



South-East Consultations
Operations Meeting on “Convergence”
Sule Shangri-La Hotel
19 June 2014

I. What is Convergence?

- Presentation (attached) from researcher Kim Jolliffe on study of ethnic conflict and social services in Myanmar’s contested regions. It is clear that “convergence” means something different to different people and it may be better to talk about coordination and cooperation rather than “convergence”. Service delivery needs to be understood in the context of traditional patron-client relations, with the patrons expected to play the big brother role, protecting, providing and making decisions as leaders, with the clients playing the little brother role, serving, deferring and following. In conflict dynamics, people often depend upon these patron-client relations.
- In Myanmar, Burmese elites have tried to lead from the centre. In the periphery, armed groups have typically been led by ethno-nationalists and followed by ethnic populations. Supported by both a military wing and typically large social wings. Communities that have opposed the centre have become increasingly dependent upon the EAG leaderships, with large assistance and service networks built in. Include social services from EAGs such as education, health care, child support, youth services, and women’s empowerment. The types of services are often quite endogenous to those ethnic communities.
- Key drivers of conflict: 1) Inequities in access to roles in governance; 2) Incompatible claims to government populations; 3) Grievance – forced paternalism of the Burmese state. Current peace process is the most encouraging indication of change of these issues.
- A variety of ways the armed groups control and manage territory. In most cases, there are two-way relationships including a claim to population and territory, but the overlaps leave local populations caught in between.
- New aid paradigm – massive influx of aid, close to USD 1.5 billion in loans, particular focus on peace and conflict. Shift towards normalization of aid relations as political context shifts in Myanmar, moving towards the approach seen elsewhere in the world, where donors work with the government and fund projects at local level.

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- Emerging issues in contested areas: a) state services expanding to areas without administration in place; b) INGOs being permitted to build schools, clinics and other basic services in specific contested areas only; c) government taking control of non-state/community schools without discussion; d) programmes implemented in ethnic national service areas, without consultation; e) teachers leaving ethnic armed organization education bodies for higher government salaries and schools. This all harms confidence in the communities, amid fears of state expansion. This narrative is particularly strong where government has had historically less access.
- Also offers opportunities for peace building through cooperation. Several possible benefits: visible cooperation, addressing real needs, reduce paternalism and patronization, avoid disputes on the ground, supports self-reliance, specific grievances (e.g. mother tongue education), and finally communities becoming less fearful and sceptical of services. Moreover, it creates a lot of space for institutional evolution, opening up areas of common interest and needs, and space for constructive dialogue.
- Issues emerging from this presentation include “conflict sensitivity”, the need for emphasis on humanitarian principles, particularly when parties to the conflict are involved in delivery of services, and the lack of comparative analysis with other situations. Unlike in many other situations around the world, the Burmese state has never been present in some of these contested areas at all. In other conflict settings, the absence was only temporary; here, the state has never been present until now.
- Some assert that what Myanmar now needs is a strong, effective central state, to actually address these broad issues in underdeveloped areas. The question, in the context of the reforming government, is how to address the lack of state legitimacy in conflict-affected communities, particularly compared to non-state services. The challenge for the humanitarian communities is how to “do no harm” while supporting development; to ensure aid agencies don’t get ahead of the peace process.

II. Health Services

- Presentations attached. Nine groups are a part of the Health Convergence Core Group (HCCG): KDHWT, BPHWT, BMA, MNHC, KnMHC, SSDF, MTC, CPAC and NHEC. Total target population close to 700,000. Formed in May 2012.
- Over the last 25 years, ethnic and community-based organizations have provided services where state health services have not been available. Services are provided through a mix of both mobile and fixed clinics, primarily preventative medicine and primary health care. Some agencies offer targeted health programs, including in maternal and child health, and community health and disease prevention.
- Defining convergence in health: long-term alignment of government, ethnic and community-based health services. Increased collaboration between ethnic and community-based organizations, donors and INGOs.
- HCCG Draft convergence model adopted in March 2013. Predicated on continued progress of ceasefire talks and subsequent peace agreements. Program convergence

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involves standardization and cooperation. HCCG already consulting and coordinating with Ministry of Health on issues such as drug-resistant malaria. Also involves technical issues, such as shifting procurement to inside Myanmar rather than cross-border.

- Assertion that NGOs should also play a supportive role in convergence. Essential that support is provided directly to CBOs in local areas. Should engage NGOs such as HCCG in meetings like this one as well.
- International Rescue Committee (IRC) has collaborated with several organizations to provide health, food security, education and protection services to conflict-affected communities. Convergence has been a project objective since 2005. For IRC, convergence means integrating these services, and approach should build on local capacities rather than purely expanding state services.
- Much of the discussion on convergence in the South-East has been led by NGOs. Significant because it involves social service providers overcoming decades of conflict and mistrust to come together to find ways to enhance social services. IRC has worked as a neutral broker between ministry of health and ethnic health organizations, and to build trust and mutual understanding.
- Ministry of Health (MOH) has a growing appreciation of the capacity and contributions of non-state health workers, but on a technical level there remains a gap in certification. IRC working to plan certification courses to address this gap, in collaboration with MOH.
- Several challenges and lessons learned. Concerns about centralisation as governments get involved. Ethnic groups see this as a challenge because peace agreements not yet finalized, and risks disturbing the process itself. Another one is that it is early days in coordination and collaboration; requires building, needs to be locally led to be effective and contribute to peace-building. Registration takes time, and laws related to registration are out of date.
- How can people move through current non-state systems to access more specific care, such as emergency obstetric care? According to HCCG, mobile obstetric care clinic is in place, but no fixed model right now. When they cannot be treated, would send to the Thai side, probably nearest refugee camp, or occasionally to health centres in Myanmar.

III. Education

- Karen Education Department (KED) has provided services on both the border and inside Kayin State for 65 years. Some complexities in demarcating the borders of Kayin State – government and KNU have different maps and inconsistent borders. Complications getting information from Kayin State government.
- Some schools are mixed in Kayin State, with both government and non-state teachers and curriculum. There are also CBO and FBO-led schools. More than one third of Kayin State are part of KED network, some supported through teacher subsidy. With the help of INGOs, KED has managed to increase teacher subsidies for the coming year.

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- KED maintains two teacher training colleges. Curriculum is culturally-relevant, and based on mother-tongue. Research suggests this will yield best results. Difficulties with information sharing and collecting reliable data. Particularly happens in mixed schools, where there is duplication of information coming from state and non-state components.
- There is an inconsistency in the number of years between parallel systems. Government planning to reform their years of schooling. KED's curriculum dates back to 2008; working on revising syllabus and textbooks. Also differences in system of accreditation, both for teachers and students. The consequence is parallel systems and limited movement between these systems. Lack of recognition of educational attainment of students for further educational opportunities, and for teachers for further professional development opportunities.
- Convergence has to be understood as having begun sometime between the Myanmar National Election in 2010 and temporary ceasefires in 2012. Parallel systems date back to independence in 1948, crystalized with establishment of refugee camps in 1990s, and then crossed the border back into South-East Myanmar.
- KED defines educational convergence as "a process of dialogue, collaboration and agreement within and across borders to ensure all people have equal access to relevant and quality education and training that is valued and recognized." Five stated goals for educational convergence, linked to recognition, support for local curriculum and mother-tongue education, and policy engagement. There is evidence that mother-tongue education produces the best outcome in Karen communities.
- Working to develop evidence base to support discussions on these key issues such as accreditation. Working to map existing services and connect them to international standards that are culturally relevant for minority communities. Hope this will move towards a future with a focus on quality, culture and safety.
- Recommendations to achieve convergence goals include recognizing the scale and scope of non-state systems, supporting a transitional period, recognition of the sensitive context and a balanced approach to funding of government and non-state education services. KED open to collaboration and partnerships with any interested agencies.
- Appears there is far less convergence in educational sector than there is in health. Very little practical cooperation so far in education – still at conceptual stage. Only very recently that the border-based NGOs came together to look at these issues in education, and has taken quite some time for groups to be comfortable with the notion of convergence. Also comes back to the fact education is more inherently political than health, considering its cultural and linguistic ties in this context.
- Mixed schools are complicated, varied, and primarily involve communities that have been in between the conflict. Mixed schools can mean ethnic schools that adopted the national curriculum to appease the government in the area, among other scenarios. For example, in NMSP areas, mixed schools use both curriculums but provide opportunities to transition into state system at secondary level or remain in Mon system.

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- There appears to be a natural overlap in education on the ground, particularly when ceasefires are in place. In Mon, there has been significant overlap at the ground level, particularly during conflict but through local arrangements not institutional convergence at the beginning, and that came later. Kayin State several years behind Mon State. KED works with other ethnic education groups, and have a forum to share experiences. Separate network for armed group education organizations.

- IV. General discussion

- How are donors able to accommodate the challenges of parallel systems taking into account the recommendations in the presentation and the challenges of administration in the current context? One simple answer is that donors do not feel they have all the range of tools to engage on these issues, and have therefore been working through the channels (e.g. INGOs) they previously had available to them. A few things have been attempted, reaching out to develop new forms of engagement, some more effective and encouraging than others. Donors can also be slow-moving, but it was noted they have strong support to engage in this critical moment in Myanmar, and find discussions like this operations meeting to be crucial to improving understanding.
- INGOs note that flexibility from donors makes a big difference. Appreciate that a lot of resources being devoted to “retro-fitting” services to be conflict-sensitive, but also need to ensure communities see joint interaction to build trust in these institutions.
- Donors do have different tools and opportunities to engage with government, but the entire reform process needs to be taken into account. Through partnerships, donors can bring up international level discussion on these issues. In health, because it’s less political and more integrated, also more pragmatic. Need to ensure those local discussions connect to political discussions in Nay Pyi Taw.
- Service provision is political. One example is resource allocation to the two systems in education. Another factor is that some schools and curriculum are in different dialects of ethnic languages, not all in the dominant ethnic language. And finally, for the first time, in the current reform process, starting to see the government recognizing that mother-tongue education may be important. Need to take wider process into account.
- The refugee education curriculum was, from 2007, focused on resettlement and integration into Thailand, underlining the role that the Temporary Shelters have played in ethnic education. That was the priority, not repatriation and reintegration into Myanmar. An interesting parallel is Indonesia, which is quite similar, but the dominant language was not linked to ethnicity but rather trade and commerce. Some agencies have reviewed Sri Lankan case as well. Moving beyond this comparative analysis requires policy support (e.g. education law).
- For health, shifted from the border to Hpa-An in 2012, and began talking with minister of health monthly six times. Discussions broke down because ministry had to refer back to union level government. But when discussions take place at union level, border-based agencies not invited to participate.

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- Focus here is programme convergence, but requires follow-up on systems and technical level. Convergence also requires competence base, which is not there yet in Myanmar. The operations meeting is a fabulous initiative but there is no actor that is looking at the strategic points of convergence that should be targeted. This is a major gap; donors should be involved in that level of discussion, to advocate for a real link being created with border agencies.
- Should not lose sight of other services either. Protection and mine risk education are extremely important as well. Convergence goes far beyond health and education.
- Three main ways to improve the use of aid: 1) conflict sensitivity, particularly as they affect roles of governance in conflict areas. 2) real need to ensure funding does not continue to decrease for some groups, as the agencies and communities view this as shifting to the centre. 3) for registration of health workers and teachers, there is a need for transitional institutions with a component to address how to mainstream in contested areas. Also a real need for donors to come together to discuss how to develop a more sophisticated approach to working with these organizations. There is a lack of literature on engaging with non-state actors, which makes donors risk-averse in doing so.
- The South-East Consultations is a forum for agencies based in Myanmar, and the mailing list focuses on agencies based there. This meeting, considering the topic, was opened up to border-based agencies. Now that there is a precedent, UNHCR can look at how to engage further. Suggestion to drop the nomenclature of “Thailand-based” or “border-based” agencies, as their work is still carried out in Myanmar.
- An article in “The Irawaddy” stated that the Thai government was meeting with UNHCR about refugee return. UNHCR responded that it meets regularly with the Royal Thai government, as a matter of normal practice, and some INGOs were involved in the meeting in the three-day meeting, which finished today. There are no new developments in the oft-stated UNHCR position on return of refugees to Myanmar, which is that return is premature.
- Interest in taking forward technical level discussions, for which UNHCR is not necessarily suited but by relevant agencies leading, such as UNICEF, WHO and RCO. Some existing forums not friendly to agencies. Some fatigue with meetings, and instead of creating new groups, should make use of existing working groups, mainstreaming these issues into those forums. UNHCR can play a catalytic role in bringing issues forward.
- While this meeting was convened within the SE Consultations, the KIO has expressed a need to be included on discussions of convergence.

UNHCR
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Attachments: presentations, attendance list