GENDER ANALYSIS (SUMMARY)

A. Progress and Key Challenges

1. Myanmar ranks 96 out of 146 countries in the 2011 Gender Inequality Index (GII), ahead of Cambodia and Lao PDR, ranked 99 and 107, respectively. It has achieved gender parity in education with regard to enrollment ratios of girls and boys in primary and secondary education. However, disaggregated analysis points to gender disparities in some of the poorest rural areas. Women in Myanmar enjoy equal rights in inheritance laws and equal marital property rights in the case of divorce. However, patriarchal cultural values related to women’s roles and responsibilities still shape familial relationships, contribute to the gendered division of labour and limit women’s participation in decision making at all levels. Key issues of concern include: high maternal mortality ratio and insufficient access to reproductive and basic health services; low levels of women’s participation in public decision making and in the labour market, increasing HIV among women and lack of reliable and sex-disaggregated data across all sectors which hampers evidence-based policy and programme interventions. Gender disparities are more marked in rural areas and amongst some ethnic groups.

2. Education: Myanmar has reached gender parity in education with girls accounting for 49%, 50% and 53% of total primary, lower and upper secondary school enrollments in school year 2010/11. However, there remain challenges, especially at the secondary and TVET levels. While a marginally larger share of girls (58.6%, versus 58.3% of boys) age 10-15 is in secondary school, the share of girls out-of-school is also slightly higher (30.5%, versus 29.8% for boys). Girls’ access to education appears to be strongly affected by constraints arising from their social class, ethnicity, linguistic background or whether they come from rural or urban locations. There are also disparities between states with the lowest ratio of girls to boys in secondary education found in Rakhine (70%) and Bago (79.7%) states. Poverty also more strongly affects female dropouts: for the poorest quintile, the share of girls out of school is 7 percentage points higher than for boys. A slightly higher proportion of girls are also out of school in rural areas. Multiple Indicator Cluster Survey 2009-2010 highlights that education of the mother is positively linked to children’s school attendance. While education data are limited, there is at least some evidence to suggest that distance to schools, language of instruction, gender stereotypes and lack of gender sensitive and locally relevant curricula and teaching methods and a lack of qualified teachers in remote areas pose obstacles for girls and boys attaining an education. In addition, while females outnumber males in post-secondary education, their labour force participation remains very low. This indicates a mismatch of skills attained and labour market needs, as well as gender discrimination in types of study based on cultural stereotypes related to types of skills /occupations suitable for women.

3. Health: Myanmar has a high maternal mortality rate with 240 deaths per 100,000 live births and is unlikely to meet the MDG target. Postpartum haemorrhage, eclampsia and complications from unsafe abortions are the leading causes of maternal deaths, according to the government’s 2006-2011 National Health Plan. Abortion is illegal in Myanmar and nearly 10

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2 Eighteen percent of adult women have reached a secondary or higher level of education compared to 17.6 percent of their male counterparts.
3 Initial Assessment of Post-primary Education in Myanmar (ADB draft for discussion) 21 May 2012.
4 Female students comprise roughly 60% of higher education enrollments in school year 2010/2011.
5 Integrated Household Living Conditions Survey in Myanmar (2009-2010).
percent of all maternal deaths are abortion-related, which is often undertaken by non-trained attendants. In addition there is a roughly 20% un-met need for contraception amongst married women, which may also contribute to the abortion practices. Overall, 78% of births were attended by a skilled birth attendant, in 2010. However there are significant differences between the poor and non-poor, at 69% and 81% and rural and urban residents, at 74% and 93% respectively. Around 83% of women obtain ante-natal care, with differences in access between poor (77%) and non-poor (86%) and rural (81%) and urban (93%) residents. Seventy-six per cent of deliveries take place at home, where nearly 90 per cent of maternal deaths occur. A large majority of deaths occur in rural areas, with issues of access, road conditions, poverty and under-service facilities as contributing factors. Myanmar also has a high adolescent fertility rate at 16.9 percent, mainly as a result of lack of sex education. Next to Thailand, HIV/AIDS prevalence is highest in Myanmar. Increasing numbers of women are contracting HIV. Women’s vulnerability to HIV is increased by high-risk behaviour of their spouses or partners as well as their inability to negotiate safe sexual practices. Nearly 3 percent of new HIV infections may be attributed to mother-to-child transmission. A report of the desk review of research on Gender and HIV in Myanmar highlighted that factors which may limit women’s access to HIV services are related to their lower status in the household, lower literacy rate, less access to health information, and exclusion from decision making in household health action and expenditure, as well as stigma and fear of ostracization by the community.

4. **Water and Sanitation:** Access to safe drinking water was at 70% in 2010. However, there is disparity in access between poor (63%) and non poor (70%) and between rural (65%) and urban (81%) residents. According to MICS 2009-2010, among the poorest households only 10.5 % have water on their premises and as many as 17.7% spend 15-30 minutes to collect water. Access to improved sanitation was at 79% in 2010. However, there are stark differences in access between the poor and non poor at 72% and 82% respectively and moderate differences between rural and urban residents at 77% and 84% respectively. Women are highly affected by poor access to quality water and sanitation facilities as they are primarily responsible for tasks related to household water and sanitation, taking care of sick children affected by water-borne diseases and community environment improvements.

5. **Electricity:** Overall access to electricity was at 48% in 2010. However, there are large differences in access between the poor (28%) and non –poor (55%) and between rural (34%) and urban (89%) residents. Women suffer the most from lack of access to electricity primarily due to high economic and health costs associated with using biomass sources of energy. With no access to electricity, women need to spend significant amounts of time during a day transporting fuel and cooking often takes longer. Access to electricity reduces women’s time burden, freeing up their time for economic activities which support women’s economic empowerment and improve their well-being and quality of life.

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11 United Nations General Assembly Special Session on HIV/AIDS, (UNGASS), 2010
6. **Economic empowerment:** Female participation in the labour market is significantly below that of men, at 63.1% compared to 85.1% for men. The share of women in paid employment in non-agriculture sector has gradually increased from 41.3% in 2005 to 44.7% in 2010 (with variations across states/regions). The data reflects women’s limited access to labour markets in industry and services. A wide gap remains between men and women in higher ranks of paid employment, with women concentrated in lower ranks and lower-skilled jobs. Women comprise about half of all staff in state administrative organizations and Ministries, however, they are concentrated in lower-level positions. In 2008-2009, they occupied only 31.7 percent of senior-level posts (Deputy Director and above). Despite legal provisions for equal pay for men and women, disparities in wages exist. For similar types of jobs, men earned an estimated income of US$1,043 in 2007, while women earned only US$640.48. Overall, women provide unpaid, largely “invisible” and unrecognized care work at home, in addition to their paid work in public sphere. Many women from Myanmar migrate to neighboring countries in search of better-paid jobs. Most Myanmar female migrant workers end up as low-skilled industrial, agricultural or domestic workers in neighboring countries, often in exploitative workplaces (including those where they are at risk of sexual exploitation). A study on migrants residing in Chiang Mai, Ranong and Mahachai in Thailand revealed that unmarried women worked largely in factories and as domestic servants and unmarried men commonly worked on fishing boats. Women consistently received lower salaries than men, even in similar occupations. In Chiang Mai males earned 5.4% more than females whereas in Ranong salaries are 2.1 times higher for males.

7. A gender impact study on women’s participation in self help groups and micro-finance found that even women who have had poor or moderate livelihood outcomes have experienced significant gender change in areas such as decision-making, self-confidence, increased social capital and increased status in families and communities. This shows that capacity building, community mobilization, affordable credit have significant impacts on increasing women’s participation in economic decision making and access to income.

8. **Public decision-making:** In Myanmar, only 4% of parliamentary seats are held by women. After the 2010 elections, the proportions of women are 4.3% in the People’s Assembly, 4.9% in the National Assembly and 3.8% as regional and state representative. There are only 43 women among 1104 elected representatives. These figures are very low compared to Cambodia (21.1% in the Lower House), Lao PDR (25.2%) and Vietnam (25.8%).

9. **Gender based violence:** The CEDAW Committee expressed concern over widespread domestic violence and sexual violence, including rape, which appears to be accompanied by a culture of silence and impunity. Myanmar does not have specific legislation against gender based violence, although there are Penal code provisions against sexual assault and rape. Public awareness of the issue is low. A combination of traditional cultural beliefs, low social value of women, women’s lack of knowledge of their rights, insufficient support services (legal, health, counselling, shelter, etc.) collude to ensure that cases are under-reported and settled out

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22 Committee on the Elimination of Discrimination against Women, CEDAW/C/MMR/3.
of court. Trafficking is another serious challenge, with Myanmar women, children, and men trafficked to Thailand, China, Malaysia, South Korea, and Macau for sexual exploitation, domestic servitude, and forced labour. The Myanmar government made trafficking a national cause since 1997 and enacted the Anti-Trafficking in Persons Law in 2005. The government has taken measures in collaboration with key development partners to combat trafficking, including protection and reintegration of trafficked women, mechanisms to prevent trafficking of women and establishment of collaboration and coordination amongst relevant ministries to uncover trafficking cases and take legal action against perpetrators.

10. **Institutional Assessment:** Myanmar’s national machinery for the promotion of gender equity includes the Ministry of Social Welfare, Relief and Rehabilitation (MSWRR), with the Department of Social Welfare as the focal point for gender issues; the Myanmar National committee for Women’s Affairs (MNCWA) and the Myanmar Women’s Affairs Federation (MWAF). The MWAF was formed in 2003 to organize women all over the country to carry out activities to ensure security and advancement of women. It has networks at the different levels of administration from the state/division down to the district and township level. MWAF is a GONGO but operates under MSWRR, is government funded and staffed. MWAF implements a national plan of action drawn from, but not including all twelve areas of the Beijing Platform of Action. However, the above agencies lack critical capacity, resources, and institutional support to carry out their mandate. In addition, the institutional capacity is limited in key line ministries with regard to mainstreaming gender in national policies, plans and programmes. These require additional support to address priority commitments for gender equality, including issues of maternal mortality, sexual and reproductive health and poverty alleviation.

11. Myanmar is signatory to a number of international conventions relevant to gender and development, including the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the Convention Against Transnational Organized Crime (CTOC), the Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children (TIP), Convention on the Rights of the Child and the Protocol to Combat the Smuggling of Migrants by Land, Sea and Air (SOM).

12. **ADB Gender Strategy:** Strategy 2020 reaffirms ADB’s commitment to gender equity and the empowerment of women, highlighting gender equity as a key driver of change. Research and experience over the past decade confirm the centrality of gender equity to poverty reduction, improved living standards, and sustainable, inclusive economic growth. Gender mainstreaming in loan and grant operations involves building in special design features and strategies to facilitate and encourage women’s involvement and to ensure tangible benefits. ADB will pursue gender equality in Myanmar by adopting gender mainstreaming across all sectors. Project-specific gender action plans (GAPs) with gender design features, targets, and indicators will promote women’s participation and access to benefits across ADB operations in Myanmar.