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Operational matters

For approval

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Draft Myanmar Country Strategic Plan (2018–2022)

Duration	1 January 2018–31 December 2022
Total cost to WFP	USD 310,802,972
Gender and age marker*	2A

*<https://www.humanitarianresponse.info/system/files/documents/files/gm-overview-en.pdf>.

Executive summary

The Republic of the Union of Myanmar is at a historic moment, with a new civilian government assuming power in 2016. The country graduated to lower-middle-income status in 2015, and has made significant progress in reducing poverty, improving food security and addressing malnutrition.

The remaining challenges to food and nutrition security and achievement of Sustainable Development Goal 2 targets include continued population displacements resulting from conflict, vulnerability to extreme weather events, poverty, limited social protection coverage, high malnutrition and persistent gender inequalities.

This country strategic plan will continue WFP's direct implementation of programmes while increasing capacity strengthening activities with a view to laying the groundwork for government ownership of food and nutrition security programmes by 2030. Unconditional assistance will decrease as the focus shifts to resilience building and livelihood support. There will be a nutrition-sensitive approach in work towards all strategic outcomes, the shift towards cash-based transfers will continue, and social behaviour change communication will increase.

WFP's assistance for the Government in achieving food and nutrition security will be based on three strategic outcomes:

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- Strategic outcome 1: Crisis-affected people in food-insecure areas meet their food and nutrition needs all year round. Life-saving food and/or cash will be provided to people affected by natural disasters, conflict and inter-communal violence.¹
- Strategic outcome 2: Vulnerable people in states and regions with high food insecurity and/or malnutrition have access to food all year round. WFP will provide food and/or cash-based assistance for vulnerable populations and technical assistance for the Government to enable it to enhance its social protection programmes, food systems and emergency preparedness capacities.
- Strategic outcome 3: Children under 5 in Myanmar have improved nutrition in line with national targets by 2022. WFP will contribute to increasing the availability of and access to safe and nutritious food for vulnerable populations in crisis and non-crisis situations to enhance their nutrition and resilience, and will support the Government in implementing national nutrition programmes and nutrition-specific and -sensitive interventions, and scaling up the management of acute malnutrition.

The country strategic plan will contribute directly to WFP's Strategic Objectives 1 and 2 and Strategic Results 1 and 2.² A gender-transformative approach will be adopted, and protection will be mainstreamed in all activities, including technical assistance and capacity strengthening for government partners and stakeholders.

The country strategic plan was developed in consultation with government ministries and other partners. It is informed by the national strategic review of food and nutrition security, a 2016 operation evaluation and government policies and plans. WFP will leverage coordination mechanisms such as the inter-ministry sector coordination group for nutrition, the United Nations Network for Nutrition and Food Security, the first United Nations development assistance framework in Myanmar, humanitarian response plans, the food security sector and the cash and social protection working groups.

Draft decision*

The Board approves Myanmar Country Strategic Plan (2018–2022) (WFP/EB.2/2017/7-A/1/Rev.1) at a total cost to WFP of USD 310,802,972.

¹ The country strategic plan was formulated prior to the events on and following 25 August 2017, which have led to the mass displacement of hundreds of thousands of people both within Rakhine State and across the border into Bangladesh. Due to a lack of access by United Nations agencies in northern Rakhine State, WFP cannot verify the number of people displaced or otherwise affected or their food security and nutrition status. It could, therefore, be necessary to revise the country strategic following its approval; this would be done through the standard procedures for the approval of budget revisions.

² Strategic Result 1 – Everyone has access to food (SDG Target 2.1); Strategic Result 2 – No-one suffers from malnutrition (SDG Target 2.2).

* This is a draft decision. For the final decision adopted by the Board, please refer to the ~~Decisions~~ **decisions** and ~~Recommendations~~ **recommendations** document issued at the end of the session.

1. Country analysis

1.1 Country context

1. The Republic of the Union of Myanmar lies between India and China and borders Bangladesh, Lao People's Democratic Republic and Thailand. Myanmar has the second largest national land area in Southeast Asia and a very long coastline; it is home to 135 recognized ethnic groups and has extremely diverse agro-ecological zones, fertile land and a wealth of natural resources.
2. Myanmar stands at a historic moment, with a new civilian government assuming power in 2016. Following a decade of consistent economic growth the country achieved lower-middle-income country status in 2015, but social indicators remain low: Myanmar ranks 145th of 188 countries in the 2016 Human Development Index and 80th of 159 countries in the Gender Inequality Index. Under-represented segments of the population – including women, elderly people and minorities – are affected disproportionately by poverty, ethnic conflict and climate change and have low participation in economic growth.
3. Ethnic conflict and unrest continue in Kachin, Rakhine and Shan states. The 2017 Humanitarian Response Plan estimated that 525,000 people in these states were in need of humanitarian assistance, including 218,000 internally displaced persons (IDPs).³ **These are figures estimated prior to the events in Rakhine State on and following 25 August 2017. The scale of any additional humanitarian needs is not known at the time of writing.**
4. With frequent floods, landslides and cyclones, Myanmar is one of the countries most vulnerable to the effects of climate change. Between 1991 and 2016 there were 45 natural disasters affecting 14 million people.⁴

1.2 Progress towards SDG 2

Progress towards SDG 2 targets

5. *Access to food all year round.* Myanmar is a major producer and exporter of rice, pulses, maize and oilseed crops, and has significantly reduced hunger since 2000.⁵ However, access to sufficient food throughout the year is a challenge for half the population, particularly women, girls, boys and other vulnerable groups. Poverty limits household-level access to food, especially for smallholder farmers and landless labourers. The situation is exacerbated by low productivity, lack of stable jobs and sharp fluctuations in the prices of food, including rice. Urban food insecurity is an increasing concern.
6. Food insecurity is widespread, with significant variations among states and regions.⁶ WFP estimates that 2.1 million households – 25.4 percent of the rural population – did not consume adequate and sufficiently diversified diets between 2013 and 2015, particularly in the hill and mountain areas in Chin and in northern parts of Kachin, Rakhine and Shan states and Sagaing region.
7. *End malnutrition.* Myanmar has made significant progress in reducing chronic and acute malnutrition. Stunting declined from 40.8 percent in 2000 to 29.2 percent in 2016 and wasting from 10.7 to 7.0 percent, but Myanmar still has a “high burden” of stunting.⁷ Sex-disaggregated data show that girls had slightly lower rates of stunting, wasting and underweight than boys.⁸

³ Sex-disaggregated data are not available.

⁴ See: <http://www.emdat.be> Sex-disaggregated data are not available.

⁵ Myanmar was one of the three countries that achieved the largest reductions in hunger between 2000 and 2016 among those where hunger rates were categorized as “serious” or “alarming” in the Global Hunger Index, in which it ranks 75th of 118 countries.

⁶ Sex-disaggregated data are not available.

⁷ The survey methods used in the 2000 multiple-indicator cluster survey and the 2016 demographic and health survey are different.

⁸ National rates were: stunting – girls 27.2 percent, boys 31.0; wasting – girls 6.3 percent, boys 7.7; and underweight – girls 17.9 percent, boys 19.9 percent. Myanmar demographic and health survey 2015/16.

8. Despite improvements at the national level, significant regional disparities exist (see Annex III). In Chin stunting prevalence reached an alarming rate of more than 40 percent, and five other states and regions had high rates of more than 30 percent.⁹
9. In Rakhine the 2015/16 demographic and health survey showed global acute malnutrition at 13.9 percent and severe acute malnutrition at 3.7 percent, along with aggravating factors.¹⁰ Urban malnutrition is also a concern: Yangon region has the second highest prevalence of wasting and the highest anaemia prevalence in children aged 6–59 months.¹¹ At the national level, anaemia rates are an alarming 46.5 percent among women, and 58 percent among children aged 6–59 months.¹²
10. *Smallholder productivity and income.* The main aim of agricultural policies has been to double the productivity and incomes of small-scale food producers by 2030, in line with SDG 2.3.¹³ Previous legal restrictions on crop diversification have been removed and farmers have greater freedom in the choice of crops. Lack of access to and control and ownership of land are major constraints for women farmers.¹⁴
11. Even though the contribution of agriculture to gross domestic product (GDP) has declined from 43.9 to 26.7 percent over the past decade, the economy remains heavily dependent on the sector, which is the primary source of income for 60 percent of the population.¹⁵
12. Most farmers are smallholders; 54 percent of landholdings are less than 2 ha.¹⁶ These farms operate without economies of scale and with little mechanization and few inputs, relying on labour-intensive methods; farm productivity and per capita farm earnings are the lowest among countries in the Association of Southeast Asian Nations (ASEAN).¹⁷ Even though the Government is committed to ensuring equal pay for work of equal value,¹⁸ the strategic review found that women are typically paid less than men, with consequences affecting households headed by women in particular.
13. *Sustainable food systems.* The agriculture sector suffers considerably from climate-related shocks,¹⁹ with 35 percent of farmers facing constraints related to natural hazards. The 2015 floods and landslides alone affected 527,000 ha of crops and 400,000 households, slowed GDP growth by 4 percentage points and had medium- and long-term effects on food security.²⁰ The lack of equitable participation by women and men has also contributed to unsustainable food systems.

⁹ Ibid

¹⁰ The World Health Organization categorizes the public health significance of undernutrition as “critical” when the wasting rate is 10–15 percent with high morbidity, population displacement, food insecurity, and low access to clean water and hygiene.

¹¹ Sex-disaggregated data for wasting and anaemia at the subnational level are not available. The national rates are 57.9 percent among girls, and 57.7 percent among boys.

¹² The survey did not provide anaemia rates for men.

¹³ Agricultural policies have been discriminatory with regard to gender. Under the 2008 Constitution, women have equal rights to enter into land-tenure contracts and to administer property, but there is no guidance on defending their rights in a divorce or when their husbands die.

¹⁴ Asian Development Bank, United Nations Development Programme (UNDP), United Nations Population Fund (UNFPA) and the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women). 2016. *Gender Equality and Women’s Rights in Myanmar: a Situation Analysis*. Philippines.

¹⁵ Sex-disaggregated data are not available.

¹⁶ Households headed by men hold an average of 6.5 acres (2.6 ha) compared with 5.3 acres (2.1 ha) for households headed by women.

¹⁷ Myanmar agricultural census, 2010. Haggblade, S. *et al.*, 2014. Strategic choices shaping agricultural performance and food security in Myanmar. *Journal of International Affairs* 67(2).

¹⁸ Article 350 of the Constitution

¹⁹ Flood impact assessment by the Ministry of Agriculture and Irrigation and WFP, 2015.

²⁰ *World Bank Global Economic Monitor*, May 2016.

14. In spite of work to improve national capacities for emergency response, Myanmar ranked 2nd of 187 countries in the 2016 Global Climate Risk Index for 1995–2014.

Macroeconomic environment

15. Myanmar's GDP grew by 7.3 percent in 2015/16 and is projected to average 7.1 percent growth over the next three years.²¹ Myanmar expects to graduate from least-developed country status by 2025, which will require meeting complex economic and social criteria.
16. Inflation was estimated at 11.3 percent for the 2015/16 fiscal year and is forecast at 8.5 percent for 2016/17, with increases in food prices as the primary driver.²² The high rate of inflation erodes households' purchasing power, further contributing to food insecurity.²³ There is a significant gap in rates of participation in the labour force between women and men,²⁴ and women's unpaid caregiving and domestic work is not taken into account.

Key cross-sector linkages

17. The national strategic review highlighted poverty as a major obstacle to access to food. Poor households are unable to cushion economic shocks and lack savings to invest: this traps them in a cycle of low investment, low productivity and low income. The demographic and health survey also showed a negative correlation between wealth and stunting.
18. The strategic review highlighted the role of educational institutions in ensuring long-term food and nutrition security.²⁵ Most children attend school, but only 73.8 percent complete primary education – one of the lowest figures in the region.²⁶ Primary school enrolment rates are similar for boys and girls, but retention rates are much lower for girls: this results in lower literacy rates and livelihood opportunities for women,²⁷ and there is a negative correlation between parents' education levels and stunting.
19. Child mortality has been reduced and maternal health improved, but significant work remains to reach the SDG targets. Myanmar is one of the 35 countries that account for 90 percent of new HIV infections and it has a high burden of tuberculosis (TB).²⁸ A recent assessment showed that 56.5 percent of households with people living with HIV (PLHIV) reported the need to reduce food consumption.²⁹
20. In 2014, the Social Institutions and Gender Index of the Organisation for Economic Co-operation and Development placed Myanmar among the countries with a high level of gender discrimination and inequality in social institutions. This results from traditional cultural and religious beliefs and practices: the cultural orientation towards men and boys, for example, often prevents malnourished girls from receiving timely treatment.³⁰

²¹ *Global Economic Monitor*, December 2016. The *Economist Intelligence Unit* predicts annual real GDP growth of 8.5 percent between 2018 and 2022.

²² World Bank. 2016. *Reducing Vulnerabilities. East Asia and Pacific Economic Update (October)*. Washington DC.

²³ Sex-disaggregated data are not available.

²⁴ Rates of participation in the labour force were 54 percent for women and 82 percent for men. Ministry of National Planning and Economic Development, 2011, Swedish International Development Cooperation Agency, United Nations Children's Fund (UNICEF) and UNDP.

²⁵ It recommended mainstreaming nutrition into the primary and secondary curriculum and developing nutrition degrees and courses in tertiary education to inform future policy- and decision-makers.

²⁶ National Education from All (EFA) review report, 2014, Ministry of Education.

²⁷ Myanmar labour force survey, 2015. International Labour Organization.

²⁸ Epidemiological modelling suggests that in 2015 there were 224,800 PLHIV, of whom 77,000 were women. Myanmar also appears in lists of countries with a high TB burden. People up to 15 years of age constituted 26 percent of the 138,300 new and relapse TB cases in 2014. Sex-disaggregated data are not available.

²⁹ UNDP. 2016. *The Socio-Economic Impact of People Living with HIV at the Household Level in Myanmar*. New York.

³⁰ WFP. 2016. *Myanmar PRRO 200299 Operation Evaluation*. Available at: <https://www.wfp.org/content/myanmar-prro-200299-supporting-transition-reducing-food-insecurity-and-undernutrition-among->

1.3 Hunger gaps and challenges

21. The national strategic review showed that in spite of the peace process the underlying causes of displacement in Myanmar continue and that many IDPs in Kachin, Rakhine and Shan states face movement restrictions and may not be able to return home. Conflict and restrictions on movement outside the camps mean that livelihood opportunities are scarce, and IDPs remain dependent on food assistance. The number of IDPs may be reduced in line with the March 2017 interim report by the Advisory Commission on Rakhine State, which recommended closing the camps.³¹
22. Myanmar is highly vulnerable to climate change and suffers frequent natural disasters. This situation and the Government's improving but constrained capacities for emergency preparedness and response prevent more rapid development.
23. In 2009, of the 37.5 percent of the population living below the poverty line, 76 percent lived in rural areas.³² The vicious cycle of low investment, low productivity and low wages in the agriculture sector is a major factor limiting access to food, particularly for women.³³ Uneven seasonal production exacerbates the problem in that price volatility, particularly for rice, has a significant effect on a population that allocates a substantial portion of income to food. Lack of access to food for a significant portion of the population – despite a food surplus at the national level – suggests that the existing food system is not effective.
24. The strategic review highlighted vulnerable groups that require support from government social safety nets or humanitarian aid, including orphans and vulnerable children, PLHIV, persons with disabilities and elderly people. The Government's social protection schemes currently cover less than 5 percent of the population, and only 0.5 percent of GDP was spent on social protection in 2014.³⁴
25. High rates of malnutrition persist as a result of factors such as inadequate dietary diversity and poor infant and young child feeding practices.³⁵ Only 51 percent of infants under 6 months of age are exclusively breastfed, and only 16 percent of children aged 6–23 months receive the minimum diet required for physical and cognitive development.³⁶ The Government's programmes include micronutrient supplementation but do not adequately address the underlying causes of malnutrition. A sustainable approach to nutrition awareness was also identified as a gap.
26. The persistence of hunger is not simply a matter of food availability: it stems from structural and socio-cultural inequalities that affect women and girls disproportionately. There is evidence that women and girls are more vulnerable to food security and nutrition challenges as a consequence of cultural norms and religious practices.³⁷

³¹ The final report had not yet been published at the time of writing.

³² An estimated 34.6 percent of the population in urban areas was poor. Sex-disaggregated data are not available.

³³ Challenges for women are the result of factors such as discriminatory practices in land tenure, wages, access to extension and financial services, and cultural limitations on movement. See: ADB, UNDP, UNFPA and UN-Women. 2016. *Gender Equality and Women's Rights in Myanmar: a Situation Analysis*. Philippines.

³⁴ World Bank Group. 2015. *Building resilience, equity and opportunity in Myanmar: the role of social protection: Strengthening Social Security Provision in Myanmar*. Washington DC. Following a government announcement in June 2016 on increasing expenditure in the education and social sectors, social protection coverage was expanded with the implementation of mother-and-child cash transfers and a pension scheme.

³⁵ Cultural factors may also lead to higher risk of maternal and perinatal mortality; for example, pregnant women and girls reduce their food intake to produce smaller babies through easier births.

³⁶ Myanmar demographic and health survey, 2015/16. Although sex-disaggregated data are not available for these indicators, the median duration of exclusive breastfeeding among children under 3 is twice as high among girls than boys.

³⁷ According to a 2013 UN-Women study, households headed by women with no adult men, as well as elderly women, girls, persons with disabilities and victims of gender-based violence are especially vulnerable and have fewer social resources and income. See: Corner, L. 2008. *Making the MDGs Work for All: Gender-Responsive Rights-Based Approaches to the MDGs*. New York, United Nations Development Fund for Women (UNIFEM).

1.4 Country priorities

Government

27. With the transition to a new government in 2016, national development priorities are not yet fully articulated. The Government has, however, taken on the SDGs as a framework for addressing and monitoring development issues.³⁸
28. The Government has placed food security and nutrition high on the national agenda. Myanmar joined the Scaling Up Nutrition (SUN) movement in April 2013 and became the second country in Asia and the Pacific to launch the Zero Hunger Challenge, in October 2014. More recently the Government announced ten national-level sector coordination groups, including one for nutrition. The prioritization of food and nutrition security is reflected in policy and strategy documents,³⁹ but these have to compete with other government priorities for funding.
29. Disaster management and emergency preparedness are also government priorities. The National Disaster Management Committee was formed to improve coordination among ministries, but funding constraints limit its coverage, and the need for humanitarian support in medium- and large-scale emergencies remains.

United Nations and other partners

30. The first United Nations development assistance framework (UNDAF) in Myanmar will be launched in January 2018 and end in 2022. The UNDAF and common country assessment will be based on the “5 Ps” – people, planet, prosperity, peace and partnership. WFP’s contribution is mainly to the people and planet elements.
31. The UNDAF will adopt the principle from the 2030 Agenda of leaving no one behind, and the 2017 Humanitarian Response Plan highlights the commitment to vulnerable and marginalized groups.
32. Food security and nutrition partners from the United Nations, civil society and the private sector are likely to have major roles in the next five years. The United Nations Network for Nutrition and Food Security, which is supported by Renewed Efforts Against Child Hunger and Undernutrition (REACH), has been the coordinating body for nutrition.⁴⁰ The strategy of the UN Network for SUN is the basis of United Nations support for Myanmar in achieving national goals and reducing malnutrition. Other agencies directly involved in food and nutrition security include the United Nations Children’s Fund (UNICEF) and the Food and Agriculture Organization of the United Nations (FAO), which worked with WFP in the advisory group overseeing the national strategic review.⁴¹

³⁸ With support from UNDP the Government has also developed reports on SDG data assessments and SDG indicator baseline reports. The latter was unpublished at the time of writing.

³⁹ Documents addressing SDG 2 include the National Health Plan (2017–2021), the Myanmar National Plan of Action for Food and Nutrition, the National Social Protection Strategic Plan (2014), the Myanmar National Strategic Plan for the Advancement of Women (2013–2022), 20 nutrition-specific and nutrition-sensitive interventions by the National Nutrition Centre and the Rakhine State Socio-Economic Development Plan. Myanmar is a member of ASEAN, and has agreed to the Vision and Strategic Plan for ASEAN Cooperation in Food, Agriculture and Forestry (2016–2025).

⁴⁰ Formed by FAO, UNICEF, WFP and the World Health Organization; it has expanded to include the International Fund for Agricultural Development (IFAD), UNFPA, United Nations Office for Project Services (UNOPS), UN-Women and the World Bank.

⁴¹ WFP has supported the country programmes of FAO and UNICEF to ensure coordination.

2. Strategic implications for WFP

2.1 WFP's experience and lessons learned

33. WFP established its country office in Myanmar in 1994.⁴² Through protracted relief and recovery operation (PRRO) 200299 (2013–2017), WFP is engaged in relief assistance, school feeding, asset creation and nutrition programmes, which include support for PLHIV and TB patients.
34. A 2016 evaluation of the PRRO found the operation to be relevant and effective in a challenging and dynamic environment and WFP's assistance to be well designed and targeted to meet the different needs of vulnerable women, men, girls and boys.⁴³
35. The evaluation highlighted areas where WFP could enlarge its role: capacity strengthening for the Government and cooperating partners, integration of nutrition education into all programmes, increasing the use of cash-based and mixed modalities, shifting to school meals with a view to eventual government ownership,⁴⁴ and working with the Government on asset creation and gender equality.
36. Disaster preparedness and response simulations and workshops in 2014–2016 highlighted the need for WFP to continue its capacity strengthening for the Government and partners to inform decision-making and improve coordination, communications and information-sharing systems.

2.2 Opportunities for WFP

37. The following opportunities were identified in the strategic review and consultations with the Government and partners.
38. There is a continued need for food assistance for IDPs as long as the underlying causes of displacement persist and livelihood options are limited. Where possible, WFP and other actors should design and implement livelihood interventions to facilitate gradual transition to self-reliance.
39. Myanmar faces frequent natural disasters, but the national ability to respond is still limited. WFP should exploit its decades of experience in emergency response and its deep field presence to enhance the Government's preparedness and response capacities.
40. In the short term, there is a need for direct support for vulnerable groups to fill the gaps in government social safety nets. In the long term, needs may shift to technical assistance to support the Government in improving current social protection programmes and developing new ones; mainstreaming nutrition training in social protection interventions, for example in schools, will maximize the effectiveness of this approach.
41. The national strategic review recommended expansion of school feeding programmes and local sourcing of food, and suggested the inclusion of nutrition education in the school curriculum, complemented by activities such as school gardening. It noted that school-based nutrition education is an effective means of informing households about healthy food.
42. The review also emphasized the importance of linking nutrition with agriculture and ensuring that agricultural activities and interventions are nutrition-sensitive and take into account the national food system, particularly with regard to food access issues.

⁴² WFP was involved in emergency response in Myanmar prior to 1994.

⁴³ For example, in Chin, northern Rakhine and Shan, where households headed by women have the highest rates of inadequate food consumption, WFP engages in gender-sensitive nutrition messaging through social and behaviour change communication (SBCC) and targets all affected household members, regardless of gender roles and responsibilities. WFP also mitigates the risk of discriminatory practices and encourages balanced representation of women and men in local food management committees, in which women's participation is traditionally low because of cultural norms.

⁴⁴ In October 2016, WFP launched the Systems Approach for Better Education Results. Myanmar's school feeding was rated as "emerging", and recommendations included the establishment of a multi-sector steering committee, development of a policy and systems, including for monitoring and evaluation, and funding from the national budget.

43. There is still a need to provide micronutrient supplementation for pregnant and lactating women, adolescent girls, and vulnerable groups. Nutrition-specific interventions should focus on prevention through training and raising of public awareness of appropriate diets and infant and young child feeding practices with a view to improving nutrition security and contributing to enhanced gender equality.

2.3 Strategic changes

44. This country strategic plan (CSP) will involve a transition from humanitarian assistance for crisis response to resilience-building focused on building livelihoods and supporting recovery, including through complementary nutrition interventions.⁴⁵ WFP will promote gender equality in line with a rights-based approach and will prioritize strengthening of government capacities and the creation of an enabling environment for increasing national ownership of programmes such as school feeding, emergency preparedness and nutrition. In alignment with the 2030 Agenda this CSP lays the groundwork for future CSPs, which will focus on “upstream” work through technical assistance and capacity strengthening.
45. Specific shifts include: i) moving to cash-based transfers (CBTs), taking into account protection risks; ii) focusing on social and behaviour change communication (SBCC) and feeding practices for nutrition; iii) increasing rice fortification; iv) establishing a nationally owned school feeding programme with a focus on on-site feeding; v) promoting school feeding and livelihoods as social protection mechanisms, and promoting gender equality and women’s empowerment; vi) ensuring all activities are nutrition-sensitive; vii) assisting adolescent girls, including pregnant and lactating girls; and viii) maximizing gender-transformative programming.

3. WFP’s strategic orientation

3.1 Direction, focus and intended impacts

46. This CSP is informed by the national strategic review, the 2016 operation evaluation, national policies and plans, and consultations with the Government and partners. The strategic outcomes cover all WFP operations in Myanmar from 2018 to 2022, ranging from life-saving assistance for crisis-affected populations under strategic outcome 1, to contributing to building the resilience of vulnerable groups under strategic outcome 2 and supporting improved nutrition for children under 5 in crisis and non-crisis settings under strategic outcome 3.⁴⁶ At the output level, the CSP will contribute to SDGs 1, 3, 4, 5, 6, 8, 10, 13 and 17.⁴⁷ The planned activities will cover rural and urban populations as required.
47. Cross-cutting issues such as gender equality and protection will be integral to the development, implementation and monitoring of the CSP to ensure that WFP’s assistance addresses the needs and priorities of women, men, girls, boys and vulnerable groups. In line with WFP’s Gender Policy (2015–2020) and the corporate Gender Action Plan, WFP will collect data disaggregated by sex and age, and will embed participatory and inclusive gender analysis in all assessments, research, technical assistance and information management; it will mainstream gender in all programmes, policies and capacity-strengthening initiatives.⁴⁸
48. WFP is committed to providing accountability to affected populations and engaging women, men, girls and boys in the processes and decisions that affect their lives, through communications and consultations. WFP’s ~~complaints~~ **complaint** and feedback mechanism enables beneficiaries to express views and concerns, thereby promoting the development of effective programmes.

⁴⁵ While WFP seeks to effect long-term change, the pace of the transition may need to be adjusted in the light of the events in Rakhine State on and following 25 August 2017.

⁴⁶ Activities in conflict areas will be in line with the policy on WFP’s Role in Peacebuilding in Transition Settings.

⁴⁷ SDG 1 – poverty; SDG 3 – health; SDG 4 – education; SDG 5 – gender equality; SDG 6 – water and sanitation; SDG 8 – decent work and economic growth; SDG 10 – inequalities; SDG 13 – climate and SDG 17 – partnerships

⁴⁸ These include roll-out of gender training for partners, gender and nutrition training for men and promotion of women in leadership roles.

3.2 Strategic outcomes, focus areas, expected outputs and key activities

*Strategic outcome 1: Crisis-affected people in food-insecure areas meet their food and nutrition needs all year round.*⁴⁹

49. Women, men, girls and boys affected by natural disasters, conflict and violence in food-insecure areas will be targeted. While the underlying causes of displacement and food insecurity continue, the livelihood options for these communities are limited or non-existent and people rely on humanitarian aid. WFP will provide relief assistance to mitigate hunger and improve access to food and nutrition.
50. This strategic outcome contributes to SDG target 2.1 and WFP Strategic Result 1.

Focus area

51. This strategic outcome focuses on crisis response.

Expected outputs

52. This strategic outcome will be achieved through one output:
- Women, men, girls and boys affected by crisis receive food and/or CBTs in a timely manner to meet their daily food and nutrition needs (Tier 1).

Key activities

53. *Activity 1: Provide unconditional food transfers and/or CBTs to populations affected by crisis.* With its government counterparts and partners, WFP will mobilize its resources immediately after disasters and provide relief assistance to meet the basic food and nutrition requirements of the affected women, men, girls and boys, **including in Kachin, Rakhine and Shan states.** Rapid assessments will determine the number of beneficiaries to be assisted, their locations, the amount of food required, transfer modalities and the duration of initial assistance; they will take into account the different circumstances and preferences of beneficiary groups, including persons with disabilities.⁵⁰ A food basket consisting of rice or fortified rice, pulses, oil and salt will be provided, together with high-energy biscuits as needed. Displaced people who return or resettle may receive a resettlement package to address food needs during the transition period.
54. CBTs or mixed modalities will be considered where beneficiaries have access to functioning markets, where there are no security concerns and where CBTs are the expressed preference of women and men. The distribution of CBTs will be complemented by communication and consultation as to the importance of using the CBTs to obtain a balanced and nutritious diet.⁵¹

Strategic outcome 2: Vulnerable people in states and regions with high food insecurity and/or malnutrition have access to food all year round

55. National and local governments, vulnerable populations including girls and boys in pre-primary and primary school, women and men smallholders and landless farmers, PLHIV and TB patients will be targeted.
56. While the need for direct support for vulnerable groups to fill gaps in social safety nets continues, increased technical support for the Government in enhancing social protection will contribute to long-term food security. WFP will provide food and CBTs equitably for women, men, girls and boys and will support the Government in establishing national social protection programmes, increasing its emergency preparedness capacities to respond to different types of disaster, and

⁴⁹ The country strategic plan was formulated prior to the events on and following 25 August 2017, which have led to the mass displacement of hundreds of thousands of people both within Rakhine State and across the border into Bangladesh. Due to a lack of access by United Nations agencies in northern Rakhine State, WFP cannot verify the number of people displaced or otherwise affected or their food security and nutrition status. It could therefore be necessary to revise the country strategic plan following its approval; this would be done through the standard procedures for the approval of budget revisions.

⁵⁰ Interventions will continue to be disability-sensitive: vulnerable groups will have priority in WFP food distributions, with verified proxies to collect their food.

⁵¹ Activities will be nutrition-sensitive, gender-transformative and sensitive to vulnerability and protection needs.

enhancing logistics and value chains to improve food systems in crisis and non-crisis settings. Strategic outcome 2 contributes to SDG target 2.1 and WFP's Strategic Result 1.

Focus area

57. This strategic outcome focuses on resilience-building.

Expected outputs

58. This strategic outcome will be achieved through eight outputs:

- Food-insecure people benefit from improved national programmes to enhance access to food (Tier 3).
- Targeted girls and boys receive school meals or snacks to improve access to food (Tier 1).
- Targeted women, men, girls and boys receive health and nutrition education through schools, to improve nutrition knowledge (Tier 1).
- Food-insecure women and men receive CBTs or food transfers to meet household food and nutrition needs through asset creation (Tier 1).
- Community members benefit from the creation and rehabilitation of assets to improve resilience to disasters and enhance livelihoods (Tier 2).
- Community members benefit from health and nutrition education to improve nutrition knowledge (Tier 2).
- PLHIV and TB patients receive food and/or CBTs to meet their food and nutrition needs (Tier 1).
- PLHIV, TB patients and caregivers receive health and nutrition messaging and counselling to improve nutrition knowledge (Tier 1).

Key activities

59. Activity 2: Provide technical advice, policy support and training for the Government to improve delivery of national social protection and emergency preparedness programmes and food systems. In line with the National Social Protection Strategic Plan (NSPSP), WFP will collaborate with the Government in the establishment of sustainable national school feeding and asset creation programmes, while promoting nutrition, education and livelihoods.⁵² This support will include technical assistance related to CBTs in the context of social protection programmes, emergency preparedness, and relief and recovery operations; gender equality and women's empowerment will be mainstreamed. **While the long-term objective of school feeding is full ownership by the Government, the transition envisioned will be gradual process, particularly in terms of budget support.**
60. To assist the Government in improving emergency preparedness and response, WFP will provide capacity strengthening in food security, logistics and information and communications technology in emergencies. This assistance will be aligned with the Government's priorities, with food security as the entry point. It will involve technical assistance, improvement of infrastructure and equipment, capacity strengthening and strategic advice.⁵³ WFP will also establish a baseline for the Emergency Preparedness Capacity Index.
61. WFP will work with the Government and partners such as FAO and research institutes to improve food systems and equitably enhance community economic and social well-being through capacity strengthening for women and men smallholder farmers, to enhance value chains, improve food quality, reduce post-harvest losses and create market demand. WFP will work with the private sector to promote consumption of fortified foods and increase local production capacity

⁵² WFP's policy advice and technical assistance will focus on logistics, programme and policy issues with a view to eventual hand-over of programmes to the Government.

⁵³ Technical assistance, improvements to warehouses and equipment, information technology for government emergency operations and training centres, capacity enhancement for emergency logistics, training of trainers and preparedness exercises, and advice on the development of emergency preparedness plans and capacities.

- for high-quality foods, with preference for local women suppliers to redress economic inequalities.
62. WFP will provide technical assistance and capacity strengthening for government counterparts to improve the quality, reliability, sustainability and use of food security and nutrition information monitoring systems, integrating data disaggregation and gender analysis and generating evidence to support programme design and targeting at the national and subnational levels.⁵⁴
63. *Activity 3: Implement a comprehensive school feeding programme in targeted schools in support of the national programme.* ~~Through~~ **WFP will continue to distribute nutritious snacks through the national school feeding programme** ~~WFP will distribute nutritious snacks or cooked meals to boys and girls in targeted schools. The school feeding programme will increase the distribution of high-energy biscuits coverage to new areas to give pupils access to nutritious food and education; .~~ **At the same time, there are plans to will be a shift to locally procured cooked meals in line with the long-term vision of the Government, with a scale up of the pilot school meals programme, ideally with the meals being purchased from women suppliers, as an initial step.** A school feeding package including promotion of health and hygiene practices and nutrition education will be carried out by engaging community members, including women and men caregivers, to ensure that messages are disseminated.⁵⁵ Community involvement will be a major component of the programme, from preparation of meals to local food procurement and distribution. There will be an option for food assistance for work.
64. *Activity 4: Provide conditional food or cash-based assistance in support of the creation and rehabilitation of assets, combined with nutrition messaging for targeted populations.* Asset creation activities will target vulnerable households and communities, including those in transition from humanitarian assistance to recovery support: the aim is to manage risks and enhance livelihoods by investing in physical and productive assets.⁵⁶ Activities will involve the construction or repair of infrastructure such as roads, bridges, agricultural assets, disaster-resilient assets, storage facilities, food distribution outlets, and nutrition-sensitive assets such as drinking water facilities and home or school gardening. Women and men beneficiaries will select the assets according to need, and own and manage them equitably.⁵⁷ The activities will provide men and women with equal opportunities for decision-making, participation, benefits and access to assets, and will address the disparities in unpaid care and domestic work. A community-based participatory approach will help to empower women and vulnerable groups. The activities will be complemented by nutrition messaging.
65. *Activity 5: Provide unconditional food and/or cash-based assistance combined with nutrition messaging and counselling for PLHIV and TB patients.* WFP will continue to advocate for support for PLHIV and TB patients in the NSPSP, while supporting the Government in its current implementation structure. A food basket including fortified rice and wheat-soya blend plus will be distributed through health facilities to supplement nutrition in line with the Government's programmes, with a view to increasing adherence to treatment and providing basic nutritional requirements.

Strategic outcome 3: Children under 5 in Myanmar have improved nutrition in line with national targets by 2022

66. This outcome will target pregnant and lactating women and girls, adolescent girls and children under 5 in crisis and non-crisis settings to improve their nutrition before, during and after emergencies, in alignment with WFP's Nutrition Policy (2017–2021).

⁵⁴ Gender analysis and protection- and nutrition-sensitive assessments will facilitate evidence-based decision-making on needs and transfer modalities and will improve food security and resilience for the most vulnerable populations.

⁵⁵ Training in health and hygiene, particularly in the preparation of school meals, will target community members managing the distribution of food in schools. Nutrition-sensitive approaches such as linking school garden programmes to nutrition education will be introduced.

⁵⁶ The aim is to enhance equitably the purchasing power of households headed by women and by men.

⁵⁷ This will be informed by the WFP Gender Policy and the Humanitarian Protection Policy.

67. Increasing the availability of and improving access to safe, nutritious foods, and promoting adequate diets and sound feeding behaviour will contribute to improvement of the nutrition status and resilience of individuals and communities. WFP will accordingly, in line with the Government's priorities, advocate for and implement preventive nutrition-specific and -sensitive interventions, provide treatment for moderate acute malnutrition, contribute to preparedness for nutrition in emergencies, and support the Government in enhancing its capacities to implement equitable nutrition interventions. All activities will be guided by the Ministry of Health and Sports and implemented in collaboration with the National Nutrition Centre; a gender-transformative approach will help to redress unequal gender roles. Strategic outcome 3 contributes to SDG target 2.2 and WFP's Strategic Result 2.

Focus area

68. This strategic outcome focuses on resilience-building.

Expected outputs

69. Strategic outcome 3 will be achieved through five outputs:
- Children under 5 benefit from strengthened government capacity to improve the implementation of national nutrition interventions (Tier 3).
 - Pregnant and lactating women and girls, children under 2 and adolescent girls receive CBTs and food transfers to meet their nutrition needs (Tier 1).
 - Women and men caregivers, adolescent girls, pregnant and lactating women and girls, and community members benefit from SBCC in nutrition, care practices and healthy diets to improve their knowledge, attitudes and practices (Tier 1).
 - Malnourished girls and boys under 5, pregnant and lactating women, and adolescent girls receive a comprehensive nutrition package to treat acute malnutrition (Tier 1).
 - Girls and boys under 5, pregnant and lactating women, and adolescent girls who are affected by crisis or at risk receive a comprehensive nutrition package to prevent acute malnutrition (Tier 1).

Key activities

70. *Activity 6: Provide implementation support, research-based advice and technical assistance for national policies and action plans to the Government and partners.* WFP will prioritize technical assistance for the Government with a view to strengthening its capacity to implement and monitor national nutrition interventions. WFP and its partners will support the roll-out of the national guidelines on integrated management of acute malnutrition, to scale up treatment and prevent wasting. This assistance, which includes nutrition in emergencies and research into treatment and prevention models, will be expanded at the national and decentralized levels.
71. WFP will support the generation of evidence, for example with the Fill the Nutrient Gap tool, to inform government policies and action plans and the implementation of national core nutrition actions. Joint advocacy through national platforms such as SUN and the Zero Hunger Challenge will support coordinated multi-sector approaches and governance mechanisms. WFP, FAO and UNICEF will continue to advocate for the mainstreaming of nutrition and the inclusion of nutrition-sensitive approaches in policies, action plans, targeting and monitoring in all sectors. In view of the high levels of malnutrition in urban areas, WFP will advocate for and support the scale-up of nutrition interventions in poor urban settlements. It will also advocate for the inclusion of fortified rice in relevant policies and will support the scale-up of production and consumption. Advocacy will be informed by the concepts of gender equality and women's empowerment.
72. *Activity 7: Implement preventive nutrition interventions for adolescent girls, pregnant and lactating women and girls, and children under 2, and roll out community infant and young child feeding programmes, CBTs for mothers of young children, and SBCC.* WFP will work with the Government, local authorities, communities and the private sector to maximize access to and consumption of locally produced nutritious foods. It will collaborate with partners on SBCC to encourage appropriate and gender-transformative infant and young child feeding,

dietary diversity and care practices.⁵⁸ The evidence-based CBT programme for mothers of young children will be expanded and combined with nutrition interventions where appropriate, in line with the approaches of the Government and the cash working group.

73. WFP will continue to support local production and consumption of nutritious foods such as fortified rice to address micronutrient deficiencies,⁵⁹ and will explore the scale-up of local production and access to global markets in collaboration with the Government and partners. WFP will seek to improve the quality of and access to fortified rice by scaling up consumption in WFP programmes and promoting its use in emergency responses, social protection schemes and markets. This will benefit people, including those affected by crisis, PLHIV, persons with disabilities, patients of multi-drug-resistant TB and beneficiaries of asset creation programmes.
74. *Activity 8: Provide specialized nutritious foods for the treatment and management of acute malnutrition among pregnant and lactating women, adolescent girls and children under 5.* In areas with limited access to health services, high prevalence of wasting and high risk of morbidity and mortality among children, WFP will deliver treatment of moderate acute malnutrition and blanket supplementary feeding in partnership with the Government and cooperating partners; this will include nutrition interventions in emergencies. WFP's primary nutrition role in emergencies is to ensure that children under 5 and pregnant and lactating women and girls affected by crises and other people at risk of malnutrition receive adequate nutrients rather than just sufficient amounts of food.

3.3 Transition and exit strategies

75. Some of the crisis-affected population targeted under strategic outcome 1 may require direct food and/or cash assistance after this CSP. Beneficiaries who move into post-crisis situations will be assisted through conditional livelihood assistance under strategic outcome 2 as part of the development strategy for livelihoods, in line with recommendations from the recent evaluation. Transition or exit strategies will be informed by consultations with the communities concerned, by gender analysis and by analysis of context-specific concerns and sensitivities. Mixed modalities or CBTs will be used to facilitate transition.
76. Although this CSP continues direct implementation, there is also a focus on capacity strengthening for the Government and cooperating partners, particularly local non-governmental organizations (NGOs), to ensure long-term food and nutrition security. The limited capacities of cooperating partners in activities such as asset creation and nutrition were highlighted by the operation evaluation. WFP will strengthen the capacities of NGOs through training and links with knowledge networks.

4. Implementation arrangements

4.1 Beneficiary analysis

77. "Upstream" work on capacity strengthening will become increasingly important. Activities 2 and 6 will benefit people who are food-insecure, nutritionally vulnerable or at risk of malnutrition, and malnourished populations, through improved and expanded government systems and capacities.
78. With regard to direct implementation, activity 1 will target displaced and crisis-affected populations in Kachin, Rakhine and Shan states, Myanmar refugees returning from camps on the Thai border through facilitated returns and people affected by natural disasters. Direct implementation under strategic outcome 2 will target schools in areas with low education indicators and high food insecurity for activity 3, crisis-affected populations transitioning to recovery support for activity 4, and areas with high HIV and TB prevalence for activity 5. Activities 7 and 8 under strategic outcome 3 will target crisis-affected areas and states and regions

⁵⁸ A main objective is to enhance complementary feeding of young boys and girls, and the nutritious dietary diversity of women and adolescent girls. SBCC may also contribute to other nutrition objectives and interventions in addition to infant and young child feeding and care practices, such as scale-up of fortified rice consumption, health-seeking behaviour, and early identification of moderate acute malnutrition at the community level.

⁵⁹ This will be conducted alongside other efforts to improve dietary diversity.

with high prevalence of stunting, wasting and micronutrient deficiencies. WFP's corporate digital beneficiary and transfer management system (SCOPE) was piloted in 2017 and will be used during the CSP.

TABLE 1: FOOD AND CBT BENEFICIARIES BY STRATEGIC OUTCOME AND ACTIVITY						
Strategic outcome	Activity	Women	Men	Girls	Boys	Total
1	1: Provide unconditional food transfers and/or CBTs to populations affected by crisis	93 000	72 600	88 100	80 100	333 800
2	2: Provide technical advice, policy support and training for the Government to improve delivery of national social protection and emergency preparedness programmes and food systems	-	-	-	-	-
	3: Implement a comprehensive school feeding programme in targeted schools in support of the national programme	-	-	481 250	521 350	1 002 600
	4: Provide conditional food or cash-based assistance in support of the creation and rehabilitation of assets, combined with nutrition messaging for targeted populations	241 900	270 800	153 400	150 900	817 000
	5: Provide unconditional food and/or cash-based assistance combined with nutrition messaging and counselling for PLHIV and TB patients	40 400	61 450	3 900	3 500	109 250
3	6: Provide implementation support, research-based advice and technical assistance for national policies and action plans to the Government and partners	-	-	-	-	-
	7: Implement preventive nutrition interventions for adolescent girls, pregnant and lactating women and girls, and children under 2, and roll out community infant and young child feeding programmes, CBTs for mothers of young children, and SBCC	32 300	-	34 000	30 600	96 900
	8: Provide specialized nutritious foods for the treatment and management of acute malnutrition among pregnant and lactating women, adolescent girls, and children under 5	93 700	-	206 250	199 750	499 700
Total*		963 400	935 400	376 000	514 400	2 789 200

* Totals have been adjusted to take into account beneficiary overlaps among children in treatment and prevention of acute malnutrition through activity 8, who also receive relief assistance through activity 1, and between food and CBT modalities. Beneficiary figures will be disaggregated by sex and age.

4.2 Transfers

Food and cash-based transfers

79. With the recent regulatory changes, mobile money transfers are now possible for the first time. WFP has accordingly partnered a private-sector telecommunications company to ~~launch~~ **launched** a pilot “e-wallet” programme in January 2017.
80. Table 3 shows that 36 percent of the projected total transfer value will be cash, with the percentage increasing over time. The use of fortified rice will also increase in activities 1 and 5.
81. Plumpy’Doz will be used in emergency responses to prevent wasting among children under 5.⁶⁰ Plumpy’Sup for the treatment of moderate acute malnutrition will be introduced during the CSP to replace wheat-soya blend plus plus for reasons of cost-effectiveness arising from the reduced length of treatment and smaller tonnage, and ease of integration into the national health system in terms of supply, storage and logistics.

⁶⁰ Plumpy’Doz may also be used in responding to disasters under strategic outcome 1, and in nutrition emergencies as a stand-alone response linked with activity 8 under strategic outcome 3.

TABLE 2: FOOD RATIONS (g/person/day) or CBT VALUES (USD/person/day) BY STRATEGIC OUTCOME AND ACTIVITY

	Strategic Outcome 1						Strategic Outcome 2						Strategic Outcome 3						
	Activity 1			Activity 3			Activity 4		Activity 5		Activity 7			Activity 8					
Beneficiary type	Crisis-affected populations			Primary school students			Asset creation – men and women aged 18–59 and their households		PLHIV		TB patients	Children under 2	Pregnant and lactating women, and adolescent girls		Children under 5	Pregnant and lactating women, and adolescent girls		Children under 5	Pregnant and lactating women, and adolescent girls
Modality	Food	CBTs	Food + CBTs	Food	CBTs	Food	CBTs	Food	CBTs	Food	Food	Food	CBTs	Food	Food	Food	Food		
Cereals	450		450	150		450		400		400									
Pulses	60			50		60		60		60									
Oil	15/30					20		33		33									
Salt	5					5		5		5									
Sugar																			
SuperCereal with sugar								50		50		100			100		200		
SuperCereal Plus											100			100		200			
High-energy biscuits				75															
Plumpy' Sup																92			
Plumpy' Doz											46								
Micronutrient powder																			
Total kcal/day*	1 956/ 2 089	1 956/ 2 089	1 620	708	338	708	2 015	2 015	2 126	2 126	2 126	401	381	1 956/ 2 089	401	381	802	763	
% kcal from protein	8.8/ 8.2	8.8/ 8.2	7.3	11.8	11.1	11.8	8.6	8.6	9	9	9	18.1	17.2	8.8/ 8.2	18.1	17.2	18.1	17.2	
Cash (USD/person/day)		0.25- 0.37**	0.12			0.10		2.5		0.77				0.40					
No. of feeding days	30	30	30	22 days/month for 9 months			60 days/year		30	30	30	30	30	30	30	30	30	30	

*The cash value varies according to household vulnerability and market prices.

* The “total kcal/day” associated with the CBT values is equivalent to the kcal for its food basket equivalent, which is also shown in the table. The cash values were calculated based on local market prices for the respective food baskets taking into consideration inflation and transportation costs. The cash value for activity 4 also takes into consideration the local labor rate, while the value for activity 5 takes into consideration a double ration in accordance with the Government’s policy. Activity 7 is based on the cash value of the Government maternal cash transfer programme.

**While rations vary depending on local market prices, USD 0.37 or MMK 500 per day is one of the standard rates applied for a full ration. Reduced rations are provided in certain areas based on household vulnerability and market prices.”

TABLE 3: TOTAL FOOD/CBT REQUIREMENTS AND VALUE		
Food type/CBTs	Total (mt)	Total (USD)
Cereals	112 175	36 456 908
Pulses	13 577	8 146 008
Oil and fats	6 081	5 533 410
Mixed and blended foods	57 409	56 889 963
Other	1 046	156 879
Total (food)	190 288	107 183 168
CBTs		61 423 266
Total	190 288	168 606 433

Capacity strengthening including South–South cooperation

82. Country capacity strengthening will support the achievement of national food security and nutrition objectives and contribute to the phase-out of direct implementation with a view to national ownership and more sustainable funding models under strategic outcomes 2 and 3.
83. Activities will follow WFP's principles for effective and gender-transformative capacity strengthening,⁶¹ and will be based on consultations with ministries to identify needs. WFP will develop tools to ensure systematic monitoring of capacity strengthening activities and will report progress against objectives annually.
84. WFP will facilitate the exchange of knowledge, skills and expertise between the Government and other countries through South–South cooperation; partnerships with WFP centres of excellence will also be explored.⁶² WFP will support the Government in developing innovative solutions to address hunger and will report its achievements through South–South exchanges.

4.3 Supply chain

85. WFP will support the local economy by sourcing its requirements for rice, pulses and iodized salt domestically and as close as possible to its operational areas and vulnerable populations. It will continue to procure at least 10 percent of its rice from smallholder farmer groups, particularly women suppliers. Because fortified blended food and oil that meet WFP's price and quality requirements are not available domestically, international procurement will continue. WFP will also explore opportunities to develop local production of fortified food during this CSP.
86. Because of poor roads, adverse climate conditions and insecurity, complex multi-mode transport arrangements are needed to pre-position food. WFP has accordingly set up an agile and cost-effective delivery system, and can switch between CBTs and in-kind supply when access becomes difficult or when food prices in local markets fluctuate.
87. WFP will work with the Government to develop activities that suit local contexts and to explore options for strengthening the Government's capacities.⁶³ WFP will partner with the Government and supply chain partners to coordinate logistics and information, and will provide logistics

⁶¹ This includes partnerships with ministries and departments, consensus on capacity strengthening needs and process ownership by the assisted ministries and departments, recognition and augmentation of existing capacities, a relationship of mutual trust and commitment, and recognition that capacity strengthening requires time, patience and flexibility.

⁶² Following an exchange on school feeding with WFP's Centre of Excellence in Brazil in 2017, visits to the Centre of Excellence for Rural Transformation in China and the Centre of Excellence on Food and Nutrition Security in India may be planned.

⁶³ This collaboration has produced innovations such as re-packing of commodities in patient-friendly formats for HIV and TB activities, and training and hand-over of storage and transport coordination to township education officers.

services for other organizations in the form of common procurement, storage and transport to ensure timely humanitarian responses.

88. Because Myanmar is a disaster-prone country with a complex supply system, many preparedness and response activities are integrated with supply chain elements. WFP has long-term agreements with local suppliers to enable rapid food procurement for rapid-onset disasters. Its logistics equipment includes mobile storage and boats for transporting supplies in flooded areas. As a provider of common services for humanitarian partners, WFP constantly assesses local logistics situations, shares information with supply chain partners and trains local government staff and logistics partners.

4.4 Partnerships

89. In line with its Corporate Partnership Strategy (2014–2017) and the 2013 Nay Pyi Taw Accord for Effective Development Cooperation, WFP will continue to develop relationships with the Government, United Nations agencies, cooperating and funding partners and other stakeholders in support of zero hunger and the SDGs. WFP will sign an agreement with the Ministry of Planning and Finance under which annual work plans will be discussed with ministries.⁶⁴
90. WFP will work with the Ministry of Health and Sports to support the 20 prioritized core nutrition actions through multi-sectoral collaboration and will support the Ministry of Social Welfare, Relief and Resettlement in implementing the NSPSP. Capacity strengthening for the Ministry of Education will focus on the development of a national school feeding programme. WFP will maintain its partnership with the Myanmar National Committee for Women's Affairs and other associations to advance gender equality and women's empowerment.
91. WFP will augment its partnership with FAO in the joint leadership of the food security sector through collaboration on emergency preparedness and response, monitoring and evaluation, gender equality, vulnerability analysis and mapping and nutrition-sensitive approaches. FAO and WFP will help the Government to assume leadership of the long-term coordination of the food security sector. Partnerships with trust funds such as the Livelihoods and Food Security Trust Fund and the United Nations Network for Nutrition and Food Security will be continued.
92. The Government has asked WFP to activate the SUN Business Network. WFP will work with the humanitarian country team and the inter-cluster coordination group to develop overviews of humanitarian needs and response plans. WFP leads the cash working group of United Nations agencies and NGOs. Operational partnerships and coordination will continue with other United Nations agencies including the Office of the United Nations High Commissioner for Refugees, the United Nations Office for the Coordination of Humanitarian Affairs and UNICEF.
93. WFP is committed to working with local and international partners, which will be involved in assessments, transport, storage, distribution, monitoring and evaluation of activities. WFP will seek to enhance the capacities of local NGOs and civil society organizations to promote gender-transformative responses adapted to context. It will work with the private sector on CBT platforms and local food fortification options, and will collaborate with academia and research institutes to generate evidence for policy and programming initiatives.

5. Performance management and evaluation

5.1 Monitoring and evaluation arrangements

94. Implementation of the CSP will be supported by a gender-responsive monitoring and evaluation strategy for 2018–2022 that will guide performance monitoring, accountability and learning and support the country capacity strengthening process, in line with the Corporate Results Framework and the corporate monitoring strategy.

⁶⁴ For the PRRO, WFP currently has a Basic Agreement with the Ministry of Planning and Finance, a Letter of Understanding with the Ministry of Border Affairs, and Letters of Agreement/Intent with the Ministries of Education; Health and Sports; Social Welfare, Relief and Resettlement; and Agriculture and Irrigation.

95. Programme monitoring will be guided by standard operating procedures and other materials. Specific requirements related to indicator monitoring and the planning of reviews and decentralized evaluations will be guided by a monitoring, review and evaluation plan.
96. Corporate-level outcome, process and cross-cutting indicators will be monitored at least annually, through distribution monitoring or post-distribution monitoring. Data collection, analysis and reporting will be disaggregated at the lowest possible geographic level and by sex and age as applicable; analyses that are sensitive to gender, age and protection will be standard practice. Performance of the CSP will be communicated periodically through WFP publications, regular monitoring reports and thematic and donor briefs.
97. WFP's programme monitoring is integrated with corporate information management systems.⁶⁵ On-site and remote data collection will use the latest mobile technology and data management platforms.⁶⁶
98. Joint monitoring arrangements will be developed to enable ownership of data, knowledge-sharing and cost-efficiency.⁶⁷ Food price monitoring and vulnerability and needs assessments will be carried out in cooperation with the relevant ministries and departments.
99. The Office of Evaluation will carry out an independent country portfolio evaluation of the CSP in 2021 to assess its performance and results and inform future programmatic orientation. This will be complemented by at least one decentralized evaluation and two reviews covering all activities implemented during the CSP. Timing and coverage will be aligned with stakeholders' requirements and evidence generation and learning needs; resources have been budgeted for this purpose. WFP will support processes such as joint evaluations with other United Nations partners. Programming decisions will be informed by regular activity monitoring, decentralized evaluations and reviews using a tracking and feedback mechanism.

5.2 Risk management

100. Contextual risks include armed conflict that limits WFP's access, and natural disasters leading to displacement and loss of livelihoods. These risks will be mitigated in collaboration with the Government, United Nations agencies and cooperating partners in the immediate response; long-term resilience will be ensured through strengthening of the Government's capacities, particularly in emergency preparedness and response.
101. Programmatic risks include the limited capacity of cooperating partners in some sectors and areas, which could compromise the quality and timeliness of programmes and limit opportunities for scale-up. Increased capacity strengthening for cooperating partners and facilitating learning from their performance evaluations and capacity assessments will help to mitigate this risk.
102. In areas affected by conflict, WFP will ensure that its programmes do not exacerbate tensions and that systems are in place to ensure the safety and security of its staff, partners' personnel and beneficiaries. WFP has increased the frequency of monitoring and livelihood profiling, which include questions on protection issues. Timely and accurate information and consultation with communities through focus group discussions and the complaint and feedback mechanism will also help ensure the provision of safe and dignified food assistance.

⁶⁵ COMET, the Standard Project Report Intelligent Next Generation and SCOPE.

⁶⁶ These platforms include mobile data collection and analytics and mobile vulnerability analysis and mapping.

⁶⁷ Collaboration with the Office for the Coordination of Humanitarian Affairs, FAO and the Myanmar Information Management Unit is planned to develop and manage joint monitoring platforms such as Integrated Food Security Phase Classification.

6. Resources for results

6.1 Country portfolio budget

103. Strategic outcome 1, which accounts for 41 percent of the total budget, is expected to decrease during the CSP as IDPs return or resettle and in line with the shift from unconditional assistance to resilience-building. Strategic outcome 2, which accounts for 44 percent, will increase as school feeding coverage expands. Under strategic outcome 3, prevention of wasting among crisis-affected populations will decrease in line with strategic outcome 1. Although capacity strengthening under strategic outcomes 2 and 3 accounts for only 4 percent of the total budget, the share will increase over time. Investment in the country office's evaluation capacities will be augmented, with a corresponding increase in the budget. WFP is committed to allocating at least 15 percent of funds to gender equality activities.

TABLE 4: INDICATIVE ANNUAL BUDGET REQUIREMENTS (USD)

	Year 1	Year 2	Year 3	Year 4	Year 5	Total
Strategic outcome 1	35 276 017	30 507 736	24 048 039	18 536 204	18 249 836	126 617 832
Strategic outcome 2	25 161 070	27 074 270	28 001 511	28 811 327	28 243 216	137 291 394
Strategic outcome 3	10 041 901	9 724 959	9 504 645	9 082 434	8 539 806	46 893 746
Total	70 478 989	67 306 966	61 554 195	56 429 965	55 032 858	310 802 972

6.2 Resourcing outlook

104. WFP has a diverse donor base of more than 20 traditional, emerging and private-sector partners, which ensures minimum resourcing levels for uninterrupted implementation of the most critical operations. In view of the volatile humanitarian situation in parts of Myanmar, geographic and programmatic earmarking of many contributions is expected to continue. With recurrent ethnic conflict and natural disasters causing large-scale displacements, strategic outcome 1 is expected to maintain sufficient funding. The recent political and socio-economic transformations in the country have opened new opportunities under strategic outcome 2, particularly for the school feeding programme, and nutrition interventions under strategic outcome 3. Funding for development activities such as community asset creation, food by prescription for PLHIV and TB patients and country capacity strengthening will remain a challenge and will require new funding mechanisms.

6.3 Resource mobilization strategy

105. WFP aims to secure predictable, flexible and multi-year funding for the effective and efficient implementation of the CSP to serve 2,789,200 food-insecure people with a total budget of USD 310.8 million. Myanmar's commitments to zero hunger and other priorities, and the strategic interests of donors will guide WFP's resource mobilization activities.
106. WFP seeks to diversify its funding streams, capitalizing on partnerships with traditional donors and developing relationships with emerging and new donors that contribute to WFP in Myanmar. Support from the Government will be explored, and Myanmar's commitment to long-term ownership and sustainability is essential for engagement with international financial institutions. As resources from the public sector decline, engagement with private donors will be even more important, and assistance in the form of expertise, logistics and telecommunications equipment will be considered. WFP will maximize the benefits of complementary partnerships under the UNDAF. Funds are expected to be raised at all levels of the organization.
107. Donor visibility and improved reporting on WFP's activities are important in ensuring that contributions are recognized and in maintaining accountability. The country office implements a cost-conscious, results-oriented and partnership-based operation through the "3 Es" – economy, efficiency and effectiveness. Value for money will be a feature of WFP's good management practices in its various units and during contract negotiations with cooperating partners.

ANNEX I

LOGICAL FRAMEWORK FOR MYANMAR COUNTRY STRATEGIC PLAN (JANUARY 2018–DECEMBER 2022)

Strategic Goal 1: Support countries to achieve zero hunger**Strategic Objective 1: End hunger by protecting access to food****Strategic Result 1: Everyone has access to food**

Strategic outcome 1: Crisis-affected people in food-insecure areas meet their food and nutrition needs all year round.

Outcome category:
Maintained/enhanced individual
and household access to adequate
food

nutrition-
sensitive

Focus area: crisis response

Assumptions:

Security conditions remain stable and access to crisis-affected populations is granted in a timely manner

Cooperating partners are able to implement and coordinate with WFP in an effective way

Commodity supply is stable

Food prices are stable

Local food purchases by WFP are possible

Cooperating partners are able to implement gender, protection and nutrition-sensitive programming in line with WFP's expectations

Beneficiary groups, including in culturally conservative contexts, are willing to address gender disparities and protection risks and support social inclusion objectives

Surveys can be conducted and information is available and disaggregated

Outcome indicators

Dietary diversity score

Food consumption score

Food consumption score – nutrition

Household food insecurity access scale

Livelihood-based coping strategy index (average)

Activities and outputs

1 Provide unconditional food transfers and/or CBTs to populations affected by crisis (Unconditional resource transfers to support access to food)

Women, men, girls and boys affected by crisis receive food and/or CBTs in a timely manner to meet their daily food and nutrition needs (Tier 1). (A: Resources transferred)

Women, men, girls and boys affected by crisis receive food and/or CBTs in a timely manner to meet their daily food and nutrition needs (Tier 1). (B: Nutritious foods provided)

Strategic Outcome 2: Vulnerable people in states and regions with high food insecurity and/or malnutrition have access to food all year round.

Outcome category: nutrition-sensitive
Enhanced social and public-sector capacity to assist populations facing acute, transitory or chronic food insecurity
Focus area: resilience-building

Assumptions:

Security conditions remain stable and access to vulnerable populations is granted in a timely manner

Cooperating partners are able to implement and coordinate with WFP in an effective way

Commodity supply is stable

Food prices are stable

Local food purchases by WFP are possible

Cooperating partners are able to implement gender, protection and nutrition-sensitive programming in line with WFP's expectations

Beneficiary groups, including in culturally conservative contexts, are willing to address gender disparities, protection risks and support social inclusion objectives

Funding and partners are available to implement asset-creation and rehabilitation activities

Communities are able to maintain built or restored assets in an inclusive way

Funding is available to support the national school feeding programme

Sufficient partners are able to provide directly observed short-course treatment and anti-retroviral therapy in operating areas



Outcome indicators

Anti-retroviral therapy (ART) adherence rate
ART default rate
Attendance rate
Emergency preparedness capacity index
Enrolment rate
Food consumption score
Food consumption score – nutrition
Livelihood-based coping strategy index (percentage of households using coping strategies)
PLHIV nutritional recovery rate
PLHIV survival rate at 12 months
Proportion of the population in targeted communities reporting benefits from an enhanced asset base
TB nutritional recovery rate
TB treatment default rate
TB treatment success rate
Zero hunger capacity scorecard

Activities and outputs**2. Provide technical advice, policy support and training for the Government to improve delivery of national social protection and emergency preparedness programmes and food systems (Institutional capacity strengthening activities)**

Food-insecure people benefit from improved national programmes to enhance access to food (Tier 3). (C: Capacity development and technical support provided)

Food-insecure people benefit from improved national programmes to enhance access to food (Tier 3). (J: Policy reform identified/advocated)

Food-insecure people benefit from improved national programmes to enhance access to food (Tier 3). (K: Partnerships supported)

Food-insecure people benefit from improved national programmes to enhance access to food (Tier 3). (L: Infrastructure and equipment investments supported)

Food-insecure people benefit from improved national programmes to enhance access to food (Tier 3). (M: National coordination mechanisms supported)

3. Implement a comprehensive school feeding programme in targeted schools in support of the national programme (School meal activities)

Targeted girls and boys receive school meals or snacks to improve access to food (Tier 1). (A: Resources transferred)

Targeted girls and boys receive school meals or snacks to improve access to food (Tier 1). (B: Nutritious foods provided)

Targeted women, men, girls and boys receive health and nutrition education through schools, to improve nutrition knowledge (Tier 1). (E: Advocacy and education provided)

4. Provide conditional food or cash-based assistance in support of the creation and rehabilitation of assets, combined with nutrition messaging for targeted populations (Asset creation and livelihood support activities)

Community members benefit from the creation and rehabilitation of assets to improve resilience to disasters and enhance livelihoods (Tier 2). (D: Assets created)

Community members benefit from health and nutrition education to improve nutrition knowledge (Tier 2). (E: Advocacy and education provided)

Food-insecure women and men receive CBTs or food transfers to meet household food and nutrition needs through asset creation (Tier 1). (A: Resources transferred)

Food-insecure women and men receive CBTs or food transfers to meet household food and nutrition needs through asset creation (Tier 1). (B: Nutritious foods provided)

5. Provide unconditional food and/or cash-based assistance combined with nutrition messaging and counselling for PLHIV and TB patients (Unconditional resource transfers to support access to food)

PLHIV and TB patients receive food and/or CBTs to meet their food and nutrition needs (Tier 1). (A: Resources transferred)

PLHIV and TB patients receive food and/or CBTs to meet their food and nutrition needs (Tier 1). (B: Nutritious foods provided)

PLHIV, TB patients and caregivers receive health and nutrition messaging and counselling to improve nutrition knowledge (Tier 1). (E: Advocacy and education provided)



Strategic Objective 2: Improve nutrition**Strategic Result 2: No one suffers from malnutrition****Strategic outcome 3: Children under 5 in Myanmar have improved nutrition in line with national targets by 2022.**

Outcome category:

Improved consumption of
high-quality, nutrient-dense foods
among targeted individuals

Focus area: resilience-building

Assumptions:

Security conditions remain stable and access to vulnerable populations is granted in a timely manner

Cooperating partners are able to implement gender and protection-sensitive and nutrition-specific programming in line with WFP's expectations and coordinate with WFP in an effective way

Commodity supply is stable

Food prices are stable

Beneficiary groups, including in culturally conservative contexts, are willing to address gender disparities and support social inclusion objectives

Living conditions are favourable and foster nutritional recovery

Nutrition surveys can be conducted and information is available and disaggregated

Outcome indicators

Moderate acute malnutrition (MAM) treatment default rate

MAM treatment mortality rate

MAM treatment non-response rate

MAM treatment recovery rate

Minimum dietary diversity – women

Proportion of children 6–23 months of age who receive a minimum acceptable diet

Proportion of eligible population that participates in programme (coverage)

Proportion of target population that participates in an adequate number of distributions (adherence)



Activities and outputs

6. Provide implementation support, research-based advice and technical assistance for national policies and action plans to the Government and partners (Institutional capacity-strengthening activities)

Children under 5 benefit from strengthened government capacity to improve the implementation of national nutrition interventions (Tier 3). (C: Capacity development and technical support provided)

Children under 5 benefit from strengthened government capacity to improve the implementation of national nutrition interventions (Tier 3). (J: Policy reform identified/advocated)

Children under 5 benefit from strengthened government capacity to improve the implementation of national nutrition interventions (Tier 3). (K: Partnerships supported)

Children under 5 benefit from strengthened government capacity to improve the implementation of national nutrition interventions (Tier 3). (M: National coordination mechanisms supported)

7. Implement preventive nutrition interventions for adolescent girls, pregnant and lactating women and girls, and children under 2, and the roll out of community infant and young child feeding programmes (IYCF), CBTs for mother of young children and SBCC (Malnutrition prevention activities)

Pregnant and lactating women and girls, children under 2 and adolescent girls receive CBTs and food transfers to meet their nutrition needs (Tier 1). (A: Resources transferred)

Pregnant and lactating women and girls, children under 2 and adolescent girls receive CBTs and food transfers to meet their nutrition needs (Tier 1). (B: Nutritious foods provided)

Women and men caregivers, adolescent girls, pregnant and lactating women and girls, and community members benefit from SBCC in nutrition, care practices, and healthy diets to improve their knowledge, attitudes and practices (Tier 1). (E: Advocacy and education provided)

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8. Provide specialized nutritious foods for the treatment and management of acute malnutrition among pregnant and lactating women and girls and children under 5 (Nutrition treatment activities)

Malnourished girls and boys under 5, pregnant and lactating women and girls receive a comprehensive nutrition package to treat acute malnutrition (Tier 1). (A: Resources transferred)

Malnourished girls and boys under 5, pregnant and lactating women and girls receive a comprehensive nutrition package to treat acute malnutrition (Tier 1). (B: Nutritious foods provided)

Malnourished girls and boys under 5, pregnant and lactating women and girls receive a comprehensive nutrition package to treat acute malnutrition (Tier 1). (A: Resources transferred)

Malnourished girls and boys under 5, pregnant and lactating women and girls receive a comprehensive nutrition package to treat acute malnutrition (Tier 1). (B: Nutritious foods provided)

REVISION


Strategic Goal 1: Support countries to achieve zero hunger**C.1 Affected populations are able to hold WFP and partners accountable for meeting their hunger needs in a manner that reflects their views and preferences****Cross-cutting indicators**

C.1.1 Proportion of assisted people informed about the programme (who is included, what people will receive, length of assistance)

C.1.2 Proportion of project activities for which beneficiary feedback is documented, analysed and integrated into programme improvements

C.2 Affected populations are able to benefit from WFP programmes in a manner that ensures and promotes their safety, dignity and integrity**Cross-cutting indicators**

C.2.1 Proportion of targeted people accessing assistance without protection challenges

C.3 Improved gender equality and women's empowerment among WFP-assisted population**Cross-cutting indicators**


C.3.1 Proportion of households where women, men, or both women and men make decisions on the use of food/cash/vouchers, disaggregated by transfer modality

C.3.2 Proportion of food assistance decision-making entity – committees, boards, teams, etc. – members who are women

C.3.3 Proportion of people receiving compensation for participation in WFP activities

C.4 Targeted communities benefit from WFP programmes in a manner that does not harm the environment**Cross-cutting indicators**

C.4.1 Proportion of activities for which environmental risks have been screened and, as required, mitigation actions identified



ANNEX II

INDICATIVE COST BREAKDOWN BY STRATEGIC OUTCOME (USD)				
	Strategic Result 1, SDG target 2.1	Strategic Result 1, SDG target 2.1	Strategic Result 2, SDG target 2.2	Total
	Strategic outcome 1	Strategic outcome 2	Strategic outcome 3	
Focus area	Crisis response	Resilience-building	Resilience-building	
Transfers	102 191 113	109 836 215	36 973 367	249 000 695
Implementation	9 563 267	11 336 319	4 413 250	25 312 835
Adjusted direct support costs	6 580 044	7 137 180	2 439 314	16 156 538
Subtotal	118 334 424	128 309 714	43 825 931	290 470 068
Indirect support costs (7 percent)	8 283 408	8 981 680	3 067 815	20 332 904
Total	126 617 832	137 291 394	46 893 746	310 802 972

Acronyms used in the document

ART	anti-retroviral therapy
ASEAN	Association of Southeast Asian Nations
CBT	cash-based transfer
CSP	country strategic plan
FAO	Food and Agriculture Organization of the United Nations
GDP	gross domestic product
IDP	internally displaced person
IYCF	infant and young child feeding
MAM	moderate acute malnutrition
MDG	Millennium Development Goal
NGO	non-governmental organization
NSPSP	National Social Protection Strategic Plan
PLHIV	people living with HIV
PRRO	protracted relief and recovery operation
SBCC	social and behaviour change communication
SCOPE	WFP's corporate digital beneficiary and transfer management system
SDG	Sustainable Development Goal
SUN	Scaling Up Nutrition movement
TB	tuberculosis
UNDAF	United Nations development assistance framework
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UN-Women	United Nations Entity for Gender Equality and the Empowerment of Women