



**Convention on the Elimination
of All Forms of Discrimination
against Women**

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**Committee on the Elimination of Discrimination
against Women**
Twenty-second session

Summary record of the 450th meeting

Held at Headquarters, New York, on Friday, 21 January 2000, at 10.30 a.m.

Chairperson: Ms. González

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The meeting was called to order at 11 a.m.

Consideration of reports submitted by States parties under article 18 of the Convention *(continued)*

Initial report of Myanmar (CEDAW/C/MMR/1)

1. *The Chairperson invited the members of the delegation of Myanmar to take places at the Committee table.*

2. **Mr. Mra** (Myanmar) said that his Government's reading of the articles of the Convention had revealed that existing laws and social practices in his country were compatible with its provisions. Current and previous constitutions guaranteed sexual equality and women's rights. Under law, women in Myanmar enjoyed the same rights as men in the political, economic, administrative and social spheres. The family was the basic social unit, and most were extended families. Although the head of the household was usually the father, the mother had the major role in rearing children. The wife was often considered the family's home minister, and couples usually kept joint bank accounts.

3. Men and women had equal access to health services. In implementing the national health policy, the Ministry of Health sought to improve the health of the Myanmar people through prevention, treatment, and rehabilitation as well as through education, information and communication services. The steering committee for the National Health Plan was made up of representatives from the ministries as well as from non-governmental organizations. National population policy sought to improve the health of women and children by ensuring access to birth-spacing information for all couples that voluntarily sought such services. Birth-spacing programmes were carried out by governmental entities and non-governmental organizations with assistance from international agencies.

4. The Government was improving and expanding nutrition programmes and had launched a national breastfeeding policy. The Ministry of Health had formed a Food and Nutrition Control Committee, which worked with the National Health Committee to develop a multisectoral approach to food and nutrition. Studies had shown that girls suffered from lower rates of protein energy malnutrition than boys. About 25 per cent of Myanmar girls suffered from anaemia however,

and nearly 60 per cent of pregnant women suffered from iron-deficiency anaemia. Goitre was the most common visible form of iodine deficiency disorder in Myanmar.

5. Since AIDS was pervasive in all social classes, and had begun to spread into low-risk population groups, the Government had given top priority to developing a multisectoral approach to fight the disease. It was encouraging non-governmental organizations to participate and conducting research had been with a view to promoting and supporting AIDS prevention and control.

6. Health services were organized at three levels: the central level, which was responsible for policy, planning, training, supervision, monitoring and evaluation; the intermediate level, which consisted of the State and divisional hospitals providing specialized care and the peripheral level, which consisted of township and station hospitals, rural health centres and village health clinics. Doctors, women health visitors and midwives offered maternity and birth-spacing services at health centres in both rural and urban areas. The Myanmar Maternal and Child Welfare Association, a well-established non-governmental organization, also provided those services. With the inauguration of the National Health Plan, the maternal and child care programme had been reshaped and had become a reproductive health care programme, which now also covered adolescent care.

7. Although there was no statutory provision for abortion services, women who had undergone unsafe abortions had access to emergency services and follow-up care, including post-abortion contraception. Many women used traditional medicine and herbal preparations. Most maternal health care practitioners and reproductive health consultants were women. Promotion of reproductive health included safe delivery, safe motherhood, birth-spacing, the prevention of sexually transmitted diseases (STDs) and HIV/AIDS, reproductive and life skills education for women and adolescents, and condom promotion. Programmes targeting those goals were being conducted by the Ministry of Health in collaboration with other ministries, local and international non-governmental organizations, and the private sector. In addition, the Myanmar Maternal and Child Welfare Association offered life skills training for women and the Myanmar Red Cross Society provided similar programmes for youth.

8. The prevention of STDs involved health education, early case detection, early diagnosis and effective treatment. The Department of Health and the HIV/AIDS force of the Myanmar Medical Association had both conducted training courses for health personnel in syndromic management of STDs. Condom promotion for persons at high risk, such as those with multiple sex partners, was carried out in collaboration with local and international non-governmental organizations.

9. Education was a major component of the HIV/AIDS prevention strategy, and relevant educational materials had been published in various indigenous languages. In addition, materials for such target groups as drug users, youth and women were distributed in various parts of the country. Town health departments, school health teams and trained staff from the Department of Basic Education provided AIDS education in the schools. The Ministry of Health and the Ministry of Education had developed curricula for teachers in the area of healthy living, AIDS prevention and risk avoidance skills. Representatives from community organizations and volunteers were trained to promote community education and awareness programmes on AIDS and STDs, through educational materials including gender-specific messages.

10. Birth-spacing programmes included training for basic health care staff and volunteers, community education on the benefits of birth-spacing and contraceptives. The Integrated Management of Maternal and Childhood Illnesses Programme was aimed mainly at treatment and prevention of such common childhood diseases as diarrhoea and acute respiratory infections, but a safe maternity component had been incorporated to provide training for primary health care workers, particularly auxiliary midwives in rural areas and traditional birth attendants.

11. Objectives set for women's health by the year 2000 included reducing the infant mortality rate from 47.1 to 45 per 1,000 births and halving the maternal mortality rate from 1 to 0.5 per thousand live births, achieving and maintaining a full immunization rate of 90 per cent for infants, providing access to information on HIV/AIDS prevention, reducing iodine deficiency disorders from 33.08 per cent to under 20 per cent, increasing access to prenatal care and childbirth services, providing universal access to birth-spacing information and reducing iron deficiency anaemia among pregnant women.

12. One of the areas of concern identified by the National Committee for Women's Affairs was violence against women. The activities intended to prevent violence and rehabilitate the victims included training in counselling and establishment of counselling centres throughout the country. Health care had also been provided to women in the border areas through the Border Area Development Programme.

13. As part of the Environmental Health Programme, the Government had formulated a national policy to assess environmental health risks in communities. A community water supply and sanitation programme was designed to provide safe drinking water and adequate sanitation in both rural and urban areas. Working women were covered by occupational health legislation and were entitled to three months' maternity leave. The World Health Organization had recognized health care services in Myanmar as among the best in South-East Asia.

14. Since education determined a woman's access to employment, control over her fertility, family size and spacing and the education and health of her family, the Government was implementing programmes to enable every individual, regardless of sex, to acquire a basic education. There was no discrimination against women in the educational system; in fact, of the 26 top students in the most recent university entrance exams, 15 were girls. As part of the Human Development Initiative Programme with cooperation from UNDP and UNESCO, vocational training programmes and adult literacy programmes were being offered as well.

15. The Myanmar National Committee for Women's Affairs followed its report of March 1999 with a nationwide celebration of Women's Day on 3 July. At a coordination meeting for 1999, the National Committee had decided to increase its membership and had identified six areas of concern: education, health, the economy, violence against women, culture and the girl child. Two more areas — women and the environment and women and the media — had subsequently been added.

16. Finally, the Government's efforts to implement the National Plan of Action for the Advancement of Women had been hampered by a lack of gender-disaggregated data earlier than 1990. Since 1990, it had begun to collect such data on employment and had extended collection to the education sector. However, without international technical assistance and financial

resources, it would be hard pressed to satisfy the requests of the National Committee for Women's Affairs.

17. **Ms. Khan** commended the Government of Myanmar for its ratification of the Convention without any reservations to its substantive articles. Throughout its history, women had played an important role in its society, and more recently in its independence movement and in politics. Indeed, Myanmar was the home of the first woman Nobel laureate from South-East Asia, Daw Aung San Suu Kyi, who had debunked many of the stereotypes about women's roles. She hoped that many other women would help to shape the political life of Myanmar.

18. The establishment of the national machinery for implementation of the Convention was an indication of the Government's commitment to women's rights, and those institutional arrangements seemed to be moving in the right direction. However, a lack of gender-disaggregated data and any indication of the funding allocated for that machinery might make the dialogue more difficult.

19. No figures had been provided on how the Government hoped to fund the projects and activities for the advancement of women mentioned in the report and presentation.

20. She expressed concern over the situation of women and children trapped in the ethnic conflicts that continued to plague Myanmar, particularly in the border areas and refugee camps. She wondered whether those women had access to the facilities mentioned in the report free of charge. Noting that 75 per cent of the country's population was rural, she inquired further to what extent rural women benefited from the measures highlighted in the report. While the Committee welcomed the Government's commitment to improving the health of women, it wished to know whether there was a budget specifically earmarked for that purpose.

21. She would also welcome more information about access to family planning services and about violence against women, especially those living in refugee camps, who were particularly vulnerable. Information on primary education would also be most welcome. When States parties ratified the Convention, they accepted responsibility for eliminating all forms of discrimination against women in the public and private spheres. The Committee therefore hoped that future

reports of Myanmar would squarely address situations of inequality identified between men and women.

Article 2

22. **Ms. Schöpp-Schilling** asked whether the principles enshrined in articles 1 and 2 of the Convention would be embodied in Myanmar's new Constitution and when the drafting process would be completed. The Government should include in its new basic document the full definition of discrimination against women, in order to facilitate the task of legislators, namely to translate it into specific laws. She asked whether the Convention was published in an official gazette, whether it was legally binding in Myanmar and whether current legislation clearly prohibited discrimination against women by various State agents and actors.

23. Given the important role that the military played in the current Government, it would be interesting to know whether there was any legislation in place to identify and deal with potential or actual cases of discrimination against women by military personnel. She wondered whether one of the tasks of the institutional machinery protecting women was the review of existing legislation in order to identify any *de jure* discrimination against women.

24. **Ms. Corti**, referring to article 13 of the 1947 Constitution, wondered whether the spirit and letter of that article were being implemented. Since Myanmar was a multi-ethnic and multi-religious society, and women were often the custodians of traditions, she wondered how women of the various ethnic and religious groups were guaranteed the same rights and bore the same responsibility to respect government policies and the rights and customs of other groupings, even when those rights contradicted their own religions and traditions.

Article 3

25. **Ms. Ouedraogo** welcomed the establishment by the Government of Myanmar of a plan of action and of several national committees for the advancement of women. The Beijing Conference had identified the allocation of resources to institutions for the advancement of women as a priority area. The absence of information concerning the budget of Myanmar's national committee was therefore regrettable. Moreover, the six priority areas identified by the national plan of action should also have taken into

account the participation of women in decision-making, which was included among the 12 key points of the Beijing Platform for Action. She would therefore appreciate more information on that subject as well as details of the plan of action, its objectives, strategies and main programme of activities. That information would have enabled the Committee during the constructive dialogue to exchange ideas on flaws and successful experiences and to monitor Myanmar's plans to implement the Convention over the next few years.

26. **Ms. Goonesekere** expressed satisfaction at the high level of enjoyment by women of Myanmar of their rights under the Convention. The female literacy rate, one of the highest in the region, testified to women's enjoyment of the fundamental right of access to education. Some women, however, particularly those from vulnerable sections of the population, had not benefited significantly from the progress made, and it was the Committee's task to focus on the constraints they faced.

27. Although the report referred to a subcommittee on violence against women, it contained no data on the prevalence of the phenomenon or its different manifestations. In countries with a history of internal conflict, in which the military had a visible high presence, women were especially vulnerable to violence. It was important to know, in such a context, how law enforcement officials and the military were held accountable for acts of violence against women, and whether they received training on the principles of the Convention.

28. She asked whether the Government intended to review the Penal Code, 1860, which contained a number of provisions that discriminated against women. She was concerned about reports that the Town and Village Act was being misused as an instrument for pressing citizens into forced labour, including portage, which was especially detrimental to the health of women.

29. **Ms. Ferrer** said that the establishment of the National Working Committee for Women's Affairs which had competence to receive and channel complaints, had been a very positive step. She wished to know how many complaints of discrimination the Working Committee had handled and what measures it was empowered to take when complaints were upheld. She would also like to have more information about the

relationship between the Working Committee and the National Committee for Women's Affairs. She wondered whether the National Committee, which met only every three months, had its own full-time secretariat. She had found it difficult to gain a clear picture of the role and presence of women in the various social sectors because of the lack of gender-disaggregated statistics, and she suggested that the Working Committee would be well placed to collect such data.

30. It would be helpful to hear more about the goals of the long-term plan (2001-2020) on development of Myanmar women and the mechanisms established to monitor the implementation and outcome of the plan. She inquired whether the plan included measures to publicize the Convention, raise awareness of gender issues and increase women's representation in decision-making positions and non-traditional professions. She would also like to know whether the plan made special provision for Myanmar's large rural population. In addition, she wished to have more information on the situation of street children and the scale of poverty among women, as well as any measures taken or planned for the reintegration in society of the poor among the female population.

31. **Ms. Hazelle** asked the representative of Myanmar to describe in greater detail the composition of the National Committee for Women's Affairs and the Working Committee, the financial and human resources allocated to them and their respective roles. She also wished to know how the Ministry of Social Welfare, Relief and Resettlement fulfilled its role as the National Focal Point for Women's Affairs and how the subcommittees dealing with the six critical areas identified in the Myanmar National Action Plan for the Advancement of Women were funded. It would be helpful to have a clearer picture of the goals of the Action Plan and the aims of the Government's policy on women.

32. **Ms. Ryel** asked what types of complaint were brought before the Working Committee, what steps had been taken to make individual women aware of the Committee's competence to consider complaints, and whether its budget was adequate.

33. **Ms. Kim** asked whether any of the members of the Working Committee came from women's non-governmental organizations, and, if so, what the criteria were for their selection. She would like to have

more information on the number of such organizations and their status in Myanmar, and she wondered whether they had participated in the drafting of the State party's report. She also wished to know whether the Convention had been translated into the languages of Myanmar's ethnic minorities.

Article 4

34. **Ms. Myakayaka-Manzini** said that the report stated in relation to article 4 that women in Myanmar had already achieved equality with men, but did not clarify whether that meant de jure or de facto equality, nor did it describe what steps had been taken by the Government to promote women's advancement. She considered that temporary special measures were needed, in particular, to increase women's representation in Parliament and the Government. She was concerned that undue emphasis had been given in both the report and the oral presentation to women's role in the family, whereas the Convention stated that women should have opportunities for involvement in all areas of life. While the subcommittees on education and violence against women were to be commended for conducting surveys and holding meetings, she wondered whether those initiatives had yielded tangible results, such as programmes or action plans.

Article 5

35. **Ms. Ouedraogo** said that the popular saying that when a husband carried a load on his shoulder, the wife would carry a load on her head seemed to be indicative of women's high status in society. Since many discriminatory practices were founded on stereotyped views of women and traditions that denigrated them, it was extremely encouraging to see that in Myanmar, women had always been valued. The State party should seek ways of building on the positive images of women in Myanmar in order to promote their advancement. She would be interested to know whether there was any discrepancy between the worth traditionally attached to women and their actual roles in daily life. She wondered, for example, how domestic tasks were distributed between the sexes. Given women's apparent high status, she found the assertion in the report that the head of the household was the father rather perplexing.

The meeting rose at 1 p.m.