012) are from the MDG global data base (www.mdgs.un.org/unsd/mdg/Data.aspx) for Myanmar on progress regarding the achievement of the MDGs.

Changes in accountability at the township level

The government institutions at township level (both administration and departments) are an integral part of the State or Union government in Myanmar, and do not form a separate tier of government that is primarily accountable to its own people in that particular area, either directly (social accountability) or indirectly via elected representatives (political accountability).

Formally, there have only been minor changes in the accountability structures at the township level over the last few years. From the beginning of 2014, the TA accounts for the use of the PRF and CDF to the State Chief Minister as these funds fall under the State budget, but his main line of accountability is to the Secretary General of the State GAD via the District Administrators. Secondly, the adoption of the Municipal Affairs Organisation Law by Rakhine State has changed the relationship between the TMAC and the Executive Officer of the DMA (see below).

Informal changes were noted by government staff active at the township level. As a result of the reform process, the relationship between the department at the township level and their counterparts at the State/Union level seems to have changed slightly. Constructive inputs from below are more appreciated and integrated into the planning of the State/Union Ministries, they are more responsive to the needs expressed by the township level staff and more predictable in behaviour, adhering to priorities defined at lower levels.

At the township level and below similar changes are taking place. The VTA/WAs, as elected office-holders responsible for their village tract or ward, the TMAC and the support committees (TDCS and VT/WDSCs) can submit questions to the HoDs or the TA. Here government staff are in general more inclined to listen and explain matters and they increasingly respond to issues raised from “below”.

The State and Union-level Hluttaw members often participate in meetings at the township level (when the Hluttaws are not in session), usually in the combined VTA/WA-TA and advisory committee meetings. However, they have no formal oversight function over the township administration except in the implementation of the recently introduced CDF in which they play an executive and oversight function at the same time. Nevertheless, they play an important role in bringing up issues or needs of the township to the State and Union level, especially lobbying for additional funds that fall outside regular budget lines or ceilings.

The TA's formal role and responsibilities in Rakhine State are not different from that of their counterparts across the country. Primarily, the TA is responsible for leading the GAD to promote peace and security, maintain law and order, assist development and improve livelihoods. Over the last few years a gradual shift in the role of the GAD at the township level in general and that of the TA in particular can be noticed. Next to representing the government at the township level and fulfilling his administrative, oversight and controlling functions, the TA is increasingly expected to play a more developmental and coordinating role, responding to the needs and serving the interests of the township population as well.

These new roles (both developmental and coordination) stretch the capacity of the GAD at the township level (in terms of number of staff, competencies and resources). The TAs in the four townships that were interviewed acknowledged the importance of these extra tasks and of involv-

ing people more actively in governance and service delivery. One of them stated that more than before he sees himself as a facilitator ensuring that the various stakeholders work together for the development of the township.

The new Rakhine State Municipal Law might, if implemented accordingly, create a precedent in establishing new relationships between people and the local administrations. The Law gives the TMAC executive responsibilities and a statutory foundation in State law. The TMAC can, on advice from the Executive Officer of the DMA, determine local taxes and levies. It can also instruct the Executive Officer to carry out certain works, and analyse draft regulations and notifications of the DMA. The Executive Officer remains directly accountable to the Minister of Development Affairs at the State level and the Minister can overrule any decision of the TMAC. As a consequence of this new law, the Executive Officer of the DMA becomes to a certain extent also accountable to the TMAC. Since this law is still fairly new, it will be interesting to see how all parties deal with these rather complicated and multiple accountability lines in practice in future. As was shown in the previous paragraphs, the way in which the law can be interpreted can differ a lot from one township to another, and the actual functioning of the TMAC seems to be subject to the views and abilities of the main actors involved in the process.

Changes in accountability at the village tract or ward level

The *Ward or Village Tract Administration Law* of 2012 is not very clear about the formal accountability of the Ward or Village Tract Administrators. To become a VTA/WA one has to meet certain basic criteria. The VTA/WA is elected from and by the group of 10 household heads (in practice many different election procedures were applied). The TA appoints the VTA/WA, and provides him/her with a monthly subsidy and can assign functions to the VTA/WA. The VTA/WA reports to the TA and in case of misconduct, the TA can dismiss a VTA/WA.

Presidential Notification 27/2013, which instructed all States and Regions to create Ward or Village Tract Development Support Committees, also stipulates that the VT/WDSC has to cooperate with the VTA/WA in performing his/her duties but does not make the VTA/WA accountable to the Committee. Implicitly, it does however add the task of village tract or ward representation to that of the VTA as it states under 7c: “To submit matters which cannot be done at the ward or village level to the meeting of the township management committee”. It also provides for a direct line of communication from the VT/WDSCs to the TMC and the TDSCs which has however hardly become operational in practice.

The 2012 Law assigned 32 duties to the VTA/WA of which 22 are directly related to maintaining law and order, eight functions are more general administration functions and only two are a more developmental in nature:

- 13d: Helping and assisting in implementing the works relating to the rural development and poverty reduction.
- 13dd: Coordinating and assisting the functions and duties of department organization at the level of ward or village tract.

In Rakhine State, this formal mandate of the VTA/WA, which originally dates back more than a century, may be significantly different from the role the VTAs and WAs play in practice and how members of the community perceive this function. Partly due to the emergence of the various development funds that require the involvement of communities, in Rakhine State the VTA/WA has

in practice become more of an “elected representative” of the village tract or ward, acting as the intermediate between the village tract or ward and the township (informing community members on the one hand and bringing relevant village tract or ward problems or needs to the attention of the TA) next to his/her formal role as mentioned in the 2012 Law being in charge of maintaining law and order, while also playing an important role in mediation and settling disputes which could be seen as an extension of the maintaining law and order functions (see Figure 45).

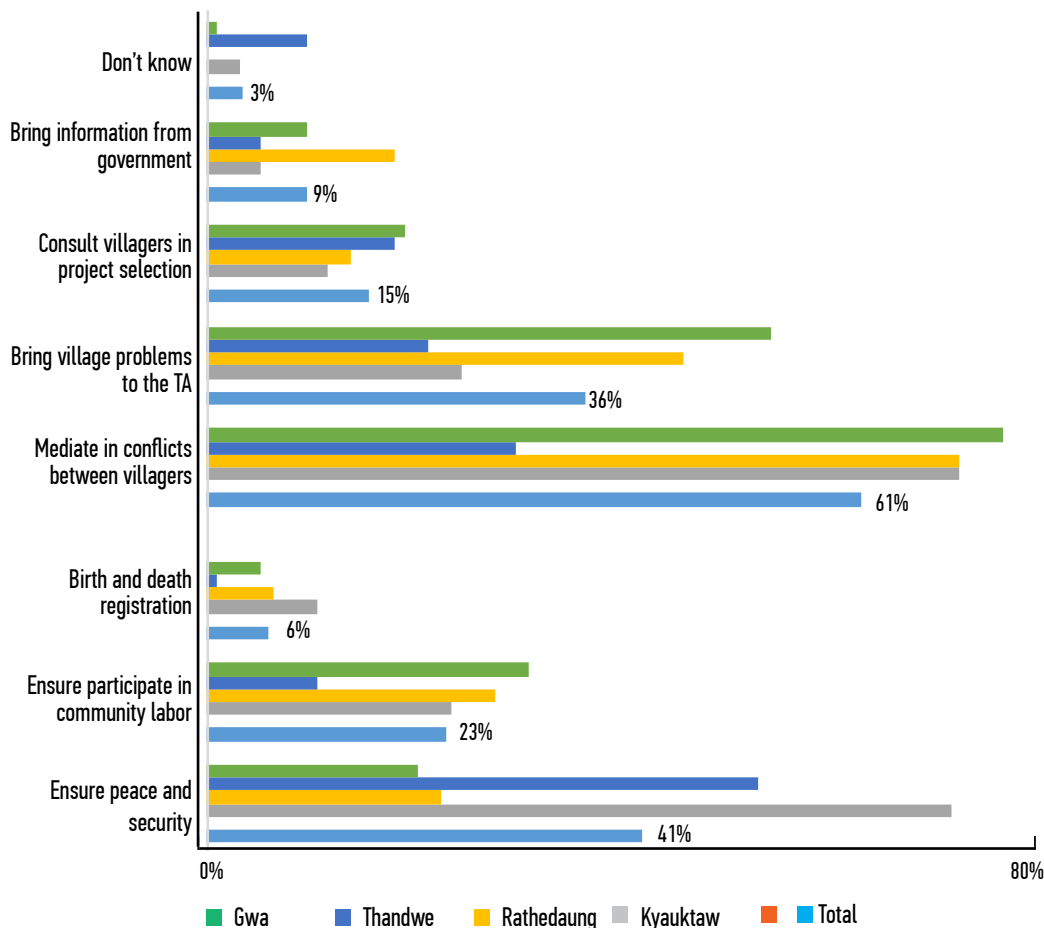


Figure 45: Functions of the VTA/WA according to the respondents.

Source: Local Governance Mapping Rakhine State December 2014. n = 384. More than one answer was possible.

Note: The bottom three functions are part of the formal functions of the VTA/WA, while the top four functions are the informal functions.

“Ensuring peace and security” (one of the legal functions) and “mediating conflicts between villagers” (one of the functions not mentioned in the law) were mentioned as the most important functions by 41 percent and 61 percent of the respondents, followed by “bringing village problems to the TA” (also not mentioned in the law) by 36 percent. Female and male respondents provided similar answers, while older people stressed the formal functioning more. In Kyauktaw the function of “enduring peace and security” was mentioned most often (by 70 percent of the respondents).

The VTA/WAs of the eight village tracts and wards interviewed also emphasized their bridging role. “Mediation in conflicts or resolving problems” and “Maintaining peace and security” were mentioned by most VTA/WAs as an important function followed by “bringing the needs of the people in the village tract or ward to the attention of the government at township level” and “con-

Elected VTAs do feel accountable to their people and at least about one-third people are beginning to note differences in socio-economic development after the VTAs have been elected

sulting villagers about development projects”. Also during the Community Dialogue sessions in which the VTA/WAs participated they showed that they felt to be the link between their village tracts or wards and the township and that they are at least informally accountable to the people in their community (see also annex 2 with examples of village tract ward action plans, which often include as an important component the VTA/WA reporting the problem to the TA). On the one hand, VTA/WAs are integrated into the government machinery (since they report to the TA, receive instructions from the TA, and are remunerated by the GAD) while on the other hand they are elected by, feel part of and responsible for the wellbeing of the community. The VTA/WAs are therefore often caught between the genuine demands and needs of their communities that they bring to the attention of the government at township level and the limited ability of the township government to address all issues at the same time, which is often blamed on the VTA/WA by community.

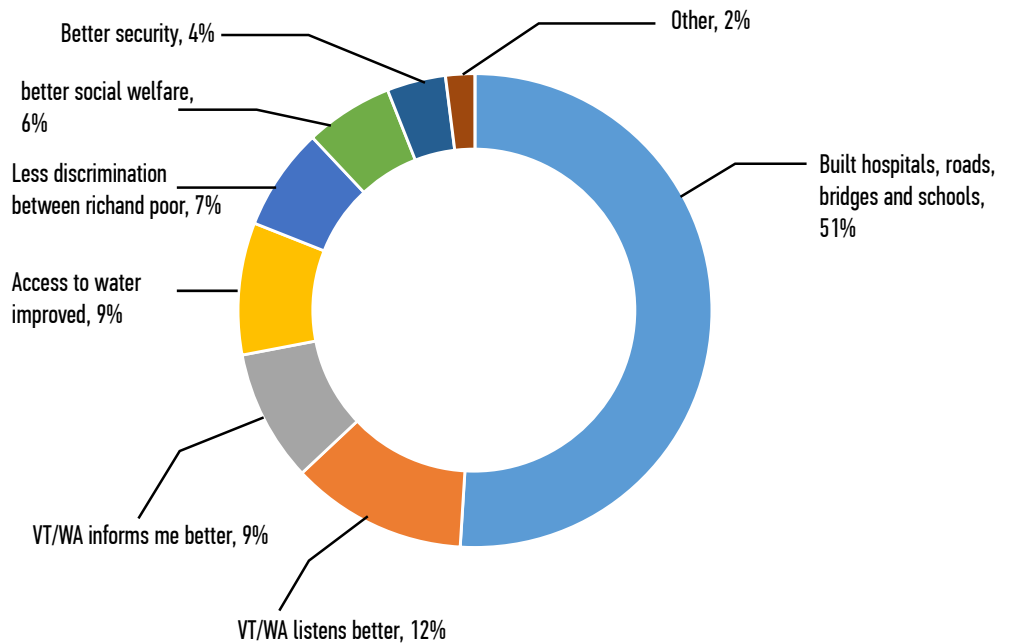
From the interviews that were held with eight VTA/WAs as well as the four focal group discussions in which another 20 VTA/WAs participated it became clear that since they are now elected by the 10 household heads from among their group, most of them do feel (more) accountable to their community.

The respondents were divided over the question whether or not it made a difference that the VTA/WAs were directly or indirectly elected. Only 28 percent noticed a difference, while 63 percent noticed no difference.

The 119 respondents who did mention that they had noticed a difference (were asked to mention what had changed (see Figure 46).

Figure 46: Difference in in VTA/WA behaviour or situation in the village tract or ward after the VTA/WA was elected

Source: UNDP Local Governance Mapping, Rakhine State, December 2014. n= 119



One should note that most of the arguments that were mentioned were not so much related to the fact that the VTA/WA was now elected but more to the extra funds available for development activities in general.

Grievance redressal

The number of complaints and requests for conflict resolution by people has increased in the four townships in Rakhine State. This may indicate an increased confidence from the public that there will be no reprisals in a new environment of openness and an expectation that their grievances are treated seriously and fairly.

The most common complaints are about land and agriculture-related issues. Land conflicts between tenants and absentee land lords are common as well as new or old cases of land grabbing. Others are related to social issues and personal matters linked to resources like inheritance disputes. Some complaints are resolved and dealt with at the village level by VTAs. In case a complaint is beyond their capacity, they refer it to the township GAD or to the police and courts for further action.

There are mainly three kinds of land disputes: inheritance, rent and ownership disputes. Since the new Land Law has become effective in 2012, the value of agricultural land has increased and therefore the number of disputes as well. Absentee land owners have started to increase the rent they are asking from their tenants, while it has become more important to prove land ownership to use it as a mortgage for a loan. As a result of the increased number of land registration requests, the number of disputes has increased as well.

For land holding disputes, the initial step is to file a case at Village Land Management Committee. The village committee consists of a chairperson (farmer representative), the Village Administrative clerk (GAD), the VTA and 5-6 representatives from the people. They review the cases that are brought to them and take decisions. If a party is not satisfied, they can appeal to the Township Land Department, which will review the case in the Township Farmland Management Committee. They review the track record to ascertain whether the land under dispute is registered or not. If it is registered, they resolve the dispute. If the piece of land is not registered, the parties have to start the process afresh. If a person is still not satisfied with the decision, one has a right to appeal to the State level for the final resolution within 30 days.

For most people (77%), the VTA/WA is the first person to approach to resolve civil cases like quarrels, domestic issues or land disputes (see Figure 47).

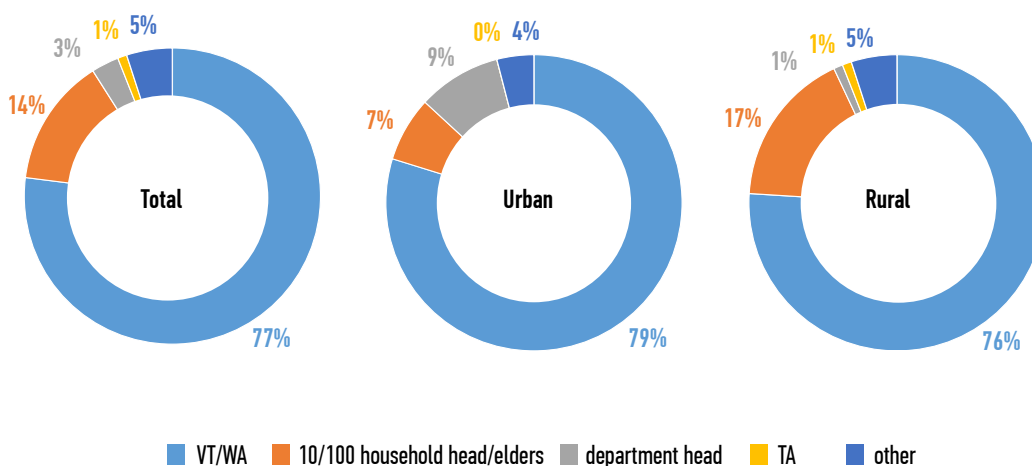


Figure 47: First person to approach to resolve a possible dispute

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014.

Forty-three percent of the respondents said they would turn to the TA in case they wanted to appeal against a decision of the VTA/WA. The fact that more complaints are being channelled to the GAD justifies more in-depth research as part of an effort to further improve the complaint handling mechanisms of the government. Some questions that emerged but could not be tackled by the mapping team were: Why are other conflict handling mechanisms like the regular court system not used more often by the people? Are they not trusted or are they not functioning adequately? Are most of these grievances/conflicts between the people and government or between people themselves? Are these conflicts the result of the implementation of “new” regulations and government actions, or do people feel more confident to bring up issues of land grabbing that happened in the past without fear of reprisal, indicating an improvement in both civic awareness about their rights and confidence in the fairness of the present mechanisms and of receiving a fair treatment by government?

Trust in Government

At the end of each Community Dialogue session a facilitated discussion was held with all participants about the level of trust people have in their Government. “Trust” was defined as: “Is your Government reliable in terms of actually doing what it says it will do, is it respectful to its people and are you confident that it acts with the interests of the people in mind?” If trust levels are high, people will see their state and government as legitimate institutions and will respect its rules and regulations even if they don’t benefit from them individually (like taxation) as long as they believe that their society as a whole benefits from these rules and regulations.

While it is difficult to quantify the level of trust one has in your government, the facilitators started by asking for factors that either influence the trust people have in their government whether positively or negatively. Some of these factors from all the Community Dialogues are listed in table 18.

Table 18: Examples of Government activities or behaviour that influence the level of trust people have in their Government either positively or negatively as mentioned during the eight Community Dialogue sessions.

Source: UNDP Local Governance Mapping, Rakhine State, August–December 2014.

Government activities or behavior that influence the level of trust positively	Government activities or behavior that influence the level of trust negatively
<ul style="list-style-type: none"> • When there were religious conflicts in other places, 100 HH representative coordinated with the local police force to control the area to be not affected by the conflict • Government made a promise to the village about a sub-primary school and it really happened • Government said that they will provide water and they really did • The funds are properly passed to the committee. • SIM cards are being given out systematically. • There wasn't any committee before but now there are • There is less corruption than before • More developments in the community • Roads are being repaired so easier to travel than before. • More phones available now. • Free medicines for healthcare. • More school buildings 	<ul style="list-style-type: none"> • Health clinic was promised but not built yet • National ID card registration was planned to be done at the village but it was not done • Farmers were promised to be given cattle but they never received the cattle • Government promised the Muslims that they will be given citizenship before giving votes but they were never given citizenship as promised • Muslims are not allowed to travel beyond the township so don't have trust in government • Parents could not register their new born child • Government took over land without buying from the owners and that why there are land rights issues. • Fences at Station hospital were promised, but no fences yet. • Solar panels were supposed to be sold by instalment but we didn't get any. • There is also corruption. • The government promised to provide security forces for the village if there is a religious conflict but no security force was provided until now

It is interesting to see that both more tangible development efforts but also less tangible governance issues (corruption, openness, etc.) were mentioned. In all nine communities the participants raised both positive and negative factors and good discussions were held between government staff and people, sometimes resulting in consensus and sometimes in “agreeing to disagree”.

Looking at the trends in “level of trust” within various government institutions, the following picture emerged. Note that 17 “scores” were recorded, two for each community, one from government staff and one from community members.

	Improved	More or less the same	Deteriorated	Don't know
VTA/WA	12	4	1	
TA and township departments	10	6	1	
State Government	12	3	1	1
Union Government	10	4	2	1
Courts	3	10	4	
Police	9	4	3	1

Table 19: Changes in level of trust over the last three years in various government institutions as recorded during the six Community Dialogues.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014.

Trust in almost all government institutions has improved, most in the VTA/WA and the State government and the least in the court, which stayed overall more or less the same according to the participants. Reasons provided for the improvement in trust in the VTA/WA were either related to the fact that they listened to people’s needs, organised meetings, brought their problems to the TA, etc. or to the development activities that have been implemented collectively by various government institutions (like new school buildings or roads), but which people tend to attribute to the VTA/WA.

The most important improvements noted for the TA and the State and Union level Government were more or less similar and relate to increased responsiveness to the needs of the people on the one hand, but not doing enough yet on the other hand.

Regarding the trust in the judicial system, the negative sentiments and perceptions dominated the discussions. Some examples that were provided are:

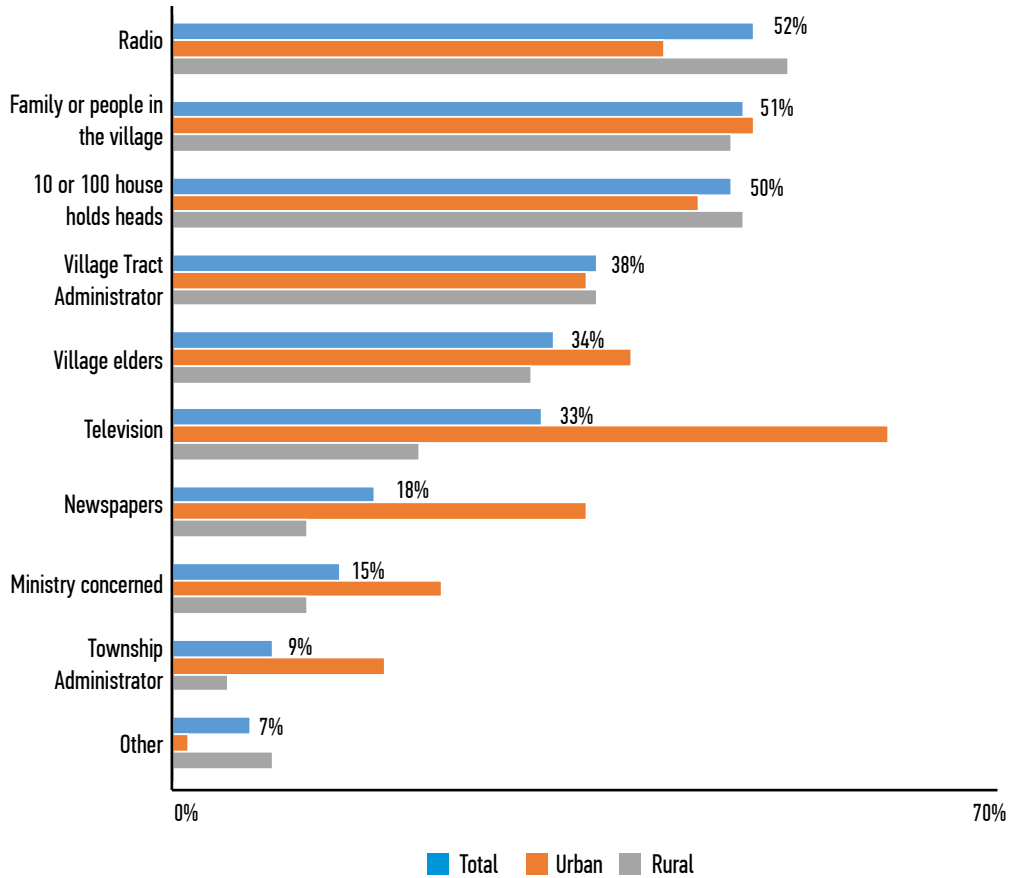
- Guilty people were not sentenced to jail and innocent people were sentenced to jail
- There is still corruption in the court,
- It takes too long to pass a verdict,
- Courts favour the rich people

4.4.2 Transparency and access to information

Easy access to information by the people is a prerequisite for a government to become more transparent and accountable to the people. In Rakhine State, the traditional hierarchical channels of official information provision (the 10/100 household heads, the Village Elders and Respected People and the VTA/WA) play an important role in the information flow from government to people as is shown below in figure 48. Television and newspapers play a more important role in the urban areas, while in the rural areas radio, face to face contact with 10/100 household heads and other people in the village tract play a more prominent role.

Figure 48: Ways in which respondents are informed about new laws or directives from government in urban and rural areas.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n = 384. Note that more than one answer was possible.

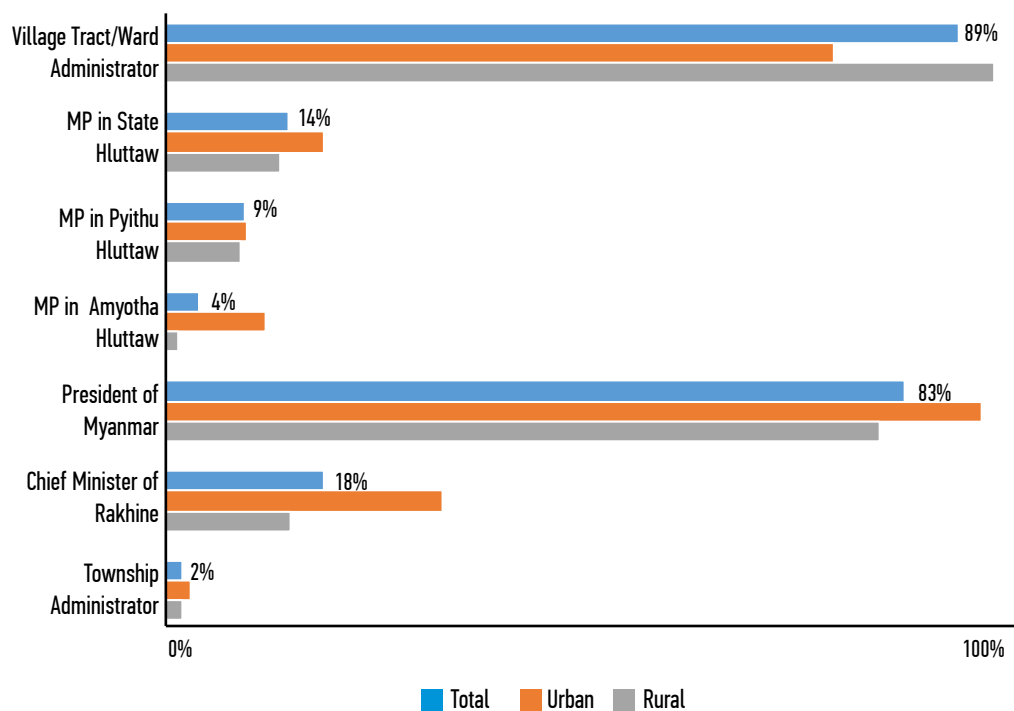


The same pattern emerged regarding the way in which respondents were informed about the national elections in 2010. Sixty-seven percent received information via the 10/100 household heads, 59 percent via the VTA/WA, 61 percent via friends or relatives, and 56 percent via the radio.

In order to get an idea about the familiarity of respondents with government, they were also asked to mention the name their VTA/WA, the name of the President of Myanmar, and the name of their elected representative in the StateHluttaw (see Figure 49).

Figure 49: Knowledge of the names of various government representatives.

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014 n= 384.



Eighty-three percent of all respondents knew the name of the President of Myanmar, and 89 percent knew the name of their VTA/WA, while knowledge about their elected representatives at State and Union level and of important government officials at the State or Township level was very limited. Male respondents had a slightly better knowledge of the names of these government representatives than female respondents.

People's knowledge of what is happening in government institutions and processes at the township level is very limited. As mentioned earlier, only 3 percent of the respondents had heard about the newly established support committee at the township level (TDSC) or the municipal affairs committee (TMAC). If these committees are intended to represent the interests of (groups of) people and the government wants to use them in order to involve people more actively in planning and decision-making, and if these committees themselves are to become more accountable to the communities they supposedly serve, there is clearly a need to raise more awareness about their existence, and their role and functions, as well as their actual discussions and deliberations.

Surprisingly, only 21 percent of the respondents were aware of the existence of a Village Tract or Ward Development Support Committee (VT/WDSC) in their community. Especially among the younger people (between 18 and 30) this level of knowledge was low (only 8 percent knew the VT/WDSC). In addition, only 26 percent of the respondents had voted or were involved in the election of the VT/WDSC members. It could be that since these committees are still rather new, people might know that there is a committee in their community, but that they are not aware of its new name yet.

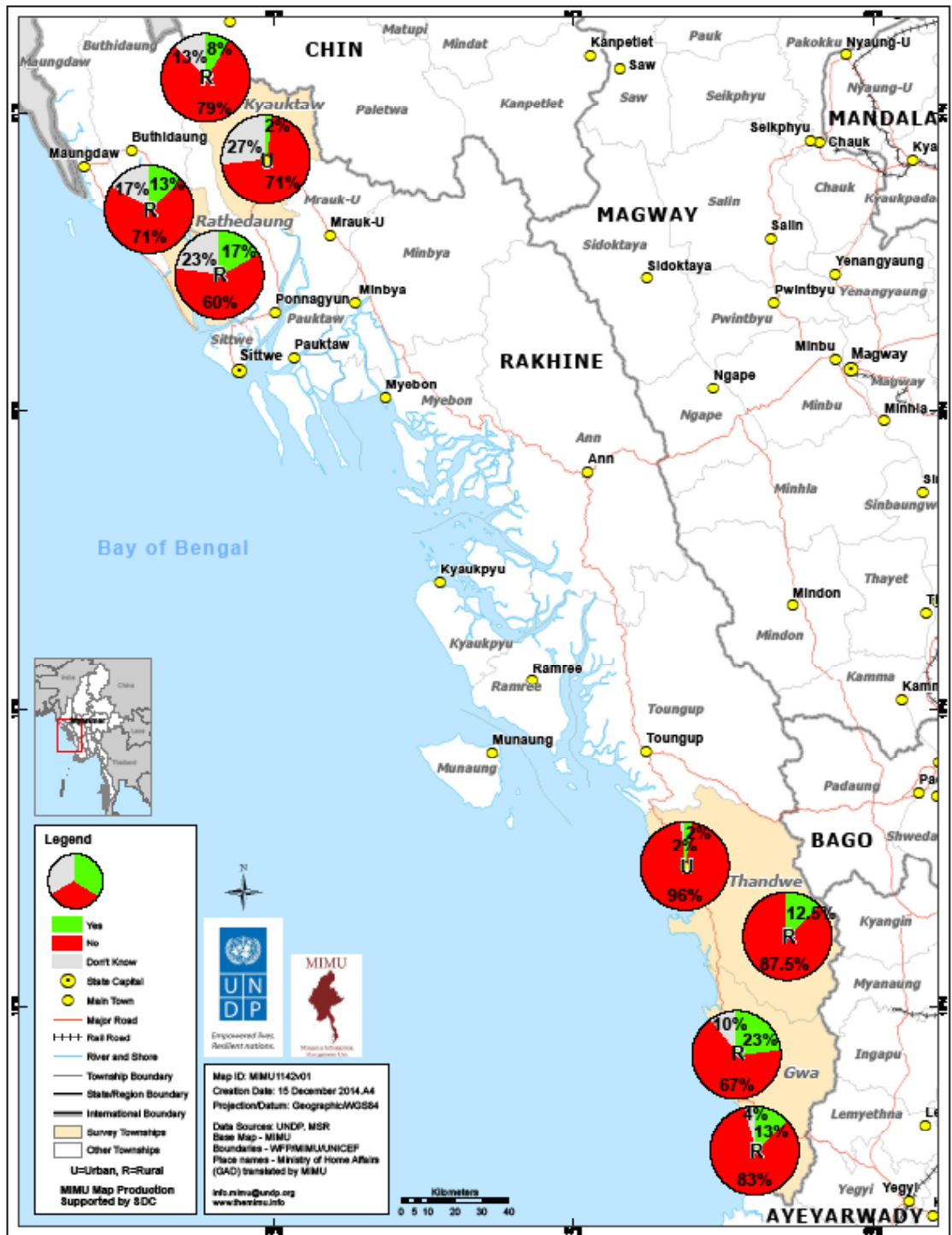
All VTAs/WAs that were interviewed (either individually or as a group) were satisfied about the amount and quality of information they received from the TA and the various departments. They are in general sufficiently informed in advance about projects that are planned for their Village Tract or Ward. For bigger infrastructural projects however they often don't know who the contractor is or what the building specifications are, while they are on the other hand obliged to report on their progress during the VTA/WA-TDSC-TMAC-TA combined meetings.

The most important means of receiving information from the township level government staff is either directly from the TA, which is now much easier as every VTA/WA has a mobile phone, or by sharing information during the combined VTA/WA-TDSC-TMAC-TA meetings.

Government staff at the township level as well as the VTAs/WAs were of the opinion that they are informing people well enough about important government directives or news and about planned projects in their villages, either through notice boards and or via the VTA/WA or VT/WDSC members. This however stands in stark contrast with the views of the people. 77 percent of the people interviewed mentioned that the information provision by the township government about new projects to be implemented in the village tract or ward was not enough (see Figure 50).

Figure 50: Level of satisfaction with information provision by township government.

Source: UNDP Local Governance Mapping, Rakhine State, December 2014.
n = 384



These perceptions of individual respondents were confirmed during the CD meetings by both people as well as by the service providers in these communities. Both positive and negative examples were shared (see box 8 and 9). Information from the CD sessions suggests that a lot depends on the ability, willingness and active attitude of the VTA/WA to share information either directly with people and/or via the 10/100 household heads. CSOs and NGOs in the four townships also acknowledged that there were improvements in information provision by government, but that there is still a lot of room to improve the transparency of decision-making in government.

In order to understand and if possible overcome these bottlenecks, these findings need to be placed in the historical context of Myanmar. Government and administrative information has not been shared freely with the public in the recent past, and focused more on informing people about their duties than on their rights. Only very recently has there been a certain break with the past as evidenced by high-profile examples such as the unprecedented publication of the national 2012-13 budget.⁵⁶

Box 8: Examples of good information supply as mentioned by the communities during the Community Dialogues

Pyi Taw Thar ward Kyauktaw	<ul style="list-style-type: none"> • Meeting would be announced via PA system or on notice board in front of the office. • The advantages and disadvantages of constructing roads would be also informed to the people.
TinMa VT Kyauktaw	<ul style="list-style-type: none"> • News or information would be received by village administrator via PA system. • Will also announce for meetings • There would also be information shared and warned for natural disasters.

Source: UNDP, Local Governance Mapping, Rakhine State, December 2014

Box 9: Examples of poor information supply as mentioned by the communities during the Community Dialogues

MaKyayNgu VT Gwa	<ul style="list-style-type: none"> • Don't share all the information with the people. When the school was built, the people don't know how it was going to be built, when it would complete and how much was the budget.
SutTwar VT Gwa	<ul style="list-style-type: none"> • Don't know the actual cost when repairing the roads. No information is being shared. • Only to 10 and 100 household heads are invited to meetings and not the community. • No one informed the people about the construction of roads.

Source: UNDP, Local Governance Mapping, Rakhine State, December 2014

In the past, Government staff were not required to explain or justify decisions made by government to the public, while government staff at the township level were themselves often not informed by their superiors about departmental plans. They were neither provided with an explanation for decisions taken. In practice this attitude still persists which “disempowers” lower ranked

56. “Sub-national Budgeting in Myanmar.” Soe Nandar Linn, MDRI-CESD, September 2012.

government staff and inhibits them to become more proactive. It still depends a lot on the discretion and attitude of the TA and other senior officials as to what type of information is shared with the population of the township and in what way such information is communicated. People on the other hand were not used to ask for information and explanations and are still reluctant to do so at present. These general trends were confirmed by the situation observed in the four selected townships in Rakhine State.

Within the present organisational culture in which lower level staff generally do not take action unless they are told to do so, it would perhaps be best if the Rakhine State government would take the initiative to draft an information and communication policy in which it clearly described what type of information is available to people if they ask for it and what type of information should be made available by the township administration and departments and in what way that information should be made available.

4.4.3 Civil society's role in enhancing transparency and accountability

Ideally, being independent from government and working closely with the people, civil society, including the media, can be expected to play an important role in improving the quality of governance. Media and civil society organizations can play this role if they can operate freely and without fear and have the capacity and ability to monitor government's performance. In practice, this idea of civil society can be hard to find, in particular in Myanmar where democratic space has been extremely narrow in the past and government did not welcome any dissent or criticism.

Similar to government, most CSOs are still at the beginning of a transformation process and in general adopt a wait-and-see attitude. The size and outreach of civil society organisations (CSOs) operating at the township level in Rakhine State are still limited while the numbers are slowly increasing. Most organisations are active in health or education, free funeral services, youth activities or providing direct support to people in need. In character they are better described as community-based organisations (CBOs) than as well-organised non-governmental organisations (NGOs). Most are volunteer organisations receiving donations from the public while only a few receive funds and support from (I)NGOs or donors. Even though their outreach is limited, it became clear from the interviews that their work is appreciated both by committee members and government staff. In addition there are branch organisations of the government related associations like the Mother and Child Welfare Organisation, the Nurse Association, etc. So far they have not been mapped systematically, partly because most of them are rather hesitant to provide such information at this stage. As a result, there is not much information available on their membership, their outreach, their organisation, their funding sources, etc.

While in general CSOs have more space to operate and are more appreciated by the government for the work they are doing to improve the welfare of the people, it seems that the way this works out in practice in each township depends a lot on the personalities of the main players on both government and CSO side as well as on the way CSOs have positioned themselves in the local community. Some are more positive and cooperative towards government while others retain a more critical position and see the recent changes in governance more as window dressing than a more structural start of a democratic turn around.



5. Conclusions

Any development in improved service delivery and governance in Rakhine State is overshadowed by the ongoing ethnic/religious conflict across the State. This conflict is partly a governance issue as well, but is far too complex to resolve with the regular governance mechanisms available and under development at the township. Of course, equal access to basic social services, fair complaint and conflict resolution mechanisms (to resolve minor issues and not let them escalate as before), improving information supply and active involvement of people's representatives in representative bodies as well as creating a sphere of openness and willingness to enter into dialogue, are all important and will contribute to resolving existing frictions between various ethnic/religious groups. Given the long history, the scale, intensity and complexity of these problems across Rakhine State, more structural interventions are required, which go beyond the objective and mandate of this local governance mapping.

The mapping found examples of the latent conflict of unfulfilled promises and of unequal access to social services as well as underrepresentation of minority groups on the newly established consultation and management committees. On the other hand both the individual interviews as well as the results from Community Dialogues indicate that the feeling of safety and security at the community level has in general improved over the last three years. 86 percent of the respondents (also from the minority groups, although to a lesser extent) mentioned that the safety and security situation in their village tract or ward has improved. This was mainly due however to improved law enforcement and an increase of armed forces in their area and not so much because the underlying causes of the conflict have been resolved. In addition, there were also examples at the community level of people acknowledging the need to respect each other and enter into constructive dialogue to resolve issues, breaking through existing prejudices on both sides. Much more of this important ground work at the community level is necessary in order to build a solid foundation for a higher level mediation and more structural conflict resolution effort.

Government operations, including all development-related activities implemented by the government in Rakhine State as well as the township-level governance reforms, are carefully balanced against their potential impact on the peace and security situation in the State. This has resulted in the State Government at all levels being rather cautious in relaxing its control and in a relatively slow pace of introducing the reforms in Rakhine if compared to other States and Regions in Myanmar.

Over the last year three years and in particular during the last one and a half year, after the instalment of the TMAC and TDSC, the split between DRD and DMA and the extra resources that have become available for service delivery at the community level, the governance situation in Rakhine State in general and in Gwa, Rathedaung, Thandwe and Kyauktaw townships in particular is gradually improving according to the various stakeholders interviewed. In addition, although formal structures and procedures within the line ministries haven't changed much, views from lower level government staff are more taken into account than before in both planning and decision making about budget and staff allocation. Nevertheless, transparent criteria for resources allocations are not existing, or at least not known to government staff at the lower level, and justifications for such decisions are rarely provided to the implementing staff. This makes it difficult for them to explain to their colleagues at the township level, to the committee members and the public at large why certain proposals were approved and others not.

The findings also show however that in order to reach the ultimate objectives of these reforms: improved service delivery, clean government and people-centred planning, these new institutional arrangements are only the first important steps in a reform process and need to be complemented and followed up with more systemic changes in structures, attitudes and relationships that will require a more concerted and comprehensive approach to (local) governance reform from all levels in government.

The newly established TDSCs in the four townships of Rakhine have been established in line with the instructions of the Presidential Notification 27/2013, and are becoming active in their role in the identification and prioritisation of projects for the various development funds. At the same time, the TAs indicated a perceived change in their roles from independently taking some of the decisions to being consulting now with the TDSC and the TMAC. This change was being viewed positively as people and other interest groups can participate through these committees. The selection process and the role of the TDSC can however be further enhanced to improve people-centred planning. This would enhance the status of the TDSC, the quality of the deliberations as well as increase the level of transparency in decision-making. In addition a clearer demarcation of the role and functions of the TDSC vis-à-vis those of the TMAC could be included in such framework or guidelines. In Rakhine both committees are involved in monitoring the implementation of projects and public works by government in which the TDSC covers the whole township (i.e. both municipal and rural areas) and the TMAC focuses on the municipal area.

The TMACs have only recently been formalized through the Municipal Law that was drafted and adopted by Rakhine State in January 2013. As described in this report, the law allocates executive and oversight functions to the TMAC in which representatives from the people participate as well, and makes the Executive Officer of the DMA at least partially answerable to this new municipal committee. It will be interesting to see how this revised relationship will work out in practice and whether this additional line of accountability could be applied to other departments in future as well. So far, it depends a lot on the personality of the Executive Officers of the DMA and the chairperson of the TMAC whether or not good working relations are established. Some see the TMAC as an added value to the management of the municipal affairs in the townships. Problems are identified faster, while the committee members act as an intermediary between the municipality and the people, explaining matters and identifying problems. Except for Thandwe in which the TMAC is playing a more executive role (as intended by the law) the TMACs in the other three townships that were included in the mapping, seem to play a more advisory role to the executive officer of the DMA. This might work well for the moment, but a stronger more active TMAC, can generate more “drive” and energy and push municipal development to a higher level. In future, when more funds are becoming most likely available for municipal development, the hybrid status of the TMAC, having both executive and oversight responsibilities might need to be reconsidered since the present set up doesn’t meet the principle of division of power which is essential for a democratic society to function well.

The four TDSCs or TMACs have neither female members nor members from the rural village tracts. As a result, the support committees do not reflect the diversity that exists in society and the different interests that exist in the community. This is likely to impact negatively on their legitimacy with an additional risk of “elite capture” if only a small group in society is represented and has access to important information. It was therefore not strange that 97 percent of the “ordinary” citizens that have been interviewed had never heard of these committees and therefore don’t know what they do.

It also follows that the election of the members of the TDSC and TMAC is held with a wider constituency the next time elections are held, which is most likely at the end of 2015. Such elections would not only enhance their legitimacy, but would at the same time increase the visibility of these committees, which is critical for their appropriate functioning, since people can only question decisions that are made if they are taken in the public open sphere and are somehow made known to everyone. This will subsequently create the necessary answerability and accountability link between these representatives and the people, which is completely lacking at the moment as no feedback mechanisms exist between these members and the groups they are supposed to represent.

Given the fact that there are no strong organisations that will push for equal representation of women in the State and that women themselves are not yet very vocal to claim their rights, it would be worthwhile to consider a (temporarily) quota system for all representative institutions (like the VT/WDSC, the TDSC and the TMAC) to ensure that women are more involved in consultation and decision-making processes and gain experience and confidence in playing a more active public role in society.

In Rakhine State, service delivery has in general improved over the last three years and people are aware of these improvements and appreciate them. Especially in the health and education sector in which government has invested a lot more during the last few years, most people interviewed confirmed that they have noticed improvements in actual service delivery. In the health sector, 51 percent of the respondents noticed that the situation had improved over the last three years and in education 55 percent of the respondents had noticed improvements. These figures are encouraging even though they are slightly below those in the other States and Regions included in this mapping.

As was noted, both sectors have seen a huge increase in budgets and staffing over the last three years at both regional and township level. Whether with the same amount of additional resources that have become available much more could have been achieved remainshowever difficult to say as both sector ministries do not systematically monitor performance or effectiveness and efficiency in service delivery at present and there are no long term strategic plans at the region or township level (neither sectoral nor integrated) against which progress could be measured which is a disadvantage of the centralised way in which both Ministries operate. In addition, the practice of planning and delivering services in these has not changed much over the last few years according to the key service providers at the township level. As a result it is almost impossible for Heads of Departments at the township level to adjust their plans to any agreed upon township priorities or to the plans of other departments. Their ability to become more responsive to the needs of the people of the township and to coordinate their plans and activities is as a consequence very limited. In that sense, Rakhine State is not much different from the other States and Regions in Myanmar. What was noted by most frontline service managers (like headmasters and nurses managing a RHC e.g.) as well as Head of Departments at the township level is that the planners and decision-makers higher up in the hierarchy have become more responsive to their ideas and needs for improvement and they therefore feel more respected and appreciated in the work they are doing.

Looking at the low-cost solutions that were proposed by service providers to some of the bottlenecks identified, it seems however that a further delegation of responsibilities within these sectors to lower levels in the respective departments and even to school or health facility level would help to solve some of the most burning and immediate problems related to staffing, the availability of basic facilities, maintenance of buildings, etc. If at the same time the oversight capacity of local institutions like the Parent Teacher Associations and the Village Health Committee could be enhanced, such a delegation of decision making power would not necessarily have to result in an increased risk of mismanagement of funds at the lowest levels but could empower both service providers as well as the people. Such process can only take place at a very gradual pace as it needs to coincide with an increase in the planning and management capacities and related monitoring and support mechanisms at these lower levels in these ministries.

Regarding access to safe drinking water, improvements over the last three years were only noted by 30 percent of the respondents, with some differences between the townships included in the mapping. While the provision of drinking water did not receive much attention from the government in the past, it seems that over the last few years more and more of the resources over which people have some kind of say (development funds, municipal revenues and DRD budget) are directed towards improved access to drinking water. This can partly be attributed to the split between DMA and DRD, partly to the extra resources that have been allocated to the DRD and partly to the fact that through the TDSCs and TMACs the needs of the people in this respect are better expressed

and responded to. Apparently, through the VTA/WAs, TDSCs and TDACs, the needs of the people become known to the Heads of Departments and the TA and they respond by allocating more of the resources that fall to a large extent under their discretion to address these problems.

Even though only eight village tracts and wards were included in this mapping, the inventory of most important problems either through the individual responses or through the Community Dialogues showed that the needs and problems of people differ significantly per township or even per village tract or ward and that tailor-made solutions and responses are required if government wants to become more responsive to these needs and become more “people-centred”. Government in general is however not yet able to systematically assess and record these different needs on the basis of transparent and equitable criteria and it does not yet have the necessary systems in place that enables it to respond to each of these issues fairly, systematically and adequately. The quality of planning could be enhanced tremendously if consultations at the village tract and ward level could be implemented in a more systematic and comprehensive manner in which all departments would participate and if one collective database could be created and maintained at the township level that is used by all departments concerned.

Regarding transparency and accountability at the township level, only small improvements have been made in Rakhine over the past few years according to the various stakeholders involved in the mapping as was the case in other States and Regions. Access to information is critical for improving transparency and accountability. More information is flowing downward from the township administration and departments to the VTA/WAs and to the committee members but this information is not always reaching people at the community level yet. In addition, it is left to the discretion of the Heads of Departments and the TAs to decide what information they share with the public, making the availability of information dependent on the personality of these government staff rather than on clearly defined procedures.

Despite these minor gains in governance at the township level, the “trust” people have in government in the four townships in Rakhine State has improved over the last three years. Trust was defined as: the reliability of government in terms of actually doing what it says it will do, its respect for the rights of people and rule of law and the confidence people have in government that it acts with their interests in mind. Trust in almost all government institutions has improved, the most so in the VTA/WA and the least in the judicial institutions like the court, in which the level of trust stayed overall more or less the same according to the respondents. Reasons provided for the improvement in trust in the VTA/WA were either related to the fact that they listened to people’s needs, organised meetings, brought their problems to the TA, etc. or to the development activities that have been implemented collectively by various government institutions (like new school buildings or roads), but which people tend to attribute to the VTA/WA. The most important improvements noted for the TA and the State and Union level Government were more or less similar and relate to increased responsiveness to the needs of the people on the one hand, but not doing enough yet or not fulfilling all (soft or hard) promises of practical improvements that would be made in the community on the other hand. Regarding a change in trust in the judicial system, most participants had not noted any improvements and the negative sentiments and perceptions dominated the discussions.

On complaint handling and grievance redress mechanisms, the mapping noted the important role of the VTA/WAs and TAs in these processes, either as resource persons who can refer a case to the right institution or to resolve or mediate in an actual case. While no detailed information on individual cases was collected, most TAs mentioned that the number of cases that were brought to them had increased over time and that many of them were related to recent or old cases of land grabbing which can be partly explained by the fact that as a result of the new Farmland Law the intrinsic value of land has increased substantially, making it more important for users to establish legal ownership, while absentee landlords see it as an opportunity to increase the rent they are

collecting. The fact that the GAD is dealing with these cases and that their number is increasing could mean that there is more confidence of the people that their cases are dealt with by government in a fair way. While the more serious cases are investigated by ad hoc committees consisting of at least three members, the TA still has much discretionary power in making a ruling. In addition, there is a lack of transparency on how decisions related to disputes or complaints are made, leaving too much room for arbitrariness. A further specification and clarification of the regulations regarding complaint handling and dispute resolution would help to create more clarity and limit the space for arbitrary rulings and possible mismanagement.

Formally, there has been no changes in existing accountability mechanisms as each civil servant is only accountable to his/her supervisor in the same department and there are no political and social accountability mechanisms in place at the township level. Informally however, the fact that VTA/WAs are now elected has changed the relationship with their communities as they feel more than before to be the representative for their community and have received the mandate to act as the bridge between the township and the village tract or ward (also because they are actively involved in the consultations regarding the use of the development funds) and as a result they do feel more answerable to them.

Although they are formally not part of government, the VTA/WAs are seen by the people as the most visible and often most important “*face*” of government and as was noted in the report, a lot of high (and often unfulfillable) expectations are loaded on the shoulders of the VTA/WA, while their ability to respond and practically address some of the more pertinent community problems is very limited. Most of them are therefore “reluctant leaders”, doing the job because they feel obliged to their community, but well aware of the pressure in their shoulders. Further enhancing their capacities with regard to leadership, communication, information provision, etc. and enabling them to do a better job through a more intensified support system could be a very cost effective way to further improve the trust people have in their government.

The number and size of Civil Society Organisations in Rakhine State is still rather limited and so far they play a marginal role in governance. Most organisations are active in health and education, providing direct support to people in need. Even though their outreach is limited, their work seems to be appreciated by committee members and government staff. From the discussions with the CSOs, it became clear that they are still rather ambivalent with regard to intensifying their relationship with the government at township level. It became also clear that the way in which CSOs position themselves in the governance process can differ a lot per township, depending on personalities on both government and CSO side as well as on their independence from government.

Even though the process of change has only started recently, several early gains in terms of improved governance have been noticed. Basic social services like public health care and primary education are improving at a higher pace as compared to the period before 2011 according to the people that were interviewed. The VTAs are increasingly acting as an intermediary between the village tracts or wards and the townships. Also, some initial forms of people’s representation at the township level are emerging that start to play an initial role in the decision-making process with regard to the utilisation of development funds and defining the priority areas for the DMA in the four townships to focus on.

While improvements were noticed, other intended changes, like enhanced area-based coordination between sector ministry departments, a serious reduction in corruption and improved responsiveness of government to the needs of the people will require more fundamental systemic changes in the way the Government of Myanmar operates. These more systemic blockages to change relate to existing power relations between ministries, between the Union level and State/Regional levels of government and administration and ultimately on the interrelations between the state and the people in Myanmar, which can only gradually change over a longer period of time.

6. Annexes

Annex 1: Citizen Report Card interviews

In December 2014, 384 respondents in six village-tracts and two wards across the four selected townships in Rakhine State were interviewed on their perceptions and experiences regarding service delivery and local governance by means of a Citizen Report Card (CRC) questionnaire. The Citizen Report Card requested people to reflect on the basic social services provided by government (like education and health) and to assess the quality of these services from a people's perspective. In addition, they were asked to appraise the quality of governance by answering questions about key governance issues (like participation, access to information, corruption, etc.) that have a direct impact on their livelihoods.

In Kyauktaw and Thandwe, one ward and one village tract were selected, and in Gwa and Rathedaung two village tracts. In each of these 48 adults were interviewed using a random selection process.

Demographic and socio-economic characteristics of respondents

By alternating between male and female respondents it was ensured that 50 percent of the respondents were male and 50 percent were female. All age groups were represented in the survey as is shown in figure 1.1.

Figure 1.1:
Number of respondents per age group

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014. n= 384

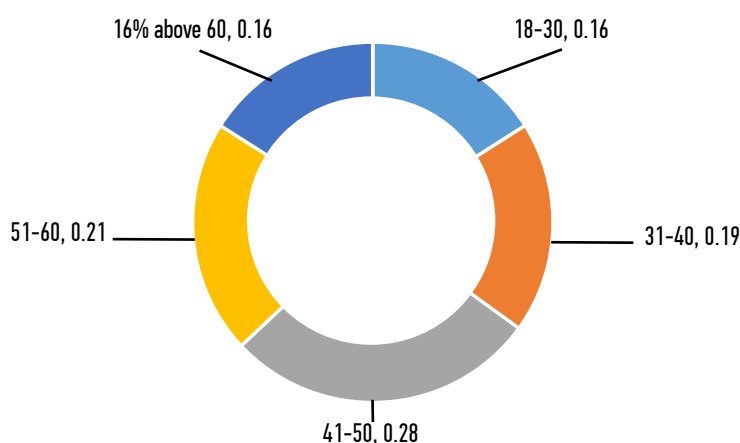
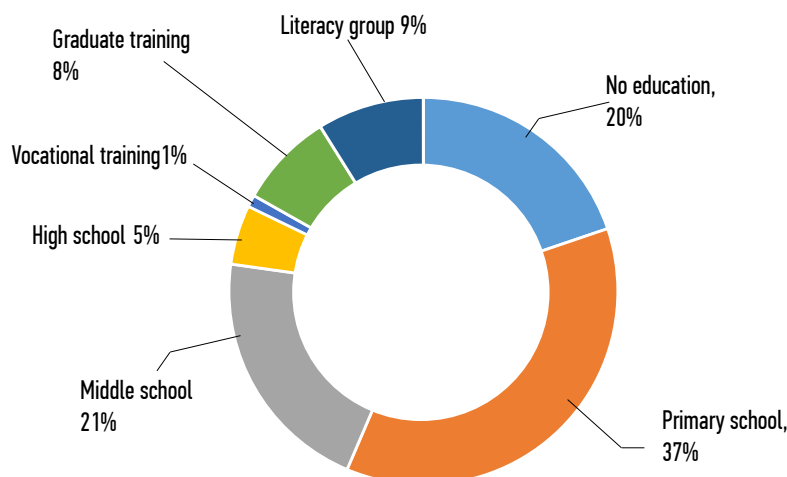


Figure 1.2:
Educational background of respondents

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014. n= 384



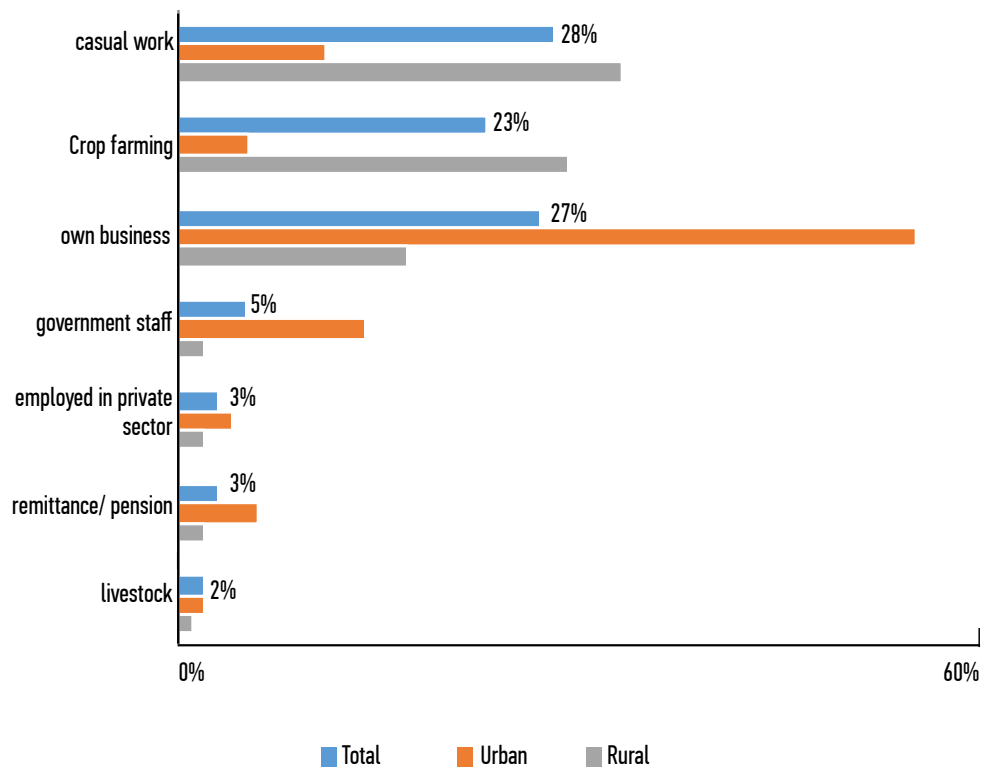


Figure 1.3: Main economic activity of the household of the respondent

Source: UNDP Local Governance Mapping, Rakhine State, August-December 2014. n= 384

Annex 2: Community action plans

At the end of each Community Dialogue session the people and participating government staff agreed upon a simple action plan to resolve some of the issues identified in the meeting. These rudimentary action plans are presented below not with the intention to monitor actual progress, but more to show how a half-day Dialogue Session can be instrumental in bridging the differences in perception between people as service users and government staff as service providers and in stimulating community self-help activities.

Table 2.1: Overview of community action plans resulting from the CD sessions in the six village tracts/wards.

VT/ Ward	Issue 1 (Education)	Issue 2 (Health)	Issue 3 (Information flow)	Issue 4 (Other issues)
Lay Gwa Sone Village Tract Rathedaung Township	The VTA and the school principal promised to report insufficient teachers and classrooms and latrines to the Township Education Officer, while villagers can provide voluntary labour to keep the school surrounding clean.	The villagers are willing to provide free voluntary labour to build a health clinic so that the health staff can request TMO to assign more health staffs to their village tract.	VTA will call a meeting before and after the implementation of a new development projects to explain it. Villagers said they would attend the meeting if they were invited.	The VTA agreed to post important telephone numbers (emergency numbers) to be contacted for security concerns at the VTA's house.
Thein Taung Village Tract Rakhine part Rathedaung Township		One health staff said she has been sharing health information to her patients once she got a chance and she will keep on doing so in the future.	The VTA and villagers agreed that poor road conditions are undermining how fast the information is reaching villagers, but only the government could solve the problem.	
Thein Taung Village Tract Muslim part Rathedaung Township	Villagers can provide the construction material for the school building from the local surrounding and the whole village can provide free labor to build the school building. Bricks, cement, school furniture and teachers to be provided by the education ministry	In order to provide more learning opportunities for students, parents and teachers will discuss what could be done. Talks about children's rights, essay competitions and public talks will be held. Schools will allocate specified hours for physical training and moral education.	The village administration will report and request that need to higher level administration.	
Ma Kyay Ngu Village Tract Gwa Township	The school principal will arrange a proper timetable for the students so that all of them can learn better. Besides, the students won't be asked to pay any tuition any more.	The VTA and the health department will approach the relevant health department at township level in order to have sufficient healthcare staffs and a proper clinic.	The VTA promised to hold meetings that all the people and the entire community could attend.	The VTA will encourage all the people to get involved in the meeting and express their opinions.

Sut Twar Village Tract Gwa Township	The parents and teachers agreed to not accept tuitions fees, so the problem would be solved. If any case of tuition appears, it will be reported to the Township Education Officer.	All the problems regarding insufficient health staff and medicine will be reported to the higher levels of administration. If any healthcare work does not do home-visits, this will be reported to the Township Health Department.	The VTA promised that he will inform the Community about the projects and will keep records of the financial costs. The community agreed to involve itself more in the decision-making process.	The VTA will present to the higher levels of government the necessity of the community for lamp poles and technicians in order to have electricity/illumination. The Township Officer and the Member of the Hluttaw would also be part of the joint action in order to solve this issue.
Ward no. 2 Thandwe Township	The administration group will report the need for safety of the school buildings and the education group will report the need for qualified teachers and suitable salaries for them. Also, the teachers and parents will cooperate more often in the future.	The administration group will report the needs of a RHC and more health staff. There will be more co-operation between the health staff and the public in the future.	Efforts will be made to increase the number of health staff and to receive sufficient amount of medicines.	
Kyauk Gyi Village Tract- Thandwe Township	The government should provide better salaries in order to end private tuition. The parents will encourage the children to study. Moreover, the community decided to request teachers from the schools where there are more than enough teachers per student.	The VTA will report the lack of healthcare staff to the government.	There is a necessity of a person that acts as a node of communication between the government and the people. Regarding the meetings and usage of funds, there will be more transparency and information available.	The people will report to the government the need of electricity in the village.
Pyi Taw Tar Ward Kyauktaw Township	The government should provide the better salaries for the teachers in order to end the practice of private tuition. The principal will tell the teachers to arrive on time at the school. Transportation will also be provided for the teachers, in order to ensure that they will arrive on time.			There should be more police force in the ward, patrolling it once a week at least.
Tin Ma Village Tract Kyauktaw Township.	The teachers will not ask for private tuition. The government will be asked to provide clean water for the school, maybe using a water reservoir. The community will involve itself, although it thinks it would be better to purify and filtrate the water than just store it.	The healthcare staff and VTA will report the problems to the township and to the Rural Development Department, asking for a clinic with longer operating hours. The government should provide more staff and medicines.	The VTA will persuade the people that currently are not involved, to take part in the decisions concerning the village.	The police force needs to be increased in order to patrol all the villages.



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