CHILDREN IN ASEAN

30 Years of the Convention on the Rights of the Child
Disclaimer

The report focuses on a selected set of indicators relating to the implementation of children’s rights in ASEAN in the 30 years since the adoption of the Convention on the Rights of the Child (CRC). Some of these indicators were selected to highlight areas of the most dramatic progress and success, while others were selected to allow reflection on the actions still needed to meet the obligations under the CRC and achieve the Sustainable Development Goals by 2030. Not all data are available from all ASEAN member States for each of these indicators. Where data gaps exist, these are noted in the report, either in the main body of the text or as footnotes.
CHILDREN IN ASEAN
30 Years of the Convention on the Rights of the Child
The ‘Children in ASEAN’ report comes at a very opportune time. It builds upon ASEAN’s unwavering commitment to the promotion and protection of the rights of the child, as demonstrated by the ratification of the UN Convention on the Rights of the Child (CRC) by all 10 ASEAN Member States. ASEAN has collectively pioneered the development and implementation of the ‘ASEAN Regional Plan of Action on the Elimination of Violence Against Children’, which translates ASEAN’s political commitments into concrete actions at the national and regional levels.

The world that children live in today is very different from 30 years ago when the CRC was first introduced. Children are increasingly vulnerable towards numerous types of abuse, exploitation and violence. This is in part due to the unprecedented changes and exponential growth of the digital world and the challenges it brings. Children are also more susceptible to the impacts of climate change, environmental degradation, and disasters. These challenges call for us to be more agile in the promotion and protection of children’s rights. We must step up our efforts to ensure surroundings are conducive for children in ASEAN to chart a future full of hope and opportunities. I hope that this report will support our efforts in framing such a future through the key recommendations highlighted.

I would like to congratulate Thailand as Chair of ASEAN in 2019 for spearheading the development of this report in partnership with the ASEAN Secretariat and the United Nations Children’s Fund (UNICEF). I would also like to commend the tireless efforts of the Senior Officials Meeting on Social Welfare and Development (SOMSWD) and the ASEAN Commission on the Promotion and Protection of the Rights of Children (ACWC) for sharing invaluable data and insights that made the report robust and relevant.

Last but not least, I encourage all decision-makers and stakeholders, especially advocates of children’s rights in the ASEAN region, to utilise the findings and recommendations of this report. I hope this report can help us strengthen our governance institutions, mechanisms and processes towards fully implementing the Convention of the Rights of the Child.

DATO LIM JOCK HOI
Secretary-General of ASEAN
Thirty years ago, against the backdrop of strong economic growth, and the emergence of ASEAN as a leading voice in the region, world leaders, including all ASEAN Member States, came together and made a historic commitment to the world’s children by adopting the United Nations Convention on the Rights of the Child (CRC). By 1995, all ASEAN Member States had ratified the CRC and since then have taken steps towards its implementation.

In all ASEAN Member States, significant progress has been made towards the achievement of children's rights. Since 1990s, poverty has halved. There have been dramatic increases in life expectancy, consistent with major achievements in basic services, such as improved access to clean water and better hygiene practices, as well as improvements in health during pregnancy and birth, in neonatal and infant survival and universal provision of healthcare. More children are attending primary and secondary school, near universal access has been achieved at the primary level across ASEAN Member States. This is giving children opportunities and future prospects that were unimaginable just three decades ago. ASEAN Member States have made progress in advancing the protection of children from violence, exploitation, abuse and neglect, through increased investments in state institutions and services.

As we take stock of progress, we should recognize that childhood in ASEAN is changing, posing both challenges as well as opportunities. Since the adoption of the CRC, the proportion of the ASEAN population living in urban areas has increased to almost half of the region's population. In addition, migration either voluntary or triggered by natural or human made reasons is having a significant impact on children and their families.

Childhood is characterized by better access to the internet and social media, which means more opportunities to communicate and interact. It also raises some important protection concerns for children, including exploitation and abuse as well as breaches of privacy. Childhood in the ASEAN region is increasingly affected by environmental degradation, pollution and threats from natural disasters, which reaches all aspects of a child’s life and exacerbates existing vulnerabilities and disparities.

Growth over the past few decades has been driven by a labour-intensive market. The challenges now of the 4th industrial revolution requires a new type of human capital - innovative, connected, collaborative, to build on 21st century skills and opportunities with and for young people in a rapidly changing job market.

As we look towards the achievement of the Sustainable Development Goals, ASEAN Member States should continue cross-border collaboration to realize children's rights, paying attention to groups who are systematically excluded and ensuring that no child is left behind. Member States are encouraged to strengthen laws and policies; increase financial resourcing and social investments; as well as strengthen data collection, analysis and use. ASEAN Member States should stand for equal access to quality services; leverage innovation and technology; promote sustainable social and behaviour change; and accelerate child-sensitive climate actions.

Children are not expenses, children are investments to transform our future. Enjoy reading this landmark publication.

Karin Hulshof
Regional Director
UNICEF East Asia and Pacific Regional Office
## CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FOREWORD</strong></td>
<td>2</td>
</tr>
<tr>
<td>Acronyms</td>
<td>8</td>
</tr>
<tr>
<td><strong>Chapter 1 Introduction</strong></td>
<td>10</td>
</tr>
<tr>
<td>1.1. Children in ASEAN</td>
<td>11</td>
</tr>
<tr>
<td>1.2. Socio-economic profile</td>
<td>14</td>
</tr>
<tr>
<td>1.3. Child rights in ASEAN</td>
<td>15</td>
</tr>
<tr>
<td>1.4. United Nations-ASEAN collaboration</td>
<td>18</td>
</tr>
<tr>
<td><strong>Chapter 2 Child rights progress in ASEAN – Looking back at 30 years of the CRC</strong></td>
<td>20</td>
</tr>
<tr>
<td>2.1. Child health</td>
<td>21</td>
</tr>
<tr>
<td>2.2. Child nutrition</td>
<td>28</td>
</tr>
<tr>
<td>2.3. Water, sanitation and hygiene</td>
<td>32</td>
</tr>
<tr>
<td>2.4. Education</td>
<td>36</td>
</tr>
<tr>
<td>2.5. Child protection</td>
<td>44</td>
</tr>
<tr>
<td>2.6. Social protection</td>
<td>51</td>
</tr>
<tr>
<td><strong>Chapter 3 Child rights now – Remaining challenges, prevailing issues and opportunities</strong></td>
<td>58</td>
</tr>
<tr>
<td>3.1. Child rights for all</td>
<td>59</td>
</tr>
<tr>
<td>3.2. Early moments matter</td>
<td>62</td>
</tr>
<tr>
<td>3.3. Safe and sustainable environments</td>
<td>64</td>
</tr>
<tr>
<td>3.4. Adolescents’ potential unleashed</td>
<td>68</td>
</tr>
<tr>
<td><strong>Chapter 4 Accelerating achievement of the SDGs in ASEAN Looking forward</strong></td>
<td>72</td>
</tr>
<tr>
<td>4.1. Reinforce regional systems and cross-border collaboration</td>
<td>73</td>
</tr>
<tr>
<td>4.2. Leave no child behind</td>
<td>73</td>
</tr>
<tr>
<td>4.3. Achieve gender equality</td>
<td>74</td>
</tr>
<tr>
<td>4.4. Ensure increased equal access to quality services</td>
<td>74</td>
</tr>
<tr>
<td>4.5. Strengthen and implement laws and policies</td>
<td>75</td>
</tr>
<tr>
<td>4.6. Leverage innovation and technology</td>
<td>75</td>
</tr>
<tr>
<td>4.7. Sustainable social and behaviour change</td>
<td>75</td>
</tr>
<tr>
<td>4.8. Increase public financial resourcing/social investment</td>
<td>76</td>
</tr>
<tr>
<td>4.9. Strengthen data collection, analysis and use</td>
<td>76</td>
</tr>
<tr>
<td>4.10. Accelerate child-sensitive climate actions</td>
<td>77</td>
</tr>
<tr>
<td><strong>5. Annexes</strong></td>
<td>78</td>
</tr>
<tr>
<td>5.1. CRC reservations/declarations</td>
<td>79</td>
</tr>
<tr>
<td>5.2. CRC-OPAC reservations/declarations</td>
<td>80</td>
</tr>
<tr>
<td>5.3. CRC-OPSC reservations/declarations</td>
<td>82</td>
</tr>
<tr>
<td>5.4. CRC-OPIC reservations/declarations</td>
<td>83</td>
</tr>
<tr>
<td>5.5. CEDAW reservations/declarations</td>
<td>83</td>
</tr>
<tr>
<td>5.6. CRPD reservations/declarations</td>
<td>84</td>
</tr>
</tbody>
</table>
Figures

Figure 1: Child population (under age 18) in ASEAN member States in 2016 (thousands) ............................................. 12
Figure 2: Change in population structure, 2000–2017, ASEAN ................................................................. 12
Figure 3: Percentage of females vs. males aged under 18 in eight ASEAN member States ......................................... 13
Figure 4: GDP per capita US$ (in PPP terms) in ASEAN member States ......................................................... 14
Figure 5: Life expectancy at birth in ASEAN member States, 1989 and 2019 ........................................................ 22
Figure 6: Estimated maternal mortality ratio (maternal deaths per 100,000 live births) in ASEAN, 1990–2015 23
Figure 7: Skilled attendant at delivery (%) in ASEAN member States, 1990–1999 and 2011–2016 ....................... 23
Figure 8: Skilled attendant at delivery (%), urban and rural, in ASEAN member States, 2011–2016 ...................... 23
Figure 9: Neonatal mortality rates per 1,000 live births, ASEAN member States, 1989–2017 (mid-year) .............. 24
Figure 10: Under-five mortality rates per 1,000 live births, ASEAN member States, 1989–2017 (mid-year) ........... 24
Figure 11: Female under-five mortality rates per 1,000 live births, ASEAN member States, 1989–2017 (mid-year) .... 25
Figure 12: Male under-five mortality rates per 1,000 live births, ASEAN member States, 1989–2017 (mid-year) .... 25
Figure 13: Percentage of females vs. males aged under 18 in eight ASEAN member States ........................... 25
Figure 14: Coverage of pregnant women who receive antiretroviral therapy for the prevention of mother-to-child transmission of HIV (%), ASEAN member States ........................................ 26
Figure 15: Immunization uptake of DTP3 (percentage of children), ASEAN member States ......................... 27
Figure 16: Exclusive breastfeeding up to 6 months of age in ASEAN (%), 1995–2001 and 2011–2017 ............... 30
Figure 17: Prevalence of stunting in children under 5 in ASEAN member States (percentage) .......................... 30
Figure 18: Prevalence of wasting among children under 5 in ASEAN member States (percentage) .................. 31
Figure 19: Percentage of the total population practicing open defecation, ASEAN member States ................. 33
Figure 20: Percentage of the rural population in ASEAN member States practicing open defecation .............. 34
Figure 21: Percentage of the urban population in ASEAN member States practicing open defecation ............ 34
Figure 22: Percentage of the total population in ASEAN member States with access to at least a basic water supply .................................................................................................................. 34
Figure 23: Adjusted net enrolment rate, one year before official primary entry age, both sexes (%), ASEAN member States ........................................................................................................................................ 37
Figure 24: Adjusted net enrolment rate, primary, both sexes (%), ASEAN member States ................................. 37
Figure 25: Rate of out-of-school children of primary school age, both sexes (%), ASEAN member States ........... 38
Figure 26: Adjusted net enrolment rate, lower secondary, both sexes (%), ASEAN member States ................ 38
Figure 27: Rate of out-of-school adolescents of lower secondary school age, both sexes (%), ASEAN member States .................................................................................................................. 38
Figure 28: Net enrolment rate, upper secondary, both sexes (%), ASEAN member States ................................. 39
Figure 29: Rate of out-of-school youth of upper secondary school age, both sexes (%), ASEAN member States .... 39
Figure 30: Adjusted net enrolment rates, 2017 (or latest), by sex (%), ASEAN member States ..................... 40
Figure 31: Out-of-school rates, 2017 (or latest), by sex (%), ASEAN member States ........................................... 40
Figure 32: Gross intake ratio to the last grade of lower secondary education, both sexes (%), ASEAN member States .................................................................................................................. 41
Figure 33: Gross intake ratio to the last grade of lower secondary education by sex (%), ASEAN member States ................................................................. 41
Tables

Table 1: ASEAN urban population, 1990–2017 ................................................................. 13
Table 2: ASEAN member States’ ratification status of CRC, CEDAW and CRPD .................. 16
Table 3: Definition of a child in each ASEAN member State ............................................. 16
Table 4: Child rights in ASEAN instruments, policies and planning documents ................... 18
Table 5: National learning assessment systems in ASEAN ................................................ 43
Table 6: Prohibition of corporal punishment in legal provisions, ASEAN member States ........ 46
Table 7: Minimum age of criminal responsibility (MACR) in ASEAN member States .............. 49
## ACRONYMS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACWC</td>
<td>ASEAN Commission on the Promotion and Protection of the Rights of Women and Children</td>
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<tr>
<td>ACTIP</td>
<td>ASEAN Convention Against Trafficking in Persons, Especially Women and Children</td>
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<tr>
<td>ASEAN</td>
<td>Association of Southeast Asian Nations</td>
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<tr>
<td>CEDAW</td>
<td>Convention on the Elimination of Violence against Women</td>
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<td>CRC</td>
<td>Convention on the Rights of the Child</td>
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<tr>
<td>CRC Committee</td>
<td>Committee on the Rights of the Child</td>
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<tr>
<td>CRPD</td>
<td>Convention on the Rights of Persons with Disabilities</td>
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<tr>
<td>DTP3</td>
<td>Diphtheria-tetanus-pertussis third vaccine dose</td>
</tr>
<tr>
<td>ECD</td>
<td>Early childhood development</td>
</tr>
<tr>
<td>ESCAP</td>
<td>United Nations Economic and Social Commission for Asia and the Pacific</td>
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<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
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<tr>
<td>ITU</td>
<td>International Telecommunications Union</td>
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<tr>
<td>LGBTI</td>
<td>Lesbian, Gay, Bisexual, Transgender and Intersex</td>
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<td>MACR</td>
<td>Minimum age of criminal responsibility</td>
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<td>MDGs</td>
<td>Millennium Development Goals</td>
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<tr>
<td>NCDs</td>
<td>Non-communicable diseases</td>
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<tr>
<td>OOSCY</td>
<td>Out-of-School Children and Youth</td>
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<tr>
<td>OPAC</td>
<td>Optional Protocol to the Convention on the Rights of the Child on the Involvement of Children in Armed Conflict</td>
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<tr>
<td>OPIC</td>
<td>Optional Protocol to the Convention on the Rights of the Child on a communications procedure</td>
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<tr>
<td>OPSC</td>
<td>Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography</td>
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<tr>
<td>PPP</td>
<td>Purchasing power parity</td>
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<td>SEA-PLM</td>
<td>South East Asia Primary Learning Metrics</td>
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<td>SDGs</td>
<td>Sustainable Development Goals</td>
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<td>SOWC</td>
<td>State of the World’s Children</td>
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<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>WASH</td>
<td>Water, sanitation and hygiene</td>
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<td>WHO</td>
<td>World Health Organization</td>
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CHAPTER 1
INTRODUCTION

Thirty years ago, the world united to secure the rights of all children through the United Nations Convention on the Rights of the Child (CRC). The Convention, which was adopted by the United Nations General Assembly on the 20 November 1989, remains, to this day, the most widely and swiftly ratified international human rights agreement of all time.

By 1995, all 10 member States of the Association of Southeast Asian Nations (ASEAN) had signed and ratified the CRC, binding themselves to its 54 Articles covering the protection of and respect for a full range of rights for all children. In 2019, the CRC had 196 States parties.

In November 2019, the world commemorates 30 years of this landmark instrument. This report reflects upon ASEAN member States’ achievements towards the realization of children’s rights since adoption of the CRC. The 10 ASEAN member States, together and individually, have made important progress during this time in improving the lives of millions of children across the region, giving them the chance of a happier childhood, better outcomes and a longer life. Many of these changes reflect the ongoing collaboration with the United Nations, including the United Nations Children’s Fund (UNICEF), which is mandated to support States’ implementation of the CRC. While the report focuses on achievements in relation to the CRC, it is important to acknowledge the contribution of ASEAN member States’ efforts towards the Millennium Development Goals (MDGs), which supported and accelerated progress in many areas.

In addition to celebrating past successes, this report also considers implications for the present, identifying remaining challenges and emerging issues in an ever-changing world. Finally, the report faces the future, taking into account the Sustainable Development Goals (SDGs), which States have committed to achieving by 2030, and asking what it will take to secure the rights of children in ASEAN in the years to come.

1.1. Children in ASEAN

The population of ASEAN is growing, and demographics are shifting. In mid-2017, ASEAN’s projected total population was just over 642 million, compared to just over 430 million in mid-1990, a 50 per cent increase.
Alongside this population growth, the demographic structure is changing in a number of ways thought to be caused by falling fertility and mortality rates. The proportion of children and young people aged 19 and younger in ASEAN is decreasing, and the proportion of those over 19 is increasing, with the biggest relative growth observed among those aged 55–64. This dynamic of a relatively larger elderly population and smaller child and youth population raises concerns over future productivity and economic security, making investment in children and youth even more critical.

Gender dynamics in the demographic context are also important to note and understand. Although data show higher rates of infant mortality in boys than in girls across the region, by the age of 18, there are more boys than girls in ASEAN member States where data are available. The underlying causes of this disparity are not confirmed, but reports suggest that sex selection before birth, a greater than expected mortality rate for girls below the age of 5 and gender differences in migration are all potential contributors.  

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**Figure 1: Total population in ASEAN member States in 2016 (thousands)**

![Figure 1: Total population in ASEAN member States in 2016 (thousands)](image)

Source: UNICEF State of the World’s Children 2017 Statistical Tables

**Figure 2: Change in population structure, 2000–2017, ASEAN**

![Figure 2: Change in population structure, 2000–2017, ASEAN](image)

Source: ASEAN Statistical Yearbook 2018

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7 Ibid., p. 3. Note: the mid-year figures provided in this source document are national projections.

8 See Chapter 2.1.

Urbanization is another change that has significant consequences in the region. All ASEAN countries have experienced a proportional increase in their urban populations since 1990, with the exception of Singapore, which is all urban. The proportion of the ASEAN population living in urban areas has increased by 61 per cent since 1990. At an annual growth rate of 2.65 per cent, the urban population of ASEAN is growing twice as quickly as the overall population, and is projected to increase from 47 per cent of the total population in 2015 to 63 per cent in 2050. By then, all ASEAN member States except for Cambodia are expected to have more than half of their population living in cities. Urbanization is also creating severe pressures for children in rural areas as it may increase the number of parents leaving children behind in villages, heighten the level of exploitation of land and water due to food production for cities and reduce investment in rural areas. Intervention approaches to secure the rights of children in rural, urban and other areas will need to be tailored accordingly, taking into consideration the realities of each country.

According to the United Nations Population Division, overall population increase and the upward shift in the proportion living in urban areas will combine to increase the world’s population by 2.5 billion by 2050, “with almost 90 per cent of this growth happening in Asia and Africa.”

**Table 1:** ASEAN urban population, 1990–2017

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<tbody>
<tr>
<td>Brunei Darussalam</td>
<td>12.6</td>
<td>73.5</td>
<td>78.5</td>
<td>78.0</td>
<td>77.0</td>
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<td>Cambodia</td>
<td>50.7</td>
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<td>71.9</td>
<td>74.0</td>
<td>75.0</td>
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<td>Indonesia</td>
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<td>51.2</td>
<td>53.3</td>
<td>55.0</td>
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<td>Lao PDR</td>
<td>18.1</td>
<td>21.6</td>
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<td>Malaysia</td>
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<td>Myanmar</td>
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<td>Singapore</td>
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<td>Viet Nam</td>
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<td>26.9</td>
<td>31.6</td>
<td>33.1</td>
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</tr>
<tr>
<td>ASEAN</td>
<td>30.1</td>
<td>43.7</td>
<td>45.0</td>
<td>47.0</td>
<td>48.5</td>
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</table>

**Source:** ASEAN Statistical Yearbooks 2012, 2018

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11 ibid. Note that this information is not available for Singapore or for Brunei Darussalam at the time of writing.


1.2. Socio-economic profile

The first of ASEAN's seven aims and purposes when it was established in 1967 was "to accelerate the economic growth, social progress and cultural development in the region through joint endeavours in the spirit of equality and partnership in order to strengthen the foundation for a prosperous and peaceful community of Southeast Asian Nations." True to this intention, the strong economic development in ASEAN over the past 30 years is one of the Association's greatest success stories. ASEAN now ranks as Asia's third largest and the world's fifth largest economy14 and all ASEAN member States are now classified by the World Bank as at least middle-income countries.15

In 2017, ASEAN member States’ combined total Gross Domestic Product (GDP) stood at US$2.8 trillion, an increase of 439 per cent compared to US$615 billion in 2000.16 GDP per capita has also grown tremendously in the past three decades despite two difficult periods that affected growth, the first during the 1997–1998 Asian financial crisis and the second in 2008–2009 following the global financial crisis.17 Available data calibrated for current market prices show that ASEAN-wide GDP per capita reached US$4,308 in 2018 from US$2,716 in 2008.18

Figure 4: GDP per capita US$ (in PPP terms) in ASEAN member States

Economic growth in ASEAN has brought a great number of positive changes for children and their families across the region. In the socio-economic context, poverty rates have dropped in recent decades, with

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14 ASEAN Key Figures 2018, p. 27.
16 ASEAN Key Figures 2018, p. 27. Figures are calculated as a weighted average using PPP GDP share as used in the International Monetary Fund – World Economic Outlook (IMF – WEO) Database as of April 2018.
17 Ibid., p. 28.
18 Ibid.
the proportion of the population\textsuperscript{20} living on less than US$1.25 (in purchasing power parity terms) per day decreasing from 47 per cent in 1990 to 22 per cent in 2005 and 14 per cent in 2015.\textsuperscript{21} This figure sits below the MDG target of 23.5 per cent, but still equates to over 75 million people across the six ASEAN member States for which data are available, suggesting a far higher figure across all 10 ASEAN countries.\textsuperscript{22}

Economic growth has not followed a linear path. In the past 30 years, the ASEAN region has faced severe regional and global financial crises. Although many countries have recovered from those crises, the near poor and lower-middle-income groups remain at risk of poverty, and the impoverished at risk of extreme poverty, in the event of another crisis.

Even if poverty rates have fallen overall, there remains considerable variation within and between countries and there are sizeable pockets of poverty. Conservative estimates indicate that nearly 25 million children in the region suffer from multidimensional poverty. More detailed data, including data disaggregated by sex, ethnicity, rural/urban and other factors are required to understand and track progress in child poverty.

Finally, it is essential that economic growth, among other factors, is reflected in increasing public resources for children to fulfill the commitment of countries to invest in the realization of child rights to the “maximum extent of available resources” (Article 4 of the CRC). “Legislation, policies and programmes directed to the realization of children’s rights cannot be implemented without sufficient financial resources being mobilized, allocated and spent in an accountable, effective, efficient, equitable, participatory, transparent and sustainable manner.”\textsuperscript{23} More information is required to develop a full understanding of the measures taken by ASEAN countries within their budget processes to generate revenue and manage expenditures in a way that is sufficient to realize the rights of children.

1.3. Child rights in ASEAN

All ASEAN member States have made a number of important commitments to protect the rights of children, including by ratifying three key Conventions: the CRC, the Convention on the Elimination of Violence against Women (CEDAW)\textsuperscript{24} and the Convention on the Rights of Persons with Disabilities (CRPD).\textsuperscript{25} While ratifying these Conventions, some ASEAN member States have done so with a number of reservations\textsuperscript{26} or declarations,\textsuperscript{27} details of which are included in the annexes to this report. Further, several ASEAN member States have not yet ratified all Optional Protocols to the Convention on the Rights of the Child: only Thailand has ratified the Optional Protocol on a communications procedure (OPIC).
Despite ratifying the CRC, not all States parties have adopted definitions of a child that are in line with Article 1 of the CRC, which defines a child as any person below the age of 18.

### Table 3: Definition of a child in each ASEAN member State

<table>
<thead>
<tr>
<th>Member State</th>
<th>Definition of a child</th>
<th>Source</th>
</tr>
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<tbody>
<tr>
<td>Brunei Darussalam</td>
<td>“a person who has not attained the age of 14 years”</td>
<td>Children and Young Persons Order 2006.28</td>
</tr>
<tr>
<td>Cambodia</td>
<td>“The definition of ‘minor’ refers in general to individual under 18.”</td>
<td>Combined fourth to sixth reports submitted by Cambodia under article 44 of the Convention, due in 2018, CRC/C/KHM/4–6, 22 June 2018, para. 31.</td>
</tr>
</tbody>
</table>

28 United Nations, Committee on the Rights of the Child, Consideration of reports submitted by States parties under article 44 of the Convention, Combined second and third periodic reports of States parties due in 2008, Brunei Darussalam, CRC/C/BRN/2–3, 12 November 2013, para. 64.

29 United Nations, Committee on the Rights of the Child, Combined fourth to sixth reports submitted by Cambodia under article 44 of the Convention, due in 2018, CRC/C/KHM/4–6, 22 June 2018, para. 31.
As an institution, ASEAN has confirmed member States’ individual commitments to children’s rights through a number of prominent collective achievements. In 2010, for example, ASEAN established the Commission on the Promotion and Protection of the Rights of Women and Children (ACWC). The ACWC, which comprises 20 members, 10 representing women’s rights and 10 representing children’s rights, meets at least twice each year and is tasked with upholding women’s and children’s rights, including those enshrined in the CRC, CEDAW, CRPD and other instruments.34

ASEAN has also recognized and reaffirmed member States’ efforts towards the advancement of children’s rights by endorsing a large number of declarations, policies and planning documents. For example, the Declaration on The Elimination of Violence Against Women and Elimination of Violence Against Children in ASEAN (2013) and the ASEAN Regional Plan of Action on the Elimination of Violence Against Children (2016) are two landmark documents that reflect the regional drive to protect children from violence, exploitation and abuse. Importantly, these instruments reflect concerns and promise action over “those who are in vulnerable situations.” These include: women and children experiencing domestic violence; women and children who are sexually exploited, engaged in cyber pornography or cyber prostitution; women and children with disabilities; women and children living with and affected by HIV and AIDS; women and children in conflict with the law; women and children who are trafficked; women and children in disasters; women and children in armed conflict, refugee camps or on the move; women and children who are stateless, migrants or belong to ethnic and/or indigenous groups; children in early marriage; children experiencing physical abuse or bullying; and women and children facing discrimination in mass and social media.35

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31 And means, in relation to criminal proceedings, a person who has attained the age of criminal responsibility as prescribed in section 82 of the Penal Code [Act 57/4].
32 The Singapore Parliament passed the Children and Young Persons (Amendment) Bill on 4 Sep 2019, which proposed to increase the age definition of children and young persons from below 16 years to below 18 years.
33 Marriage can be attained as early as 17 years old.
35 The Declaration on The Elimination of Violence Against Women and Elimination of Violence Against Children in ASEAN, 2013.
Moreover, children and child rights have been mainstreamed in broader ASEAN documents, including, for example, the ASEAN Enabling Masterplan 2025: Mainstreaming the Rights of Persons with Disabilities, which articulates issues relating to children with disabilities, and the ASEAN Declaration on Strengthening Social Protection 2013.

**Table 4: Child rights in ASEAN instruments, policies and planning documents**

<table>
<thead>
<tr>
<th><strong>Child focused ASEAN instruments, policies and planning documents</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• ASEAN Declaration Against Trafficking in Persons, Particularly Women and Children (2004)</td>
</tr>
<tr>
<td>• Declaration on the Elimination of Violence Against Women and Elimination of Violence Against Children in ASEAN (2013)</td>
</tr>
<tr>
<td>• The ASEAN Guidelines for a Non-Violent Approach to Nurture, Care, and Development of Children in all Settings (2016)</td>
</tr>
<tr>
<td>• ASEAN Regional Plan of Action on Elimination of Violence Against Children (2016)</td>
</tr>
<tr>
<td>• ASEAN Declaration on Strengthening Education for Out-of-School Children and Youth (2016)</td>
</tr>
<tr>
<td>• ASEAN Convention Against Trafficking in Persons, Especially Women and Children (2017)</td>
</tr>
<tr>
<td>• ASEAN Early Childhood Care, Development and Education Quality Standards (2017)</td>
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</table>

<table>
<thead>
<tr>
<th><strong>Child rights-integrated ASEAN instruments, policies and planning documents</strong></th>
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</thead>
<tbody>
<tr>
<td>• The ASEAN Agreement on Transboundary Haze Pollution (2002)</td>
</tr>
<tr>
<td>• ASEAN Agreement on Disaster Management and Emergency Response (2009)</td>
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<tr>
<td>• ASEAN Declaration on Strengthening Social Protection (2013)</td>
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<tr>
<td>• Bandar Seri Begawan Declaration on Noncommunicable Diseases in ASEAN (2013)</td>
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<tr>
<td>• ASEAN Post 2015 Health Development Agenda for 2016–2020</td>
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<tr>
<td>• ASEAN Nutrition Surveillance System 2017–2019</td>
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<tr>
<td>• ASEAN Declaration on Culture of Prevention for a Peaceful, Inclusive, Resilient, Healthy and Harmonious Society (2017)</td>
</tr>
<tr>
<td>• ASEAN Leaders’ Declaration on Ending All Forms of Malnutrition (2017)</td>
</tr>
<tr>
<td>• Declaration on ASEAN Post 2015 Environmental Sustainability and Climate Change Agenda (2015)</td>
</tr>
</tbody>
</table>

**1.4. United Nations-ASEAN collaboration**

ASEAN and the United Nations have engaged in cooperation since the inception of the Association. Cooperation between ASEAN and the United Nations began in the 1970s through the United Nations Development Programme (UNDP) and has since continued to grow. Following the first ASEAN-United Nations Summit in 2000, interaction and support between ASEAN and the United Nations has consistently increased, with the result that ASEAN, along with its sectoral bodies, now has working relationships with more than 50 United Nations agencies.36

In 2007, ASEAN and the United Nations signed a Memorandum of Understanding providing for regular consultations on matters of strategic importance. This was followed, in 2008, by a Joint Pledge to

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intensify cooperation and a Joint Declaration on
Comprehensive Partnership in 2011, which covers
an array of topics, including trafficking in persons.\textsuperscript{37}

In line with this, ASEAN and UNICEF work closely
together, collaborating through a Framework
Agreement for Cooperation that was signed in
2014. Under this agreement, ASEAN and UNICEF
agreed to:

- cooperate on achievement of the MDGs/SDGs;
- share information and technical cooperation
  relating to health, social welfare and development,
  including in relation to key child rights matters
  such as the prevention of child rights abuse and
  gender-sensitive programming;
- improve the quality of standards and policies relating to children; and
- cooperate in “strengthening the capacity and supporting the work of ASEAN in promoting
  and protecting the rights of children in the region”.\textsuperscript{38}

Several of ASEAN’s outstanding achievements in relation to child rights have been facilitated or supported
through collaboration with UNICEF. These include, for example, the adoption of the ASEAN Declaration
on Strengthening Education for Out-of-School Children and Youth (2016) and the ASEAN Regional Plan
of Action on Elimination of Violence Against Children (2016). The cooperation has also precipitated child-
related inputs to broader documents such as the ASEAN Leaders’ Declaration on Ending All Forms of
Malnutrition (2017), the ASEAN Enabling Masterplan 2025: Mainstreaming the Rights of Persons with

Additionally, the ASEAN-UNICEF framework has resulted in high-level, productive dialogue, reports and
training around child rights, including: the ASEAN Conference on Preventing and Combating Online
Child Sexual Exploitation;\textsuperscript{39} the Assessment of the ASEAN Community Blueprints and potential impacts
on children;\textsuperscript{40} the ASEAN Youth Engagement Summit;\textsuperscript{41} the 2016 ASEAN-UNICEF Regional Report on
Nutrition Security; and joint trainings for the Emergency Rapid Assessment Team (ERAT) members on
Emergency Preparedness and Response and Disaster Risk Reduction and its impacts on children and
women.\textsuperscript{42} The 2018 ASEAN-UNICEF Conference on 21st Century Skills and Youth Participation is a good
example of how the cooperation is broadening, as it brought together for the first time member States,
the private sector and young people to talk about 21st century skills, thus promoting legitimate spaces
for young people to express their views and engage with duty bearers.\textsuperscript{43}

\textsuperscript{38} Framework Agreement for Cooperation between the Association of Southeast Asian Nations and the United Nations Children’s Fund, ASEAN
\textsuperscript{39} Association of Southeast Asian Nations, ‘The 16th Meeting of The ASEAN Commission on The Promotion and Protection of The Rights of Women
and Children (ACWC)’, ASEAN, Jakarta, 26–28 May 2018, <https://asean.org/the-16th-meeting-of-the-asean-commission-on-the-promotion-and-
\textsuperscript{40} United Nations Children’s Fund East Asia and the Pacific Regional Office, What ASEAN Integration Could Mean for Children: Assessment of
the ASEAN Community Blueprints and Potential Impacts on Children, UNICEF EAPRO, Bangkok, 2018, <www.unicef.org/eap/media/2871/file/
\textsuperscript{41} Held in the Philippines in 2019.
\textsuperscript{42} UNICEF EAPRO, 2019.
and Youth Participation, Singapore, 8–9 November 2018, ASEAN/UNICEF EAPRO, Bangkok, 2018, <www.unicef.org/eap/media/3496/file/ASEAN-
CHAPTER 2
CHILD RIGHTS PROGRESS IN ASEAN – LOOKING BACK AT 30 YEARS OF THE CRC

Over the past 30 years, ASEAN member States have taken numerous positive steps towards the fulfilment of children’s rights in line with their commitments to children under the CRC. Since 2000, these actions have been facilitated, guided and encouraged by the global MDGs, while, since 2015, the SDGs and 2030 Agenda have provided additional impetus for progress.44

On the 30th anniversary of the CRC, children in ASEAN can, on the whole, expect to live longer than previous generations and to have better access to adequate healthcare, nutrition and education. They are more likely to experience childhoods in which they enjoy stronger legal protections and to have access to social protection support.

This chapter highlights accomplishments over the past 30 years and presents trends over time where data allow. While there has been much progress in implementing children’s rights, the path to full implementation is long and not without its obstacles. The pace and scope of progress has fluctuated across the ASEAN region. Some rights have progressed to a lesser degree than others and some children have not benefitted as much as others, whether due to their household or individual status (including their gender, ethnicity or socio-economic status, for example) or to geographic concerns (for example, if they reside in marginalized regions or sub-regions). When reading this chapter, it is important to bear this in mind and recall that while major progress has been achieved for millions of children across ASEAN, many remain in need of further actions on their behalf.

2.1. Child health

Article 24 of the CRC bestows children with the right to “the highest attainable standard of health.”45 This provides the foundation of a child’s physical, mental, spiritual, moral and social survival and development.46 In the 30 years since the CRC was adopted, ASEAN member States have realized some important accomplishments in child survival and health.

On a broad level, there have been dramatic increases in life expectancy at birth in all ASEAN member States. This is consistent with major achievements in basic services, such as improved access to clean water and better hygiene practices, as well as health-related improvements during pregnancy and childbirth, in neonatal and infant survival, and, increasingly, in universal provision of healthcare.47

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46 Ibid., Article 27.
47 This sub-chapter focuses on selected indicators that reflect these broad achievements in child health. This means that some areas have not been included in the analysis below, including, for example, adolescent health, mental health, child injury, non-communicable diseases and sexual and reproductive health, some of which are discussed in Chapter 3.3.
Maternity and birth

Women and newborns are most vulnerable during and immediate after childbirth. Maternal mortality has a devastating impact upon children and families and on the wider society. Safe maternity is a particularly acute concern when it involves adolescent girls.

Maternal mortality figures in ASEAN show a clear decrease in the risk to women and girls of giving birth. Between 1990 and 2015, all ASEAN member States saw a reduction in their maternal mortality ratios, ranging from an 84.2 per cent decrease in Cambodia (from 1,020 to 161), to a 16.7 per cent decrease (from 12 to 10) in Singapore. This is a key achievement in the protection of the right to health for women and children.

There are a number of ways in which States can reduce the risks of mortality during pregnancy, childbirth and in the postnatal period. One method is to ensure that all deliveries are attended by a skilled health attendant. Data show a significant increase in skilled birth attendance across all ASEAN member States from 1990 to 2016, including a nearly two-fold increase in Lao PDR. Data from 2011 to 2016 show that skilled attendants were present at nearly all births in Brunei Darussalam, Malaysia and Thailand, and at over 90 per cent of births in Indonesia and Viet Nam.

In many ASEAN member States, this improvement can be linked to improved and universal maternal and newborn child health laws, including, for example, in Myanmar, which introduced a policy on Universal Maternal, Newborn and Child Health services within the National Health Plan 2017–2021. Nevertheless, despite the overall increase in attendance of skilled health professionals at births across all ASEAN countries, some regions have not been reached to the same degree as others: Where disaggregated data are available, they show higher attendance rates in urban than in rural areas (except for Thailand).

49 Maternal mortality figures aim to capture the ratio (per 100,000 live births) of women who die during pregnancy, shortly after termination of pregnancy or during or shortly after childbirth.
50 Singapore has no data from 2013–2016.
Figure 6: Estimated maternal mortality ratio (maternal deaths per 100,000 live births) in ASEAN, 1990–2015

Source: World Health Organization (WHO) 53

Figure 7: Skilled attendant at delivery (%) in ASEAN member States, 1990–1999 and 2011–2016

Source: UNICEF SOWC 2017 and SOWC 2000 (Statistical Tables) 54

Figure 8: Skilled attendant at delivery (%), urban and rural, in ASEAN member States, 2011–2016

Source: UNICEF SOWC 2017 55


55 Ibid.
Progress and lessons learned in providing equitable access to quality healthcare to women and girls during pregnancy and childbirth, delivery and in the postnatal period will be important to address growing concerns over adolescent pregnancy in the region. Teenage pregnancy is a serious health concern due to its devastating physical and mental impacts on adolescent girls. A report by UNICEF and the United Nations Population Fund (UNFPA) shows that teenage pregnancy rates “remain stagnant in South-East Asia, with increases in several countries,” in contrast to global trends.

**Neonatal and infant survival**

ASEAN has witnessed considerable improvements in neonatal and infant survival over the past 30 years. Child deaths in the first 28 days of life (neonatal mortality) and in the first five years of life (under-five mortality) have both been substantially reduced across the ASEAN region, with Thailand and Singapore reducing neonatal mortality by around 75 per cent and Thailand cutting infant mortality by a similar figure. Although data from 1989 show one or two outlying results, in general, each year since the CRC was adopted, more and more babies have had a better chance of surviving to their fifth birthday.

Figures 10–12 show the clear improvement in under-five mortality rates across all ASEAN member States between 1989 and 2017. They also show that boys have higher infant mortality rates than girls, which reflects worldwide data trends and understanding of the “biological advantage in survival” of girls over boys. In the context of available data about child populations in ASEAN, which show that boys outnumber girls up to the age of 18, this reinforces the need to change harmful norms that may lead to unexpected mortality rates in girls or sex selection before birth.

**Figure 9: Neonatal mortality rates per 1,000 live births, ASEAN member States, 1989–2017 (mid-year)**

**Figure 10: Under-five mortality rates per 1,000 live births, ASEAN member States, 1989–2017 (mid-year)**

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Figure 11: Female under-five mortality rates per 1,000 live births, ASEAN member States, 1989–2017 (mid-year)

Figure 12: Male under-five mortality rates per 1,000 live births, ASEAN member States, 1989–2017 (mid-year)

Source: UN Inter-agency Group for Child Mortality Estimation

Figure 13: Percentage of females vs. males aged under 18 in eight ASEAN member States

Source: UNICEF, UNFPA, UN Women

61 Ibid.
62 Gender Counts: A quantitative assessment of gender inequality, p. 23. Note that this information is not available for Singapore or for Brunei Darussalam at the time of writing.
Improving neonatal and infant survival rates in ASEAN has required determined efforts by ASEAN member States to tackle some of the greatest dangers faced by children in their early years. This has included shielding children from communicable diseases, regarding which there has been progress in several ASEAN countries since 2010 (see Figure 14). Several ASEAN member States have now eliminated mother-to-child transmission of HIV and syphilis. Thailand was the first country in Asia, and among the first in the world, to achieve elimination of mother-to-child transmission of HIV and syphilis in 2016.63 Elimination of mother-to-child transmission of HIV and syphilis was also achieved in Malaysia after 20 years of extensive antenatal testing and treatment.64 Through a combination of robust policies, strong community engagement and improved quality of services, Indonesia has made rapid progress towards the target of malaria elimination by 2030, leading to 70 per cent of the population living in malaria-free areas in 2018.65 Similar success has been reported in Viet Nam, which has eliminated tetanus among newborns, and in the Philippines, where, in 2017, after decades of programming, WHO and UNICEF declared mothers and children in the country to be safe from maternal and neonatal tetanus.66

Figure 14: Coverage of pregnant women who receive antiretroviral therapy for the prevention of mother-to-child transmission of HIV (%), ASEAN member States

![Graph showing coverage of pregnant women receiving antiretroviral therapy for mother-to-child transmission of HIV]  

Source: UNAIDS AIDS Info67

Strengthening the quality of and access to skilled health professionals generally has had a significant impact in the ASEAN region. In Cambodia, for example, major initiatives have focused on strengthening the capacity of health workers to reach hard-to-reach villages.68 Myanmar has also reinforced and prioritized healthcare provision, building 100 new health centres, recruiting 20 per cent more midwives and improving training and supplies.69 This, and the scaling up of low-cost and effective interventions in healthcare facilities, including Early Essential Newborn Care, have helped to embed better practices and consolidate progress in reducing infant deaths. In Viet Nam, Kangaroo Mother Care70 was introduced for pre-term and low birthweight babies in Centres of Excellence and other selected hospitals.71


Keeping infants and young children healthy

As more and more children in ASEAN have survived childbirth, living beyond their first five years, ASEAN member States have worked to improve children’s health outcomes through a number of programmes, including the management of diarrhoea and pneumonia, prevention of childhood injuries and immunization.

The delivery of immunization programmes is one of the most prominent child health activities undertaken and is recognized as an outstanding achievement of ASEAN member States over the past 30 years. One milestone is the eradication of polio throughout ASEAN: in Cambodia in 1997, Indonesia in 2014, Lao PDR in 2000, Myanmar in 1996, Philippines in 1993, Thailand in 1997, Viet Nam in 1997 and Brunei Darussalam, Malaysia and Singapore all before adoption of the CRC.72

ASEAN member States have also made progress in increasing administration of the final dose of the diphtheria-tetanus-pertussis (DTP3) vaccine. Data from the past 30 years show increases in the percentage of children receiving DTP3 across all ASEAN countries, including a significant increase in Lao PDR, from 21 per cent in 1989 to 69 per cent in 2017 and near universal coverage in Brunei Darussalam, Malaysia and Singapore. As the populations of ASEAN member States have grown, this sustained increase in immunization uptake reflects States’ ability to overcome the resource challenges of providing and administering an increasing quantity of vaccines to the childhood population.73

Figure 15: Immunization uptake of DTP3 (percentage of children), ASEAN member States

![Immunization uptake of DTP3 (percentage of children), ASEAN member States](image)

Source: WHO and UNICEF joint reporting74

Health coverage for all

Children survive, thrive and enjoy the most secure, resilient health outcomes when they are able to access quality healthcare no matter their socio-economic background, gender, ethnicity or other status. Over the past 30 years, and in recent years in particular, ASEAN member States have taken steps to ensure healthcare is available to all.

Brunei Darussalam and Singapore have provided universal healthcare since before passage of the CRC75 but in the years since it came into force, a number of other member States have improved access to healthcare. In Thailand, the Universal Health Coverage Scheme was introduced in 2001. It was assessed, in 2011, to have covered 98 per cent of the population and to have reduced the public health and social

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74 Ibid.

protection burden caused by absence from work and financial hardship for families without health coverage. In 2014, Indonesia introduced the largest single-payer social health insurance scheme in the world, aimed at covering all Indonesians by 2019. To date, 221 million people have been enrolled. In 2018, the Philippines introduced the HIV and AIDS Policy Act of 2018. The legislation makes it possible for children aged 15 years and older to undergo HIV testing without parental or guardian consent. HIV testing is now also a routine procedure in prenatal care to prevent HIV transmission from mother to child during pregnancy, labour and breastfeeding.

Child health efforts in ASEAN are led by ASEAN Health, the ASEAN Health Ministers’ Meeting and the ASEAN Senior Officials Meeting on Health Development. In the 2000 Declaration of the 5th ASEAN Health Ministers Meeting on Health ASEAN 2020, these bodies reiterated the importance of health “as a fundamental right of our peoples”. ASEAN’s declarations on child and adult health include:

- ASEAN Leaders’ Declaration on Disaster Health Management (2017)
- Bandar Seri Begawan Declaration on Non-communicable Diseases in ASEAN (2013)
- Declaration of the 5th ASEAN Health Ministers Meeting on Health ASEAN 2020 (2000).

2.2. Child nutrition

A child’s right to nutrition is enshrined in Article 24 of the CRC, which requires States parties to “combat disease and malnutrition” and to ensure that society, parents and teachers are “supported in the use of basic knowledge of child health and nutrition [and] the advantages of breastfeeding”. The Committee on the Rights of the Child (CRC Committee) has noted that "adequate nutrition and growth monitoring in early childhood are particularly important".

Children who suffer from undernutrition can expect poorer survival chances, health status and cognitive and motor development throughout childhood and long-term consequences into adulthood, particularly in terms of physical and cognitive losses, and resulting economic disadvantage. Micronutrient deficiencies such as anaemia, which most affects adolescent girls and pregnant women, also has dramatic health consequences, including reduced stamina, increased susceptibility to illness and diminished physical and mental performance.

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80 United Nations, Committee on the Rights of the Child, General comment No. 15 (2013) on the right of the child to the enjoyment of the highest attainable standard of health (art. 24), CRC/C/GC/15, 2013, para. 43.
In the 30 years since passage of the CRC, ASEAN member States have made progress in improving child nutrition, giving millions of children better chances for positive health and improved physical, cognitive and emotional development outcomes. This has included improvements in early childhood nutrition, including breastfeeding, as well as a reduction in undernutrition. However, the increasingly obesogenic environment in ASEAN is contributing to rising rates of child and adolescent overweight, which puts people at risk of overweight and obesity and of non-communicable diseases (NCDs). Where malnutrition exists at both ends of the spectrum – undernutrition and overweight – this is known as a ‘double burden of malnutrition’, which is a growing regional and global public health concern.

**Early infant nutrition**

Optimal breastfeeding practices (i.e., initiation in the first hour after delivery, exclusively up to the age of six months and continuing up to two years or beyond) provide children with a solid foundation of nutrition, health and development for the best start in life. Success in increasing breastfeeding rates is contingent on a range of factors: good maternal nutrition, skilled support for mothers to initiate breastfeeding, recognition of the need for increased community awareness, restriction of aggressive marketing of breastfeeding substitutes, favourable employment laws that mandate adequate maternity leave and breastfeeding spaces, social protection payments for breastfeeding periods and building the capacity of men and boys to understand their role in breastfeeding support.

Virtually all ASEAN member States have made positive progress in improving exclusive breastfeeding rates in the past two decades, including a more than four-fold increase in Myanmar and a nearly six-fold rise in children in Cambodia being exclusively breastfed up to the age of 6 months in 2011–2017 compared to 1995–2011.

While relative progress is important, it is also important to note the absolute success rates within the available data: Indonesia, Myanmar and Cambodia have exceeded the World Health Assembly target of reaching at least a 50 per cent exclusive breastfeeding rate by 2025. Early initiation of breastfeeding in Lao PDR increased from 39 per cent in 2011 to 50 per cent in 2017.

In countries where breastfeeding rates are low, efforts have been made to implement the International Code of Marketing of Breast-Milk Substitutes. For example, in 2017 in Thailand, the country’s Legislative Assembly passed the Marketing Control on Food for Infants and Young Children Act (Milk Code) 2017 to restrict the marketing of food for infants up to 12 months of age and the marketing of products for children aged 1 to 3 years to encourage breastfeeding.

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82 Though this chapter provides data on important child nutrition indicators, it is important to note that it is not comprehensive, and does not include, for example, detailed discussion of gender, wealth and urban/rural disparities, given a lack of disaggregated data in this area.
83 Though NCDs are also linked to other factors such as smoking (or exposure to it) and air pollution, for example.
Figure 16: Exclusive breastfeeding up to 6 months of age in ASEAN (%), 1995–2001 and 2011–2017

![Pie charts showing breastfeeding rates in ASEAN countries](image)

Source: UNICEF

Child stunting and wasting

Stunting is a result of poor nutrition, repeated infection and inadequate psychosocial stimulation. Children are defined as stunted if their height-for-age is more than two standard deviations below the WHO child growth standards median. Children who are stunted before the age of 2 are more likely to experience physical and cognitive delays and overweight and associated NCDs in later life. In many ASEAN member States, there has been a large reduction in the past three decades in the prevalence of stunting among children aged under 5. This has meant millions more children achieving their physical and cognitive potential and millions fewer suffering ill-health and lifelong difficulties.

Figure 17: Prevalence of stunting in children under 5 in ASEAN member States (percentage)

![Graph showing prevalence of stunting in ASEAN member States](image)

Source: UNICEF-WHO-The World Bank Group

Historical data from all 10 ASEAN member States reveals considerable progress in reducing child stunting since before the CRC. In Viet Nam, prevalence has declined almost three-fold, dropping from 61.3 per

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cent of under 5s in 1988 to 23.8 per cent in 2017. In Cambodia, the child stunting rate declined by over 20 percentage points in just two decades (1996–2014). In Lao PDR, the stunting rate among children under 5 fell by 20 percentage points in less than two decades from 53.6 per cent in 1993 to 33 per cent in 2017.91

Even so, these achievements are not enough to ensure that member States will be able to reduce the numbers of stunted children by 40 per cent – in line with global targets92 – and the prevalence of stunting in some countries still ranges from ‘medium (10–<20)’93 (Thailand) to ‘very high (≥30)’94 (Cambodia, Lao PDR and Philippines). Nevertheless, it is hoped that continued economic growth will continue to support better nutrition outcomes for children.

Children who suffer from wasting have a low weight for their height. Wasting is an acute form of undernutrition caused by inadequate dietary intake and disease. Child wasting is a “strong predictor of mortality among children under five”95 – with the risk of mortality for acutely wasted children 12 times higher than for well-nourished children. Further reductions in the rates of wasting require improvements in the proportion of wasted children receiving timely and appropriate life-saving treatment, alongside reductions in the number of children becoming wasted in the first place (prevention).96

ASEAN member States have made some progress towards reducing childhood wasting, albeit at a slower rate than for reducing under-five stunting. Analysis from Thailand, where wasting persists despite considerable progress on other child indicators, shows that a key driver is poor feeding practices.97 Wasting prevalence remains above 5 per cent98 across ASEAN except in Brunei Darussalam (2.9 per cent in 2009).

Several ASEAN member States are close to meeting the <5 per cent target for wasting set out within the global nutrition targets, with Thailand at 5.4 per cent in 2016, Viet Nam 5.8 per cent in 2017 and Myanmar 6.4 per cent in 2015–2016. With the 2017 ASEAN Leaders’ Declaration on Ending All Forms of Malnutrition and an ASEAN Strategic Action Plan for Nutrition 2018–2030 in place, ASEAN has committed to drawing on lessons learned from the achievements in stunting and applying these to a reduction in wasting.

Figure 18: Prevalence of wasting among children under 5 in ASEAN member States (percentage)

<table>
<thead>
<tr>
<th>Country</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
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<td>5.4</td>
<td>5.8</td>
<td>5.4</td>
<td></td>
</tr>
<tr>
<td>Cambodia</td>
<td>6.3</td>
<td>5.4</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Lao PDR</td>
<td>6.6</td>
<td>6.3</td>
<td>5.4</td>
<td>3</td>
</tr>
<tr>
<td>Malaysia</td>
<td>7</td>
<td>6.6</td>
<td>6.3</td>
<td>5.4</td>
</tr>
<tr>
<td>Myanmar</td>
<td>8</td>
<td>7</td>
<td>6.6</td>
<td>6.3</td>
</tr>
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<td>Philippines</td>
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<td>8</td>
<td>7</td>
<td>6.6</td>
</tr>
<tr>
<td>Viet Nam</td>
<td>9.8</td>
<td>9</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>Thailand</td>
<td>10</td>
<td>9.8</td>
<td>9</td>
<td>8</td>
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<tr>
<td>Brunei Darussalam</td>
<td>2.9</td>
<td>2.9</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


91 Ibid.
94 Ibid.
Childhood overweight

Children who are overweight are more likely to suffer life-limiting health consequences such as diabetes, asthma and other NCDs in later childhood or as adults, as well as low self-esteem, poor mental health, lower cognitive development and poorer educational attainment. Being overweight or obese is a serious public health concern that places significant financial and human resource strains on health and other social services, resulting in lower productivity and human and economic development. Aware of the challenges presented by overweight, the World Health Assembly 2025 targets require States to maintain no increase in overweight among children under 5 years of age. Under-five overweight prevalence rates in ASEAN vary considerably, from 1.3 per cent in Myanmar to 8.2 per cent in Thailand and 14.8 per cent in Malaysia.100

As the progress described above suggests, advancements in ASEAN towards securing children’s right to nutrition has accelerated in recent years. This positive activity received a high-level boost in November 2017 with the endorsement of the ASEAN Leaders’ Declaration on Ending All Forms of Malnutrition. In the Declaration, the ASEAN leaders express deep concern over malnutrition and associated public health concerns, including for the most vulnerable and marginalized groups. The leaders committed to “scale up interventions to reduce and ultimately end all forms of malnutrition, particularly among the most vulnerable, poor and disadvantaged groups of ASEAN.”101

Furthermore, in 2016, ASEAN partnered with UNICEF to produce a two-volume report on nutrition in the region, demonstrating the determination to address malnutrition within the member States. The drive to end child malnutrition in ASEAN is also evidenced by the inclusion of nutrition-related priorities in the ASEAN Health Cluster Programmes and in the adoption of the ASEAN Strategic Action Plan for Nutrition 2018–2030.

ASEAN has been active in endorsing and promulgating materials aimed at ending malnutrition and supporting children’s right to nutrition, as per the following:

- The 2017 ASEAN Leaders’ Declaration on Ending All Forms of Malnutrition.

2.3. Water, sanitation and hygiene

A child’s right to clean water, sanitation and hygiene (WASH) is set out in Article 24 of the CRC, which requires States to “combat disease and malnutrition, including through the provision of clean drinking water, taking into consideration the dangers of environmental pollution”102 and to “ensure that all segments of society... are informed, have access to education and are supported in the use of... hygiene and environmental sanitation.”103 Children who live in environments without adequate access to WASH are vulnerable to diarrhoeal diseases and consequent ill-health. This section describes the progress made by ASEAN member States in improving access to clean and safe water for children.

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100 Institute for Public Health, Ministry of Health Malaysia, National Health and Morbidity Survey 2015
103 Ibid., Article 24(2)(e).
Safe sanitation practices

One of the ways in which ASEAN member States have improved health and other outcomes for millions of children is by working to eliminate open defecation. Open defecation is a serious public health concern: “Faecal contamination of the environment and poor hygiene practices remain a leading cause of child mortality, morbidity, undernutrition and stunting, and can potentially have negative effects on cognitive development.”104 Across ASEAN, considerable progress has been made to protect children from the impact of open defecation, with several ASEAN member States close to ending the practice. This is a major achievement, particularly given that data from several countries from as recently as 2000 show large percentages of the population practicing open defecation.

Even among countries with the highest levels of open defecation, important progress has been made towards safe sanitation practices. Cambodia and Lao PDR, which had the highest prevalence rates of open defecation in 2017, had more than halved prevalence since 2000.105 Thirty years after the CRC came into effect, under 8 per cent of the total ASEAN population still practices open defecation,106 a major advancement that has helped to safeguard the health of millions more children across the region.

ASEAN member States have had greater success in eliminating open defecation in urban as compared to rural settings (see Figures 20 and 21). Available data since 2000 show marked differences in the decline of open defecation between urban and rural areas, with data from urban areas showing near elimination of the practice in all member States. Although poverty may be one determinant of WASH access, poor urban dwellers may, nonetheless, have better access than wealthier rural inhabitants.107 However, there has been some success within the region in reducing inequalities in basic sanitation more broadly. In Cambodia, for example, urban coverage of basic sanitation more than doubled from 46 per cent to 96 per cent from 2000 to 2017 and the gap between richest and poorest was reduced “by over 60 percentage points” over that time.108 In late 2018, Lao PDR declared the fourth open defecation free district, with much of the credit due to the District Wide Approach of Community Led Total Sanitation, an innovative methodology that empowers communities to assess their open defecation context and set out and follow their own actions to become open defecation free.109

Figure 19: Percentage of the total population practicing open defecation, ASEAN member States

Source: WHO/UNICEF Joint Monitoring Programme (JMP)110

105 Ibid.
106 Ibid.
108 Ibid., p. 35.
Access to safely managed drinking water and sanitation

Access to safely managed WASH is crucial for children’s health, survival and development. ASEAN member States have made substantial progress towards universal access to a “basic water” supply since the CRC was passed. Out of 20 countries that have increased use of basic water services since 2000, three are in the ASEAN region: Lao PDR and Myanmar, with a 36 per cent increase, and Cambodia, with 26 per cent.

Source: WHO/UNICEF Joint Monitoring Programme (JMP)

112 Ibid.
113 Defined as drinking water from an improved source, provided collection time is not more than 30 minutes for a roundtrip including queuing, WHO/UNICEF Joint Monitoring Programme, ‘Drinking Water’, <https://washdata.org/monitoring/drinking-water>, accessed 26 September 2019.
114 Progress on household drinking water, sanitation and hygiene / 2000–2017: Special focus on inequalities, p. 25.
More recently, member States have been assessing access to clean, safe water by measuring ‘safely managed drinking water’, which is defined by the WHO/UNICEF Joint Monitoring Programme as the use of an improved drinking water source that is located on the premises, available when needed, and free of faecal and priority chemical contamination. The relative newness of these indicators as outlined in SDG 6 means that several ASEAN member States are currently unable to measure progress in this area, particularly because not all measure ‘faecal and priority chemical contamination’. However, data from Cambodia, Lao PDR, Malaysia, the Philippines and Singapore mirror the regional trends for access to at least basic water by showing steady increases in access to safely managed drinking water between 2000 and 2017:

- Cambodia increased access to safely managed drinking water from 17 per cent to 26 per cent between 2000 and 2019 (11 per cent to 17 per cent in rural areas and 43 per cent to 57 per cent in urban areas).
- Singapore maintained a rate of 100 per cent access to safely managed drinking water.
- Malaysia’s proportional access to safely managed drinking water remained high, never dipping below 93 per cent between 2000 and 2017.116

Access to safely managed sanitation

There has been a major global shift in measuring safely managed sanitation services that includes the fulfilment of three main criteria, including that the excreta are treated and disposed of on-site; stored temporarily and then emptied, transported and treated off-site; or transported through a sewer with wastewater and then treated off-site. Due to the relative newness of these indicators, some ASEAN member States have no data on ‘safely managed sanitation’ services as these indicators have neither been reflected in the national surveys or monitoring instruments nor been monitored through routine administrative measures. However, data from Lao PDR, Malaysia, the Philippines and Singapore highlight the regional trends for access to safely managed sanitation services with a steady increase between 2000 and 2017:

- Lao PDR increased its access to safely managed sanitation from 22 per cent in 2000 to 58 per cent in 2017.
- Malaysia had an increase of more than 10 per cent in the coverage of safely managed sanitation from 78 per cent in 2000 to 89 per cent in 2017.
- Philippines also recorded an increase of 10 percentage points on safely managed sanitation coverage from 42 per cent in 2010 to 52 per cent in 2017.
- Singapore has maintained 100 per cent coverage of access to safely managed sanitation for its entire population since 2000.

To attain the goal of universal coverage of both safely managed drinking water and sanitation services, innovative resource investment is crucial as it is estimated that meeting the cost of ‘safely managed’ drinking water and sanitation services will require four times the resources needed for basic services. In Indonesia, where 74 per cent of the population is using improved sanitation facilities but only 7.4 per cent is served by ‘safely managed’ sanitation, efforts to achieve the safely managed sanitation targets focus on opportunities between local governments, including peer-to-peer learning and twinning programmes.117

ASEAN-wide initiatives aimed at improving safe drinking water and sanitation are implemented under the Environmental Health and Health Impact Assessment priority area under Health Cluster 2 of the ASEAN Post-2015 Health Development Agenda.118 As one example of member States’ efforts in this regard, Cambodia is measuring the microbiological quality of water, which allows it to monitor and report on safely managed water, rather than just basic water.119

Investment in the WASH sector is essential and challenging. A recent study by the World Bank estimated that the “capital investments required to achieve the water supply, sanitation and hygiene SDGs [targets

116 Ibid.
117 Indonesia National Socio-Economic Survey (Susenas) 2018.
6.1 and 6.2) amount to about three times the current investment levels." The report recommends that, in order to meet these targets, it will be important to ‘shift’ resources to those areas in which the gaps are greatest, and notes that “the significant health, service access time, environmental, and economic benefits that result from safe drinking water and sanitation must be taken into account...Because of the lower coverage of WASH services among lower-income groups, a significant share of public funds should target poor and marginalized population groups.”

2.4. Education

A child’s right to education is enshrined in Article 28 of the CRC, which provides the “right to education on the basis of equal opportunity.” Article 28 requires States parties to make primary education compulsory and available for free to everyone, secondary education available and accessible and higher education available and accessible based on capacity. To comply with Article 28, States parties should not only provide access and services, but, most crucially, encourage attendance, improve learning and reduce dropouts.

Over the past three decades, ASEAN member States have reiterated their commitments to quality learning through the adoption of the World Declaration on Education for All (1990), MDGs 2 and 3 (2000) and SDG 4 (2015). SDG 4, in particular, widened the scope of international educational efforts from early childhood to lifelong learning and to a focus on learning outcomes and uncompromised commitment to equity in line with the principle of ‘leaving no one behind’.

By breaking down barriers to education and offering more children better quality education and diverse learning opportunities, States can ensure that each successive generation of children has the knowledge, skills and physical, mental, spiritual and intellectual development to thrive. Investment in education is a fundamental and cost-efficient investment towards a peaceful, prosperous ASEAN. This notion is clearly acknowledged and reflected in the ASEAN Vision 2025 Forging Ahead Together as well as the ASEAN Work Plan on Education 2016–2020, which covers a wide range of issues and priority areas, from early childhood education to university and lifelong learning, and from 21st century skills to partnerships with industry.

Thirty years after the CRC was passed, more children across ASEAN are attending primary and secondary school and are receiving a higher quality education, providing them with broader development opportunities and better future prospects than previous generations.

Access and completion

ASEAN member States’ progress in education is particularly evident through measurements of (adjusted) net enrolment rates at each level of education. Net enrolment rates reflect access and participation by showing how many children of the right age group are in school as a percentage of those who ‘should’ be in education for the appropriate level of education. An out-of-school children rate provides a


121 Ibid.

 complementary perspective to enrolment rates by reflecting the number of children who are not enrolled, as a percentage of the official school-age population.

The issue of out-of-school children remains a central concern for many ASEAN member States in their efforts to achieve universal access and participation in basic education, particularly in light of the adoption of SDG 4, which aims to “ensure inclusive and equitable quality education and promote lifelong learning opportunities for all.”

Over recent decades, ASEAN member States have encouraged greater access to and participation in all levels of basic education, namely pre-primary, primary and secondary levels, with significant improvements for both girls and boys. While increasing enrolment at pre-primary level remains a challenge in some countries, near universal access has been achieved at the primary level across the ASEAN region, which is an outstanding regional achievement.

**Figure 23: Adjusted net enrolment rate, one year before official primary entry age, both sexes (%), ASEAN member States**

![Graph showing adjusted net enrolment rate, one year before official primary entry age, both sexes (%), ASEAN member States.](image)

*Source: UIS123*

**Figure 24: Adjusted net enrolment rate, primary, both sexes (%), ASEAN member States**

![Graph showing adjusted net enrolment rate, primary, both sexes (%), ASEAN member States.](image)

*Source: UIS124*

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124 Ibid.
Figure 25: Rate of out-of-school children of primary school age, both sexes (%), ASEAN member States

![Rate of out-of-school children of primary school age, both sexes (%), ASEAN member States](image)

Source: UIS125

Figure 26: Adjusted net enrolment rate, lower secondary, both sexes (%), ASEAN member States

![Adjusted net enrolment rate, lower secondary, both sexes (%), ASEAN member States](image)

Source: UIS126

Figure 27: Rate of out-of-school adolescents of lower secondary school age, both sexes (%), ASEAN member States

![Rate of out-of-school adolescents of lower secondary school age, both sexes (%), ASEAN member States](image)

Source: UIS127

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125 Ibid.
126 Ibid.
127 Ibid.

CHILDREN IN ASEAN
30 Years of the Convention on the Rights of the Child
Between 2000 and 2017, nearly all ASEAN member States increased adjusted net enrolment of children in pre-primary and primary education and reduced the out-of-school children rate at the primary level. Access and participation rates have also improved across ASEAN at the lower and upper secondary levels. Although available data are insufficient to enable a full appreciation of the improvements throughout ASEAN, it is clear that substantial gains have been made in providing access to and ensuring participation of children in secondary schools in the region.

Access to and participation in education cannot be separated from gender equity issues. Importantly, where member States have data that are disaggregated by sex, figures show little difference in adjusted net enrolment rates for girls and boys in pre-primary and primary education. Data reflect a higher rate of girls than boys in pre-primary education, but, in general, a higher rate of boys than girls in primary – the only school level in which more boys than girls are enrolled in the ASEAN region. Where available, data show more girls than boys enrolled in lower secondary and upper secondary education.

Source: UIS128

128 Ibid.
129 Ibid.
education, and a greater out-of-school rate among boys than girls in all countries except Lao PDR at the upper secondary level.

Girls and boys may be enrolled in and withdraw from school for different reasons, often connected to social norms and expectations. Differences in sex representation in education often reflect gender norms and social realities around future prospects, expectations and employment: More girls may attend secondary education without going on to enter the labour market if gender norms require them to attend to domestic chores and child-rearing, while boys may lose out on the opportunity to learn at the secondary or tertiary level if they are expected to enter into manual labour at a young age.130

Figure 30: Adjusted net enrolment rates, 2017 (or latest), by sex (%), ASEAN member States

Source: UIS131

Figure 31: Out-of-school rates, 2017 (or latest), by sex (%), ASEAN member States

Source: UIS132

Access to and participation in education can also be measured by assessing the gross intake ratio to the last grade of lower secondary school, which is the percentage of children who enrolled in the last grade of lower secondary, irrespective of their age. ASEAN member States have shown some improvement against this indicator since the CRC was passed, although, again, it appears that girls are more likely than boys to enrol in secondary education.

132 Ibid.
Several ASEAN member States have made efforts to ensure that girls and boys do not drop out of education. Thailand, for example, has established an Equitable Education Fund in order to provide education for the poorest (including non-Thai) students. The Fund aims to address inequities in education and to support the education of disadvantaged children. Similarly, the Philippines has implemented Alternative/Equivalency Learning Programmes to support young girls and boys in alternative educational settings. The Smart Indonesia Programme and Program Keluarga Harapan (Indonesia Cash Transfer Program), both launched in 2008, have greatly contributed to increasing enrolment rates and reducing dropout rates among children from disadvantaged families through provision of financial assistance for education from primary and secondary levels up to the completion of upper secondary school. Cambodia’s Ministry of Education, Youth
and Sport, is funding a national scholarship programme covering primary and secondary education levels. This programme is enabling tens of thousands of children from poor and marginalized communities to enter and stay in school. In Malaysia, the 2019 ‘Zero Reject Policy’ was passed to ensure that no child with special educational needs is prevented from attending school. According to UNICEF, since the Ministry of Education launched the policy, “more than 10,000 children with disabilities have enrolled in schools [and] more than 2,500 undocumented children have gained access to education in mainstream schools.”

Learning and quality of education

A child’s right to education is not fulfilled when a child enters a classroom: As captured within the ASEAN Vision 2025 Forging Ahead Together and the ASEAN Work Plan on Education 2016–2020, education is about the nature and quality of learning. Adequate public investment in the education sector is essential to the fulfilment of a child’s educational rights. Although delivery of quality education requires much more than simple financial investment, one metric by which States’ investment in education can be assessed is expenditure in education as a percentage of overall public expenditure. In the 2015 Addis Ababa Action Agenda on financing development, the 2015 Incheon Declaration and the SDG4 – Education 2030 Framework for Action, the benchmark for allocation of public expenditure to education was set at 15 to 20 per cent of public expenditure. In general, the most recent data from ASEAN member States show increases in expenditure on education since 1999, with Indonesia, Malaysia, Thailand, Singapore and Viet Nam allotting over 15 per cent of total expenditure to education (as a percentage of total government expenditure) according to the most recent data from those States.

Figure 34: Expenditure on education as a percentage of total government expenditure (%), ASEAN member States

Alongside efforts to improve access to and completion of education, ASEAN member States have also invested in strengthening the assessment of student learning outcomes to improve the quality of educational provision.

All ASEAN member States have national learning assessment systems, many of which have been adopted in the past 30 years. Six States (Cambodia, Lao PDR, Malaysia, Myanmar, the Philippines and Viet Nam) are currently engaged in the first regional learning assessment in Southeast Asia: South East Asia Primary Learning Metrics (SEA-PLM). SEA-PLM represents a new approach to better understanding learning outcomes in the region and defining a regional vision and a shared commitment for improving learning. It will gather comparative data on the achievements of more than 30,000 Grade 5 students in reading, writing, mathematics and global citizenship in nine different languages.

Table 5: National learning assessment systems in ASEAN

<table>
<thead>
<tr>
<th>Member State</th>
<th>National learning assessment system</th>
<th>Relevant details on learning systems</th>
<th>Participating status in SEA-PLM regional assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brunei Darussalam</td>
<td>Yes</td>
<td>• Centralized Assessment Unit established 2017</td>
<td>Observer status</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Reading writing, numeracy skills and science</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Years 1–11</td>
<td></td>
</tr>
<tr>
<td>Cambodia</td>
<td>Yes</td>
<td>• Education Quality Assurance Department and Examination Office of the General Secondary Education Department</td>
<td>Participant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Grades 3, 6, 9 (lower secondary completion) and 12 (completion of upper secondary) national assessments</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Participant in PISA-D</td>
<td></td>
</tr>
<tr>
<td>Indonesia</td>
<td>Yes</td>
<td>• National Education Standards Agency</td>
<td>Observer status</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• End of year 6, year 9 and year 12</td>
<td></td>
</tr>
<tr>
<td>Lao PDR</td>
<td>Yes</td>
<td>• National examinations at the final grades of three levels: end of Grades 5, 9 and 12 and national entrance examination to higher education</td>
<td>Participant</td>
</tr>
<tr>
<td>Malaysia</td>
<td>Yes</td>
<td>• National examinations at three levels: end of year 9 (PMR), end of year 11 (SPM or MCE), and end of year 13 (STPM)</td>
<td>Participant</td>
</tr>
<tr>
<td>Myanmar</td>
<td>Yes</td>
<td>• Test at the end of compulsory primary education to continue onto secondary school</td>
<td>Participant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• National testing at the end of Grade 8 and a matriculation exam</td>
<td></td>
</tr>
<tr>
<td>Philippines</td>
<td>Yes</td>
<td>• National educational testing and research centre</td>
<td>Participant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• National Elementary Achievement Test in Grade 6 (English, Filipino, Science, HEKASI and Math) and the National Secondary Achievement Test</td>
<td></td>
</tr>
<tr>
<td>Country</td>
<td>Status</td>
<td>Examinations and Assessments</td>
<td></td>
</tr>
<tr>
<td>---------</td>
<td>--------</td>
<td>------------------------------</td>
<td></td>
</tr>
</tbody>
</table>
| Singapore | Yes | • Singapore Examinations and Assessment Board (SEAB) established April 2004  
• End of Year 6 Primary School Leaving Examination  
• End of Years 10 and 12 |
| Thailand | Yes | • National Institute of Educational Testing  
• Conducts Ordinary National Educational Test (ONET) at Grades 6, 9 and 12 |
| Viet Nam | Yes | • National High School Graduation Exam  
• Ministry of Education and Training |

ASEAN-wide efforts to strengthen education rights across the region have been driven by the ASEAN Senior Officials Meeting on Education, which developed the ASEAN Work Plan on Education 2016–2020. This Work Plan includes a number of sub-goals, one of which is to “enhance the quality and access to basic education for all, including the disabled, less advantageous and other marginalised groups.”

These efforts, including adoption of the ASEAN Declaration on Strengthening Education for Out-of-School Children and Youth (2016) and the subsequent establishment of a functional Working Group on the theme that involves UNICEF, UNESCO and the Southeast Asian Ministers of Education Organization, suggest strong political commitment to issues around access, participation and especially equity in education, including support for the most disadvantaged girls and boys and those who are hardest to reach. The Declaration is a joint sub-regional commitment and collective action to address the issue of out-of-school children and will continue to guide ASEAN member States in implementing seven key principles as the basis for promoting education for out-of-school children and youth: i) inclusivity; ii) equity; iii) accessibility; iv) continuity; v) quality; vi) flexibility; and vii) sustainability.

### 2.5. Child protection

All children have a right to protection from violence, exploitation, abuse and neglect. This right is enshrined in Articles 19, 20, 24, 28, 32 and 34–39 of the CRC and is supported by Article 7(1), which sets out the child’s right to birth registration, and Article 40, which secures the rights of children in conflict with the law.

When children are protected and live, learn and play in safe environments, they are able to survive and thrive. Without adequate safeguards, however, children are at risk of immeasurable harm and trauma. One of the most important ways in which States can implement child protection in practice is by establishing formal child protection systems. These bring together different government and non-government actors to deliver services for the prevention, identification and response to violence, exploitation, abuse and neglect faced by children. Where child protection services function well, they are multisectoral, drawing

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expertise and commitment from social welfare, justice, health and education departments and working across sectors for the protection of children. Effective child protection law and policy frameworks set out clear responsibilities for child protection services as well as thresholds for state intervention to protect children when they are at risk of or experiencing harm.

ASEAN member States have made important progress in advancing the protection of children against violence, exploitation, abuse and neglect. This has required investment in state institutions, interventions and services, and, where the most progress has been made, establishment of child protection systems. It has also involved efforts to improve public understanding of child protection, violence against children and physical punishment of children and to tackle social norms that perpetuate such violence and prevent children from speaking out and seeking help.

**Birth registration**

Children’s right to have their birth registered is a crucial part of their right to an identity. It is particularly important for children to be registered and to have access to their birth certificate or birth record where services are contingent upon producing such documentation. Indeed, birth registration is normally a prerequisite to a child’s full participation in society. Efforts across ASEAN to increase registration have been strengthened in recent years by laws and policies that make birth registration processes easier for parents and administrative officials. As a result, millions more children across the region have proof of their identity. All member States for which data are available have increased birth registration since 1999, with Myanmar and Cambodia more than doubling their rates. In Viet Nam, the Law on Civil Registration that took effect in 2016 contained many new regulations that reformed and simplified the administrative procedures for birth registration.

![Figure 35: Birth registration of children under 5, 1990–2001 and 2017 or latest (%), ASEAN member States](image)

**Source:** UNICEF


143 For example, Thailand adopted the Online Birth Registration System in all public hospitals. The system links information on babies born in the hospital with the civil registration office at national level. The system has ensured that all children are registered at birth and receive a birth certificate. This allows them to enjoy their rights to education, health care and social welfare which contribute to 100 per cent rate of birth registration in the country.

Despite the successes, some challenges remain, including, in particular, those related to vulnerable groups such as indigenous, undocumented and stateless children who may not be registered at birth due to a lack of documentation, or, in the case of Malaysia, a formal reservation against Article 7 of the CRC. Furthermore, as data disaggregated by urban/rural areas show, children in urban areas are more likely to be registered at birth than those in rural areas in all ASEAN countries apart from Thailand and Viet Nam.

### Preventing and responding to violence in all settings

Eliminating violence against children means ending the legal and attitudinal acceptability and practice of violence in communities, schools, homes, detention facilities and all other settings. This is a significant challenge that requires legal, policy and socio-normative change. Over the past 30 years, ASEAN member States have taken major steps towards the elimination of corporal punishment of children in several different settings through the prohibition of corporal punishment in law.

### Table 6: Prohibition of corporal punishment in legal provisions, ASEAN member States

<table>
<thead>
<tr>
<th>Year</th>
<th>Member State</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>1987</td>
<td>Philippines</td>
<td>The Family Code 1987 prohibits corporal punishment in alternative care, day care settings and schools (Article 233)</td>
</tr>
<tr>
<td>1993</td>
<td>Myanmar</td>
<td>Article 45 of the Child Law 1993 prohibits corporal punishment as a sentence for a crime of a child below the age of 16 years.</td>
</tr>
</tbody>
</table>

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**Source:** UNICEF

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**145** Ibid.


**147** But some legislation remains in need of repeal to confirm this provision. See *Ending Violence Against Children in ASEAN Member States*, p. 49.
<table>
<thead>
<tr>
<th>Year</th>
<th>Member State</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>Cambodia</td>
<td>Corporal punishment in penal institutions is prohibited under Article 38 of the Constitution.</td>
</tr>
<tr>
<td>2000</td>
<td>Thailand</td>
<td>The 2000 Regulation on the Punishment of Students removed corporal punishment from permitted disciplinary measures (reaffirmed in 2005).</td>
</tr>
<tr>
<td>2005</td>
<td>Viet Nam</td>
<td>Article 75 of the Education Law prohibits corporal punishment.</td>
</tr>
<tr>
<td>2006</td>
<td>Brunei Darussalam</td>
<td>Corporal punishment is prohibited in child care centres under Article 17 of the Child Care Centres Act 2006.</td>
</tr>
<tr>
<td>2007</td>
<td>Cambodia</td>
<td>Corporal punishment is prohibited in public and private schools under Article 35 of the Education Law 2007.</td>
</tr>
<tr>
<td>2016</td>
<td>Viet Nam</td>
<td>Article 30 of the Child Law 2016 prohibits corporal punishment in penal institutions.</td>
</tr>
<tr>
<td>2016</td>
<td>Cambodia</td>
<td>Corporal punishment is prohibited as a disciplinary measure under Article 5 of the Juvenile Justice Law 2016.</td>
</tr>
<tr>
<td>2017</td>
<td>Malaysia</td>
<td>Amendments to the Child Act 2001 remove references to whipping.</td>
</tr>
<tr>
<td>2017</td>
<td>Singapore</td>
<td>The Early Childhood Development Centres Regulations 2018 (under the Early Childhood Development Centres Act 2017) prohibit corporal punishment in early childhood development centres (only).</td>
</tr>
<tr>
<td>2019</td>
<td>Myanmar</td>
<td>Chapter 19, Section 19 of the Child Rights Law 2019, stipulates that parents, guardians and teachers shall not use any type of punitive measures including corporal punishment, to guide children. Moreover, the new Child Rights Law includes clear definitions of physical, psychological and sexual violence against children and enshrines penalties for the commission of these offences.</td>
</tr>
</tbody>
</table>

While there has been progress across the ASEAN region in enshrining prohibition of physical punishment of children into law, particularly within schools, challenges remain. Only the Philippines has been able to achieve prohibition of violence in alternative care settings, and just recently has a member State (Myanmar) passed a legal prohibition of violence against children in the home. However, the momentum towards prohibition is building, particularly in light of the 2013 Declaration on the Elimination of Violence Against Women and Elimination of Violence Against Children in ASEAN, the 2016 ASEAN Regional Plan of Action on Elimination of Violence Against Children, and the 2016 ASEAN Guidelines For a Non-Violent Approach to Nurture, Care and Development of Children in all Settings, in which ASEAN member States explicitly commit to the prevention of violence and adoption of alternative, non-violent, disciplinary methods.148

In addition to legal mechanisms that prohibit violence against children, all ASEAN member States now have a designated national agency with responsibility for protection and support services for children affected by violence at the national level and delegating authority to sub-national government agencies. In addition, over the past 30 years, all member States have strengthened child protection systems and programming through, for example, national action plans (Cambodia, Indonesia, Lao PDR, Philippines and Thailand) and policies and established or strengthened child protection systems.149 There has also been increasing investment in social service workforces as a key component of child protection systems, coupled with

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149 Ending Violence Against Children in ASEAN Member States, p. 63.
an important shift in the understanding of child protection and social welfare from a largely informal service to an accredited profession.

The Regional Plan of Action on the Elimination of Violence against Children includes a number of actions on capacity building. Several ASEAN member States have engaged in capacity building of front-line practitioners and other child protection or social welfare workforce. Individual country achievements include:

- **Brunei Darussalam**: in-house trainings for welfare home staff, counsellors and social workers (Civil Service Institute);
- **Cambodia**: training for Buddhist monks on preventing and responding to violence against children (Ministry of Culture and Religion);
- **Indonesia**: Ministry of Education training for teachers on positive discipline; training for social workers using the Module of Anti Violence Against at Risk Children as policy guidance for social workers in dealing with children's issues; guidelines for health workers on identifying and responding to violence against women and children;¹⁵⁰
- **Lao PDR**: capacity building and professionalization of the social work workforce, including through a four-week para-professional social work training course;
- **Malaysia**: training of primary care health staff on child abuse (Ministry of Health);
- **Myanmar**: training of judges and police officers on sexual abuse and case management;
- **Philippines**: strengthening of the Local Child Protection Councils, particularly in relation to mainstreaming child protection in local development plans;
- **Singapore**: capacity building on implementation of the CRC;
- **Thailand**: training of trainers in the police on a child protection curriculum; and
- **Viet Nam**: capacity building in schools and communities on child protection.¹⁵¹

Over time, these achievements could prevent millions of children in ASEAN from experiencing violence, exploitation, abuse and neglect. They will also ensure that those who do suffer harm are identified and responded to appropriately with the right support for their rehabilitation. Policy development and strengthened workforces cannot effect these changes alone, of course, and awareness raising and behaviour change remain important components for preventing violence against children and encouraging reporting of such cases.

### Protecting children from trafficking

Child trafficking is a serious concern. Children are known to be trafficked within and outside of the ASEAN region and in individual ASEAN member States. In 2017, ASEAN passed the ASEAN Convention Against Trafficking in Persons, Especially Women and Children (ACTIP).¹⁵² Unified efforts to prevent and address child trafficking are vitally important in the region, given the international context in which trafficking may take place. This is recognized in Article 1 of ACTIP, which states:

“The objectives of this regional legal instrument are to effectively:

a. Prevent and combat trafficking in persons, especially against women and children, and to ensure just and effective punishment of traffickers;

b. Protect and assist victims of trafficking in persons, with full respect for their human rights; and

c. Promote cooperation among the Parties in order to meet these objectives.”

d. Recognition of and willingness to address trafficking in ASEAN is also exemplified by the fact that nine of the 10 ASEAN member States have ratified the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and pornography and the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime.

¹⁵⁰ Ending violence against children in ASEAN Member States: Midterm review, p. 44.
¹⁵¹ Ending Violence Against Children in ASEAN Member States, p. 41.
¹⁵² This has now been ratified by Cambodia, Myanmar, Philippines, Singapore, Thailand and Viet Nam.
Since adoption of the CRC, every ASEAN member State has enacted legislation relating to trafficking:

- **Brunei Darussalam**: Trafficking and Smuggling of Persons Order, 2004;
- **Cambodia**: Law on Suppression of Human Trafficking and Sexual Exploitation, 2008;
- **Indonesia**: Law No. 21 of 2007 on the Eradication of Trafficking in Persons, 2007;
- **Lao PDR**: The Law on Anti-Trafficking in Persons, 2016;
- **Malaysia**: 2007 Anti-Trafficking in Persons Act (as amended by the Anti-Trafficking in Persons and Anti-Smuggling of Migrants (Amendment) Act 2015);
- **Myanmar**: The Anti-Trafficking in Persons Law, 2005;
- **Philippines**: The Anti-Trafficking in Persons Act of 2003 (Republic Act No. 9208) as amended and expanded by the Expanded Anti-Trafficking in Persons Act 2012 (Republic Act No. 10364);
- **Singapore**: Prevention of Human Trafficking Act 2014, Act 45 of 2014;
- **Thailand**: The Prevention and Suppression of Human Trafficking Act B.E. 2551 (2008) and The Human Trafficking Criminal Procedure Act B.E. 2559 (2016); and

### Justice for children

Protection of children who are in contact with the law sits within the rights framework set out in Articles 37, 39 and 40 of the CRC, reinforced by the CRC Committee’s General Comment No. 24 (2019) on children’s rights in the child justice system. To implement the international framework, States must ensure separate laws, institutions, agencies and services that are child-sensitive, be they victims, witnesses, in conflict with the law or for other reasons such as care, custody, protection or inheritance. All actions taken regarding children in conflict with the law must promote the child’s rehabilitation and reintegration and ensure that deprivation of liberty, pre- and post-trial, is used as a measure of last resort and for the shortest appropriate period of time. Specialist systems are especially important in maintaining primacy of rehabilitation for children in conflict with the law, particularly as the vast majority of children who come into conflict with the law are also in need of care and protection and/or may be forced into committing offences, including drugs and gang-related offences.

While the CRC mandates that States set an age below which children may not be considered to have committed a criminal offence, which the CRC Committee has clarified should not be below the age of 14, several ASEAN member States have not yet updated their justice systems in accordance with this.

### Table 7: Minimum age of criminal responsibility (MACR) in ASEAN member States

<table>
<thead>
<tr>
<th>ASEAN member State</th>
<th>MACR</th>
<th>Comments(^{153})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brunei Darussalam</td>
<td>7</td>
<td>Children aged 7–12 only criminally responsible if they have sufficient maturity of understanding to judge the nature and consequences of their actions at the time of the offence (Penal Code)</td>
</tr>
<tr>
<td>Cambodia</td>
<td>14</td>
<td>Article 39, Criminal Code</td>
</tr>
<tr>
<td>Indonesia</td>
<td>12</td>
<td>Law no 11 of 2012 on the Juvenile Justice System</td>
</tr>
<tr>
<td>Lao PDR</td>
<td>15</td>
<td>Articles 7 and 17, Penal Law</td>
</tr>
<tr>
<td>Malaysia</td>
<td>10</td>
<td>Article 82, Penal Code. However, under the Syariah Criminal Offences (Federal Territories) Act 1997, Muslim children can be held criminally responsible from puberty. There are no age limits on prosecution under the Internal Security Act.</td>
</tr>
</tbody>
</table>

\(^{153}\) Child Rights Information Network.
### Children in ASEAN

<table>
<thead>
<tr>
<th>Country</th>
<th>MACR</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Myanmar</td>
<td>12</td>
<td>While they intend to revise it under the Child Act/Law, unless and until the law is passed, the MACR is still at 7 not 12 (under Sections 28(a) and (b) of the Child Law)</td>
</tr>
<tr>
<td>Philippines</td>
<td>15</td>
<td>Children aged older than 15 but younger than 18 can only be held criminally responsible where they have “acted with discernment”</td>
</tr>
<tr>
<td>Singapore</td>
<td>10</td>
<td>Children aged 10–12 only criminally responsible if they have sufficient maturity of understanding to judge the nature and consequences of their actions at the time of the offence (Penal Code).</td>
</tr>
<tr>
<td>Thailand</td>
<td>10</td>
<td>The Juvenile and Family Court and Procedure Act provides juvenile training center for children, aged under 15, and juveniles, aged 15 to 17, from adults. The MACR under the Criminal Code is 10 years old.</td>
</tr>
<tr>
<td>Viet Nam</td>
<td>14</td>
<td>A child of 14 can only be held criminally responsible for “very serious crimes intentionally committed or particularly serious crimes.”</td>
</tr>
</tbody>
</table>

Specialist child justice legislation has been introduced in several ASEAN member States, including the Cambodian Law on Juvenile Justice (2016); the Indonesian Law on Child Criminal Justice System (2015); the Lao Juvenile Criminal Procedure Law (2013); the Philippines Juvenile Justice and Welfare Act (2006); and the Thai Act on Juvenile and Family Court and Procedure B.E. 2553 (2010). In States where separate juvenile justice laws do not exist, provisions on child justice are integrated into other laws, including in Myanmar, where the revision of the Child Law into a new Child Rights Bill in 2018 includes a specific chapter on diversion that sits in compliance with the CRC. Additional steps towards implementation are often necessary. To increase the use of legal provisions for diversion in its law, for example, Cambodia is currently developing diversion guidelines. Measures on diversion are particularly important in ensuing that children are only deprived of their liberty as a last resort and for the shortest appropriate period of time. 155

ASEAN States have established child- sensitive procedures in line with the UN Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime and developed multi-disciplinary services to support children and their families in seeking redress for rights violations. ASEAN member States have also taken steps to improve implementation of child-sensitive justice through establishing specialist units. Across the region, numerous specialist child justice units have been inaugurated within law enforcement agencies. States that have created specialist units are Indonesia (police), Lao PDR (courts and legal aid), Malaysia (courts), Myanmar (police and courts), Thailand (police, prosecution and courts) and Viet Nam (courts). In Cambodia, child protection police desks were established in early 2019 in selected communes in five focus provinces. Furthermore, Indonesia, Lao PDR, Malaysia, Philippines, Thailand and Viet Nam have all introduced legal provisions for diversion of children from formal justice systems, a major step forward in delivering child-friendly justice as enshrined within the CRC. 157

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154 The Singapore Parliament passed the Criminal Law Reform Bill on 6 May 2019, which proposed to raise the Minimum Age of Criminal Responsibility from 7 years to 10 years.

155 Convention on the Rights of the Child, Article 37(b).


157 Ibid., p. 43. Diversion and alternative measures are encouraged under Article 40(3)(b) of the CRC “whenever appropriate and desirable,” which has been clarified by the Committee on the Rights of the Child to mean that diversion “can and should be used in most cases.” See United Nations, Committee on the Rights of the Child, General Comment No. 10, Children’s rights in juvenile justice, CRC/C/GC/10, 2007, para. 24.
2.6. Social protection

Over the past 30 years, ASEAN member States have taken steps to reduce the vulnerability of all children and young people, particularly those facing the greatest deprivations, by developing comprehensive national social protection policies and frameworks, implementing social protection programmes, including through individual cash grants or transfers, and by improving investment in children. ASEAN has also taken important steps, including the ASEAN Declaration on Strengthening Social Protection (2013) and engagement in the joint United Nations project ‘Strengthening capacity to design and implement risk-informed and shock-responsive social protection systems in ASEAN Member States’.

Social protection covers, but is not limited to, social welfare and development, social safety nets, social insurance, social assistance and social services.158 Social protection includes policies and programmes aimed at preventing or protecting people against poverty, vulnerability and social exclusion throughout their life cycle, with a particular emphasis on vulnerable groups. Social protection systems are essential to the fulfilment of a child’s right to an adequate standard of living (Article 27 of the CRC) and to social security and insurance (Article 26 of the CRC) and are a crucial part of the child rights framework. They help families to provide adequate levels of care for their children and to secure children’s access to crucial services, including healthcare and education. Social protection systems also help families address child poverty, vulnerability and life cycle risks and to cope with shocks and build resilience.

When States experience ‘macro’ shocks, such as global or regional economic downturns, or when families suffer ‘micro’ shocks such as loss of earnings within the household, it is often children who are the worst affected.159 Children living in income insecure families are particularly vulnerable to hardship as a result of income shocks. By strengthening the capacity of all families to raise their children, and by reducing or eliminating barriers to essential services, social protection systems are an indispensable way that States can begin to close inequality gaps.

Since the adoption of the CRC, ASEAN member States have introduced several child-sensitive social protection policies with the express purpose of targeting children as beneficiaries.

One particular trend has been towards the use of regular cash transfers to families in greatest need: those who are living in poverty or who are vulnerable to it. These cash transfers or cash benefit schemes are a key component of social protection systems and can help to ensure that families are able to fulfil children’s basic needs, concerning health, nutrition and education for example, and that they can also invest in the child’s well-being and development.160

Cash benefit schemes for families with children are being implemented in Brunei Darussalam, Indonesia, Malaysia, Myanmar, the Philippines, Singapore, Thailand and Viet Nam. The Government of Cambodia in 2019 launched a national Cash Transfer Programme for poor pregnant women and children under 2 years of age. Cash transfer programmes are directed either at newborns (Singapore) or infants and young children (Thailand) or at children in education (Malaysia, Myanmar), with Singapore’s cash transfer scheme for all 0–12 year olds a standout in terms of its scope and reach. Other programmes target children from the

most vulnerable groups, including children with child protection concerns (Brunei Darussalam, Indonesia, Malaysia, Viet Nam), and children with disabilities (Indonesia and Thailand). Results from cash transfer schemes can be swift: In 2017, Myanmar began its first ever roll-out of a universal, systems-based maternal and child cash transfer scheme, which is reported to have reached over 100,000 beneficiaries in less than two years.161 Thailand, in particular, has been identified as being “on the right track” by the United Nations Economic and Social Commission for Asia and the Pacific (ESCAP), in that it has below average levels of both income poverty and multiple deprivations and invests most in its people.162 One of Thailand’s standout programmes is the Child Support Grant, introduced in October 2015 to provide financial assistance for infants from poor families.163 In 2019, the scheme was expanded to cover children 0–6 years of age and the income threshold of households eligible to receive the grant was increased to provide greater coverage.164

ASEAN member States are engaged in promoting national policies, strategies and mechanisms to strengthen the implementation of social protection programmes and ensure that social protection services are targeted to those most in need.165 In practice, this translates into identifying and progressively expanding programmes, policies and financing options most conducive to protecting all children, while also recognizing the different capacities, contexts and challenges of each country.

To address existing gaps in evidence and data, ASEAN member States are committed to developing assessment tools and regional statistical indicators to measure the impact of social protection on the holistic development of vulnerable groups for future planning towards available accurate baseline data collection. A key strategy is the promotion of results-based and evidence-based national assessments and benchmarking of social protection delivery services in ASEAN member States that would contribute to the progressive implementation, effective monitoring and evaluation as well as optimum impact of social protection.166

**Child poverty**

Dynamic economic growth across the ASEAN region has resulted in many positive changes for children and families. In the socio-economic context, poverty rates have dropped in recent decades, with the proportion of the regional population167 living on less than US$1.25 (in purchasing power parity terms) per day decreasing from 47 per cent in 1990 to 22 per cent in 2005 and 14 per cent in 2015. This figure is well below the MDG target of 23.5 per cent, but still equates to over 75 million people in just the six ASEAN member States for which data are available, suggesting a far higher figure across all 10.168

In terms of multidimensional child poverty, it is conservatively estimated that nearly 25 million children in the region are multidimensionally deprived; the percentage of children who are only income deprived is likely to be far higher. More detailed data, including data disaggregated by sex, ethnicity, rural/urban and other factors are required to understand and track progress in child poverty.

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165 ASEAN Declaration on Strengthening Social Protection.

166 Ibid.


Figure 38 shows the percentage of the population living below the national poverty line in the member States for which data are available, as well as the progress in poverty reduction between 2005 and 2016.

**Figure 37:** Population living below the national poverty line (%), ASEAN member States, 2005–2016

![Figure 37: Population living below the national poverty line (%), ASEAN member States, 2005–2016](image)

Source: ASEAN Key Figures 2018

According to the United Nations, “an estimated 36 million people in the region still live below the international poverty line,”\(^\text{169}\) and many across ASEAN remain vulnerable to falling into extreme poverty.\(^\text{170}\)

**Inequality**

While poverty rates have fallen overall, there remain considerable variations within and between ASEAN countries, with sizeable pockets of poverty. These pockets of poverty may be demographic in nature (for example, among certain ethnic groups or household types), geographic (in the case of marginalized regions or sub-regions) or, increasingly, may reflect lower skilled workers in urban settings. When more contextually appropriate relative poverty lines are used, the extent and depth of these pockets of poverty becomes clearer.\(^\text{171}\)

Inequality rates, as measured by the Gini coefficient,\(^\text{172}\) vary across ASEAN member States.\(^\text{173}\)

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170 Ibid.


172 Income inequality: Income inequality refers to the uneven distribution of income between individuals or households in a given country. One of the most frequently used measures of income inequality is Gini Coefficient (Rasio). The value of Gini Ratio spreads from 0, as a perfect equality, to 1, as a perfect inequality, in income distribution of the population.

Figure 38: Gini coefficient, ASEAN member States, 2005–2016

Source: ASEAN Statistical Yearbook 2018

Trend data from 2005 to 2016 show fluctuations in inequality across ASEAN countries. In this period, decreases in inequality were recorded in Cambodia, the Philippines and Singapore and increases were observed in Indonesia, Lao PDR, Malaysia, Thailand and Viet Nam. It is important to note that in recent years (data from 2012 to 2016) inequality increased in Cambodia, Lao PDR, Thailand and Viet Nam, and decreased in Indonesia, Malaysia, the Philippines and Singapore.

To understand the impact of inequality on children it is important to look beyond the aggregate data provided by the Gini coefficient. Nevertheless, there is a critical lack of disaggregated information on the nature and characteristics of inequality in the region and the causes of the fluctuating data. More disaggregated data and analysis are required on gender dynamics, minority populations and geographical disparities in order to identify the groups that are systematically excluded from economic growth in the region.

Multidimensional deprivation

Inequality also manifests in dimensions other than income and must be analysed not only in terms of poverty conceptualized using the income and consumption approach, but also in terms of a more holistic multidimensional child poverty approach.

Child poverty is known to affect millions of children in ASEAN but exact figures are hard to come by. The most recent data indicate, for example, that as many as 55 per cent of children under 9 years of age and 40 per cent of children aged 10–17 in Lao PDR live in multidimensional poverty, with similar proportions in Myanmar (52 per cent and 37 per cent respectively) and Viet Nam (45 per cent and 35 per cent respectively). At a rough calculation, this equates to nearly 25 million children across the seven ASEAN member States for which data are available who are living in multidimensional poverty (Cambodia, Indonesia, Lao PDR, Myanmar, Philippines, Thailand and Viet Nam).

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174 Excepting Brunei Darussalam, for which data are not available.
175 ASEAN Key Figures 2018, p. 21.
Multiple deprivation data reflect how children experience simultaneously a number of different deprivations regarding, for example, access to healthcare, food and water and sanitation. Data from ASEAN show that many households in the region continue to face multiple deprivations – economic, social and environmental.180

Source: ESCAP181

179 Ibid.; numbers of children experiencing multi-dimensional poverty calculated based on the age group percentage incidence and total age group figures.
180 Social Outlook for Asia and the Pacific: Poorly Protected, p. 11.
181 Ibid., p. 15.
Analysis of multiple deprivations recognizes that facing barriers to accessing not just water or education or economic opportunity but several of these at the same time presents an additional burden and pressure on households, families, children and carers.

In a positive development – particularly given the paucity of data on poverty – several ASEAN member States have demonstrated an interest in understanding child poverty in their countries in more detail. Cambodia, Lao PDR, the Philippines, Thailand and Viet Nam all participated in the 2007–2010 UNICEF study, ‘Child Poverty in East Asia and the Pacific: Deprivations and Disparities’. Additionally, in Indonesia in 2010, the Government and UNICEF collaborated on a study, ‘Child Poverty and Disparities in Indonesia: Challenges for Inclusive Growth’. In Lao PDR, the Ministry of Planning and Investment with support from UNICEF conducted a multiple overlapping deprivation analysis of children in 2015 and 2018 using the Lao Social Indicator Survey from 2011/2012 and 2017. In Malaysia, the Government and UNICEF produced a targeted report on urban child poverty and deprivation in low-cost flats in Kuala Lumpur, entitled ‘Children without’ in 2018. In Myanmar, the 2011 Child Vulnerability Assessment covered child poverty, disparities and vulnerabilities. The Child Poverty in Cambodia report was published in 2018. These assessments, all of which were joint collaborations with UNICEF, are vital to provide the data and evidence needed to address, reduce and eventually eliminate child poverty, particularly among the hardest-to-reach populations.

**Impact of the economic crisis on children**

The impacts of the global food, fuel and financial crises (3Fs) on East Asia and the Pacific were swift and severe. The global financial crisis amplified the effects of the food and fuel price crises, seriously challenging the abilities of families to cope and of children to thrive. The lack of uniformity between countries in the ASEAN region meant that each was affected in varying degrees by the different shocks. Middle-income and export-oriented countries were most hurt by the economic crisis whereas the impact of the food price crisis has arguably been greater for those in lower-income groups. The poorest quintile of households in poor countries spend up to 80 per cent of household income on food. For these households, an increase in the price of staple foods is equivalent to a decrease in real income and drastically reduces disposable income for health and education. It was estimated that a 10 per cent increase in food prices could push an estimated 105 million more people into poverty – a reversal of about seven years of poverty reduction work. During the Asian financial crisis many children were forced to drop out of school. When large numbers of children leave school to help their families buy food or pay for health care, their long-term development suffers, as do prospects for their countries’ sustained socio-economic development.

At a time when social spending and investment in programmes protecting children are most needed, they are most vulnerable to being the first to be cut – if experiences of past crises are repeated. The Asian financial crisis illustrated that household coping strategies can sustain considerable pressure for a while, but not for long. Policies and interventions designed to prevent poverty traps from persisting are of critical importance to preserve past gains as well as further advance economic and human development. Reduced social spending will not only derail countries’ progress towards achieving the

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185 Ibid.
SDGs, it can also have a large opportunity cost in terms of relinquished improvements in human capital and countries’ growth trajectories.\(^{186}\)

In the past, the impacts of crises on health, nutrition and education have been considered as separate and independent phenomena, but they usually are not – at least from the point of view of the child. A stunted child is also less likely to attend school. A child forced to leave school early is also more likely to be hungry.

Where countries already struggle with poverty, inequality, poor nutrition and low educational achievements, further economic setbacks could be disastrous for vulnerable populations. Of particular concern is the potential impact on children’s health, education and overall development. Failure to protect vulnerable children risks leading to physical stunting and reduced intellectual growth resulting from a lack of access to adequate health and education.\(^{187}\)

UNICEF and other partners worked with governments in the region to adopt measures to minimize the social impacts of the triple threats (financial, food and fuel crises). They did so in a number of ways: by assisting governments to monitor the impact of the crises in real-time; producing high-quality situation analyses and studies detailing the actual and potential impacts of the crises on poor women and children; engaging in discussions to put children at the forefront of the agenda in unified United Nations responses to the crises; assessing and analysing the unique ways in which children are (often permanently) affected by worsening health and nutrition outcomes, reduced educational attainment and deteriorating child protection outcomes; and helping governments to develop capacity to analyse and introduce or maintain effective social safety nets and social expenditure in response.

\(^{186}\) Ibid.

CHILD RIGHTS NOW – REMAINING CHALLENGES, PREVAILING ISSUES AND OPPORTUNITIES

As outlined in Chapter 2, ASEAN member States have achieved significant progress for children in the 30 years since the CRC came into force. The countries’ accomplishments in health, nutrition, WASH, education, child protection and social protection have meant that millions of children across the region have survived, thrived and enjoyed better childhoods and adolescence than they might have done three decades ago.

At the 30th anniversary mark, countries worldwide continue to face challenges, both in implementing the rights contained in the CRC and in meeting various targets of the 2030 Agenda. Yet while prevailing issues present challenges, they also bring opportunities for countries to address children’s rights, such as in the area of technological advancements and climate action.

This chapter is divided into four sections that together describe some of the remaining challenges, prevailing issues and opportunities to further advance child rights in ASEAN. It is important to acknowledge that this narrative is not complete, as it does not address or reference every relevant issue. Instead, it aims to raise and reflect on certain critical issues affecting the state of children in ASEAN.

3.1. Child rights for all

Implementation of the CRC, CEDAW and CRPD requires that every child has the right to be regarded first and foremost as a child regardless of her/his socio-economic status, ethnicity, race, religion, gender, ability, geography or migration of her/his parents/legal guardian. This principle of non-discrimination is not only integral to the CRC, CEDAW and CRPD but sits at the heart of the ASEAN Charter.188

Despite the region’s tremendous economic growth over the past 30 years and the improved outcomes for millions of children in terms of survival, nutrition, education, protection from violence and so on, where disaggregated data exist, they reveal persisting disparities in the enjoyment of rights and services between different groups of children.

The leaders of ASEAN member States have demonstrated awareness and concern about inequities in the region, taking some important steps to reduce disparities. For example, the ASEAN Enabling Masterplan 2025 on Mainstreaming the Rights of Persons with Disabilities recognizes the discrimination

188 ASEAN Charter, Article 2(2)(l): States will act in accordance with the principle of: “respect for the different cultures, languages and religions of the peoples of ASEAN, while emphasizing their common values in the spirit of unity in diversity.”
experienced by children with disabilities and reaffirms the provisions and status of the CRPD. This Master Plan has been accompanied by efforts in several ASEAN States, including Cambodia, Myanmar, Thailand and Viet Nam, to improve data collection in relation to children with disabilities. Improved collection, collation and analysis of data that are disaggregated by disability, as by other demographic indicators, is an essential tool in building greater awareness, understanding and accountability of the situation for all children in ASEAN.

As ASEAN member States face up to the challenges of combating discrimination and inequity, it is important to recall the words of ASEAN leaders in relation to education in their 2016 Declaration on Strengthening Education for Out-of-School Children and Youth and the 2013 Declaration on the Elimination of All Forms of Violence Against Women and Elimination of Violence Against Children in ASEAN (emphasis added):

The 2016 Declaration on Strengthening Education for Out-of-School Children and Youth states:

3. In affirming that it is the primary responsibility of the Government of every ASEAN Member State to implement the rights to education, we strive to adopt comprehensive measures, including, among others, legislation, policies and related action plans to ensure the following:

a) Education based on inclusivity (inclusive education) in accordance with the CRC, the CEDAW and the CRPD, complemented by realization of the goals set by the Education 2030 Framework for Action and SDGs, to strengthen the educational system for children and youth, including OOSCY, bearing in mind the challenges of gender, geography, ethnicity, diversity, poverty, migration, status and statelessness, language, marginalization, disability, emergency (such as conflict and natural disaster) and vulnerability;

b) Accessibility to the educational system and access by children and youth to education, their retention in education, and their completion of education, with view of advancing their education at other levels, based on key principles stated;

c) Development and implementation of operational guidelines and action plans, including the promotion of awareness of ASEAN as a caring and sharing community and as a people-centred and people-oriented region.

The Declaration on the Elimination of All Forms of Violence Against Women and Elimination of Violence Against Children in ASEAN states:

ACKNOWLEDGING the importance of intensifying efforts of ASEAN Member States to promote the rights of women and children, as well as to prevent and protect them from and respond to all forms of violence, abuse and exploitation of women and children particularly for those who are in vulnerable situations, including domestic violence, women and children who are sexually exploited, women and children with disabilities, women and children living with and affected by HIV and AIDS, women and children in conflict with laws, cyber pornography and cyber prostitution, trafficking in women and children, women and children in disasters, women and children in armed conflict, women and children in refugee camps, women and children on the move, stateless women and children, migrant women and children, women and children belonging to ethnic and/or indigenous groups, children in early marriage, physical abuse of children, bullying, discrimination against women and children in mass and social media, and others.

Children affected by migration

International and domestic migration and displacement are not new phenomena. They affect every country in the ASEAN region. According to UNICEF, based on international migrant stock:

- More international migrants move beyond the ASEAN region than within ASEAN
As of 2017, almost 21 million persons from the 10 ASEAN countries lived outside their country of birth (3.3 per cent of the total population). Of those, 7 million had moved within the ASEAN region and 14 million people had migrated beyond the ASEAN region. The bulk of these emigrants with destinations beyond the region had gone to other Asian countries (6 million, 42 per cent) and to North America (5 million, 37 per cent).

- **As of 2017, one in eight international migrants in ASEAN countries was a child.** This means that there are 1.2 million international child migrants in ASEAN.
- **Around half of the 1.5 million refugees from ASEAN countries are children.** At the end of 2018, 1.5 million refugees originated from ASEAN countries – 670,000 more than two years previous.
- **An estimated 2 million children in the ASEAN region were internally displaced due to natural disasters in 2018.** In total, more than 5 million persons were newly displaced in the ASEAN region due to natural disasters in 2018, 36 per cent of them estimated to be children.189

As noted earlier in this report, the ASEAN Declaration on Strengthening Education for Out-of-School Children and Youth is an example of the commitment by ASEAN to protect the rights of children who are migrants. This is supported by additional ASEAN instruments, including the ASEAN Consensus on the Protection and Promotion of the Rights of Migrant Workers, the ASEAN Regional Plan of Action on the Elimination of Violence against Children, specifically its provision to review/strengthen protective policies and measures for stateless, migrant and asylum-seeking children who are victims of violence, the ASEAN Convention on the Trafficking of Persons, Especially Women and Children, and the ASEAN Plan of Action Against Trafficking in Persons, Especially Women and Children. All of these establish the framework for ASEAN member States to respect, protect and fulfill the rights of children affected by migration.

An increasing number of ASEAN member States are developing national regulations and policies to protect children on the move who are unaccompanied or separated, those living in a situation of statelessness, children who have become victims of trafficking, children living with HIV and children with disabilities, among others. Specific measures to protect children affected by migration should include protection of rights and provision of services to support development without discrimination; assistance to children who are victims of trafficking; child-friendly border management; measures to support birth registration of children on the move; and efforts to develop alternatives to immigration detention and other forms of deprivation of liberty.

**Gender equality**

All children living in ASEAN countries have the right to protection from discrimination, including based on their sex and/or gender.190 Despite this, gender inequalities remain a challenge in the region. These particularly pertain, but are not limited to, girls who suffer from risks of forced and early marriage, female genital mutilation/cutting, adolescent pregnancy and sex-selection before birth. ASEAN member States have taken strides towards eliminating gender-based violence against children through the Regional Plan of Action on the Elimination of Violence Against Children (2017). Their actions have included amendments to national laws relating to violence against children, strengthening coordination mechanisms and raising public awareness of child rights and violence against children. Gender inequities and gender norm challenges in ASEAN include:

- **Health:** Boys have a higher risk of committing suicide and may engage in riskier behaviours such as smoking and drinking alcohol. Death by suicide was more common for boys than for girls in Cambodia, Indonesia, Lao PDR, Malaysia, Philippines, Thailand and Viet Nam (but no more common in Myanmar).191

  - **Education:** Girls’ and boys’ attendance and completion of education reflects a ‘cycle of gender inequality’. Boys may be more likely to drop out of school earlier than girls because they can then enter paid employment, depriving them of the opportunity of higher education; however, even though girls remain in education for longer, they are less likely to be in employment, education or training.192

  - **Child marriage:** Early marriage of girls aged under 18 and even under 15 years remains an issue across most ASEAN member States for which data are available.193

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189 UNICEF’s analysis based on Migrant Stock 2019 (number of children estimated by UNICEF based on the age structure of the national population).
190 E.g., Convention on the Rights of the Child, Article 2.
192 Ibid., p. 82.
• **Employment:** Women and girls from the age of 15 are known to earn less than men in the seven ASEAN member States for which data are available, which has a negative impact on household financial stability and resiliency.¹⁹⁴

• **Sexual or Gender Identity:** Children who identify or are perceived to identify with different sexual or gender identities to the norm are at heightened risk of discrimination, stigma, peer bullying and violence.¹⁹⁵

Many disparities can be traced back to harmful social norms, including, for example, the double burden on women of fulfilling gender roles in the home without sufficient support in the workplace or norms that “support violence and risk taking and discourage weakness, emotional expression and help-seeking, [and] are likely to contribute to the disproportionate burden of injury and suicide borne by adolescent boys.”¹⁹⁶ Responding to these gender inequities falls within the remit and requirements of the SDG 2030 drive to leave no one behind.

### 3.2. Early moments matter

Care, support and protection in the early years is crucial to ensuring childhood survival during and beyond the first 1,000 days and in the first 10 years of a child’s life. States’ efforts to give all children the best possible start in life should include protection of maternal, newborn and child health; preventative and curative nutrition services; positive parenting and responsive care; security and safety; investment in early childhood development (ECD); increasing access to and learning in pre-primary and primary education; and social protection schemes.¹⁹⁷

### Early childhood development

While the previous chapter identified several ways in which ASEAN member States have ensured that children survive and thrive through their early years and into later childhood, adolescence and adulthood, there are some areas linked to ECD in which additional progress is required. In General Comment No. 7 of the CRC, “Implementing child rights in early childhood,” the Committee urges States to identify the implications of the non-discrimination principle for realizing the rights in early childhood.¹⁹⁸ The Committee states that children are entitled to the care, nutrition, nurturing and encouragement – and children with disabilities require additional, special assistance – in order to ensure their integration and the realization of their rights.

Holistic ECD requires effective laws, policies, systems and programmes across health, nutrition, education, WASH and child and social protection. Within each of these sectors there remain areas of concern. Although many ASEAN member States have improved pre-primary enrolment rates, developmental inputs in households vary widely across the region, with just over 20 per cent of children in Malaysia receiving early learning support compared to over 90 per cent in Thailand.¹⁹⁹

Crucially, investment in ECD is known to be “one of the most cost efficient investments in human capital which leads to a country’s sustainable development… [t]he investment case is not only made with respect to financial returns but also to non-monetary returns such as a child’s well-being.”²⁰⁰

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¹⁹⁴ Gender Counts: A quantitative assessment of gender inequality, p. 37. The States for which data are available are: Cambodia, Indonesia, Lao PDR, Malaysia, Philippines, Thailand and Viet Nam.


¹⁹⁹ MICS and DHS; UNICEF estimate based on Malaysia’s National Health and Morbidity Survey 2016.
to returns but also with respect to the cost of inaction.\footnote{200}{United Nations Children’s Fund, ‘Evidence for ECD Investment’, updated July 2013, <www.unicef.org/earlychildhood/index_69851.html>, accessed 29 September 2019.} One study, for example, found that, based on results from 73 countries, the benefits of higher future earnings were between US$6.4 and US$17.6 per dollar invested.\footnote{201}{Ibid.; citing ‘Early Childhood Development in Developing Countries 2011’, The Lancet, September 2011.} Investment in ECD actions may be sector specific, or can include holistic approaches, such as in Thailand, where the National Early Childhood Development (ECD) Act covers early childhood education, health (starting from pregnancy), protection from violence, abuse and neglect, social protection, parenting and nutrition. Other ASEAN member States have also made investments in ECD. In Indonesia, the Presidential Regulation on Holistic, Integrated Early Childhood Development issued in 2013 has guided multisectoral approaches to young children’s balanced development, including health, nutrition, education and protection. Investment in quality childhood education is also essential, and it is this understanding that underpins the ASEAN Early Childhood Care, Development and Education Quality Standards 2017, which provide a blueprint for member States to ensure that ECD provision is safe, reliable and of good quality.\footnote{202}{ASEAN Early Childhood Care, Development and Education Quality Standards, 2017, <https://asean.org/wp-content/uploads/2017/03/ASEAN-ECCDE-Quality-Standards-Final.pdf>, accessed 29 September 2019.}

Across ASEAN, more children today enter primary school ready to learn than 10 years ago, thanks to impressive commitments from governments, UNICEF, UNESCO, and multiple partners to expand access to pre-primary education. The most recent pre-primary enrolment data have resulted in a new generation of research questions around how to craft quality early learning programmes, such as identifying appropriate pre-primary workforce development, improving learning inside the classroom and responding to the unique needs of children with disabilities. ASEAN member States are now tasked with identifying children who are not developing on track,\footnote{203}{Sustainable Development Goal (SDG) 4.1.1: Proportion of children under age 5 years who are developmentally on track in health, learning and psychosocial well-being.} which will require implementing a national system for screening children for developmental delays.

Many ASEAN member States have started to reflect on the creation of an ASEAN Child Development Index to serve as the basis for supporting children’s growth and development across a range of settings. Convened by the Malaysian Government and informed by UNICEF and multiple ASEAN countries, a new commitment has emerged to track the progress of young children and how to support the families of young children.

**Positive parenting**

The CRC Committee in its General Comment No. 7 on implementing child rights in early childhood suggests that indicators and benchmarks should be used by States to monitor the realization of child rights in early childhood.\footnote{204}{United Nations, Committee on the Rights of the Child, General Comment No. 7: Implementing child rights in early childhood, CRC/C/GC/7/Rev.1, 2006, para. 39.} In line with commitments made within the ASEAN Guidelines For a Non-Violent Approach To Nurture, Care And Development Of Children In All Settings, the Declaration on the Elimination of All Forms of Violence Against Women and the Elimination of All Forms of Violence Against Children, Indonesia, the Philippines and Thailand are reported to have committed to full prohibition of corporal punishment within their legal frameworks.\footnote{205}{Global Initiative to End All Corporal Punishment of Children, ‘States committed to law reform’, <https://endcorporalpunishment.org/committed-states>, accessed 29 September 2019.}

Awareness raising and capacity building of parents and carers in positive parenting and care methods is an important step in meeting CRC Article 19 obligations and SDG target 16.2: End abuse, exploitation, trafficking and all forms of violence and torture against children.

The rejection of violent discipline, which is a central tenet of positive parenting, has public health and economic advantages: “Research by East Asian neuroscientists found that both verbal/emotional abuse and harsh forms of physical punishment cause visible damage to children’s brains and can impact development. The annual cost of violence against children due to its public health consequences is estimated at 2 per cent of the gross domestic product of the region, with emotional abuse cost an estimated US$65.9 billion each year.”\footnote{206}{United Nations Children’s Fund, *Early Moments Matter – East Asia and the Pacific*, UNICEF EAPRO, Bangkok, 2018, p. 8, <www.unicef.org/eap/media/2496/file/early%20moments.pdf>, accessed 29 September 2019.} In addition to this economic argument, there is robust evidence from the
neurological and development sciences that children who grow up in caring and positive home environments have greater well-being and health, and better cognitive, developmental and educational outcomes.  

Data on violent discipline – available for Lao PDR, Malaysia, Myanmar, Thailand and Viet Nam – suggest that violent discipline practices remain an issue across the region, although these data refer to children aged up to 14. According to these data, nearly 70 per cent of children aged 0–14 report experiencing violent discipline of some sort in Lao PDR and Viet Nam, with over 70 per cent of children aged 0–14 experiencing violent discipline in Malaysia, Myanmar and Thailand. Only Lao PDR evidences a decrease in the number of adults holding the view that physical punishment is necessary to raise and educate children, along with a decrease in the number of children experiencing physical punishment.

The ASEAN Guidelines provide an important opportunity for member States to support positive parenting. For example, Cambodia’s Ministry of Women’s Affairs has developed a Positive Parenting Strategy 2017–2021 based on the Guidelines and has rolled out a parenting toolkit in 8 provinces. Teacher training manuals on positive discipline and effective classroom management were also approved by the Ministry of Education, Youth and Sports and rolled out from 2015.

3.3. Safe and sustainable environments

Children have the right to a clean, safe and sustainable environment under Article 24 of the CRC. This right is crucial to their development and their enjoyment of many other rights. In ASEAN, this right is vulnerable to the effects of the climate crisis, environmental degradation and disaster risks. Children’s safety and security is also strained by challenges due to increasing urbanization and ensuring that the rights to adequate access to shelter, healthcare, education and WASH are met. Within the ASEAN region, millions of children lack a nationality (are stateless), or remain out of the country of their birth as migrants, asylum-seekers or refugees as a result of political unrest or natural disasters, which further threatens their right to a safe and sustainable environment.

Disaster risks, the climate crisis and environmental degradation

Climate-related disasters impact all aspects of a child’s life. Homes, schools, hospitals and other buildings may be damaged in a disaster and can become inaccessible or unsafe. Road infrastructure, water and sewage systems, electricity and gas supplies are often disrupted, with consequent impacts on quality of life and economic activity. Agricultural lands are often affected.
leading to food insecurity and malnutrition,\(^{211}\) from which infant mortality rates are likely to increase.\(^{212}\) Attempts to access services, or just carry on with daily life, can incur risks of psychological and emotional harm or trauma,\(^{213}\) physical injury, illness and suffering through contagious diseases or as a result of exposure to risk. It is well known and understood within the ASEAN region that the climate crisis is likely to exacerbate these impacts by increasing the frequency and intensity of weather-related disaster events.

Climate crisis-related risks heighten existing vulnerabilities and disparities among the most disadvantaged ethnic minority communities, families and children. Many of the most severely affected geographical areas are already underdeveloped. The climate crisis worsens existing inequities and deprivations are often perpetuated by repeated, cumulative and intense effects of natural disasters, potentially jeopardizing hard-earned development gains. In 2017 and 2018, ASEAN reported the following impact of natural disasters:

<table>
<thead>
<tr>
<th>Year</th>
<th>Affected population</th>
<th>Affected families</th>
<th>Displaced persons</th>
<th>Estimated cost of damages</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>10,071,075</td>
<td>5,275,379</td>
<td>1,186,964</td>
<td>US$1.00 Billion</td>
</tr>
<tr>
<td>2018</td>
<td>27,164,685</td>
<td>3,446,472</td>
<td>1,750,072</td>
<td>US$1.29 Billion</td>
</tr>
</tbody>
</table>

Source: 2019 ASEAN DM Handbook\(^{214}\)

The impact of environmental degradation is a further, extremely concerning emerging issue. High impact environmental degradation issues in the region include air pollution, waste management, plastic pollution and pesticide leaching.\(^{215}\) Environmental degradation affects livelihoods, food security and economic opportunities and shapes internal and international migration patterns, all affecting children. Air and water pollution are also direct and indirect causes of ill-health and malnutrition and can also contribute to a rise in child mortality. Data for eight ASEAN member States show that thousands of under-five deaths can be attributed to the effects of household and ambient air pollution each year.\(^{216}\)

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Many ASEAN member States rank among the most vulnerable globally to impacts from climate change, with the ASEAN Cooperation on Environment reporting that the region contains six of the world’s 20 most at-risk nations: Indonesia, Malaysia, Myanmar, the Philippines, Thailand and Viet Nam. The Asia-Pacific region is acknowledged to be particularly vulnerable to the climate crisis. The Asian Development Bank has noted that: “unabated warming could significantly undo previous achievements of economic development and improvements of living standards.” Disaster risks in ASEAN include, but are not limited to, flooding in Cambodia, Lao PDR, Thailand and Viet Nam, tropical cyclones in Myanmar and the Philippines and drought in the Philippines, Thailand and Viet Nam. Climate change can have adverse impacts on the livelihoods of communities and there is a need for coordination in adaptation and capacity building efforts to build resilience against its impacts in the region.

Over the past 30 years, ASEAN member States have strategically increased their capacity to respond to disasters amid growing disaster risk and climate change. In 2005, ASEAN endorsed the ASEAN Agreement on Disaster Management and Emergency Response, an Agreement led by the ASEAN Coordinating Centre for Humanitarian Assistance on Disaster Management and the ASEAN Committee on Disaster Management.

In addition to the hazards posed by the climate crisis and natural disasters, children’s rights in ASEAN are at major risk of harm from air, water and other environmental pollution. In response to these concerns, ASEAN has endorsed:

• The Declaration on ASEAN Post 2015 Environmental Sustainability and Climate Change Agenda (2015)
• The ASEAN Joint Statement on Climate Change (2015)
• The ASEAN Declaration on Environmental Sustainability (2007)
• The ASEAN Agreement on Transboundary Haze Pollution (2002)

The 2012 ASEAN Safe Schools Initiative demonstrates awareness and commitment to addressing the intersect between child rights and the environment. It is a “partnership between the ASEAN Member States and civil society organisations to promote a comprehensive approach for school safety in the region so that children in South-East Asia become more resilient to disasters and have a safe and secure learning environment.” Examples of activities within the initiative include student-led risk assessments, school drills for emergency preparedness, comprehensive safety assessments and the development of disaster risk reduction handbooks for schools.

In addition to this standalone initiative, ASEAN is taking into account environmental issues in policies that relate to a sustainable future for children. For example, the ASEAN Declaration on Strengthening Education for Out-of-school Children and Youth affirms the rights of the most vulnerable groups of children, including those displaced or made more vulnerable as a result of emergencies, including the climate crisis and natural disasters.

**Children in urban settings**

Rapid urbanization has been an important transformative force in the region that has had an impact on the ability of ASEAN member States to work towards securing the rights of children and meeting the 2030 SDGs, particularly around the call to “leave no one behind.”

Data regularly show that on average, compared to their rural peers, urban children have access to better essential services such as healthcare and education, water and sanitation, and energy. This is due to factors associated with the so-called ‘urban advantage’. On average, urban households earn higher incomes, benefit from improved infrastructure, have better education and reside in closer proximity to services. A closer look at the evidence, however, suggests that not all urban children are benefiting equally, and that the urban advantage for children is perhaps an overgeneralization. While urban residents on average enjoy better access to services

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219 Ibid.
221 Ibid.
222 Association of Southeast Asian Countries, ASEAN Safe Schools Initiative: A Compilation of Case Studies, 2015, p. 2.
and opportunities, a substantial part of the urban population is being left behind. Intra-urban disparities can be so large that many of the most disadvantaged children in urban areas fare worse than children in rural areas.224

Since passage of the CRC, ASEAN has experienced a growth in urban populations. The result is a reduction in the population, labour force and income and investment in rural areas, while urban (and, increasingly, semi-urban and industrialized) areas face a growing population with inadequate infrastructure to support it. Handling this increased urbanization is challenging, but failing to improve urban conditions can leave children in urban locations without access to basic services such as healthcare, education or a safe and healthy environment and at higher risk of road traffic accidents, pollution and mental health concerns.

The challenge of children without access to adequate shelter has been an ongoing and growing concern in ASEAN. Data from Indonesia, Thailand, Viet Nam, Lao PDR, the Philippines, Myanmar and Cambodia show that from just above 20 per cent (Indonesia) to more than 50 per cent (Cambodia) of the urban population was living in slums in 2014.225 The risks to children of living in urban slums are numerous and include insecure housing, limited water and sewage infrastructure and increased risk of disease. There are indications, nevertheless, that slum populations are decreasing in some regions of ASEAN: In Lao PDR, the proportion of the urban population living in slums dropped by half from 2005 to 2014, and decreases were also seen in Cambodia, Mongolia and Viet Nam.226

Poverty, previously predominantly a rural phenomenon, is becoming increasingly urban. As more and more children live in cities and towns, it is becoming increasingly critical to understand the prevalence of the urban paradox and the extent to which it is masked by the narrative of the urban advantage.

It will be important to continue strengthening the direct engagement with children in order to understand the unique vulnerabilities they face, as well as the spatial, social and economic barriers that prevent them from accessing services. Furthermore, in order to align with the principles of the CRC, it will be important to expand the availability of data and evidence on urban children, reduce equity gaps through technical exchanges and partnerships, promote safe and sustainable urban environments, adopt urban planning and budgeting for children and enhance the voice and meaningful participation of children and adolescents, as key policy and programmatic priorities for children living in urban settings in the region.227

Safely managed water, sanitation and hygiene

Water, sanitation and hygiene are undoubtedly under increasing threat as a result of disaster risks, the climate crisis and environmental degradation. While 94 per cent of the ASEAN population now has access to at least basic drinking water facilities, 49 per cent of schools in the region remain without a basic water supply. Similarly, while just 7.9 per cent of the ASEAN population now practices open defecation,228 55 per cent of schools in the region lack basic sanitation.229 This calls for increased attention and investment from ASEAN member States to provide universal WASH coverage in all schools to promote improved learning environments and ensure access to child, gender and disabled-friendly WASH facilities with menstrual hygiene management services, particularly for adolescent girls.

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225 UN Habitat Estimates.
226 Ibid.
228 Towards leaving no one behind: Sanitation and Water for All, 5th Meeting of the ASEAN Health Cluster, Luang Prabang, 22 March 2019.
229 Ibid.
The lack of data collection around safely managed water and safely managed sanitation (especially around safe containment, transportation and treatment of sludge) makes tracking progress in WASH an additional challenge. Moreover, a lack of WASH services in healthcare facilities not only compromises patient safety and dignity, it also has the potential to exacerbate the spread of antimicrobial-resistant infections and undermines efforts to improve child and maternal health. Limited data on and monitoring of WASH services in healthcare facilities requires more urgent attention from ASEAN member States. Additionally, given the ASEAN region’s present and projected environmental challenges due to increased disasters, continued efforts to further progress by developing resilient infrastructure for access to safely managed WASH remain an important need.

3.4. Adolescents’ potential unleashed

With half of its 630 million population under the age of 30, ASEAN has the vital human capital to embrace the challenges of the 4.0 economy, making a tremendous resource in which to invest. As the region’s brain trust, young people understand what the rapid transformations in technology, digitization, urbanization, and climate change mean for their lives today and in the future. The active engagement of young people in creating and revitalizing systems and structures, especially within the education sector (in its formal and informal forms) can go a long way towards promoting active learning, engagement and empowerment.

While this presents a significant opportunity, ASEAN member States face continuing and emerging concerns in securing the rights of adolescents. Service provision for all children must be based on reliable data and acknowledge the various challenges and emerging issues that are linked to adolescence, ensuring greater diversity of services, including, for example, education, skills training and services for adolescents who are not in school, as well as platforms for meaningful participation.

Development of 21st century skills

Twenty-first century skills are those skills needed to ‘succeed’ in today’s world. These include skills and knowledge relating to critical thinking, research, creativity, initiative, technological and scientific literacy and health and wellness literacy.230 Twenty-first century skills include skills with an obvious connection to potential employability, such as digital literacy, and well-being skills, which are essential to insulating adolescents and young people from mental health concerns and other NCDs. While several of these skills are particularly useful in adolescence and youth, skills development starts during the early years when ‘foundational skills’ are also being developed.

As noted in Chapter 2, ASEAN member States have made great strides in increasing access to and participation in primary education, and all have developed national learning assessment systems. However, further development within the education sectors across the ASEAN region is now necessary to guarantee that schools meet 21st century skills requirements to ensure robust intersections between education and learning and the demands of the labour market.231 Investment in education and 21st century skills will be particularly important to maintaining ASEAN’s economic performance throughout and beyond the ‘fourth industrial revolution’,232 particularly so that adolescents are able to participate in progressively digital economies and in the context of increasingly advanced technologies.

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Adolescent pregnancy and early marriage

ASEAN member States face complexity around the best approaches to reducing adolescent pregnancy, with teen pregnancy rates in some ASEAN countries remaining high.\(^{233}\) Similar to the global trend, the prevalence of child marriage and early unions in Southeast Asia also remains high. Indicatively, the percentage of women aged 20 to 24 who were married or in union before 18 ranges from 35.4 per cent in Lao PDR to 17 per cent in Indonesia and 11 per cent in Viet Nam. This is aggravated by the ensuing adolescent birth rate of 47 births per 1,000 females aged 15 to 19 in the region; this is only slightly below the global average of 50 births.\(^{234}\)

There are a number of potential reasons for this, including gaps in sexual and reproductive health services and education. Unintended teenage pregnancy can lead to unintended marriages and to young mothers being excluded from education. Furthermore, it places adolescent mothers at risk during pregnancy and childbirth. Gaps in health education and service provision may increase the transmission of HIV and other sexually transmitted infections and make children vulnerable to the emotional and psychological impacts of engaging in sexual relationships without access to support. Without adequate support, young mothers might not be able to provide the best care (during pregnancy and beyond) to their babies. This deprives their children of the best start in life and is just one manifestation of how the cycle of inequities can be perpetuated.

Figure 41: Women aged 20–24 who were first married before ages 15 or 18, 2011–2016 (%), ASEAN member States

It is important to recognize the factor of agency, or lack of it, among adolescent girls and boys when facing the gender inequality and cultural factors that may result in child marriage and teenage pregnancy. The challenge, therefore, is for ASEAN member States to address these drivers and protect the rights of children without employing a ‘one-size-fits-all’ approach.\(^{235}\)

Safe space for participation, creativity and self-expression

Children’s participation rights are enshrined in Article 12 of the CRC. These rights are an underpinning principle of the Convention and are confirmed and reaffirmed in respect of adolescents in particular within General Comment 20 of the CRC Committee “on the implementation of the rights of the child during adolescence”. Where adolescents are empowered to form their own opinions and express themselves, to speak and have their voices heard, this upholds their rights and helps to promote their engagement in society. This is particularly important in relation to vulnerable and marginalized groups. Engagement of adolescents is also highly beneficial to societies, and not just because the adolescents of today are the leaders of tomorrow. Adolescents have demonstrated valuable insights into the planning and design of cities, programmes and policies, and

\(^{233}\) Gender Counts: A quantitative assessment of gender inequality, p. xv.


have helped to shape debates, for example in relation to the climate crisis, worldwide. Furthermore, as ‘digital natives’, adolescents are often better equipped with and better informed about the skills and information that will need to succeed in the hyper technological context of the future.

In order to facilitate children’s, and in particular adolescents’, meaningful participation in society, States need to create safe spaces in which young people can build their skills, form and express their views, develop their creativity and contribute to society’s development. Meaningful participation for adolescents includes four areas: voice, space, audience and influence. The latter two require an enabling environment for adolescents. In other words, policy makers, teachers and parents need to be responsive to adolescent participation, to acknowledge and respect adolescent voices and to act on their views where appropriate.

In Lao PDR, child participation is one of the most important pillars for the celebration of the 30th anniversary of the CRC. From April to May 2019, three youth consultations were organized in Bokeo, Savannakhet and Vientiane Capital to listen to children’s voices from the northern, southern and central parts of the country. A total of 126 children between the ages of 11 and 18 from all 18 provinces shared children’s opinions on their own rights with decision makers. The child representatives shared their visions for Lao PDR in 2030 and raised concerns over unsatisfactory education quality, deforestation and violence in family and schools. They proposed solutions, including the launch of an anti-bullying campaign on social media, starting up student societies to raise funds for social causes and creating a ‘trash bank’ to promote a recycling lifestyle.

The ASEAN Children’s Forum is another example of the positive participation of children. The First ASEAN Children’s Forum was held from 19 to 22 October 2010 in the Philippines. Since then, the Forum has taken place every two years, with the most recent and Fifth Forum taking place in Brunei Darussalam in 2018. This meeting focused on four key topics: peace, respect for all, care for the environment and healthy lifestyle.

As per its terms of reference, the ASEAN Children’s Forum serves as the regional voice of children through girls and boys expressing their views and pursuing aspirations on issues affecting their lives and in which they show interest, as well as through cooperating and working together towards contributing to regional development. In addition, the Forum sets out to serve as a venue to promote mutual respect for different cultures and build friendships and common understanding among children from ASEAN member States, promote greater awareness of ASEAN among children, advocate for children’s rights in the region and enhance the capabilities of children as leaders and representatives of their generation.

**Protection in the online world**

As well as marking the 30th anniversary of the CRC, 2019 is also the 30th anniversary of the start of the World Wide Web. The internet presents tremendous economic, educational and creative opportunities for children throughout the world and is increasingly integrated into children’s lives. The internet and social media provide learning and developmental resources for young people to communicate and interact with a global community on any number of issues. In 2017, over 70 per cent of young people aged 15–24 worldwide reported they had accessed the internet in the previous three months, with similar figures for the Asia-Pacific region.

Along with incredible opportunities, the vast changes technology has brought to our daily lives also raise some important protection concerns for children. The digital world has facilitated various kinds of exploitation and abuse of children and has created unintended and unforeseen consequences such as breaches of privacy, the use of algorithms to monitor children’s behaviour and manipulation through advertising. Online exploitation and abuse of children occurs across all age groups, often taking on different dynamics and forms depending on the child’s age or other circumstances, and is facilitated by the borderless nature of the online world.
Adolescent participation in the online world presents a difficult balance. Children and adolescents need access to the internet so that they can capitalize on the potential of modern technology and develop the requisite 21st century skills. At the same time, ASEAN member States have an obligation to protect adolescents (and help them learn how to navigate online information and manage risks themselves) from the documented harms of the online world. ASEAN member States have recognized the challenge, and the ACWC together with the Senior Officials Meeting on Social Welfare and Development have led the drafting process of a declaration to protect children in cyberspace. This declaration aims to protect children from all forms of online sexual exploitation and abuse through: prioritizing measures and actions, including comprehensive national frameworks; enhanced law enforcement and professional responses; effective victim-centric, rights-based and gender-responsive child protection and support services, social welfare programmes and accountability mechanisms; and awareness raising nationally and in schools and through enhanced engagement with the private sector. Moreover, the ASEAN Inter-Parliamentary Assembly led an initiative to strengthen the legal frameworks in the region to prevent child sexual exploitation in travel and tourism, including the online aspects. The ASEAN Inter-Parliamentary Assembly, with the support of ECPAT International, UNICEF and the International Centre for Missing and Exploited Children, developed a legal checklist that will be used by parliamentarians in the region to advocate for better legal protections for children.

Brunei Darussalam was the first ASEAN member State to establish a child online protection framework. This framework is built upon the International Telecommunications Union’s Child Online Protection Initiative. Brunei Darussalam’s legislative framework (in particular the Penal Code Amendment Order 2012) is “among the most comprehensive and up-to-date codes in the region” in terms of protection of children online.

While children across the globe use social media to connect with their friends, these and other web-based platforms are known to facilitate growing threats of bullying and violence. Data show that many adolescents in ASEAN experience bullying in general at school, which elevates concerns over online bullying for the ASEAN member States.

**Figure 42: Percentage of students aged 13 to 15 who reported bullying at least once within the last 30 days (latest data available), ASEAN member States**

![Percentage of students aged 13 to 15 who reported bullying at least once within the last 30 days (latest data available), ASEAN member States](image_url)

**Source:** Global School-based Student Health Surveys

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238 Ibid.
CHAPTER 4
The future for children and adolescents in ASEAN depends on member States’ ability to continue the progress highlighted in Chapter 2 and to address the remaining challenges and emerging issues set out in Chapter 3. To do this means meeting their obligations under the CRC, CEDAW and other international agreements, and accelerating achievement of the SDG 2030 Agenda, particularly the objectives focused on children. This report has reflected on those obligations as well as the numerous ASEAN conventions, declarations, guidelines and plans of action through which ASEAN has sought to realize the rights of children.

Achieving the SDGs will require the ability to measure progress against all 230 indicators that ASEAN member States have agreed to use to monitor achievement of the 17 goals and 169 targets. Monitoring the implementation of and compliance with the CRC, CEDAW, CRPD and all ASEAN-wide instruments as well as national documents also requires systematic data collection, synthesis and analysis to ensure availability of data and evidence on child rights. One of the key gaps that needs to be addressed is the lack of disaggregated data on children from many vulnerable groups that would allow a complete picture of progress across the ASEAN member States in line with the SDGs.

The following are some key ways in which ASEAN member States can capitalize on their achievements, address remaining challenges and emerging issues and leverage new opportunities, while pursuing interests and issues to which they have already committed.

### 4.1. Reinforce regional systems and cross-border collaboration

a. ASEAN should continue to reinforce regional systems and cross-border collaboration to realize children’s rights, for example, in the protection of children from trafficking, forced/arranged child marriage and female genital mutilation/cutting; by supporting the rights of children affected by migration and displacement; and through regional responses to the climate crisis and disaster events. This includes strengthening collaboration and partnerships with civil society to expand opportunities for children.

b. ASEAN should continue to work closely with UNICEF and other United Nations and intergovernmental bodies to; pursue regional instruments, to develop and/or reinforce policy and to co-design planning documents that promote implementation of member States’ international child rights commitments.

c. Recognizing that the private sector is playing an increasingly active role in development, ASEAN member States are encouraged to strengthen their collaboration with and leverage the power of private sector partners to improve the lives of children in the region, harnessing their core businesses and innovation while safeguarding against possible conflicts of interest.

### 4.2. Leave no child behind

a. ASEAN member States should address the fulfilment of the rights of all children and pay attention to groups who are systematically excluded. These include children from extremely poor households, remote rural areas, urban informal settlements, ethno-linguistic minority groups, indigenous peoples, unaccompanied or separated children, migrants, refugees, undocumented and stateless populations, children with disabilities, LGBTI children and those affected and/or prone to humanitarian situations.
b. To ensure that no children are left behind, ASEAN member States should accelerate efforts to remove barriers that hinder equity, inclusion and quality across all child rights sectors by generating data and evidence to address causes of exclusion, utilizing evidence as well as mobilizing political will, partnership and resources with civil society and the private sector.

c. Disparities in access to quality services remain a problem and place millions of children in poorer conditions than their counterparts. There is a need to conduct budget analyses and develop costed policies and implementation plans to address disparities.

4.3. Achieve gender equality

a. ASEAN member States are encouraged to undertake a robust gender analysis in their plans of action and implement gender-responsive laws and policies as part of its commitment to achieve gender equality and empowerment of women and girls as enshrined in ASEAN Vision 2025.

b. In order for policies, action plans and commitments related to gender equality and empowerment of women and girls to be operationalized, ASEAN member States are encouraged to ensure clear costing, budgeting, and allocation of funds as well as undertake assessments of impact of the investments.

c. As already committed in the ASEAN Regional Plan of Action on Elimination of Violence against Women and ASEAN Regional Plan of Action on Elimination of Violence against Children, ASEAN member States are encouraged to actively work to eliminate all prejudices and practices based on gender stereotypes roles for men and women, girls and boys including opportunities for redistribution of unpaid care work; access to resources and decision-making; rights to sexual and reproductive health and bodily integrity, and; positive representation in mass and social media.

d. ASEAN member States should continue to prevent all forms of violence, abuse and exploitation against women and girls and children from diverse gender identities including strengthening national systems for protection, prevention, monitoring and response; building capacity to facilitate quality and respectful social welfare, judicial and other support services; and fostering an enabling environment for the participation of women and children, including victims/survivors of violence, in the response and prevention efforts as committed to in the ASEAN Regional Plan of Action on Elimination of Violence against Women and ASEAN Regional Plan of Action on Elimination of Violence against Children.

4.4. Ensure increased equal access to quality services

a. ASEAN member States should continue to develop and implement risk-informed multisectoral plans of action to ensure equal access to quality services. Access to services has increased dramatically over the last 30 years, but severe disparities remain in terms of quality of the services provided.

b. To ensure increased coverage of quality services for all children, ASEAN member States should continue to strengthen the health, food, education, WASH, child protection, social welfare and social protection systems in all domains such as human resource capacities, financing, information management, governance and legislation, and service delivery and supplies. This should also include the mainstreaming of cross-cutting areas such as nutrition and early childhood development in all applicable systems. Removing systemic and non-systemic barriers that hinder equity, inclusion and quality at all levels by utilizing evidence and mobilizing political support, partnership and adequate resourcing is critical.

c. Inter-sectoral coordination and collaboration for children, including systems for children and multisectoral strategies for ending violence against children, improving nutrition and promoting responsive caregiving, should continue to be strengthened and adequately resourced.
4.5. Strengthen and implement laws and policies

a. To meet their international obligations, ASEAN member States are encouraged to close legislative gaps by strengthening legal frameworks across all sectors, including, for example, by: to prevent all forms of violence against children in all settings, by securing gender-sensitive employment laws that support breastfeeding practices and child care; to prevent harmful traditional practices; through mandating that a proportion of budgets be invested in child/social sectors; legislating for universal health coverage with better WASH services in healthcare facilities; revising WASH standards, taking into account gender and disability concerns for schools, households, healthcare centres and work places; mandating school policies on food, nutrition, health and WASH; by adopting taxes on unhealthy products such as sugar-sweetened beverages, tobacco and alcohol; and regulating in relation to harmful practices against children such as advertising of breastmilk substitutes, unhealthy foods and beverages, tobacco and alcohol and ensuring front-pack warning labels.

b. ASEAN member States are encouraged to promote legislative and policy frameworks for child rights, including mechanisms to fully implement and enforce international laws protecting children's rights. ASEAN member States are encouraged to consider withdrawing any reservations or declarations in relation to the CRC and its optional protocols.

4.6. Leverage innovation and technology

a. The new technological landscape is changing the way that children, young people and adults connect. ASEAN member States should explore how best to use technology to promote actions that support children's rights, for example by developing applications for birth registration, awareness raising campaigns over social media, or delivering vaccines through drones.

b. When engaging with the community through technology, it is important for ASEAN member States to recall that many poorer people do not have access to new technologies, and allowances for this must be made, both in terms of assisting all groups to access new technologies and in ensuring that the lack of access does not exacerbate disparities.

c. Climate smart technology should be developed in order to address the climate crisis, while new technologies and industries should develop in ways that will not contribute to the crisis, will reduce the risks faced by the most vulnerable families and provide innovative solutions during humanitarian emergencies.

d. ASEAN member States are encouraged to address the gender digital divide as well as create child-friendly online content and access to information, including sexual and reproductive health information.

e. ASEAN member States should be cognisant of the degree to which technology companies are collecting and using data related to children. It is important for member States to ensure that all children's rights contained in the CRC are given equal weight and balanced in the online world as well as offline. This entails protecting them from harm, while also ensuring that their rights to privacy, access to information, participation and association and freedom of expression are not violated by either the State or the private sector.

4.7. Sustainable social and behaviour change

a. Addressing social norms that act as barriers to children's rights has been essential to ASEAN member States’ efforts to implement the CRC over the past 30 years and will determine their success in achieving the SDGs over the next decade. This requires engagement with children, young people and communities through multiple channels, including mass and social media, interpersonal communication, traditional and religious channels, community organizations and many others, to promote positive practices and social and behaviour change alongside the strengthening of laws and policies. This includes social norms relating to gender, as well as to other vulnerable groups, including children from extremely poor households, remote rural areas, urban informal settlements,
ethno-linguistic minority groups, indigenous peoples, unaccompanied or separated children, migrants, refugees, undocumented and stateless populations, children with disabilities, LGBTI children and those affected and/or prone to humanitarian situations.

b. ASEAN member States should promote and safeguard the rights of children and young people to express themselves, creating opportunities for young people to be responsible and engage governments with creative ideas and solutions in defining and designing policies on issues that are relevant for them as well as with opportunities that enhance their rights.

c. ASEAN member States should continue to advance community engagement, which can lead to social mobilization and empowerment of the community and enhance social accountability. This includes using community engagement to encourage communities throughout the region to reach full open defecation free status.

d. In order to ensure that children survive and thrive during childhood, ASEAN member States should promote integrated approaches to positive parenting and child rights across the life cycle, including supporting families’ ability to respond to children’s developmental needs and building awareness that violence against children is no longer a ‘private matter’ or an acceptable form of discipline.

4.8. Increase public financial resourcing/social investment

a. There is no evidence that the region’s economic growth generated equal growth in social investment for children. ASEAN member States are urged to reiterate their commitment to increase social investment, which is necessary to help alleviate child poverty and address the persisting challenge of multiple child deprivations. Moreover, the commitment to increasing investment in children will help support continued and future economic growth and progress towards implementation of the CRC and achievement of the SDG targets.

b. ASEAN member States should make publicly available detailed information on the effective mobilization of public resources for children.

c. Investment in children should be efficient and transparent and follow the principles of equitable resource allocation and accountability.

d. The strength of inter-ASEAN and United Nations-ASEAN collaboration provides ongoing opportunities to develop sustainable finance plans for the achievement of the SDGs, focusing on an equity-based approach to uphold the principle of ‘leaving no one behind’.

4.9. Strengthen data collection, analysis and use

a. Given the data gaps, particularly around disaggregated data, ASEAN member States are urged to strengthen data systems across all child rights sectors to strengthen monitoring. Investments are required for capacity building to collect, process, analyse, disseminate and use quality data. This includes, for example, improving the collection of data on the prevalence of violence against children, ensuring availability of sex-disaggregated data and improving the measurement of learning outcomes and the use of data on learning. It also includes data used in early warning systems for early actions and for children facing disaster risks. All data initiatives should ensure confidentiality and protection of individual child data, as well as national strengthening laws and policies for data handling and sharing.

b. ASEAN member States are encouraged to continue engaging in research across all child rights sectors to support greater understanding of needs and progress, and ASEAN is encouraged to support the documentation and sharing of lessons learned to inform policy reform and system-building efforts.

c. ASEAN member States are encouraged to improve measurement of outcomes and the use of data, including for monitoring and evaluation, to help fulfil children's rights across all sectors. This includes environmental and child health data, to help member States realize children's rights to a safe and healthy environment.
d. ASEAN member States and the Association are encouraged to continue their work to support the institutionalization of learning assessment systems such as the SEA-PLM, and the improvement and better use of education management information systems.

4.10. Accelerate child-sensitive climate actions

a. ASEAN member States are encouraged to accelerate climate actions to effectively address the effects of climate change and environmental hazards on children in the region, including global warming, transboundary pollution, limited safe water supply, biodiversity loss, chemicals and waste, and coastal environmental degradation.

b. ASEAN member States are encouraged to increase investment flows towards climate actions that protect children from the adverse impacts of climate change, including climate resilient health, education and WASH services.

c. ASEAN member States are encouraged to enhance public awareness and empower children and adolescents with the necessary knowledge and mechanisms to contribute to the design and implementation of child-sensitive climate change actions at local, national and regional levels.

d. ASEAN member States are encouraged to ensure that systems and social services are resilient to various shocks and stresses and are designed to support the most vulnerable and exposed children in times of crises (such as natural hazards, severe economic downturns or social tensions) by integrating child-specific rights into national disaster management laws and policies.
5. ANNEXES
### 5.1. CRC reservations/declarations

<table>
<thead>
<tr>
<th>Country</th>
<th>Details</th>
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<tbody>
<tr>
<td>Brunei Darussalam</td>
<td><strong>Reservation:</strong> The Government of Brunei Darussalam expresses its reservations on the provision of the said Convention which may be contrary to the Constitution of Brunei Darussalam and to the beliefs and principles of Islam, the state religion, and without prejudice to the generality of the said reservations, in particular expresses its reservations on Article 14, Article 20 paragraph 3, and Article 21 subparagraphs b,c,d and e of the Convention.</td>
</tr>
<tr>
<td>Cambodia</td>
<td>n/a</td>
</tr>
<tr>
<td>Indonesia</td>
<td>Withdrawn reservation</td>
</tr>
<tr>
<td>Lao PDR</td>
<td>n/a</td>
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</table>
| Malaysia         | **Reservation:** the Government of Malaysia accepts the provisions of the Convention on the Rights of the Child but expresses reservations with respect to articles 2, 7, 14, 28 paragraph 1(a) and 37, of the Convention and declares that the said provisions shall be applicable only if they are in conformity with the Constitution, national laws and national policies of the Government of Malaysia.  
**Declaration:** With respect to article 28 paragraph 1 (a) of the Convention, the Government of Malaysia wishes to declare that with the amendment to the Education Act 1996 in the year 2002, primary education in Malaysia is made compulsory. In addition, the Government of Malaysia provides monetary aids and other forms of assistance to those who are eligible. |
| Myanmar          | withdrawn reservation (articles 15 and 37)                             |
| Philippines      | n/a                                                                     |
| Singapore        | **Declarations:** (1) The republic of Singapore considers that a child’s rights as defined in the convention, in particular the rights defined in article 12 to 17, shall in accordance with articles 3 and 5 be exercised with respect for the authority of parents, schools and other person who are entrusted with the care of the child and in the best interest of the child and in accordance with customs, values and religions of Singapore’s multiracial and multireligious society regarding the place of the child within and outside the family.  
(2) the Republic of Singapore considers that articles 19 and 37 do not prohibit the application of any prevailing measures prescribed by law for maintaining law and order in the Republic of Singapore;  
measures and restrictions which are prescribed by law and which are necessary in the interests of national security, public safety, public order, the protection of public health or the protection of the rights and freedoms of others; or  
the judicious application of corporal punishment in the best interest of the child  
(3) The Constitution and the laws of the Republic of Singapore provide adequate protection and fundamental rights and liberties in the best interests of the child. The accession to the Convention by the Republic of Singapore does not imply the acceptance of obligations going beyond the limits prescribed by the Constitution of the Republic of Singapore nor the acceptance of any obligation to introduce any right beyond those prescribed under the Constitution. |
(4) Singapore is geographically one of the smallest independent countries in the world and one of the most densely populated. The Republic of Singapore accordingly reserves the right to apply such legislation and conditions concerning the entry into, stay in and departure from the Republic of Singapore of those who do not or who no longer have the right under the laws of the Republic of Singapore, to enter and remain in the Republic of Singapore, and to the acquisition and possession of citizenship, as it may deem necessary from time to time and in accordance with the laws of the Republic of Singapore.

(5) The employment legislation of the Republic of Singapore prohibits the employment of children below 12 years old and gives special protection to working children between the ages of 12 years and below the age of 16 years. The Republic of Singapore reserves the right to apply article 32 subject to such employment legislation.

(6) With respect to article 28.1(a), the Republic of Singapore-

does not consider itself bound by the requirement to make primary education compulsory because such a measure is unnecessary in our social context where in practice virtually all children attend primary school; and

(b) reserves the right to provide primary education free only to children who are citizens of Singapore.”

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<tr>
<th>Country</th>
<th>Reservation</th>
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<tbody>
<tr>
<td>Thailand</td>
<td>“The application of articles 22 of the Convention on the Rights of the Child shall be subject to the national laws, regulations and prevailing practices in Thailand.”</td>
</tr>
<tr>
<td>Viet Nam</td>
<td>n/a</td>
</tr>
</tbody>
</table>

5.2. CRC-OPAC reservations/declarations

**Brunei Darussalam**

Declaration: “Pursuant to Article 3 paragraph 2 of the Optional Protocol, the Government of Brunei Darussalam declares that, as stipulated in the Royal Brunei Armed Forces Act (Cap. 149), the minimum age of enlistment to the Royal Brunei Armed Forces and Reserve Regiment is 18 years and that enlistment is voluntary.”

**Cambodia**

Declaration: “According to Article 42 of the Law on the General Status of Royal Cambodian Armed Forces stipulated that the Cambodian citizen of either sex who has attained the age of 18 years should be permitted or recruited into the armed forces.

**Indonesia**

Declaration: The minimum age for voluntary recruitment into the Indonesian National Armed Forces is 18 years old. Further, Article 28, paragraph (1) d, of the Law Number 34 Year 2004 on the Indonesian National Armed Forces regulates that “at the time of inauguration as a soldier, he/she shall be 18 (eighteen) years old at the minimum”.

The recruitment of the member of the Indonesian National Armed Forces is genuinely voluntary. It is conducted openly and the public announcement is carried out by utilizing various means of communication and information technology. The recruitment requires, among others, birth certificate and proof of consent of parents or legal guardians, including for those who have aged 18 years.
<table>
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<tr>
<th>Country</th>
<th>Declaration</th>
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<tbody>
<tr>
<td>Lao PDR</td>
<td>“In accordance with the Law of the Lao People’s Democratic Republic, the minimum age at which it will permit voluntary recruitment into its national armed forces is 18 (eighteen). The law on obligations of national defense service stipulates in Article 13 that ‘all young men of Lao nationality between 18 (eighteen) and 28 (twenty-eight) years of age, having good health conditions, shall be obliged to serve for a short-term in national defense forces. In case of necessity, young women between 18 (eighteen) and 23 (twenty-three) years of age may also be called upon to serve for a short-term in national defense; and in Article 7 that following health check-up, there shall be a selection process at a district level to select voluntary recruits, with good health, into short-term defense services, according to the recruitment number officially set forth on a yearly basis.’ “</td>
</tr>
<tr>
<td>Malaysia</td>
<td>“Pursuant to article 3 paragraph 2 of the said Optional Protocol, the Government of Malaysia declares that the minimum age for a person to voluntarily enlist in its armed forces is at the age of seventeen and a half years. This enlistment shall be realised on the basis of deliberative consent of parents or guardians, upon the provision of full information regarding the general conditions of the engagement to be entered, and the production of a certified copy of an entry in the register of births verifying the enlistee’s age.”</td>
</tr>
<tr>
<td>Myanmar</td>
<td>“With reference to Article 3 (2) of the Optional Protocol, the Government of the Republic of the Union of Myanmar declares that citizens may freely present themselves for voluntary military service provided they have attained a minimum age of 18 years, whereas citizens above 16 and under 18 years of age may voluntarily join military academies and military vocational training courses, if furnished with the proof of their age and the prior written consent of their parents or guardians.”</td>
</tr>
<tr>
<td>Philippines</td>
<td>“1. The minimum age for voluntary recruitment into the Armed Forces of the Philippines is 18 years, except for training purposes whose duration shall have the students/cadets/trainees attain the majority age at the completion date; 2. There is no compulsory, forced or coerced recruitment into the Armed Forces of the Philippines; and, 3. Recruitment is exclusively on a voluntary basis.”</td>
</tr>
</tbody>
</table>
| Singapore  | “Pursuant to Article 3, Paragraph 2 of the Optional Protocol, the Republic of Singapore declares that: 1. The minimum age at which persons may be voluntarily recruited or enlisted into the Singapore Armed Forces is 16 years and 6 months; and 2. The Republic of Singapore maintains the following safeguards in respect of voluntary recruitment or enlistment of persons below the age of 18 years into the Singapore Armed Forces -

   a. The person is required to produce documentary proof of age, including an authentic birth certificate and identity card;

   b. Written consent of a parent or legal guardian of the person is required; and

   c. The person is fully informed of the duties involved in military service by the Singapore Armed Forces through, among other things, informational brochures and career counselors to explain the demands of military life.” |
**Thailand Declarations:**

1. Military service is compulsory by law. Thai men reaching the age of 18 have a duty to register on the inactive military personnel list. At the age of 21, selected inactive military personnel will become active military personnel. Inactive military personnel may also voluntarily apply to become active military personnel to serve in the national armed forces. Women are exempt from compulsory military service both in times of peace and in times of war, but are subjected to other duties assigned by law.

2. In times of war or national crisis, inactive military personnel (men aged over 18) may be recruited to participate in the armed forces.

3. Admittances to military schools such as Army Non-commissioned Officer School, Air technical Training School, Navy Non-Commissioned Officer School, Armed Forces Academies Preparatory School and Army, Naval, and Air Forces Academies is on a voluntary basis, depending on the success in the entrance examinations and subject to the consent of parents or legal guardians.

4. High school and university students regardless of gender may voluntarily apply to receive military training from the Army Reserve Command, with the consent of parents or legal guardians, without any exception. Students who complete 3 years’ training are exempt from military service (as active military personnel) when they reach the age of 21.

5. Non-governmental militias are prohibited by law, regardless of the age of persons concerned.

**Viet Nam Declaration:**

“To defend the Homeland is the sacred duty and right of all citizens. Citizens have the obligation to fulfil military service and participate in building the all-people national defense.

Under the law of the Socialist Republic of Viet Nam, only male citizens at the age of 18 and over shall be recruited in the military service. Those who are under the age of 18 shall not be directly involved in military battles unless there is an urgent need for safeguarding national independence, sovereignty, unity and territorial integrity.

Male citizens up to the age of 17 who wish to make a long-term service in the army may be admitted to military schools. Voluntary recruitment to military schools shall be ensured by measures which, inter alia, include:

- The Law on Military Duty and other regulations on the recruitment to military schools are widely disseminated through mass media;

- Those who wish to study at a military school shall, on the voluntary basis, file their application, participate in and pass competitive examinations; they shall submit their birth certificates provided by the local authority, their education records, secondary education diploma; they shall also undergo health check in order to ensure that they are physically qualified to study and serve the military.”

**5.3. CRC-OPSC reservations/declarations**

<table>
<thead>
<tr>
<th>Country</th>
<th>Declaration/Reservation</th>
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<tbody>
<tr>
<td>Brunei Darussalam</td>
<td>n/a</td>
</tr>
<tr>
<td>Cambodia</td>
<td>n/a</td>
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<tr>
<td>Indonesia</td>
<td>n/a</td>
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<tr>
<td>Lao PDR</td>
<td><strong>Reservation:</strong> “The Lao People’s Democratic Republic […] does not consider itself bound by Article 5 (2) of the said Optional Protocol.”</td>
</tr>
</tbody>
</table>
5.4. CRC-OPIC reservations/declarations

<table>
<thead>
<tr>
<th>Country</th>
<th>Action</th>
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<tbody>
<tr>
<td>Thailand</td>
<td>n/a</td>
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5.5. CEDAW reservations/declarations

<table>
<thead>
<tr>
<th>Country</th>
<th>Action</th>
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<tbody>
<tr>
<td>Brunei Darussalam</td>
<td>Reservations: “The Government of Brunei Darussalam expresses its reservations regarding those provisions of the said Convention that may be contrary to the Constitution of Brunei Darussalam and to the beliefs and principles of Islam, the official religion of Brunei Darussalam, and, without prejudice to the generality of the said reservations, expresses its reservations regarding paragraph 2 of Article 9 and paragraph 1 of Article 29 of the Convention.”</td>
</tr>
<tr>
<td>Cambodia</td>
<td>n/a</td>
</tr>
<tr>
<td>Indonesia</td>
<td>Reservation: “The Government of the Republic of Indonesia does not consider itself bound by the provisions of article 29, paragraph 1 of this Convention and takes the position that any dispute relating to the interpretation or application of the Convention may only be submitted to arbitration or to the International Court of Justice with the agreement of all the parties to the dispute.”</td>
</tr>
<tr>
<td>Lao PDR</td>
<td>n/a</td>
</tr>
<tr>
<td>Malaysia</td>
<td>Declaration: The Government of Malaysia declares that Malaysia’s accession is subject to the understanding that the provisions of the Convention do not conflict with the provisions of the Islamic Sharia’ law and the Federal Constitution of Malaysia. With regard thereto, further, the Government of Malaysia does not consider itself bound by the provisions of articles 9 (2), 16 (1) (a), 16 (1) (c), 16 (1) (f) and 16 (1) (g) of the aforesaid Convention. In relation to article 11 of the Convention, Malaysia interprets the provisions of this article as a reference to the prohibition of discrimination on the basis of equality between men and women only.”</td>
</tr>
<tr>
<td>Myanmar</td>
<td>Reservation: Article 29 “[The Government of Myanmar] does not consider itself bound by the provision set forth in the said article.”</td>
</tr>
<tr>
<td>Philippines</td>
<td>n/a</td>
</tr>
</tbody>
</table>
**Singapore**

**Reservations:**
(1) In the context of Singapore's multiracial and multi-religious society and the need to respect the freedom of minorities to practice their religious and personal laws, the Republic of Singapore reserves the right not to apply the provisions of articles 2, paragraphs (a) to (f), and article 16, paragraphs 1(a), 1(c), 1(h), and article 16, paragraph 2, where compliance with these provisions would be contrary to their religious or personal laws.

(2) [...] 

(3) [...] Singapore considers that legislation in respect of article 11 is unnecessary for the minority of women who do not fall within the ambit of Singapore's employment legislation.

(4) The Republic of Singapore declares, in pursuance of article 29, paragraph 2 of the Convention that it will not be bound by the provisions of article 29, paragraph 1.

**Thailand**

**Declaration:** The Royal Thai Government wishes to express its understanding that the purposes of the Convention are to eliminate discrimination against women and to accord to every person, men and women alike, equality before the law, and are in accordance with the principles prescribed by the Constitution of the Kingdom of Thailand.

**Reservation:** 3. The Royal Thai Government does not consider itself bound by the provisions of article 29, paragraph 1, of the Convention.

**Viet Nam**

**Reservation:** In implementing this Convention, the Socialist Republic of Viet Nam will not be bound by the provisions of paragraph 1 article 29.

### 5.6. CRPD reservations/declarations

<table>
<thead>
<tr>
<th>Country</th>
<th>Reservation</th>
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<tbody>
<tr>
<td>Brunei Darussalam</td>
<td>“The Government of Brunei Darussalam expresses its reservation regarding those provisions of the said Convention that may be contrary to the Constitution of Brunei Darussalam and to the beliefs and principles of Islam, the official religion of Brunei Darussalam.”</td>
</tr>
<tr>
<td>Cambodia</td>
<td>n/a</td>
</tr>
<tr>
<td>Indonesia</td>
<td>n/a</td>
</tr>
<tr>
<td>Lao PDR</td>
<td>“The Lao People’s Democratic Republic [...] does not consider itself bound by Article 5 (2) of the said Optional Protocol.”</td>
</tr>
</tbody>
</table>
| Malaysia         | **Declaration:** “Malaysia acknowledges that the principles of non-discrimination and equality of opportunity as provided in articles 3 (b), 3(e) and 5 (2) of the said Convention are vital in ensuring full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity, which shall be applied and interpreted on the basis of disability and on equal basis with others. Malaysia declares that its application and interpretation of the Federal Constitution of Malaysia pertaining to the principles of non-discrimination and equality of opportunity shall not be treated as contravening articles 3 (b), 3(e) and 5 (2) of the said Convention.

Malaysia recognizes the participation of persons with disabilities in cultural life, recreation and leisure as provided in article 30 of the said Convention and interprets that the recognition is a matter for national legislation.”

**Reservation:**

“The Government of Malaysia ratifies the said Convention subject to the reservation that it does not consider itself bound by articles 15 and 18 of the said Convention.” |
<table>
<thead>
<tr>
<th>Country</th>
<th>Status</th>
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<tbody>
<tr>
<td>Myanmar</td>
<td>n/a</td>
</tr>
<tr>
<td>Philippines</td>
<td>n/a</td>
</tr>
</tbody>
</table>
| Singapore   | Reservations: “1. The Republic of Singapore's current legislative framework provides, as an appropriate and effective safeguard, oversight and supervision by competent, independent and impartial authorities or judicial bodies of measures relating to the exercise of legal capacity, upon applications made before them or which they initiate themselves in appropriate cases. The Republic of Singapore reserves the right to continue to apply its current legislative framework in lieu of the regular review referred to in Article 12, paragraph 4 of the Convention.  
2. The Republic of Singapore recognises that persons with disabilities have the right to enjoyment of the highest attainable standards of health without discrimination on the basis of disability, with a reservation on the provision by private insurers of health insurance, and life insurance, other than national health insurance regulated by the Ministry of Health, Singapore, in Article 25, paragraph (e) of the Convention.  
3. The Republic of Singapore is fully committed to ensuring the effective and full participation of persons with disabilities in political and public life, including through the protection of the exercise of their right to vote by secret ballot in elections and public referendums without intimidation. With respect to Article 29, subparagraph (a) (iii) of the Convention, the Republic of Singapore reserves the right to continue to apply its current electoral legislation which requires that assistance in voting procedures shall only be effected through a presiding officer who is appointed by the Returning Officer and has signed an oath to safeguard voting secrecy.” |
| Thailand    | withdrawn declaration |
| Viet Nam    | n/a      |