

# Myanmar

*Regressed, Stalled, or Moving Forward?*



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*A Report of the CSIS Global Health Policy Center and the  
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## Regressed, Stalled, or Moving Forward?

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The burning question in Washington about Myanmar's transition is: are things regressing, stalled, or moving forward?

The short answer is all of the above.

The Union of Myanmar is in the third year of a historic transition. Like other comparable transitions of countries emerging from decades of misrule and repression, the process is exceedingly complex and cannot be reduced to simple, categorical, or fixed characterizations. Change is fluid and nonlinear, spread across the multiple, interlocking sectors: health and development, human rights, constitutional change, electoral preparations, the search for peace, and economic reform and revitalization. A transition scorecard paints a mixed picture that is simultaneously positive, bewildering, and downright frustrating.

Myanmar elicits a full range of emotions and interpretations. The current process unfolding calls for humility, patience, realism, and the long view. A rush to snap judgments is ill-advised. For better or worse, Myanmar is presently beset with turbulence and uncertainty.

Between August 17 and 22, 2014, the Center for Strategic and International Studies (CSIS) organized a delegation to examine the status of the Myanmar transition in three key dimensions: health and development; political reform and governance; and conflict resolution with the country's minority groups. The delegation focused in particular on the supporting role the United States plays in advancing reforms, bilaterally and multilaterally.

The visit was organized jointly by the CSIS Global Health Policy Center and the Sumitro Chair for Southeast Asia Studies, and included congressional staff as well as representatives of the Uniformed Services University of the Health Sciences and the Bill & Melinda Gates Foundation. The visit entailed meetings in Yangon, Naypyidaw, and Mon and Karin states with senior Union government officials, opposition leaders, parliamentarians, officials in Mon and Karin states, journalists, nongovernmental groups, international organizations, independent experts, and the private sector. U.S. Ambassador Derek Mitchell and the U.S. embassy staff were exceptionally generous in sharing their insights. (The delegation's itinerary is included as an appendix.)

What follows is a summary of CSIS's observations and thoughts on strengthening U.S. support for Myanmar's transition. It attempts to synthesize, succinctly and fairly, what was learned through rich conversations with a multitude of individuals

representing diverse interests and perspectives. It builds on the August 2013 CSIS delegation, which concentrated on the health sector and resulted in the study “Rehabilitating Health in the Myanmar Transition.”<sup>1</sup>

## Hopeful Signs

On the positive side of the ledger, the delegation witnessed a widely shared optimism, emanating from virtually every corner of Myanmar society, including across Myanmar’s diverse political interest groups. Undeniably, popular sentiment is that the nation is turning a corner and that major, enduring changes in governance, development, and conflict resolution are within reach. Though national elections in November 2015 are still more than a year away, the delegation was impressed that the electoral season is already in full swing and has become the central prism driving parties’ behavior as well as popular expectations.

Also impressive is the palpable, widespread hope that a true national ceasefire with the armed ethnic groups may be achieved in the months ahead, something that has been elusive during multiple previous negotiations. The ruling Union Solidarity and Development Party (USDP), the opposition National League for Democracy (NLD), the armed ethnic movements, and the military have reportedly agreed in principle in the ceasefire negotiations to seek the goal of establishing a federal system, with considerable state autonomy. Once such an accord is reached, long-term political negotiations are to ensue.

There are also signs of significant progress in the health sector. Myanmar citizens have begun at long last to see important gains in HIV/AIDS prevention, treatment, and care; control of malaria, including action to combat drug-resistant forms; and maternal, newborn, and child mortality. The government has quadrupled its budgetary commitments to health (albeit from a stunningly low base), promised additional increases, and launched in August 2014 a wholesale reform of the Ministry of Health that holds the promise of more effective delivery of services to far more local communities. Major international players, including the Global Fund to Fight AIDS, Tuberculosis and Malaria, the World Bank, donors to the Three Millennium Development Goal Fund (3MDG), and others are coming forward with essential multiyear support.

## A Charged, Ambiguous Transition

Optimism and signs of concrete progress are leavened, the delegation observed, by considerable apprehension and skepticism, borne of years of repression, suspicion and disappointment, awareness of the limited capacities in Myanmar, and the complex process of change itself.

Power is still deeply skewed in favor of the incumbent military-dominated, quasi-civilian regime. It is not yet clear that the military’s overwhelming dominance will diminish significantly as the current government approaches the end of its formal tenure in April 2016. A stall in decisionmaking within the government on critical

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<sup>1</sup> J. Stephen Morrison et al., *Rehabilitating Health in the Myanmar Transition* (Washington, DC: CSIS, November 2013), [http://csis.org/files/publication/131030\\_Morrison\\_MyanmarHealth\\_Web.pdf](http://csis.org/files/publication/131030_Morrison_MyanmarHealth_Web.pdf).

constitutional, electoral, and human rights issues—perhaps short term, perhaps not—has become apparent. This likely stems from an internal struggle between two wings of the government. On one side is an “establishment” wing and its allied business cronies, who fear giving up too much (with the risks of losing dominance and privilege) and opening themselves to retributions. On the other side reportedly are the “reformists,” allied with President Thein Sein, who according to some observers appear willing to compromise enough to continue to build credibility, internally and externally, as a liberalizing autocratic regime, and yield some space for power to the opposition leader Aung San Suu Kyi’s NLD and the ethnic states. That is without, however, going so far as sacrificing ultimate control.

How far, and how quickly, will or can the government move in this multilayered process of legal reform, electoral preparations, constitutional changes, and talks over a national ceasefire? In the delegation’s view, it is far too early to tell. The very nature of momentous transitions such as the one in Myanmar is that they lurch forward and backward, uncertainly, as critical, high-risk decision points approach, often, it seems, without prior internal agreement within the government on its preferred course of action.

The delegation heard from the NLD and ethnic parties that they vigilantly and anxiously await proof that the rules of competition will be fair. They seek enlightened constitutional changes; that the Union Election Commission establish credible voting regulations and procedures allowing for free and fair elections in 2015; and that guarantees and further political compromises secure a national ceasefire and usher in a true political dialogue.

Each opposition party or faction has to assess its own bottom line: Commit fully to the electoral process and the search for a lasting peace? Withhold judgment for another few months? Edge toward an electoral boycott and keep a distance from the peace negotiations? Each awaits pending constitutional and electoral decisions. Each struggles with its own institutional weaknesses, as compared with the powers of the incumbent government, and its own internal debates over near and long-term constitutional reforms and the definition of “free and fair” for national elections in late 2015.

Expectations are high, often unrealistically so. Political sensitivities are high. The advent of the electoral cycle and prospects of a ceasefire both stir hope and amplify, not diminish, political tensions and differences. They substantially raise the stakes for everyone and move the parties toward constitutional and electoral thresholds that, if crossed, will exponentially expand the political and institutional demands upon the government and other parties for implementation. And these transitions will unfold in a context of weak capacities, fatigue following three years of struggle over reform, and a legacy of deep distrust and fragmentation.

## The Government’s Disturbing Actions—and Inactions

In the meantime, the delegation explored through multiple conversations the bad things that continue to happen. Most lie at the door of the Myanmar government.



**Rakhine.** The situation in the country's northwestern state of Rakhine is both a horrible humanitarian catastrophe and a paralyzed political crisis that has damaged the government's reputation and image abroad. The situation will cause further damage if left unresolved. For months, the Myanmar government has abdicated its leadership responsibilities, passively standing on the sidelines as worsening violence drove Médecins Sans Frontières (MSF) and the United Nations from the scene in March 2014, escalating the humanitarian and human rights emergency for many of the state's estimated 1 million Muslim Rohingya.

The government has recently appointed a new chief minister of Rakhine, linked to the Union government's powerful inner circle, who has circulated a draft plan of action that puts forward ideas for peaceful coexistence, a path to citizenship, and resettlement. It remains to be seen if the government will exercise sufficient leadership to move these ideas forward and defuse the crisis.

Massive human suffering continues. For the roughly 140,000 Rohingya in Rakhine who were rounded up into barbed-wire-enclosed camps after ethnic violence erupted in mid-2012, the situation became desperate after MSF's precipitous departure in March 2014. Many camp residents suffer from diarrhea and respiratory illnesses in the crowded living conditions. For the sick to exit the camps to see a doctor, they must first obtain a referral by a government doctor and reportedly often must also bribe the security guards.

Since March, MSF and the United Nations have been unable to safely and legally resume their critical operations. In September, the government finally signed a memorandum of understanding with MSF that established a new framework for its medical activities in the country, including in Rakhine. MSF and the international community hope that this will soon translate into an actual resumption of MSF operations in Rakhine.

**Buddhist-on-Muslim violence** continues to flare, most recently in Mandalay in June. Two died and roughly a dozen were injured during a riot that erupted when a Facebook posting (that turned out to be false) reported that a Muslim man had raped a Buddhist woman. Nationwide, more than 250 people have died and approximately 150,000 have been left homeless due to religious violence since the first communal riot broke out in Rakhine in 2012.

Multiple explanations have been tabled to describe why this communal violence erupted: it is an echo of the Rakhine crisis; a reflection of cynical political manipulation by the federal government; the work of radicalized Buddhist monks who have seized the moment; and it is part of a historical pattern, reaching back a century, that surfaces in periods of major uncertain change and perceived rising communal insecurity. It is likely some combination of all of the above.

The government appears recently to have improved the quality and speed of its police response to eruptions of violence, and President Thein Sein delivered a strong condemnation after the Mandalay outbreak. Nonetheless, the government has done very little to track down and prosecute the perpetrators. The government has also proposed legislation that would limit religious conversions and mandate that women receive permission before marrying someone from another religion.



**Land grabs** by the military, the state, and insider companies reportedly continue, and the legacy of decades of land grabs hangs heavily over the transition. It is an exceedingly complex legal and human rights challenge that stands in the way of growth and investment in the agricultural sector, feeds the proliferation of “plough protests” across Myanmar in which peasants temporarily reseize land, and impedes the orderly future return of 120,000 refugees from Thailand and the resettlement of 400,000 internally displaced citizens to their home communities or to new sites.

Farmers’ uncertainty over the status of their land rights is key in Myanmar’s declining rice production (as neighboring countries expand their rice output). Witnessing millions of acres of farmland seized by officials for use by the military or investors, both foreign and domestic, gravely deters farmer investments in their fields. Lack of credit, high transport costs, and weak water management add to the problems facing Myanmar’s farmers.

Sorting out thousands of land-grab cases requires high-level, determined leadership by the government to roll back the rewards doled out over the decades to those loyal to the military regime. In the end, some form of individual land titling and tenure rights for small farmers will be essential to convince Myanmar’s farmers, two thirds of the work force, that the government’s reforms truly provide development opportunities for all.

There has been recent movement within the Parliament to address the issue after the Farmland Investigation Commission released a report urging immediate action, but that has not yet resulted in a new framework. The United States Agency for International Development (USAID), in collaboration with the Swiss government and European Union, have detailed technical advisers into Myanmar’s Ministry of Conservation, Environment, and Forestry. The Parliament has drafted a new land law currently under review by the international community—including the U.S. government. Much work lies ahead before the deep-seated problems surrounding land are eased.

**Crackdown on journalists.** Myanmar still requires an independent and impartial judiciary for the political transition to take hold and provide assurance that the rule of law will be established and honored. The recent prosecution of journalists creates a climate of uncertainty. In December 2013, an Eleven Media reporter was sentenced to three months in jail for alleged criminal defamation and criminal defamation. In April, a journalist for the Democratic Voice of Burma was sentenced to one year in prison for allegedly trespassing and disturbing a government official. And in July, five Unity Journal reporters were sentenced to 10 years in prison for violating the country’s draconian official secrets act when they reported on an alleged chemical munitions plant. These cases have raised anxiety that the government may be reversing earlier moves to lessen press controls. Media organization representatives remain optimistic that courts will reduce these sentences or that the president will grant an amnesty to the imprisoned journalists, following an appeal.

## How to Sustain Momentum?

**Peace negotiations.** The sense of recent progress in peace negotiations that the CSIS delegation observed stems from a shared sentiment among political leaders that at

least the outlines of an agreement need to be hammered out *before* the 2015 election campaign reaches full fever. Short of some sort of peace agreement with ethnic groups, who comprise roughly 40 percent of the country's population, the government will find it extremely difficult to provide the stability required to manage and develop the country's resource-rich border regions, where most ethnic minorities live. The peace process has taken on added significance, given rising criticism from observers that many of the other important reforms launched by the government have stalled.

Among the most intractable problems facing Myanmar is the five-decade war between the government and about 16 major armed ethnic groups along the country's northern and eastern borders. More than a dozen rounds of ceasefire talks have been held over the past three years, during which negotiators repeatedly missed deadlines to achieve an agreement. In mid-August, leaders of the ethnic groups announced that the government had agreed to include one of their longstanding demands, a pledge to adopt a federal system, in a draft agreement, bringing the sides closer to a deal.

"Federalism," of course, can mean different things to different people, but some analysts say this understanding has put the peace process at a critical juncture. To achieve lasting peace, the government and ethnic groups need to hammer out a political agreement that addresses the root causes behind the years of strife: on some form of sharing political and economic power, equal rights, and a degree of self-determination for the minorities.

Five days of peace talks in late September reportedly achieved little progress in resolving remaining issues in a ceasefire agreement and spokesmen for the ethnic minority groups said that the government had backtracked on several points that had been agreed in August. This was followed in early October by a military attack against the Shan State Progressive Party Army base camp in the country's northeast, suggesting that the negotiations could face some rocky times before a final ceasefire can be cobbled together.

**Elections.** Much rides also on the country's 2015 voting for a new Parliament, which observers believe will be a "transitional" election that likely will turn out less than picture perfect. For the United States, a reasonable facsimile of "free and fair" elections will be a critical litmus test of whether the reforms are a success. For many in Congress, the reforms may be judged on whether opposition leader Aung San Suu Kyi can contest the presidency.

For that to happen would require amending Article 59(f) of the constitution, which bars individuals from becoming president or vice president if their spouses or children hold foreign passports, which Aung San Suu Kyi's two sons do. For the opposition leader and democracy activists in Myanmar today, the priority focus at present is instead on amending Article 436, which stipulates that any constitutional amendment requires the approval of 75 percent of Parliament. They argue that this clause is undemocratic because it provides the military, which is appointed to 25 percent of seats in parliament, a veto over any amendments.

Many observers in Myanmar claim it is difficult to imagine that political reform in the country will move fast enough to allow either Articles 436 or 59(f) to be amended ahead of the elections. The Union Election Commission is currently drafting the rules

and procedures that will govern the elections and, at least so far, it appears to be taking quite a bit of advice from opposition political parties and foreign governments.

While it may be too early to speculate on the composition of the next Parliament, the outline of one very plausible scenario, growing out of the 2015 elections, is that the military continues to secure 25 percent of the seats; parties representing ethnic groups snare a sizable share of the seats in their areas; and the ruling USDP party does reasonably well (early indications are its local organizational capacities outstrip those of the NLD, while also enjoying the many advantages of incumbency). If these outcomes materialize, the NLD will be hard pressed to win more than about 40 percent of the seats, even if it generates a landslide in the nonminority areas inhabited by the majority Burman population.

From the United States, the National Democratic Institute (NDI), the International Republican Institute (IRI), and the International Foundation for Electoral Systems (IFES) are providing a range of crucial electoral support that includes strengthening political parties' organizational capabilities, conducting opinion surveys and focus groups, training local election monitors, providing technical support in the development of electoral regulations, and strengthening the skills of elected parliamentarians (the latter through NDI's Parliamentary Resource Center). The CSIS delegation heard a strong desire across a spectrum of political groups for NDI, IRI, and IFES services to continue their programs in the run up to the elections.

**Economic development.** According to the Asian Development Fund, Myanmar's economy grew more than 7 percent during the last two years. This growth can be attributed to multiple reforms over the past three years, ranging from floating the currency exchange rate to knocking down many barriers to trade and business to providing more of a legal structure for foreign investors. Foreign aid has surged and more tourists are coming to enjoy the country's cultural attractions and natural beauty.

More foreign businessmen are filling the country's hotels in the hunt for opportunities, but not as many are signing deals as the government had hoped. Jump-starting economic growth and returning the country to its former status as one of Asia's richest countries is a complex task hobbled by a long list of challenges. After decades of economic stagnation, Myanmar continues to suffer from a dilapidated infrastructure, a weak bureaucracy, endemic corruption, a shortage of skilled workers, an inadequate banking system, and still-limited legal protection for investors. Even some of the business elite are exhibiting protectionist instincts, as they try to keep their fiefdoms out of the hands of foreigners. And some U.S. investors complain that U.S. sanctions against roughly 200 companies and individuals due to their links to the previous military regime make it difficult to find strong local business partners.

**Education.** Myanmar's shortage of skilled workers hobbles the country's economic growth. Decades of isolation and repression during 50 years of military rule resulted in the dismantling of much of the country's education system, once one of the best in Asia. Most of Myanmar's universities were shut down following student protests in 1988. Myanmar mandates only five years of primary education, one of the lowest levels in Southeast Asia.

Like in other sectors, major educational reforms have been launched since 2012 when the government conducted a comprehensive review of the education system. Since then, students have returned to Yangon University and the country's universities have been given increased autonomy. Parliament is considering strengthening laws governing higher education, curriculums are being overhauled, and vocational training is receiving renewed priority. International education links are being restored with some foreign universities such as Johns Hopkins University resuming courses in Myanmar. Still, funding shortages, inequitable access between urban and rural students, and poor quality of teaching continue to hold the country back.

Building human capacity is particularly crucial for improving the health sector. The majority of health professionals do not have access to modern medical knowledge, skills in the use of current technology essential to quality care. Central government and state officials are eager to expand nascent collaboration with western and regional educational institutions to boost the technical skills of their health workers.

**Health.** Over the past three years, there has been significant progress in health. The Union government has demonstrated a heightened commitment to health and has implemented a series of new policies, including a commitment to provide universal health coverage by 2030. It has quadrupled its health budget, and the results are starting to show: Myanmar is now on track to meet its Millennium Development Goal targets for hunger, sanitation, maternal health, and child health by 2015.

Antiretroviral coverage for persons living with HIV/AIDS is above 60 percent, and is slated to climb in the next two years to about 80 percent. Immunization coverage for essential vaccines has reached 83 percent.<sup>2</sup> In visits to Mon and Karen states, the CSIS delegation received detailed health briefings consistent with these promising national trends.

The Ministry of Health in July announced an ambitious, long-overdue restructuring, under the leadership of a new minister. If successful, this effort should enable the ministry to manage directly an ever-greater share of the expanding resources flowing now into Myanmar from the Global Fund, the World Bank, the United States, and other donors and foundations. The CSIS delegation also learned that discussions have begun between Union and state government health officials, including those of ethnic states, on how their activities can in the future be “converged.” At both the federal and state levels, these changes will be pivotal to strengthening basic health services, country ownership of programs, local community support, and external donor confidence.

Steady recent progress in Myanmar's health sector has been added by the fact that multilateral institutions, implementers, and foundations have been adaptive, made substantial commitments, and taken a long-term view. The United Nations and local and international nongovernmental organizations (NGOs) have been able to expand health programs, facilitated by pragmatism and flexibility by the Myanmar government, including in sensitive border areas. The Bill & Melinda Gates Foundation has expanded its engagement in tackling artemisinin-resistant malaria (ARM) through a variety of partnerships with government agencies and NGOs.

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<sup>2</sup> “WHO Country Cooperation Strategy, Myanmar, 2014–2018,” World Health Organization, 2014, [http://www.searo.who.int/myanmar/CCS\\_Myanmar.pdf](http://www.searo.who.int/myanmar/CCS_Myanmar.pdf).

## **The Challenge of Drug-resistant Malaria**

Myanmar is the epicenter of a major global threat: the emergence of a malarial strain resistant to the most effective treatment, artemisinin, which has contributed to saving over 3 million lives since 2000.<sup>1</sup> Over the past decade, artemisinin-resistant malaria (ARM) has spread from its emergence in Myanmar and Cambodia to all Mekong countries. If ARM jumps from Southeast Asia to India and Africa—home to 90 percent of global malarial deaths—the last decade's impressive progress in controlling malaria will be reversed resulting in a substantial increase in deaths.

There remains a narrow window of opportunity to avert this disaster, if there are significant resources, high-level country leadership, and collaborations that enlist the private sector and cross borders.<sup>2</sup> And Myanmar has to be a priority, if any region-wide effort is to succeed. Across the region, aggressive action is needed to eliminate malaria in specific resistance pockets and where there is high risk of spread.<sup>3</sup>

In partnership with the World Health Organization (WHO), the Association of Southeast Asian Nations (ASEAN), and the countries of the Mekong, the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) has launched a \$100 million three-year region-wide ARM initiative, with \$40 million dedicated to Myanmar. As part of that mobilization, the President's Malaria Initiative has made the Mekong a priority, including expanding commitments to Myanmar. The U.S. military has contributed through its Armed Forces Research Center of Medical Sciences and Naval Medical Research Center Asia (Singapore) laboratories. There has been important scientific progress over the past year. A molecular marker of artemisinin resistance has been identified, which should greatly facilitate tracking the further spread of resistance.<sup>4</sup>

Since 2007, the Bill & Melinda Gates Foundation has invested over \$100 million in the Mekong to detect, characterize, and eliminate drug-resistant malaria parasites, including the development of new approaches to eliminate malaria. In Myanmar, the Gates Foundation and UK Department for International Development fund Populations Services International to replace artemisinin monotherapy with quality assured diagnosis and artemisinin-based combination therapies (ACTs). Recently the foundation has invested in the evaluation of new approaches to accelerating malaria elimination with the University of Maryland across 34 townships and Oxford University's Shoklo Malaria Research Unit in Kayin state. Both of these efforts have the backing of the Myanmar Ministry of Health and the Global Fund.

In August 2014, the nonprofit Malaria No More announced a new public-private partnership with the Asia-Pacific Leaders Malaria Alliance (APLMA) and the Asian Development Bank, in an effort to mobilize resources and rally regional leadership.<sup>5</sup> Important also, in September 2014 the WHO Malaria Policy Advisory Committee endorsed malaria elimination from the Mekong as a way to eliminate the threat of drug resistance. This recommendation will very likely be adopted as policy by the WHO Executive Board in January 2015.

In Myanmar, as in the rest of the Mekong, active engagement by the military is essential to eliminate artemisinin-resistant malaria: to protect soldiers and their families; make use of their access to remote border areas where resistance is concentrated; and leverage their logistical and public health capacities. The Myanmar military is no exception and has become active in Global Fund-sponsored regional dialogues.

*(cont'd.)*

In Myanmar and the broader Mekong, there is continued need to press ahead. The U.S. role in this fight is critical: through its diplomatic leadership; influence in the governance of the Global Fund, WHO, and the World Bank; the President's Malaria Initiative and other U.S. health programs. To significantly increase the odds of success, it is critical that the U.S. military begin to engage with Myanmar as soon as possible through its overseas laboratories, as it has done with other Mekong partner countries.

—J. Christopher Daniel

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<sup>1</sup> By definition, parasites are considered resistant when at least 10 percent of malarial patients in a given area still have the parasites in their blood after three days of exposure to artemisinin therapy. See E.A. Ashley et al., "Spread of Artemisinin Resistance in *Plasmodium falciparum* Malaria," *New England Journal of Medicine* 371 (July 2014): 411–423, <http://www.nejm.org/doi/full/10.1056/NEJMoa1314981#t=articleTop>.

<sup>2</sup> See J. Christopher Daniel, *Drug Resistant Malaria, A Generation of Progress in Jeopardy* (Washington, DC: CSIS, November 2013), [http://csis.org/files/publication/131107\\_Daniel\\_DrugResistantMalaria\\_Web.pdf](http://csis.org/files/publication/131107_Daniel_DrugResistantMalaria_Web.pdf); and J. Christopher Daniel, "A Race to Save Lives: Artemisinin Resistant Malaria," Smart Global Health blog, August 2014, <http://www.smartglobalhealth.org/blog/entry/a-race-to-save-millions-of-lives/>.

<sup>3</sup> As Professor Nick White, one of the world's leading malaria researchers, has repeatedly stated, "conventional malaria control approaches won't be enough—we will need to take more radical action and make this a global public health priority, without delay." The World Health Organization (WHO) Global Malaria Programme recently embraced this fact, shifting from a policy of containment to recommending the elimination of the parasites from the entire Greater Mekong Subregion.

<sup>4</sup> With the Medicines for Malaria Venture helping to coordinate the efforts of over 300 partners from both the public and private sectors in over 50 countries, there is now a robust portfolio of drugs in the research and development pipeline (unfortunately, it will likely be several years before any are ready for distribution).

<sup>5</sup> Malaria No More, "Partners Unite to Combat Malaria in Asia," press release, August 1, 2014, [http://www.malarianomore.org/news/press/partners-unite-to-combat-malaria-in-asia?utm\\_source=singapore&utm\\_medium=email&utm\\_campaign=advocacy](http://www.malarianomore.org/news/press/partners-unite-to-combat-malaria-in-asia?utm_source=singapore&utm_medium=email&utm_campaign=advocacy).

The CSIS delegation heard repeatedly of the progress made through the Global Fund's investments and the work of its implementing partners. The Fund has committed \$460 million over the next five years, the first major investment made worldwide under the Fund's new, more rigorous funding model. It also committed \$100 million over three years to combating ARM in the Mekong subregion, of which \$40 million is dedicated to Myanmar. The fund has been highly active in Myanmar in working out innovative arrangements, involving the ministry and nongovernmental implementers, to expedite programs.

The World Bank has committed \$200 million to universal health coverage over the period 2014–2017, as part of its \$2 billion program of support announced in January 2014. The funding for health is to be dedicated to build capacity within the Ministry of Health and expand the delivery of front-line, primary health services.

Nonetheless, complex health challenges persist. The government's public health capacities are still woefully inadequate. Malaria is endemic and the country has the highest rate of disease in Asia, along with the continued threat of artemisinin-resistant strains along the country's border.<sup>3</sup> (See the box on ARM.) Myanmar's tuberculosis

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<sup>3</sup> Ibid.

prevalence rate is three times the global average and nearly double the regional average. Drug resistance is thwarting government efforts to control TB.<sup>4</sup>

Myanmar also faces a high burden of noncommunicable diseases, which comprise 40 percent of all deaths in Myanmar.<sup>5</sup> It is likely that prevalence for both communicable and noncommunicable is much higher than current data suggest, given the weak quality of surveillance. To tackle this problem, the government has agreed to collaborate with USAID to generate a new demographic and health survey in 2015.

## Recommendations for the United States' Role

The CSIS delegation witnessed a widely positive perception, across divergent Myanmar interests, of the United States' role in supporting the transition. There is overwhelming support for the United States to stay engaged in a robust way across multiple areas. This popular sentiment is, by itself, remarkable, given how divided Myanmar society is and how vulnerable the United States and other donors are to allegations of bias and distortion. It is also a testimony to the skill and leadership of the U.S. Embassy, its fastidious evenhandedness, and the seriousness of the U.S. commitments in the areas of health and economic development, democratization, and achieving peace.

CSIS has the following select recommendations for sustaining and strengthening U.S. contributions.

First, the United States needs to stay very actively engaged and not be seen as pausing or reversing course, despite some calls in Congress to reduce engagement in response to apparent “backsliding” on reforms. The United States is critical to balancing China's influence, especially in regard to any eventual ceasefire agreement and follow-on political dialogue. The United States has multiple ongoing investments that are showing results, bilaterally and multilaterally. Only if these are carried forward will we see their full benefit. Active U.S. support will be critical to sustaining the Global Fund and World Bank's ambitious investments in building Myanmar's health and other capacities.

At all points, the United States will need to be patient, realistic, vigilant, aggressive in testing the boundaries of what is possible, quickly responsive to disturbing turns, and focused on its already well-defined top-line priorities. It is imperative to think ahead, on how the United States can promote continued democratic reform in Myanmar even if the results of the 2015 elections fall short of the NLD achieving predominant power, and/or Aung San Suu Kyi ascending to the presidency.

Engagement by President Barack Obama, former Secretary of State Hillary Clinton, and current Secretary John Kerry has communicated consistent expectations and raised U.S. credibility. President Obama's return in November 2014 for the East Asia Summit and his summit with the Association of Southeast Asian Nations (ASEAN) leaders is a timely opportunity to revisit in a forceful way ongoing concerns regarding human rights, communal relations, treatment of the Rohingya, extension of health

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<sup>4</sup> Ibid.

<sup>5</sup> “Myanmar: Unlocking the Potential, Country Diagnostic Study,” Asian Development Bank, 2014, <http://www.adb.org/sites/default/files/pub/2014/myanmar-unlocking-potential.pdf>.



programs, electoral plans, constitutional reforms, and the peace process, as well as to reinforce progress.

Second, now and into 2015, the United States needs to press ever harder to restore emergency humanitarian operations in Rakhine, to extend development programs to the impoverished in the majority Arakine community, and to support initiatives to break the current deadlock and advance peaceful coexistence of the different communities and resettlement of the displaced. The U.S. Embassy is to be commended for its determined, principled, and aggressive actions dating back to March 2014. What progress has been achieved thus far can be attributed in part to strong U.S. leadership. That leadership will be no less important in getting to the next stage.

Third, given that the 2015 elections have become the central test case for judging the quality of transition and the future of the U.S. bilateral relationship, CSIS recommends that support be expanded significantly to building political parties, strengthening parliament, and monitoring domestic elections. The United States should also take a leadership position, in partnership with the European Union, United Kingdom, and others, in creating a small international observer team to be deployed early in 2015. That team should be a nimble, mobile unit that can address early emerging problems and should be a presence through the national elections.

Fourth, the delegation recommends that the United States plan *now* to double the level of bilateral commitments in health. Since the transition began in earnest in 2012, the U.S. government has made a substantial direct investment, totaling roughly \$20 million per year, in support of HIV/AIDS, malaria, and maternal and child health programs. USAID staff have been very active as leaders on health issues within the Yangon donor community. These actions have established the U.S. voice and credibility on health, and provide a strong foundation upon which to expand into the future. For the near term, a U.S. bilateral priority should be to expedite the introduction of the President's Emergency Plan of AIDS Relief (PEPFAR) program, which has been impeded by unnecessary U.S. interagency tensions. The United States should also inaugurate planning for the creation of a Myanmar Emergency Operations Center, in line with the Obama administration's Global Health Security Agenda, dedicated to creating the basic capacities for the prevention, detection, and response to emerging health threats. That should feature a strong role by the Centers for Disease Control and Prevention, including expansion of the Field Epidemiology Training Program. Other related opportunities for exchanges and training, through USAID, National Institutes of Health, and university-to-university partnerships, should be actively pursued to address Myanmar's considerable gap in skilled personnel.

The Global Fund and World Bank, in partnerships with the Myanmar Ministry of Health, NGOs, and other implementers, will remain vital to the future of health in Myanmar, in terms of HIV/AIDS, tuberculosis, and malaria, including artemisinin-resistant forms, as well as in maternal and child health. As the largest shareholder in each, the United States should press for sustained, robust World Bank and Global Fund leadership and strong metrics for judging performance. A priority should be to see steady concrete progress in building the capacities within the ministry to permit country ownership of programs, delivery of community services, in concert with health care efforts, and management of external resources. The United States should use its voice in these institutions to press for early planning for expanded health

programs in Myanmar's ethnic states, to be introduced rapidly when political circumstances permit.

Fifth, the United States should continue limited military-to-military engagement with Myanmar in the areas of human rights as well as capacity building in humanitarian assistance and disaster relief, a strategy supported by opposition leader Aung San Suu Kyi. These encounters should not be expanded pending the outcome of the 2015 elections and clarity that Myanmar's most powerful and best-organized institution does not intervene to tilt the playing field in favor of the ruling party.

A special effort should be undertaken with military medical personnel, however, to tackle drug-resistant malaria, which is most prevalent in remote border areas where the Myanmar military has the most active medical presence and that is an urgent public health imperative, affecting civilian and military populations alike. Effective action against artemisinin-resistant malaria will be difficult unless the Myanmar military (and its fellow militaries in the region) are fully engaged. While continuing to limit its military-to-military relations, the United States can and should actively cooperate on an expanded multilateral basis through activities organized by regional bodies, individual regional states, the Global Fund, and potentially the World Bank. The United States has exceptional expertise through the Armed Forces Research Institute of Medical Sciences laboratory operated jointly with the Thai military in Bangkok and the President's Malaria Initiative.

Sixth, the United States should explore the training of Myanmar police in cooperation with other democratic countries. One of the reasons communal violence has spiraled out of control over the past two years is that the police have little or no training and experience in modern crowd control and maintaining law and order while protecting the rights of citizens. Prior to the reforms launched three years ago, the military was in charge of maintaining internal security. As this role is being shifted to the police, they need to be trained in modern techniques of crowd control.

## Closing

The Myanmar transition is complicated and often difficult to comprehend. It gives plenty of reason for hope, caution, and alarm. Myanmar and its future continue to matter significantly to U.S. national interests. It is a country in which U.S. engagement in this critical period has been—and remains—skilled, innovative, and careful. Its activist diplomacy has earned the United States substantial good will across Myanmar society, and generated important concrete results. It is important that the United States stay on this middle path, however difficult it is at times.

## Appendix: Travel Itinerary

### Delegation

Dr. J. Stephen Morrison, Senior Vice President and Director, CSIS Global Health Policy Center

Murray Hiebert, Deputy Director and Senior Fellow, CSIS Sumitro Chair for Southeast Asia Studies

RADM Thomas R. Cullison (USN Ret.), Senior Adviser, Uniformed Services University of the Health Sciences Center for Disaster and Humanitarian Assistance Medicine

Todd Summers, Senior Adviser, CSIS Global Health Policy Center

Sahil Angelo, Program Coordinator and Research Assistant, CSIS Global Health Policy Center

Dr. Thomas Kanyok, Senior Program Officer for Global Health at the Bill & Melinda Gates Foundation

Janice Kaguyutan, Democratic Chief Counsel to the Committee on Foreign Affairs of the U.S. House of Representatives

Victor Cervino, Foreign Affairs Legislative Assistant, Office of Senator Marco Rubio (R-FL)

Terrell Henry, Legislative and Research Assistant, Senate Foreign Relations Committee

### Sunday, August 17, 2014

11:00–12:00	Yangon Heritage Trust Thant Myint U, Founder of Yangon Heritage Trust and Special Adviser to the President.
13:00–14:30	Lunch with Foreign Journalists Shibani Mahani, <i>Wall Street Journal</i> ; Tim McLaughlin, Senior Reporter, <i>Myanmar Times</i> ; Gwen Robertson, Senior Asia Editor, <i>Nikkei Asian Review</i>
17:00–18:00	National Democratic Institute (NDI) and International Republican Institute (IRI) Dr. Richard Nuccio, NDI Resident Senior Country Director; Stephen Cima, IRI Resident Country Director
18:30–20:00	Working Dinner: Briefing on communal/religious conflict in Rakhine Maja Lazic, UNHCR Senior Protection Officer; Jose Hulsenbek, Médecins Sans Frontières Myanmar Chief of Mission; Chris Hyslop, Former UN Rakhine Team Leader; Dr. Zaw Min Sein, President of Swanyee Development Foundation; Bill Davis, Physicians for Human Rights Technical Director

Monday, August 18, 2014

Yangon, MM

06:30–07:30 Bill & Melinda Gates Foundation Briefing on Drug-Resistant Malaria  
Dr. Tom Kanyok, Senior Program Officer for Global Health at the Bill & Melinda Gates Foundation

08:00–08:45 Myanmar Peace Center  
U Aung Min, President’s Minister of the Office of the President

10:30–12:00 National League for Democracy in Myanmar  
Aung San Suu Kyi, Chairperson of the National League for Democracy in Myanmar; Dr. Myo Aung, Member of Parliament

12:30–14:00 Lunch with U.S. Ambassador and USAID Mission Director  
Ambassador Derek Mitchell; USAID Mission Director Chris Milligan; Tamara Chao, Political/Economic Officer

14:00–14:45 Myanmar Ministry of Defense  
Commodore Aung Thaw, Deputy Minister for Defense

16:00–17:30 USAID  
Chris Milligan, USAID Mission Director; William Slater, Director of the Office of Public Health; Tamara Chao, Political and Economic Officer

18:30–19:30 Working Dinner with International NGOs  
Alyssa Davis, Health Specialist, Save the Children; Chris Herink, Myanmar Country Director, World Vision; Liesbeth Aelbrecht, Médecins Sans Frontières Myanmar Chief of Mission (Geneva); Nana Zarkua, Medical Coordinator, Médecins Sans Frontières; Richard Harrison, Country Director, PACT; Leah-Mari Valencia, Senior Director, Population Services International; Bill Davis, Physicians for Human Rights Technical Director

Tuesday, August 19, 2014

Naypyidaw, MM

10:00–10:45 Vice-President of the Republic of the Union of Myanmar  
U Nyan Tun, Vice-President of the Republic of the Union of Myanmar

11:00–11:45 Parliamentary Planning and Financial Development Committee  
U Soe Tha, Chairman of Planning and Financial Development Committee

12:00–13:00 Ministry of Information  
Ye Htut, Minister of Information

13:00–14:45 Lunch with U.S. Embassy Defense Attaché  
COL Bill Dickey, Defense Attaché

15:00–16:00 Ministry of Health  
Dr. Thein Thein Htay, Deputy Minister of Health; Dr. Khine Zar Win

Wednesday, August 20, 2014 Mawlamyaing, MM

09:30–10:30 National League for Democracy Members in Mon State  
Dr. Aye Zan; Dr. Khin Sang

13:30–14:30 Mon State Health Department  
Dr. Than Tun Aung, Mon State Health Director

15:30–16:30 Mon State Chief Minister  
U Ohn Myint, Mon State Chief Minister

16:30–17:30 Meeting with Mon State Parliamentarians  
U Kyin Pe, Chairperson of State Parliament; U Soe Htin, National Committee Member; U Sein Myint, Member of State Parliament (USDP Party)

17:30–18:30 Working Dinner with Local Farmers  
Ko Min Min

Thursday, August 21, 2014 Pa-An, MM

10:00–11:00 Karen National Union (KNU)  
Dr. Ed Marta, Senior Consultant

11:00–12:00 UN High Commissioner for Refugees (UNHCR)  
Vicky Tennant, Head of Field Office; Antonius Kamerika, Associate Program Officer; Sean Keogh, Associate Information Analyst/Reporting Officer

12:00–13:00 State Minister for Border Security Affairs  
Colonel Aung Lwin, Karen State Border Security Affairs Minister

13:30–14:15 NLD Pa-An Office  
Nan Khin Htwe Myint, Chairperson of NLD Pa-An Office

14:30–15:30 KNU Liaison Office  
Major Saw Shisho, Head Officer

Friday, August 22, 2014 Yangon, MM

08:30–09:30 88 Generation  
Koko Gyi, General Secretary

10:00–11:00	Yoma Bank CEO Hal Bosher, Special Adviser to the Chairman and CEO
11:15–12:15	Myanmar Journalist Association Thiha Saw, Vice Chair of Myanmar Journalist Association and Fulbright Alumni
14:30–15:30	The Three Millennium Development Goal (3MDG) Fund Dr. Paul Sender, Fund Director
16:00–17:00	U.S. Embassy Debrief Virginia Murray, Deputy Chief of Mission; Chris Milligan, USAID Mission Director; Tamara Chao, Pol/Econ Adviser

## About the Authors

**J. Stephen Morrison, Ph.D.**, is senior vice president and director of the Global Health Policy Center at CSIS. He writes widely, testifies before Congress, has directed several high-level task forces and commissions, and is a frequent contributor in major media on U.S. foreign policy, global health, and Africa. He served for seven years in the Clinton administration, four years as committee staff in the House of Representatives, and taught for 12 years as an adjunct professor at the Johns Hopkins School of Advanced International Studies. He holds a Ph.D. in political science from University of Wisconsin and graduated from Yale College magna cum laude.

**Murray Hiebert** is a senior fellow and deputy director of the Sumitro Chair for Southeast Asia Studies at CSIS. Prior to joining CSIS, he was senior director for Southeast Asia at the U.S. Chamber of Commerce on Washington. Earlier he worked as a journalist in China for the *Wall Street Journal* and at the *Wall Street Journal Asia* and the *Far Eastern Economic Review* based in Washington, Kuala Lumpur, Hanoi, and Bangkok. Mr. Hiebert is the author of two books on Vietnam, including *Chasing the Tigers* (Kodansha, 1996).

**Rear Admiral Thomas Cullison, Medical Corp (USN Ret.)**, is a senior adviser at the Uniformed Services University of the Health Sciences Center for Disaster and Humanitarian Assistance Medicine and senior medical adviser since retiring from the U.S. Navy in 2010, following a 38-year career culminating in service as deputy surgeon general. Dr. Cullison graduated from Indiana University School of Medicine and is board certified in orthopedic surgery. He held numerous clinical and operational leadership positions including fleet surgeon, U.S. Pacific Fleet; command surgeon, U.S. Pacific Command; and medical officer of the Marine Corps. His Navy command tour included commanding officer, Naval Hospital Camp Lejeune, and commander, Naval Medical Center Portsmouth (Virginia)/Navy Medicine East. (The views expressed in the CSIS report are those of Admiral Cullison and do not necessarily represent those of the Uniformed Services University of the Health Sciences or the Defense Department.)

**Todd Summers** is a senior adviser to the CSIS Global Health Policy Center, which he joined in September 2012. His primary focus is on international financing for global health, especially the Global Fund to Fight AIDS, Tuberculosis, and Malaria, and serves as chair of its board's Strategy, Investment, and Impact Committee. In addition to work as an independent consultant, Mr. Summers has previously served with the ONE Campaign, the Bill & Melinda Gates Foundation, and the Clinton administration, for which he served as deputy director of the White House Office of National AIDS Policy. In his personal capacity, he serves as president of the U.S. Fund for the Global Fund and board treasurer of AVAC. He holds a B.A. cum laude in religion from Middlebury College in Vermont.

**Sahil Angelo** is a program coordinator and research assistant for the Global Health Policy Center at CSIS, where he researches the intersection of health and security, health systems strengthening, and other topics. Prior to joining CSIS, Mr. Angelo interned at Partners in Health. At the same time, he led a student-run global health nonprofit dedicated to containing infectious diseases and improving sanitation in India. He graduated from Boston College cum laude with a B.S. in biology and international studies.







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