Now and the Future

Gender Equality, Peace and Security in a COVID-19 World
1. Introduction

EMReF and ActionAid with support from Gender Action for Peace and Security (GAPS) undertook research in Myanmar to better understand the context-specific and global impacts of COVID-19 on gender, peace and security, and to develop policy and programming responses, which account for the impact of COVID-19. The research methodology was based on the beyond consultations tool and included a literature review and Key Informant Interviews (KIIs) with a wide range of civil society organisations across Myanmar.

The findings demonstrate that against a backdrop of entrenched patriarchal norms and practice, some of the highest rates of gender-based violence (GBV) in the region, complex conflict dynamics, chronic poverty and vulnerability to natural hazards, the impact of COVID-19 has been devastating for many communities across Myanmar. While initial rates of transmission were relatively modest, since mid-August 2020, the number of locally transmitted cases continues to increase rapidly across the country, with most cases reported in Yangon followed by Rakhine state.¹

The government of Myanmar has been taking measures on both health and socio economic fronts to respond. Following sporadic lockdown measures, high level committees to coordinate the response were formed, alongside the development of a COVID-19 Economic Response Plan (CERP). Engagement and coordination with civil society and non-state actors as part of these actions has been limited. Reports have also suggested there have been deliberate government and military actions to frustrate ethnic armed organisations’ (EAO) own healthcare responses.² As a result, the government’s response is seen to be exclusionary and has not been guided by the local perspectives of those leading in the delivery of relief efforts, including women and women’s rights organisations (WROs).³

Women and girls across the country have been disproportionately impacted by the pandemic, with lockdown measures and the economic impact of COVID-19 contributing to a surge in intimate partner violence (IPV); child, early or forced marriage; trafficking; and sexual violence and harassment, with widespread impunity. Women and girls have struggled to

¹ At the time of writing, a total of 41,008 cases have now been confirmed across the country and on October 10th 2020 there were 2,158 confirmed cases – the highest number reported in a single day so far. OCHA (October 2020) ‘Myanmar: COVID-19 Situation Report No.11’, https://reliefweb.int/report/myanmar/myanmar-covid-19-situation-report-no-11-23-october-2020
³ Ibid.
access support and specialist services, including for their sexual and reproductive health (SRH) and mental health, and have largely found themselves unable to access secure employment, and COVID-19-related decision-making spaces.

These issues have been compounded for internally displaced women and girls living in camps and displacement sites in Rakhine, Kayin, Chin, Kachin and northern Shan states. Humanitarian actors have renewed calls for access to these communities. Despite the Tatmadaw\(^4\) eventually announcing a ceasefire this has not been applied to the conflict in Rakhine and southern Chin states\(^5\) and reports suggest sporadic fighting continues in other parts of the country. While there have been provisions for the government and EAO coordination in the National Ceasefire Agreement (NCA) and through a new coordination committee, there appears to be little evidence that the pandemic is being used as an opportunity to build trust between these groups. This has also come at a time when the country held its fourth 21st Century Panglong Peace Conference, seen by many to have been a missed opportunity.

On November 8th 2020 the country underwent a general election, amidst the COVID-19 crisis. While the National League for Democracy (NLD) had a landslide victory, this result has been subsequently contested by the Union Solidarity and Development Party (USDP).\(^6\) EAOs, including Restoration Council of Shan State (RCSS) and Arakan Liberation Party (ALP), are urging USDP to accept these poll results. Approximately 75 per cent of Rakhine (of 1.6 million eligible voters) were unable to vote\(^7\) due to the cancellation of the election in nine out of seventeen townships.\(^8\) The Arakan Army (AA) issued a statement on November 12th 2020 appealing for polling before the end of December 2020.\(^9\) Additionally, in the aftermath of the election, the non-signatories to the Nationwide Ceasefire Agreement (NCA) (consisting of the AA, Ta’ang National Liberation Army and Myanmar National Democratic Alliance Army) issued a statement to delist AA as a terrorist organisation and urged for peace talks.\(^10\) The political outlook remains unpredictable and largely contingent upon the new directions that the NLD government will take as it assumes its position for the next five years starting from March 2021.

\(^4\) The Tatmadaw is the official name of the armed forces of Myanmar
\(^5\) Reports suggest this is happening mainly because the Arakan Army was designated as a terrorist group on March 23rd 2020
\(^9\) Ibid.
In many ways, Myanmar’s response to COVID-19 fits into ‘an existing pattern of unequal application of the law, restrictions on freedom of speech and political dissent’ with limited engagement with civil society, including EAOs and WROs. COVID-19 has highlighted, and further entrenched, gendered inequalities, as well as systemic and structural exclusion and violence, which threatens to further destabilise gains the country has made and jeopardise social cohesion within the country.

2. Recommendations

2.1. **Recommendation 1: Women’s leadership (part 1).** The government of Myanmar and the international community should increase the representation and decision-making power of a diverse group of women and WROs within formal COVID-19 response and recovery mechanisms, at both national and local level. To support a sustainable, gender equal and peaceful society during and ‘post-COVID’, these investments should be accompanied by a commitment to strengthen women’s leadership within the country’s ongoing peace process and political settlement.

2.2. **Recommendation 2: Women’s leadership (part 2).** The government of Myanmar and the international community should reshape local partnership approaches by meaningfully shifting power and resource to a diverse group of local women and WROs. This should be accompanied with a firm commitment to prioritise the needs of diverse women and girls, and meet those needs through dedicated funding, and by opening up space for collective women’s rights organising.

2.3. **Recommendation 3: Violence against women and girls (VAWG).** The government of Myanmar and the international community should prioritise and invest in integrated and holistic women-led, community-based programming approaches that both prevent and respond to VAWG exacerbated by COVID-19 (including partner and non-partner violence; parental violence; trafficking; and child, early or forced marriage). These efforts must be accompanied by dedicated investment in the legal and judicial system for VAWG, to challenge the entrenched culture of silence and impunity in Myanmar.

2.4. **Recommendation 4: Mental health and psychosocial support (MHPSS).** The government of Myanmar and the international community should ensure that mental health and psychosocial support (including specialist trauma health services) are integrated and resourced as part of a comprehensive public health response to COVID-19. This should involve specific consideration of vulnerable groups of women and girls in both conflict and non-conflict areas, including internally displaced women; pregnant and lactating mothers; single (young) women and girls; divorced women; women from minority groups; women-headed households; widowed women; older women; and those with pre-existing mental and physical disabilities.

2.5. **Recommendation 5: Women’s livelihoods and economic rights.** The government of Myanmar and the international community should ensure that the gendered impact of COVID-19 informs priority investments in women’s livelihood opportunities and social protection within COVID-19 response and recovery efforts.

2.6. **Recommendation 6: Conflict and displacement.** The government of Myanmar and the international community should recognise the specific experiences and needs of women and girls in the conflict-affected states in Myanmar and provide tailored and contextualised responses to support them. These efforts should be accompanied by ongoing advocacy in support of a ceasefire, including working with, and funding of, civil society, and WROs, to continue with their important activities to support this work.
3. Recommendations and Evidence

3.1. Recommendation 1:

**Women’s leadership (part 1).** The government of Myanmar and the international community should increase the representation and decision-making power of a diverse group of women and WROs within formal COVID-19 response and recovery mechanisms, at both national and local level. To support a sustainable, gender equal and peaceful society during and ‘post-COVID’, these investments should be accompanied by a commitment to strengthen women’s leadership within the country’s ongoing peace process and political settlement.

Specifically, the government and the international community should:

- Increase representation of women – and of their needs and priorities – in the national COVID-19 Economic Relief Plan (CERP) and government infrastructure tasked with its implementation. This could be accompanied by gender and inclusion capacity development training for the (largely male-dominated) existing governance bodies responsible for overseeing this work.
- Invest in work already underway with civil society actors, including WROs, to lobby for increased and mandated representation of women within CERP committees (including at village level).
- Provide leadership training and subsidies for women and WROs to help cover the associated costs of their meaningful engagement in the national CERP and peace processes, including travel; phone data and/or technology fees; additional childcare; and the impact of taking time out of paid work opportunities.
- Strengthen opportunities for women and WROs engagement in the 21st Century Panglong Peace Conference by investing in a Women’s Peace Conference, and supporting civil society advocacy to secure a 30 per cent quota for women’s representation in political dialogue and peace negotiations.
- Support ongoing advocacy to work towards a 30 per cent quota for female candidates in parliamentary elections, and within future by-elections and national elections. Political parties could introduce targets for increased representation of women within central executive committees (CECs), central committees (CCs), and township executive committees (TECs).
Despite women being relatively well represented in Myanmar’s public sector (of note, 63 per cent of all civil servants in Myanmar are female\textsuperscript{12}), this has not translated through to senior leadership roles within government. Recent evidence highlights that women held less than 30 per cent of Director-General positions in all but three ministries\textsuperscript{13} and occupy just 10.5 per cent of seats in the national parliament.\textsuperscript{14} There have also been low numbers of women represented in the candidacies for the upcoming 2020 election, with only 15.6 per cent of approximately 7,000 candidates being female.\textsuperscript{15} This lack of representation is intensified at more local levels, for example, within Village Tract Administration (VTA) – considered to be the most important mechanism for village level decision-making – in which only 0.25 per cent of posts are filled by women.\textsuperscript{16} Women’s needs and priorities have also been largely underrepresented within Myanmar’s peace process. In January 2016, women occupied only four per cent of 48 members of the leadership body of the Union Peace Dialogue Joint Committee (UPDJC), and only seven per cent of participants at the fourth 21st Century Panglong Peace Conference.\textsuperscript{17} While there have been some modest increases in this representation (notably up to 13 per cent in August 2016, 17 per cent in May 2017, and 22 per cent in July 2018 respectively), figures remain low overall. In addition, women represent only nine per cent of the Joint Ceasefire Monitoring Committee (JCM) membership.\textsuperscript{18}

As highlighted at the global level, women face a ‘double hurdle to power’, with significant barriers inhibiting not only their access to decision-making positions and processes in the first instance, but also their ability to influence within these structures once access is granted.\textsuperscript{19} A combination of factors exacerbate the exclusion of women from formal leadership positions. These factors include deeply entrenched norms and widely held beliefs that men make more effective political representatives and leaders, as well as a perception that women’s primary role is within the domestic sphere.\textsuperscript{20} As summarised by one research participant:

\textit{“Women think they do not have knowledge and skills and potential. The patriarchy is preventing them from fully participating.”}

\textsuperscript{12} UNDP Myanmar (2020) ‘On International Women’s Day, more women still needed at top decision maker level in Myanmar’, https://www.mm.undp.org/content/myanmar/en/home/presscenter/articles/2020/international-womens-day.html

\textsuperscript{13} Ibid.


\textsuperscript{17} EMReF (2020) ‘Gender and Political Participation in Myanmar’, https://www.emref.org/sites/emref.org/files/publication-docs/gender_and_political_in_myanmarenglish_online.pdf


Global and country evidence suggests that an active civil society and women’s movements can play a crucial role in strengthening women’s presence and representation in politics and civic life. In Myanmar, women’s rights actors and civil society actors have launched mass advocacy campaigns over many years to try and secure women’s representation through quotas in the political space and within political dialogue and peace negotiations. As highlighted by one participant:

“**We have consistently encouraged all policy-makers and decision-makers to increase the rate of women’s participation in the peace process.”**

However, even where small pockets of influence and access are opened, women who have political connections, those with access to financial resources and higher levels of education, and those not tied to domestic and caring responsibilities, are the ones who are most likely to take advantage of these political opportunities. This has contributed to scepticism and hesitancy around the extent to which these appointments can truly and meaningfully represent the diversity of perspectives of women with different identities, needs and experiences, living in different contexts, in and out of conflict. As one participant highlighted:

“**Although there is a woman as State Counsellor at the highest national level, she cannot represent the many types of ethnic women at state and regional levels.”**

And as another participant emphasised:

“**Especially in conflict, women need to be included in shaping policies and be represented in governmental structures to push the agenda on women’s rights to bring forward justice.”**

Despite women representing most frontline responders during times of crises in Myanmar – including during the COVID-19 pandemic – the formal governing mechanisms and decision-making structures established to manage response and recovery planning have remained largely gender-blind with low levels of women representation. Research participants highlighted that women have been consistently and systematically denied access to these critical COVID-19 decision-making spaces at the national and local level. One key example of this relates to the fact that the government relied heavily on existing township and ward administrators to implement its social protection measures, which, as outlined, are almost exclusively dominated by men. Where access has been granted, women’s roles have been limited to administrative or domestic duties and they often feel unable or ill-equipped to influence decisions. This also translates to women’s representation within COVID-19 operational structures at a programming level, and within camp structures, as a participant highlighted the role of women ‘leaders’ participating in IDP camp committees:


“Women are assigned to make tea, and clean dishes. Not to make decisions. They are servicing men decision-makers at all levels.”

Despite its limitations, the government’s CERP has been acknowledged – even by critics – as a comprehensive welfare effort, and Myanmar’s first national level social protection scheme with food and cash transfers. The CERP included macro-economic measures; lending to small and medium enterprises (SMEs); and a plan for community welfare with a strong social protection component. Throughout the country, starting from the Thingyan new year festival in April, food transfers were delivered and targeted to particularly vulnerable households. This was followed up with cash transfers some months later to the same households.\textsuperscript{23} It is expected that the government is due to receive two billion USD in aid for the implementation of CERP.\textsuperscript{24}

While the plan was received as relatively successful, the programme is seen to have had certain limitations, including potentially fallible metrics for assessing household vulnerability, which has meant that some households have fallen through the cracks, and an initial gap in meeting the needs of IDPs and households in areas of conflict such as Rakhine state. Several participants in this research also highlighted that the process for developing the CERP has been non-consultative. The process has also been criticised for lacking a realistic plan for implementation and accountability measures.\textsuperscript{25} Participants highlighted that the specific experiences of women and girls were largely missing from the implementation of the plan, and that women and WROs had no engagement with the plan’s decision-making process or structures. As such, civil society actors have submitted an open letter to the government highlighting their concerns and demands. As summarised by one participant:

\textit{“CERP committees were organised by the lead of General Administration Department (GAD) and the Ministry of Health and Support (MOHS) which are mainly staffed by men. So, those individuals taking a leadership and decision-making role were mostly men.”}

Some organisations have also been advocating for township and village committees to put women into the decision-making roles of COVID-19 response committees, with little success to date.

A lack of representation and influence for women and women’s rights actors means that ‘even as women are disproportionately affected by the crisis, they have less say in how their communities and country respond to it, increasing the risk of a COVID-19 response that

\textsuperscript{23} Information gathered from ActionAid Myanmar case-study: ‘Social protection: A vital response to Covid-19 in Myanmar Case study_13.11.20
does not adequately address the needs and priorities of the most vulnerable women and girls. As the global evidence attests, increasing the representation and decision-making power of a diverse group of women and women’s rights actors in processes of peace and state building is intrinsically the ‘right thing to do’ from a rights-based perspective, as it ensures that women’s perspectives, needs and priorities are addressed and acknowledged. Their participation can also contribute to the durability of peace agreements and the implementation of constitutional commitments, as well as the efficacy and impact of humanitarian responses and the creation of more gender-just societies – as concluded by one participant:

“Gender inequality can be addressed in Myanmar when women are included in developing policies and institutional structures.”

3.2. Recommendation 2:

**Women’s leadership (part 2).** The government of Myanmar and the international community should reshape local partnership approaches by meaningfully shifting power and resource to a diverse group of local women and WROs. This should be accompanied with a firm commitment to prioritise the needs of diverse women and girls, and meeting those needs through dedicated funding, and by opening up space for collective women’s rights organising.

Specifically, the government and the international community should:

- Ensure gender is mainstreamed throughout COVID-19 response activities, with dedicated financing committed to meeting the needs of women and girls, including prevention of and response to VAWG, and efforts to strengthen women’s and girls’ resilience. This funding should include mandatory targets for spend to reach local actors directly (25 per cent as a minimum, as called for in the Grand Bargain) to ensure gender responsive and women-led approaches are adopted by implementing partners. This funding should build on, not

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replace, WROs’ ongoing and existing funding for pre-COVID-19 activities, which must continue in order to mitigate the secondary impact of COVID-19.

- Pilot new, and channel funding through flexible funding models that are informed and led by WROs and promote women’s leadership, and provide long-term, predictable finance and core funding to support local women-led actors to deliver their self-defined priorities.
- Strengthen accountability and transparency across partnerships, opening up opportunities for learning and knowledge exchange between humanitarian actors and WROs, as well as creating space and infrastructure to support collective women’s rights organising.

Almost four years on from the World Humanitarian Summit, Grand Bargain Signatories, including governments, donors, international and national non-governmental organisations and UN agencies are still failing to shift power and resource to local actors within preparedness, response, recovery and long-term resilience efforts. While the COVID-19 crisis has forced a recognition of the central role played by national and local organisations in humanitarian action – and specifically WROs – there is still a lack of meaningful recognition and resource being directed to these actors. Changing the working practices and approaches of governments and the international community will mean working in a coordinated way and ensuring that women have a voice in decision-making, that funding reaches these local organisations directly and that there is an emphasis on collaboration and partnership that prioritises and promotes women’s leadership.

Participants raised concerns around the increasingly shrinking space for civil society to operate in Myanmar, despite the central role that CSOs and WROs have played in coordinating and scaling responses to COVID-19 and working to supplement the limited services provided by government. As one participant highlighted:

“The needs identified by the international system are top-down. There is mention of localisation, but in practice it is not Myanmar CSOs.”

Participants drew parallels to similar response efforts for Cyclone Nargis, which is believed to be one of the worst disasters in Myanmar’s history, with an estimated 140,000 people killed and another 2.4 million severely impacted in 2008. In response to the emergency, local civil society groups – and specifically WROs – effectively mobilised and were some of the first to respond, playing a critical lead role in distributing care and food packages, setting up cooking/food tents as well as providing short-term shelter. This was particularly important as international assistance was initially prohibited by the military for the first weeks of the response efforts.

Positive examples of this include the EU and LIFT funds in Myanmar, that have allocated smaller grants to CSOs which are less bureaucratic; as well as innovation from Paungsifacility, a peace fund organisation in Myanmar that has provided long-term core support to women-led CSOs responding to COVID-19 in Myanmar.

As of October 30th 2020, Myanmar is not a Grand Bargain Signatory


response, while financial support for relief efforts was provided by individuals and private companies inside Myanmar. This response indicated the importance of civil society within Myanmar – a feat that was never fully acknowledged or recognised by the government of Myanmar, and as one participant highlighted:

“There is not too much room for civil society. CSOs have not been welcomed and recognised for their role in responses, peace and security, even though most of the responses are led by them.”

Participants underlined the ways in which civil society has ‘rallied together’ with ‘strong cooperation between local and national organisations’, emphasising the innovative solutions that many local organisations have adopted to facilitate their work – including online coordination and information sharing to stop misinformation of COVID-19. Participants highlighted that better coordination and communication is needed between civil society and INGOs, as summarised by one participant:

“Donors and the international community are working by themselves. They talk to CSO representatives, but this is not meaningful, as they do not allow CSOs to be involved in their work. It feels like there is no transparency around the coordination and information mechanisms shared by the international community and CSOs are being left out of the picture.”

Participants also emphasised that partnerships between government and the international community were often based on relationships of inflexibility, and a lack of trust and respect, for example:

“The engagement between international communities and local organisations needs to be a partnership and not simply about being a funded ‘recipient’. All stakeholders should be well respected and their advice take on board.”

Participants further outlined that WROs specifically have been excluded from meaningfully participating in setting priorities and shaping COVID-19 response and recovery plans and informing decisions around programme design and implementation. This has led to operations and activities that are gender-blind and do not respond to the specific needs of women and girls. This is something that organisations noted had not changed despite learning from Cyclone Nargis, with one participant suggesting:


“Most of the thinking is how to respond to the general population and not specifically for women.”

As such, there was widespread consensus across participants that the gendered impact of COVID-19 has not been appropriately or sufficiently reflected or responded to, and to address these gaps, women’s rights actors, including WROs, should be given a primary ‘seat at the table’ in shaping response and programming priorities. As one participant concluded:

“When identifying outcomes and outputs [for programme design] women’s voices are not reflected. This system leaves women behind, and women should be at the table designing projects. Every project should have consultation with women and a dedicated budget for gendered issues.”

Crucially these efforts must be framed with a strong intersectional lens. Programme responses need to analyse and address how gender inequality intersects with other forms of discrimination. As highlighted by multiple participants, many women will face additional barriers to care, to protection and to accessing information due to where they live (including in conflict-affected contexts), their sexual orientation, gender identity, any form of disability, age and ethnicity. Using intersectional analyses to understand how different forms of exclusion and discrimination can be intensified for some groups will be crucial for COVID-19 effective response efforts. To assist in these efforts, more effective partnerships with WROs and feminist organisations, which seek to provide more dedicated flexible funding, should be explored:

“Donors should work more with feminist organisations and those doing gender work. Donors should be listening more.”

3.3. Recommendation 3:

VAWG. The government of Myanmar and the international community should prioritise and invest in integrated and holistic women-led community-based programming approaches38 that both prevent and respond to VAWG exacerbated by COVID-19 (including partner and non-partner violence; parental violence; trafficking; and child, early or forced marriage). These efforts must be accompanied by dedicated investment in the legal and judicial system for VAWG, to challenge the entrenched culture of silence and impunity in Myanmar.

Specifically, the government and the international community should:

- Invest in awareness-raising initiatives that focus on women’s rights; gender roles and norms; women’s and girls’ leadership and challenge discriminatory social norms. These activities can take place in dedicated safe spaces for women and girls, and as a part of wider community initiatives that work with men and boys.

• Invest in the provision of – and referral pathways to – specialist VAWG support services, which include medical, sexual and reproductive health (SRH) care; mental health and psychosocial support; and legal assistance.

• Increase women’s and girls’ access to financial and skills-based resources to support their own protective capacity and longer-term resilience. This could include investments in cash and livelihood opportunities.

• Ensure that safety and security in COVID-19 quarantine centres is considered more holistically. This should include the provision of gender-disaggregated and accessible shelter and WASH services and facilities for all women and girls, including those with disabilities.

• Ensure the continuation and strengthening of support to legal service provision for VAWG cases, including in conflict-affected parts of the country. As part of this work the Prevention of Violence Against Women (PoVAW) Bill should be adjusted to incorporate the various demands of civil society experts, including provisions for the perpetration of VAWG in armed conflict zones, and its passing and implementation prioritised and resourced.

• Develop a comprehensive plan to support the implementation of the Child Rights Law (enacted in 2019) – with a particular focus on addressing child, early or forced marriage.

The UN states that violence against women and girls is a ‘silent emergency’ in Myanmar.\(^{39}\) Recent demographic and health survey (DHS) data indicates that 51 per cent of women and 49 per cent of men believe that a husband would be justified in beating his wife in certain circumstances, highlighting the widespread and deeply entrenched normalisation of intimate partner violence (IPV). Different forms of GBV, including partner and non-partner violence and harassment; child, early and forced marriage; and trafficking are also significant – including in conflict-affected parts of the country, where a currency of violence is exacerbated by a policy of segregation, overcrowding and lack of privacy in IDP camps, as well as an overall lack of safety, leading to a sense of fear.\(^{40}\) Without a comprehensive legal framework to respond to VAWG, a culture of underreporting and impunity persists, as underlined in research by the Gender Equality Network\(^ {41}\) who found that while emotional, physical, and sexual forms of violence against women and girls were prevalent, individuals often hesitated to report violence because abuse was often considered a ‘normal facet of intimate partnerships’.\(^ {42}\)


The United Nations Population Fund (UNFPA) Minimum Standards for Prevention and Response to GBV in emergencies require all humanitarian actors to assume that violence increases in times of crisis. Recent evidence also highlights that women and girls are more likely to experience the secondary impacts of COVID-19, which include psychosocial effects and increased levels of VAWG.43 This led to a statement from the UN Secretary-General noting the ‘horrifying global surge’ in domestic violence.44 The Akhaya Women Organisation has specifically reported a 7.5 times rise in reported GBV cases across Myanmar under lockdown.45 This comes at a time when the protection and GBV sector is already chronically and often disproportionately underfunded in comparison to sectors perceived to be more ‘life-saving’.46

In Myanmar, research participants corroborated these findings, emphasising the increased rates of IPV connected to entrenched patriarchal norms, restricted movement, increased use of drugs and alcohol in men, food insecurity, financial pressures and job insecurity. This is noted across the country, including for IDPs in Rakhine, in urban parts of Yangon, and in Kachin where men have returned from the border with China without employment. The levels of IPV were described as acute in all of these contexts. As one participant highlighted:

“The only way for men to cope is to use violence.”

Beyond IPV at the household level, participants highlighted that violence against children, specifically girls had increased. As another participant asserted:

“The major issue is domestic violence, not only towards women, but also children.”

In addition, participants noted that the closure of schools meant that girls were particularly vulnerable and were at higher risk of different forms of sexual exploitation and abuse. Several participants expressed concerns over the increasing levels of child, early or forced marriage as a result of growing pressures on families. While data on this issue is difficult to accurately capture in Myanmar due to complex customary practices among the country’s 135 recognised ethnic groups,47 evidence reveals that at a minimum, 16 per cent of girls in Myanmar are married before the age of 18, and the average age of marriage is lowest in Rakhine and Shan states.48

48 Ibid.
Universally participants drew attention to the lack of awareness and understanding that women and girls had about their rights, largely connected to a widespread acceptance of discriminatory social norms that promote and prioritise men’s status, needs and leadership above their own. There was also a lack of awareness of the types of services and support available to them. Participants also highlighted that where support, specialist services were available, they were either disrupted and overburdened because of the impact of COVID-19, or were inaccessible to women ‘trapped’ in lockdown:

“Most of the women do not know about GBV. They need to be informed and to know their rights.”

Several participants highlighted increases in theft and robbery where women were more commonly targeted. High rates of sexual assault and sexual violence in COVID-19 quarantine centres were also noted. As highlighted in a recent rapid gender analysis,\(^\text{49}\) IDP settlements, quarantine centres and urban slums ‘each present specific sets of challenges in terms of ensuring safe and accessible WASH services for women, men, girls and boys and people with disabilities’.\(^\text{50}\) Research participants highlighted that gender considerations had not been taken into account for quarantine premises (including WASH facilities), with women and girls highlighting that they felt unsafe and uncomfortable having to share these spaces with men.

In 2019, approximately 82 per cent of people trafficked in Myanmar were female.\(^\text{51}\) Women and girls are often sent to urban areas and other locations, such as fishing villages, border towns, mining areas and military camps – all for sexual exploitation.\(^\text{52}\) Because of a lack of job opportunities and loss of income during COVID-19, young women have been forced into trafficking. A research participant noted that one of their relatives had been trafficked during the first wave of COVID-19, and as another participant emphasised:

“Because of a lack of job opportunities and loss of income during COVID-19, some brokers (traffickers) seduced young women by telling them that they would take them to China through an illegal route and help them find jobs. In reality they hid these women by moving them from place to place to avoid the police, and finally, they sold those women.”

Despite the political transition, women and girls – specifically IDPs – continue to be at risk of sexual violence perpetrated by military actors in conflict-affected areas of the country, and this has continued throughout the pandemic.

\(^\text{50}\) Ibid.
\(^\text{51}\) Myanmar’s Anti-Human Trafficking Police Force’s data released on their Facebook page
Participants for this research highlighted that increasingly authoritarian measures are being used to control populations in Rakhine and Chin states. There are reported cases of sexual harassment and sexual violence in camp settings, perpetrated by security forces, and high levels of impunity. There are also reports of male combatants (from armed groups) harassing women and girls. Participants highlighted that there is a strong sense of impunity, with a belief that these cases would not be investigated or reported. As one participant asserted:

“We are encountering many challenges when we are trying to tackle rape cases, particularly if the offenders are from the military […] even our colleagues were threatened and given pressure to withdraw from the case. We have had many similar cases that were committed by the military against Rakhine women. We have only been able to prosecute one case, which took five to six months. Now we are asking the authority to prosecute the case at the formal court, not at the military court.”

The government has made some efforts to engage WROs in the development of key gender responsive frameworks such as the National Strategic Plan for the Advancement of Women 2013-2022 (NSPAW) and the draft PoVAW law. It has also started to act on international recommendations regarding implementing the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW). However, civil society actors note that the government has been ‘slow to act’ on the prosecution of perpetrators of VAWG’. 53 There is also widespread public criticism ‘that current laws neither address women’s experiences of violence nor do they protect women’s rights’. 54

Research participants highlighted ongoing advocacy in relation to the passing of the PoVAW Bill, which was first proposed in 2013 and has stalled at the draft legislation stage. The law presents a significant opportunity for Myanmar to ‘at long last ensure a comprehensive framework for addressing sexual and gender-based violence, bring its domestic laws in line with international obligations, and ensure adequate redress for violence to all women’. 55 However, it has been criticised for its inconsistent definitions of terms and crimes; for not adequately capturing and protecting the diversity of women, girls, and their experiences; and for failing to address the perpetration of sexual and gender-based violence in conflict and peacetime – in particular the fact that perpetrators of violence in conflict, including the military, police, and other state security forces, must be tried in civilian courts. 56 As one participant emphasised this advocacy has continued during COVID-19:

“During COVID-19 we had two meetings to review the PoVAW Bill […] the voices of ethnic women organisations have not been included or informed during the drafting stages […] there are many things that are not considered in the bill’s definitions and it also fails to discuss violence in armed conflict and how perpetrators will be prosecuted. We recommend that such things should be added.”

56 Ibid.
In addition to discussion of the PoVAW Bill, several participants highlighted that high numbers of legal cases related to VAWG are not being taken to court or prioritised, and this has been exacerbated during COVID-19. Even where police are informed of cases, they are not making prosecutions. As summarised:

“Normally, we are called to come to court every week, now it has changed to two or three weeks. The court is giving priority to other major cases like murder, as they don’t consider GBV as a major case. And the police are not willing to accept these cases even if they have been informed.”

Evidence from previous health crises indicates that VAWG is likely to be a ‘lasting legacy’ of the COVID-19 pandemic.\(^{57}\) Without comprehensive and integrated solutions to VAWG during COVID-19 there will be long-term impacts on survivors, their families and communities. There will also be significant social and economic impact. As UN Women emphasise, when the public, private and social costs of violence are tallied, the estimated total is a staggering two per cent of global gross domestic product (GDP).\(^ {58}\) However, ultimately, responding to COVID-19 and to escalating and intensifying VAWG at scale, requires ‘a global effort and national responses that value the expertise of women’s rights organisations working to tackle violence. These need to be centred on social justice, international solidarity and obligations under human rights law’.\(^ {59}\)

It is also clear that women and girls have limited access to technology as a source of information, prevention and protection against violence:

“Now Facebook is a much more a public/masculine space. Because of that there is much more harassment of women on FB, with women being sent unsolicited pictures. There’s a general perception of it being much more dangerous for women.”

Addressing the digital divide between genders, could prove to be an important tool to inform, prevent and respond to VAWG, as well as for women’s empowerment.


\(^{58}\) Ibid.

3.4. Recommendation 4:

**Mental health and psychosocial support (MHPSS).** The government of Myanmar and the international community should ensure that mental health and psychosocial support, including specialist trauma health services, are integrated and resourced as part of a comprehensive public health response to COVID-19. This should involve specific consideration of vulnerable groups of women and girls in both conflict and non-conflict areas, including internally displaced women; pregnant and lactating mothers; single (young) women and girls; divorced women; women from minority groups; women-headed households; widowed women; older women; and those with pre-existing mental and physical disabilities.

Specifically, the government and the international community should:

- Ensure the integration of MHPSS within general health services, quarantine facilities and within pre-existing structures in the community, such as schools and community centres.
- Roll-out a comprehensive MHPSS training and support package for frontline COVID-19 responders, including volunteers in quarantine centres.
- Invest in comprehensive initiatives that bring together psychosocial support, recreational activities and livelihood strategies, focusing on strengthening social networks, positive routines and self-care.

Mental health remains an under-recognised and under-resourced area globally, despite it being one the main causes of the overall ‘disease burden’ worldwide. A survey by the World Health Organization (WHO) earlier this year asserted that the COVID-19 pandemic has ‘disrupted or halted critical mental health services in 93 per cent of countries worldwide while the demand for mental health is increasing’. In addition, community-based psychosocial support activities have been severely impacted with many countries seeing groups, associations and community-based initiatives unable to convene and offer their usual support.

As the Inter-Agency Standing Committee (IASC) highlights, in any epidemic or pandemic, it is ‘common for individuals to feel stressed and worried’. However, there are specific stressors associated with COVID-19 that may cause particularly high levels of anxiety, including the risk of being infected and infecting others, and concerns over

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the deterioration of physical and mental health of vulnerable individuals if caregivers are placed in quarantine and other care and support is not in place. While mental health is a global and cross-gender issue, evidence reveals that women and girls may be disproportionately impacted. New evidence highlights that COVID-19 has triggered a ‘mental health crisis for women around the world’ in particular after polling 10,000 people in 40 countries about the repercussions of the public health crisis, and finding that 27 per cent of women reported an increase in problems linked to mental illness, in comparison to only 10 per cent of men. This report highlights that women drew attention to unpaid care burdens as a source of their stress, in addition to worries about livelihoods, food and healthcare. Additional research highlights that women and girls continue to ‘bear the emotional brunt of the crisis’, particularly as they represent the majority of frontline health workers, which creates specific ‘mental strains’ and demands. They are also more likely to work longer hours and absorb additional caring responsibilities.

In Myanmar, while the National Strategic Plan for Prevention and Control of NCDs (2017-21), highlights mental health as a priority area, mental health provisions and services remain underfunded and inadequate. This is particularly concerning considering that the suicide rate in-country increased by 2.63 per cent in 2019 with 4,189 cases in total, which resulted in Myanmar being ranked 94th globally. According to Myanmar Police Force’s report, 884 suicides cases occurred from January to June 2020 and were connected to the social and economic impacts of COVID-19. The government’s response to the mental health crisis so far has been seen as lacking, and falls outside of the CERP remit. While there have been some investments in supportive responses by the Department of Social Welfare such as MHPSS hotlines for people in quarantine centres, these investments have been small and not accompanied by specialist trauma healing services, as summarised by one participant:

64 Ibid.
65 It’s important to note that there may be lower reporting rates around mental health for men; in a recent CARE study, 27 per cent of women reported an increase in challenges associated with mental illness, compared to only 10 per cent of men, see: CARE (2020) ‘Financial Insecurity, Hunger, Mental Health are Top Concerns for Women Worldwide’, https://care.org/news-and-stories/press-releases/financial-insecurity-hunger-mental-health-are-top-concerns-for-women-worldwide/; See also: Ahmed, A. (2020) ‘Why has Covid-19 impacted the mental health and wellbeing of women the most?’, Kings College London, https://www.kcl.ac.uk/news/why-has-covid-19-impacted-the-mental-health-and-wellbeing-of-women-the-most
67 Ipsos MORI (2020) ‘6 in 10 women finding it harder to stay positive day-to-day due to Coronavirus’, https://www.ipsos.com/ipsos-mori/en-uk/6-10-women-finding-it-harder-stay-positive-day-day-due-coronavirus
“There are no trauma healing services or support for the mental health of women. It is really needed.”

As described, high rates of VAWG have been connected to the poor mental health and lack of confidence of male perpetrators. As emphasised by one participant:

“The jobless condition made men feel depressed and also being locked in their homes made them feel like they didn’t exist. So, they abused their power over women.”

However, overwhelmingly, participants highlighted that women experiencing and surviving VAWG – namely IPV in the context of these discussions – were forced to live in fear and isolation, and were unable to seek support and refuge, even if they were aware of these services (which was understood to not be common). As one participant highlighted:

“During the lockdown period, women experiencing violence had nowhere to go and nowhere to escape from.”

Research participants further asserted that women and girls living in conflict settings may be more likely to experience a negative impact on their mental health – as participants described, not only do women and girls in these contexts have pre-existing trauma based on their witnessing and experiencing of acts of torture and violence, they are often less likely to access secure livelihood options, food and water for their families, and secure shelter, and are exposed to the risk of multiple forms of VAWG. As one participant explained:

“In the conflict-affected areas people – IDPs – need food but also psychosocial support because of the pre-existing conflict.”

Several participants also highlighted that the year-long internet ban in Rakhine and Chin states has left a large proportion of the population unable to access authoritative and accurate information on COVID-19. In addition, certain support services that could have provided online/remote support have been unable to do so, as summarised by one participant:

“CSOs are no longer able to provide women who are affected by the conflict psychosocial support during this period that could have otherwise been provided online (or in person before lockdown).”

Humanitarian crises and disaster cause significant distress at multiple levels, making it challenging for people to cope. An approach which prioritises MHPSS – strengthening the protective mechanisms, networks and relationships which are crucial in providing a safe environment for women and girls in families, the community and wider society to thrive and recover – will be essential as part of COVID-19 recovery plans to ‘build back better’.
3.5. Recommendation 5:

**Women’s livelihoods and economic rights.** The government of Myanmar and the international community should ensure that the gendered impact of COVID-19 informs priority investments in women’s livelihood opportunities and social protection within COVID-19 response and recovery efforts.

Specifically, the government and the international community should:

- Invest in alternative and protective livelihood options for women, women-headed households and women-led businesses, including emergency cash grants, and increased access to training and technology to continue to work from home and diversify their income. These measures would support women to become digitally literate and increase access to online market information.
- Ensure the rights of formal and informal female workers and migrant workers are respected and strengthened – including through working with unions – to ensure that working conditions are safe and compensation is fair and equitable. This should include mandatory requirements of employers to provide personal protective equipment (PPE) and uphold social distancing and COVID-19 regulatory measures.

Despite growing numbers of women represented in the formal workforce within Myanmar,72 a large portion of households still rely on men to provide the majority of income for families, with women maintaining responsibility of (unpaid) domestic and care work.73 However, things are changing, particularly in urban areas, where the female workforce participation rate reached 48.5 per cent in 2018. These increased participation rates have been largely connected to the growing prominence of the garment sector, with an estimated 90 per cent of garment workers in Myanmar being women.74 However, women have not been able to renounce their unpaid care work, leading to what is often described as a ‘double burden’ of paid and unpaid responsibility.75 COVID-19 has added an additional layer to the demand for unpaid care work on women. The restrictions put in place to curb the spread of the pandemic, such as the closures of schools and lockdown measures, have created additional hours of childcare. Coupled with women’s over-representation in informal employment, COVID-19 has resulted in many women losing their access to income and employment.76 Specifically, since the start of the pandemic, Myanmar has seen the closure of many garment factories, with restrictions on assembly and lockdown measures. This has had a disproportionate impact

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75 Ibid.
on women and girls, as the workforce within the garment industry is overwhelmingly female (an estimated 90 per cent), and workers are mostly young women, with a clear majority being between the ages of 16 and 23. Participants highlighted the importance of female migrant workers, who make important contributions to Myanmar’s economy. Most garment workers migrate to Yangon, with the largest ethnic minority group of workers being from Rakhine, at 19 per cent. Due to COVID-19 and factories closing, women returning to Rakhine and the IDP camps were seen to be particularly vulnerable and often ostracised, with no access to employment and often unable to meet their basic needs.

Interestingly, participants mentioned that women were using technology as an innovative way to diversify their livelihood options over lockdown periods, including online shopping, selling products online and expanding their customer base, as well as connecting with other women to share market information. Unfortunately, this avenue is not open to women in IDP camps, where internet use is banned, or to more economically vulnerable families who cannot afford the associated internet and electricity costs.

Participants noted that women are also exploring alternative livelihood options, such as agricultural and farming work. However, it was highlighted that women find this much harder than men, as it is less common for them to learn new skills or take on any managerial roles, with a participant highlighting:

“There are fewer opportunities for women to find a job due to previous discrimination and gender inequality within the society.”

Similarly, even if a woman is able to secure a job, participants noted that wages for women are consistently lower than their male counterparts, such that:

“Men are paid 8,000 kyat a day while women receive 6,000 kyat a day for the same work.”

Beyond economic insecurity, the pandemic has exposed women and girls to harm and risk in different ways. For example, as discussed in section 3.3, financial pressures, economic recession and job insecurity have exposed women and girls to different forms of VAWG, including IPV; child, early and forced marriage; and trafficking. In some circumstances, participants noted that women were forced into ‘transactional sex’ to help generate income and survive. This has particularly increased the hardship of marginalised women, such as informal female workers and sex workers, who have been subjected to an increase of violence during COVID-19:

78 Ibid.
“Because of economic hardship during COVID-19, some women from the urban slum area went to the sex industry to make income.”

Women may also be at increased risk of contracting the virus, as they represent up to 75 per cent of Myanmar’s health force. With lockdown being eased, participants also stressed that women would return to factories regardless of poor working and sanitary conditions, and risk getting sick. Women were forced back without adequate protections, as some factories did not provide personal protective equipment (PPE), such as masks and hand sanitiser, risking new outbreaks in factories among workers and family members living in proximity. As a participant emphasised:

“Instead of being concerned with contracting COVID-19, people are more worried about their daily survival and jobs. What are the options [women] have if all their livelihoods are gone?”

The concern that the government is not supporting its female workforce adequately was echoed by participants on multiple occasions. One participant referenced a study their organisation had undertaken, highlighting that 164 out of 250 women said they had not received any livelihood support from government and donors. Participants noted that despite the announcement by the Central Committee on Prevention, Control and Treatment of the Coronavirus Disease in Myanmar that people with no regular income would receive support from the government, factory workers who lost their jobs did not receive food aid. Similarly, although there was praise that the government conducted food distribution in the earlier months of the pandemic (during April and May), this effort was criticised for lacking clear criteria or an implementation strategy, often relying on local administration officials to identify beneficiaries with no guidance and therefore missing the most vulnerable households or households who were not registered. Women-led businesses need to be considered as well. Although CERP is focusing on the private sector, it lacks a women’s livelihood lens, with a participant highlighting:

“Some organisations like World Bank, Asian Development Bank and IMF have provided financial aid to the government to rebuild the economy... but those plans do not take into consideration the issue of gender.”

Similar to healthcare, the government and the international community need to consider a coordinated and integrated response to women’s livelihoods to mitigate the social and economic impacts of the crisis.

81 Ibid.
3.6. Recommendation 6:

**Conflict and displacement.** The government of Myanmar and the international community should recognise the specific experiences and needs of women and girls in conflict-affected states in Myanmar and provide tailored and contextualised responses to support them. These efforts should be accompanied by ongoing advocacy in support of a ceasefire, including working with, and funding, civil society, and WROs, to continue with their important activities to support this work.

Specifically, the government and the international community should:

- Prioritise women’s and girls’ access to a range of specialist support services in IDP communities, including sexual and reproductive health and trauma healing.
- End the internet shutdown across Rakhine and Chin states.
- Seek opportunities to negotiate and support a ceasefire, including working with, and funding, civil society, and WROs, to continue with their important activities, including ceasefire monitoring; contributing to civil society peace forums; and educating on the importance of peace and conflict transformation at the community level.

Myanmar has experienced internal conflict since it gained independence in 1948, with several ethnic and religious armed groups fighting Myanmar’s armed forces for ‘self-determination’. This has been referred to as the world’s longest ongoing civil war. Amid attempts to achieve peace, the early 2010s have been characterised by some of the worst armed clashes in Myanmar’s 60-year armed conflict. Despite numerous attempts at ceasefire, as well as the draft of the NCA in 2015 and calls by

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85 For the ethnic nationalities of Myanmar, the concept of self-determination has to be articulated and understood in the context of one country with many ethnic nationalities. The need, in fact, is to articulate a similar but separate set of principles of equal rights and self-determination that binds all the nationalities, including the majority Burman, as equal partners within a union. See: Kapi, S. (2020) ‘Self-Determination and Constitutional Reform in Burma’, The Salween Institute for Public Policy, https://www.salweeninstitute.org/home---self-determination-and-constitutional-reform-in-burma.html


87 The term peace process in Myanmar is generally used to refer to a sequence of high-level peace negotiations and associated consultations and other supporting institutions. This process began in 2011, under the government of U Thein Sein, and led to the Nationwide Ceasefire Agreement (NCA) in 2015. These negotiations are projected to lead to a permanent ceasefire, disarmament and demobilisation of non-state armed groups, government, and constitutional reforms: See: EMReF (2019) ‘The Role of CSOs in the Myanmar Peace Process,’ https://reliefweb.int/sites/reliefweb.int/files/resources/2nd-edit-the_role_of_csos_in_the_myanmar_peace_process-english_0.pdf


the international community for a peaceful end to the ongoing violence, these efforts have largely been unsuccessful.

Myanmar’s humanitarian and conflict dynamics coupled with the flow of returning migrants and high numbers of IDP present a range of challenges in the context of COVID-19. Humanitarian needs in Myanmar are driven by multiple factors including armed conflict and intercommunal violence that is aggravated by chronic poverty and protracted displacement in many parts of the country. Since 2018, there has been a significant upsurge in violence in Rakhine state after armed conflict broke out between the AA and the Myanmar military which escalated in early 2019. The conflict has led to a significant displacement of people fleeing violence.

An estimated 350,000 displaced people nationwide are deemed to be most at risk during the COVID-19 pandemic. Displaced people living in Rakhine, Chin, Shan, Kachin and Karen states face a double burden to protect themselves both from conflict and from the risk of contracting COVID-19. In response to COVID-19, the government and Myanmar military eventually agreed to a ceasefire to combat the virus, after initially refusing, following an appeal from civil society, the international community and EAOs. This outcome has been promoted as a gesture towards ‘trust-building’ within Myanmar’s peace processes. However, the ceasefire does not include Rakhine and southern Chin states, where the worst of the current conflict is occurring.

Research participants confirmed this has exacerbated the danger in conflict-affected areas, such as Rakhine, where entire villages are under attack, and there is a lack of concrete plans and commitments on how the government will respond. Some participants noted that in some cases there is a perception that the ‘prevention’ mechanisms implemented by the government could be seen as a political move to lock down some of the conflict-affected areas and as a means to cut off areas of access to armed groups. This was positioned in opposition to an approach which would look to address the deeper structural issues to the conflict, including ceasefire, and prioritise the well-being and support of people living in these communities. As one participant emphasised, the approach of lockdown would only exacerbate tensions:

“During conflict people have no desire to think of peace. They only care about survival. When you lock down a conflict affect area, it simply increases violence without a possibility for individuals to escape.”

As such there have been increased pressures on already traumatised and stretched communities, and specifically women and girls who live within IDP camps. Participants described the difficult predicament that these women and girls were in, uncertain whether to follow lockdown rules and potentially risk getting caught up in conflict, or risk contracting COVID-19 and violating lockdown restrictions, but ultimately fleeing from conflict. The additional presence of security forces as a protective measure from the government has also been met with caution and resistance, with participants highlighting the specific threats to women and girls and the risk of sexual violence and harassment perpetrated by these groups (see section 3.3). Many participants also highlighted the lack of access IDP communities had to support services, accurate information on COVID-19 (because of the internet ban) and testing kits. Participants underlined the need for the government response plans to more closely consider the burdens faced by women and girls in conflict, specifically as lockdown restrictions and military attacks make it difficult for the community to access the equitable healthcare they urgently need, as they face high risks of an outbreak due to the crowded living conditions:

“Gender mainstreaming is not taken into account in an active conflict response. The differential needs of women and girls remain de-prioritised.”

Participants also highlighted that COVID-19 had intensified tensions and prejudices against ethnic and marginalised communities in conflict-affected areas – especially displaced women and girls. The lockdown restrictions within conflict-affected areas have also been perceived by some participants as politically advantageous to politicians running for office in the upcoming elections in November, making it a period of heightened political interest. There seem to be concerted efforts to wilfully ignore the population of Rakhine state as this is viewed as politically advantageous to politicians running for office. The election campaign has had a negative impact on social cohesion, with an increase of hate posts on social media targeting specific groups. Returnees and migrant workers from Rakhine have been ostracised due to the fear of COVID-19, as the spread of misinformation has created the impression that they were spreading the virus. As one participant discussed:

“They do not want strangers or newcomers to come to their ward or township or neighbourhood. They are afraid of returnees from Rakhine state.”

In particular, COVID-19’s impact has heightened the vulnerabilities of women and girls in conflict-affected communities. The government’s response has largely failed to recognise the additional threats of COVID-19, coupled with internet restrictions and the threat of arbitrary arrest for alleged association with the AA. This has further impacted the freedom of movement and humanitarian support for conflict-affected communities within Myanmar. The impact has been especially harsh on those living in IDP camps and informal IDP settlements, as armed clashes and lockdown restrictions have reduced the availability of effective humanitarian aid.
4. Partners

**Enlightened Myanmar Research Foundation (EMReF):** EMReF is an accredited non-profit research organisation dedicated to carrying out studies in the fields of livelihoods, governance, political economy, social relations, gender, politics, rule of law and justice. Its purpose is to provide information and evidence-based policy recommendations for different stakeholders such as international organisations, CSOs, political parties, media, private sector, parliament and government agencies which are working on equitable and inclusive socioeconomic development and promoting democratic governance in Myanmar.

EMReF has been extending its role in promoting political awareness and participation of citizens and CSOs in policy-making through providing reliable and trustworthy information on political parties and elections, parliamentary performance and development policy issues. As a current foundation step, EMReF has been developing an information mechanism which includes three main functions – collecting information, analysing it and distributing it to the public via the web, on social media. Meanwhile, EMReF has been using other conventional measures, such as providing social research training to young people, local CSOs, political parties and elected MPs, in order to promote the practice of collecting reliable evidence and using it in developing and evaluating policies.

**ActionAid Myanmar:** In 2006, ActionAid started working in Myanmar, with a specific focus in 12 states and regions of the country. ActionAid Myanmar focuses on four key areas of work: 1) Women’s rights, with a focus on women’s economic empowerment and social enterprise; 2) Emergencies, specifically cultivating women’s leadership and representation in humanitarian responses; 3) Resilience, with a focus on sustainable and resilient agriculture, as well as disaster and conflict vulnerability reduction and resilience; and 4) Governance and youth, working towards strengthening civil society participation and action. ActionAid Myanmar uses a human rights-based approach within all their programming to ensure that the voices of the most vulnerable – particularly women and youth in conflict-affected areas – are heard. ActionAid Myanmar works with women-led CSOs and networks to protect civic and political rights, as well as to ensure that women’s and girls’ points of views are included in the country’s democratic journey.

**ActionAid UK:** ActionAid UK is an international charity that works with women and girls living in poverty. Their mission is to achieve social justice, gender equality, and poverty eradication by working with people living in poverty and exclusion. As a proud member of the ActionAid International Federation, ActionAid UK supports the federation on mobilising resources, influencing for change and supporting humanitarian action. In 2017, ActionAid UK launched a five-year strategy to help achieve this: Together, with women and girls, with a focus on 1) Significantly reducing the risk of violence against women and girls; 2) Fighting for women’s equal rights to economic opportunities and 3) Prioritising women’s and girls’ rights and leadership in humanitarian crises. ActionAid UK’s vision is for a just, equitable and sustainable world in which every person enjoys the right to a life of dignity, freedom from poverty and all forms of oppression.

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97 https://myanmar.actionaid.org/
98 https://www.actionaid.org.uk/
Gender Action for Peace and Security (GAPS): GAPS is the UK’s Women, Peace and Security (WPS) civil society network. We are a membership organisation of NGOs in the fields of development, human rights, humanitarian assistance and peacebuilding. We were founded to promote WPS, including United Nations Security Council Resolution (UNSCR) 1325. GAPS promotes and holds the UK government to account on its international commitments to women and girls in conflict areas worldwide.

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