**Update on the context and situation of children**

COVID-19 remains well contained in Bhutan with only three reported deaths and no local transmission since mid-2021. To date, 94 percent of Bhutan’s adults and 93 percent of children aged 12-17 years are vaccinated with at least two doses of COVID-19 vaccine (no gender breakdown available). A booster dose campaign for high-risk groups, including health workers, frontline workers, and the elderly is ongoing while children aged 5-11 years will be vaccinated in early 2022. Continued risk communication combined with engagement of youth, scout, and religious networks to encourage preventive behaviours remain key in mitigating the spread of the virus.

Bhutan’s socio-economic development remains severely disrupted by the pandemic. Tourism and any industries requiring imports and migrant labour remain stagnant, affecting the well-being of families and children while continuing to reinforce pre-pandemic social inequalities. Bhutan’s GDP dropped from 5.76 per cent in 2019 to an all-time low of -10.08 percent in 2020 (State of the Nation Report, 2021). Despite the continued economic downturn, the Government allocated 30 percent of the 2020-21 budget (an increase of 5 percent from 2019-20 fiscal year) to the health and education sectors (National Budget Report, 2020-21). This commitment is critical given that children and adolescents comprise 34 percent of Bhutan’s 735,553 estimated population (48 percent female; 64 percent rural) (RGOB, Population and Housing Census, 2017).

Despite the pandemic, Bhutan has maintained low child and maternal mortality rates and provided high coverage of essential health, nutrition, water and sanitation services. Reducing neonatal mortality and preventing child anaemia and stunting remain major challenges (National Health Bulletin, 2021). Updated health statistics for 2021 are not yet available.

Sixty-three per cent of communities have achieved Open Defecation Free (ODF) status against the 2021 target of 50 per cent. An additional 9,381 children (4,898 girls) in 20 schools and 1,540 children (100 nuns) in monastic institutions benefitted from quality WASH services. The provision of handwashing stations, supply of soaps, and dissemination of hand hygiene posters as part of the national COVID-19 response has benefited 100,626 people (no gender disaggregation available). Endorsement of the National Strategy for WASH in Healthcare Facilities (WiHCF) by the Ministry of Health (MoH) and National Public Toilet Guidelines by the Ministry of Works and Human Settlement has enabled effective implementation of climate-resilient and environment-friendly WASH interventions for children.

Bhutan successfully re-opened all schools in early 2021, including Early Childhood Care and Development (ECCD) centres. The re-closure of schools and centres in southern and eastern border zones between May-July due to community transmission impacted the learning of an estimated 34,000 children (50 percent female) (Ministry of Education, 2021). Access to primary schooling and basic education stands at 93.5 percent and 90.6 percent, respectively, but only three in every ten preschoolers have access to (ECCD) centres (Annual Education Statistics, 2021).

The legal framework and institutions for child protection continued to be strengthened in 2021 through: development of a costed action plan for the National Youth Policy; endorsement of guidelines for Gender-Based Violence (GBV) case management; and development of child protection case management system. Nevertheless, violence, abuse, and physical punishment persist, remaining largely unreported to authorities. More than half of 13,458 religious persons in monastic institutions are children who have insufficient mechanisms to ensure their rights are met in health, safe water and sanitation, education and protection (WASH Baseline Survey in Monastic Schools and Nunneries in
Key challenges and risks to children:
Multidimensional poverty remained high at 7.1, affecting mostly children aged 0-9 years (Bhutan Multidimensional Poverty Index, 2017). Disparities across population subgroups in wealth, location, disability, age, gender further exposed the most disadvantaged and vulnerable children.

COVID-19 caused some disruptions in the delivery of antenatal and post-natal care services. Production of high-quality data alongside skill enhancement of health workers in delivery of routine health and nutrition services were diminished due to deployment of health workers for pandemic response, travel restrictions, and a ban on organizing face-to-face training.

The learning of children in southern and eastern border districts remains prone to frequent lockdowns. Frequent changes in education priorities jeopardizes quality and places all children at greater risks of not attaining basic learning standards. The digital divide continues to be a concern as digital learning takes on more prominence in the ongoing education sector reform. Children with disabilities continue to face vulnerabilities related to stigma and inclusion. With only 31.8 percent of children enrolled in ECCD centres, Bhutan is far from reaching its goal of 50 percent by 2024 and 100 percent by 2030. ECCD centres and services are currently unable to cater for children with disabilities. There are limited professional development opportunities available for the ECCD workforce (Evaluation of Bhutan’s ECCD Programme, 2020).

The pandemic continued to expose children, girls and women to violence and abuse with 562 (474 F) cases of abuse reported in 2021, and another 1,067 (598 F) children and young people seeking counseling services (of which more 45 percent were adolescents in the age group of 15-17 years), emphasizing the need to address the mental health of children and young people (Career Education Counselling Division, MoE, 2021).

Bhutan’s youth unemployment rate in 2021 is projected to be 22.6 per cent (6,922 persons) (Labour Force Survey, 2020). To cope with the impact of the pandemic and enforced restrictions, His Majesty, the King continues to provide Druk Gyalpo’s Relief Kidu (a social protection programme) to 48,751 individuals including 6,900 children (State of the Nation Report, 2021).

Bhutan’s sustainable development is highly dependent on climate-sensitive sectors such as agriculture, hydropower, and forestry. The agricultural sector, which employs about 69 percent of the total population and 63 percent of the nation’s earning women (ILO 2020 estimate), is particularly vulnerable to the impacts of climate change. Driven partly by global greenhouse gas emissions, impacts include crop loss and resultant food insecurity due to unusual outbreaks of diseases and pests, erratic rainfalls, windstorms, hailstorms, droughts, flash floods, and landslides. Glacial Lakes Outburst Floods, caused by the accelerated retreat of glaciers, pose new threats to lives, livelihoods and development.

Major contributions and drivers of results

GOAL AREA 1: EVERY CHILD SURVIVES AND THRIVES
UNICEF continued to support the Government’s efforts to contain the pandemic, contributing to COVID-19 two-dose vaccination of adults (>90 percent) and children aged 12-17 years (>93 percent), or 76 percent of the total eligible population. A booster campaign for high-risk groups is on-going and children aged 5-11 years will be vaccinated in early 2022.

UNICEF helped Government maintain high coverage of essential health, nutrition and WASH services. Despite supply shipment disruptions, UNICEF ensured that all routine vaccines were
procured and delivered on time with a minimum stock of six months. Bhutan’s cold chain capacity for quality storage of routine and COVID-19 vaccines was expanded threefold from 95,000 litres to 372,638 litres at different temperatures (+2°C to +8°C, -15°C to -25°C and -70°C to -86°C). Routine immunization coverage improved from 86.7 percent (2020) to 95 percent (2021), with 16,449 children vaccinated with a 3rd dose of DTP.

UNICEF and the Ministry of Health (MoH), together with other development partners, finalized the National Nutrition Strategy and Action Plan (2021-2025) to guide multi-sectoral nutrition-related interventions both within and outside the Government. To address anemia and stunting, UNICEF contributed to the nationwide scale-up of Multiple Micronutrient Powder (MNP) Supplementation allied with Infant and Young Child Feeding (IYCF) counselling, reaching >90 percent of children aged 6-23 months.

**GA2: EVERY CHILD LEARNS**

UNICEF supported the expansion of inclusive, quality and gender-responsive learning opportunities. Contact teaching resumed for all schools early 2021 with the UNICEF-supported New Normal Curriculum in place, though there continues to be intermittent school closures in southern and eastern border districts. The Bhutan Professional Standards for Teachers (BPST) training equipped all teachers to use more ICT in delivering the new curriculum. The UNICEF-assisted National Education Assessment (NEA) system became operational and the first NEA for grade III has been completed. Inclusive Education was further strengthened with UNICEF support through identification of six additional schools for Children with Disabilities. Bhutan’s 21st Century Education Roadmap (under development) creates opportunity to influence reforms to address the emerging learning needs of all children and young people.

Building on the national parenting education programme, UNICEF supported the Ministry of Education (MoE) to pilot the Caring for Caregiver package in three districts. UNICEF also played a key role in convening multiple stakeholders to develop the Multi-Sectoral ECCD Strategic Action Plan and Early Childhood Intervention Package. In addition, close to 9,000 preschoolers (50 percent female) were supported through provision of COVID-19 preventive supplies (soaps, disinfectants, and posters) as ECCD centres reopened safely in March 2021.

Government and partners’ capacity for evidence-based policy making and programming for quality, inclusive education has been further enhanced through: the launch of MoE’s Education Management Information System (v.3) (which will generate more disaggregated data on disability); UNICEF-sponsored research by academia on the preparedness of higher education institutions to enroll persons with disabilities; and by operationalizing BPST.

**GA3: EVERY CHILD IS PROTECTED FROM VIOLENCE AND EXPLOITATION**

UNICEF supported ongoing enhancement of protection services for the most vulnerable children and young people. Finalization of the Youth Policy and Action Plan, led by the Government with support from UNICEF, provided a platform for youth to have their inputs included. With UNICEF assistance, 54,463 children (35,190 F) and 94 (53 F) parents and caregivers received Mental Health and Psychosocial Support (MHPSS) services, while 616 children (243 F) received child protective services. UNICEF and partners supported different skilling and engagement programmes for 20,824 (8,113 F) young people.

UNICEF collaborated with the National Commission for Women and Children (NCWC) and other partners to develop case management guidelines for child protection (CP) and Gender-Based Violence (GBV). Standard Operating Procedures (SOP) for Prevention and Response to GBV together with Early Identification and Safe Referrals Procedures were rolled out to 597 (263 F) social service workers, including monks and nuns, who are now able to effectively respond to survivors of violence, abuse, and neglect. Under the lead of NCWC, a multi-sector Ending Violence Against Children
campaign plan focusing on physical and sexual violence, online safety and mental health has been finalized, ready for roll-out in 2022.

An online campaign on mental health for children and young people titled “#OnMyMind” was launched to normalize conversations around mental health and to promote action in support of all children and young people. The campaign resulted in 552 (278 F) children and young people seeking counselling services, a 15 percent increase in cases received prior to the campaign.

UNICEF continued to engage with Government on State Party reporting to the Committee on the Rights of the Child. Together with the Office of the High Commissioner for Human Rights, Government officials were capacitated on how to develop the State Party Report. With UNICEF’s support, the first-ever Civil Society Report and Children’s Report were also submitted to the Committee.

**GA4: EVERY CHILD LIVES IN A SAFE AND CLEAN ENVIRONMENT**

UNICEF contributed to certification of Open Defecation Free (ODF) status in 26 blocks (2021 target was 20 blocks), with an additional 58,260 people benefitting from 100 percent improved sanitation. A total of 9,381 children (4,898 girls) in 20 schools and 5,289 children (305 nuns) in 65 monastic institutions benefitted from quality WASH services.

As part of the national COVID-19 response, UNICEF supported installation of mass handwashing stations in public places, 48 Primary Health Facilities, and five Youth Centres. Provision of handwashing stations, supply of soaps and dissemination of hand-hygiene behaviors benefitted a total of 105,033 people: 8,330 people in public places (12 districts out of 20); 200 youths visiting youth centers daily; 1,182 patients visiting primary health services daily; 3,346 youth (1,920 boys/1,426 girls) in 5 Youth Centres; and 95,321 children (49,470 F) in 475 schools.

Another 9,381 children (4,898 girls) in 20 schools and 5,289 children (305 nuns) in 65 monastic institutions benefitted from quality WASH services. The introduction of WASH FIT (Facility Improved Tool) enhanced access to improved WASH services in all 158 health centres.

Endorsements of the National Strategy for WASH in Healthcare Facilities (WiHCF) and the National Public Toilet Guidelines enabled effective implementation of climate-resilient and environment-friendly WASH interventions.

**GA5: EVERY CHILD HAS AN EQUITABLE CHANCE IN LIFE**

UNICEF, the Scout Division, MoE, and Youth Development Fund (a CSO) further enhanced local understanding of child-friendly local governance through workshops for 66 (28 F) local government officials and elected leaders together with 40 youth (20 F) in two pilot districts. Both districts developed action plans to be supported through their annual budget allocation. An analysis of the local governments’ annual grant system was also conducted by the Finance Ministry with UNICEF’s assistance to help revise block grant guidelines and enhance local-level ownership and accountability.

UNICEF partnered with MoH to develop an Emergency Health Financing Strategy in response to COVID-19 to identify health sector financing measures (e.g., through the use of existing budgetary flexibility) and put in place clear institutional arrangements and legislation for future health emergency financing needs.

UNICEF, in partnership with the Oxford Poverty and Human Development Initiative, supported capacity building of 32 (11 F) Government officials on the Multidimensional Vulnerability Index (MVI) and Multi-Dimensional Poverty Index (MPI). Development of a moderate MPI using 2017 Bhutan Living Standards Survey will inform the Government’s next 5-year plan.
Following a UNICEF and UNDP supported SDG self-assessment workshop, Parliamentarians now have the necessary capacity to implement an action plan, developed during the workshop, to further advance the SDG implementation and monitoring.

**CROSS-CUTTING**

**Gender**

Gender continued to be mainstreamed into annual workplans while disaggregated data are used wherever possible for programming purposes. UNICEF worked with the other UN agencies to prepare the State Party’s response to the List of Issues Prior to Reporting from the CEDAW Committee.

To ensure gender equality, female/girl’s participation is a requirement in every training and community engagement session related to UNICEF-supported RCCE. Likewise, all Information/Education/Communication materials are checked for the use of male/female characters and gender-balanced language.

As noted above, UNICEF assisted the rollout of SOP and use of a Guideline on GBV Case Management in line with IASC GBV guidelines to ensure multisectoral provision of services to survivors of violence and abuse. With UNICEF support, Menstrual Hygiene Management (MHM) was integrated into the GBV prevention programme, with awareness raising activities on MHM and its connection to GBV conducted in all nunneries across the country.

The “Red Dot” campaign was launched by Her Royal Highness as a patron of Red Dot Bhutan. Messages were disseminated through social/mass media platforms. In addition, 2,000 menstrual cups, 17,000 reusable sanitary pads, 500 sanitary tampons and 5,500 disposable sanitary pads were distributed to 139 schools as menstrual hygiene options benefiting 2,700 adolescent girls.

**Humanitarian assistance**

Besides UNICEF’s support to COVID-19 vaccination and cold chain expansion described above, UNICEF supported MoH to reach 500,000 people with COVID-19 prevention messages and actions. Against a target of 20,000, over 45,000 community influencers (including 10,000 children and young people) were trained and mobilized through MoH and MoE networks. UNICEF also successfully lobbied for: the continuity of essential health and nutrition services; ECCD centre and school reopening; and for mental health promotion to become a new national priority.

**CHANGE STRATEGIES:**

**Programming excellence for at-scale results for children:** UNICEF Bhutan provided further support to improve subnational data sources to better identify vulnerable children and continued to build capacity of district administrations and communities to improve planning, budgeting, implementation and monitoring to achieve results for children and adolescents.

**Gender-responsive programming:** Described under Cross-Cutting above.

**Winning support for the cause of children from decision makers and the wider public:** Amid the pandemic, UNICEF Bhutan harnessed advocacy opportunities during national and international events including UNICEF’s 75th Anniversary, the two rounds of COVID-19 vaccination, and during meetings with counterparts to ensure that the Government’s COVID-19 preparedness, response and recovery plans were inclusive of children and young people’s issues. These advocacy efforts complemented by strategic media coverage (see below) contributed to the Government recommitting to uphold all provisions of the CRC and among others, led to a Royal Command to make mental health a new national priority.

By the end of 2021, UNICEF Bhutan had 140 media mentions in the national and global media,
averaging 11 stories a month, up from 96 mentions in 2020. UNICEF Bhutan’s online presence became the most followed page on social media among UN agencies and international organizations in Bhutan. The number of Facebook followers saw a 15 percent increase to 47,549 followers (almost double from 7.6 percent in 2020) and a 5 percent increase in the fan base to 31,971 fans. Together, UNICEF’s Twitter, Facebook and Instagram platforms recorded 108,855,515 impressions, which is the number of times UNICEF Bhutan’s messages on vaccination, COVID-19 safety protocols, parenting, immunization, education, and mental health were seen on social media feeds. Through Facebook alone, the 447 messages garnered more than 100 million impressions (100,195,795).

**Developing and leveraging resources and partnerships for children:** UNICEF Bhutan has played an instrumental role in leveraging millions of dollars for Bhutan’s COVID-response from the Asian Development Bank, COVID-19 Vaccine Delivery Support, the Government of Japan, and UNICEF’s Global Humanitarian Action for Children Fund.

**Harnessing the power of business and markets for children:** Close coordination with the national airline continued to ensure that all routine vaccines were procured and delivered on time despite multiple disruptions to transport routes. Upgrading of 22 pit/aqua privy/broken/non-functional toilets to Safe Toilet (SATO) technology, supplied through UNICEF Bhutan’s partnership with Lixil, benefitted 182 child monks in three monastic schools. Mawongpa Water Solutions and Druk Water Solutions, continued to support installation of handwashing stations at common public places, monastic institutions and PHC facilities. UNICEF expanded capacity building opportunities for private sector ECCD facilitators in urban areas. UNICEF also helped Samtse College of Education to leverage financial support for its own ECCD centre from the State Mining Corporation Limited as part of the latter’s Corporate Social Responsibility. UNICEF and MoE organized capacity development workshops for 143 NEET (neither in employment nor in education and training) adolescents and youth (88 F) to enhance their soft skills and link them with relevant training institutes, potential employers, and financial institutions. UNICEF supported Innovate Bhutan to launch a seven-week-long social entrepreneurship project for 50 young people (25 F). Implementation of the six best projects is being supported with USD 1,500 for completion by January 2022.

**Harnessing the power of evidence as a driver of change for children:** The Mid-Term Review (MTR) of UNICEF’s current country programme (2019-2023) provided an opportunity to review progress as well as the relevance of existing indicators. UNICEF continued to support data generation and use including improving the local government database. A new report on persons with disabilities was produced drawing upon data from the National 2017 Census. The first-ever Inclusive Education Evaluation is expected to be finalized in 2022 to help identify barriers to support advancement of quality inclusive education in Bhutan. A series of Talkshows and webinars were conducted in Universities to advocate for the importance of evaluation in development.

**ENABLERS**
UNICEF Bhutan’s results and change strategies are supported by four organizational performance enablers.

**Governance (modern, transparent and accountable governance for the organization):** Enhanced team cohesion, professional development and empowerment of team members led to increased programmatic leadership. Effective and efficient delivery of programme results has been further strengthened through strong compliance to necessary procedures, strategic review, and rationalization processes. The CO met all regional benchmarks, including programme performance, security, Harmonized Approach to Cash Transfers, and risk mitigation.

**Management (results-oriented, efficient, effective, and collaborative management):** UNICEF Bhutan continued to invest in staff capacity for rights and results-based management (RRBM). RRBM-trained staff then trained all other staff as part of preparation of the MTR of the country programme to improve planning and reporting. RRBM training is also ongoing for UNICEF’s main
partners to enhance their capacity.

**People (versatile staff, staff as agents of change):** A few all-staff trainings such as RRBM, eTools and UN Partner Portal (UNPP) were facilitated in-house with remote support from ROSA. Other UN agency staff and CSO partners were also trained on UNPP. All UNICEF CSO partners have now completed their registration on UNPP. Based on findings from a needs survey, an in-house mentorship initiative and team coaching were rolled out focusing on topics such as leadership, people management, communication, and career development. Several staff wellbeing sessions were conducted by UN HR Task Team including: disability awareness; living with a purpose (a six-month coaching journey in which two staff from UNICEF are enrolled); and sensitization on health facilities available for UN staff. Procedures continued from 2020 such as Regular Days Off and well-resourced teleworking arrangements aided staff during the pandemic.

**Knowledge and information systems (efficient, safe and secure systems connecting results & people):** UNICEF worked with partners to strengthen Bhutan’s data ecosystem. UNICEF is the only agency working with the National Evaluation Association to promote an evaluation culture among young people. Following the 2020 ECCD evaluation, an inclusive education evaluation has commenced.

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**UN Collaboration and Other Partnerships**

UNICEF plays an active role in Outcome Groups, Inter-Agency Task Teams, UN PME Group and UN Business Operating Strategy under the 2019-2023 UN Strategic Development Cooperation Framework. UNICEF will also support the development of the 2024-2029 UNSDCF.

**GOAL AREA 1:** In 2021, UNICEF collaborated with WHO and UNDP to support the MoH’s COVID-19 response, ensuring continuity of health services, RCCE, and resource mobilization. UNICEF collaborated with WFP in supporting MoH to diversify diets for middle childhood age children and adolescents, and in conducting a nutrition assessment in monastic institutions.

**GA2:** Partnerships with National Statistical Bureau (NSB), Bhutan Council for School Education and Assessment (BCSEA) and Samtse College of Education (SCE) under the Royal University of Education (RUB) were further cemented during 2021. These partnerships will enable UNICEF and partners to look at Bhutan’s quality of education more independently as well as through a diversified lens.

**GA3:** UNICEF worked with the UN Inter-Agency Task Team on Gender to roll out the training package for the SOP on GBV and GBV case management to service providers, case managers and frontliners. UNICEF and UNDP partnered in an online campaign on mental health issues affecting children, young people and their families to not only break the silence around the issue but also to help link them with relevant services. Additionally, partnership with UNDP in justice for children resulted in the development of a comprehensive action plan for child justice, using USD 285,000 secured from the Austrian Aid Agency. UNICEF and Save the Children International worked together to develop the guideline on and training package for child protection case management.

With UNICEF support, YDF, Fab lab and Loden Foundation continued to offer digital skills and computer coding, entrepreneurship, employability, 3D printing and civic engagement skilling opportunities, reaching 20,824 (8113 F) young people.

**GA4:** UNICEF collaborated with WHO to develop the comprehensive plan for WASH in health care facilities. UNICEF continued partnering with SNV for WASH expansion in rural areas and to address
COVID-19 prevention through installation of handwashing stations in public places as well as promoting infection prevention messages.

**GA5:** UNICEF and UNDP with RCO’s coordination, and in partnership with the Government secured USD 872,000 from the SDG Joint Fund for funding the Integrated National Financing Framework (INFF). The INFF programme will support financing solutions aligned to COVID-19 recovery as well as longer-term investments for a sustainable future. UNICEF and UNDP partnered with the Bhutan Centre for Media and Democracy to hold a series of panel discussions on shock-response social protection streamed online.

**Cross-cutting:** UNICEF spearheaded the UN Country team to support the Government’s response to mental ill-health. High-level advocacy with the Royal Family, Parliamentarians, academia and the media contributed to the issuing of a Royal Command to make mental health a new national priority.

UNICEF joined sister UN agencies and the Ministry of Foreign Affairs to observe a series of events to mark the 50th Anniversary of Bhutan’s admission to the UN.

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**Lessons Learned and Innovations**

**GA1: EVERY CHILD SURVIVES AND THRIVES**

**Lessons learned:** Development of the SOP on continuity of essential nutrition services during the pandemic proved essential for coordinated efforts and to ensure scaling up to high levels of coverage (>90 percent) of Micronutrient Powder (MNP) supplementation together with IYCF counselling. The use of digital platforms also proved to be an efficient and effective way of ensuring capacity development of health providers to scale up MNP supplementation across all 20 districts. Communication interventions to promote COVID-19 vaccines and provision of personal protective equipment for vaccinators also contributed to high coverage of COVID-19 vaccination in Bhutan.

**Innovation:** The use of social media in collecting data, sharing feedback, and mobilizing community influencers through virtual sessions could be scaled up in future social and behaviour change interventions. Government agencies, local leaders, religious leaders, youth volunteers, CSOs and local media learnt how to work together effectively for the same goal to ensure continuity of services.

**GA2: EVERY CHILD LEARNS**

**Lessons learned:** The importance of emergency preparedness planning in the context of education to ensure learning continuity remained critical. The move to digital platforms for learning provided teachers with ample opportunities to hone their ICT skills in teaching and learning. The 21st Century Education Road Map is an upstream opportunity for UNICEF to influence education reforms that address the emerging needs of all children and young people. The introduction of New Normal Curriculum presents an opportunity for UNICEF to improve the quality of education from a largely-content driven to child-centered pedagogy-driven approach.

A key lesson learned through piloting of the CFC package was the acknowledgement that caregivers need psychosocial support. In addition, by providing this support, parenting can be strengthened for the benefit of children’s holistic development as well as the wellbeing of caregivers themselves. This could evolve into an important community-based approach to mental health promotion and response. However, informal feedback from the ECCD facilitators, suggest that they need more training on providing essential counselling support since many caregivers face difficult situations and areas where they need support, which often extend beyond the support ECCD facilitators can provide.
Innovation: ECCD centre closures in 2020 opened the gateway for remote learning support and home-based interventions. As a result, UNICEF and MoE initiated the exploration of introducing a home-based intervention package to improve early learning and stimulation for children from vulnerable backgrounds and extremely remote locations in five pilot districts.

GA3: EVERY CHILD IS PROTECTED FROM VIOLENCE AND EXPLOITATION

Lesson learned: With the mental health of young people greatly affected by the pandemic, UNICEF advocated at the highest level with Government partners, Parliamentarians, and Her Majesty the Queen, and worked with Youth Development Fund, young people, MoE, MoH, and UNDP to analyze and address the issue through a whole-of-society, whole-of-government, whole-of-lifecycle approach. These concerted efforts and holistic approach proved instrumental in stimulating dialogues and actions required to address mental health including gender-based violence.

Innovations: Continuing with the innovative ideas used in 2020, further enhancement of Bhutan’s social service workforce capacity, especially for those in high-risk zones, was carried out through online platforms such as telephone, zoom, skype, WhatsApp, WeChat and Messenger, thereby ensuring wider reach while saving time and costs.

To ensure that maximum voices of children are captured in the Children’s Report to the Committee on the Rights of the Child, an online survey-based questionnaire was used to gather their feedback. Where permissible, focus group discussions with children were also carried out.

UNICEF’s support in the development of Bhutan’s first Volunteer Management Information System, a database of youth volunteers and organizations, has helped in consolidating youth-related and youth-led programmes and services in the country.

GA4: EVERY CHILD LIVES IN A SAFE AND CLEAN ENVIRONMENT

Lesson learned: Although UNICEF’s focus on upstream interventions in WASH had resulted in the Government taking over most of the construction and maintenance of water supply schemes, handwashing facilities and toilets, there has been decreased domestic budget allocation this year across all sectors, including the WASH sector due to diversion of national budget towards the COVID-19 pandemic response. This raises concerns about the sustainability of WASH services.

Innovations: A case study for inclusive WASH in schools and monastic institutions was conducted through virtual platforms and social/mass media platforms with UNICEF support, optimizing resources and proving to be a cost-effective alternative to address limited funding exacerbated by the current pandemic. The study provided evidence to increase investment and sustain the provision of an inclusive and comprehensive WASH package in all schools, monasteries, and nunneries as part of the national WASH development goals as well as SDGs 4 and 6. The investment case report will soon be finalized and a policy brief developed for advocacy at the highest levels – both will also be adopted and used for advocacy with WASH stakeholders.

GA5: EVERY CHILD HAS AN EQUITABLE CHANCE IN LIFE

Lesson learned: Social policy in general and social protection remain relatively new fields in Bhutan. The current pandemic crisis highlighted the need for UNICEF to continue high-level advocacy with the Government and key stakeholders on the importance of child-focused social protection measures, programming with young people around youth engagement at the local government level to integrate some of the elements of the Child-friendly Local Governance (CFLG).

Furthermore, COVID-19 has negatively affected the social sectors as the priorities of the Government
shifted towards reviving economic sectors such as tourism, construction, agriculture, and manufacturing. In the face of an increasingly limited fiscal space for social sectors, UNICEF needs to further invest in improving the understanding of key government agencies, especially Ministry of Finance, GNHC, Parliament and local government authorities, to invest in child outcomes.