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Short-duration country programme document

Bhutan

Summary

The short-duration country programme document for Bhutan is presented to the Executive Board for discussion and approval. The Board is requested to approve the aggregate indicative budget of \$966,000 from regular resources, subject to the availability of funds, and \$2,000,000 in other resources, subject to the availability of specific-purpose contributions, for 2007.

* E/ICEF/2006/10.

Summary of the situation of children and women

1. Despite its late entry into the development community, Bhutan has made rapid progress in the last four decades that includes several major achievements: (a) the establishment of a formal education system in 1961, with steady progress made towards universal primary education; and (b) the establishment of a health care system in the early 1960s that has led to no cases of polio being reported since 1986, and to normal iodine status achieved in 2003, a significant improvement over 1983, when goitre prevalence was 64 per cent. Bhutan seeks to graduate from least-developed country status in 2008, as gross domestic product per capita (\$970 in 2004) is expected to increase by 38 per cent following completion of a new hydroelectric plant. In 2008, the absolute monarchy in place since the early 1900s is expected to make progress towards a parliamentary democracy with a written constitution.

2. A small country with a population of under 1 million, Bhutan has limited partners in development, an absence of strong civil society organizations (CSOs) and no vibrant non-governmental organization (NGO) sector. UNICEF has been the country's major development partner for children and women, implementing national-scale programmes. The 2002-2006 country programme achieved several notable results: (a) the establishment of more than 100 community schools, which contributed to an increase in primary enrolment from 48,000 to 51,200 for boys and from 42,900 to 48,700 for girls, between 2002 and 2005 (with the girl: boy ratio improving from 89 per cent to 94 per cent); (b) the official declaration in 2003, by the International Council for the Control of Iodine Deficiency Disorders, that Bhutan was the first country in the region to eliminate iodine deficiency disorders; (c) the maintenance of measles coverage at over 85 per cent since 2002, and the introduction of rubella vaccination into the routine expanded programme on immunization (EPI), launched with a national measles-rubella campaign in 2006; (d) for schoolchildren and Non-Formal Education (NFE) learners, supplementation with a weekly iron-folate tablet since 2004-2005 to address the high anaemia prevalence uncovered in 2002; and (e) an increased focus on child protection issues after the National Commission for Women and Children (NCWC) became a fully functioning body in 2005.

3. Despite the gains described above, the remaining challenges for achieving the Millennium Development Goals include a lack of available and quality data. Nevertheless, existing data demonstrate that the desired progress on one indicator for Goal 4 (over 85 per cent of one-year-olds immunized against measles) has been achieved. The most recent data indicate infant and under-five mortality rates of 60.5 and 84 per 1,000 live births, respectively. No recent data for the maternal mortality ratio indicator for Goal 5 exist; the latest figure is 255 per 100,000 live births. Progress has been made towards the target of achieving 100 per cent skilled birth attendance, which rose from 24 per cent in 2000 to 56 per cent in 2003 (all data above are from a 1999 National Health Survey). The most recent data showing that the proportion of underweight children under five was halved, an indicator for Goal 1, is also from 1999, suggesting that the target was achieved before the start of the current country programme.

4. While HIV prevalence is most likely under 0.1 per cent, low condom use and high-risk attitudes about sexual activity, among other factors, suggest that prevalence could soon rise steeply. Regarding Goal 2, no recent data exist on the

primary net enrolment rate, which in 2002 was 64 per cent for boys and 56 per cent for girls. However, evidence points to advances made in the percentage of pupils starting grade 1 who complete grades 5 (which rose from 91 per cent to 94 per cent) and for grade 7 (which rose from 81 per cent to 86 per cent) between 2000 and 2004. Without a policy on compulsory basic education, achievement of universal primary education will remain a challenge. Many children are also still subject to corporal punishment, though the practice is banned in schools. Although data on child protection are limited, evidence is growing of violations against children, such as an increase in reported sexual abuse cases. At least 25 per cent of children 10-14 years old are working, mainly helping parents with agriculture in rural areas and working in shops, restaurants and hotels or vending on the street in urban areas.

5. The first-ever census in Bhutan in 2006 will help to address a lack of data related to the achievement of the Millennium Development Goals and *A World Fit for Children* targets, as will the country's first-ever multiple indicator cluster survey (MICS), to be conducted in 2006.

The country programme, 2007

Summary budget table

| | <i>(In thousands of United States dollars)</i> | | |
|--|--|------------------------|--------------|
| | <i>Regular resources</i> | <i>Other resources</i> | <i>Total</i> |
| Health and nutrition | 300 | 700 | 1 000 |
| Basic education | 250 | 750 | 1 000 |
| Water, sanitation and health promotion | 140 | 300 | 440 |
| Protection, advocacy and planning | 176 | 200 | 376 |
| Cross-sectoral costs | 100 | 50 | 150 |
| Total | 966 | 2 000 | 2 966 |

6. **Reason for the one-year extension.** The Government requested the United Nations agencies to postpone the new United Nations Development Assistance Framework (UNDAF) by one year to better align planning cycles. A new UNDAF will be developed in 2006 for 2008-2012, and the 2008-2012 country programme document will be presented to the Executive Board in June 2007.

7. **Goals, key results and strategies.** The country programme goal remains the progressive realization of the rights of all children, based on the principles of the Convention on the Rights of the Child, especially non-discrimination, universality, indivisibility, participation and the promotion of the greater accountability of stakeholders. During the 2004 mid-term review (MTR) of the 2002-2006 country programme, a comprehensive programme evaluation and reformulation included the development of results matrices, streamlined programme areas and better defined results to be achieved. The one-year extension programme will concentrate on consolidating gains made in the previous programme and on improving the situation of children and women in line with the MTR. This will be done by achieving the unrealized results of the 2002-2006 country programme, by raising targets and expanding programmes to unreached areas, and by identifying and addressing gaps

in needs and coverage, thereby contributing to progress towards targets of the UNICEF medium-term strategic plan (MTSP) and the Millennium Development Goals.

8. Given the small population size, programmes will continue to be implemented on a national scale, using a mix of strategies: (a) advocacy; (b) support to policy development; (c) capacity-building; (d) supply provision; (e) community-based approaches; and (f) limited service delivery. The strategies are aimed at addressing the needs of children using the life-cycle approach. Capacity-building at district and community levels will continue to focus on village health workers, non-formal and formal school teachers, water caretakers and religious practitioners, and will include building skills in behaviour-change communication. The training of stakeholders will include HIV/AIDS education messages and child rights. Support to basic service delivery will continue in various sectors, focusing especially on remote and marginalized populations.

9. **Relationship to national priorities and UNDAF.** The former country programme for 2002-2006 was drafted in 2001, before the Government's Ninth Five-Year Plan (2002-2007). To improve alignment between the country programme and the Five-Year Plan, the Government fully participated in the programme evaluation and reformulation done at the 2004 MTR, which has also guided the formulation of this bridging programme. The next country programme and UNDAF, both for 2008-2012, will be much more closely aligned. Strategic formulations for the country programme will be made in 2007, in line with priorities identified through the Situation Analysis and the Common Country Assessment/UNDAF process.

10. **Relationship to international priorities.** In support of the Millennium Development Goals, the country programme will directly contribute to universal primary education (Goal 2), reduced child mortality (Goal 4), improved maternal health (Goal 5) and gender equality (Goal 3), while indirectly impacting other Goals. The goals of *A World Fit for Children*, specifically "educate every child", "care for every child" and "protect children from harm and exploitation", have been reflected in the expected results and related strategies. Relevant aspects of the Convention on the Rights of the Child have also been directly incorporated through the partnership with NCWC and planned progress towards increasing the minimum age of criminal responsibility and establishing a juvenile justice system.

Programme components

11. **Basic education programme.** In line with focus area 2 of the MTSP, as well as the projects, strategies and results recommended in the 2004 MTR, the programme will continue to support the Government in working towards universal access to quality primary education and literacy. Given the lack of data, it is not possible to ascertain whether the targets of the 2002-2006 country programme have been met. Although the increase in the numbers of students in primary and NFE classes is known, the expected gains in primary NER (raising boys' enrolment from 64 per cent to 80 per cent and that of girls from 56 per cent to 80 per cent) and female literacy (from 25 per cent to 50 per cent) by end-2006 will be gauged only after the 2005 census is published. If not achieved by 2006, the goal is to have these targets achieved by end-2007. Projects and strategies in education will remain aligned with the 2004 MTR.

12. The one-year extension will contribute to the following key results: (a) advocacy on compulsory basic education undertaken; (b) the number of girls and boys in primary classes increased by 1,500 and 800, respectively; (c) 15 existing community schools expanded to enrol more students; (d) the number of schools implementing a child-friendly action plan increased from 0 to 5; (e) advocacy undertaken for inclusion of the life skills-based approach to education linked with the enhancement of protection factors and reduction of risk factors within the child-friendly school project; and (f) the number of females and males in NFE classes increased by 1,200 and 500, respectively.

13. Results attained in 2007 will feed into the next country programme by increasing the availability of primary-level classrooms and improving education quality through the establishment of the first child-friendly schools. The results will help to pave the way for further expansion in these areas and for progress in achieving universal primary education.

14. **Health and nutrition programme.** In line with MTSP focus area 1, as well as the 2004 MTR, efforts will be made to consolidate progress in reducing maternal and neonatal mortality and iron-deficiency anaemia, and progress in EPI. Since the 2002-2006 country programme achieved its planned results of maintaining immunization and iron supplementation coverage at above 85 per cent, the bridging programme will continue the programme's same strategies, activities and partnerships to maintain the results. The 2002-2006 country programme will most likely not meet its goal of achieving 50-per-cent institutional birth delivery by end-2006. Therefore, to support the Government's new policy of 100-per-cent institutional birth delivery, activities in line with the 2004 MTR report will continue in 2007 to help meet this unrealized goal.

15. The one-year extension will support the following key results and activities: (a) the percentage of expected births delivered at institutions increased from 25 (in 2004) to 35; (b) reported cases of measles, rubella, maternal and neonatal tetanus, and polio maintained at under 10, under 10, 0 and 0, respectively, and measles-rubella coverage maintained at over 85 per cent; and (c) the 100-per-cent coverage of schoolchildren and NFE learners with a weekly iron-folate tablet maintained. Long-term funding will be sought for the development and implementation of a project on doubly fortified salt (with iodine and iron) to address the problem of anaemia in a more sustainable manner, eventually eliminating the need for mass iron supplementation. If funding is secured, the project will be a major activity of the next country programme. Results achieved in maternal and neonatal health, EPI and nutrition in 2007 will lay the groundwork for further progress in these areas and for reductions in infant, under-five and maternal mortality.

16. **Water, sanitation, and health promotion programme.** The one-year extension will continue to focus on the achievement of universal access to water and sanitation facilities as well as health and hygiene promotion activities at all primary and community schools and religious institutions where children reside. The goal of 100-per-cent coverage at primary and community schools by end-2006 will not be attained. Although data are not complete, they indicate that in 2005, 54 community and primary schools lacked water supply and 10 lacked sanitation facilities. The goal for end-2007 will be to equip 20 previously underserved community and primary schools with an improved water source, and 5 schools with separate

sanitation facilities. If more underserved primary and community schools are identified, the target may change and further fund-raising may be undertaken. In addition, efforts will be made to extend the water, sanitation and hygiene strategy to selected monastic institutions housing children.

17. Results achieved in 2007 will support the next country programme by establishing a base for the attainment of adequate ratios of students-per-latrine and students-per-tap point in all primary and community schools.

18. **Protection, advocacy and planning programme.** In line with MTSP focus area 4, the 2007 programme will continue to concentrate on scaling up child rights promotion and protection activities through the NCWC and its partners, such as the Royal Bhutan Police and the Judiciary. The 2004 MTR identified two expected results in this programme area: (a) submission of a second report to the Committee on the Rights of the Child; and (b) the establishment and functioning of the NCWC. The first result is being finalized and the second is already achieved. Additional progress in this programme area will include, in 2006, drafting national guidelines for child- and women-friendly police and judicial procedures, with efforts expanded for this and related efforts in 2007.

19. The 2007 programme will contribute to these expected results: (a) national guidelines for child- and women-friendly police and judicial procedures endorsed; (b) a children and women's desk established at all district police stations; (c) all children and women at the Thimphu detention centre receiving child- and women-friendly services in line with the national guidelines; and (d) the minimum age of criminal responsibility increased from 10 to 13. In addition, in 2007, all children and women in Thimphu will have access to the first-ever counselling services geared specifically to children and women.

20. Results achieved and partnerships strengthened in 2007 will pave the way for the national implementation of the revised police and judicial procedures and further improvements in juvenile justice and the protection of children.

Major partnerships

21. Since CSOs are virtually absent and the NGO sector is in its infancy, the Government will remain the dominant implementing partner during the one-year extension. Progress towards strengthening CSOs is expected once the democratic system is in place in 2008. However, UNICEF will continue its collaboration with the three NGOs related to children and women, namely, the Youth Development Fund; Respect, Empower, Nurture, Women (RENEW); and the Council of Women. At present, Bhutan has no sector-wide approach, and sector coordination mechanisms are yet to be established. The Government's Five-Year Plan is its poverty reduction strategy and country action plan for *A World Fit for Children*. In 2007, UNICEF will continue to strengthen partnerships with the World Food Programme (WFP), the United Nations Population Fund, the World Health Organization, the World Bank and the United Nations Development Programme. The memorandum of understanding with WFP will continue.

Monitoring, evaluation and programme management

22. Central to improving monitoring and programme management will be the continued strengthening of data collection, monitoring and evaluation, using international standards. Joint Government-UNICEF quarterly review and planning meetings, introduced in 2005 and coordinated by the Government, are expected to expand in 2007 to include other United Nations agencies. Joint field trips with the Government will also continue, their findings factored into programmatic decisions. *DevInfo (DrukInfo* in Bhutan), will remain as the common database for monitoring the development goals of the Government, UNICEF and other United Nations agencies. It is anticipated that the 2006 MICS will promote the use of international standards to measure progress on the Millennium Development Goals and key childhood indicators. The MICS process will also help the Government and local counterparts to build their capacity to undertake high-quality surveys using international standards. The MICS is expected to benefit from a master sampling frame, to be created in 2006 from the 2005 National Census data, which will help to improve the quality of household surveys in the next few years. The census data will also ease Bhutan's constraint of lacking accurate and agreed-upon denominator data for reporting on international indicators and improving programme planning.

23. Under the initiative of the UNICEF regional office, the major evaluation planned for 2007 will cover maternal and neonatal mortality reduction strategies. Other studies and evaluations will be carried out as determined in the annual Integrated Monitoring and Evaluation Plan.