The Republic of the Union of Myanmar



The 15th ASEAN-Japan High Level Official Meeting on Caring Societies

Action for workers who need support for childcare

October31-November2,2017 Fukuoka,Japan

Myanmar delagates

Country Profile

- Myanmar is the largest country on mainland South-East Asia with a total land area of 676,577 sq.km
- Total Population is 50.279 million. Male(24.228),Female(26.051)



Present social work practice

- (1) Early Childhood Care and Development Services.
- (2) Children and Youth Welfare Services
- (3) Women Welfare services
- (4) Care of the Aged
- (5) Rehabilitation of the Disabled Persons
- (6) Rehabilitation of Ex Drug Addicts
- (7) Grants in Aids to Voluntary Organizations
- (8) Public Welfare Services
- (9) Repatriation, Reintegration and Rehabilitation of Victims of Trafficking
- (10) Social Protection Services

- The Focal Ministry of Child's Rights and ASEAN Women and Children
- Child Welfare Services are being implemented
 - Running the (7) Residential Nurseries (265) children
 - Running the (103) Pre- Primary Schools (14876) children

Cash and Kind assistance to (986) Voluntary Pre-Primary
 Schools (Teacher Salary and Teacher's Training) 61khs for (2)
 teacher's salary and 11kh for teaching aids to (1)
 Voluntary Pre-Primary School per year. (35318) children

- Capacity building for Pre school teachers and Care givers.
- organize the Parenting Education sessions in Pre schools.
- Organizing the (86) Mother Circles in (25) Communities in Regions and States. (1472) children.

4

- Conduct the Child Development Trainings to the Mothers from Communities organized Mother Circles.

- To expand Parental Education and Community based on ECD program to promote Child Care rearing practices in Communities.
- Every child from Residential Nursery shall have the right to be adopted accordance with the Child Law article 17(a) (580)children from Residential Nurseries are adopted by the parents.
- Assistance to mothers with multiple births (3 or more) cash benefit 5 lakhs for (1) mother. (36) mothers.

Early Chidhood Intervention Services

- All of Myanmar's vulnerable children from birth to five years of age with developmental delays, malnutrition, disabilities and other special needs are able to acess high quality ECI services in order to enjoy their rights and achieve their full development potential.
- Awareness program on ECI in State and Region by implementing National Strategic Plan for Early Childhood Intervention (2017)

Current Policy and Legislation on Children

The Child Law (1993)

The Law related to Early Childhood Care and Development(2014)

Rules related to the Early Childhood Care and Development(2015)

Policy on Early Childhood Care and Development(2014)

Myanmar National Social Protection Strategic Plan(2014)

National Strategic Plan for Early Childhood Intervention(2017)

Minimum Standard on Early Childhood Care and Development

Minimum standard of Care and Protection of children in Residential Facilities.(2017)

Social Protection Services

Flagships of National Social Protection Strategic Plan Maternal and Child Cash Transfer Program (Chin, Narga, Rakhine)

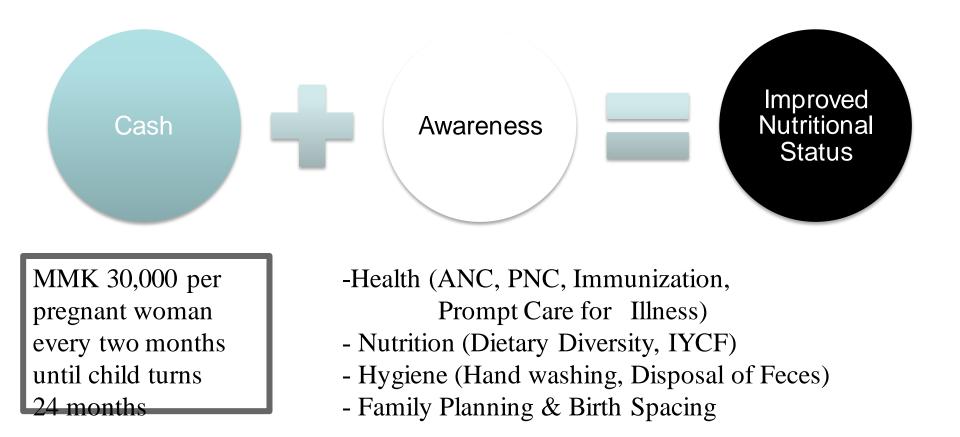
- Child Allowance (3-15)
- Disability Allowance
- School Feeding
- *Public Employment, Skill Development, and Work Place Safety
- Older People Self-help Groups
- Social Pension
- ***Integrated Social Protection Services**

Flagship Program: Maternal and Child Cash Transfer Program(Cash allowance for Pregnant Women and Children up to age two) as pilot project in Chin, Narga and Rakhine Chin (Livelihood and Food Security Trust Fund- LIFT funding) - 4.8 million Total population under 16 - 46.18% of total population -31% of children- under weigh - 7.8% Person with disabilities Rakhine (Government budget 2018-2019) - 3.1 million Total population under 16 - 31.1 % of total population -50 % of children- under weigh - 5.3% Person with disabilities Narga (Government budget 2018-2019) Total population - 116828 Under 16 - 40.7 % of total population

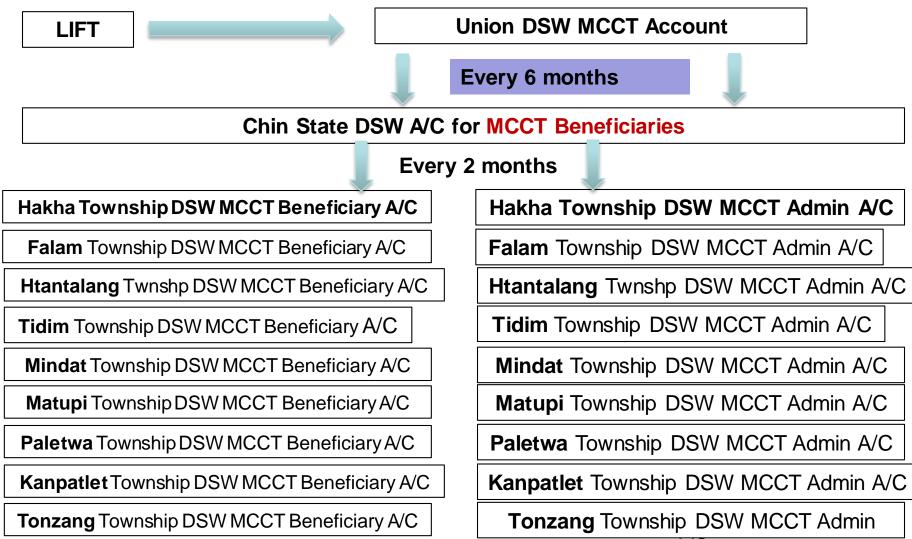
Institutional Arrangements for MCCT Programme Implementation

Union	DSW Programme Implementation Team			
State	MCCT Programme CoordinatorDSW State DirectorState MCCT CoordinationTwittee			ctor
District	MCCT Assistant Programme Coordinator			
Township	DSW Case Managers	Township GAD Officer		Township SP Committee
Village/Ward	Village/Ward Adminis Village/Ward Social	strator Auxiliary Midwife Protection Committee		

The MCCT Programme: A Two-Pronged Strategy for Improved Nutritional Status of Mothers and Children



DSW Cash Flow Arrangements for MCCT Programme Implementation (Union to Township)



Distribution of Cash with the assistance of the GAD and its network of village/ward administrators

Pregnant women self-present for registration at the village administrator's office

Registrations are sent to Township/District/ State/Union DSW for review at the end of every month Requisite funds for beneficiary payments are transferred to township MCCT accounts every two months

Beneficiaries are paid at the village administrator's office every two months



Village administrators collect funds from the village tract



Village tract administrators collect funds from the township GAD office

Flagship Program: Maternal and Child Cash Transfer Program(Cash allowance for Pregnant Women and Children to age two)

as pilot project in Chin, Narga and Rakhine

*A nationwide universal cash allowance for all mothers of their pregnancy .the allowance will cover all children to age two.

*The goal is to provide expecting mothers and young children with additional resources they can use to provide for their basic needs, including nutritional needs. The impact on the well-being of children during these critical formative years is expected to be substantial.

*Each beneficiary would be provided an allowance of MMK 15,000 per month.

✤ The programme will be implemented nationwide. MSWRR will be the leading agency. By 2017, some 2.25 million women and children will be covered.

✤In Chin State, provided an allowance of MMk15000per month to 6635 pregnant women and 635 children.

Present support for mothers, working & raising children in health sector

- Providing proper antenatal care
- Promoting skilled and institutional delivery and post natal care
- Expansion of post-abortion care and quality birth spacing services
- Ensuring Emergency Obstetric Care
- Providing Essential Newborn Care
- Strengthening adolescent reproductive health
- Promoting male involvement in reproductive health
- Focusing cervical cancer screening, early diagnosis and treatment
- Promoting referral system and community volunteers

Working mothers in Myanmar

Demographic Health Survey in Myanmar 2015

- more than half of women age 15-19 and about 2/3 of older women are currently employed.
- women are more likely to work if they are divorced, seperated or widowed than if they are married (78% vs 64%)
- Women with no living children are more likely to be employed (69%) than more with children(62% to 66%)

•Women in rural areas are more likely to be employed than those in urban areas(69% vs 61%)

•In urban areas Professional, technical or managerial occupations account for highest proportion of women 45% with more than secondary education.

Present support for mothers, working & raising children in childcare leave .

- According to the law of civil servants, maternity leave six month with full salary after confinement.
- According to the law of 2012 Social Security Law, the father who is a inured is entitled to enjoy the paternity benefit for confinement of his wife 15 days leaves for infant care with 70% of average wage of previous One year for his insured wife.
- If his wife is uninsured, he is entitled to enjoy the above the paternity benefit with 50% of average wage of previous One year.



Thanks for your kind attention