



Midwife Aye Aye Nwe greets one of her young patients at the newly constructed Rural Health Centre in Kyay Thar Inn village (Tanintharyi Region).  
 PHOTO: S. MARR, BANYANEER

## More engaged, better connected

**In brief:** results of the Southeast Infrastructure Rehabilitation Project (SIRP), Myanmar

“When I first came to this village”, says Aye Aye Nwe, “things were so different.” Then 34 years old, the midwife first came to Kyay Thar Inn village in 2014. “It was my first post. When I arrived, there was no clinic. The village administrators had built a house for me - but it was not a clinic! Back then, villagers had no full coverage of vaccinations and healthcare - neither for prevention nor treatment.”

The nearest rural health centre was eleven kilometres away - a long walk over roads that are muddy in the wet season and dusty in the dry. Unsurprisingly, says Nwe, “the health knowledge of villagers was quite poor. They did not know that immunisations are a must. Women did not get antenatal care or assistance of midwives during delivery.”

About 500 kilometres south-east of Yangon, Kyay Thar Inn village lies in Dawei district of Tanintharyi Region. Green paddy fields, gentle hills on the horizon. Less visible: the lasting legacy of a long conflict. Over more than six decades, armed groups and Myanmar’s military had fought each other. The collateral damage: villages like Kyay Thar Inn remained impoverished, disconnected.

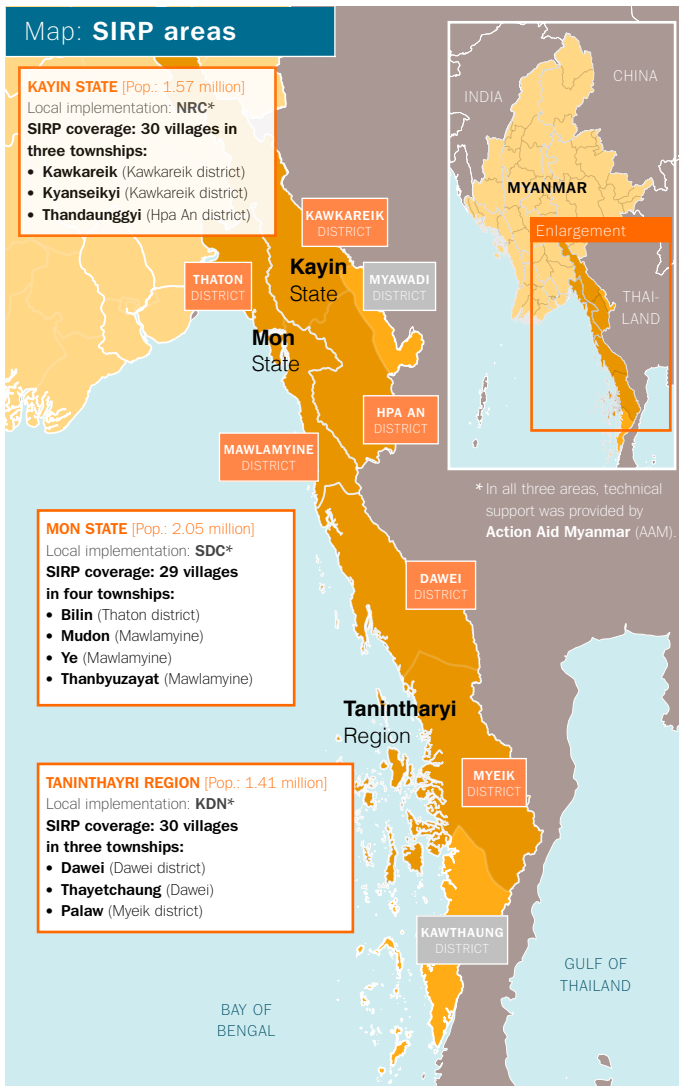
Following Myanmar’s reform process and ceasefires with local armed groups, the opportunity arose to finally improve conditions - advancing health, education, infrastructure, basic services. The task was huge, and remains considerable today despite the progress that has been achieved over recent years.

### The project

The Southeast Infrastructure Rehabilitation Project (SIRP) was designed to support this process. Starting in late 2012, a consortium of Norwegian Refugee Council (NRC), the Swiss Agency for Development and Cooperation (SDC), the Karen Development Network (KDN)\* and Action Aid Myanmar (AAM) sought to enhance lives and living conditions in 89 remote villages across Myanmar’s southeast.

Funded by the European Commission under its ‘Aid to Uprooted People’ programme as well as NRC and SDC, the EUR 7.0 million project focussed on Tanintharyi Region as well as Mon and Kayin States further north (see map overleaf). SIRP included a general frame of objectives (related to rights & citizenship, health, education, water & sanitation, and infrastructure). At the same

\* KDN was formerly known as Knowledge and Dedication for Nation Building



time, communities were guided to assess and prioritise their needs. Based on so-called 'Village Books', SIRP then supported what they needed most - be it a clinic, school, road, or water system.

### More engaged, more united

Through the Village Book process, people got more engaged in community development. "In previous days", says farmer Daw Thein Tin (52) from Za Le village (Kayin State), "we attended meetings just to show up. But most were not involved in discussions or any decisions. Now we can talk a lot and get involved properly." Saw Wai Wai (51) from Taw Ta La village (Tanintharyi) agrees and adds: "I see that the villagers have become more united because of the project. They were not like that before."

Community engagement went beyond planning: in many villages, groups were formed to actually construct new infrastructure. Furthermore, villages have formed committees to maintain these new assets. Equipped with skills and resources, most committees are confident that they will be able to fix broken water pipes or leaking roofs. Several communities already went further - completing some other priority actions in their Village Books that were not directly funded by SIRP.

### Project fellows

Part of the community-based process were so-called 'fellows' - villagers who were selected to mobilise the wider communities, facilitate development, and coordinate with SIRP partners and stakeholders. Once nominated by communities, they underwent extensive training to complete their multi-faceted tasks.

Naw Shwe Thet Wah Oo (33) is one of these fellows. "At first, it was so difficult to organise people", says the fellow from Wet Swei Phyu in Mon State. "After the sounds of guns had stopped, we did not know about other organisations, about development. And we were afraid of having to pay unofficial taxes." Wah Oo had to convince people - through home visits and lots of explaining. Over time, she grew more confident and also liaised with representatives of the Karen National Union (KNU, one of the non-state actors), who accepted and endorsed the project.

### Project results

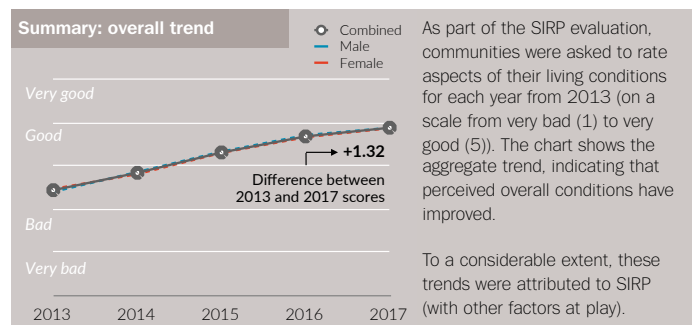
Upon completion of SIRP in mid-2017, independent consultants were asked to evaluate the project. Based on visits to 19 of the 89 villages, staff reflection workshops and a wide range of interviews and tools, the evaluation commended the overall approach for its participatory nature, sound targeting of remote and conflict-affected areas, and its largely sustainable outcomes.

SIRP investments made a positive difference to people's lives: the trend analysis shows overall improvements (see summary chart below). Along with the efforts of government agencies and others, SIRP was seen as a contributing factor behind this positive development - including both process dimensions (social cohesion, connectedness, women's empowerment) and dimensions related to outcomes (e.g. education, health, water).

**Take water.** In Naw Shwe Thet Wah Oo's village, there had previously been only six wells for 140 households, and none at the upland part of the village. "During summer time, villagers had to go for water collection, around three o'clock in the morning and queue up for their turn", she says. There was not enough water - in summer, wells would quickly run dry.

Since the SIRP-supported set-up of a water gravity system, there has been enough water for the whole village, and throughout the whole year. The village's water group established rules to save water, and collects MMK 5,000 (USD 3.60) per month from each household, enabling the group to maintain the system and give loans through a revolving fund.

**Concerning education,** the many new or upgraded schools provide better learning environments - as several sources suggest, students now stay at school longer to learn and play. Networking



between SIRP and the department of education as well as local advocacy between education committees and teaching staff mean that gaps and grievances are addressed more quickly.

Saw Eh Muu (14), a schoolboy from Kyauk Phyu (Tanintharyi) loves his new school. “In the past”, he says, “I was not happy to go to school because school windows would not cover us from the rain. The raindrops hit me when it was windy.” Teachers would often come late or not at all. “Nowadays, the teachers are no longer absent. We have got wider rooms and a bigger compound. I feel happier and safe at school.”

In many places, SIRP supported the construction of **new roads and bridges**. “Transportation was quite difficult before the project started”, says Sayama Su Thase Mar (35). The teacher from Ka Meik village (Tanintharyi) explains: “I always arrived late at meetings. The road was slippery, and I often fell down two or three times. Now it is quite convenient for me and my school students.”

Aside from convenience, new roads came with more tangible benefits: since trucks are now able to use the road to her village, access to markets has improved. “The prices of materials have become a bit lower than before”, she says. Furthermore, it was now easier to take the sick to hospital. Better roads had also reduced motorbike accidents - and saved many from “broken bones and injuries.”

**Better health services** are another outcome of the project: from a low baseline in terms of health knowledge and access, new rural health centres and sub-centres have led to a more accessible service provision.

On its own, a new building may not make much difference. But it enabled existing health staff to offer better and more services - proper antenatal care, immunisations, deliveries. Midwife Aye Aye Nwe explains: “Without a clinic, the villagers do not adopt the habit of regular visits for tetanus immunisations for pregnant ladies. I like them to visit the clinic. By visiting, they can improve their knowledge.” Now she can measure newborns’ weight and height, provide leaflets, and has sanitary facilities available. Thus far, Aye Aye Nwe has assisted in forty deliveries at the new clinic.

Farmer Daw Phyu Phyu Win (38) from Kyoe Wine village (Mon State) points out the easier access that the new health centre represents: whereas the new centre is just around the corner, it took her much longer in the past: “To get any medical treatment took such a long time. From our village, first we needed to walk 15 minutes to the boat stop. From there, we had to take a boat for three hours. Finally, it was another two hours by car.”

The project also invested in **better sanitation** - supporting the construction of latrines in schools and promoting hand-washing and other hygienic practices. While well-intended, the evaluation found that the project design did not include a more comprehensive behaviour change process that would have been more effective in inducing long-term adoption of hygienic practices.

### Better connected

In addition to the sectoral outcomes mentioned above, there is another over-arching result of the project: communities are better connected to local authorities and external actors.



**Naw Shwe Thet Wah Oo (33)** is a project fellow from Wet Swei Phyu (Ye township, Mon State) and also works as an auxiliary midwife.  
PHOTO: SDC

Especially given their remote setting, such connectivity is vital for communities’ resilience. Higher levels of community engagement, collective action, and confidence enable villages to issue requests to agencies, better roads and stronger relations support opportunities to develop further. In most cases, Village Books have been shared with authorities - providing a community master plan for the process that lies ahead.

### Lessons learned

The evaluation process identified numerous lessons that can inform future programming Myanmar’s south-east as well as similar contexts.

Generally, the bottom-up “Village Book” approach proved effective and is recommended for replication. The project design’s flexibility to accommodate for village priorities is seen as best practice; it rendered interventions relevant and mobilised communities. The in-depth maintenance training for new committees (particularly as pursued in Mon State) and the systems that were put in place to sustain new hardware are commendable.

Two particular aspects were found to require further attention: first, newly constructed water systems need to be more systematically tested for pollutants such as coliform. If that proves unfeasible, water must be treated to ensure it is safe to drink. Second, the sharing of Village Books is perceived as a double-edged sword in areas controlled by both the government and former ethnic armed groups: containing sensitive information (location of resources, access routes), the extent of what is shared with whom must be carefully considered.



Students from Pyin Ma Pin Seik Primary School (Bilin township, Mon State) learning all six steps of hand-washing, which was part of SIRP hygiene promotion training. PHOTO: SDC

**From here on forward**

Looking further ahead, it is highly likely that the supported communities will not only continue to maintain their new assets, but to also develop further. Much of the impact will only emerge over time - such as those related to better educated children, and certain health outcomes.

Meanwhile, a newly formed partnership of two consortium members will continue to support the development of Myanmar's south-east - a 'SIRP 2' project is already underway. In this context, the evaluation suggests four key areas to be considered.

First, the adoption of better sanitary practices involves a change in behaviours - which is a complex process that includes knowledge acquisition, addressing attitudes, and eventually the change of practices. A more systematic approach - and greater investments in this area - will be needed to transform sanitation practices in the long run.

Second (and underpinning this process), future projects shall invest in adequate baselines with robust sampling that then become the basis of a strong monitoring regime (which must be able to regularly assess outcomes as well as outputs). In turn, such quantitative data would enable a more robust evaluation of

final outcomes, achievement of targets, and quantification of impact. With SIRP 2 having just started, consortium partners may wish to consider retrofitting such a system now.

Third, adopting water testing protocols that are in line with SPHERE standards is an important aspect that cannot be overstressed: 'testing or treating' must be the premise of future programming in order to ensure that water from newly constructed wells and supply systems is safe.

Finally, the well-established development mantra of 'do no harm' must be thoughtfully considered in post-conflict contexts such as those in south-east Myanmar: while the Village Book process is a generally commendable approach that can and should be re-applied, it needs to be understood that the information in these books can be highly sensitive. In this context, a checklist should be used to decide what information can be shared.

In summary, the South-East Infrastructure Rehabilitation Project helped improve conditions in its target areas. It has also laid the foundation for further progress. Especially when adopting the suggested enhancements, SIRP 2 has promising prospects to further reinforce the resilience of communities, and to help them outlive and transform the troubled and conflict-shaped past.