

## 1. EXECUTIVE SUMMARY

### Highlights:

1. Initiated Educating for Gross National Happiness (GNH) in all schools as a scale up for CFS project. The project operationalizes the national development philosophy of GNH and improves education quality.
2. Community based IMNCI is implemented nationwide with supportive supervision from district health managers.
3. Department of Disaster Management (DDM) can coordinate effective responses during emergencies/disasters with the development of Bhutan Disaster Assessment (BDA) tools & SOP. As a multi-sectoral approach, BDA will assist in understanding scope of disaster, identify need for detailed assessments, priorities of affected population and prevent repeated assessments from various stakeholders.
4. The RGoB-UNICEF Mid-Term Review (MTR) was seamlessly integrated into UNDAF/cCPAP MTR, which was incorporated into the MTR of government's 10<sup>th</sup> Five Year Plan (10FYP). This revealed UNICEF's expenditures have reached 105% against CPD ceiling of 2008-2010. It recommended emphasizing equity focussed approach through increased geographical programme convergence in areas with worst socio-economic indicators (East and South) to be determined by the 2010 BMIS. C4D is required to improve KAP of families and communities.

### Shortfalls:

1. UNICEF, MoH and UNFPA's plan for a RH/MCH communication strategy could not be developed after the KAP survey was delayed due to limited capacity of local consultancy firms. UNICEF will provide technical assistance to develop the strategy in 2011.
2. Positive disciplinary workshop for teachers could not be conducted and English curriculum for post literacy non-formal education was not developed due to unavailability of technical assistance.

### Most important Collaborative partnerships:

#### 1. **Comprehensive UN, government, bilateral and NGO partnership on disaster response:**

- Collaborated with DDM, UNDP, WFP, WHO, JICA, DANIDA and Save the Children to develop BDA tools.

#### 1. **UN collaboration in Delivering as One (DaO)**

- UNICEF, UNFPA and WHO reviewed MoH's RH programme which will serve as a basis to develop the first comprehensive Reproductive Health Policy and Strategy including maternal and newborn health.
- In collaboration with UNESCO, developed non formal education- management information system (NFE-MIS) for the 3 pilot districts of Mongar, Samtse and Wangduephodrang

#### 2. **NGO collaboration**

- Collaborated with SNV on convergence in school WASH, sanitation, hygiene promotion and breast-feeding in Lhuentse district.

## 2. COUNTRY SITUATION AS AFFECTING CHILDREN AND WOMEN

According to Bhutan Equity Tracker, most disadvantaged are poor/working children, child monks/nuns, and disabled children. The 2010 Bhutan Multiple Indicator Survey (BMIS) will provide updated information to address equity and support RGoB's 10FYP implementation with its poverty reduction focus. Preliminary results of 2010 "Assessment of Risk and Vulnerabilities of Bhutanese Adolescents" shows out of school youth are vulnerable to abuse alcohol, engage in unsafe sex and delinquency. Poverty (MDG1): 2007 PAR estimates 23% of population below national poverty line. About 98% of poor live in rural areas, thus 1/3 of rural population are poor. Poverty rates are high in East and South Bhutan. Poor households have longer walking distance to road and therefore less market accessibility; less access to electricity; low school attendance; and high child mortality/morbidity rates; 69% of poor children are in primary schools. Government's Rural Economic Advancement Programme has targeted its interventions in the 100 poorest villages.

**Nutrition (MDG1):** The 2009 Nutrition Survey reports 37% children as stunted, 4.3% wasted, 10.5% underweight and about 5% overweight. Only 10% children were exclusively breastfed in their first six months.

**Health/WASH (MDGs 4, 5, 6,7):** Bhutan is on track to achieve maternal/child health targets. Recent maternal deaths show a declining trend. Institutional delivery increased from 27% in 2002 to 62% in 2009. Though IMR & U5MR decreased significantly to reach 54 and 81 in 2008, U5MR is Asia's 6th highest primarily from high neonatal deaths. Primary healthcare system is well established but service quality needs strengthening. Life-style related diseases like hypertension, diabetes and cancer are increasing. This epidemiological transition and double-burden of diseases may jeopardise sustainability of free primary health care.

Global 2010 JMP on Water Supply & Sanitation states Bhutan is on track to meet its MDG water-supply goals but not sanitation at its 65% coverage, with considerable disparity between urban (87%) and rural (52%) areas.

**Education (MDGs 2, 3):** NER shows full gender parity for 94% of children. The remaining 6% are poor children, working children, child monks & nuns, disabled children and late enrollers. Costs for school uniforms/stationeries and loss of farm hands discourage poor families to enrol their children. Till 2009, only 2% children from 3-5 years of age attended ECCD, suggesting that many more centres are required. Education access for disabled children needs to increase.

**Child Protection:** Prevention, recovery and reintegration services are still limited. Bhutan lacks social workers and formalized alternative care for disabled children and children without primary care-givers. Bhutan has set-up complaint & response mechanism, women & child protection units and police-youth partnership campaigns. In addition, 12 youth and DICs in urban areas provide recreational and counselling services.

**Economy:** Growing hydropower resources increased GNI per-capita from US\$1,270 in 2006 to US\$1,900 in 2008 making Bhutan a Middle-Income Country. This is somewhat fictional as hydropower revenues are used for debt servicing and don't provide job-opportunities. Therefore, it does not immediately translate a rise in living conditions of the people, especially the rural population. Unemployment rate increased among youth from 6% in 2005 to 13% in 2009. Inflation fluctuates between 4-8% and food price inflation is resurging. Even so, inflation fluctuating between 4-8% annually and an

increase in youth unemployment rate from 6% in 2005 to 13% in 2009 pose considerable challenges.

**Good Governance:** To provide efficient, effective and quality services, the PM signed Performance Compacts with education and health ministries under the Accelerating Bhutan's Socio-Economic Development (ABSD) initiative developed by McKinsey & Company. The Child Care & Protection Bill and Adoption Bill will be adopted by the parliament in May 2011.

Constitutional bodies like Anti-Corruption and Election Commission function effectively; local government elections are scheduled in 2011. Supreme Court is established which has led to strengthening of the judiciary. UNICEF collaborates with the judiciary to develop the juvenile justice system. High-level gender mainstreaming sensitization created awareness on gender issues among policy makers/parliamentarians. Media's independence is ensured with the enactment of the 2006 Bhutan Information, Communications and Media Act. The government also supports the media wherein the cabinet under the chair of the Prime Minister holds the monthly 'meet the press' session. A total of 11 CSOs on disabilities, youth, PLWHA, media, women empowerment, etcetera are registered and functioning.

**UNDAF cCPAP MTR** highlighted capacity gaps across all thematic areas on RBM, M&E and data analysis. It identifies emerging issues like climate change, disaster risk reduction, increasing youth/women unemployment and child health below 3 years.

**UNICEF MTR** as integral part of UNDAF/cCPAP MTR recommends emphasizing equity focussed approach through increased geographical programme convergence in areas with worst socio-economic indicators (East and South). Gender equity, emergency preparedness/response, HIV/AIDS & adolescents/youth required cross-sectoral approaches and C4D to improve KAP of rights holders/duty bearers at community level.

References:

- MTR (2008-2012) Country Programme of Cooperation between RGoB & UNICEF, December, 2010
- UNDAF/cCPAP MTR, November 2010.
- Small Area Estimates of Poverty in Rural Bhutan, June 2010
- WB Country Partnership Strategy for Bhutan: [http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2010/11/02/000350881\\_20101102094754/Rendered/PDF/565770CASOP1131C0disclosed011121101.pdf](http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2010/11/02/000350881_20101102094754/Rendered/PDF/565770CASOP1131C0disclosed011121101.pdf)

### 3. CP ANALYSIS & RESULT

#### **3.1 CP Analysis**

##### **3.1.1 CP Overview:**

Equity Tracker provides excellent opportunity and basis to coordinate efforts across all programmes in identifying the most disadvantaged children and intended results. Report on district disaggregated data from the first BMIS in 2011 will provide useful inputs for poverty/disparity reductions and addressing equity issues concerning children. RBM, SMART indicator formulation, C4D and M&E were identified as common capacity gaps. Technical CD recommendations for specific programmes were already included in the 18-month rolling-work plan (2011-2012).

Though the office is yet to develop an overall advocacy strategy, individual programmes have identified/designed advocacy issues/materials for their programmes based on available evidence. Advocacy based on findings/recommendations from the baseline assessment of WATSAN facilities, resulted in the government co-financing construction from 2010 onwards. Strategic partnerships with Royal Court of Justice, Bhutan Narcotics Control Agency, National Assembly and National Council were established to address child protection issues. During UNICEF MTR, partners recommended UNICEF to work in

both down- and up-stream areas but noted that UNICEF needed to improve its 'complicated/rigid' administrative procedures.

UN supported NSB to develop BhutanInfo as a human development monitoring tool thus complying with CRC recommendation for a national database on children. UN's Solution Exchange Development Network - [www.solutionexchange-un.net.bt](http://www.solutionexchange-un.net.bt) continues to discuss issues on children, youth & women and disaster management. Inadequate capacity on C4D exists across all programmes, and training for IPs is planned for 2011.

UNDAF/cCPAP MTR recommended integrating gender perspective throughout the programming cycle, and designing M&E indicators with sex-disaggregated data. Gender mainstreaming is reflected in all the 18 joint-rolling work plans.

Based on HRBA principle, UNICEF MTR recommended increased geographical programme convergence focussing on districts/blocks with the worst social and economic indicators, primarily found in East and South Bhutan.

Support to emergency preparedness/response is integrated in all programmes. Trained and equipped with skills on disaster management, all the school principals/teachers are expected and will be able to train their colleagues and update/develop the school disaster management plans in 2011. For better coordination and response, UNICEF collaborated with DDM and other UN agencies to develop the Bhutan Disaster Assessment tools and mechanisms.

### **3.1.2 Programme Strategy**

#### **3.1.2.1 Capacity Development:**

**a. & b:** IPs in the 5 UN/Government theme groups were engaged in UNDAF/cCPAP MTR process. RBM, SMART indicator formulation and M&E for efficient programme implementation were common capacity gaps. CPB endorsed training in these areas in 2011 and beyond to address the gaps.

UNICEF MTR recommended technical CD for specific programmes already included in the 18-month rolling-work plan (2011-2012). For health: IMNCI, severe malnutrition management and ECCD (0-3 years). For education: ECCD (3-6 years); Multi-grade teaching (MGT); educating for GNH & gender responsiveness. For child protection: institutionalize social workers/counsellors; child friendly judiciary/police procedures and skills for government/NGOs on children/youth participation. C4D, gender mainstreaming, HIV/AIDS and emergency preparedness/response need strengthening across all programmes.

UNICEF/UN supported DDM/line-ministries to strengthen/institutionalize emergency preparedness & response capacity. Health and WASH IPs were trained on disaster management. Based on 2009 education capacity mapping on emergency preparedness, 40 national core trainers were trained on disaster management who trained school principals/teachers in the 20 districts. These principals/teachers will now train their colleagues and update/develop the school disaster management plans in 2011.

**c.** To address capacity gaps of duty bearers, medical doctors were attached with national hospital to perform Caesarean Section/MNCH services thereby helping to address the problem of inadequate number of obstetric gynaecologists (OBGYN) in districts. Bhutan has only 5 OBGYN.

ECCD and MGT modules were introduced in pre-service curriculum of the two teacher training colleges. New teachers assigned to remote schools consequently will possess skills/knowledge on ECCD and MGT.

Peer educators of Drop-in Centres and youth centre managers can provide services such as counselling for young people at risk. This CD initiative has resulted in a number of trained personnel forming an interconnected network of preventive and responsive services. For CD of the rights holders, UNICEF collaborates with MoE and NGOs like

Youth Development Fund (YDF) to improve/enhance life-skills of in- and out-of-school youth through programmes such as scouting, annual Golden Youth Award, Children & Youth Festival, NFE and through Youth Volunteer in Action groups, etcetera.

**d.** The country programme does not have a system for information gathering on CD progress against results/lessons learned. However, periodic evaluation/assessment of CD initiatives, for example, MGT and NFE, were undertaken.

### **3.1.2.2 Effective Advocacy:**

**a)** Though the office is yet to develop an overall advocacy strategy, individual programmes have identified/designed advocacy issues for their programme areas based on available evidence.

In health, UNICEF successfully advocated among MoH and public health officials for community based IMNCI interventions to address neonatal and child health issues. IMNCI is now a major activity in the UN rolling work plan. The advocacy was supported by evidence generated from RH/MCH KAP survey and APRM & UNICEF MTR reports which thoroughly analysed availability, accessibility and utilisation of MNCH services/continuum of care.

UNICEF's advocacy for a sustainable provision of WASH facilities in schools, based on findings/recommendations from the baseline assessment of WATSAN facilities, resulted in the signing of MoU by MoE, MoF and GNHC committing to co-finance construction of such facilities from 2010 onwards.

**b)** Other UN agencies and UNICEF jointly advocated on gender equity resulting in the successful 'High Level Sensitization Programme on Gender Mainstreaming' to discuss and sensitise senior government officials, parliamentarians & NGOs on gender issues and challenges in implementation of National Action Plan on Gender, CEDAW, CRC and UPR Concluding Observations. The UNRC urged government to consider gender responsive budgeting and strengthen capacity of gender focal points in all sectors.

**c)** Her Majesty the Queen Mother, Ashi Sangay Choden Wangchuk led the advocacy/social mobilization campaign on drug and alcohol abuse during the International Day against Drug Abuse and Illicit Trafficking in June 2010. About 60 vulnerable children and young people had the opportunity to discuss with the Queen Mother on drug and alcohol abuse. A newspaper supplement on stories by recovering addicts was also published and disseminated across Bhutan.

**d)** Not applicable

**e, f, g)** Advocacy is included as standing agenda of the monthly UNICEF HoS meeting to discuss priority areas for advocacy and strategies. However, it did not allow for a systematic approach. An advocacy plan will be developed in 2011 with regular monitoring and timely response to emerging issues and opportunities. Documenting lessons learned and innovations are also not regularly practised.

### **3.1.2.3 Strategic Partnerships:**

**a, c:** Acknowledging government as the most important partner, UNICEF's other partners are also vital to achieving UNICEF's and government's goals for the country's children as seen below:

i) UN Bhutan is DaO self-starter with common UNDAF/CPAP harmonizing services, HACT and emergency preparedness/response. UNCT, theme groups, OMT, communication and HACT/M&E groups are mechanisms to enhance synergies; ii) IFIs: Collaborated with WB in health, education, HIV/AIDS, pandemic prevention and poverty reduction and co-leads FTI. Collaborated with ADB to train teachers on education in emergencies and caretakers of schools affected by 2009 earthquake, on maintenance and operation of WATSAN facilities; iii) Bilateral: Partners with DANIDA on joint-sectoral reviews of health and

education; JICA on immunization mainly cold-chain management and SNV on sanitation/hygiene promotion in schools; iv) Civil Society: With endorsement of CSO Act, 11 CSOs were registered of which UNICEF works with 3 on youth, violence against women & children issues. Collaborates with Save the Children in ECCD, child protection/participation and emergency; collaborates with public/private broadcast and print media to advocate/create awareness on children/women issues; vi) GPP: Continues to provide technical inputs to GAVI/GFATM proposals.

**b)** In 2010, established new partnerships with Royal Court of Justice, Bhutan Narcotics Control Agency, National Assembly and National Council. UNICEF through UN HACT/M&E group will look into UN partnership modality with the newly established CSOs.

**d)** During UNICEF MTR, partners had opportunity to give feedbacks. They recommended UNICEF to work in both down and up-stream areas but needed to improve its 'complicated/rigid' administrative procedures. Among others, UNICEF could support quality research/studies, emergency preparedness and implementation of child-related laws/policies.

**e)** UNICEF participates in joint annual reviews of health and education sectors with MoH, MoE and DANIDA thus better positioning UNICEF in policy dialogue. UNICEF took the lead role in emergency response/recovery for health/nutrition/WASH and Education in the 2009 earthquake and 2010 fire in Bumthang. The monthly donor lunch meeting for UN agency and donors provides the forum to share information/discuss issues of common interest among development partners. UNICEF is an active member of CCM/GFATM.

**f)** Though UNICEF MTR provided the opportunity for partnerships analysis, the office is yet to have a mechanism to monitor and maintain a database on partnerships.

#### **3.1.2.4 Knowledge Management:**

**a)** Report on district disaggregated data from the first BMIS in 2011 will provide useful inputs for poverty/disparity reductions and addressing equity issues concerning children. Though preliminary report estimates 3,502 children with at least one disability, the 2<sup>nd</sup> Stage Disability Study - to be completed in March 2011 - will provide a reliable estimate of disability prevalence, types and severity thus giving health & education ministries, relevant stakeholders a strong base to develop plans/interventions. RH/MCH KAP survey was done to identify causes for low coverage/utilization of RH/MCH services. The findings will feed into the situation assessment of disadvantaged/vulnerable children.

**b)** PME consolidates IMEP on research/studies carried out by programmes. However, the quality assurance roles of the Deputy Representative, HoS and PME are still unclear. SOP for quality assurance will be developed in February 2011. Studies/assessments done by local consulting firms have methodological problems. Their capacity (including of IPs and UNICEF staff) in basic statistics/sampling/data analysis needs to be enhanced.

**c)** UN supported NSB to develop Bhutan Info as a human development monitoring tool thus complying with CRC recommendation for a national database on children. Bhutan Info is customized for monitoring national development plans specifically for the upcoming government's MTR. The disaggregated socio-economic/demographic indicators based on the 2005 Census, Small Area Estimation of Rural Poverty and BMIS provide valuable information. Support is required for further data generation on equity issues at district/block levels.

**d)** UN's Solution Exchange Development Network - [www.solutionexchange-un.net.bt](http://www.solutionexchange-un.net.bt) - is an email-based forum for development practitioners from government, UN, NGOs, academia, media, and private sector. Children, youth, and women-related issues like corporal punishment, C4D on sanitation & hygiene, and disaster management were some issues discussed in 2010. UNICEF facilitated NCWC to link with Child Help International thus allowing effective tracking of trafficked children in the region.

e) Communication section continues to provide weekly media updates on children/women issues to all staff. Learning sessions are conducted regularly. Relevant resources/documents are stored on a common drive.

f) Governance related to KM and dissemination is not systematically practised. This will be discussed when developing SOP for quality assurance on knowledge activities.

### **3.1.2.5 C4D Communication for Development:**

a) UNICEF MTR identified inadequate capacity for C4D in all programmes. Service seeking behaviours and care practices need strengthening among care givers/communities.

In collaboration with MoH, MoE, DDM, media and WHO, UNICEF created and disseminated Flu-Wise/Flu-Care posters/instructional guide for teachers/newspaper supplements/PSAs on TV/radios to contain H1N1 outbreak in schools. This experience demonstrated the need for a national risk communication strategy and CD on behavioural change/risk communication for key stakeholders.

A communication task team on youth related issues especially on substance abuse was established following a UNICEF/UNESCO supported IEC review workshop in December 2010. The team from relevant departments/ministries/NGOs will be trained on C4D in early 2011 to develop IEC materials and an effective communication strategy to combat substance abuse among young people.

b) In collaboration with MoH and UNFPA, a KAP survey on why RH/MCH was insufficiently utilized by families was conducted and the findings will be used for the development of a RH/MCH strategic communication action plan in 2011.

Upon MoH and WHO request, UNICEF provided technical assistance to develop a communication strategy for reintroducing pentavalent vaccines in June 2011. Developing the communication strategy included good practices like participation/consultation of all stakeholders including affected families/parents. All IEC materials were pre-tested with health workers/families and baseline & monitoring mechanisms set-up. The exercise enhanced capacity of MoH in developing similar communication strategies in future.

c) The good practices of participatory approaches undertaken while developing the communication strategy for reintroducing pentavalent vaccines will be shared with other IPs in 2011.

d) Children/youth were involved in pre-testing of a CRC booklet, Posters, flyers and Q&A booklets on pentavalent vaccines were pre-tested with families, mothers and health workers. However, pre-testing of messages/materials with target participant groups is yet to be institutionalized in all programmes due to limited capacity of IPs and UNICEF staff.

**E & f)** Dissemination with distribution plans/monitoring mechanisms still needs improvement. During joint annual review meetings, UNICEF made presentation for IPs and other UN agencies on planning/implementing C4D interventions. A comprehensive C4D plan based on programme work plans will be developed.

### **3.1.3 Normative Principles**

#### **3.1.3.1 Human Rights Based Approach to Cooperation:**

a) During UNICEF internal MTR process, each programme thoroughly analysed geographic locations and linkages to poverty of the most disadvantaged children as indicated in the Equity Tracker. The MTR recommended increased geographical programme convergence focussing on districts/blocks with the worst social and economic

indicators, primarily found in East and South Bhutan. Equity Tracker provides excellent opportunity and basis to coordinate efforts across all programmes in identifying the most disadvantaged children and intended results. The office has successfully secured ROSA equity fund of US\$350,000 to address equity issues in 2011-2012.

Preliminary results of 2010 "Assessment of Risk and Vulnerabilities of Bhutanese Adolescents" show out of school youth are more vulnerable to abuse alcohol, engage in unsafe sex and delinquency. The findings underlines the importance of child protection programme strategies and working closely with BNCA, DYS/MoE, and NGOs like YDF and RENEW in addressing these risks faced by the out-of school youth.

**b)** For capacity building of duty bearers and right holders, please refer to 3.1 Capacity Development.

**c)** Children and youth participation project is under Child Protection programme. Children were involved in design of IEC materials on CRC and opportunities were provided to them to voice their opinions through forums such as the annual children and youth festival. Youth Volunteers in Action in 6 districts participated in identifying issues in their communities and developed action plans to address them. However, children/youth participation as a cross cutting issue needs to be enhanced across all programmes.

**d)** The first HRBA training was conducted for government co-chairs of the five theme groups in December 2009. This acquainted them with the HR-based approach and their responsibilities as duty bearers as well as their accountabilities to right holders while implementing activities in the 18-month rolling plans.

**e)** UNICEF MTR process identified how programme results have responded to the recommendations of the CRC concluding observations. Several assessment reports/recommendations like CRC, CEDAW, UPR, NPAG and High Level sensitisation on Gender Mainstreaming report were used to inform the design of programme interventions targeting the most vulnerable and disadvantaged groups.

**f)** UNDAF/cCPAP MTR recommended the disaggregation of data, especially by gender, across all UN supported studies/surveys/reports.

### **3.1.3.2 Gender Equality and Mainstreaming:**

**a)** The NPAG, appointing gender focal points and identifying gender as 10FYP cross-cutting development theme indicates RGoB's commitment and provides a framework for gender focus in the Country Programme.

The UNDAF/cCPAP MTR process recommended to integrate gender perspective throughout programming cycle and design M&E & indicators with sex-disaggregated data across all five UNDAF thematic areas. Gender mainstreaming is reflected in all the 18 joint-rolling work plans. The post of the gender staff under RCO is supported by UNIFEM.

In 2009, ROSA commissioned assessment of country programmes to ascertain gender sensitivity in programmes and activities. This has enhanced staff ability to integrate gender in future plans. Participation of 2 staff during regional gender consultation enhanced the office's understanding of gender issues and to mainstream gender in programmes/activities. The gender team has been tasked to share their knowledge with colleagues/partners for operationalizing UNICEF's Gender Equality Policy. A Gender Strategic Priority Action Plan for UNICEF Bhutan was also developed and discussed in the CMT.

Together with other UN agencies and NCWC, UNICEF conducted a "High level sensitisation programme on gender mainstreaming" for parliamentarians and senior RGoB officials. They now have enhanced understanding and ability to integrate gender in national laws/policies. The issues/recommendations arising from sensitisation programme and the NPAG were agreed to be used as a reference for 2011-2012 AWP formulation.

**b)** Gender perspectives are considered in programme design. For example, the design/construction of school toilets incorporates requirements for girls in menstruation. UNICEF MTR identifies female teachers in remote schools as important role models and

female health workers in remote BHUs to promote reproductive/maternal health services. A KAP survey revealed that over 90% of women believed that institutional delivery will increase if female health workers were posted in the health facilities.

**c)** Not yet systematically established.

**d)** During annual review and planning sessions, all programmes were required to provide disaggregated data on gender in their 18-month rolling plan. This allowed a rapid gender review and highlighted the need to include representation, views and perspectives from boys/girls/men/women. Gender markers at PCR level in ProMS 9.1 identified by each programme section are reviewed by the office gender focal point.

### **3.1.3.3 Environmental Sustainability:**

**a)** Bhutan is vulnerable to natural hazards like earthquake, GLOF, seasonal floods, landslides and fire. In UNICEF Bhutan, environmental sustainability is mainly reflected in its WASH programme and in disaster/emergency preparedness and response. Climate change and disaster risk reductions will be addressed in the next programme cycle.

**b & c)** Support to emergency preparedness/response is integrated in all programmes' 18-month rolling plans to address capacity building and coordination gaps; pre-positioning emergency family kits, school-in-the box, WASH kits etc.

IPs and relevant stakeholders were trained in disaster preparedness. For example, training of teachers on education in emergencies; disaster/emergency management coordination training for health & WASH personnel.

For better coordination and response based on the 2009 earthquake assessment, UNICEF in collaboration with DDM and other UN agencies developed the Bhutan Disaster Assessment tool. Training on the BDA tools will be rolled out through a series of ToTs and follow-up cascade trainings in 2011.

**d)** Disaster risk management is a cross-cutting issues of UNDAF/cCPAP. Outcomes and outputs related to CD on disaster management are included in the environment and disaster management thematic areas. UNICEF involved all relevant UN agencies including UNDP, UNFPA, WFP and WHO in providing technical feedback on the draft BDA tools and mechanism. UNICEF and UNDP have worked together in merging training on education in emergencies, school mock drills and safe school initiative into one capacity package for school teachers. UNCT agreed to have UN joint programme on climate change led by UNDP in 2011.

**e)** The monitoring and evaluation process integrating sustainability and climate change assessment is not yet in place.

### **3.2 Programme Components:**

**Title: *Health, nutrition and sanitation***

#### **Purpose:**

The Health, Nutrition and Sanitation programme contributes to MDG 4, 5 and 6 (reduce child, infant and maternal mortality rates, combat HIV/AIDS) and MDG 1 (to address poverty and hunger), among others, by promoting improved management of malnutrition. The programme component is linked to UNDAF Outcome 2 on increasing access and utilization of quality health services with emphasis on reproductive health, maternal and child health and nutrition, TB, malaria and other non-communicable diseases by 2012.

#### **Purpose of the Programme**

The programme is in line with the government's 10<sup>th</sup> FYP objective of reducing infant, child and maternal mortality, sustaining high immunization coverage, reducing malnutrition rate of children under 5 and improving access to safe drinking water and sanitation facilities in both secular and religious schools. It contributes to improved living conditions of children via the following projects:

1. Maternal and Neo-natal Care
2. Immunization and Child Health
3. Nutrition
4. Water, Sanitation and Hygiene (WASH)

The programme focuses on APRM thrusts, which include making strategic shifts, ensuring focus, leveraging results, and scaling up action up. Accordingly, the programme focused its efforts in 2010 on review of current programme and policy and strategy development in maternal and child health.

### **Resources Used:**

**Total approved for 2010 as per CPD:**

**RR:** *US\$ 330,000*, **OR:** *US\$ 1,590,000*

**Total available for 2010 from all sources:**

**RR** *US\$ 330,000*; **OR** *US\$ 1,173,536.13* (including ROSA support); **Total:** *US\$ 1,503,536.13*

Any special allocations (list) *US\$ 160,000* AusAID funding for Earthquake Affected schools

### **List of donors:**

- German NatCom
- Global Thematic,
- Global Thematic (Dutch)
- UNAIDS (UBW)
- Swiss Natcom
- Japan Natcom
- AusAID
- Dutch Natcom
- Human Security Fund
- Donor Pooled Emergency Fund

### **Result Achieved:**

#### **Maternal and Neo-natal Care**

- The Child Health Programme Review and KAP survey on RH/MCH recommended strategies on child health and C4D which were highlighted in the MTR.
- Health care delivery was strengthened with the new approach of training on safe delivery and on critical newborn care and 75% of health workers are now skilled in Management of PPH and revised Midwifery Standard manual.
- Pre-service curriculum for health workers on maternal and child health revised.

#### **Immunization and Child Health**

- Community based IMNCI is now implemented nationwide with supportive supervision from the DHOs/ADHOs.
- HepB zero dose is incorporated in EPI schedule and Communication Action Plan developed for reintroduction of Pentavalent vaccine in 2011.
- Capacity of staff built on Early Infant Diagnosis of HIV.

#### **Nutrition**

- While most MoH staff are knowledgeable on Disaster and Emergency Management, all Chief Nurses are skilled in Nutrition in emergency

#### **WASH**

- 5,400 children of 60 primary and monastic schools have access to improved water and sanitation facilities co-financed by RGoB and water/sanitation facilities of 20 schools in

earthquake affected region are being restored.

- Almost 2,000 children benefit from rainwater harvesting scheme and water safety plan.

**b) Critical factors or Constraints:**

- Inadequate human resource at all levels of health system and requests for ad hoc activities affected timely project implementation.
- Weak monitoring and supervision system affects quality health services.
- Difficulty to find RH consultant resulted in deferring the RH Review.
- Slow fund flow within RGoB hampers timely implementation of activities.

**Lessons learned:**

- Insufficient family & community based activities and poor quality of IEC materials undermine the success of a project and its ownership.
- Capacity building of partners in project management is essential.
- Unconventional training such as attachment of health workers to national hospital has greater impact.

**c) Monitoring, Studies, Evaluation summary:**

- KAP survey on RH/MCH
  - o High proportion of parents had very low knowledge on danger signs of pregnancy, delivery and newborn
  - o 90% of respondents believed that institutional delivery will increase if female health workers are available in the facilities
  - o 43% reported that breast milk alone is not sufficient for the baby under six months of age
- Child Health Programme Review:
  - o Southern and eastern districts have high IMR /U5MR which correlates with poverty and other poor social indicators
  - o Weak system of monitoring and supervision subsequently affecting quality of MCH services
  - o Insufficient community level MCH education activities including lack of home visit.
  - o No unit exists in MoH dealing with Child Health issues

**Recommendations of the Child Health Review included the following:**

- o To form Child Health Advisory Committee to guide all child health programmes
- o Make a mandatory postnatal home visit after delivery
- o Incorporate ECCD in the IMNCI module and initiate Hospital IMNCI
- o Establish pre-service orientation for all new graduates RIHS
- o Conduct audit of under five deaths
- o Implement Continuum of Care monitoring form

**d) Key strategic partnerships and inter-agency collaboration:**

- MoH, UNICEF, UNFPA, and WHO initiated RH programme review
- UNICEF/WHO developed Supportive Supervision manual on IMNCI.
- MoH, UNICEF, WHO and MoE on H1N1 response.
- MoH with support of UNICEF/WHO on reintroducing pentavalent vaccine in June 2011.
- Convergence with SNV in hygiene promotion and breast feeding.

**e) Results that were achieved through preparedness action:**

- Donor Pooled Fund for reconstruction of sanitation facilities and BHUs.
- AUD 1.0 million AusAID fund for construction of water and sanitation facilities in 40 schools in earthquake affected districts.

**Future Work plan:**

- Development of RH Strategy, Pre-service orientation on MCH programmes, and establishment of EID facility for HIV in exposed children.

- Reintroduction of Pentavalent vaccine in June 2011, review of VHW programme, initiation of hospital based IMNCI and ECCD, and evaluation of IMNCI
- Conduct Anaemia and IDD Study, BFHI certification, targeting districts with low Exclusive BF rate and poor IYCF, and establishment of nutrition rehabilitation centre at regional level.
- Modify sanitation facilities suiting the needs of children, Incorporate WASH into education MIS, scaling up Water Quality Improvement Programme, and School level Hygiene Promotion and Clean Toilet campaign.

**Title: *Quality education***

**Purpose:**

By 2012, the Quality Education Programme aims to improve access to quality education for all with gender equality and a special focus on the un-reached population through 3 components:

- Early Childhood Care and Education (ECCE)
- Child Friendly Education, (CFE)
- Non-Formal Education (NFE)

A joint AWP was signed in 2010 between the Ministry of Education, GNHC and UNFPA, UNESCO, WFP and UNICEF to implement ECCE, School feeding, CFE, Youth and NFE activities. The results contribute to Bhutan's goal of universal primary education aligned to MDG 2; promote gender equality and women's empowerment in line with MDG 3 as reflected in the RGoB's 10<sup>th</sup> FYP. The annual thematic review 2010 presented 88% physical achievement and 81% financial achievement of the total 1172 activities planned in the joint Education AWP.

**Resources Used:**

Total approved for 2010 as per CPD: **USD 1,240,000**

Total available for 2010 from all sources: RR **USD 257,941** ; OR **USD 1,727,875** ;

Total: **USD 2,033,665**

Any special allocations (list): ORE – **USD 47,849**

**List of donors:** Swiss NatCom; Australian NatCom; Japan NatCom; Human Security Trust Fund (HSTF); Delivering as One (DAO) fund; Thematic fund (Basic Education and Gender Equality); AusAID; Global –Thematic Humanitarian Response.

**Result Achieved:**

**ECCD**

- With 14 more rural community based ECCD centres established, a total of 440 children (50% girls) of 3-5 years age are availing school readiness programme in 20 ECCD centres.
- The validation of Early Learning Development Standards (ELDS) is completed which will facilitate in determining age and developmentally appropriate curriculum for young children.
- 95% of the NFE learners who were females received good parenting skills.
- 315 teachers (35% female) graduated from the College of Education with good knowledge and skills on ECCD which will enhance quality in the lower primary grades.

**CFS/GNH**

- Initiated Educating for Gross National Happiness (GNH) in all schools as a scale up for CFS project using School Self Assessment Tool (SSAT) for monitoring. The project operationalizes the national development philosophy of GNH and also improves education quality.
- 66 CFS complemented the Educating for GNH initiative as teachers (85% females) and students are more responsive and open with each other, corporal punishment were

minimized; and community participation increased through formation of PTAs. 31 (47%) of these CFSs were established in low enrolment districts of Samste, Sarpang, Tsirang and Dagana.

- For accessibility 23 Extended classrooms (ECRs) were set up and 119 teachers (33% females) recruited under special contract service. 202 (41% female) teachers graduated with skills to teach in a multi-grade setup contributing to education quality.
- Policy on special needs education drafted.

#### **NFE**

- Of the 12,900 NFE learners (69% females), 14% were from Samste (with highest poverty rate at 47% and lowest literacy rate at 54%). 754 NFE instructors (61% female) are skilled on adult teaching and life skills education in HIV/AIDS, RH and GBV, and livelihood skills.

#### **Constraints**

- Limited capacity of Implementing Partners concerning RBM, planning, quality control, and risk & change management.
- Insufficient number of qualified teachers especially females in remote schools.
- Restriction on teachers to move out of school during the academic session hampered the scheduled training activities.
- Weak monitoring and supervision of implemented activities

#### **Summary of monitoring, studies and evaluations**

- ELDS validation: The study was conducted to test the age appropriateness of the ELDS. Children 3 -5 years old performed best in physical health and well being and least in cognition, general knowledge, spiritual, moral and cultural development. The overall performance of children 5 – 6 years old was poor and least in cognition and general knowledge. The standards will be reviewed and finalized based on the findings and submitted for endorsement by MoE.
- Prior to introducing Educating for GNH, a baseline study revealed that school principals were satisfied with students' social behaviour while 50% of them were satisfied with students' critical thinking, independent learning, emotional issues like dealing with frustration, anger, interpersonal conflict, etc. Individualism and personal achievements were rated lower than relational, societal and community-oriented values. Student's home environment issues – like poverty, parental alcohol abuse, broken homes - were mentioned as very serious. A similar study is planned that will measure progress on quality of education through Educating for GNH after a few years of its implementation.

#### **Key strategic partnerships**

- MOE is UNICEF's key partner in the education programme. UNICEF collaborated with Royal University of Bhutan (RUB) and Save the Children Bhutan in revising the facilitators' training manual on ECCD teaching methodologies and ECCD centre management. UNICEF continued its joint activity with UNESCO on NFE-MIS in three pilot districts.

#### **Results of preparedness action, and/or humanitarian action or recovery**

- A total of 10 'School in a Box' kits are stockpiled in each district across the country. During the recovery phase after the earthquake of September 2009, over 3,100 students resumed their academic session with 77 'school in a tent' distributed to 26 schools in six affected districts. In addition, 13 schools are being re-constructed in these affected districts. Emergency focal teachers/principals in Samdrupjongkhar, Pemagatsel, Chukha and Zhemgang were trained on education in emergencies. US\$ 47,849 was used from Global Thematic Humanitarian Response fund.

#### **Future Workplan:**

##### **Future Workplan**

- Scale-up ECCD in poor rural communities using C4D for demand creation, and train school teachers from 10 of the 20 districts and the Royal University of Bhutan (RUB)'s faculty members on educating for GNH.

- Based on the Second stage disability assessment, formulate strategic interventions through C4D activities and provision of special education services.
- Train all teachers in ECRs on multi-grade teaching.
- Make NFE more relevant to emerging youth issues, and accelerate and establish NFE Centres in hard to reach communities and *Dzongkhags* with high illiteracy and poverty incidence.
- Implement safe school initiative that includes education in emergencies, disaster preparedness and response and mock drills.

**Title: *Enabling environment for child protection***

**Purpose:**

To strengthen national capacity and systems to formulate, review and implement national legislation in line with ratified international conventions, the 2010 AWP aims to implement the ratified international treaties and conventions, strengthen capacity of the RBP and the judiciary on women and child friendly procedures, raise awareness on CRC, CEDAW, gender, and on women and children protection issues.

The AWP also aims to strengthen national capacity to address the emerging challenges faced by young people through youth and adolescents participation and development. Forums and festivals were planned to give young people platform to raise their issues. The capacities of the service providers such as the counsellor and Youth Centre managers were strengthened to provide effective, timely services to young people. In addition, support to the establishment and maintenance of Rehabilitation centres, Youth centres, DICs is included.

**Resources Used:**

Total approved for 2010 as per CPD: **USD 590,000**

Total available for 2010 from all sources: RR **USD 169,000** ; OR **USD 504,358** ;

Total: **USD 680,405**

Any special allocations (list): ORE – **USD 7,047**

List of donors

1. Global Thematic: Child Protection
2. Global Thematic: Policy, Advocacy & Partnership

**Result Achieved:**

**Results achieved**

**Child Protection**

- Key policy and decision makers including Parliamentarians and Government Executives are sensitized to and support implementation of CRC, CEDAW, VAW and gender mainstreaming following the successful high level advocacy programme.
- A draft action plan was developed to address child labour issues after a stakeholder meeting based on experiences and good practices from Bangladesh and India. A documentary film on child labour was produced as part of this plan and street theatre performances during the celebration of the International Day against Child Labour created public awareness on the issue.
- UNICEF supported the government of Bhutan in becoming an associate member of the Child Helpline International (CHI) and key organizations are mapped with their roles and responsibilities to establish CHI in Bhutan.
- 15 Non-Commissioned Officers (NCOs) and 35 judges and clerks are trained on women and child friendly procedures. The assessment of Women and Child Friendly units/desk of the Royal Bhutan Police (RBP) will facilitate the scale-up of women and child protection units (WCPUs) in other districts.

- An 11 member Child Protection expert committee (from different regions of the country) and a Child Protection (CP) focal person were appointed by the Dratshang Lhentshog (central monastic body). The committee has carried out the assessment of the situation of the young monks and nuns in their respective regions and has developed potential strategies to provide effective response mechanisms.
- The intensive course on 'Child Rights in a Globalised World' attended by a four member team (1 Member of Parliament, 2 Judges and 1 National Council Secretariat Member) will contribute towards developing the desired Juvenile Justice system.

### **Child Participation**

- The youth website facilitated greater access to relevant information by the youth while several services for the adolescents and youth such as youth centres, the DICs, and the rehabilitation centre (male and female) were expanded throughout the country.
- Youth Centre managers deliver client focused services including prevention and support services after their exposure to best practices in the region.
- To sustain efforts on preventive measures against substance abuse and support the work of BNCA in the *Dzongkhags*, the system of *Dzongkhag* focal points was institutionalized and an orientation programme for the designated focal points carried out.
- Advocacy efforts were continued through celebration of the International Day against Drug and Illicit Trafficking, and a social mobilisation campaign on the National Drug and Psychotropic Substances Act was led by Her Majesty, the Queen Mother.
- Participation of youth from rural and disadvantaged backgrounds was enhanced by organising the 2010 National Youth festival (attended by 147 youth from across the country) at the district level on the theme "Youth and Climate Change".

### **Constraints**

- Activity implementation is constrained due to staff shortages and capacity limitations in the Implementing Partners both governmental and non-governmental.
- Under the existing working arrangements, not being able to work directly with some key partners such as the monastic body and the Royal Bhutan Police, at times delayed implementation.

### **Key strategic Partnerships**

- NCWC, YDF, BNCA, and DYS continue to be the key partners.
- New partnerships were initiated with the Royal Court of Justice and the Parliament.
- Inter-agency coordination was achieved through active participation in the UN theme groups of Governance and Education.
- Joint activity with other UN agencies was initiated with UNESCO on the assessment of existing IEC materials on drug and alcohol abuse.
- Collaboration continues with UNDP and UNFPA on child participation, UNODC on capacity building of BNCA, and UNESCO in IEC.

### **Future Workplan:**

#### **Future Work Plan:**

Though the assessments done during the year will inform programming, the following are some of the priority activities identified for 2011

- Implementation of the Action Plan on addressing child labour in partnership with the Ministry of Labour and Human Resources.
- With the expectation that the National Legal Institute will be set up in 2011, conduct a needs assessment on juvenile justice system with the new institute.
- Design and implement an operational plan for the adopted National Youth Policy..

**Title: *Planning, monitoring and communication***

**Purpose:**

Planning, monitoring and communication component supports disaggregated data collection, analysis, and behavioural change communication with a focus on highlighting child disparities across geographic and social dimensions. The component supports utilization of BhutanInfo database, results based planning & monitoring system and C4D at central and local levels. The component contributes to the achievement of all UNDAF priority areas and MDGs by rendering strategic data and analytic information for improved results monitoring, targeting and communication. It directly contributes to the achievement of UNDAF Outcomes 1 (Poverty and Data) and 4 (Good Governance) and MDG 8 (Partnership for Development).

The joint 18 month Rolling Work Plan 'UN support to Planning and Monitoring for Poverty Reduction' supports results based planning and policy through data analysis in partnership with GNH Commission (GNHC), National Statistics Bureau (NSB), Centre for Bhutan Studies (CBS), UNDP, UNFPA and the Resident Coordinator's Unit. In support of Communication, the programme is implemented through an 18 months RWP with the Bhutan Broadcasting Service (BBS). The partnership achieved better coordination and avoided duplication of efforts amongst the collaborating and implementing partners

**Resources Used:**

Total approved for 2010 as per CPD: **USD 446,000**

Total available for 2010 from all sources: RR **USD 146,071** ; OR **USD 302,051** ;

Total: **USD 512,511**

Any special allocations (list): ORE – **USD 10,000**; Set aside – **USD 54,389**

List of donors

1. Global Thematic: Policy, Advocacy & Partnership
2. UNDP-USA Administrative Services

**Result Achieved:**

**a) Results achieved:**

**Planning, Monitoring and Evaluation**

- The Mid-term review of UNICEF in coordination with Gross National Happiness Commission (GNHC) and implementing partners (IPs) was conducted during March–December 2010. Substantial input and influence from conception to the finalisation of the UNDAF MTR tools and reports have ensured the relevance of internal UNICEF MTR within the UNDAF MTR. The whole process has enabled both the programme and the implementing partners to build their capacity to conduct MTRs.
- The 2010 Bhutan Multiple Indicator Survey (MICS with DHS add-on) has reached data analysis stage. The final report is expected to be completed by first quarter of 2011. The capacity of the NSB was strengthened with MICS capacity package provided at all stages of survey from designing, sampling, data collection, analysis and reporting. The disaggregated data at district level will provide useful inputs for targeted approaches for poverty reduction, disparity reductions and equity in the social sectors.
- Towards improving the institutional capacity of the NSB, a Statistical Act has been drafted which once enacted will ensure NSB greater autonomy as the data generator and clearing house.

- To institutionalize BhutanInfo at sub-national level the district template has been developed and will be further refined and rolled-out. The effort has been intensified by building capacity of key officials at national and district levels and by customizing the technology for monitoring national development plans specifically for the upcoming government's Mid-term Review (MTR) in close collaboration with the GNHC.
- The Bhutan Disaster Assessment (BDA) tools and mechanisms has been drafted and once finalised will enable Department of Disaster Management (DDM) to coordinate effective responses to emergencies and disasters.

#### **Advocacy and Programme Communication**

- Technical support has been provided for public awareness and education initiatives on H1N1 pandemic outbreak and risk communication.
- In programme communication, institutional capacity of the evolving media landscape within the context of the emerging democracy has been built.
- Partnership with BBS has institutionalized an increased number of weekly children, women and youth programmes on both BBS Radio and TV.
- The capacity of producers and programme managers has been strengthened, thus contributing to higher quality content in programmes for children and women.
- One of BBS' radio programmes on children, aired during the international children's day of broadcasting, received international recognition, and a TV programme on women and health also won an award.
- The programme also supported in development of communication messages on reintroduction of Pentavalent vaccine with Ministry of Health and health programme.

#### **Future Workplan:**

##### **Future work plan**

- Capacity building in RBM and indicator development
- Statistical literacy enhancement
- Generation of BMIS data estimates at sub-district level using small area estimate methodology with technical support of WB
- Capacity development on C4D with all IPs including media
- Mainstreaming implementation of communication strategies in all programmes.

## **4. OPERATIONS & MANAGEMENT**

### **4.1 Governance & Systems**

#### **4.1.1 Governance Structure:**

a) & b) The CMT devoted its monthly meeting in June to discuss on the Emergency Preparedness Action under the new CCCs prepared by programme and operations colleagues. This allowed the CMT to deliberate on the status and what needs to be done as per the key preparedness actions under CCCs. Emergency preparedness is one of the agenda topics in the monthly Heads of Sections Meeting. The 18 month rolling work plans of all programmes included the emergency preparedness activities e.g. training on education in emergencies; pre-positioning of family kits, school-in-the box kits etcetera.

c) The required annual frequency of 6 CMT meetings has been fully met as per the 2010 benchmark set by the regional office. An evaluation was carried out of the 2009 CMT meetings to improve efficiency and effectiveness of CMT meetings. The standard duration and frequency of the meetings were reduced and the monthly agenda was further improved as per the recommendation of the evaluation. One critical thematic

area was assigned to each month meeting for deliberations in addition to the standard agenda items.

The lessons learned from the 2009 annual report were discussed in the 2010 CMT meeting.

d) Quarterly progress reporting on annual programme and operations priorities and monthly review of the Office Management Report by Deputy Representative and Operations Manager during the CMT meetings helped in improving the performance of both operations and programme.

e) The closed audit recommendations from the 2008 internal audit continue to be reviewed biannually in the CMT meeting.

#### **4.1.2 Strategic Risk Management:**

a) Enterprise Risk Management (ERM) was oriented during the CMT meeting in October 2010 by OM after attending ERM and Risk and Control Self Assessment (RCSA) training. In December 2010 the expanded CMT including other key staff was briefed on RCSA process and subsequently developed the country office's risk profile and RCSA library against the planned results of cCPAP.

b) Prior to the development of the RCSA report, staff who attended the expanded CMT completed the RCSA questionnaire as a baseline for the ERM effectiveness within the country office. The residual risks were identified and analyzed on their likelihood of occurrence and possible impact. The identified significant risks included Aid Environment, Delivering as One, Supplies and Logistics Management, Talent Management, and Organisational Competencies.

c) Emergency preparedness is mainstreamed in all the programmes. All the work plans drawn with partners and implementers incorporates emergency preparedness activities including training on emergency in education, WASH, child protection, pre-positioning of family kits, school-in-the box, etcetera as well as the development of draft Bhutan Disaster Assessment tools and standard operations procedures.

d) UN joint Business Continuity Plan was updated and streamlined with other UN joint documents like Security Plan, Inter-agency Contingency Plan, and Pandemic Plan with the establishment of joint CRT and Crisis Management Team (CMT). A simulation exercise on the joint BCP for all UN staff was organized with technical support from Regional Office for Europe and Central Asia for Pandemic Influenza Contingency in United Nations, Geneva, Switzerland.

e) The CMT identified the office focal points including planning officer, operations officer, and emergency focal point, led by Deputy Representative for ERM. An Action Plan will be prepared during the CMT meeting in January 2011. Coordinated by the Deputy Representative, the focal persons will update the ERM-Action Plan and the Risk and Control Profile and Library and report to the CMT annually. Further training to all staff on ERM is scheduled in April 2011 with support either from the region or Headquarters to effectively sustain the process. The office will update the ERM 2011 in June.

#### **4.1.3 Evaluation:**

a) Once 18 rolling work plans were signed, the IMEP was developed by the M&E officer with inputs from all programme sections to consolidate studies, surveys and evaluations in key programme areas being undertaken in 2010.

b) The MTR of the country programme was the main evaluation of 2010. It was integral part of UNDAF/cCPAP MTR through the UN Theme Groups and was carried out in consultation with the implementing partners. The methodology applied was self assessments on each country programme outcomes and outputs. The preliminary findings and recommendations were critically reviewed by ROSA and APSSC regional advisors and specialists through the two-day teleconference and emails exchange, thus providing critical quality assurance and guidance. An external consultant has consolidated the programme self-assessments and carried out a partnership analysis while an UNICEF MTR Task Team guided the entire process and methodology. The other major evaluative exercise was the Reproductive Health Programme Review jointly carried out by UNICEF, UNFPA and WHO. Engagement of regional advisors from UNICEF and WHO from the beginning resulted in a thorough process of drafting a good ToR indicating clear roles and responsibilities of each review team member, thus ensuring the quality of the review. Regional advisors from these agencies played critical roles in reviewing the quality of the review.

c) & e) The national capacity in study design, methodology and sampling requires strengthening. This has rendered many of the past studies to be of limited use for evidence-based decision making and policy formulation. Capacity building of the implementing partners, local consultancy firms and also UN programme colleagues in collaboration with NSB in this area is one of the MTR recommendations.

d) Analysis of relevant findings, constraints, lessons learned and opportunities, as well as key recommendations of relevant existing assessments, studies and surveys were thoroughly used in the MTR self-assessments. A particular focus was given to analysing the relevance, efficiency, effectiveness and sustainability of the results. The recommendations of the MTR which need to be followed up immediately will be included in the new 18 months rolling work plans.

#### **4.1.4 Information Technology and Communication:**

- a) The Business Continuity Plan (BCP) was tested with UNICEF taking the lead in the ICT Task force under Crisis Response Team (CRT) during the simulation. The incorporation of feedbacks of the simulation to further strengthen BCP and common IT services is being carried out.
- b) Under the common services, some ICT staff across the UN Agencies in Bhutan were trained on the VHF system with the help of ICT specialist from India. The purchase and installation of VHF Repeater antenna at a suitable site in Thimphu for wider coverage and restoration of the VHF services are ongoing.
- c) Citrix was successfully deployed for providing access to office and IT resources during Disasters/Emergencies. However, Business Everywhere is of limited use in Bhutan as the connection is unreliable.
- f) The programme application in the office has been upgraded to Proms 9.1

#### **4.2 Fin Res & Stewardship**

##### **4.2.1 Fund-raising & Donor Relations:**

a) UNICEF Bhutan Country office has sent 100% of donor reports on time and the reports meet quality standards. Within the established work process, the donor reports have to be cleared by the respective head of section one month prior to the due date to the Communication Officer who then edit and forward it to the Deputy Representative for finalization and forwarding it to the Donors prior to the due date.

b) In 2010, UNICEF Bhutan Country Office has mobilized US\$ 4,826,955 (122%) out of US\$ 3,966,000 ceiling in the CPD. Draft fundraising strategy for the country programme (2008-2010) is in place which outlines responsibilities of fundraising task force and

programme staff. The task force is chaired by the Representative and the Fundraising committee monitors the progress of the strategy and CMT monitors and reviews country programme funding status. However, fund raising needs strengthening in view of donor withdrawals and Bhutan's 'middle-income' status.

d) CMT and PIMs were involved in monitoring PBA implementation status. Utilization of Expiring PBAs is a standing agenda of PIM. The 2010 available funds have been utilized according to the intended purposes and the donor conditions. The expiring PBAs during the year have been utilized at more than 98%.

e) The office performance indicators include overall PBA utilization rates and monitoring is reported through CMT and regular programme meetings.

f) The UN system in Bhutan, as a self-starter in the Delivering as One (DaO) approach, also established a UN-Bhutan Country Fund and applied the Expanded DaO-Funding Window for the achievement of the MDGs. As a self-starter for the Expanded Window, the UN-Bhutan has received funding of about USD 861,000 in 2010, out of which about USD 148,675 (17%) was allocated to UNICEF.

#### **4.2.2 Management of Financial and Other Assets:**

a) The Office has received "satisfactory" internal audit rating in 2008. The positive practices includes preparation of the operations annual work plan, processing financial transactions as per established procedures including appropriate segregation of duties, clear month end and annual closing procedures, well managed governance committees and oversight of programme inputs. The positive practices also included the establishment of joint common service agreements with other UN agencies.

b) Funds are prioritized consistent with donor contribution agreement in the 18 month rolling plan. The funding gaps of planned and available resources are analyzed to identify the priority areas for resource mobilization to ensure that the planned results will be achieved.

c) The monthly CMT and PIM monitor donor report schedules, expiring PBAs as well as the DCT > 6 months as standing agenda. DCTs reaching 6 months were notified two months in advance in PIM. Deputy Representative/HOS reviewed the use of the contributions towards output and outcome levels. The timely monthly and year-end closures of accounts were implemented, including the bank reconciliation statements. The well established procedures ensure security of financial documents, vouchers and unused cheques.

d) Heads of Sections reported the status of their programme fund expenditures in the monthly PIM ensuring timely utilization. In 2010, UNICEF Bhutan spent 88% of RR fund at US\$ 962,353 of the total allocation of US\$ 1,031,398. 100% of PBAs are used before expiry and at least 98% of OR-E is used on time. There were no outstanding DCTs over 9 months.

e) The operations and management results as planned in the 2010 Annual Management Plan were achieved. The 2010 local support Budget expenditure of US\$ 278,999 is 6% of the total programme expenditure of US\$ 4,826,955.

The office shares the security and handyman services with other UN agencies (UNDP, UNFPA, WFP and FAO). The UN agencies also shared 6 Common LTAs for services like conference facilities, vehicle maintenance, travel, stationeries and toner cartridge. In the scope of harmonization, the separate location of UNICEF office is one of the main constraints incurring additional operating cost and staff time.

#### **4.2.3 Supply:**

a) On government's request to respond to H1N1 pandemic emergency, off-shore procurement of masks and hand-sanitizers for health facilities and schools with support from Bangkok office was used for timely response. The Supply Unit managed to convince and secure free and timely freight contribution from Druk Air the only national airline. The supply unit also coordinated procurement service for vaccine and other cold chain equipment funded by GAVI and RGOB. Overall the total supply component is around 22% of the country programme budget which includes procurement through Government.

b) All the procurement available within country was sourced locally while supplies involving large quantity and not available locally and vaccines were sourced from the neighbouring countries e.g. Nepal, Bangladesh, India; regional office in Bangkok, and headquarters - Copenhagen.

c) The quality and timeliness of procurement was maintained for both local and off shore except for procurement through government.

d) The local suppliers profile was updated whenever details of new suppliers were available.

g) & h) While the warehouses are maintained by the government UNICEF facilitates the delivery of supplies to end user through the private transport vendors.

i-j) Focus on monitoring and quality assurance is needed as the existing monitoring system is managed only through a static excel sheet. A database system for supply monitoring tool is being developed to enable real time monitoring of supplies. Field monitoring for end-users by programme and supply colleagues needs strengthening.

l) The professionalism of the Supply Unit has been enhanced through a mission assignment of the Senior Supply Assistant to support Mongolia office on post emergency supply functions. The Logistics Assistant also completed the Online Certification in Humanitarian Logistic.

m) Procurement through Government was emphasised this year with the Ministry of Education. However the capacity of MoE's procurement section needs strengthening with closer follow-up. With the Religion and Health project of the government, the construction of latrines and bath houses in monastic schools for child monks and nuns which involved substantial supply component was completed on time. An assessment on these construction activities will be conducted and report submitted to Copenhagen.

#### **4.3 Human Resource Capacity:**

a) An ambitious Learning/Training plan was pursued. An amount of US\$ 31,000 was secured through global training fund mainly focussing on group trainings. The whole office and regional office were involved for preparing the training plan. All staff members undertook some form of training, whether on-the-job, participatory learning hours, UNICEF workshops, or specialized external training. The ad hoc training /staff exchange programme for international exposure for GS staff received increased attention. One international staff and 2 GS staff went on staff exchange programme. Regular learning hours were conducted for all staff to upgrade their skills and knowledge. e-PAS for international staff was also started.

IPSAS e-learning was enforced for relevant staff. Out of 28 staff, 3 completed all 7 modules; 17 staff have completed module 1. Based on Office wide priorities group trainings were conducted on Supervisory skills, Orientation for new staff, Peer Support volunteers, Belbin Exercise, and Simulation exercise on Business Continuity Plan and Pandemic Influenza preparedness for emergency, Security training, and Competency-based Interview training

b) As an essential part of the excellence endeavour, the Performance Appraisal process received considerable attention. All PERs for 2009 were completed in second quarter, which is far behind the completion target of 2010 first quarter. The PERs were monitored through periodic performance discussions, which formally took place at least once during the year between supervisors and supervisees, and informally more frequently through coaching. During the evaluations, the link between the PER and career development was reinforced.

d) The office has attained the minimum standards on HIV/AIDS in the workplace as per the guidelines (EXD/2004-016). The interagency HIV/AIDS team were trained by the adviser from Asia Pacific region in Bangkok. Confidentiality is maintained in the management of information regarding HIV status. Staff members who are HIV positive have access to good quality care through period medical visits in Bangkok and the National hospital in Bhutan. All vehicles are equipped with First Aid kits and condoms are available in restrooms of UNICEF and UN premises

#### **4.4 Other Issues**

##### **4.4.1 Management Areas Requiring Improvement:**

All obsolete and excess items disposed through 4 PSBs in 2010 enabled UNICEF to handover two of the three store rooms in the UN house saving USD 7,000.

The new travel procedure reduced the volume of transaction significantly. Strict monitoring of TA closures in the CMT and the weekly Operations meetings ensured no TA beyond 15 days after the completion of travel. However, stronger mechanism is needed to follow-up on the trip reports.

The weekly operations meeting enhanced the efficiency of staff and ensured no OBOs for the year as the PGMs/PO follow-up is a standing agenda.

##### **4.4.2 Changes in AMP:**

The office will continue to focus on the programme priorities including all IRs with gender and equity markers. The office will also focus on the preparation and implementation of the three organizational changes on VISION, Enterprise Risk Management, and IPSAS.

## **5. STUDIES, SURVEYS, EVALUATIONS & PUBLICATIONS**

### **5.1 List of Studies, Surveys & Evaluations:**

- 1. Age Validation of Early Learning & Development Standards (ELDS) for children aged 36 – 72 months*
- 2. KAP Survey on Maternal and Child Health Report*
- 3. Baseline Assessment of Water and Sanitation Facilities in Schools*

## **6. INNOVATION & LESSONS LEARNED:**

**Title:** *Educating for Gross National Happiness*

**Contact Person:** Ruby Q Noble, rnoble@unicef.org

### **Abstract:**

To inform how a new approach to education – Educating for Gross National Happiness - can help students address the challenges the world is faced with. For example, ecological challenges, including climate change, loss of indigenous cultures, consumerism and growing materialist addiction, as well as protection issues like drug abuse and sexual exploitation among young people.

How Gross national happiness (GNH), the unique development philosophy of Bhutan, seeks to balance sustainable and equitable economic development with environmental conservation, cultural promotion, and good governance. Incorporating the values and principles of GNH in the education system complements the concept of child friendly schools (CFS).

#### **Innovation or Lessons Learned:**

This is the first year of implementing Educating for GNH. Hence it is too early to determine what worked and what did not. Proper documentation of lessons learned will be made in 2011.

#### **Potential Application:**

If successful in Bhutan, this unique development philosophy, which seeks to join social, economic, and environmental objectives, could become a powerful model for other countries, particularly in the rest of South Asia and other parts of the developing world. It could also have important lessons for industrialised countries that increasingly recognise the necessity for economic advances to be more effectively integrated with environmental conservation and social wellbeing.

While it is too early to identify issues, it is important to bear in mind that just changing the Education System alone will not have the desired outcome; GNH should be integrated into other sectors as well.

#### **Issue/Background:**

Gross National Happiness (GNH) has been Bhutan's guiding philosophy. However, rapid modernization and consumerism threaten to undermine the environmental, social and cultural pillars of GNH.

Against this backdrop, Bhutan wants to transform its national educational system such that it produces responsible, caring, and ecologically conscious citizens who will care for others and for the natural world. It is a national initiative to educate Bhutanese on GNH right from early years in order to ensure that GNH values and principles are deeply embedded in the consciousness of Bhutanese young citizens.

#### **Strategy and Implementation:**

The values and principles of GNH are being infused into the education system through five ways:

##### **a) Meditation and mindfulness training**

Few minutes of contemplation and meditation at the school assembly, beginning of a class, ceremony and ritual, is practiced to improve concentration and learning.

##### **b) Bringing GNH into curricula**

Bringing GNH values and principles into the curricula: For example, a GNH-infused science approach would nurture the most deeply felt ecological consciousness, just as a GNH-infused math curriculum would teach students to spend wisely to meet their true needs.

##### **c) Broader learning environment**

Students will learn also by serving their communities and drawing from sources of local wisdom; from the way they engage in sports and in arts and cultural activities.

##### **d) Sharpening students intellect and analytical abilities**

Through media literacy (making children aware of media's positive and negative power over the shaping of the young individual's personality, aspirations and behaviour), children will learn to separate truth from the barrage of misinformation and materialist and consumerist messages.

### **e) Broadening the assessment system to reflect GNH values**

The unique talents and contributions of each and every student will be properly acknowledged. They will not be judged by their performance on competitive standardized exams that often leave students feeling like failures and consequently drop out.

#### **Progress and Results:**

##### **Progress:**

##### Capacity Building:

- All school principals, college lecturers and education officials trained on Educating for GNH
- A critical mass of 80 teachers and principals trained as trainers
- Training on media literacy undertaken on a pilot basis in 7 schools

##### Implementation in Schools:

- All schools have adopted 'Green Schools for Green Bhutan', which demonstrates respect for the Earth by conserving natural resources, and learns by bringing nature into the classroom and the classroom into nature.
- All schools practice meditation
- Many schools adopted an area within their community, including the school compound as 'litter free area'; 'Clean plate policy', which has drastically reduced wastage of food from packed lunches.
- The club coordinators such as the Health Club, Scouts Club, etc., have prepared action plans which include ecological literacy

##### Monitoring:

- Baseline study of GNH indicators in Schools available
- The school monitoring tool integrated with GNH indicators and all the principals and teachers trained on its use
- An interactive website on Educating for GNH launched by MoE

#### **Next Steps:**

- Develop a training manual for training teachers on how to infuse GNH in classrooms and schools
- Conduct cluster based training for all school teachers
- Review the existing curriculum and modify where needed.
- Build capacity of all faculty members of the Colleges of Education and Royal University of Bhutan on Educating for GNH
- Incorporate Educating for GNH in the curriculum of the two Colleges of Education
- Highlight good practices and write ups by public, teachers, and students on educating for GNH.

#### **Title: Bhutan Multi-sectoral Disaster Assessment tools and Mechanism**

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#### **Abstract:**

In 2010 UNICEF, in partnership with the Department of Disaster Management (DDM,) began a process of multi-sector disaster assessment preparedness. The Bhutan Disaster Assessment (BDA), that is the product of this process, provides a format for collating key information after a disaster, and along with "standard operating procedures", defining roles and responsibilities for how an assessment would be carried out.

The assessment will contribute to understanding of the scope of the disaster, the external assistance required, the need for more detailed assessments and immediate priorities of affected populations.

Building on recent assessment experience from other countries (most particularly the Pakistan McRAM), the BDA provides an assessment that is relevant to the Bhutanese context and owned by national stakeholders. The experience around the assessment

preparedness process should contribute to growing global recognition of both the importance of multi-sector assessments and the value of assessment preparedness as part of contingency planning.

### **Innovation or Lessons Learned:**

An advantage of assessment preparedness is that the assessment tool can be designed around particular local priorities.

One of the key innovations in the BDA is that **Culture** is included as one of the sectors. This may seem strange when compared to other disaster assessments but in Bhutan experience has shown that the destruction of cultural assets and the inability to perform rituals after a disaster can have a devastating effect on the well-being of the population and on their ability to begin recovery in other aspects of their lives.

Another advantage of assessment preparedness is that it provides the opportunity to field test the tool which is often not the case with emergency assessment tools. The field test in collaboration with local authorities provided valuable insights such as the importance of clarifying the meaning of concepts in a "training handbook" which would include translation and also of the multiple responsibilities of local authority staff which will impact the SOPs.

The process has been challenged by the limited capacity within the newly formed Department of Disaster Management and with the departure of the main focal person within DDM. The readiness and capacity of DDM as well as the availability of the consultant for a limited duration were factors that had to be taken into account in the development and testing of the post-disaster assessment tool.

### **Potential Application:**

The tool represents and covers the needs of all the major sectors in the country for the initial assessment and is developed through an intense consultative process at every level. UN agencies, development partners and donors in addition to the government organisations were included in the process.

Within Bhutan, the tool, although designed as an assessment for phases 1 and 2 after a disaster, also provides a framework which can be repeated at intervals to identify changes in the post disaster context and monitor the effectiveness of response.

Beyond the country level, other countries can benefit from not only the content and structure of the tool and the mechanism but also from the iterative and inclusive preparedness process that has been followed.

### **Issue/Background:**

Globally there is growing recognition that:

- Accurate information on impacts of natural disaster is necessary.
- One multi-sector assessment in phases 1-2 of a disaster reduces assessment fatigue, provides better use of resources and ensures all actors are "on the same page".
- Carrying out such a complex assessment benefits from preparedness.

Repeated emergencies in Bhutan in previous years highlighted the need for improved information systems. The 2009 earthquake revealed that lack of systems for gathering and sharing information overburdened local officials with multiple information needs, detracting from their ability to respond. A standardised tool and coordination mechanism emerged as a critical gap in DDM's capacity.

### **Strategy and Implementation:**

The process was closely linked to lessons learned from the 2009 earthquake. It was led by UNICEF (PM&E) in collaboration with DDM as an activity within the Joint 18-Months RWP of the UN Environment and Disaster Management Theme Group.

The lack of a mechanism and the tools to implement training of rapid emergency assessments within the newly established DDM featured strongly. Stakeholder consultations were held at multiple levels (both operational and policy) and the TA need was identified. A steering group from the DDM and the UN lead by UNICEF was formed to come-up with the roadmap. UNICEF APSSC assisted with the finalisation of a ToR and in identifying a suitable consultant.

Though UNICEF assumed the overall responsibility all the stakeholders were involved in the entire process of finalising the ToR, and short listing of candidates to the ultimate selection/recruitment of the consultant.

Beginning the process with a lessons learned workshop enabled a strong, practical connection of assessment preparedness to actual benefits. The steering group identified key sectors for response and formed working groups around these sectors. Using global level tools and other countries' examples, sector groups identified their key post-disaster information needs. The steering group together with DDM drafted assessment SOPs.

#### **Progress and Results:**

Assessment preparedness in Bhutan has been divided into three phases:

**Phase 1:** Stakeholder workshop and initial contributions on information needs. These were consolidated into a working draft of the **Assessment tools and the draft SOP**. Before the implementation of the second phase, stakeholder feedback was collected on the tools and the SOP and the necessary improvements were made.

**Phase 2:** Tool and SOP review, field testing and further refinement of the tool based on lessons learned in the field. Progress on the process was shared with senior government officials including the Minister for Home and Cultural Affairs. A standard data entry platform with simple standard report template and Preliminary Disaster Scenario (PDS) covering the assessment of initial 72 hours is also being developed.

Phase 3: Training DDM officers to train district and sub-district officials in how to administer the assessment after a disaster. This phase will also include a series of district level trainings focused initially on the districts that have already participated in Community Based Disaster Management Training (CBDMT) in order to ensure integration of the various disaster preparedness processes and to build on existing systems. (To be implemented during the first quarter of 2011).

#### **Next Steps:**

The ToTs and the cascade training will be implemented next year. Discussion with DDM and UNDP will be initiated on the cascade trainings, and the resource implications and mobilisation strategy.

## **7. SOUTH-SOUTH COOPERATION:**

UNICEF supported the Bhutanese delegation to attend the High Level Meeting for South-South cooperation for Child Rights in the Asia Pacific Region held in Beijing, China, from 4-6 November 2010. The meeting reviewed MDG achievement especially relating to child rights. The delegates reaffirmed child rights are fundamental to all cultures and societies, and that protection, respect, promotion and fulfilment of child rights are vital for economic growth and human development.

Noting impressive gains through south-south cooperation in the region such as ASEAN, SAARC and SPC, the delegates pointed the need for expansion to deal with cross-border issues affecting children, such as trafficking, drug abuse, and the spread of infectious disease such as HIV/AIDS, and irregular migration. They noted effective solutions can be achieved through broad concerted action from multiple countries considering new opportunities for South-South exchanges. Delegates also noted child protection challenges and committed to strengthen adequately-resourced national child protection and welfare systems and mechanisms. In light of the rapidly changing climate, increased frequency of natural disasters and the inherent vulnerability of children, delegates agreed that child-centred disaster risk reduction (DRR) efforts should be taken up as part of national DRR initiatives. The conference ended with delegates adopting the Beijing Declaration on South-South Cooperation for Child Rights with recommendations in the areas of: a) south – south cooperation for child rights; b) child protection and child welfare; c) achieving MDGs with equity; and d) children and disaster risk reduction.

Bhutanese delegation intends to organise a stakeholder meeting to discuss the outcome of the HLM and follow-up actions in 2011.