



Analysis of Situation of Children's and Women's Rights in Turkmenistan

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Executive summary

This Situation Analysis (SitAn) represents a strong partnership between the Government of Turkmenistan, the United Nations Children's Fund (UNICEF), and the UN system around children's and women's rights. It confirms measurable progress made by Turkmenistan in advancing rights of children and women. Formal ratification of core international human rights treaties and the highest in Europe and Central Asia economic growth are necessary but not sufficient to ensure equity for all and additional efforts are required to realize rights of vulnerable children and women.

The SitAn identifies the vulnerable groups of children and women experiencing inequality whose vulnerabilities are not captured in the national averages. It shows that it is critically important to identify and adequately support vulnerable groups. Equity and inclusion of all should be the main guiding principles of all national policies and programmes advancing rights of children and women.

Turkmenistan created a favourable enabling environment to realize rights of children and women. It ratified the Convention on the Rights of the Child, the United Nations Convention on Rights of Persons with Disabilities, Convention on the Elimination of all Forms of Discrimination Against Women and aligned a number of national laws with the Conventions. The new Constitution recognizes the primacy of universally accepted norms of international law. There is not a separate governance system specifically focusing on children's rights in Turkmenistan

Climate change and environment degradation are threatening the well-being and quality of life for children, particularly with reductions in water availability and water and air quality the most likely to have the strongest impacts on children. Climate change in Turkmenistan is projected to increase average temperatures, resulting in hotter and longer summer heat-waves and droughts, as well as a likely reduction in average annual rainfall.

In the area of healthcare, the Government is implementing a range of national programmes to improve access to healthcare and nutrition of women and children. Over the previous years, a number of specialized modern hospitals and diagnostic centres were built across the country and almost all maternity wards received the status of "Child Friendly Hospital".

Some of the accomplishments include: universal access to skilled medical care during birth in Turkmenistan as 99% of deliveries are assisted by medical personnel in maternities; reduction of under-five mortality from 91 per 1,000 live births in 1990 to 51 in 2015; almost universal vaccinations of children by their first birthday; increase in exclusive breastfeeding rates among children under 6 months of age from 11 percent in 2006 to 59 percent in 2015 and achieving optimal iodine intake of the population.

Additional targeted interventions are required to reduce the childhood mortality rates as well as the maternal mortality rate and address anaemia that was high at 44 percent among children aged 6-59 months and 57 percent among non-pregnant women of reproductive age in 2011.

To improve access to quality healthcare and make it more equitable, the Government should increase state health expenditure (currently at a low level of 1.1 percent of GDP) and ensure free access to vulnerable groups to quality healthcare and drugs; improve the numbers and capacity of

healthcare providers; increase focus at health promotion and prevention and further reduce regional disparities in access to quality and specialized care.

With 31 percent of Turkmenistan's population aged 14 and younger, high quality and inclusive education is essential for the national human development and economic growth. In many area of **inclusive education**, Turkmenistan's progress is commendable. Access to free education is almost universal for both boys and girls, and the adult literacy rate is nearly 100 percent. The pre-school coverage increased from 26 percent in 2006 to 43 per cent in 2015 and school readiness (children who are in the first grade and who attended pre-primary the year before) reached 44.8 percent in 2015.

Additional targeted interventions are required to ensure equitable access to pre-school education in rural areas, engage fathers more extensively into playing and other elements of caregiving of their little children; continue improving overall quality of education and teachers' training as well as ensure inclusion of children with disabilities into mainstream education and promote girls' access to higher education.

To improve access to quality inclusive education and make it more equitable, the Government continues improving access to preschool and pre-primary education programmes, especially of children from vulnerable groups and those residing in rural areas; address social stigma and norms that limit access of children with disabilities to mainstream education and women to higher education; invest into teachers' training; and expand community services and supports to children with disabilities to increase their inclusion into mainstream schools and limit institutionalization.

In the area of social protection, the Government is implementing a number of national programmes aimed at socioeconomic development and improving social and living conditions in rural areas. Every year, a Presidential decree is issued whereby pensions, social benefits, scholarships and wages in all sectors of the economy are raised by 10 percent. The system of social guarantees in the country is universal and covers all categories of population. Allowances are in place for large families, the elderly, sick, disabled, no longer able to work or are not employed, including birth grants, benefits for little children and children with disabilities.

To improve effectiveness of social protection system and better support the vulnerable groups, the Government should identify the most vulnerable social groups and support them through targeted measures; introduce community based social services as separate function delivered by designated professionals and create cadres of social workers; and introduce specialised services at the community level where at-risk children, such as children with disabilities can be referred. Moreover, there should be a mechanism to measure the impact of the social protection system on households, including children.

In the area of youth participation, due to traditional culturally entrenched values, children are usually not consulted in their families about all the aspects of their lives. While in-school organizations are intended to support students' participation, there is a tendency for them to focus on activities that are designed by adults for children. To enhance youth participation, the Government can promote and institutionalize children's participation in the corresponding national policies.

Regional disparities exist and may create additional barriers to children and women to realize their rights. Households in Dashoguz velayat have fewer doctors per 1,000 residents in this velayat than in other parts of the country as well as has one of the lower rates of pre-primary attendance. **To reduce regional disparities, the Government can undertake** a more in-depth analysis of regional variations to determine if such velayats as Dashoguz and Lebap should be supported with equalization transfers to enhance rights realization of children and women residing there. Such an exercise is already being conducted to increase pre-primary attendance rates across the country, with a focus on the most vulnerable ones.

In the area of gender equity, Turkmenistan joined the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) and adopted the Programme of Beijing Platform for Action of the IV World Conference on Women. Women and girls in Turkmenistan have equal constitutional rights as men and boys. Social norms, attitudes and practices, and income disparities underlie the gender disparities in Turkmenistan. The gender gap in average wages of non-agricultural labor associated is a global phenomenon. In Turkmenistan, the share of women employed in education, health, physical education and social welfare sectors exceeds 60 percent, in financial and credit institutions, insurance, pensions – it exceeds percent, in institutions of culture and art – it is around 50 percent. 26 percent of women in Turkmenistan feel that a husband is justified in hitting or beating his wife in at least one of the five situations and there is no special law addressing and criminalizing domestic violence against women. The development of women's potential is pursued through the introduction of a gender approach into the social and economic development strategy of Turkmenistan and into national programmes. These programmes include, among other measures, the creation of new jobs, professional capacity building of women, and support of development of entrepreneurship among women, as well as expansion of their participation in industries with higher wages. However, additional efforts are required to fully ensure gender equality.

To advance women's rights, the Government can introduce and enforce laws addressing violence against women, including criminalizing domestic violence against women and establish supports for victims of domestic violence such as legal aid schemes, hotlines, psychological support and, if necessary, shelters. More systemic efforts are needed to address negative stereotypes regarding the roles of women in the family and in society, including public awareness raising campaigns, engaging media, distribution information on gender equality, etc.

Vulnerable Groups and Factors Contributing to their Vulnerabilities

Key determinant	Groups affected	Description
Social norms	Children with disabilities	Dominant views based on medical mode of disability that prevent inclusion of children with disabilities
	Women, particularly women with disabilities	Discriminative stereotypes about the place and roles of women and men in the Turkmen society are strong and persistent and affect their access to education and employment. Qualified females facing challenges in accessing higher education

		Despite progress made in realizing rights of women and girls with disabilities, they experience multiple and intersectional forms of discrimination, which affect their rights to education, health and employment and the right to be protected from violence. ¹
Legislation/policies	Residents in rural areas and selected velayats	Gaps in access to education, health and social services in rural areas. Absence of targeted state programmes/policies addressing inequities faced by residents of selected velayats ²
	Women and children experiencing violence at home	Insufficient protection mechanisms for children and women experiencing domestic violence
	Stateless children	Gaps in the legislation and its realization in relation to stateless children
Budget allocations	Poor families experiencing challenges in access to healthcare facilities, balanced nutrition	Women and children who have anemia
	Children unable to access pre-primary education/ECD programmes	Children living mostly in rural areas who have limited opportunities to access pre-primary education
Capacity of relevant partners to deliver supports/services	Children with disabilities, including those who permanently reside in rehabilitation centres	Lack/limited access to support services and inclusive education
	Children not surviving to the age of five due to high infant mortality rate and neonatal mortality	Limited skills and capacities of health sector personnel
	Children at risk, including children without parental care	Some children at risk do not receive specialized, comprehensive and timely supports to reduce their vulnerabilities
Demand of specific population groups to use services or adopt behaviours	Women, especially victims of domestic violence	Often many women cannot protect their rights, especially in cases of domestic violence
	Adolescents, especially of vulnerable groups who cannot participate in decision making	Adolescents and children are not empowered to contribute to decision making and make their voices heard.

¹ In accordance with the current Law of Turkmenistan "On Education," the state creates conditions enabling all citizens, including girls with disabilities and special needs, to access education in mainstream schools and other educational institutions. According to this Law, girls with disabilities attending mainstream education institutions, along with other children, learn and participate in all activities of these educational institutions in accordance with their interests and desires.

² Turkmenistan implements a number of state-level programmes that are aimed at equitable development of all territories of the country. Some of them are the "National Programme of the President of Turkmenistan to transform the social conditions of the population of villages, towns, etraps and etrap centers until 2020" and "The National Programme the social and economic development of Turkmenistan for 2011–2030." These programmes focus at reducing inequalities across various regions and localities of the country.

		Children unable to express their views and concerns through independent bodies and civil society organizations
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To ensure that children and women remain at the centre of a country’s development priorities in realization of Turkmenistan commitment to achieving Sustainable Development Goals (SDGs), **the SitAn recommends:**

Improve strategic planning capacities, data quality and availability, including disaggregated data, for effective policy development, monitoring, and evaluation, in line with the recommendations of the MAPS report an overarching, multidisciplinary data system is pivotal to identify vulnerable groups of children and women, to inform development of evidence-based, equity-focused interventions and to monitor the progress towards improved rights realization of vulnerable groups. National data collection analysis should include an explicit focus on disparities (with disaggregated data) towards having a clear understating of the regions and groups of children.

Improve cross-sectoral coordination and management mechanism to protect children and women from violation of rights, especially in light of multiple overlapping vulnerabilities. Intensify horizontal collaboration across social protection, justice, education, and health have to intensify horizontal collaboration to strengthen case management approaches to identify vulnerable children earlier and to develop and implement cross-sectoral approaches to address the barriers they face. In addition, a functioning and effective cross-sectoral referral services can be established to provide comprehensive support for children and families based on their needs.

Invest into continuous capacity building of all professionals working with children, especially the most vulnerable ones. As needs of children vary and can be complex, well trained specialists such as developmental pediatricians, psychologists, social workers, speech and language pathologists are needed.

Promote individualized approaches to identify and support vulnerable children. As children are unique in terms of their needs, strengths, circumstances and aspirations, the services provided should be individualized. “Individual action plans” that take into account such individual characteristics as age, skills, family circumstances, strengths, needs and other important characteristics can be developed.

Engage civil society extensively into the field of child rights’ realization. To make partnership with CSOs more meaningful, it is advisable to facilitate more extensive involvement of CSOs into monitoring of child rights, identification of core gaps and delivery of support services for the most vulnerable groups of children.

Acknowledgements

This Situation Analysis was produced by UNICEF in close collaboration with the Government of Turkmenistan, UNFPA and with involvement of other UN agencies.

UNICEF would like to sincerely thank the Government of Turkmenistan for their collaboration in the development of this Analysis, particularly the Institute of State, Law and Democracy (previously the National Institute of Democracy and Human Rights under the President of Turkmenistan), Ministry of Finance and Economy, Ministry of Labour and Social Protection of Population, Ministry of Internal Affairs, Ministry of Education, Ministry of Health and Medical Industry, the Office of Ombudsman and Mejlis (Parliament). Our special thanks go to the Women's Union of Turkmenistan, Youth Organization named after Magtymguly and "Yenme" Public Association for their contributions and insights into shaping the analysis on how rights of children, youth and women can be further advanced in Turkmenistan.

We are grateful to the State Statistics Committee for promptly responding to all our data requests.

The document went through extensive reviews by a wide range of organizations, including the Government, UN agencies, UNICEF Regional Office and other organizations. The valuable comments and guidance thus received helped giving the final shape to the analysis. We are grateful to the Mejlis, Supreme Court, Ministry of Health and Medical Industry, Ministry of Internal Affairs, Ministry of Education, Institute of State, Law and Democracy and State Committee on Statistics, the for their detailed comments.

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Acronyms

CO	Country Office
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CEE	Central and Eastern Europe
CLAC	Climate Landscape Assessment for Children
CPD	Country Programme Document
CRC	Convention on the Rights of the Child
CRPD	Convention on the Rights of Persons With Disabilities
CSO	Civil Society Organisation
DRR	Disaster Risk Reduction
ECA	Europe and Central Asia
ECD	Early Childhood Development
ECE	Early Childhood Education
EPI	Expanded Programme of Immunisation
EU	European Union
HIV/AIDS	Human immunodeficiency virus infection and acquired immune deficiency syndrome
HQ	Headquarters
IFI	International Financial Institution
IMR	Infant Mortality Rate
INGO	International Non-Governmental Organizations
KAP	Knowledge Attitudes and Practices
KM	Knowledge Management
M&E	Monitoring and Evaluation
MICS	Multiple Indicator Cluster Surveys
MMR	Maternal Mortality Ratio
MoE	Ministry of Education
MoHMI	Ministry of Health and Medical Industry
MoLSP	Ministry of Labour and Social Protection
MTEF	Medium Term Expenditure Framework
ISLD	Institute of State, Law and Democracy
NIHDR	National Institute for Democracy and Human Rights
NGOs	Non-Governmental Organizations
OECD	The Organization for Economic Co-operation and Development
ODA	Official Development Assistance
PHC	Primary Health Care
RO	Regional Office
SDGs	Sustainable Development Goals
TFR	Total Fertility Rate
TMT	Turkmenistan Manat
ToR	Terms of Reference
UN	United Nations
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UPR	Universal Periodic Review
WHO	World Health Organization

1. Introduction:

The overall goal of the current Government of Turkmenistan-UNICEF Country Programme Co-operation (2016-2020) is to accelerate the universal realization of child rights through aligning Turkmenistan's legal framework, policies and practices for children and women with international standards and best practices. This Situation Analysis (SitAn) is a critical milestone in an ongoing process of understanding the situation of children and women in Turkmenistan. The SitAn provides the analysis and recommendations to ensure that children remain at the centre of the country's development priorities. While this report has been published by UNICEF, it represents a strong partnership between the United Nations Children's Fund (UNICEF), UN system agencies and the Government of Turkmenistan around children's rights.

The SitAn findings confirm the tangible progress made by Turkmenistan in advancing rights of children as more children are surviving and gaining access to education and healthcare. The extensive consultations with the national authorities, UNICEF and other international partners have identified the vulnerable groups of children and women experiencing inequality who are "invisible" and hidden behind the national averages as well as the barriers and bottlenecks that prevent them from enjoying their rights and reaching their full potential. The SitAn contains recommendations on legislative and policy changes, further expansion of supports and services, strengthened accountability, and empowerment that can advance rights of all children and women in Turkmenistan.

The analysis takes a human rights-based approach (HRBA), looking at the situation of children from the perspective of key human rights principles such as equality, non-discrimination and accountability. The SitAn captures Turkmenistan's progress in implementation of the 2015 observations of the Committee on the Rights of the Child that may help identify the priorities for focused state interventions to undertake before the next country report to the Committee in 2020.³ The SitAn will also inform the mid-term reflection on the Turkmenistan-UNICEF Country Programme as well as the development of the next United Nations Development Assistance Framework (UNDAF) which is a strategic results framework that describes the collective vision and response of the UN system to national development priorities as well as the next UNICEF Country Programme.

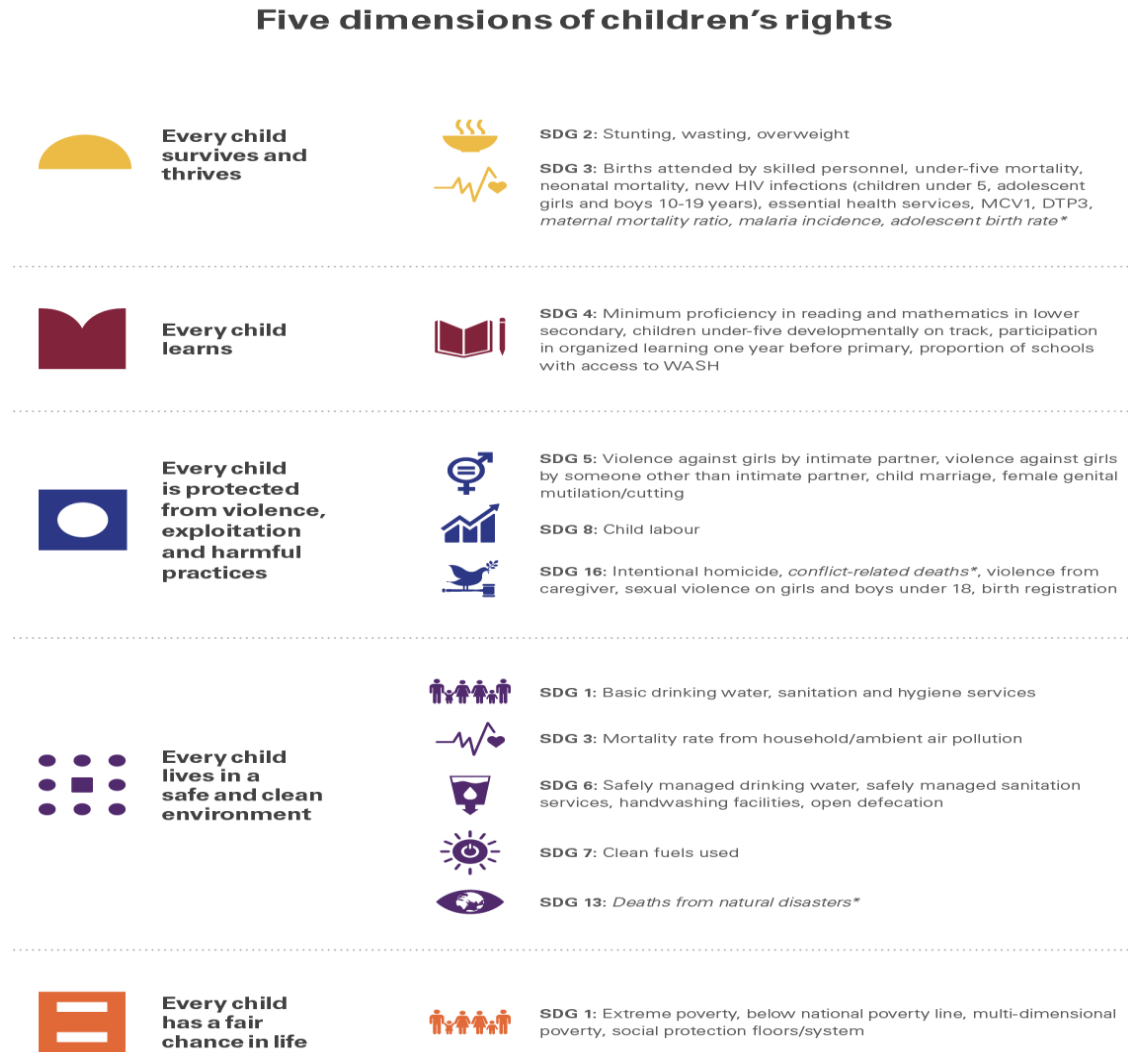
The SitAn supports the Government in translating its strong commitment to achieving Sustainable Development Goals (SDGs) into actionable priorities for children. The Government of Turkmenistan formally adopted all SDGs, including 148 targets and 175 indicators to be implemented until 2030 that were reflected in the Presidential Programme 2018-2024.⁴ The Programme also includes plans to design monitoring and evaluation mechanisms to track the progress and measure results as well as develop financial mechanisms to implement SDGs. The SitAn provides the evidence and analysis to determine critical accelerators for achieving child-related SDG targets and to design a monitoring and evaluation system to measure progress in implementing the 2030 Agenda. The SitAn adopts a strategic approach to delivering results for all children in the context of the SDGs as it was outlined

³ Committee on the Rights of the Child, Concluding Observations on the Combined Second to Fourth Periodic Reports of Turkmenistan, March 10, 2015.

⁴ UN, The UN and the Government, partners in realizing the Sustainable Development Goals (SDGs) in Turkmenistan, <http://tm.one.un.org/content/unct/turkmenistan/en/home/sustainable-development-goals.html>

in UNICEF’s Medium Term Strategic Plan (MTSP).⁵ Five dimensions of children’s rights in the context of SDGs are visualized below. Though the goals focus on sustainable development, they are inextricably linked to human rights generally, and the rights of children specifically. As the Graph below demonstrates, children are affected by all of the SDGs, whether poverty (Goal 1), hunger (Goal 2), health (Goal 3), education (Goal 4), climate change (Goal 13) or violence against children (Goal 16).⁶

Figure 1. Five Dimensions of Children's Rights



⁵ Update on the UNICEF Strategic Plan, 2018-2021, February 2017, https://www.unicef.org/about/execboard/files/Update_on_the_UNICEF_SP_2018-2021-FEB2017.pdf

⁶ UNICEF, Progress for Every Child in the SDG Era: Are We on Track to Achieve the SDGs for Children, 2018

1.1 Conceptual Framework

Economic growth is fundamentally important for children and women rights' realization, but it does not automatically result in equity for all. Harmonious society based on human rights principles cannot be built when some groups and individuals are vulnerable and excluded and face barriers to their participation in economic, social, cultural, and political life.

Protection of children's rights and provision of a safe and non-violent environment for children are of high priority for every country. This SitAn explores some fundamental questions faced by Turkmenistan that include:

- Who are the vulnerable groups and individuals in Turkmenistan?
- What are the factors that result in these vulnerabilities?
- How to create an environment in which ALL children and women can develop to their full potential and lead productive, creative lives in accordance with their needs and interests?
- How to empower and allow all children and women to contribute to and benefit from growth on an equal basis?

To answer these and other related questions, this SitAn applies a human rights-based approach.⁷ A human rights-based approach is a conceptual framework that is normatively based on international human rights standards and operationally directed to promoting and protecting human rights. The HRBA principles include: universality, non-discrimination, the best interests of the child, the right to survival and development, the indivisibility and interdependence of human rights, accountability and respect for the voice of the child. Applying these principles, the SitAn examines to what extent all children and women in Turkmenistan are able to enjoy all their rights as established by the Convention on the Rights of the Child (CRC) and selected relevant articles of the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the Convention on the Rights of Persons with Disabilities (CRPD) and other key international standards, agreements and conventions.

1.2 Methodology

A wide range of reliable sources and research was used to identify main trends and analyze multiple factors that enable and hinder the realization of children and women's rights in Turkmenistan. More specifically, the report focuses on ten most important determinants that are needed to achieve results for the most vulnerable children and women. These conditions include appropriate social norms or rules of behavior, adequate legislative/policy and budget allocations; availability of key supplies and sufficient capacity of relevant partners to deliver services; and demand of specific population groups to use services or adopt behaviours.⁸

⁷ UNICEF, Briefing Note, Accelerating Results for the Most Disadvantaged Children: Monitoring Results for Equity System (MoRES)

⁸ In conducting the determinants analysis, the analysis presents 1) structural indicators that reflect the ratification and adoption of legal instruments and the existence as well as the creation of basic institutional mechanisms deemed necessary for the promotion and protection of human rights; 2) process indicators that measure duty bearers' ongoing efforts to transform their human rights commitments into the desired results; 3) and outcome indicators that capture individual and collective attainments. See, The Office of the United Nations High Commissioner for Human Rights, Human Rights Indicators: A Guide to Measurement and Implementation, 2012

Consultations with government and relevant development partners were held. The process of SitAn development followed UNICEF corporate guidance for SitAn development,⁹ with extensive collaboration with the United Nations Population Fund (UNFPA) in Turkmenistan on sections covering women's rights. The SitAn development followed five key steps:



The SitAn relies primarily on the official government statistical and administrative data, while the information from international sources was used for international comparison. The SitAn relies extensively on the results of the Multiple Indicator Cluster Surveys (MICS) that were conducted in Turkmenistan in 2006 and 2015-2016.¹⁰ As MICS are household surveys implemented by countries under the programme developed by UNICEF, they provide internationally comparable, statistically rigorous data on the situation of children and women.¹¹ Additionally, the SitAn used the international data produced by the World Bank, International Monetary Fund (IMF), United Nations Development Program (UNDP) and the World Health Organization (WHO).

1.3 Structure

The SitAn starts with the introduction outlining equity-focused, rights-based approach that guided the report development. Chapter 2 addresses overarching issues and presents the context of Turkmenistan, with particular focus on the most relevant strategic and contextual factors that enable and hinder children and women's rights realization. Chapter 3 provides a comprehensive review of the current legislation and policies, state expenditures on children and the data available. Chapters

⁹ UNICEF, Guidance on Conducting a Situation Analysis of the Rights of Children and Women UNICEF, New York, 2012; UNICEF, Minimum Requirements for the Situation Analysis; UNICEF, Guidance for Country Office Gap Implementation: Situation Analysis Preparation, 2017 (focus on gender dimension)..

¹⁰ See, mics.unicef.org

¹¹ For more information on MICS tools and methodology, see <http://mics.unicef.org/tools>

4 goes into more detailed analysis and focuses on children’s right to survival and development and children’s rights to protection, education, justice and participation respectively. The existing shortcomings in ensuring the rights of the child and equality are identified, followed by a determinants analysis. Chapter 5 provides a more detailed analysis of selected vulnerable groups, including regional variations. Conclusions and recommendations for the SitAn as a whole are provided in Chapter 6. The report captures the country’s progress in implementation of Committee on the Rights of the Child’s Concluding observations as well as core recommendations of CEDAW and CRPD committees. The Report contains Annexes, which include a range of supporting documents such as bibliography and a list of national partners consulted.

There is a number of limitations to SitAn that include resourcing and timing restrictions, which limited the ability to conduct full in-depth review and analysis. The analysis was based solely on secondary data and some consultations with stakeholders who are adults. Although some important statistical and administrative data are available, disaggregated data on the growth, development, health, behavior of children and adolescents by region and gender are lacking. To partially mitigate this limitation, the SitAn predominantly relies on results of the Multiple Indicator Cluster Surveys (MICS) that were conducted jointly by the SSC and UNICEF in 2006 and 2015-2016 and various international sources.

Another concern was limited informant openness, especially when discussing more sensitive issues or the issues open to interpretation. To mitigate this limitation, questions were designed as open-ended and focused on obtaining facts rather than opinions. Triangulation was employed to maximize the reliability of the evidence obtained. The Table below lists core methodological limitations and corresponding mitigation strategies.

Table 1 Methodological Limitations and Mitigation Strategies

Methodological Limitations	Mitigation Strategies
<p>Insufficient analytical information/data to capture all aspects of rights realization in depth</p>	<ul style="list-style-type: none"> • Utilize data and analytical products from multiple sources, including UN partners and diverse international data. • Conduct consultations with national experts to get a better sense of statistical data accuracy. • Validate the findings and recommendations with national partners.
<p>Complexity and diversity of areas covered may result in methodological and logistical challenges in capturing the full scope of Government policies and strategies advancing rights of children and women.</p>	<ul style="list-style-type: none"> • Prioritize the areas and Issues in defining the scope of the SitAn. • Provide regular updates to UNICEF on progress to ensure ongoing alignment with UNICEF expectations and priorities and quickly resolve any emerging challenges. • Clearly define key deliverables and acceptance process at the outset of the SitAn development. • Collect information on country context from diverse international and national actors, to ensure that external factors are duly accounted for in the analysis.

<p>Sensitivity of stakeholders to questions and limited willingness to conduct frank and open dialogue</p>	<ul style="list-style-type: none"> • Be transparent regarding the scope and purpose of the SitAn development • Explain how SitAn findings and recommendations may benefit the interviewees • Engage main national partners into SitAn development to build their ownership of the process and the product.
<p>Inability of some key stakeholders for interview during the lead author's mission to Turkmenistan</p>	<ul style="list-style-type: none"> • Plan consultations with main stakeholders/beneficiaries with enough flexibility to account for their schedules. • Conduct some interviews via phone/skype • Conduct meetings outside of regular business hours to accommodate stakeholders scheduling constraints.

To meet the standards set in the UNICEF Procedure for Ethical Standards in Research, Evaluation, Data Collection and Analysis, the authors followed the ethical code by ensuring the following:

- Respecting gender and human rights principles throughout the process, including the protection of confidentiality; the protection of rights; the protection of dignity and welfare of people; and ensuring informed consent.
- The interviewees could openly express their opinions. Confidentiality was maintained. The content of the interviewees and round table discussions was used to inform the analysis, and no direct references were made to particular statements (unless a permission was granted for quotation) and no personal information of the respondents/participants was disclosed.
- Feedback was provided to participants wherever possible, and data/findings validation took place with participation of all partners interviewed, including UNICEF.
- Maximizing the degree of participation of stakeholders in the SitAn development wherever feasible.
- Disaggregating data by gender, geography, and social groups where feasible.
- Ensuring that the SitAn report uses human-rights and gender-sensitive language.

To capture and reflect more extensively the views of children and adolescents, UNICEF will undertake a mini SitAn focusing specifically on young people later in 2018.

2. The Context of Turkmenistan

Turkmenistan covers a territory that has been at a crossroads of civilizations for centuries. In ancient times, the territory of Turkmenistan was part of the Achaemenid state (Persian empire), was conquered by Alexander the Great. In the Middle Ages, the territory of Turkmenistan became part of the Arab Caliphate, then was captured by the Mongols and at the end of the 19th century occupied by Tsarist Russia. In 1924, Turkmenistan became one of the republics of the Soviet Union. After the collapse of the USSR in 1991, Turkmenistan gained independence.

2.1 Geographic and geopolitical overview

Turkmenistan is the most arid region of Central Asia, with a significant territory of 491,200 km.² In the north, Turkmenistan borders with Kazakhstan, in the northeast with Uzbekistan, its southern border extends to Afghanistan and Iran, in the west along the Caspian Sea lies the border with Azerbaijan and Russia. The main partners of Turkmenistan are India, China, the Russian Federation and Turkey. Turkmenistan adheres to the status of “permanent neutrality”, as stated in the resolution

of the UN General Assembly of December 12, 1995, and, therefore, it is not a member of any political association or regional integration organization.



Source: Nations Online

2.2 Demographic overview

The total population of Turkmenistan is estimated at 5.565 million people.¹² In 2017, 50.2 percent of the population were women and 33.3% of the population was under 18.¹³ The country has a high fertility rate among women of reproductive age being 2.84 per woman in 2017.¹⁴

The population pyramid has almost a classical conical shape that shows that the hardships of the 1990 made an impact on the families and negatively affected the birth rates. The birth rate has substantially increased in the 2000s due to economic growth and government targeted measures for protection of motherhood and childhood. The dependency ratio (the people outside of the normal 15-64 working age range compared to the population of working age) was 54% in 2015.¹⁵ There are on

¹² Estimation for 2015 by the United Nations Population Division, *World Population Prospects 2017*.

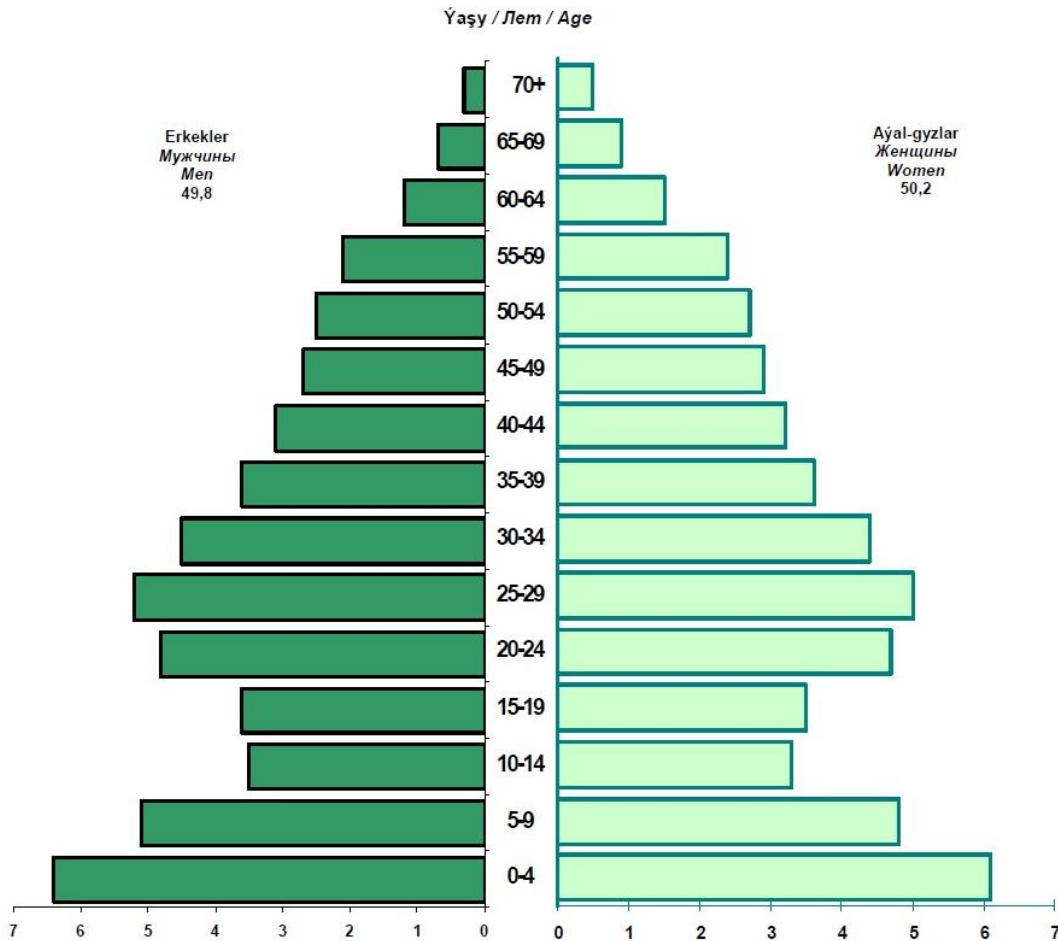
¹³ State Statistics Committee of Turkmenistan, *2017 Statistical Annual Report*.

¹⁴ The United Nations Department of Economic and Social Affairs, <https://esa.un.org/unpd/wpp/Download/Standard/Population/>

¹⁵ The United Nations Department of Economic and Social Affairs, <https://esa.un.org/unpd/wpp/Download/Standard/Population/>

average 2 workers who can help support people who are too young or too old to work, which is a healthy demographic indicator by the international standards.

Figure 2. Resident Population Structure by Gender and Age Groups, Turkmenistan, 2017



Source: The State Statistics Committee of Turkmenistan, Statistical Yearbooks of Turkmenistan 2017

The most densely populated areas are the southern, eastern, and northeastern oases, with approximately 15.5 percent of the population living in the capital of Ashgabat.¹⁶ Turkmen constitute more than 85% of the population, with Uzbeks, Russians and others as ethnic minorities.

2.3 Political context

Turkmenistan is a democratic, law-based and secular presidential republic. The President of Turkmenistan is the head of state and executive power, the highest official of Turkmenistan.

State power in Turkmenistan is divided into legislative, executive and judicial powers, they act independently, balancing each other. The highest representative body of the country is the Khalk

¹⁶ The State Statistics Committee of Turkmenistan, Statistical Yearbooks of Turkmenistan 2017

Maslakhaty of Turkmenistan, which represents the interests of the people of Turkmenistan. Its establishment procedure and powers are determined by the Constitution.

In Turkmenistan, local self-government is recognized and protected. It carries out its activities independently, within the scope of its authority. Local governments are not included in the system of public authorities.

The highest state power in Turkmenistan is exercised by the President of Turkmenistan, the Mejlis of Turkmenistan, the Cabinet of Ministers of Turkmenistan and the Supreme Court of Turkmenistan. State power at the local level is exercised by local representatives and executive bodies in the manner established by the Constitution and the laws of Turkmenistan.

The Mejlis (Parliament) of Turkmenistan is a representative body that exercises legislative power. The Mejlis consists of 125 deputies who are elected for a term of five years in constituencies with a roughly equal number of voters.

The Cabinet of Ministers (Government) of Turkmenistan is the executive and administrative body. The Chairman of the Cabinet of Ministers of Turkmenistan is the President of Turkmenistan. The Cabinet of Ministers includes Vice-Chairmen of the Cabinet of Ministers as well as ministers. The President of Turkmenistan may introduce into the Cabinet of Ministers other persons who are heads of central executive bodies.

The judicial power in Turkmenistan is coming from the courts. Judicial power is exercised by the Supreme Court of Turkmenistan and other courts provided for by law. Judges are appointed and dismissed by the President of Turkmenistan. The procedure for appointing and dismissing judges is determined by law.

Turkmenistan recognizes political diversity and multi-party system. The system of political parties includes the Democratic Party, created in 1991, the Party of Industrialists and Entrepreneurs, created in 2012, and the Agrarian Party, created in 2014. The state provides the necessary conditions for the development of civil society.

Since assuming office in 2007, the President Gurbanguly Berdymukhammedov has initiated a number of reforms. An office of the Ombudsman for human rights was established in 2017 and is expected to focus some of its activities at promoting and safeguarding children's rights.¹⁷ Additional efforts to advance the rule of law, enhance protection of human rights and democratic freedoms, and strengthening civil society are needed to comply with the international treaties commitments of Turkmenistan. Turkmenistan is playing a more active role in the international arena –it has assumed the chairmanship of the Commonwealth of Independent States in September 2018.¹⁸ In 2017, the Government of Turkmenistan was elected to the UNICEF Executive Board for the period 2018-2020 and to the Commission on Status of Women for four years. As an Executive Board member, which is the governing body of UNICEF providing intergovernmental support and oversight to the

¹⁷ Ombudsperson released her first report in 2018. Доклад Уполномоченного представителя по правам человека – Омбудсмена Туркменистана по итогам 2017 года, <http://turkmenistan.gov.tm/?obdus>

¹⁸ <https://www.azernews.az/region/131296.html>

organization, Turkmenistan will take part in reviewing UNICEF activities and approving its policies, country programmes and budgets. It is an opportunity for the Government of Turkmenistan to contribute and influence the transformative agenda for children and women at the global level and lead by example globally in upholding its obligations to the Rights of the Children in its policy, programming and practice in the country.¹⁹

Turkmenistan is playing more active role in other international organizations as well - it was elected to the Executive Board of the United Nations Entity for Gender Equality and the Empowerment of Women for the period 2016–2018, and to the Commission on the Status of Women for the period 2018–2022. In 2018, Turkmenistan was elected a member of the Inland Transport Committee of the United Nations Economic Commission for Europe (UNECE) for the period 2019-2020²⁰ and to the ECOSOC for the period of 2019-2021. Turkmenistan is chairing the International Fund for Saving the Aral Sea in 2017-2019. The Fund includes Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan and aims at financing joint projects and programmes to save the Aral Sea and improve the ecological situation there.

2.4 Socioeconomic context

Turkmenistan is largely a desert country with intensive agriculture in irrigated oases and extensive natural gas reserves, estimated at 13.4 trillion cubic meters ranked fourth globally, behind Russia, Iran, and Qatar.²¹ The state-dominated economy is strongly dependent on oil and gas, which comprised more than 90 percent of national exports in 2015.²²

After the diversification of natural gas export routes in 2009, China became the largest export market for Turkmenistan. Turkmenistan sent nearly 30 bcm to China by 2017, up from about 4 bcm in 2010.²³ Medium-term plans envisage a further increase in natural gas exports to China and other destinations in East and South Asia, at the time when exports to Russia have considerably come down.²⁴ The national authorities are exploring two initiatives to bring gas to new markets: a Trans-Caspian pipeline that would carry gas to Europe and the Turkmenistan-Afghanistan-Pakistan-India gas pipeline. In addition, Turkmenistan undertook some steps to diversify and restructure its economy to reduce its dependence on export of natural gas and oil. The World Bank forecast places the GDP growth rate of Turkmenistan at 6.3% for the period 2018-2020, which although lower than the double-digit growth observed earlier, is still the highest among all Europe and Central Asia countries.²⁵

¹⁹ <http://tm.one.un.org/content/unct/turkmenistan/en/home/presscenter/Election-to-UNICEF-EB.html>

²⁰ Turkmenistan elected as member of bureau of Inland Transport Committee of UNECE, <https://en.trend.az/casia/turkmenistan/2865433.html>

²¹ Martha Brill Olcott, Ph.D. Turkmenistan: Real Energy Giant or Eternal Potential? James A. Baker III Institute for Public Policy, Rice University, December 2013.

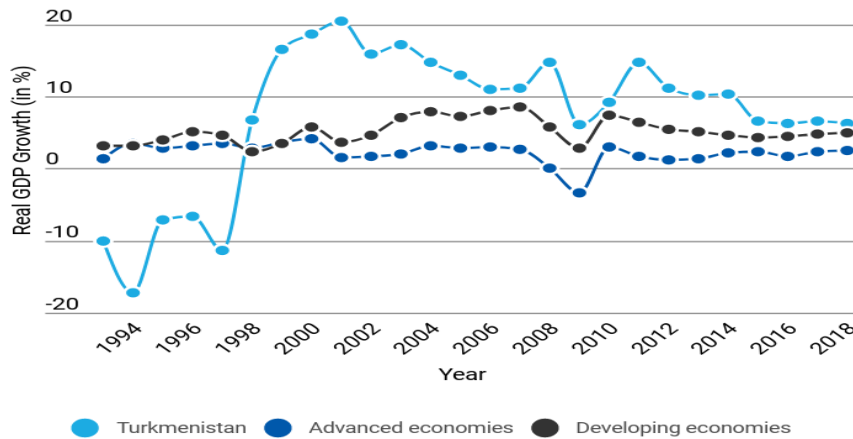
²² World Bank. Washington, D.C., 2016.

²³ Central Asia's Economic Evolution From Russia To China, 2018, <https://worldview.stratfor.com/article/central-asia-china-russia-trade-kyrgyzstan-kazakhstan-turkmenistan-tajikistan-uzbekistan>

²⁴ World Bank, <http://www.worldbank.org/en/country/turkmenistan/overview>

²⁵ World Bank, Global Economic Prospects, the Turning of the Tide, 2018, <http://www.worldbank.org/en/publication/global-economic-prospects>.

Figure 3 Real GDP growth rates of Turkmenistan (in comparable prices, in % to the previous year)



Source: International Monetary Fund, IMF Data Mapper, Real GDP Growth, http://www.imf.org/external/datamapper/NGDP_RPCH@WEO/OEMDC/ADVEC/WEOWORLD/TKM, 2018

The World Bank classifies Turkmenistan as an Upper Middle Income country. Its overall economic prospects remain positive, with growth supported by strong agriculture and services. It is projected to remain stable in the short term, owing to rising exports of natural gas to China, expansionary credit policies, and industrial policies to promote exports and substitute imports.²⁶

Low energy prices since mid-2014 are impacting the Government revenues. The International Monetary Fund (IMF) acknowledged that the Turkmen economy continues to adjust to the new reality of lower oil and natural gas prices. It recommended a range of reforms aimed at re-calibration of the policy mix to reduce external imbalances, including prioritizing accumulation of human rather than physical capital. The IMF recommended in particular to ensure that any policy adjustment would not have any undesirable impact on vulnerable segments of the population.²⁷ It is estimated that the families with children may be the ones that are and will be the most affected by the effects of global economic downturn and low energy prices. The Government has increased the tariffs for water use, heating, sewage and public transit in cities, which together with expected privatization of services, and an increase of fee-based education (particularly in the pre-primary) may negatively affect the most vulnerable unless these groups are properly identified and supported with the appropriate measures.²⁸ The introduction of cut-off points, which will ensure that households pay only for overuse, targets to partially reduce vulnerabilities and is a welcome step in this regard.

²⁶ IMF, World Economic and Financial Surveys, Regional Economic Outlook, Middle East and Central Asia 2017

²⁷ IMF Press Release 17/432, November 10, 2017, <http://www.imf.org/en/news/articles/2017/11/10/pr17432-imf-staff-concludes-staff-visit-to-turkmenistan>

²⁸ The National Programme of Turkmenistan on socio-economic development for the period 2011-2030 sets strategic targets of ensuring accessibility and high quality healthcare and education services and provision of targeted social assistance and gradual increase of state benefits.

Turkmenistan demonstrated significant achievements in the area of human development that can be attributed mostly to its economic growth. Turkmenistan's Human Development Index (HDI)²⁹ value for 2015 is 0.691— which put the country in the medium human development category —positioning it at 111 out of 188 countries and territories.³⁰ Between 1990 and 2015, Turkmenistan's life expectancy at birth increased by 2.9 years, mean years of schooling remained constant and expected years of schooling increased by 0.6 years. Turkmenistan's Gross National Income (GNI) per capita increased by about 86 percent between 1990 and 2015.

The HDI is an average measure of basic human development achievements in a country. Like all averages, the HDI masks inequality in the distribution of human development at the country level. To capture the impact of inequality on human development, UNDP developed the inequality-adjusted HDI that combines a country's average achievements in health, education and income with how those achievements are distributed among country's population by "discounting" each dimension's average value according to its level of inequality.³¹ Due to a lack of relevant data, the inequality-adjusted HDI has not been calculated for Turkmenistan.

Informal payments are an additional burden, especially on the vulnerable groups, in terms of their access to public and private services, including in benefiting from free education and health care.³² The Government has taken some action to curb corruption and established several bodies to fight economic crime including those committed by officials. Anti-corruption measures is among the primary tasks of the state and society, according to the country's top management.³³

A new Presidential Programme for 2018-2024 was also adopted in 2017. The key measures planned to be taken in economic and fiscal/monetary policy are focused at continued channeling of public spending on social sphere infrastructure.

2.5 Disaster risk and climate change context

Turkmenistan's population and economy are vulnerable to natural hazards. The worst flood in Turkmenistan since it gained its independence in 1991 occurred in 1993 and caused about \$200 million in damage. Turkmenistan's worst earthquake since 1900 took place in 1948 in Ashgabat, with a magnitude of 7.3. It caused anywhere from 50,000 to over 100,000 fatalities and almost \$4 billion in damage.³⁴

²⁹ HDI is a a summary measure for assessing progress in three basic dimensions of human development: a long and healthy life, access to knowledge and a decent standard of living.

³⁰ UNDP, Human Development for Everyone, Briefing note for countries on the 2016 Human Development Report, Turkmenistan

³¹ UNDP, Frequently Asked Questions - Inequality-adjusted Human Development Index (IHDI) <http://hdr.undp.org/en/faq-page/inequality-adjusted-human-development-index-ihdi#t293n88>

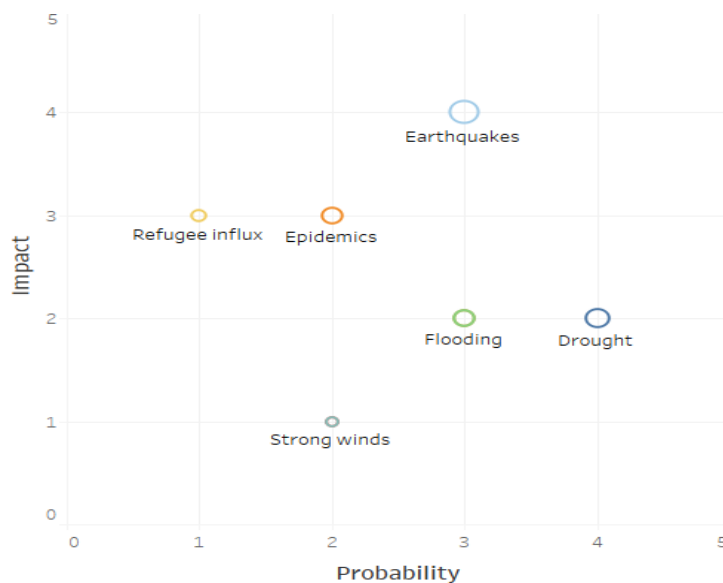
³² The Corruption Perceptions Index (CPI) aggregates data from a number of different sources that provide perceptions by business people and country experts of the level of corruption in the public sector. The latest Transparency international report can be found here https://www.transparency.org/news/feature/corruption_perceptions_index_2017

³³ Turkmenistan strengthens fight against corruption, July 3, 2018, <https://en.trend.az/casia/turkmenistan/2924130.html>

³⁴ World Bank, Global Facility for Disaster Reduction and Recovery, <http://documents.worldbank.org/curated/en/435441500295772586/pdf/117435-BRI-DisasterriskprofilesTurkmenistan-PUBLIC.pdf>

According to the 2018 risk assessment analysis developed by INFORM, a global open-source risk assessment for humanitarian crises and disasters, Turkmenistan is assessed as 'low risk'. However, INFORM index identifies the risk of earthquake in Turkmenistan as high, and has a score 8.5 out of 10. There is also a concern related to the lack of coping capacity with the score of 6.1 with institutional and governance capacity - 7.3, and physical infrastructure - 7.2 (the high score - the less reliable).³⁵ In April 2018, a round table meeting of the Department of Civil Defense and Rescue Operations of the Ministry of Defense, National Red Crescent Society, and UN agencies updated a risk assessment for Turkmenistan that is presented in the Visual below. An agreement was reached to improve joint planning and emergency preparedness.

Figure 4 Risk Assessment for Turkmenistan



Source: Summary of a round table meeting of the Department of Civil Defense and Rescue Operations of the Ministry of Defense, National Red Crescent Society, and UN agencies, 2018

Disaster preparedness and management can greatly reduce risks associated with disasters, with a focus on local vulnerabilities and community preparedness. An effective DRR system can save lives.³⁶ The general management of civil defense in the country is exercised by the Chairman of the Cabinet of Ministers (the Law on Civil Defence). General Directorate of Civil Defence and Rescue Operations under the Ministry of Defence is in charge of protection of population and property in emergency.

Turkmenistan is a signatory for Sendai Framework for Disaster Risk Reduction for the period of 2015-2030 and confirmed its support and commitment to the World Initiative on School Safety at its 2nd World Conference in Tehran. Since 2012, UNICEF has been engaged in mainstreaming of DRR component into the education system of Turkmenistan as well as establishing an inter-sectorial approach in implementing DRR in Turkmenistan.

³⁵ <http://www.inform-index.org/Countries/Country-profiles/iso3/TKM>

³⁶ Klaus D, Regional Chief Programme and Planning, UNICEF, ESARO; Wernerman J., Disaster Risk Reduction Specialist, UNICEF WCARO; Reidy E., Programme Specialist, UNICEF ESARO, Resilience – A Position Paper.

The draft National DRR Strategy takes into consideration the most vulnerable to disasters groups, including women, children, and persons with disabilities. Women, girls, men and boys are affected differently by climate change and disasters, with many women and girls experiencing greater risks, burdens and impacts and it is critically important to take into account these differences in developing the effective DRR Strategy.³⁷ When endorsed, the DRR Strategy will strengthen the commitment of the government to implement the Sendai Framework 2015-2030.

Climate change and environment degradation are threatening children's rights across Turkmenistan, with reductions in water availability and water and air quality the most likely to have the strongest impacts on children. Climate change in Turkmenistan is projected to increase average temperatures, resulting in hotter and longer summer heat-waves and droughts, as well as a likely reduction in average annual rainfall.³⁸ Overall this means the country will likely become hotter and more arid, with major implications for water availability and agricultural productivity.

Fostering preparedness and reducing risk in learning environments

The staff at school #29 in Turkmenabad have a lot to be proud of. Their school is officially 'child-friendly' after completing a pilot project and meeting all 12 child-friendly criteria. The student body is diverse, and includes children with disabilities.

With UNICEF support, the school has also introduced a DRR training. As a first step, the knowledge of students and teachers on emergency response was assessed, and school buildings were examined for their safety and ability to withstand shocks. Once a tailored programme was developed for the school, the children began participating in regular drills and sharing their newfound knowledge of reducing disaster risk with their family members at home.

For Tair Masharipov, a 16-year-old student, the training meant the difference between life and death when an electrical fire broke out in his home while he was alone with his little brother. "When I saw the fire start, I remembered all I learned during this training. I remembered that when something electric burns, you should not put water, but soil, sand or a blanket. I did so and we laid on the floor because I knew we could die from inhaling too much smoke. I managed to reach my cell phone and called the fire department. They came within less than five minutes. I can say that this training saved my life, my brother and our flat."

Water sources are highly vulnerable to climate change, with significant reductions expected in the volume of river flow entering Turkmenistan's territory within the next 10 years. Water is essential for agricultural production and food security as irrigated agriculture accounts for 90% of total water consumption, supplied by aging, energy-intensive infrastructure, and about 50% of water is lost between withdrawal and ultimate delivery. Water management is a cause and a potential remedy for extensive and often severe problems of land degradation. In 2014, internal renewable water resources per capita for Turkmenistan was 261.4 cubic meters. Between 1997 and 2014, internal

³⁷ Committee on the Elimination of Discrimination against Women General recommendation No. 37 (2018) on the gender-related dimensions of disaster risk reduction in the context of climate change, March 13, 2018

³⁸ UNICEF, Climate Landscape Analysis for Children in Turkmenistan UNICEF Working Paper, July 2017

renewable water resources per capita of Turkmenistan was declining at a moderating rate to shrink from 324 cubic meters in 1997 to 261.4 cubic meters in 2014.³⁹

To tackle these issues, the government has taken a number of significant steps towards ensuring a more secure environmental future for the country. In 2012, Turkmenistan adopted its National Strategy on Climate Change that aimed at environmental conservation for the benefit of present and future generations and improvement of living standards of the people through sustainable socioeconomic development of the country. In 2016, Turkmenistan signed and ratified Paris Agreement on Climate Change, thereby reconfirming its commitment on climate change, and adopted SDGs, including targets and indicators of DRR and environment-related SDGs.

In July 2017, UNICEF in consultation with the government ministries/agencies, international organizations and local CSOs working on climate change and environment issues, conducted Climate Landscape Assessment for Children (CLAC) in Turkmenistan to better understand the linkages between children, climate change, and environment and energy related issues. The Assessment identified and prioritized entry points for action in the area of strengthening resilience for climate change adaptation for children in Turkmenistan.

3. The Enabling Environment for Child Rights

3.1 Legislation and policy

In September 2016 Turkmenistan adopted a new Constitution that recognizes the primacy of universally accepted norms of international law. It means that when there is conflict between an international treaty that was ratified by Turkmenistan and the domestic law, the international law prevails and the norms of national law have to be set aside. The section on human and civil rights and freedoms of the new Constitution has been supplemented by 11 new articles that safeguard such rights and freedoms in accordance with the requirements of the international law.

To realize rights of children, Turkmenistan has made many important commitments under international human rights laws and has localised most of these commitments into major national legislation and policies. Turkmenistan ratified the Convention on the Rights of the Child (CRC) in 1993.⁴⁰ In addition, it ratified the Optional Protocol to the CRC on the involvement of children in armed conflict,⁴¹ and the Optional Protocol to the CRC on the sale of children, child prostitution and child pornography in 2005.⁴²

Basic principles of the CRC have been incorporated into national laws and additional legal instruments were introduced. Turkmenistan, for instance, introduced a Law “On State Guarantees of the Rights of

³⁹ FAO AQUASTAT, <http://www.fao.org/nr/water/aquastat/data/query/index.html?lang=en>

⁴⁰ More information on Turkmenistan ratification of international human rights treaties can be found here http://tbinternet.ohchr.org/_layouts/TreatyBodyExternal/Treaty.aspx?CountryID=180&Lang=EN

⁴¹ Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict. Adopted and opened for signature, ratification and accession by General Assembly Resolution A/RES/54/263 of 25 May 2000 entry into force 12 February 2002

⁴² Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography, Adopted and opened for signature, ratification and accession by General Assembly Resolution A/RES/54/263 of 25 May 2000 entered into force on 18 January 2002.

the Child” that provides for the state guarantees for a healthy living environment, adequate care, protection from exploitation at work. Similarly, the State Programme of Youth Policy for 2015-2020 is aimed at creating favorable conditions for full participation of young people in the socioeconomic, political and cultural life of the state and society as well as formation of spiritual and moral values and principles of healthy lifestyles among young people and teaching young generation in the spirit of patriotism, humanism and diligence.

At the same time, it should be noted that within the national legal, administrative and regulatory frameworks there are no established definition and operational mechanisms for child participation, nor the notion of participation is embedded into cultural or social fora. Nevertheless, the current national development agenda offers promising prospects for children’s participation in the context of implementation and monitoring of the child-related targets and indicators under the 2030 Agenda for Sustainable Development in the country. The National Plan of Action for Children for 2018-2022, adopted by the Presidential decree in June 2018, embeds the engagement of children into the monitoring of their rights as drivers of change.

Turkmenistan was the first Central Asian country to accede to the United Nations Convention on Rights of Persons with Disabilities (CRPD) in September 2008 and ratified its Optional Protocol in 2010. The Government of Turkmenistan demonstrated its strong commitment to advancing human rights of persons with disabilities and not only maintained a range of supports and services inherited from the Soviet times but also extended them over the last years. In the area of social protection, for instance, the Social Protection Code was amended that substantially increased benefits and services for all categories of persons with disabilities, including children. The Code reiterates that persons with disabilities in Turkmenistan enjoy all social, economic, political and individual rights and freedoms enshrined in the Constitution of Turkmenistan and states that discrimination against the persons with disabilities is prohibited and punishable by law.⁴³ It significantly increased state disability allowances, and extended state benefits for children with disabilities.⁴⁴ A range of benefits has been extended to cover medical supplies, wheelchairs, prosthetic and orthopedic products, prints with a special font, sound-amplifying equipment and alarms and some groups of persons with disabilities can access them for free. A range of free healthcare and rehabilitation services has been extended as well.⁴⁵

The Inter-Ministerial Commission was established in 2007 to ensure the implementation of international commitments of Turkmenistan, with responsibility for preparation of national reports on the implementation of the relevant UN Conventions on the protection of human rights. The Commission monitors and develops proposals for improving adherence of the current national legislation to the international treaties in the field of human rights.

Turkmenistan underwent three Universal Periodic Reviews (UPR) which is an international process focusing at monitoring the human rights situation in country. The ultimate aim of UPR is to improve the human rights situation in all countries and address human rights violations wherever they occur.

⁴³ Article 124 of Approving and Implementing the Code of Turkmenistan on Social Protection of the Population, 2012

⁴⁴ BTI 2012. Turkmenistan Country Report.

⁴⁵ Two national strategies contain specific measures supporting children with disabilities: National Strategy and Action Plan for 2015-2019 “Maternal, Newborn, Child and Adolescent Health in Turkmenistan” and the National Framework Programme on introducing of pediatrics of development, early detection and early interfere and the Action Plan for 2016-2020.

In the presence of their peers, states are motivated to discuss and accept recommendations aimed at advancing human rights. The overwhelming majority of the previous UPR recommendations provided in 2013 were accepted by the Government of Turkmenistan and are being integrated into the national strategies, legislation, policies and implementation practices.

Turkmenistan's progress in addressing UPR recommendations was discussed in the framework of the 30th session of the Working Group of the UPR, held in May 2018 in Geneva, Switzerland. The delegation of Turkmenistan took part in the 3rd review and presented a progress report with regard to realization of Turkmenistan's UPR commitments. A number of states observed positive developments such as adoption of a new version of the Constitution of Turkmenistan in 2016 and establishing the institution of the Ombudsman in 2017 and provided recommendations for the Government consideration.⁴⁶

There is no a separate governance system specifically focusing on children's rights in Turkmenistan. Committee on the Rights of the Child recommended to the government to establish a body at a high inter-ministerial level with sufficient authority and a strong mandate to coordinate all activities relating to the implementation of the CRC at the cross-sectoral, national, regional and local levels.⁴⁷ In the absence of such a central body, relevant line ministries are responsible for developing, implementing and monitoring respective policies and programmes supporting children. Although the national budget contains allocations to children in relevant sectors, there are no comprehensive and cross-sectoral strategies, with more systemic indicators and tracking systems.

In accordance with the Constitution of Turkmenistan, the President of Turkmenistan proposes a candidate for the role of the Representative for Human Rights in Turkmenistan (the Ombudsman) to the Mejlis of Turkmenistan. The Mejlis of Turkmenistan acts on the proposal of the head of the state and elects him/her. The Ombudsman Act establishes the rights, duties, guiding principles and authority of the Ombudsman and safeguards in respect of his or her activities. The Ombudsman acts independently and does not answer to any State bodies or officials. The Ombudsman was appointed in 2017 and it is expected that as the office strengthens its capacity, it will be more extensively involved into promoting and protecting children's rights.

The Government has been exploring feasibility of establishing a Central Commission on minors related to the prevention of violations of law by minors. Main responsibilities of such a Central Commission may include implementation of the state policy concerning the rights and freedoms of minors, coordination of activities of key partners to prevent law violations among minors, support of adoption of the orphaned or abandoned children, and other important functions.⁴⁸ If such a Central Commission is established and it proves to be effective in addressing cross-sectoral matters in support of minors who may be in conflict with law, it could be beneficial to explore the feasibility of establishing a central body responsible for a broader range of child rights issues beyond juvenile justice.

⁴⁶ News Central Asia, Turkmenistan News Bulletin, May 10, 2018

⁴⁷ Committee on the Rights of the Child, Concluding Observations on the Combined Second to Fourth Periodic Reports of Turkmenistan, March 10, 2015.

⁴⁸ Decree of the President of Turkmenistan on Commission on Cases of Minors, Project, 28 June 2017

3.2 Expenditure on children

Each year over 75 percent of budgetary resources in Turkmenistan are allocated to the social sector.⁴⁹ The President re-confirmed a strong state commitment to the social sphere and ordered the Government to develop the state budget for 2019 and pay particular attention to increasing the funds directed at improving the social and living conditions of citizens, increasing salaries, developing education and healthcare spheres.⁵⁰ Budget allocations for children's rights are not presented separately within the national budget, but are included within sectoral budget lines such as education and health care.

In accordance with the Law of Turkmenistan "On Approval and Enactment of the Budget Code of Turkmenistan", the budgets of the pilot ministries of Turkmenistan are budgeted in the State budgets of Turkmenistan for 2016-2018. It is also envisaged to develop, review, approve and execute the State Budget of Turkmenistan for 2019-2021 (the planning period) in accordance with the Budget Code of Turkmenistan.

Turkmenistan's economy is sensitive to instabilities in oil prices and international economic climate that would require more effective finance management and public sector governance to ensure that the available resources are used effectively to advance children and women's rights. In 2014 and 2015, Turkmenistan's Parliament approved a number of laws to strengthen the accountability of public officials and enhance the capacity and efficiency of public service delivery. These included an anti-corruption law, a modern budget code and a public procurement law that came into force in March 2014, January 2015, and July 2015 respectively.⁵¹ The budgeting system, however, is not outcome- or programme-based.

It can be expected that the development of the first Medium Term Expenditure Framework (MTEF) for 2019-2021, linking policy, planning and budgeting will promote strategic results-focused planning and budgeting, as also recommended by the inter-agency missions for Mainstreaming, Acceleration and Policy Support for SDGs in Turkmenistan in 2018. The time span of an annual budget is too short for the purpose of adjusting expenditure priorities. In 2018, state allocations to the social sphere account for 77.5% in the expenditures of the State Budget of Turkmenistan I level. Of the total amount of funds allocated to finance public and social services, 12.6% is allocated to health care. At the time the budget is formulated, most of the expenditures of the budget year have already been committed for capital expenses, salaries of civil servants, etc. Other costs can be adjusted, but often only marginally. This means that any real adjustment of expenditure priorities to address government priorities, if it is to be successful, has to take place over a time span of several years.

Elements of medium term budgeting, however, can help line ministries to estimate the longer-term costs of programmes and government policies, and provide longer time horizon for the purpose of adjusting expenditure priorities for line ministries and national programmes. This will facilitate making

⁴⁹ Turkmenistan, National report submitted in accordance with paragraph 5 of the annex to Human Rights Council resolution 16/21, Human Rights Council, Working Group on the Universal Periodic Review Thirtieth session, 7-18 May 2018

⁵⁰ Turkmenistan starting to form state budget for 2019, <https://en.trend.az/business/economy/2911870.html>

⁵¹ International Bank for Reconstruction and development international finance corporation multilateral investment guarantee agency joint country engagement note (cen) for Turkmenistan for the period FY16-FY17 October 7, 2015

strategic policy choices through prioritization of programmes within an available resource envelope at a sectoral and national level.

The Domestic General Government health expenditure constituted only one percent of GDP in 2015, which is low by international standards.⁵² In comparison, corresponding figures of the majority of countries in the region ranged between 2.4 and 3.7 percent.⁵³ The information on user fees for healthcare is not available but particularly recently households have been devoting a growing share of their total monthly consumption on out-of-pocket payments for healthcare services.⁵⁴

Total government expenditure on education was around average international allocation levels at 4 percent of GDP in 2015, which is comparable to the range that is observed in the region: 3-7 percent.⁵⁵

3.3 Data availability on children's rights

The availability of data relevant to children and women's rights in Turkmenistan is limited. This represents a severe obstacle to the efforts of all stakeholders to monitor, analyze, and report on the situation, to plan and budget for the fulfillment of children and women's rights. The main limitation is the lack of a system for regular collection of disaggregated data on the growth, development, health, behaviour and morbidity of schoolchildren and adolescents (by age and gender), insufficient data on children with disabilities, children in contact and conflict with law, lack of indicators on victims of violence, and children affected by familial conflicts. Due to limited data, comprehensive international comparisons of child well-being in Turkmenistan with other countries in the region is very problematic. The Government has started to make progress in regard to discussions on data availability and disaggregation, particularly encouraged by the SDG adaptation and monitoring process. UNICEF Transformative Monitoring for Enhanced Equity (TransMonEE) research programme that systematically monitors indicators of child well-being as well as their economic and social determinants in the transition economies and contains over 500 social and economic indicators has only limited data on situation of children in Turkmenistan.⁵⁶

Turkmenistan conducted its first population and housing census in 17 years in 2012. However, the census findings have not been made public yet, which prevents proper estimation of the size of different population groups, including children. The next census is planned for 2022 and it is expected that it will provide the up-to-date population data that will enhance equitable distribution of

⁵² WHO, Global Health Expenditure Database, <http://apps.who.int/nha/database/Select/Indicators/en>

⁵³ UNICEF, Monitoring the situation of children and women in Europe and Central Asia, TransMonEE <http://transmonee.org/countries/>

⁵⁴ Out of pocket expenditure is any direct outlay by households, including gratuities and in-kind payments, to health practitioners and suppliers of pharmaceuticals, therapeutic appliances, and other goods and services whose primary intent is to contribute to the restoration or enhancement of the health status of individuals or population groups. Source: World Health Organization Global Health Expenditure database (see <http://apps.who.int/nha/database> for the most recent updates).

⁵⁵ UNICEF, Monitoring the situation of children and women in Europe and Central Asia, TransMonEE <http://transmonee.org/countries/>

⁵⁶ Transformative Monitoring for Enhanced Equity (TransMonEE), <http://transmonee.org/about/>

public funds across all sectors and will benefit children and women, especially the most vulnerable groups.

The Multiple Indicator Cluster Surveys (MICS) were conducted jointly by the State Statistics Committee of Turkmenistan and UNICEF in 2006 and 2015-16.⁵⁷ MICS are representative surveys that contribute to SDG monitoring and capture information on such diverse topics as maternal and child health, education and child mortality, child protection, HIV/AIDS and water and sanitation and provide internationally comparable, statistically rigorous data on the situation of children and women that allow assessing changes in children conditions.⁵⁸

As vulnerabilities and vulnerable groups are not defined universally at the national level, and only some disaggregated data are available from the SSC, it limits the possibilities to develop and implement well targeted state interventions supporting vulnerable groups, including children. The UN Committee on the Rights of the Child recommended, in its Concluding Observations, that data should cover all areas of the Convention and should be disaggregated, inter alia by age, sex, disability, geographic location, ethnic and national origin and socioeconomic background, in order to facilitate an analysis of the situation of all children, particularly those in vulnerable situations.⁵⁹ The leadership of Turkmenistan is putting a strong emphasis on the importance of quality statistical data for decision making and highlighted the urgent need to improve the capacity of the national statistical system.⁶⁰ It is expected that this political will and technical support of the international partners will create an appropriate environment for evidence based policy making conducive to alleviating vulnerabilities and better focused advancement of children's rights. Statistics should not be produced solely to capture Turkmenistan's progress with regard to meeting its international commitments, but it should be deeply embedded into the decision-making process.

On 20 September 2016, Turkmenistan formally adopted a list of 17 SDGs, 148 targets and 175 indicators to be implemented over the next 15 years. It can be expected that the quality and availability of national data to measure child rights implementation will improve as it will set up a measuring system to measure the progress of SDG implementation.⁶¹

Some ministries such as the Ministry of Health and Medical Industry realize very well the importance of quality detailed data for evidence-based policy and programmes development and is introducing the Health Management Information System (HMIS) that will produce, manage and disseminate educational data and information. A very initial step is also being undertaken by the Ministry of Education in regard to the Education Management Information System (EMIS). Once established and operational, the EMIS will provide timely and reliable data for education planning and management, including disaggregated data on children with disabilities in rehabilitation centres.⁶²

⁵⁷ See, mics.unicef.org

⁵⁸ For more information on MICS tools and methodology, see <http://mics.unicef.org/tools>

⁵⁹ Committee on the Rights of the Child, Concluding observations on the combined second to fourth periodic reports of Turkmenistan, 2015

⁶⁰ President Berdimuhamedov replaces statistical committee head, demands reliable statistical data, May 7, 2018, <https://akipress.com/news:606079/>

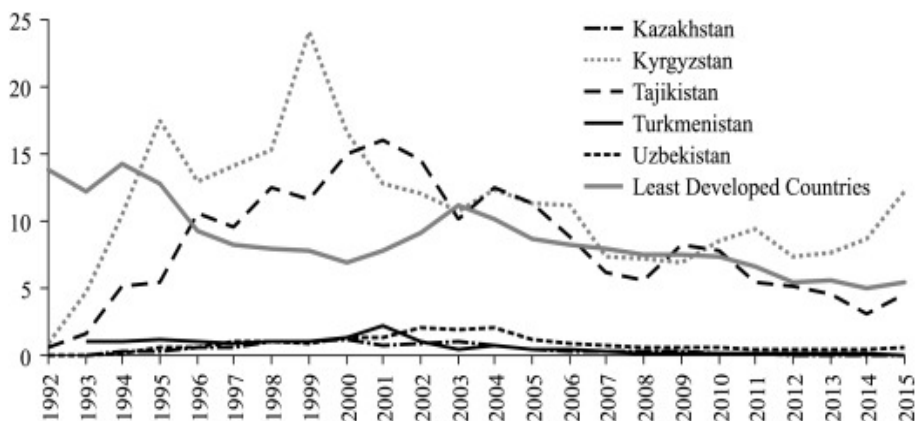
⁶¹ UNICEF, Baseline Assessment for Child-related SDG indicators in Turkmenistan, Ashgabat, 2017

⁶² Frank van Cappelle, UNICEF Consultant, EMIS Development and Monitoring Education Participation in Turkmenistan, 2017

3.4 The aid environment

There is a number of factors that determine the nature and extent of donors' involvement in Turkmenistan that include country's strong economic performance and relative closeness of the country. As Turkmenistan reached upper middle-income status, it is no longer eligible to participate in most development aid programmes. As Figure below indicates, Turkmenistan, Kazakhstan and Uzbekistan received lower shares of official development assistance (ODA) than Tajikistan and Kyrgyzstan.

Figure 5 ODA as a percent of Gross National Income for 5 Central Asian countries



Source: Uuriintuya Batsaikhan and Marek Dabrowski, Central Asia — twenty-five years after the breakup of the USSR, Russian Journal of Economics 3 (2017) 296–320

European Union (EU) institutions and the US are the lead donors in terms of ODA for Turkmenistan, followed by the United Arab Emirates and Turkey, with engagement mostly limited to technical assistance. China and Russia are also important partners. Net ODA to Turkmenistan was 33 USD million in 2016. Almost half of bilateral ODA (48%) was allocated for education, followed by social infrastructure and services (25%) and economic infrastructure and services (9%).⁶³

United Nations' partnership with Turkmenistan is guided by the Partnership Framework for Development (PFD) for the period of 2016-2020.⁶⁴ The PFD 2016-2020 is a strategic framework that includes five strategic areas namely, strengthening systems for quality data and progress monitoring, delivering quality inclusive social services, improving environmental sustainable management, advancing equitable economic growth, strengthening accountability and the rule of law. IMF and World Bank (WB) in Turkmenistan is limited.

⁶³ Source: OECD, <http://www.oecd.org/dac/financing-sustainable-development/development-finance-data/aid-at-a-glance.htm>

⁶⁴ Partnership Framework for Development (PFD), agreed between the Government of Turkmenistan (GoT) and the United Nations, <http://tm.one.un.org/content/unct/turkmenistan/en/home/about-us/united-nations-partnership-framework-for-development.html>

4. The Rights of Children

The internationally agreed rights of children are captured in the Convention on the Rights of the Child (CRC) that was adopted in 1989. The CRC claims, on the one hand, children's right to individuality and to have their views on all matters which affect them taken seriously; and on the other, in the light of their developmental state and vulnerability, rights to special care and protection. Under the terms of the Convention, governments are required to meet children's basic needs and help them reach their full potential. Central to this is the acknowledgment that every child has basic fundamental rights. These include the rights to:

- Life, survival and development
- Protection from violence, abuse or neglect
- An education that enables children to fulfil their potential
- Be raised by, or have a relationship with, their parents
- Express their opinions and be listened to.

The following discussion examines the current status and progress made in realization of these rights. Particular focus is made at exploring determinants and processes leading to vulnerabilities and identification of vulnerable groups.

4.1 Child health and wellbeing

This section examines the right to life, a universal human rights principle enshrined in all international human rights instruments including the CRC. Article 6 of CRC recognises that every child has the right to life, survival and development. This provision has been interpreted to mean that the State should adopt all appropriate measures to ensure and respect the right to life. All children, wherever they live, should have access to health care facilities and quality health services.

4.1.1 Healthcare system

The Ministry of Health and Medical Industry (MOHMI) of Turkmenistan funds and oversees primary health care institutions, pharmaceutical services, outpatient clinics and hospitals, pharmacies and research centres, other agencies and government bodies and organizations. Structure of the

Primary health care (PHC) services in urban and rural areas are provided by city "health houses", which offer diagnostic procedures; treatment of the most common illnesses and injuries; curative and preventive measures; immunization; community awareness raising and health education; and mother-and-child health protection measures. The health houses play an essential role in the detection and follow-up of all patients' health related problems.

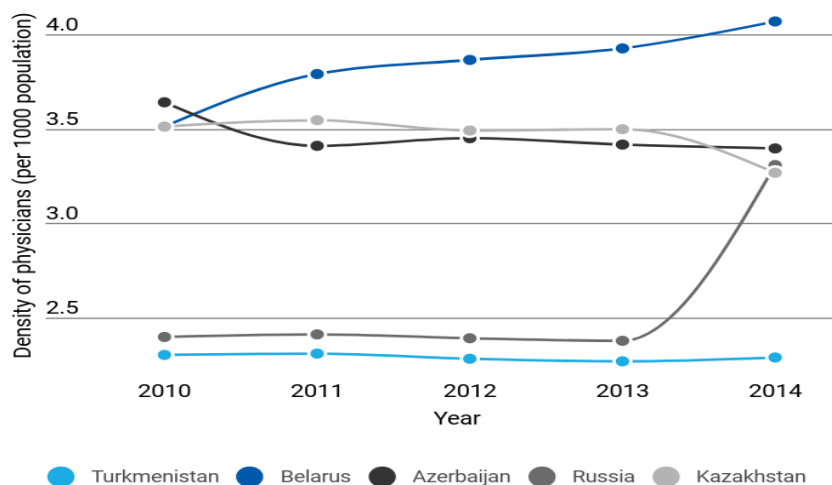
Over the previous years, the national authorities heavily invested into physical infrastructure of the health care system and constructed highly specialized modern hospitals and diagnostic centres that are well distributed around the country. Every district, for instance, has a multi-profile hospital with maternity ward and almost all of them have the status "Child Friendly Hospital" awarded by WHO/UNICEF experts.

Healthcare is funded through national budget funds, user fees and voluntary health insurance, with a relatively stable share of state funding over the last years and constantly increasing share of out of pocket pay. The health budget is deconcentrated both for investment and recurrent expenditures. Funds are allocated according to an undisclosed formula which includes population and hospital beds and is broadly equitable according to the MOHMI. Budgets are developed by economic classification and are released to velayat level through sub-accounts of central account. Up to 30% of facilities have chosen to be wholly or partly self-financing and charge user fees.⁶⁵

The total government health expenditure was 1.1 percent of GDP in 2015, which is one of the lowest regionally and globally. Moreover, the total share of state health care expenditures in Turkmenistan declined from 1.2 percent of GDP in 2015 to 1.1 percent of GDP in 2016.

The number of physicians only insignificantly increased from 13,000 in 2007 to 13,800 in 2016, while the number of pediatricians increased from 315 to 349 for the same period.⁶⁶ In comparison with other countries in the region, the density of nursing and midwifery personnel and the density of physicians are low (number per thousand population) in Turkmenistan. The graph below compares density of physicians in selected countries of the region with that in Turkmenistan.

Figure 6 Density of Physicians, number per thousand population



Source: World Development Indicators, <https://datacatalog.worldbank.org/dataset/world-development-indicators>, 2018

Some practice of informal payments remains in Turkmenistan. If one adds the cost of medicines, which are formally subsidized but are not always possible to obtain, total out-of-pocket payments for healthcare constitute substantial financial burdens for households, particularly low-income households with children.

⁶⁵ Tim Cammack, Clara Picanyol, Alina Lipcan, and Tomas Lievens, Strengthening equity focused budgeting for Maternal, Newborn and Child Health (MNCH) related programmes Turkmenistan – Key findings and way forward, 2015

⁶⁶ The State Statistical Committee of Turkmenistan, Statistical Yearbook of Turkmenistan, 2017

A majority of health care services are expected to be financed through user fees and all health facilities are at liberty to charge fees for services, with exception of some categories of patients such as children with disabilities. The central children's hospital can charge fees as well.

Out-of-pocket as percentage of Current Health Expenditure (CHE) was estimated at 71 percent in 2015, which is quite significant especially for poor households that have to pay.⁶⁷ The government finances a basic benefit package for the entire population, but often immediate payment in cash is demanded before quality medical services are provided.

The national authorities introduced a series of targeted policy and programmatic measures focusing at maternal and children health that include the National Nutrition Programme and Action Plan 2012-2017 and the National HIV Programme 2012-2016. The State Health Sector programme "Saglyk" for 2015-2025 and the National Strategy and Action Plan on Maternal, Newborn, Child and Adolescent Health in Turkmenistan for 2015-2019, for instance, focus at improving quality of health services, including neonatal care, early childhood development and early interventions services. Some of specific measures include introduction of modern methods of treatment, ensuring supply of high-quality medical services to the entire population and improving doctors and nurses training.

Primary healthcare system, which is a primary interface for community engagement on positive parenting and health promotion is often overloaded. In addition, frontline workers are not sufficiently trained to effectively communicate essential lifesaving and development messages. The health communication is characterized by one-directional communication which tends to be top-down, often involving an organization telling people what to do without recourse to discussion.

4.1.2 Maternal health

Early childhood development is significantly impacted by conditions prior to birth and the overall status of women before and during pregnancy. Compromised nutritional status and health of women before and during pregnancy generally impact fetal growth and development and can result in low birth weight.

Pregnant women and young mothers in Turkmenistan receive counselling and education in the "school of mothers" at PHC facilities during regular visits and on demand. A training programme on the rational feeding of young child based on WHO recommendations has been developed to strengthen capacities of PHC providers, with UNICEF support. Nutrition counselling is becoming an integral part of antenatal visits.

There is universal access to skilled medical care during the birth in Turkmenistan. 99% of deliveries are assisted by medical personnel in maternities. All mothers (100%) received health checks following birth while in the medical facility or at home.⁶⁸

⁶⁷ WHO, Global Health Expenditure Database, Global Health Expenditure Database

⁶⁸ Turkmenistan, The State Statistical Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016

Despite the expansion of services available to pregnant women, the maternal mortality rate per 100 000 live births remains high and was estimated at 42 in 2015, higher than in many countries in the region.⁶⁹ Most maternal deaths are preventable, as the health-care solutions to prevent or manage complications are well known. Around 80 percent of maternal deaths are the result of direct causes and not providing timely emergency obstetric care (EmOC). While hypertensive disorders and obstructed labor significantly reduced with UNFPA support to standardization of the EmOC and contributed to the decreased MMR since 2010, the hemorrhage remains as the leading cause for the maternal mortality. All women need to have access to skilled care during childbirth and care and support in the weeks after childbirth and specific factors contributing to such relatively high rates have to be identified and addressed.

Appropriate family planning services are provided in 95 public family planning service delivery points established with UNFPA support at health centre of each district, albeit the contraception is widely available in private shops. Almost all women have heard of contraception methods and the mean number of methods known by women is 6 (of 14 methods).⁷⁰ The percentage of demand for contraception satisfied among women age 15-49 currently married or in union is high at 81 percent. Current use of modern methods of contraception was reported by almost half of all women (47.1%) currently married or in union. Since 2017 the Ministry took full responsibility for contraceptives supplies to the country after 25 years of uninterrupted supplies by the UNFPA. Despite this positive result, 12 percent of women age 15-49 years currently married or in union, have an unmet need for family planning.⁷¹ To some extent it explains a relatively high number of abortions (798 of women under 20 in 2015 and 11,465 for all age groups). Most women who have an abortion do so because they become pregnant when they do not intend to, which indicates the unmet need for family planning.

According to the human papillomavirus (HPV) Information Centre, cervical cancer ranks as the third leading cause of female cancer in Turkmenistan and the second most common female cancer in women aged 15-44. Breast cancer is the highest with 25% of incidence reported in 2012. HPV vaccination rates are high.⁷²

4.1.3 Infant health (0<1 years)

An increasing number of children are surviving in Turkmenistan. Between 1990 and 2015, Turkmenistan reduced its under-five mortality from 95.6 to 51.5 per 1,000 live births⁷³, but disparities

⁶⁹ [Trends in estimates of maternal mortality ratio \(MMR; maternal deaths per 100 000 live births\) and progress towards MDG 5A, by country, 1990, Trends in Maternal Mortality: 1990 to 2015, Estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division 2015](http://apps.who.int/iris/bitstream/handle/10665/193994/WHO_RHR_15.23_eng.pdf;jsessionid=506EB5CF31A172B76083DF0AE7D48F1D?sequence=1)

⁷⁰ Turkmenistan, The State Statistical Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016

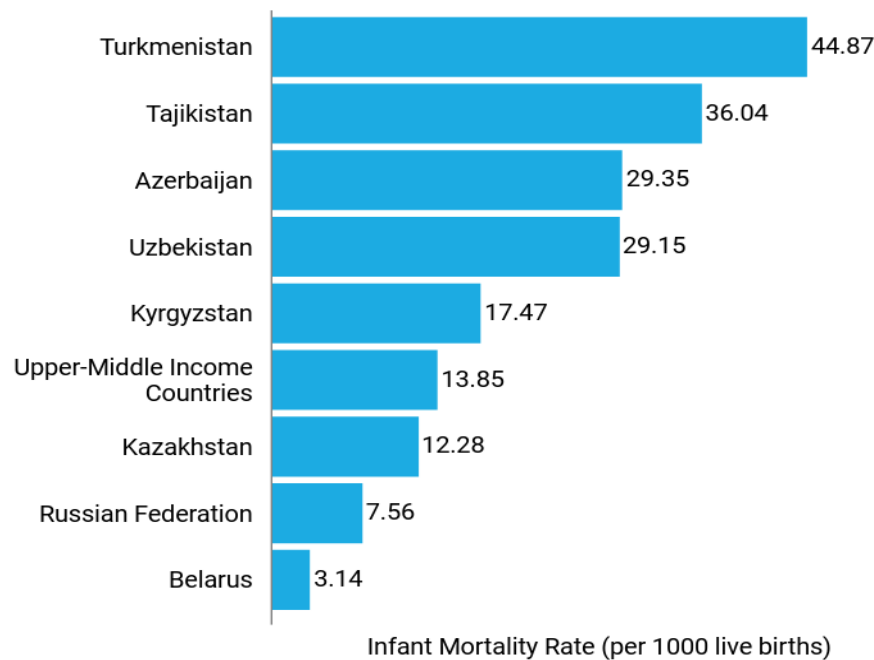
⁷¹ Turkmenistan, The State Statistical Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016

⁷² Human Papillomavirus and Related Diseases Report, Turkmenistan, 2017, <http://www.hpvcentre.net/statistics/reports/TKM.pdf>

⁷³ UN, World Population Prospects, 2017 Revision

persist, with mortality rates being much higher for children from poor households and rural residents. The infant mortality was reduced from 70 to 43 per 1,000 live births from 1990 to 2016.⁷⁴ In many respects, this progress can be attributed to improved quality of services that promote and protect children’s right to survival and development. The decline in child and infant mortality is attributable also in part to the introduction of modern perinatal technology and expansion of quality health care services. Despite these achievements, as the chart below demonstrates, it is higher than in some countries in Europe and Central Asia.

Figure 7 Infant mortality rate (infant death per 1,000 live birth), Turkmenistan and selected countries, 2015



Source: World Population Prospects, 2017

Despite significant investments and interventions focusing on children’s health, relatively high rates of neonatal mortality remain a point of concern. As they are dying from preventable causes, the government with UNICEF support is undertaking a perinatal mortality audit to determine the causes and factors of perinatal death and develop targeted interventions to reduce it. The MoHMI has adopted regulations on neonatal screening in an attempt to reduce risks to vulnerability from birth. In addition, a number of trainings on newborn care and neonatal resuscitation are delivered to healthcare professionals to improve quality of newborn care and resuscitation

The National Strategy and Work Plan for 2016-2019 "Health protection of maternal, newborns, children and adolescents in Turkmenistan", the programme "Pediatrics Development and Early Intervention" for 2016-2020, and infant breastfeeding and the introduction of the "Child-Friendly Hospital" status deserve a special attention. The government of Turkmenistan has joined a global

⁷⁴ UNICEF headquarters by Lucia Hug, David Sharrow, and Danzhen You on behalf of the United Nations Inter-agency Group for Child Mortality Estimation (UN IGME), Levels and Trends in Child Mortality, Report 2017

initiative for Every Newborn UNICEF and WHO Programme (ENAP) since 2017 which aims at body providing an overview of key achievements and gaps in existing reproductive, maternal, newborn, child and adolescent health programmes. It is expected that Turkmenistan's participation in this partnership and adoption of its own plan will enhance and support coordinated, comprehensive planning and implementation of newborn-specific actions and expose to experiences and approaches of other countries in these areas.⁷⁵

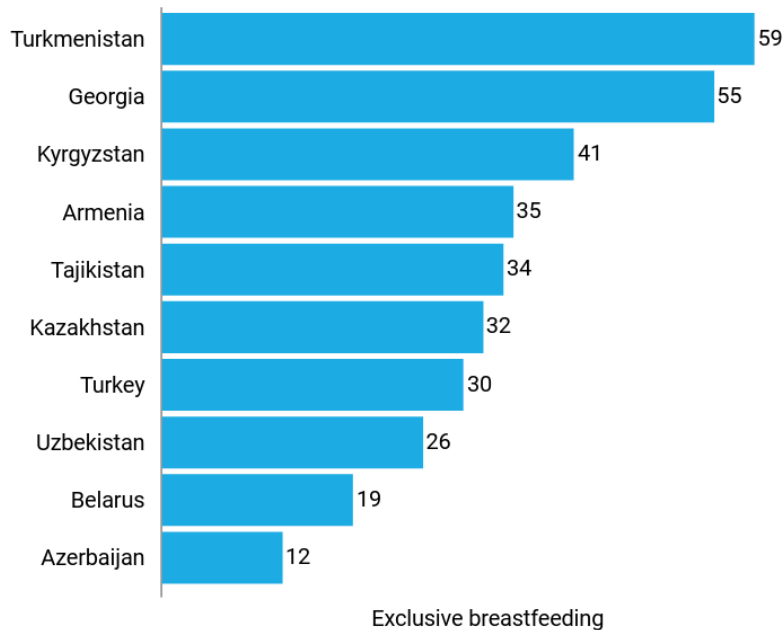
Since 2001, national vaccination and procurement is fully financed by the state budget, with continuously increasing budgets allocated for these purposes. The government annual investment in immunization reached over 11 million USD in 2016. Since all children receive vaccines for free, there is a high level of coverage regardless of household wealth. The percentage of children who had all the recommended vaccinations by their first birthday (MMR by their second birthday) is 95 percent. Turkmenistan was certified as polio free in 2002 and malaria free country in 2010. The Government maintains its commitment to ensure that every child in the country is fully vaccinated and is planning to introduce new vaccinations.

Proper feeding of infants and young children can increase their chances of survival. It can also promote optimal growth and development, especially in the critical window from birth to 2 years of age. Turkmenistan introduced and funded the implementation of the Law on Promotion and Support of Breastfeeding. The law regulates the national infant nutrition practices through supporting breastfeeding and regulating marketing of breast milk substitutes. A comprehensive set of measures to implement the Law and protect, promote, support breastfeeding and ensure timely, safe and age-appropriate complementary feeding were introduced by the national authorities. The measures are very comprehensive and cross-sectoral - the Labour Code (Article 248), for example, requires enterprises that employ many women organize crèches and kindergartens, rooms for breastfeeding of babies as well as rooms for women's personal hygiene. As a result, exclusive breastfeeding rate among children under 6 months of age increased from 10.9 percent in 2006 to 58.9 percent in 2015.⁷⁶ Turkmenistan shows the highest rates of exclusive breastfeeding in the region and has the fastest growing breastfeeding rates compared to other countries.

⁷⁵ Every Newborn is a joint action platform for the reduction of preventable newborn deaths and stillbirths, <https://www.healthynewbornnetwork.org/issue/every-newborn/>

⁷⁶ Turkmenistan, The State Statistical Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016 and Turkmenistan Multiple Indicator Cluster Survey 2006

Figure 8 Exclusive breastfeeding



Source: UNICEF, State of the World Children, UNICEF, 2016 Turkmenistan data from MICS 2015/2016 (a visual is from Tamar Gotsadze, MD., PhD, Evaluation of Turkmenistan's National Nutrition Programme for 2013-2017 as It Relates to Children and Mothers and UNICEF's Contribution to its Development, Implementation and Monitoring, Final Evaluation Report, 2017)

There remain significant challenges, however, predominantly in access to quality services and basic life-saving services. There are also significant challenges to introduce effective infection control in health care facilities. Caregivers do not have sufficient knowledge and skills to provide essential care for their young children at home, as well as clearly articulate their demands for quality healthcare. Home visiting system operating within well-established health service platform can be strengthened to address these gaps. Right now, there are not a sufficient number of home visiting nurses to support quality support to families during the critical first 2,000 days of a child's life. In addition, the home visiting system has to improve equal distribution of health professionals across regions, their training, and compliance with care protocols.⁷⁷

4.1.3 Young child health (1-4 years)

In June 2016, the "National Concept for Pediatrics, Development and the Establishment of Services for the Early Detection of Childhood Disorders and Early Intervention" and the Action Plan for 2016–2020 were adopted, which envision establishment of integrated early childhood development services with focus on children with disabilities and their families based on a strong inter-sectoral and multi-disciplinary approach.

Considerable progress was achieved at the policy level. The draft ECD Framework and Action Plan for 2018-2023 has been drafted in line with the newly adopted NPAC and will be submitted for Government's consideration. A draft Regulation on Provision of Early Intervention services at all

⁷⁷ UNICEF, PHC MCH home visiting assessment in Turkmenistan, 2012

levels was developed and is under MOHMI consideration. Routine monitoring of child development with the International Guide for Monitoring Child Development (GMCD) is proposed for inclusion in the main Ministry Regulation on Primary Health Care, which is under approval. Intensive work in building capacity of core specialists in this area resulted in establishment of two National Training Hubs and assignment of a specialist in each district responsible for ECD and trained in GMCD package.

Early interventions services are being established in selected areas, which include 2 district- and 3 regional-level ECD centres. Use of the GMCD on a pilot basis allowed families and childcare practitioners to monitor children's development from the start and enabled them to reach their potential. It emphasizes, in particular, strengthening of coordination and referral mechanisms from local to national levels to provide effective, efficient, and quality services to children with developmental delays and/or disabilities and their families. Since August 2015 over 3000 children received early intervention services at national level ECD centres, after being referred from local levels. The regulatory framework on the national scale up of neonatal screenings and referral pathways for all children country was developed with UNICEF's support in 2017.

4.1.4 Adolescent and youth health (13-19 years)

Growing number of adolescents in the country are potentially prone to adopt new normative frameworks and healthy and pro-social behaviours and life skills. School settings have particular potential to spearhead a participatory, child-centred methodology that allows adults and children to learn about their health-related and other rights and put the right into practice. Healthy life styles are taught to school children across all grades, yet the content, methodology and effectiveness of learning have to be reviewed and critically assessed. Ensuring access to appropriate health related information by children on a regular basis within the school curriculum and outside of it, be means of digital learning and other platforms such as school clubs have to be further promoted. Partnerships with public organizations, non-governmental organizations, youth groups and the media are to be explored and put in place. This also includes provision of sensitization for families, be it education or counselling for parents and other family members to encourage positive relationships with young children and to enhance their understanding of children's issues and rights. Such programmes should involve both fathers and mothers.

According to a recent survey conducted by UNFPA, the extent of physical activity is declining as children grow up. About 18 percent of respondents indicated that they were playing for 2 hours on the computer or game device, more often these are boys and residents of Ashgabat. Ten percent of children spend 2 or more hours per day at the computer. With age, the percentage of children is increasing, similarly the number of computers in households is increasing.⁷⁸

Physical activity as one of measures to address obesity and prevent non-communicable diseases is being promoted by the government. The National Programme for the Support and Development of Sports and Physical Education in Turkmenistan 2011-2020 focuses at the promotion of physical education, sports and healthy lifestyle and the active engagement of citizens in physical education and mass sports. The Ministry of Health and Medical Industry is collaborating with the State

⁷⁸ UNFPA, Report on key findings from the Health Behavior in School-aged Children (HBSC) random sampling survey among secondary school students of Turkmenistan, 2015

Committee of Sports, other ministries, the municipalities of the regions and Ashgabat, and social organizations to ensure the active participation of the country's youth in the activities held. Very recently, in July 2018, a National Strategy for 2018-2025 to increase the physical activity of the population in Turkmenistan was adopted

The age-specific fertility rate for women age 15-19 years is 28 births per 1,000 women with notable differences by regions. In Ahal velayat, for instance, women in the adolescent period are more likely to have a birth (46 births per 1,000 women) compared to women from Balkan velayat (10 births per 1,000 women). Adolescent birth rate is 1.4 times higher in rural compared to urban areas (35 births per 1,000 and 25 births per 1,000 women).⁷⁹ To a large extent, it can be attributed to the fact that women 15-19 are far less likely to use contraception than older women and have an unmet need for family planning.

4.1.5 Nutrition

For women of childbearing age, good nutrition is important for preparing the body for the demands of pregnancy. Nutrition of the fetus begins at conception. For this reason, the nutrition of the mother is important from before conception (probably several months before) as well as throughout pregnancy and breastfeeding. The growing evidence shows that compromised nutritional status for women as they approach pregnancy and during pregnancy is closely linked to both low birth weight and stunting in early childhood. Three indicators are normally used to measure the nutritional status of children: weight for age (underweight), height for age (stunting) and weight for height (wasting).

Weight at birth is a good indicator not only of a mother's health and nutritional status but also the newborn's chances for survival, growth, long-term health and psychosocial development. Three factors have most impact: the mother's poor nutritional status before conception, short stature (due mostly to under nutrition and infections during her childhood), and poor nutrition during pregnancy.

In Turkmenistan, 3.2 percent of children under the age of five are underweight and 0.7 percent are classified as severely underweight. In comparison, in 2006, 9.2 percent of children under the age of five were underweight and 2.6 percent were severely underweight.⁸⁰

11.5 percent of children are stunted or too short for their age and 4.2 percent are wasted or too thin for their height. In comparison, in 2006, 18.9 percent of children were stunted or too short for their age and 7.2 percent were wasted or too thin for their height.⁸¹

Despite such progress made in improving nutritional status of women and children, child malnutrition remains one of the most pressing health issues. In addition to malnutrition, a problem of obesity is becoming more prominent. 5.9 percent of children under five were overweight or too heavy for their

⁷⁹ Turkmenistan, The State Statistical Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016

⁸⁰ Turkmenistan, The State Statistical Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016 and Turkmenistan Multiple Indicator Cluster Survey 2006

⁸¹ Turkmenistan, The State Statistical Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016 and Turkmenistan Multiple Indicator Cluster Survey 2006. Re-calculated figures for 2006 to reflect the WHO growth standards.

height in 2016, in comparison with 4.5 percent in 2006. Obesity is most common in children from families with either high incomes or relatively few children. The percentage of overweight children increases by age, reaching 11.5 per cent among 7-year old children nationwide (similar among boys and girls) and 19.1 per cent in Ashgabat. 85 percent of boy and girls of the same age have a normal weight while 4 percent are underweight.⁸² While adult males (aged 18-69) are more likely to be overweight than females (51 vs. 46 percent), obesity is more widespread among women (18 vs. 12 percent).⁸³

Iodine Deficiency Disorders (IDD) is the world's leading cause of preventable mental retardation and impaired psychomotor development in young children. Turkmenistan was the first of the ECA countries and fourth in the world that, on behalf of UNICEF, WHO and the International Council for Control of Iodine Deficiency Disorder, was awarded the International Certificate for achieving optimal iodine nutrition in the population through salt iodization and sustained elimination of iodine deficiency disorders. MICS 2016 confirmed almost universal (97%) consumption of iodized salt across the country.

Vitamin A deficiency is one of the most important causes of preventable childhood blindness, disease and premature death. One in two children aged 6-59 months had vitamin A deficiency, which contributes to both child morbidity and mortality in 2011. Some 7.2 percent were suffering from severe deficiency.⁸⁴ These data, however, are outdated and require updating.

Wheat is an important cereal crop in Turkmenistan. To address public health issues due to anemia, the Government has introduced and is fully funding a mandatory flour fortification with iron and folic acid micronutrients (annual public funding of US\$ 0.5 million) since 2006. Fortification is the practice of deliberately increasing the content of an essential vitamins and minerals in food to improve its nutritional quality. Quantity and composition of micronutrients added to the enriched food have been determined with involvement of international UNICEF experts. New internal and external monitoring guidelines have been developed and are in use by all flour mills across the country.

Anemia remains a serious public health issue. Although the most recent data are not available, anemia prevalence in the country was at 44 percent among children aged 6-59 months and 57 percent among non-pregnant women of reproductive age in 2011.⁸⁵ As per the WHO standards, anemia of more than 40 percent of the target groups represents a moderate to significant public health issue. The causes of high rates of anemia are not fully understood in Turkmenistan as the country lacks most recent data on anemia, actual food consumption patterns and caloric characteristics of consumed food products, etc.⁸⁶ It is expected that the upcoming national Nutrition Programme 2019-2025 will address this evidence gap and will include additional research such as

⁸² MoHMI and WHO, *Childhood Obesity Surveillance Initiative (COSI)*, Turkmenistan 2015-16.

⁸³ MoHMI and WHO, *Turkmenistan Stepwise Approach to Surveillance (STEPS) for non-communicable diseases (NCDs)*, 2018.

⁸⁴ UNICEF, National nutrition study with a focus on anemia and vitamin A deficiency in Turkmenistan, 2012

⁸⁵ UNICEF, National nutrition study with a focus on anemia and vitamin A deficiency in Turkmenistan, 2012

⁸⁶ Tamar Gotsadze, MD., PhD, Evaluation of Turkmenistan's National Nutrition Programme for 2013-2017 as It Relates to Children and Mothers and UNICEF's Contribution to its Development, Implementation and Monitoring, Final Evaluation Report, 2017

development of a Dietary Profile Study of Mothers and Children that will collect data uncovering the causes of anemia.

4.1.6 Water, sanitation and hygiene

Access to water resources is a challenge with significant implications on equity. The water availability is estimated at just below 5,000 m³/capita/year, which is still above the water scarcity threshold of 1,700 m³/capita/year, and for instance slightly better than the situation in neighboring Kyrgyzstan.⁸⁷

Overall, 83 percent of the population uses an improved source of drinking water – 98 percent in urban areas and 73 percent in rural areas. More than half of the population (54 percent) uses piped water, 21 percent use source drinking water from a tube-well/bore-hole and 16 percent from a tanker truck (an unimproved source). In comparison, in 2006 70.8 percent of the population used an improved source of drinking water.⁸⁸ The entire population of Turkmenistan use improved sanitation.

The source of drinking water for the population varies strongly by region. The best situation is in Ashgabat city where population use piped water into dwelling or into yard/plot (61 percent) and bottled water (39 percent). A less favourable situation is in Ahal and Mary velayats, where 38 percent and 36 percent respectively use drinking water from tanker truck. The use of tube-well / bore-hole is widespread in Lebap velayat (42 percent) and in Mary velayat (32 percent).

In general, 69 percent of household members in households using unimproved drinking water sources used appropriate water treatment methods. Use of appropriate water treatment methods are widespread in Lebap velayat (90 percent) compared to Ahal velayat where this indicator is at 52 percent.

With regards to hygiene practices, the situation is more controversial. The 2016 MICS shows very high rates for handwashing facilities. In almost all households in Turkmenistan (100 percent), there is specific place for handwashing and the percentage of households with a specific place for handwashing where water and soap are present is very high (99 percent). Handwashing with water and soap is the most cost-effective health intervention to reduce both the incidence of diarrhea and pneumonia in children under five. The evidence from the 2017 Knowledge, Attitude and Practices (KAP) survey on childrearing practices for children under 5 showed that only half (56.6 percent) of children over one year washed their hands independently or with adults' help before meal and after visiting toilet. 47.3 percent of children wash their hands after walk/outside activities and almost 1 percent of children over 2 years do not wash hands at all. Even if parents, grandparents and other respondents have certain knowledge on the importance of hand washing, in practice, they do not share this knowledge with their children and do not teach them to wash hands. This evidence related to lack of handwashing practices came in the previous survey and studies supported by UNICEF.

4.1.8 Quality of care

Although Turkmenistan is an upper middle-income country, the main systemic challenges that are being addressed through the ongoing reforms of the health system include:

⁸⁷ Thomas Alveteg, WASH Consultancy for the CEE/CIS region - Report from visit to Turkmenistan, 2012

⁸⁸ MICS 2006 and MICS 2015/2016

- Centralization of a specialized care at the national level, which negatively affects access of rural population living in hard to reach settlements;
- Standards of health care services provision yet to be developed;
- Financial barriers as part of medical services are delivered on fee for service basis. Currently the health care facilities services are expected to be self-financing which is imposing additional financial burden on the population and affecting those who are most vulnerable.

There are five main challenges remain in the country's health service which affects quality of care of mothers and children that have to be addressed:

- Inadequate funding at central and local level;
- Lack of data and poor skills of health managers to analyze available data for informed decision making (not introduced MNCH Quality Assurance Tools);
- Financial and geographical disparity in access to health service;
- Poor quality of care, with lack of skills for utilization of available utilities: state of art equipment in rural and regional health facilities not used properly.
- In PHC/MCH poor management and supervision, insufficient numbers and competencies of health providers, substandard antenatal and post-partum care, particularly in neonatal care, and a lack of early intervention services for children with developmental risks.

4.1.9 Health information and management

One of the major challenges to the overall performance of the health sector is information management. Although there is a network that covers a whole healthcare system, there is a number of capacity issues that limits its ability to provide accurate and timely information to support decision making. There are also too few professionally trained staff to collect and process data, particularly at the local level. The data management is inadequate because of gaps in infrastructure and outdated processes in place where local data is often entered first on paper and later processed on personal computers. Dissemination and use of information is also limited, including important information on the results of health activities and health outcomes.

The official statistics and administrative data on infant, child and maternal mortality rates with disaggregation are not fully available. Evidence-based estimation of child mortality, for instance, is a cornerstone for tracking progress towards child survival goals and identifying priority areas to accelerate progress towards eliminating preventable child deaths. The United Nations Inter-agency Group for Child Mortality Estimation (UN IGME) updates child mortality estimates annually.⁸⁹ The national official statistics and UN IGME data for child mortality vary significantly that requires further exploration and experts' discussions as reliable estimates are crucial for planning national health strategies, policies and interventions.

Public health information and communication is fully managed by the MOHMI, including production, review and dissemination of information. The information is disseminated to the population on health risks and appropriate behaviours, but the information and methods of its dissemination do not always

⁸⁹ UNICEF, Lucia Hug, David Sharrow, and Danzhen You on behalf of the United Nations Inter-agency Group for Child Mortality Estimation (UN IGME), Levels & Trends in Child Mortality Estimates Developed by the UN Inter-agency Group for Child Mortality Estimation United Nations 2017

take into account socio-behavioural realities and are not comprehensive enough to influence behaviour of the targeted audiences.

Child and women rights to health and well-being: Determinants summary

Key determinant	Groups affected	Description
Social norms	Women	Social norms limit women's independence in making health care decisions ⁹⁰ Although data for this indicator is old and requires updating.
Legislation/policies	Women and children, especially the vulnerable groups	<p>Planning and funding is not results-focused and evidence-based. The government health care expenditure is allocated according to inputs, primarily the number of beds and the number of staff in the facility, rather than the number of patients or the population of the area served.</p> <p>A list of essential drugs exists, but it does not reflect the WHO Model List of Essential Medicines for children. The organized procurement and use of essential drugs have many advantages in terms of cost savings and effectiveness and ensuring equity of access of all individuals, including the most vulnerable groups to free medicine. Some free drugs are provided to identified groups (e.g., persons with disabilities) in Turkmenistan.</p> <p>Insufficient focus at health promotion and prevention. As MICS results demonstrate, it is necessary to prioritize the goals of health promotion, prevention of diseases and prophylactics that often remain outside the core focus of healthcare reforms. Prevention of the diseases rather than curative approach could better to advance rights of children and families.</p>
Budget allocations	Women and children, especially the vulnerable groups	State under-investment into health care. Total government health expenditure as percent of GDP was 1 percent in 2015. As a result of limited government funding, doctor-to-population and nursing and midwifery to population ratios remain one of lowest in ECA region. ⁹¹ To ensure sufficient financing, healthcare providers in Turkmenistan tend to overuse fee for service

⁹⁰ Only 41 percent of women alone have the final say in decisions about their own health care. Turkmenistan, The State Statistical Committee of Turkmenistan, Demographic and Health Survey, 2000

⁹¹ According to WHO, in 2014 Turkmenistan had 2.3 physicians and 4.6 nursing and midwifery personnel per 1000 population. Russian Federation, for instance, had 4.2 physicians and 9 nursing and midwifery personnel per 1000 population in 2014. See WHO, Global Health Observatory data repository, <http://apps.who.int/gho/data/node.main.A1444>

		mechanism and may not inform the patients entitled to free services about their rights. Vulnerable individuals, unaware of their rights and being afraid of potential repercussions of demanding free services, have to pay that further exacerbates their vulnerabilities. Despite the constitutional guarantee of free health care and education, the population continues to face out-of-pocket costs for obtaining these services. This creates a large financial barrier to access for the poor and potentially catastrophic expenses for those with severe health problems and/or chronic diseases.
Capacity of relevant partners to deliver supports/services		Poor management and supervision, insufficient capacity in terms of quality and quantity of healthcare providers. Capacity development of health workers takes time, and their knowledge needs to be continually updated.

4.2 A Child's Right to an Inclusive Quality Education

With 31 percent of Turkmenistan's population aged 14 and younger,⁹² high quality and inclusive education is essential for the national human development and economic growth. It allows an individual not only to obtain the necessary skills and be gainfully employed but also adopt social values of the community. This section examines children's right to education and development in Turkmenistan. It is guided by Article 28 of the CRC, which recognizes education as a fundamental right and stresses that its achievement is to be ensured progressively and on the basis of equal opportunity. The right to education implies that not only do all children have a right to receive compulsory free education but also quality education that is aimed at developing one's personality, and physical and intellectual abilities.

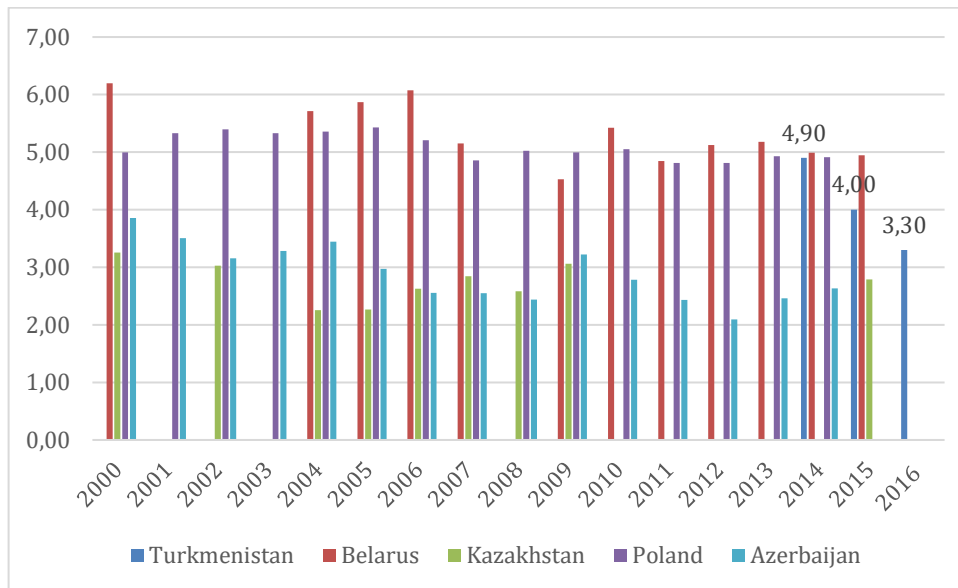
4.2.1 Education system

A strong suite of laws, policies and programmes lay the foundation for getting all school-aged children into schools and ensuring learner-friendly school environments. The Law on Education states that education is free of charge and mandatory for students ages six to 17. The country has recently moved to a 12-year education. The law stipulates that children with disabilities have access to inclusive education, but also contains a provision that those children with disabilities 'who cannot attend mainstream schools will receive education in special education establishments' thus reducing access of these children to mainstream education. For some children, this is a temporary and necessary measure since students of these institutions receive the necessary healthcare services and rehabilitation. The Medical-Pedagogical Commissions decide on transferring these students to mainstream educational institutions. According to the Law, preschool education can take place either at home, in kindergartens or in other preschool facilities.

⁹² UNESCO Institute for Statistics, <http://uis.unesco.org/country/TM>

The Ministry of Education is responsible for nation-wide management of all levels of education. It formulates the education policy, provides funding, designs state standards and requirements regarding the content, levels and scope of education. The Ministry bears responsibility for education quality assurance, licensing and development of personnel certification and professional development of educators. As the chart below demonstrates, the government annual expenditure on education is relatively high by international standards, but public spending on education as a share of gross domestic product decreased from 4.9 percent in 2014 to 3.3 percent in 2016.⁹³

Figure 9 Public spending on education as a share of gross domestic product (%)



Source: UNICEF Turkmenistan and World Development Indicators, 2018

4.2.2 Early childhood education

The definition of ‘early childhood’ varies internationally, but the CRC Committee considers that all young children from birth through infancy, throughout pre-school years and in transition to primary school fall into this category.⁹⁴ The early years of life are characterized by an intense period of learning and development as tremendous changes occur in the brain during this time. Positive experiences during these years result in improved health, social, economic and physical development throughout life. Without adequate early childhood education, young children do not have the necessary skills to fully benefit from the education they receive at the primary level.⁹⁵

In 2016, in Turkmenistan there were 1056 preschool establishment, with 242,400 children attending them. There were 844 children pre-school institutions in urban areas, and 212 institutions in rural areas, attended by 204,9 thousand and 37,5 thousand children respectively.⁹⁶

⁹³ UNICEF estimate based on the State Statistics Committee of Turkmenistan, Statistical Yearbooks of Turkmenistan 2017

⁹⁴ UN Committee on Rights of the Child (2005) General comment 7, CRC/C/GL/7

⁹⁵ World Bank, Amina D. Denboba, Rebecca K. Sayre, Quentin T. Wodon, Leslie K. Elder, Laura B. Rawlings, and Joan Lombardi, Stepping up Early Childhood Development: Investing in Young Children for High Returns, 2014

⁹⁶ The State Statistical Committee of Turkmenistan, Statistical Yearbook of Turkmenistan, 2017

Children usually attend a preschool institution five days a week. Their programmes follow the curriculum: children in senior nursery and junior kindergarten groups have 1-2 classes per day, children in middle kindergarten groups have 2-3 classes, and children in senior (preparatory to school) groups have 3-4 classes per day. Pre-school education for children 3-6 years old covers the following areas: sensory education, literacy, language development (fiction), familiarization with the environment and nature, elementary mathematical concepts, drawing, modeling, application, design, music and singing, physical education, foreign language (English, Russian). Foreign languages are studied in senior (preparatory to school) groups.

The enrolment rates in pre-school education over recent years have been much influenced by birth rates that, after a continuous decline after 1990, began to increase from 2003 as well as a significant expansion of preschool institutions across the country. Over the previous years, the national authorities constructed a number of kindergartens across the country, and improved quality and relevance of care provided and preparation for school. Under the National Programme, it is planned to additionally build 164 kindergartens from 2018 till 2024, with the most significant increase in Akhal velayat (42 new kindergartens) and only 6 to be constructed in Ashgabat.⁹⁷

Engaging parents in early learning

The children who attend classes with their parents at the Parental Centre in Sakar Etrap Kindergarten know what they want to do when they grow up. Mekan, 5, wants to be an artist; Azat, 5, wants to be a singer; Shirin, 5, wants to be a musician; Esen, 5, wants to teach reading and writing; and Gozel, 6, wants to teach children how to play.

The Centre was established by the Government with UNICEF's technical support in response to the low rates of kindergarten attendance nationwide. Forty-six per cent of children in the first year of primary school attended pre-school during the previous school year. Given that early education has been shown to help children do better in school over the long run, UNICEF supported the development of a curriculum based on play and child development to facilitate early learning for children about to begin Grade 1 and build the knowledge of parents. Once a week, the students and their parents attend classes at the Parental Centre located within the local kindergarten.

"We can really see the difference between children that attended pre-school preparation and ones that did not," said Tamara Yazyeva, Director of the pre-school. "The ones that don't are less confident, less proficient language-wise."

For Zulfiya Azimova, Deputy Head of the Education Department of Lebap region, the parental centres represent a powerful approach not only to developing parenting skills, but also to leveraging the inherent skills that mothers and fathers have for teaching their children. The aim is to build on these innate abilities and provide parents with the knowledge they need to equip their children to learn in school environments.

As the manager of the Parental Centre Programme, Zulfiya also makes home visits to assess the extent to which the home environment is conducive to early learning. She believes that family culture can be an excellent tool for early learning and encourages families to draw on traditional practices such as cooking and weaving to teach their children math and motor skills. "Parents have inherent skills," said Zulfiya. "The focus of our work is to develop those instincts, while also giving them the didactic and interactive skills they need to get their children ready for school."

⁹⁷ National programme of reforming social conditions of the population's life in villages, settlements, towns, districts, and district centres until 2020

MICS results confirm that the pre-school coverage increased from 26 percent in 2006 to 43 per cent in 2015 and school readiness (children who are in the first grade and who attended pre-primary the year before) in 2015 was found to stand at 44.8 percent. 81 percent of children living in the richest households attend such programmes, while this figure drops to 17 percent among children from the poorest households.⁹⁸ Despite a significant increase of pre-school establishments, their coverage is not yet comprehensive, especially in rural areas.⁹⁹ The number of pre-school establishments even decreased in rural areas from 238 in 2015 to 212 in 2016, with a corresponding decline in the number of children attending them from 40,800 to 37,500.¹⁰⁰

Not all children in Turkmenistan attend full day kindergarten. This may be due to different reasons, but some of them include the traditional dependence of children on parents and other persons who care for children at home, remoteness of the preschool institution from the place of residence, and the monthly payment for attending kindergarten. The most common reason remains the traditional dependence of children on parents and other persons who care for them at home. In addition, the recent 10 times increase in monthly kindergarten fees may further negatively impact the early childhood education and pre-primary programmes attendance rates. Attendance of ECD Centers, Parent Education Centers, the Center for the Preparation of Children to the School “Altyn Damja” are free of charge as these institutions are for short-term stay and do not include meals.

“Centres of Counselling Work with Parents” have been created with the purpose of preparing preschool-aged children who are homeschooled for primary education. Staff members provide methodical assistance and consultations to parents who request such services.¹⁰¹ Currently, Turkmenistan engages parents whose children do not attend kindergarten with a variety of supports. The schools funded and run by the State offer Saturday classes for children who are not attending full time Kindergarten and engage parents and children in the teaching and learning process. The Ministry of Education also established one-month pre-preparation at regular schools (usually in August) for children who don’t attend regular pre-school and will be enrolled in primary education starting from September.

In order to ensure universal preschool enrollment of all children, parent educational centers and their branches opened for short-term stay are available for children of pre-school age, including children with disabilities who do not attend pre-school institutions and their parents (centers were opened with UNICEF support on the basis of existing kindergartens and secondary schools, in urban and rural areas). In the centers, children are prepared for school, and parents are provided with methodological and consulting assistance in child development and preparing them for school at home. They are also provided with services to improve their parenting skills. In addition, each school organizes entry to school preparation sessions for preschool-age children living in school catchment area during the summer months.

With the participation of an international consultant on ECD, starting from 2015, the quality of pre-school education was strengthened in accordance with the best international practices, with an

⁹⁸ MICS 2006 and 2016

⁹⁹ The State Statistical Committee of Turkmenistan, Statistical Yearbook of Turkmenistan, 2017

¹⁰⁰ The State Statistical Committee of Turkmenistan, Statistical Yearbook of Turkmenistan, 2017

¹⁰¹ Teresa González, A Place of Wonder: Early Childhood Education in Turkmenistan, 2015

emphasis on pre-school training and strengthening the capacity of parents as first teachers in early education of their children, including children with special needs at home.

Parent involvement in preschool education is critically important as they support parental understanding and acceptance of the value of early learning. Parental involvement can be described in various ways: contact with the school for information, support for children with special education needs, participation in school events and/or Saturday classes, and taking part in the school governance committees. Parents as “first teachers” have an opportunity to enhance their children’s learning by using a kit prepared by the Ministry of Education and UNICEF with learning activities in literacy and numeracy. Parents are encouraged to teach children for at least three hours each week through play based activities.

In a 2016 UNICEF study, a majority of respondents (89 percent) reported that they believe that children should be educated by their mothers. Only 41 percent considered that father also plays an important role in education. 11 percent of respondents thought that kindergartens or grandparents should be engaged in children’s education as well.¹⁰² In addition to grandparents, often older girls are very extensively involved into upbringing of their siblings that puts an additional burden on them.

Mothers are most commonly involved into playing and other elements of caregiving of their little children, but there is a regional difference in the extent of fathers’ involvement. In Dashoguz and Lebap velayats fathers are the least involved into socioemotional caregiving of their pre-school children as the Chart below demonstrates.

A significant contribution to development of pre-school education was made by the Ministry of Education of Turkmenistan, the Ministry of Health and Medical Industry of Turkmenistan, other ministries and departments, as well as with the support of UNICEF “The National Programme of Turkmenistan for Early Childhood Development 2015 years. Core aspects of early child development are covered in qualification programmes for teachers of preschools.¹⁰³

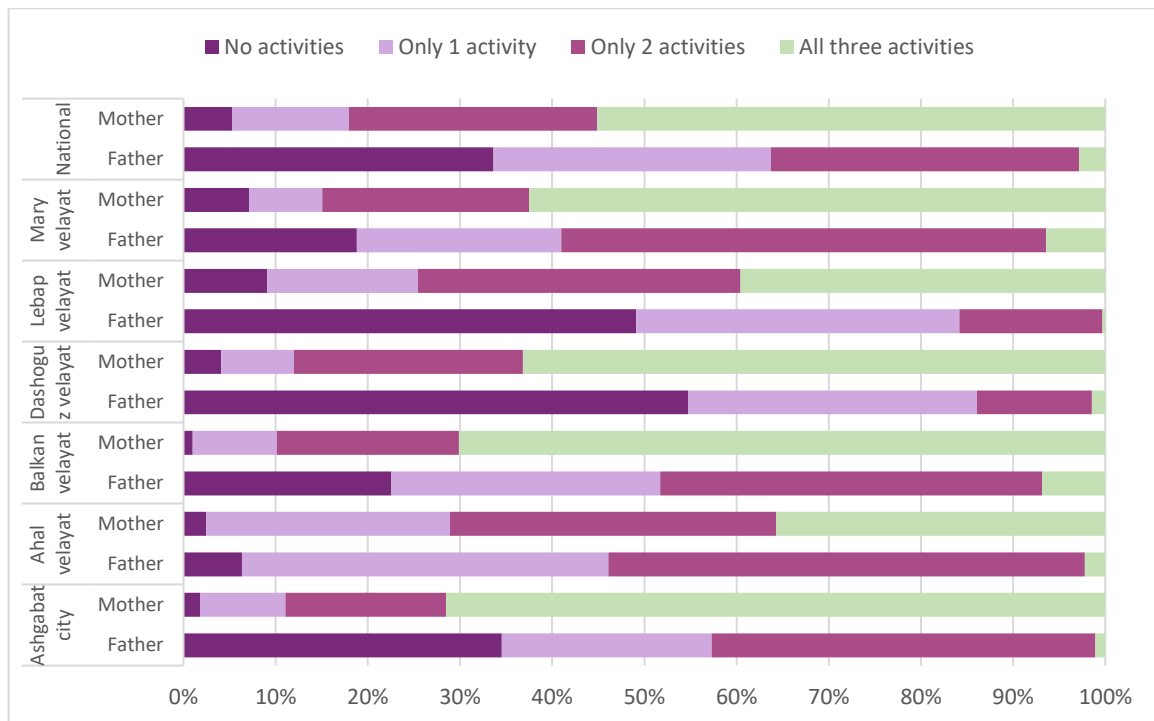
The government approved the pre-primary curriculum resource and parental empowerment documents with child-friendly school readiness measurement tools. These documents are important milestones to align the early learning system with the best international practices. As a component of the early childhood education system, the State standards for pre-school education, professional qualification requirements for teachers in pre-school education, standards for national teachers in early development, focused on pre-school preparation, and a package of quality teaching materials were developed.

The readiness of children for school is assessed when they are 5 to 6 years old (age of entering 1st grade). Since the readiness for school of children from 4 to 5 years old is naturally low compared with children from 5 to 6 years old, this caveat should be taken into account.

¹⁰² UNICEF, Survey on Knowledge and Practices of Parents and Guardians in Development of Children Aged under 6, 2016

¹⁰³ turkmenistan.gov.tm, 27 November 2016, № 1984284

Figure 10 Percent distribution of children who received socioemotional caregiving (sang songs, took outside the home, and played with) in the past 3 days, by number of activities and type of caregiver



Source: UNICEF, Caregivers' engagement with children aged 36-59 months in Turkmenistan: Country and regional analysis using MICS 2015 data, 2017

4.2.3 General secondary education (6-16 years)

In 2015, the adult literacy rate for Turkmenistan was 99.7 percent.¹⁰⁴ There were 1,148,100 pupils in 1,852 secondary schools in Turkmenistan.

There is an effective system in place to ensure that children enrol in school and on time. Every May a census is conducted to identify children who are expected to enter first grade, through teacher door-to-door visits.

For all school disciplines, state educational standards have been developed, which are a set of requirements that are mandatory when educational programmes are implemented by educational institutions. There are also optional classes in several subjects.

Reproductive health issues are included in school curricula in relevant disciplines (biology, Basics of Vital Functions). Educational standards on reproductive health have been developed and approved, taking into account the age and psychological characteristics of schoolchildren, and are being introduced in the course of teaching these issues.

¹⁰⁴ World Bank: Education Statistics, <https://datacatalog.worldbank.org/dataset/education-statistics>

Fostering inclusion of children with disabilities: A success story

The UNICEF-supported ECD Centre in Turkmenabat City in Lepab velayat opened in early 2012 within a traditional kindergarten to promote the inclusion of children with disabilities within the mainstream education system. The facility attends to 18 children with disabilities, including three children who also attend the kindergarten. By integrating the children early, they will have a better chance of developing to their full potential and participating in society as adults.

Three-year-old Abdullah, who suffers from cerebral palsy, has been attending the Centre for 10 months. He comes in three times per week for 40–60-minute sessions with the speech therapist, physical therapist and psychologist. After only a few sessions, Abdullah began to communicate, respond to his environment, grab objects and answer questions—all for the first time. Today, Abdullah is an energetic and happy little boy who loves music and his family's attention. He can walk with help, play nicely with others and describe what he wants to do next.

"I couldn't be happier," said Leyla, Abdullah's mother. "They do their best here and we do our best at home." Together with the ECD Centre professionals, UNICEF aims to support children like Abdullah to integrate into the regular education system and become better prepared to manage their lives. As part of the programme, UNICEF supports teachers, parents and caregivers with the tools and information they need to ensure quality learning at school and at home. Over the past five years, the ECD Centre in Turkmenabat City has served 114 children with disabilities.

Although teaching continues to enjoy respect as a vocation, Turkmenistan's school system needs additional qualified teachers. Teachers in Turkmenistan have a high workload as they have two primary classes, while most teachers in Kazakhstan and Kyrgyzstan teach only one primary school class. The average wage in Turkmenistan increased from 934 manat in 2012 to 1381 manat per month in 2015. The average salary in education was 1293 manat per month in comparison with 3767 manat in mining and quarrying that makes jobs in education less attractive to highly qualified individuals.

As Turkmenistan does not participate in programmes of international large scale student assessments, it is difficult to assess system performance and quality of education and evaluate progress over time.¹⁰⁵ Regional Large-Scale Student Assessment Central Asian Programme for Student Assessment (CAPSA) conducted in the Central Asian states Kazakhstan, Kyrgyzstan, Tajikistan and Turkmenistan in 2014 included standardized math and literacy tests as well questionnaires focusing at students, teachers and administration.¹⁰⁶ Turkmenistan pupils demonstrated good results in math and literacy and were mostly outperforming students in Tajikistan and Kyrgyzstan. The overall education attainment of teachers in Turkmenistan is lower than in other three countries as less teachers have university level pedagogical degrees. Teachers in Turkmenistan has more workload as well – they usually teach two elementary classes while the

¹⁰⁵ The Programme for International Student Assessment (PISA) is a worldwide study by the Organization for Economic Co-operation and Development (OECD) in member and non-member nations intended to evaluate educational systems by measuring 15-year-old school pupils' scholastic performance on mathematics, science, and reading. PISA reports can define policy problems and set the agenda for national policy debate; policymakers seem to accept PISA as a valid and reliable instrument for internationally benchmarking system performance and changes over time. Such ECA states as Moldova, Kazakhstan, and Russia participate in PISA.

¹⁰⁶ Julia Levin, Mira Mykyeva | Kyrgyz Academy of Education Development of a Regional Large-Scale Student Assessment Central Asian Programme for Student Assessment (CAPSA), 2016

majority of teachers in Kazakhstan and Kyrgyzstan teach only one elementary class.¹⁰⁷ The overall educational attainment of teachers in Turkmenistan declined – in 2011-2012, 65.5 percent of all teachers had college/university education degree, while in 2015-2016, 63.8 percent of all teachers had college/university education degree.¹⁰⁸

4.2.4 Professional education

In 2016, 35,500 students were enrolled in 129 primary vocational schools in Turkmenistan, and 21,457 students in 42 secondary vocational schools.

After completing secondary school, students may continue their education at one of the specialized institutes or at the Turkmenistan State University in Ashgabat. Admittance into higher education institutions is extremely competitive. Like all the other tests and evaluations in the educational system, this examination consists of both written and oral parts.

Completion of a course of study in higher institutions may take up to five years. After three years of post-graduate studies, graduates can obtain the degree of ‘Candidate of Science’ or Ph.D. followed by a ‘Doctor of Sciences’ through supervised research. Despite a significant increase in the number of students admitted to post-secondary institutions from 4,647 in 2007/2008 school year to 8,483 in 2016/2017 school year, the demand still cannot be met and many students pursue post-secondary studies in other countries.¹⁰⁹ As discussed below in more details, considerably more boys are enrolled in higher education than girls and the gap does not seem to be closing.

4.2.5 Equity issues and inclusive education

Turkmenistan has a process of supporting school age children at risk. When there are issues such as truancy, the first step is for the class teacher to contact the family; if the class teacher cannot resolve the issue, it is escalated to the level of the deputy principal who creates and implements a plan for the child; finally, in very rare cases, if external help is needed, the school may contact the district commission on minors of the local municipality, and a school inspector from the education department may become involved. Depending on the case, it could also involve the police (juvenile/youth department), or a woman’s union representative, or a representative from health and social protection, as appropriate. There is also a provision for extra lessons if a student has missed many classes during the school year, while the need to repeat a grade is determined through a special decision by the teachers’ commission.

The recent Concluding Observations from the Committee on the Rights of the Child recommended Turkmenistan to carry out public education and awareness raising interventions on child rights for children and caregivers to increase the capacity of both children as right holders to demand the implementation of their rights, and caregivers as duty-bearers to be knowledgeable and accountable when it comes to the fulfillment of their obligations. In 2016 the Parliament in partnership with UNICEF undertook the consultations with children on their understanding and perception of the child

¹⁰⁷ Юлия Левин, СИМ-Эксперт, Кыргызская Академия Образования, CAPSA сравнительный анализ, 2016

¹⁰⁸ The State Statistical Committee of Turkmenistan, Statistical Yearbook of Turkmenistan, 2017.

¹⁰⁹ The State Statistical Committee of Turkmenistan, Statistical Yearbook of Turkmenistan, 2017. The data on students from Turkmenistan pursuing studies abroad are not available.

rights related to education, social inclusion of children with disabilities and children’s participation in issues affecting their lives. Consultations and follow-up technical discussions with relevant stakeholders, including the Mejlis, the Institute of State, Law and Democracy and the Ministry of Education, revealed such deficiencies as the lack of public information platforms and local communities to draw attention to child rights issues and children's participation in broad discussions.

To support increased focus of national authorities on supporting inclusion of children with disabilities, efforts are being made to address issues of access to inclusive education, including training and advanced training of teachers, improving physical access and promoting more favorable social and cultural norms. The realization of rights of children with disabilities is covered in great detail in Section 5.2 of this report.

Child and women rights to inclusive education: Determinants summary

Key determinant	Groups affected	Description
Social norms	Children with disabilities	Social stigma and discrimination regarding the inclusion of children with disabilities in the health, education and social protection sectors are the main obstacles for children with disabilities in their inclusion in the general education system and in society.
	Women who would like to pursue higher education opportunities	Social norms that prevent a significant share of active women to pursue higher education opportunities, especially in such male-dominant fields as science and engineering. Patriarchal attitudes and deep-rooted stereotypes emphasize women’s reproductive and housekeeping roles and create the expectations that a woman remains in the home and not seek higher education opportunities. Often the decisions regarding girls/young women pursuing higher education opportunities are made by elder family members who may traditionally favour boys and not support higher education aspirations of girls.
Legislation/policies	Children with disabilities	The Education Law promotes/allows separation/segregation and institutionalization of children with disabilities in residential facilities and special education institutions which impedes development of inclusive education environment.
Budget allocations	All children	Need to continuously increase education sector funding. The Addis Ababa Action Agenda encourages countries to set nationally appropriate spending targets for

		<p>education with the following international and regional benchmarks:</p> <ul style="list-style-type: none"> ○ allocating at least 4% to 6% of GDP to education; and/or ○ allocating at least 15% to 20% of public expenditure to education.¹¹⁰ <p>Within these funding parameters, it is recommended also to prioritize disadvantaged children, youth and adults, as well as women and make financing sensitive to their needs.</p>
Capacity of relevant partners to deliver supports/services	<p>Children in localities where preschool programmes are not available</p> <p>Children who do not have access to well-trained educators</p>	<p>Uneven access to preschool and pre-primary education programmes, especially of children from vulnerable groups and those residing in rural areas.</p> <p>Insufficient capacity of teachers to deliver high quality education and monitor child outcomes, and their limited motivation.</p>

4.3 Child Protective Environment

Child protection in Turkmenistan is generally approached from the perspective of different groups of children in need of special protection.

4.3.1 Birth registration

The registration of a child's birth is pivotal in terms of ensuring his or her rights. According to Article 7 of the Convention on the Rights of the Child, the child must be registered immediately after birth and have the right from birth to a name and to a nationality. A child whose birth is not registered is actually deprived of the elementary opportunities of health care, social security and education, and is more vulnerable to violence. Almost all children under five in Turkmenistan are registered¹¹¹

In accordance with the Family Code of Turkmenistan (Article 66), the fact of having a child is a subject to state registration with the registry office in the manner prescribed by the law. The birth registration is mandatory in all circumstances, including absence of parents' passport or similar documents, lack of parents' official registration recording their place of stay, and child abandonment. A child's birth can be registered on the basis of a court decision establishing the fact of birth of a child. The place of birth of a child is considered to be the place of his/her actual birth. In cases where the child is abandoned, the place of birth on the child's birth certificate indicates the location of the state registry office.

¹¹⁰ Incheon Declaration and Framework for Action for the implementation of Sustainable Development Goal 4 Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all, <http://unesdoc.unesco.org/images/0024/002456/245656E.pdf>

¹¹¹ 99.6% according to the 2015-16 Turkmenistan MICS.

Stateless persons with permanent residence permission on the territory of Turkmenistan generally enjoy the same rights and obligations as citizens. They are equal before the law – regardless of their origin and other attributes – and they can defend themselves and their property through the courts. Stateless persons without permanent residence permission and formal recognition as ‘stateless’, do not have these entitlements.

The Law of Turkmenistan “On State Guarantees of the Rights of the Child” guarantees: “A child who is not a citizen of Turkmenistan permanently residing in its territory enjoys all rights and obligations as children of citizens of Turkmenistan, unless otherwise provided by legislation and international treaties of Turkmenistan” A child who has been granted refugee status in accordance with the laws of Turkmenistan enjoys the same rights and freedoms and bears the same duties as a child citizen of Turkmenistan, within the limits established by this Law and other regulatory legal acts of Turkmenistan.

There have been cases of non-compliance with these laws. The UN Refugee Agency (UNHCR) received reports indicating that children born to stateless parent(s) who lack any valid identity documentation may not be able to have their birth registered, nor have access to birth certificates, until their parent(s) are confirmed to be stateless and obtain relevant documentation.¹¹² Undocumented stateless persons and their children do not have access to public benefits, education, or formal employment opportunities.

There were 3500 stateless persons and 23 refugees in 2017 in Turkmenistan. According to UNHCR, however, in the past 10 years, the government granted citizenship to an estimated 18,000 stateless persons and amended the Law on Migration to allow stateless persons to reside in the country legally and travel internationally with government-issued identification and travel documents. Turkmenistan is drafting a National Plan of Action on Elimination of Statelessness for the period of 2018-2024, which indicates Government’s commitment and attention.

4.3.2 Violence, abuse and neglect

Forms of violence to which a child can be exposed vary according to age and stage of development, especially as the child starts to interact with the world outside the home. Infants and young children are more likely to be victimized by primary caregivers and other family members because of their dependence on adult caregivers and limited independent social interactions outside the home.¹¹³ As children develop, they grow in independence and spend increasing amounts of time outside the home and away from family; therefore, older children are more likely to be victimized by people outside their home and family.

Corporal punishment is unlawful in the home, alternative care settings, day care, schools and penal institutions in Turkmenistan. The Global Initiative to End All Corporal Punishment of Children that aims to act as a catalyst to encourage more action and progress towards ending all corporal

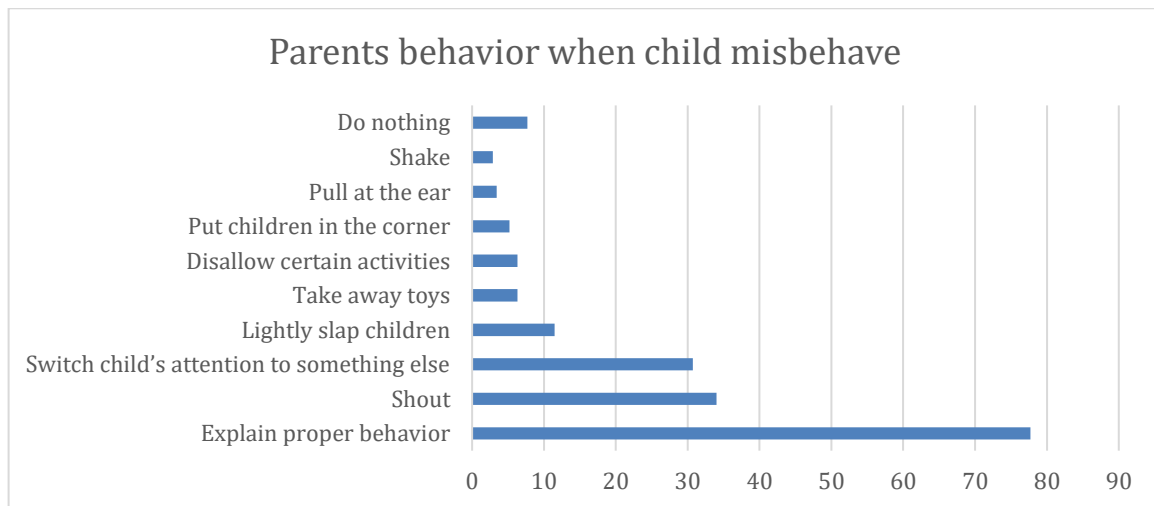
¹¹² UNHCR, Submission by the United Nations High Commissioner for Refugees For the Office of the High Commissioner for Human Rights’ Compilation Report Universal Periodic Review: 3rd Cycle, 30th Session

¹¹³ UNICEF, World Report on Violence Against Children

punishment in all continents positively assessed law reforms and determined that Corporal punishment is prohibited in all settings, including the home in Turkmenistan.

Article 35 of the Law on Guarantees of the Rights of the Child 2002 states: “(2) Parents (legal representatives) of the child shall care, sponsor, create conditions for growth, development and enhancement of the child, to bring it up in the spirit of humanity (3) Humiliation of the child’s dignity, corporal punishment, other physical abuse harmful for the child’s mental or physical health are inadmissible.” The Family Code 2012 states in article 85(2): “Humiliation of the dignity of the child, intimidation, corporal punishment, other physical abuse harmful for the child’s mental or physical health are inadmissible.” Article 89(2) states: “When implementing parental rights, parents shall not do injury (harm) to the physical and mental health of the child, its moral development. Methods of education shall exclude neglectful, cruel, ... degrading treatment...”.¹¹⁴ Corporal punishment is unlawful in schools under the Education Act 2013, article 17(6): “Discipline in educational institutions is maintained on the basis of respect for the human dignity of pupils, students and graduates. The application of physical and psychological abuse in relation to students and pupils is prohibited.” There is only anecdotal evidence indicating that corporal punishment is used and additional efforts have to be implemented to ensure that the progressive legislation is fully implemented. In 2016 study, for instance, parents indicated that of their child does not obey, they frighten him/her with a monster, doctor’s injection, father’s or someone else’s punishment. If the child still does not obey, parents may resort to spanking, if the child is old enough. If the child is small, they frighten him/her.¹¹⁵ These measures often have negative effects on the child’s emotional state. The Figure 12 below presents the most common child disciplining practices.

Figure 11 Parents' actions when child misbehaves



Source: UNICEF, Survey on Knowledge and Practices of Parents and Guardians in Development of Children Aged under 6, 2016

¹¹⁴ Global Initiative to End All Corporal Punishment of Children, Country Report for Turkmenistan, <http://www.endcorporalpunishment.org/progress/country-reports/turkmenistan.html>

¹¹⁵ UNICEF, Survey on Knowledge and Practices of Parents and Guardians in Development of Children Aged under 6, 2016

Neglect is an important contributor to death and illness in young children. Neglect means the failure of parents or caretakers to meet a child's physical and emotional needs when they have the means, knowledge and access to services to do so; or failure to protect her or him from exposure to danger. The cases of deliberate neglect are extremely rare in Turkmenistan, but instances of neglect occur because of ignorance or lack of care possibilities and mostly in those cases where support of the extended family is not available.

4.3.3 Child trafficking and sexual exploitation

Crimes related to trafficking in persons in Turkmenistan are rare, and the data specific to child trafficking and sexual exploitation is not available. According to the Ministry of Internal Affairs data, between 2013 and 2017, 23 criminal cases were brought in Turkmenistan under the respective article of the Criminal Code, and 45 individuals were identified as trafficking victims. Only one such crime was recorded in 2017. Criminal charges were brought against 23 Turkmen citizens in respect of these crimes.¹¹⁶ Victims in Eastern Europe and Central Asia who were trafficked outside their countries were mostly trafficked to other countries within the region.¹¹⁷

In accordance with Article 45 of the Law of Turkmenistan "On State Guarantees of the Rights of the Child", the state takes all necessary measures to prevent the abduction and trafficking of the child for any purpose and any form.

Turkmenistan took a number of important steps to address trafficking, including the continued implementation of its national action plan for preventing of trafficking in persons, adoption of a new anti-trafficking law in 2016, and amending its criminal code to criminalize trafficking in persons. The Trafficking in Persons Act 2016 contains the procedure for identification of trafficking victims and the procedures for granting the status of trafficking victim as well as other measures for combatting trafficking in persons. The Government also allows for free legal assistance to those applying for recognition as trafficking victims.

The State Protection of Victims, Witnesses and Other Participants in Criminal Proceedings Act establishes a system of measures aimed at ensuring State protection of victims, witnesses and other participants in criminal proceedings, including the safety and social protection of such persons, and also defines the bases and procedures for the implementation of such measures. The Government did not establish any victim assistance programmes yet.¹¹⁸

4.3.4 Child labour

Internationally, a distinction is made between child work and child labour. Child work includes helping parents around the home, assisting in a family business or earning pocket money outside school hours and during school holidays. Such activities contribute to children's development and to the

¹¹⁶ Turkmenistan, National report submitted in accordance with paragraph 5 of the annex to Human Rights Council resolution 16/21, Human Rights Council, Working Group on the Universal Periodic Review Thirtieth session, 7-18 May 2018

¹¹⁷ UNODC, Global Report on Trafficking in Persons, 2016

¹¹⁸ US Department of State, Trafficking in Persons Report, 2017

welfare of their families; they provide children with skills and experience and help to prepare them to be productive members of society as adults. Child labour, on the other hand, is defined in the CRC as economic exploitation. It includes any work likely to be hazardous, or to interfere with the child's education, or to be harmful to the child's health or physical, mental, spiritual, moral or social development.

In June 2016, the Labour Code was amended so as to set 18 years as the minimum age for admission to employment. A 16-year-old, however, may work four to six hours per day, up to 24 hours per week, with parental, school principal's and trade union permission, but such permission is rarely granted. Persons under the age of 18 have the same legal rights as adults with respect to labour relations, but under the Labour Code they are provided with more advantageous conditions in respect of occupational safety and health, working hours, leave and other conditions of employment. The law, for example, prohibits children between the ages of 16 and 18 from working more than six hours per day, or 36 hours per week and prohibits to involve any children in night work, overtime work and work on weekends, public holidays and commemorative days as well as sending a child on business trips.

During the school year, children may not be hired to perform agricultural or other work that takes them away from their studies. Officials of educational institutions are subject to disciplinary action under the Labour law for the use of child labour in educational institutions for any activity, including agriculture.

The data obtained through MICS 2016 demonstrates that among children age 12-14 years, 4 percent are involved in an economic activity for less than 14 hours, while less than 1 percent are involved for 14 hours or more. 7 percent of children age 15-17 years are involved in an economic activity for less than 43 hours while there are no children involved in economic activity for 43 hours or more.¹¹⁹

4.3.5 Children and the justice system

The number of juveniles in conflict with the law has declined in Turkmenistan over the last years. It reflects a decline in the number of children arrested for committing crimes and changing sentencing practices. There are measurable improvements in processes of prevention, rehabilitation and reintegration of juvenile offenders into communities as the Penal Code, Criminal Procedure Code, and the Labor Code were updated in response to recommendations made by the international treaty bodies.

Juvenile units have been set up in police departments and are housed separately from regular police stations to prevent contact between children in conflict with the law and other groups that police interact with. In interviewing children, the police mostly rely on the participation of educators to act as the interface between the police investigator and the child. The Code of Criminal Procedure requires an educator to be present at interviews involving witnesses and/or victims under the age of 14. Juvenile affairs inspectors are mostly hired from young Police Academy graduates who have additional background in education and/or psychology. In recent years, the Police Academy

¹¹⁹ Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016 and Turkmenistan Multiple Indicator Cluster Survey 2006

curriculum has been revised to incorporate topics of child rights as well as developmental psychology.

Only a small proportion of juveniles who commit offenses are prosecuted and tried. In 2016, juveniles accounted for 2 percent of the total number of persons convicted, and 82 per cent of such juveniles were given non-custodial sentences.¹²⁰ There are no juvenile courts in Turkmenistan, but there is a cadre of specialized judges with experience of adjudicating in juvenile cases and/or judges with educational background in psychology or education who are assigned with cases involving juvenile offenders. Legal aid for juveniles and victims is provided free of charge.

Turkmenistan has one correctional facility for boys while girls are kept separately in the Dashoguz women's colony. It is adequately staffed with both corrections staff and civilian staff such as teachers, vocational instructors, physicians and nurses. Overall the facility employs 140 staff, which is a very good indicator for a facility with the total capacity of 300 juveniles. Currently the facility has only 85 residents, which means there is more staff than juveniles, and overcrowding is not an issue.

The living conditions in the juvenile correctional facility are satisfactory. The school is equipped with state-of-the-art educational technology, including interactive whiteboards, language labs and the like. Juveniles graduating from the school while in detention are issued regular city school certificates that do not, directly or indirectly, identify the juvenile as a former facility resident. The school also has vocational education and training classes (sewing, shoemaking, toolmaking, etc.) and issues vocational training certificates, however, these are only short-term training certificates and as such are not equivalent to vocational school diplomas.¹²¹

The correctional facility starts transition planning 6 months prior to the juvenile's scheduled release. Transition planning involves finding suitable housing options and assisting with finding employment or pursuing further education, if the juvenile desires so.

There are certain gaps that have to be addressed. They include lack of formal, monitored transition planning, lack of independent living planning, and general non-adherence to the principle of continuity of care. The low priority is given to the development of community-based services that limit the opportunities for implementation of diversion and non-custodial sentences. It is recommended to address these gaps by setting up a central-level government agency as the National Juvenile Justice Coordination body and developing processes for diverting the juvenile at any stage before or during the formal process. It is advisable also to improve the existing mechanism for rehabilitation, reintegration and resocialization of juveniles sentenced to custodial measures.¹²²

¹²⁰ Turkmenistan, National report submitted in accordance with paragraph 5 of the annex to Human Rights Council resolution 16/21, Human Rights Council, Working Group on the Universal Periodic Review Thirtieth session, 7-18 May 2018

¹²¹ Irina Urumova, Assessment of the General Programme on Development of Juvenile Justice System in Turkmenistan for the Period of 2012-2016, 2018

¹²² Irina Urumova, Assessment of the General Programme on Development of Juvenile Justice System in Turkmenistan for the Period of 2012-2016, 2018

4.3.6 Children in institutional care

Some groups of children live in circumstances that require special protection by the government. These children are often unable to exercise fully their rights to education, health and protection. Institutional care is still one of the main forms of substitute care for children in need of special protection. There are many reasons why children are placed in institutional care: the death of parents, a child's severe disabilities that require specialized supports, and others. There is no evidence that children are placed in institutions because of parents' poverty and unemployment or because they are left without permanent supervision by parents who went to work abroad, which are the common reasons in some ECA states.

Turkmenistan has a low share of children in institutions in comparison with other ECA states. The number of children in institutions has increased however from 2398 in 2005 to 3716 in 2016, which is mostly due to the increase in the numbers of children with disabilities placed there.

The family in Turkmenistan is one of the national key values that have deep roots in the centuries-old tradition and national mentality. Turkmen families are close-knit and extended, especially in rural areas where parents live in the same household with young families. According to one UNICEF study, the biggest single reason of placement of children into infant homes is refusal of parents because of disability and temporary placement for reasons of the child's disability. 62% of the population of the infant homes constitute children with disabilities. Other reasons include death of a parent, refusal by parents, temporary placement because of illness of parent(s), temporary placement for social reasons, and having a mother in prison.¹²³

Usually a child who has lost parents finds shelter with the extended family and other relatives. Widespread and active involvement of relatives in the fate of a child orphan is a characteristic feature of the Turkmen mentality. In cases when the child does not have any close relatives, or in those circumstances when they cannot take the orphan into their family, other placement options are available. According to Article 43 of the Turkmen Law "On Guarantees of the Rights of the Child", the State provides the child deprived of parental care with the family-type upbringing: adoption, guardianship, tutorship or placement in appropriate residential child care institution on full government support.

There is an extensive network of 15 specialized pre-school institutions, 17 special institutions (schools, boarding schools, educational complexes) for children with disabilities and special educational needs. In addition, there are two types of boarding schools: boarding kindergartens where children with disabilities receive education and care, and round-the-clock kindergartens where preschool children receive care during the work week.

Children homes (orphanages) provide child-rearing, carry out pre-school and school educational programmes, and provide care and healthcare of the children. Children are placed into residential institutions as close to their place of birth and residence as possible. Local authorities provide

¹²³ Joanna Rogers with Stela Grigoras, Maksim Kostenko, UNICEF Turkmenistan – a study to formulate recommendations for developing national policies with a view to preventing institutionalization of children aged 0-3 years of age, 2014

additional support to the orphanages and boarding houses. Children orphans regularly benefit from various recreational opportunities such as out-of-town recreational camps, resorts, and in-town school camps at the budget expenses and sponsors' donations.

Additionally, the government guarantees orphans their own housing when they turn 18 and they are provided with additional social support, including job training, and stipends to pursue higher education, and other benefits.

Institutional care will most likely remain a viable solution for some children in exceptional circumstances, but family and community-based care and social community-based services for children at risk and their families have to be extended to provide more family-type supports and minimize child institutionalization. More detailed analysis of children with disabilities and rehabilitation centres is provided in sub-section 5.2.

4.3.7 Child marriage

The minimum age for marriage was raised from 16 to 18 years (with some exceptions) in the new Family Code in 2012.¹²⁴ The average age of females at first marriage in Turkmenistan was 23.6 years in 2016 and it slightly increased from 23.3 years in 2005. However, early and sometimes arranged by parents and family elders marriages still occur especially in some rural areas. In total, 6 percent of women age 15-19 years are currently married/living in union, predominantly in rural areas. Further analysis of this figure indicates that only 0.2% of 15-17 years old are married.¹²⁵

Early marriage of girls has significant negative consequences for their health, development and rights realization. It often ends their opportunities for formal education and well-paid employment. International studies demonstrate that girls who marry before the age of 18 face significant risk of physical, sexual and psychological violence at the hands of their husbands.¹²⁶ The violence against married girls and women is often a manifestation of unequal power relations between her and her husband and reflect social norms of society and views of status and roles of men and women. Child marriage is exacerbated by high anemia rates (57 percent among non-pregnant women of reproductive age), noted above.

4.3.8 The social protection system

Families with many children and without employed household members may be vulnerable, experiencing inequalities in terms of opportunities for earning income, owning goods and assets and exercise their rights. Hence, effective and results-oriented social protection systems are important for children, in view of their higher vulnerability.

Social protection is a set of public and private policies and programmes aimed at preventing, reducing and eliminating economic and social vulnerabilities to poverty and deprivation.¹²⁷ Social

¹²⁴ <http://turkmenistan.gov.tm/?id=779>

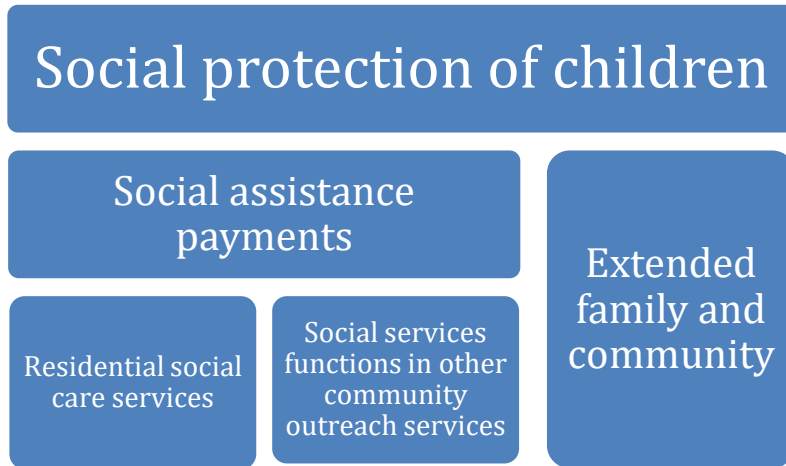
¹²⁵ Calculations based on Turkmenistan, The State Statistical Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016

¹²⁶ UNICEF, Early Marriage, Child Spouses. Innocenti Digest, No. 7. Florence, UNICEF Innocenti Research Centre, 2001

¹²⁷ UNICEF, A Child's Right to Social Protection in CEE/CIS, Concept Note, March 2015, Summary

protection systems 'protect' by supporting the appropriate level of households' level of income and/or consumption, ensuring their well-being, breaking the vicious cycle of poverty and vulnerability, and promoting human capital formation. Underinvestment in children through social protection jeopardizes their ability to exercise their rights.

Model of social protection system in Turkmenistan



Source: CEE/CIS Consultancy Group, Partnership for Every Child, International Consultancy for preparation of Social Service Standards and Curriculum for teaching social work professionals for UNICEF Turkmenistan

Social protection systems typically have a few components: social assistance cash benefits or in-kind transfers and social insurance benefits and social services, which provide care and support to families and vulnerable children. Social services may be diverse and include home and respite care, day and week care centres, early intervention services, shelters, emergency assistance, family assistance including consultation family centres and conflict resolution.

In Turkmenistan, the Ministry of Labour and Social Protection (MOLSP) plays a key role in provision of social protection. The ministry is responsible for four main areas: a) labour, b) social protection, c) analysis of demographic situation and d) labour work related aspects of protection, such as labour market protection policies, occupational health and safety, etc. The Ministry is responsible for provision of specialized local care services which target elderly and persons with disabilities living on their own. The Ministry has regional and sub-regional branches of the Pension Funds through which pensions and other social benefits are delivered and applications administered.

There are at least three national programmes focusing specifically at social aspects of country's development: The National Socioeconomic Development Programme for the period 2011–2030, the revised National Presidential Programme on the improvement of social and living conditions in villages, towns, cities and district centres for the period up to 2020, and the Presidential Programme on socioeconomic development for the period 2018–2024. Every year, a Presidential decree is issued whereby pensions, social benefits, scholarships and wages in all sectors of the economy are raised by 10 percent.

The system of social guarantees in the country is universal and covers all categories of population. Upper-income groups equally benefit from free limits of gas, electricity, water, and child birth grants.

The Social Protection Code (2012) provides specific selected groups with social benefits and pensions. Allowances are in place for large families, the elderly, sick, disabled, no longer able to work or are not employed. Women who are formally employed receive a maternity benefit (insurance benefit). The benefit is equal to 100% of earnings and is paid for 56 days before and 56 days after the expected date of childbirth (72 days after for a difficult childbirth; 96 days after for multiple births).

More recently, new types of benefits have been introduced, which are paid regardless of the family income status (employment and income level) that include birth grants (lump sum paid progressively depending on the number of births of children, 346 for 1st and 2nd child and 1,330 manats for the 4th and more children in 2018) and child care allowances (monthly payments made till child reaches age of 3 years, 173 manats in 2018). The benefit for children under 3 is a significant support to parents especially in rural areas and for those who are unemployed or underemployed. It is advisable to consider gradually increasing the amount of this benefit as well as increasing the eligibility age to 6 to make sure that children and their families get sufficient support in the most critical 2,000 days of their lives.

In addition to benefits paid to all children, families with children with disabilities receive disability cash transfers based on complexity of children's disability (Groups 1, 2 and 3) and an additional pension till their reach 18 years old (530 manats per month in 2018). In comparison, a minimum salary in Turkmenistan is 715 manat per month in 2018. In 2013, a special child allowance for orphaned children has been introduced which also includes benefits for their caretakers.

The National Programme of Turkmenistan on Socioeconomic Development for the period 2011-2030 states plans of improvement of social protection that includes creation of the targeted system of social support for persons with disabilities, consistent increase of salaries for public servants, pensions, social allowances and other state benefits, improving quality and expanding a range of social services but does not specify targets and indicators.

The child cash transfers positively affect the families spending patterns of families in a number of areas – 37 percent of beneficiaries, for example, indicated that the transfers allowed them to purchase better and more nutritious food. Overall, low income groups and those who are not employed or dependent tend to attribute a more positive impact on the child allowance than better-off income group.¹²⁸

Despite these comprehensive benefits and cash payments provided universally to all families with children in Turkmenistan, there is no sufficient evidence and data to assess the contribution of these supports to reducing poverty and addressing the needs of the most vulnerable groups. Globally poverty remains the root of most, if not all, barriers that affect children and women's rights realization. Yet poverty has not been systematically monitored in Turkmenistan, which limits the possibility of assessing the impact of government policies such as subsidies reduction and introduction of new

¹²⁸ UNICEF Turkmenistan, Survey Report: The Impact of the Cash and Non-cash Benefit Programmes for Families with Children in Turkmenistan: Results from an Exploratory Survey in Two Regions and the Capital of Turkmenistan, 2014

social benefits. The information and data on the nationally defined "minimum" consumption basket sufficient to provide the necessities of life, is not publicly available that makes it difficult to assess the impact of the current economic developments and state policies such as increase the price of flour or reduction of subsidies. A concept of poverty is not accepted by the national partners, but the majority of them have agreed that there are vulnerable groups of children and women.

There is some evidence of positive trends in reducing poverty. One of indirect measures of poverty could be provided through analysis of the share of income the households spent on food. The poorer the people are, the more they spend out of their total income on food. Thus, the share of income spent on food is a good indirect indicator of the degree of poverty. The share of expenditures spent by households on food of the first group (with the least income) declined from 67.9 percent in 2000 to 64 percent in 2016 which is a positive sign of poverty reduction across the country.¹²⁹

The government control of consumer prices and extensive subsidies have positively contributed to social equity, but whether such a control would be possible to maintain in unfavorable economic conditions remains a question. Without detailed and disaggregated information on economic conditions of the most vulnerable social groups, it is difficult to assess the role of cash transfers and benefits on them. For example, the available evidence is insufficient to assess a share of families in Turkmenistan who struggle economically and cannot, for example, afford nutritious food and substitute away from more expensive, nutritious food with cheaper staples that can negatively affect pregnant women, infants and little children.

Turkmenistan maintains energy and water subsidies which represent significant support for low-income groups of population. The subsidies on gas, water and electricity are provided to all citizens without exception. The government is pursuing the subsidies reform as universal implicit and explicit subsidies on gas and electricity is not economically sound approach, especially when the economic situation deteriorates, and budget revenues may decline.

The ideal energy prices would reflect the cost of production and global supply and demand and would reduce the fiscal losses and inequality effect of subsidies as the rich benefit more because they use more energy. Although the energy subsidy reforms recommended by IMF may be easy to implement, it may significantly negatively affect the vulnerable groups, especially when real incomes of many households are declining.¹³⁰ Vulnerable households should be able to heat their homes to an adequate level of warmth for their well-being and have enough water for cooking, cleaning, and showering. Often the vulnerable households may have high energy bills than they need be because their homes are not energy efficient. They "leak" heat through inadequately insulated windows, doors, floors and roofs. Energy efficiency investments, even low-cost ones, can help save energy and make it easier to adjust to higher energy prices. As the experience of many countries that liberalized energy prices and reduced energy subsidies demonstrated, these reforms support the government to save money, but this does not automatically make its way into social safety net programmes to soften the impact of the price increase on the vulnerable groups, including children. As the state pursues the

¹²⁹ State Committee of Statistics of Turkmenistan, Statistical Yearbooks of Turkmenistan 2017

¹³⁰ IMF Staff Concludes Article IV Consultation Visit to Turkmenistan, March 9, 2018,

<http://www.imf.org/en/News/Articles/2018/03/09/pr1881-imf-staff-concludes-article-iv-consultation-visit-to-turkmenistan>

policy to reduce the number of subsidies and subsidized goods and services,¹³¹ it is critically important to properly identify and support the most vulnerable groups and particularly children through this process.

As part of the most recent subsidies reforms, the government maintained the previous limits for free gas, electricity and water consumption. The tariffs for using gas and electricity over established limits have not changed. Given that the average natural gas consumption in cities is much lower than the established free limit, payment for gas is insignificant in cities unlike in rural areas where natural gas is more extensively used for house and greenhouses heating. Urban residents will be affected by significantly increased costs for housing, heating and sewage. The limits for free electricity use are quite high by international standards and are rarely exceeded. Although the water use tariff has increased significantly by 25 times, the average consumption is below the established free limits. The tariff increase may affect large families with many children that may exceed the established limits for free use. The families residing in rural areas such as Akhal and Balkan velayats will be affected as they use tap water for irrigation and livestock. Most likely, the families will have to incur additional costs of installing water meters. The public transport fare in cities (buses) has increased by 67% for adults but remains unchanged for children and the retirees. This change will affect the urban residents.

¹³¹ On 1 July 2014, free coupons for gasoline and diesel fuel provided before to all motor vehicles and motorcycles owners, have been abolished. On 1 February 2014, gas tariffs above the free limits, have been increased 10-fold, and on 1 December 2014, electricity tariffs increased by 2.1 times

Table 2 Comparative table of recent changes in public services (for residents)

Name	Unit	Tariffs before 01.11.2017 (Manats per unit)	Tariffs after 01.11.2017 (Manats per unit)	Changes (Increase)	Limits	Average consumption – other jurisdictions
Natural gas (above the limit)	1000 m ³	20.00	20.00	0	50m ³ per month per person	Russia, Ukraine: 10-20m ³ (in cities with 4 family members)
Electricity (above the limit)	100 kW/hr	2.50	2.50	0	35kW/hr per month per person	Russia, Ukraine: 40-80 kW/hr per month per person (in cities with 4 family members)
Water (above the limit)	1m ³ per month	0.02	0.50	25 times	250 litre per day per person Or (7.5m ³ per month per person)	Russia, Ukraine: 4-5m ³ per month per person (in cities)
Public transport (buses)	Per one trip	0.30	0.50	67%		
Housing	1m ² per month	0.20	0.50	2.5 times		
Heating	1m ² per month	0.02	0.10	5 times		
Sewerage	Per month for 1 person	0.05	0.40	8 times		
Telephone charge	Per month	0.20	1.00	5 times		

In addition to changes in tariffs, prices for car petrol at the pump in Turkmenistan increased by 50 percent in February 2018.¹³² Typically any fuel price increases translate into higher prices for basic staples as the cost of transporting groceries rises but the available data is insufficient to assess the impact of these changes on the vulnerable households with children.

Social services as separate function delivered by designated professionals are not provided to children in Turkmenistan. On many occasions, families have a most respected elder person, who would help them to resolve small family issues. In cases when the family issues cannot be solved

¹³² Turkmenistan: Car Fuel Price Surge Causes Rush to the Pumps, February 1, 2018, <https://eurasianet.org/s/turkmenistan-car-fuel-price-surge-causes-rush-to-the-pumps>

internally they can be referred to the Council of Elders in their village. However, these are usually limited to household dispute resolution and one-time support. The Gengesh is the local village council - an elected body that overlaps with the Council of Elders in most communities and can address all social challenges faced by families, but mostly in rural areas.

There is a consensus among the national partners supported by the available data and research that social services can be designed for children with disabilities, those families who may not have extended family support or those who are extremely poor. Parents of children with disabilities, for example, need psychological support, hands on training, and practical support to provide day-to-day care to their children and support with preparing children to transition to school.¹³³

Not all children can rely on extended family support because of inability of grandparents to take care of them, stigma related to their disability, birth outside of marriage; and geographical remoteness of close relatives and require social services supports. There are some groups of children with disabilities and at-risk children living in urban areas such as children with parents who are sick or have disabilities who will benefit from more specialized social services supporting their inclusion into community, education and all other areas of life that should ultimately prevent their institutionalization. Parents, especially of little children and single parents will benefit from individualized guidance on how to access kindergartens, medical centres, parent centres and obtain support from state authorities. In the absence of defined vulnerable groups, defined and funded services supporting them, these children cannot fully realize their rights and sometimes are institutionalized.

My husband and I have some visual difficulties. My child is healthy, and it is very difficult for me to help her with homework, to take her somewhere outside to play. It would be great if someone like a social assistant or volunteer could help such families. The other example is when both parents are deaf and cannot talk, their child is ok but with time he/she starts to slow down in development. (FGD with parents and specialists of NGO)

Source: UNICEF Turkmenistan, Social Services Assessment – Final Report, 2015

Some elements of social services are delivered by family doctor and visiting nurse (home visiting, provision of parenting and child development information), Parent centres (advice and training on child development and parenting skills), Early Childhood Development Centres (psychological support to parents and some day care provision for children with disabilities). These services are not consistent and not universally available to all potentially eligible children and families across the country, with poor or absent coordination among them and other partners such as schools.

Turkmenistan is moving towards development of community-based social services and social work profession. Since 2016 UNICEF has been working with the Ministry of Labour and Social Protection and other partners towards introduction of social work profession and family-support services for children. It is expected that social work specialization will be introduced at the Ashgabat pedagogical college and Medical university in September 2018. Given that Turkmenistan is at the early stage of establishment of social work and family support services, it gives a unique opportunity to establish tailored and specialized social service system based on the country's needs, positive family-oriented traditions and its upper middle-income status. The further steps include operationalization of the

¹³³ UNICEF Turkmenistan Social Services Assessment – Final Report, 2015

social work curriculum for Universities, design of standards for future social work professionals, endorsement of the Action Plan for the development of social services for children and families 2018-2028.¹³⁴

Child and women rights to social protection: Determinants summary

Key determinant	Groups affected	Description
Legislation/policies	Vulnerable children	Absence of a systematic approach to analysis of vulnerability of population, including of children and households with children. To advance rights of children, there should be a clear and consistent definition of vulnerability that is acceptable by all national partners. Quality and reliable data are critically important to identify vulnerable groups, assess equity aspects and monitor whether the actions implemented advance children and other vulnerable groups' rights. Data on children must be comprehensive, reliable and sufficiently disaggregated to enable the identification of discrimination and/or disparities in the realization of children's rights.
Availability, capacity of relevant partners to deliver supports/services	Vulnerable Children and Women	<p>Lack of professional social and protection services including social workers with the capacity to respond adequately to the needs of vulnerable children. There is no 'continuum of services' for child protection that could assure protection and welfare of the child at all times and at all levels (e.g., child assessments, monitoring of child's and family conditions, services coordination and follow up assessments).</p> <p>There are only a limited number of specialised services at the community level where at-risk children, such as children with disabilities can be referred. Mechanism or system for prevention, early detection and identification of vulnerable children and families at risk, linked to early intervention and multi-disciplinary support and referral to the specialised services, is still too fragmented.</p>

¹³⁴ Turkmenistan rolls out development of social work practice for children, families, April 26, 2018, <https://www.azernews.az/region/131078.html>

4.4 Adolescent participation and youth empowerment

The CRC recognizes that a child is a vulnerable human being who requires protection and assistance from the family, the society and the State, but it also states that a child should be able to form and express opinions, to participate in decision-making processes and influence solutions. Article 12 states, in particular, "State Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child."¹³⁵

Child participation is important as it helps to properly identify and respond to the actual needs and concerns of children, rather than needs assumed by adults. As children, have generally less social power than adults, they may not be able to influence decisions unless additional measures are put in place to empower them and facilitate participation.

There are traditional culturally entrenched values that determine the extent and nature of child's participation. The man is traditionally the head of household and main decision-maker in Turkmen families, especially in rural areas. Hierarchy of adults regarding children continues throughout life and respectful language and behaviour are expected. Cultural values and norms place girls in a weaker position in the family than boys. Many children are reluctant to express views openly, especially when their views differ from those expressed earlier by their elder dialogue partners.

In 2017, UNICEF conducted consultations with 32 children 11-16 years old from all velayats and Ashgabat demonstrated. These consultations demonstrated that children know about their right to express freely their opinions but are not aware that adults should give their opinions due consideration, according to the age and maturity of the child. Children do not have the experience of real participation and they propose to be consulted at least once a year, event through a simulation exercise, such as the day of self-governance in the school.¹³⁶

Children are not consulted in their families about all the aspects of their lives. Parents are mostly interested in the marks children get in the school and do not value opinion of their children. All the children believe that school principal and teachers ask their opinions mostly when dealing with problematic behavior and disciplining children, and only sometimes on the learning process and school performance. Children do not feel they are consulted on afterschool activities, or in the development of rules for the school and classroom, or who and what responsibilities takes in the classroom.¹³⁷

While in-school organizations are intended to support students' participation, there is a tendency for them to focus on activities that are designed by adults for children such as participation in many community activities and national campaigns. Many duty bearers possess some skills of communicating with children, but many of them are inadequately prepared and not ready to consult their opinion.

¹³⁵ Convention on the Rights of the Child Adopted and opened for signature, ratification and accession by General Assembly resolution 44/25 of 20 November 1989 entry into force 2 September 1990, in accordance with article 49

¹³⁶ UNICEF, Report on Awareness, perception and knowledge of 12-16-year-old children about child rights in Turkmenistan

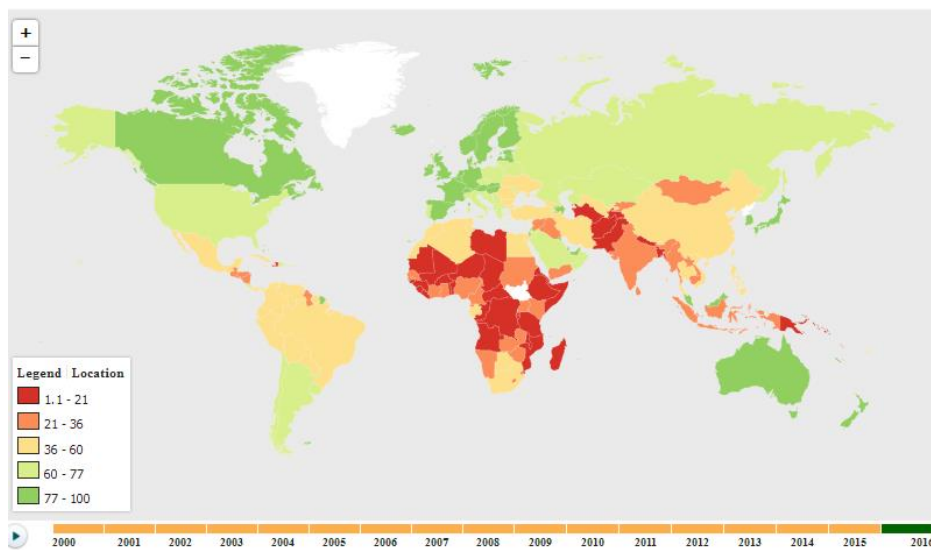
¹³⁷ UNICEF, Report on Awareness, perception and knowledge of 12-16-year-old children about child rights in Turkmenistan

The Ministry of Education has implemented some rather ad hoc measures to promote participation and empower children. Despite these efforts, interactive teaching and learning opportunities remain limited. Most children are expected to come to school to listen to and copy down teachers' lectures and such teaching practices constrain students' freedom of expression and active participation. Schools focus on knowledge transfer rather than development of skills such as working in teams, communication, and critical thinking. Often children know about their rights in general, but do not have the skills to claim their rights as right holders and may be afraid of expressing views contradicting views of the adults or other peers.¹³⁸ In communities, there is often strong emphasis placed on meeting the perceived interests of children through organizing children's festivals and other events.

The internet is growing as an alternative platform for accessing and sharing news and participation in Turkmenistan, but it remains strictly controlled by state authorities. Turkmenistan ranks 177th in the world for fixed-broadband subscriptions, with just 0.06 subscriptions per 100 inhabitants.¹³⁹ There is almost no active social media users and mobile social users.

Equipping children to exploit frontier technologies to access education and participate such as internet is becoming more important. It can quicken the pace of development, but it is equally important to ensure that it does not create a digital divide. Although the share of internet users is growing fast in Turkmenistan and in 2016, and it was 18 percent of total population, it is much lower than in other countries. Share of the internet users of Turkmenistan increased from 0.3 % in 2002 to 18 % in 2016.

Figure 12 Share of Internet Users, percentage of the population, 2016



Source: International Telecommunication Union Key Global Telecom Indicators, 2018

¹³⁸ UNICEF, Report on the international consultancy services in support to promotion of the child rights awareness and knowledge among young people with the focus on child participation in Turkmenistan

¹³⁹ The State of Broadband 2016: Broadband Catalyzing Sustainable Development,” Broadband Commission, 01 September 2016, <http://broadbandcommission.org/Documents/reports/bb-annualreport2016.pdf>

MICS 2016 found, for instance, that 47 percent of women age 15-24 ever used the internet, while 39 percent used during the last year. 90 percent of women with higher education used a computer at least once a week during the last one month.¹⁴⁰

Turkmenistan has made significant investments in promoting children's rights to recreation and leisure and participation in sports. Schools provide an important venue for children to play and engage in recreational activities. A wide range of diverse sports facilities for children was constructed and various sports clubs and activities are supported. Yet greater investment could be made in remote areas where children have less access to recreational and sports facilities.

There are several determinants that limit children rights to participation:

- Some social norms and values prevent meaningful child's participation. Often the adults try to meet the perceived interests of children (e.g. organising children's festivals and other various events) instead of engaging them into meaningful discussions.
- Existing initiatives of child participation have generally been conducted on an ad hoc basis without an overarching national framework and without taking children's perspective into consideration. There is no specific national policy promoting and institutionalizing children's participation.

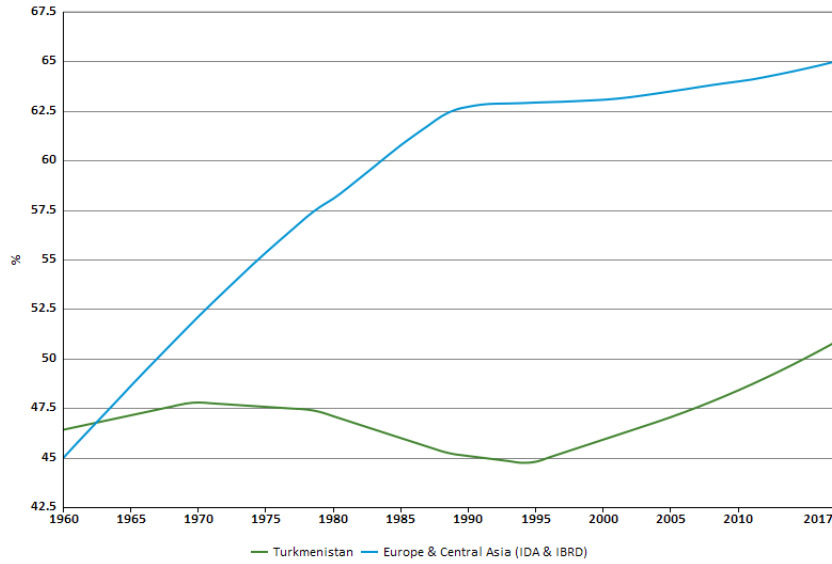
4.5 Regional disparities

Rapid economic development has resulted in different opportunities and outcomes for families and children based on where they live. The differences between urban and rural economies are very real, and the lion's share of future opportunities will be in the growth industries found in urban centres. Across indicators, those living in urban areas usually fare better than their rural counterparts—young people are more likely to stay in school longer; women marry later and have smaller families; and fewer infants die in their first year. This sub-section of the SitAn examines urban-rural divide and assesses if it widened or narrowed for children in Turkmenistan over the previous years.

The share of urban population in Turkmenistan is not as high as the average for Europe and Central Asia (65 percent in 2017), but it keeps increasing from the mid-1990s and reached 50.8 percent in 2017.

¹⁴⁰ Turkmenistan, The State Statistical Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016

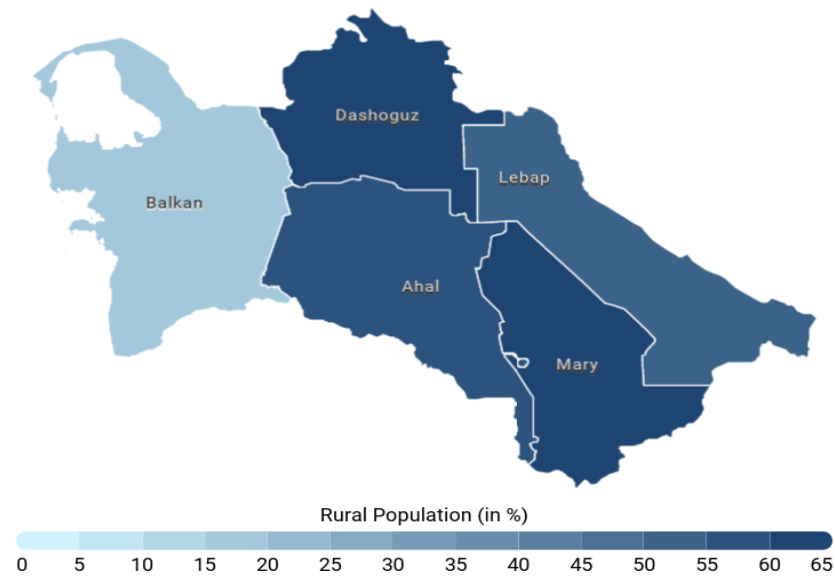
Figure 13 Urban population (% of total) Turkmenistan and Europe and Central Asia



Source: World Bank, Population Estimates and Projections, 2017

The Figure 15 below presents rural population distribution across velayats.

Figure 14 Share of rural population, by velayat



Source: The State Statistics Committee of Turkmenistan, 2018

The most striking urban-rural differences exist in wealth distribution among rural and urban households. Half of the household population in urban areas (51 percent) belongs to the richest wealth index quintile while there are no such households in rural areas. As MICS 2016 has shown, every second urban household has a computer/notebook (51 percent), as does one in three households in rural areas (35 percent). Availability of air conditioner, washing machine and vacuum

cleaner is more characteristic for urban areas (from 87 to 90 percent), whereas the presence of these items in rural areas varies from 60 to 64 percent.

Table 3 Percent distribution of the household population by wealth index quantile, urban and rural, 2015-2016

Area	Poorest	Second	Middle	Fourth	Richest
Urban	3	2	4.3	39.6	51.2
Rural	30.9	31.6	30.1	7.5	0

Source: Turkmenistan Multiple Indicator Cluster Survey 2015-2016, Final Report 2017

The President's national programme for the transformation of social and living conditions in villages, settlements, towns and district centres for the period up to 2020 is directed at creating modern socioeconomic infrastructures in rural areas and ensuring a high level of social and living conditions for the population. As part of the programme, comprehensive social and economic development plans have been elaborated for virtually all the regions of the country, and a list has been drawn up of top priority social, cultural and communal facilities that need to be built or restored in towns and villages, including the most remote areas. Turkmenistan maintains high level of investment into rural development to ensure that health, education and social supports and services available to rural residents are comparable with those provided in urban settings. Due to these continuous investments, there is almost no urban rural difference in breastfeeding and the percentage of children who were first breastfed within one day of birth is higher in rural than in urban areas by 4 percentage points and a share of children exclusively breastfed is higher by 7 percentage points in rural areas as well. There are no differences in consumption of iodized salt by area of urban and rural residence and the levels of vaccination is slightly higher in rural than in urban areas.

There is no difference in use of contraception between rural and urban areas. The fertility rates in urban and rural areas are also almost the same at 3.2-3.3 births per women, but adolescent birth rate is 1.4 times higher in rural compared to urban areas. All deliveries are assisted by skilled attendants, predominantly medical doctors. Mothers receive 4 or more antenatal care visits from providers in urban and rural areas.

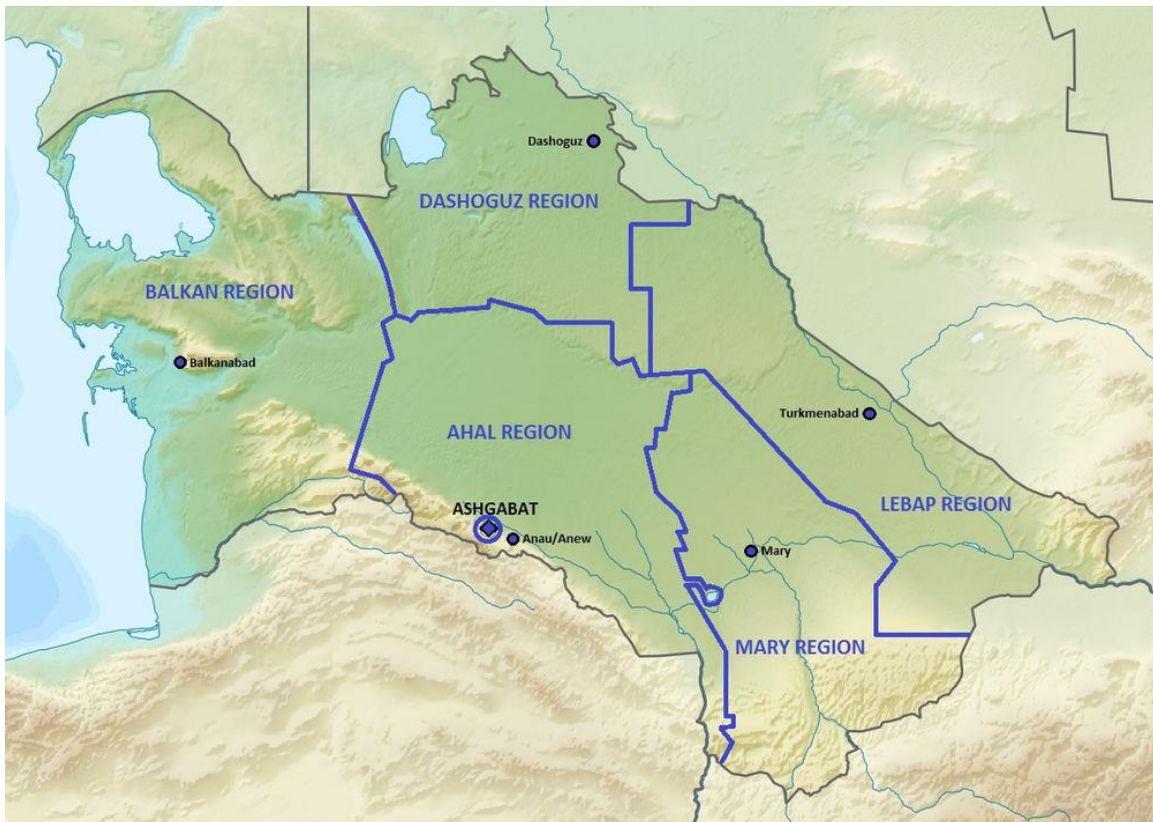
There are still a number of areas where additional actions have to be implemented to narrow the urban-rural divide. Neonatal mortality rates are twice higher for rural than for urban residents while the infant and under-five mortality rates are 30 percent higher that can be to some extent attributed to differences in quality of healthcare available, and professional capacity of the medical personnel.

MICS showed that in Turkmenistan, 43 percent of children age 36-59 months are attending an organised early childhood education programme. Urban-rural and regional differentials are notable – the figure is as high as 70 percent in urban areas, compared to 29 percent in rural areas. Although building full kindergartens may not be economically feasible in all villages across the country, children have to be provided with access to other forms of childhood programmes such as intensive summer schools, small group kindergartens groups located in schools, etc. to better prepare them for school and success in life. There is no urban-rural difference in elementary and secondary school attendance or graduation rates.

Urban areas outpace their rural counterparts in utilization of Internet. Higher utilisation of the internet during the last 12 months is observed among young women age 15-24 years in urban areas (58 percent) compared to those in rural areas (29 percent).¹⁴¹

There are significant variations among velayats in terms of child and women rights realization that can be attributed to differences in historical trajectories, values and cultural preferences, environmental and demographic factors, distribution of natural resources, fixed assets, and levels of development. As previous sections demonstrated, there are disparities in the supply and quality of state services but in this section the analysis goes deeper and identify those velayats where children and women experience more significant obstacles to realization of their rights that may require targeted and coordinated interventions of the national authorities.

Turkmenistan is divided into 5 velayats – Ahal, Balkan, Dashoguz, Lebap and Mary. The capital city of Turkmenistan is Ashgabat, which is an administrative and territorial unit with velayat-level power.



Ahal velayat accounted for 11.7% of Turkmenistan's population.¹⁴² Ahal's agriculture is irrigated by the Garagum canal, which stretches all the way across the province from east to west, tracking Turkmenistan's southern border. Another water source is Tejen River, which flows north from Afghanistan

¹⁴¹ Turkmenistan, The State Statistical Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016

¹⁴² The State Statistics Committee of Turkmenistan, Statistical Yearbooks of Turkmenistan 2017

Balkan velayat is located in the far west of the country, bordering in the north with Kazakhstan and Uzbekistan, in the northeast Dashoguz velayat, in the east with Ahal velayat, in the south with the Islamic Republic of Iran. In the west, the shores of the velayat are washed by the waters of the Caspian Sea. The Balkan region has significant energy reserves, which constitute the bulk of natural gas production in Turkmenistan and part of its oil production. Due to the very low water supply, the agricultural production is limited.

Lebap velayat is in the northeast of the country, bordering Afghanistan, Uzbekistan along the Amu Darya river. Due to sunny weather and abundance of water resources, cotton and wheat are grown in this region. Lebap velayat has extensive deposits of natural gas.

Mary velayat is located in the south-east of the country, bordering Afghanistan. The region's economy includes natural gas extraction, electric power generation, textiles, carpet weaving, chemical and food industry. The agriculture is well developed in Mary velayat due to the water availability supplied through the Garagum canal and the Murgab river.

Dashoguz velayat is located in the north of the country, bordering Uzbekistan. The region is mostly desert and is experiencing severe environmental degradation as a result of the Aral Sea man-made environmental disaster. Increased soil salinity has had a devastating effect on local agriculture, resulted in the deterioration in the quality of drinking water and decreased employment opportunities of the population. The Table 4.3 below presents regional distribution of children 0-17.

The government maintains high levels of investments into social sphere, with focused support of rural areas that helps to reduce the gaps in children and women outcomes among velayats. Despite these measures, the SitAn found the most significant cross-velayats differences in the following areas¹⁴³:

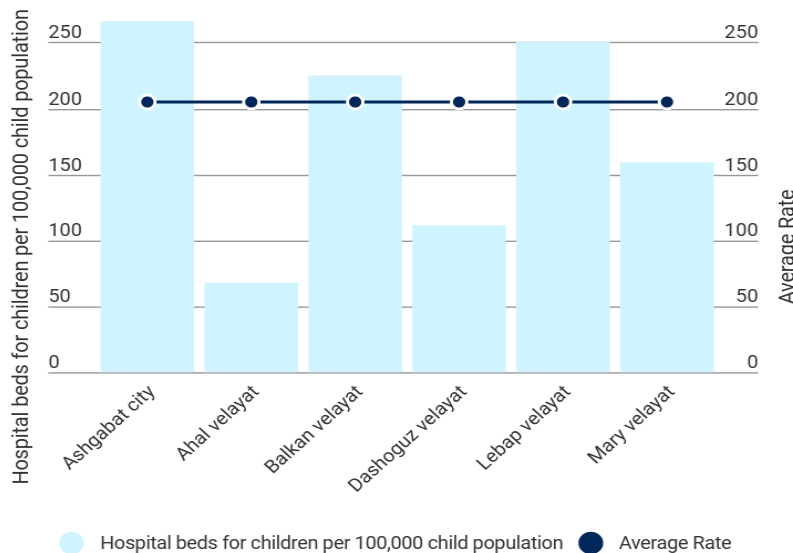
- Differences in assets and wealth. Households in Dashoguz velayat compared with other regions are the least likely to have an air conditioner (35 percent), washing machine and vacuum cleaner (each 52 percent), whereas the availability of these items in Ashgabat city is very high (from 94 to 98 percent)
- Access to drinking water. The best situation is in Ashgabat city where population use piped water into dwelling or into yard/plot (61 percent) and bottled water (39 percent). A less favourable situation is in Ahal and Mary velayats, where 38 percent and 36 percent respectively use drinking water from tanker truck. The use of tube-well / bore-hole is widespread in Lebap velayat (42 percent) and in Mary velayat (32 percent).
- Adolescent birth rates. In Ahal velayat, women in the adolescent period are more likely to have a birth (46 births per 1,000 women) compared to women from Balkan velayat (10 births per 1,000 women).¹⁴⁴

¹⁴³ Turkmenistan Multiple Indicator Cluster Survey 2015-2016, Final Report 2017

¹⁴⁴ UNICEF, Baseline assessment for child-related SDG indicators of Turkmenistan, 2018

- Availability of children’s books. In Dashoguz velayat only 0.6 percent of children under age 5 have 10 or more children’s books, in comparison with Lebap velayat where 18.3 percent of children have 10 or more children’s books in their households.
- Attitudes towards domestic violence. In Ahal velayat 69.6 percent of respondents believe that a husband is justified in hitting or beating his wife in at least one of the following circumstances: (1) she goes out without telling him, (2) she neglects the children, (3) she argues with him, (4) she refuses sex with him, (5) she burns the food (6) additional circumstances, in comparison with Lebap velayat where 21.4 percent of respondents share this view.
- Number of children with disabilities. In Balkan velayat, 1.07 percent of children 0-17 receive disability benefits, in comparison with Ashgabat city where only 0.57 percent of children 0-17 receive disability benefits.¹⁴⁵
- Rate of family physicians per 100,000 child population. The highest rate is in Ashgabat city with 185 family physicians per 100,000 children 0-17, in comparison with Dashoguz velayat with 88 family physicians per 100,000 children.
- Rates of hospitals beds for children. Ahal and Dashoguz velayats have the lowest shares of hospital beds for children per 100,000 children, as the visual below depicts.

Figure 15 Hospital beds for children per 100,000 child population, by velayat

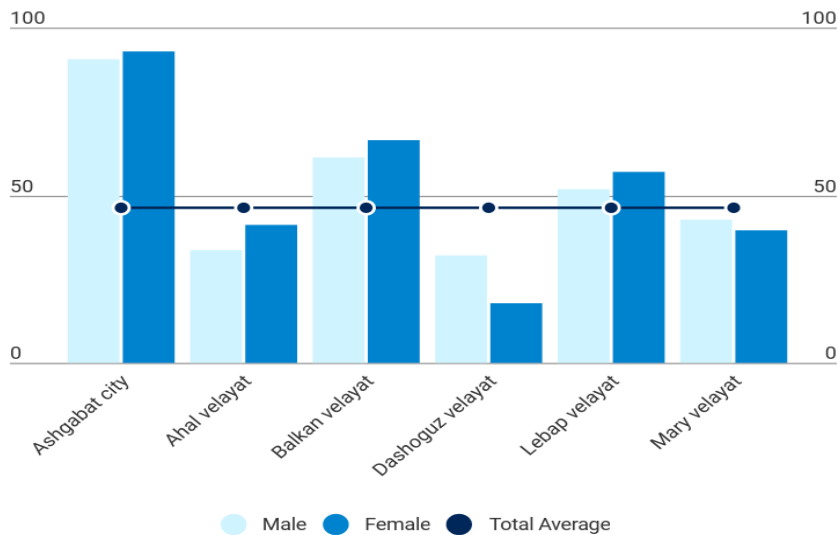


Source: UNICEF calculations based the State Statistics Committee of Turkmenistan data

- Access to pre-primary school education. First graders in Ashgabat city are four times more likely to attend pre-school (81 percent) than their counterparts in Dashoguz velayat (21 percent).

¹⁴⁵ UNICEF calculations based on MoLSP data.

Figure 16 Attendance of pre-primary education, by gender and velayat, 2016



Source: Turkmenistan, The State Statistics Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016

- Use of Information/Communication Technology. The use of the internet by 15-24-year-old women is the highest in Balkan velayat (60 percent) and in Ashgabat city (59 percent) and lowest in the Ahal velayat (17 percent).

Regional disparities exist and may create additional barriers to children and women to realize their rights. They can become a serious roadblock to achieving SDGs and national development goals. To ensure a harmonious and balanced development of all regions of Turkmenistan, it may be necessary to introduce a common conceptual framework for analysis of regional disparities in Turkmenistan reflecting the national and regional specifics, with particular focus at children and women’s rights realization. It is necessary to improve the evidence base, through establishing more robust disaggregated statistical profiles of disparities between/within the regions and rural/urban areas to monitor regional development in such diverse areas as access to health, education, environmental aspects, etc. and identify determinants contributing to these disparities. Once the determinants are analyzed, additional policy measures and programmes addressing region-specific children and women vulnerabilities can be developed and implemented to narrow regional disparities and promote equal opportunities for all children of Turkmenistan, irrespective of the velayat they live in.

5. Addressing key equity determinants and gaps

5.1 Equity gaps in Turkmenistan

Despite significant measurable progress achieved in children and women’s rights realization, there are vulnerable groups who face barriers and obstacles to enjoy their rights. The SitAn did not record significant inequalities but identified some vulnerable groups and key determinants contributing to their vulnerabilities. For many of vulnerable children and women, discrimination, lack or limited

access to state programmes and services and limited abilities to contribute to decision making represent serious barriers to their full human rights enjoyment. The widening inequalities during a period of robust growth is one of a major challenge faced by the Asia and Pacific region.¹⁴⁶ As the recent OECD study found, the inequalities frame the opportunities of the next generation: children with at least one parent who attained tertiary education are four times more likely to go to university than children whose parents did not complete secondary school.¹⁴⁷

There are vulnerable groups of children that were identified in this SitAn who face multiple complex challenges that cannot be resolved through interventions in one sector and require combined solutions from several ministries. The existing service and supports systems for children are designed and funded to address isolated needs. It is expected that the analysis of vulnerable groups provided below will inform work of relevant ministries in setting common priorities and developing solutions that will advance their rights.

5.2 Children with disabilities

Under Article 4 of CRPD, Turkmenistan is required to adopt all appropriate legislative, administrative and other measures for the implementation of the rights recognized in the CRPD and to take all appropriate measures, including legislation, to modify or abolish existing laws, regulations, customs and practices that constitute discrimination against persons with disabilities.

Turkmenistan has improved the legislative and regulatory framework with regard to the barrier-free access of government buildings, leisure and cultural facilities and public housings in recent years and embedded the accessibility requirements into the national legislation. The government institutions, local authorities, enterprises, organizations and institutions, regardless of ownership, are required to ensure that persons with disabilities can access residential, public and business buildings, structures and premises, public transport, communications and information. National building codes were revised to require minimum standards of access and were applied to all buildings at the time they were being built and during major renovations irrespective of ownership.¹⁴⁸

The number of children with disabilities in Turkmenistan is likely to be much higher than those who are officially recorded as receiving the child disability benefit (17,300 of 0-17 yrs. as of July 2017, MoLSP). It is mostly a result of the medical model of disability that dominates in the national legislation. The medical model of disability is still deeply embedded into decision makers, educators and parents' mindsets. The medical model has often focused more on what is "wrong" and how children with disabilities may be "remediated" to fit into mainstream schools, than on inclusive education approaches and practices. The newly adopted regulations on neonatal screening is expected to contribute to the efforts of prevention, early identification and early intervention.

In the area of education, the national education legislation and policies comply with many requirements of CRPD. According to the national legislation, persons with disabilities are not

¹⁴⁶ United Nations ESCAP, Asia and the Pacific SDG Progress Report 2017

¹⁴⁷ OECD, Bridging the Gap: Inclusive Growth 2017 Update Report, 2018

¹⁴⁸ Article 140-142, Approving and Implementing the Code of Turkmenistan on Social Protection of the Population, 2012

excluded from the general education system on the basis of disability and children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability. The education of persons, and in particular children, who are blind, deaf or deafblind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development.¹⁴⁹ According to the Law of Turkmenistan “On guarantees of the rights of the child”, children with disabilities are entitled to have the right to enjoy a full and decent life and active participation in the community. Children with disabilities who are entitled to attend mainstream educational institutions where they can benefit from special (correctional) educational classes to ensure that they receive treatment, education and training facilitating their social inclusion and integration into society.¹⁵⁰

Children who, due to their health conditions, cannot attend mainstream educational institutions, are enrolled in special educational institutions. In special educational institutions, in accordance with the curriculum and programmes, children, including girls, receive basic education, the necessary rehabilitation and health services, and assistance in supporting their life aspirations. The Medical Pedagogical commissions review their individual cases and may transfer these students into general type educational institutions. For children who receive long-term treatment in medical institutions, access to education is provided in accordance with a special curriculum, adapted programmes and lesson schedules at the place of their stay (treatment) by teachers of a nearby secondary school. Teachers attend and teach some children with disabilities at home.

The health legislation in Turkmenistan guarantees a wide range of free quality health care services and supports (e.g., prosthetics, orthotics, wheelchairs and walking aids). The government improved access to health care facilities by re-establishing medical centres in rural area and enhancing a system of rehabilitation. Children with disabilities can access rehabilitation centres, rehabilitation wards, specialized sanatoriums and institutions to access such rehabilitation services as free physical assessment, physiotherapy, and massage.

Despite these significant improvements in supports available to children with disabilities, the main factor that reduces opportunities for children with disabilities to enjoy their rights is the stereotyping of and prejudice against them that remain widespread. There is also a genuine and widespread lack of understanding that most persons with disabilities could in fact function effectively at work, school, and with society, if given adequate support.

“The Main Criteria for Determination of Disability of the MoHMI, MoE and the MLSP” define disability as a lasting long-term or permanent loss of ability to work caused by physical, mental or severe chronic diseases (injuries) resulting in disorders of body functions. Commission for medical and educational assessment makes placement decisions based on this medical model and definition and do not prioritize school or broader society inclusion of children with disabilities. As a result, many children with disabilities, for instance, cannot access mainstream schools and have limited opportunities to interact with non-disabled peers. The Committee on the Rights of Persons with Disabilities, recognizing this limitation, recommended in its Concluding observations that the process of inclusive education of students with disabilities be not dependent solely and exclusively on the

¹⁴⁹ CRPD, Article 24.

¹⁵⁰ Article 9, Education Law of Turkmenistan, 2013.

decision of a commission for medical and educational assessment, but also on providing pupils with disabilities with accessible conditions in schools and ensuring that they are free to decide on the vocational training they wish to receive.¹⁵¹

Disability allowances and extended family support and care form the two main pillars of the system of social support for children with disabilities and their families. While in most cases extended family members help to provide care for children with disabilities, in some cases this type of help may not be available and children are more likely to be placed into residential forms of care as a result. Many children in institutions have regular daily or weekly contacts with their families. High levels of interaction with siblings are recorded for most children in families and many in institutions. Around 40-50 percent of children with disabilities in both families and institutions have friends.¹⁵²

The network of rehabilitation centres provides health and education services for children with disabilities aged 3-18 but they are based on defectology and medicalized approach to disability, leading to their separation, stigmatization, segregation and institutionalization. Expansion of well-equipped and staffed community rehabilitation centres resulted in improved early screening and more comprehensive interventions that improved lives and functioning of children with disabilities and enabled them to access education in these centres. The centres provide free individualized medical and rehabilitation services, education, independent living skills, social and communication skills to better prepare them for integration into society and inclusion into mainstream education and boarding for children with disabilities.¹⁵³ In addition, families are entitled to free rehabilitation services and devices such as prosthetics, orthotics, hearing and vision aids, and wheelchairs.

UNICEF currently works with the MoE to support establishment of multi-disciplinary teams across the network of rehabilitation centres (pediatrician, pedagogue, physical and occupational therapist, specialist on early communication, psychologist) who will provide assessment and support of children with disabilities and their families guided by the social model of disability. The services will aim to promote their inclusion in mainstream education (initially in pre-school) and overall social inclusion of these children and their families. This in turn will support reduction in the number of children in these facilities and hopefully result in their deinstitutionalization. Based on the above concept, the rehabilitation centres may potentially transform into resource centres to provide family support services and promote inclusive education.

Community services and supports to children with disabilities and their families are underdeveloped to address the needs of children with disabilities and their families. The UN Committee on the Rights of the Child recommended, in its Concluding Observations, to develop community-based rehabilitation programmes and home-based care, with a view to reducing the institutionalization of children with disabilities and accelerate its efforts towards the inclusive education of children with disabilities.¹⁵⁴

¹⁵¹ Committee on the Rights of Persons with Disabilities, Concluding observations on the initial report of Turkmenistan, 2015

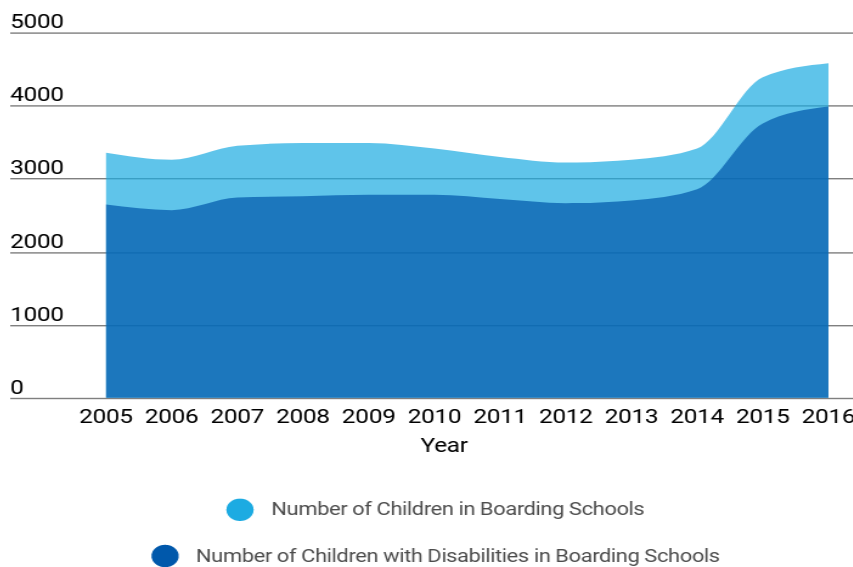
¹⁵² UNICEF Turkmenistan, Survey and Situation Analysis of the Boys and Girls with Disabilities in Turkmenistan, Report, 2015

¹⁵³ Устав реабилитационного учебно-воспитательного комплекса города Ашхабада, 2015

¹⁵⁴ Committee on the Rights of the Child, Concluding observations on the combined second to fourth periodic reports of Turkmenistan, 2015

The rehabilitation centres are an important step forward in improving services and supports provided to children with disabilities, but they do not promote inclusive education as parents, in the absence of locally available services and supports, prefer to place their children in these residential institutions. Few families are aware of the advantages of caring for children with disabilities at home and may not be aware of their health, nutrition and other needs. Interestingly enough, as the Chart below demonstrates, the introduction of centres increased the number of children in residential institutions. Travel to access rehabilitation and other social services, most of which are based in cities and district centres, is unaffordable for many families of children with disabilities. It is notable that significantly more children living in residential facilities are reported to have a single parent.¹⁵⁵

Figure 17 Children in residential institutions



Source: TransMONEE data (administrative data received from the Government of Turkmenistan), 2018

The Law of Turkmenistan “On Education” (Article 4) encourages creation of special institutions for children with disabilities, abridging their right to choose education in mainstream institutions. Children with disabilities still face major challenges in acceptance into mainstream education, including inadequately trained teachers, physical inaccessibility, a lack of assistive equipment, and overall limited understanding of disabilities.¹⁵⁶ Other main factors impeding the integration of these children into mainstream schools are the schools’ lack of physical accessibility and resistance to change among some school managers and teachers. Many children who live in families are being educated through home-based teaching. Most extra-curricular activities for children with disabilities are organized in segregated residential schools and are not readily accessible to children with disabilities living in families.

¹⁵⁵ UNICEF Turkmenistan, Survey and Situation Analysis of the Boys and Girls with Disabilities in Turkmenistan, 2015

¹⁵⁶ Teresa Gonzalez, Desk Review of ECD Documents for Turkmenistan, Early Childhood Development, 2014

Our recommendation is about children with disabilities, including children and young people and their opportunities to be a part of the society. We don't get to see many people of disabilities in public places, including schools. We recommend increased accessibility in public transports, public and social facilities, and increased availability of assistive devices for people with disabilities, decent labour, inclusive educational and healthcare opportunities for all, including children. We also call for increased social support services, subsidies and allowances for socially vulnerable families and people with disabilities.

Recommendations of young people and children expressed during the session with MAPS Mission on 20 November 2017

Addressing the identified need to improve employment opportunities for persons with disabilities, in 2016, the MOLSP issued an order approving regulation whereby companies are required to set aside up to 5 percent of the total number of jobs for persons with disabilities and for single parents of large families whose children are under the age of 18 or have disabilities. A Presidential decision was issued on the approval of a Plan of Action for the Full Realization of the Labour and Employment Rights of Persons with Disabilities in Turkmenistan for the period 2017–2020.

It can be expected that a strong government commitment to include children with disabilities and the international expertise would institutionalize a social model of disability in Turkmenistan that will inform all policy decisions affecting persons with disabilities. Disability is not the attribute of the individual; instead, it is created by the social environment and requires social change. Under this approach, the disability focus is no longer how to provide for those deemed "unable" to integrate into mainstream society, but rather how to make society accessible to all, on an equal and non-separate basis.

5.3 Gender inequities

In 1996 Turkmenistan joined the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), and in 2009 ratified its Optional protocol. The Committee on the Elimination of Discrimination against Women welcomed the ratification by Turkmenistan of the Optional Protocol to the Convention, but expressed its concern that women themselves, especially those in rural and remote areas, are not aware of their rights under the Convention, and thus lack the necessary information to claim their rights.¹⁵⁷

Subsequent concluding observations have noted continuing barriers and bottlenecks to women and girl's full realization of rights, which has an impact on females but also on all children, both boys and girls. Despite the fact that Turkmenistan also adopted the Programme of Beijing Platform for Action of the IV World Conference on Women, there are rigid gender roles assigned to men and women in society which can result in discriminatory gender norms which have negative impacts and diminished opportunities for women and girls. Historic scholars point to different roles and prominent women leaders in pre-Soviet Turkmen societies; including the all women military battalions of Nisa, and the female national leader, Guljema Han, who succeeded her husband Nurberdi Han.¹⁵⁸

¹⁵⁷ Committee on the Elimination of Discrimination against Women Concluding observations on the third to fourth periodic report of Turkmenistan adopted by the Committee at its fifty-third session (1-19 October 2012)

¹⁵⁸ <http://www.everyculture.com/To-Z/T-rkmenistan.html#ixzz5KNh6wV7A>

The national legislation recognizes equality of rights of women and men and put solid institutional and legal foundations for gender equality, however there remain gaps within the legislative framework including the lack of domestic violence legislation. The Constitution of Turkmenistan guarantees equality for men and women before the law, women and men have equal ownership and inheritance rights to property. A law "On State Guarantees of Equal Rights and Equal Opportunities for Women and Men" was adopted in August 2015 and a number of laws regulating access to justice, participation in elections, access to social protection and education were revised to comply with the international human rights framework. In 2018, for example, the existing Family code was revised to include a provision prohibiting polygamy.¹⁵⁹

Women and girls in Turkmenistan have equal constitutional rights as men and boys in the economic, political, cultural, and social fields, as well as in the family, and these rights are reinforced in the laws. Women, for example, are entitled to 112 calendar days of maternity leave with 100% of wages paid, upon expiry of maternity leave, a woman is entitled to unpaid childcare leave until the child reached the age of three. The guarantees and privileges granted to women in connection with maternity also apply to fathers who bring up children without a mother, as well as guardians (trustees) of minors.

In 2008, the honorary title of "Ene Myahri" was established to acknowledge women who have given birth and brought up eight or more children. While maternal mortality ratio has decreased since 1990 to 2015 (from 82 to 42 per 100,000 live births)¹⁶⁰, rates of adolescent fertility (births per 1,000 women ages 15-19) have flatlined at 20+ since the 1980s.¹⁶¹

There have been some notable positive changes in Turkmenistan. In January 2015, the government adopted the National Action Plan on Gender Equality 2015-2020, but more detailed information on Plan implementation including activities undertaken, funding allocated, and results achieved were not available when this SitAn was developed. The Committee on the Elimination of Discrimination against Women had expressed its concern, in 2012, about the absence of a specific national machinery for the advancement of women as well as the absence of assessment or impact analysis of past policies, programmes and action plans.¹⁶² Another positive advance is the recent approval by the Government of a UNFPA-supported national domestic violence prevalence study; this has been pending for four years and it will fill a major gap in national data. Finally, on June 19, the government's newspaper "Neutral Turkmenistan" reported on amendments and additions to the existing Family code of the country. In particular, the amendments to the seventh article of the code prohibit polygamy and will officially come into force on 1 September 2018.

Although there is a high level of *de jure* equality between men and women, the persistence of discriminatory laws, social norms and practices and the inequalities experienced by the most marginalized groups of women and girls lead to *de facto* gender inequality. Critical issues such as violence against women, inequalities in the division of unpaid care work, women's limited access to assets, violations of women's and girls' sexual and reproductive health and rights, and their unequal

¹⁵⁹ Newspaper "Neutral Turkmenistan", June 19, 2018.

¹⁶⁰ http://www.who.int/gho/maternal_health/countries/tkm.pdf, accessed 6/20/2018

¹⁶¹ <https://data.worldbank.org/indicator/SP.ADO.TFRT?locations=TM&view=map>, accessed 6/20/2018

¹⁶² Convention on the Elimination of All Forms of Discrimination against Women, List of issues and questions with regard to the consideration of periodic reports, 2012

participation in private and public decision-making beyond national parliaments, remain inadequately addressed.¹⁶³ The Committee on the Elimination of Discrimination against Women, for instance, expressed its concern about the absence of a specific national machinery for the advancement of women as well as the absence of assessment or impact analysis of past policies, programmes and action plans.¹⁶⁴

Social norms, institutional capacity gaps, attitudes and practices, and income disparities underlie the gender disparities in Turkmenistan. Gender stereotypes that depict men as leaders and providers and women playing supporting roles being primarily responsible for domestic matters and child care remain deeply embedded into public thinking. Women, including grandmothers, are disproportionately burdened with household chores and care work. In its 2015 Concluding Observations, the CRC Committee expressed concern over persistent discrimination against girls due to cultural bias, patriarchal mindsets, and stereotypes.¹⁶⁵ Gender roles become more defined as children reach 12-14 and 15-17 years of age. The gender disparity between boys and girls for household chores is clear after age 12 and it increases for children older than 15 years of age.¹⁶⁶ While there is little evidence of a skewed sex ratio in Turkmenistan, a recent study of Azeri and Turkmen households revealed a clear son preference.¹⁶⁷ The gender-based stereotypes in Turkmenistan society negatively affect gender equality but the objective disaggregated measures of gender equality are not available.

Some social norms negatively affect men who face enormous pressures to be a 'real man', to demonstrate physical and emotional strength, and to provide financially as the family 'breadwinner'. The pressure to remain emotionally resilient often prevents men from seeking help when they experience anxiety, depression and other mental-health issues. In 2015 suicide mortality rate for women was 5.1 and for men it was 15.2 per 100,000 population in Turkmenistan.¹⁶⁸ Male life expectancy is lower than for females and is increasing at a slower pace. In 2017, female life expectancy for Turkmenistan was 71.4 years (an increase from 71.2 years in 2015 at an average annual rate of 0.2 percent. In contrast, in 2017, male life expectancy for Turkmenistan was 64.5 years (an increase from 64.3 years in 2015 at an average annual rate of 0.17 percent).¹⁶⁹

In a traditionally female-centric child-rearing culture, fathers in Turkmenistan carve out their immediate and long-term parenting roles

Only 14 per cent of young children have fathers who play with them or support them with early learning activities. Some fathers break from the old tradition where mothers play the leading role in raising children. Eziz is an entrepreneur and has his own textile company. "When I come back from work I'm always anxious to see my first baby. I rush into the home and my world shines again," says Eziz. "It's stupid not to pay attention to children. Those fathers who are not involved didn't get attention from their fathers, it's a dangerous cycle. To rear a child with love and pay attention to their needs makes them more engaged in the world around them. Love is the key to bringing up children. When there isn't love, children are brought up senseless."

¹⁶³ United Nations Development Group, Europe and Central Asia, Building More Inclusive, Sustainable and Prosperous Societies in Europe and Central Asia: From Vision to Achievement of the Sustainable Development Goals Call for Action from the Regional UN System, 2017

¹⁶⁴ Convention on the Elimination of All Forms of Discrimination against Women, List of issues and questions with regard to the consideration of periodic reports, 2012

¹⁶⁵ Committee on the Rights of the Child, Concluding Observations on the Combined Second to Fourth Periodic Reports of Turkmenistan, March 10, 2015.

¹⁶⁶ MICS 3, 2015-2016

¹⁶⁷ <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.822.2358&rep=rep1&type=pdf>

¹⁶⁸ UNICEF, Baseline assessment for child-related SDG indicators of Turkmenistan, 2018

¹⁶⁹ United Nations Department of Economic and Social Affairs, <https://www.un.org/development/desa/en/>

One of social norms that negatively affects women is the practice of “galyn”, or bride token, which is money, property, or other form of wealth paid by a groom or his family to the family of the woman he will be married or is just about to marry. The price may range from a small sum of money or a single piece of livestock to what amounts to a herd of livestock, depending on local traditions and the expectations and agreements of the families involved.

Although official rates of child marriage or early union (before 15 or 18 years of age) are relatively low – less than 1 percent for those under 15 and 6 percent for those under 18, there is significant variation, with some velayat such as Lebap with almost 10 percent for women between 20-49 who were married before 18, and higher rates in rural areas (8 percent) for girls aged 15-19 years who are currently married or in a union. There are also generational differences between women aged 20-49 and those aged 15-19, with some velayat reporting lower rates for current generation of girls under 19 (Balkan and Lebap) and higher rates in Mary.

The age of consent, which is the minimum age at which an individual is considered legally old enough to consent to participation in sexual activity is 16 years in Turkmenistan. The minimum age for marriage was raised from 16 to 18 years (with some exceptions) in the new Family Code in 2012.¹⁷⁰ This change seems to be already leading to a reduction in child marriage, as further analysis of MICS indicates that child marriage among the 15-17-year-old women was 0.2 percent. The average age of females at first marriage in Turkmenistan was 23.6 years in 2016, a slight increase from 23.3 years in 2005.

In Turkmenistan, grandmothers play a significant role as advisers to younger women in their domains of expertise such as maternal nutrition, pregnancy and delivery, newborn care and breastfeeding, home care for sick children, and referral of sick children to health-sector specialists. UNICEF has worked with the Women’s Union in the past which boasts a 700,000 membership throughout Turkmenistan, and which may provide channels of communication to women, including grandmothers. They also serve as the primary caregivers of women and children and maintain continuity of social norms through generations.

Equal access to education is guaranteed in Turkmenistan, and there is a gender parity in primary and secondary school enrolment rates of girls and boys. At the level of upper secondary specialized secondary and post-secondary education, however, enrolment rates for girls are lower than the rates for boys. Young men pursue mostly careers in such fields as transport and communications, construction, and agriculture while young women focus on the fields predominantly dominated by women such as education and health care. The National Action Plan on Gender Equality recognizes this limitation and includes a strategic action of “providing girls with consultations on choosing non-traditional professions, especially in the natural sciences and technology, as well as in the technical field.”¹⁷¹

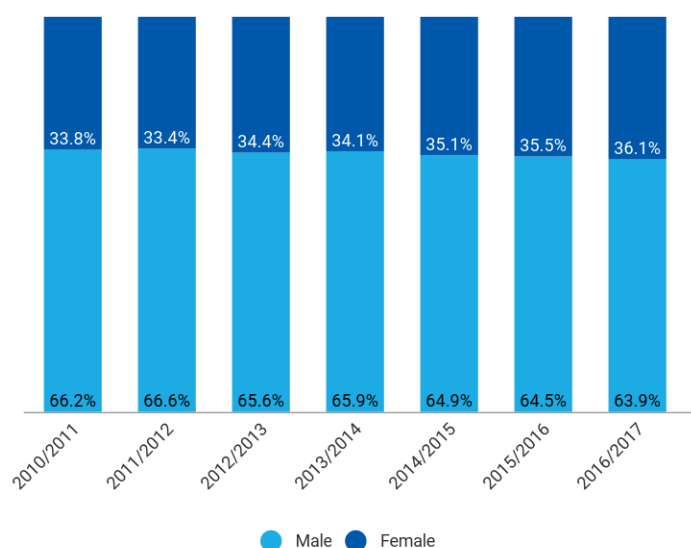
¹⁷⁰ <http://turkmenistan.gov.tm/?id=779>

¹⁷¹ National Action Plan on Gender Equality in Turkmenistan for 2015-2020, 2015

Expected years of schooling are slightly higher for boys (11 years) than for girls (10.6 years).¹⁷² The latest MICS 2015-2016 survey found insignificant variations among velayats in percentages of boys and girls of upper secondary school age (grades 10-11) attending upper secondary school or higher. The largest difference was In Mary velayat, where the net attendance ratio for male students was 94.8% vs. 84.2% for female students.

Despite consistent parity in boys and girls school attendance, as the chart below demonstrates, women are consistently less represented at the higher education level, especially in non-traditional career paths, such as mathematics, engineering, information technology and natural sciences. Such educational choices are undoubtedly influenced by persistent gender stereotypes. Technical fields of study generally correlate to jobs in higher-paying industries, whereas humanities studies lead to lower-paid jobs, often in the public sector. In Russian Federation, for example, the share of women in tertiary programmes¹⁷³ (higher level of education) was 53.5% in 2015-2016.¹⁷⁴

Figure 18 Higher (Tertiary) School Students, by Sex, 2010/2011 – 2016/2017.



Source: The State Statistics Committee of Turkmenistan, Statistical Yearbooks of Turkmenistan 2017

A significant proportion of economically active women is unemployed or underemployed because of their reproductive and housekeeping roles due to cultural biases, patriarchal attitudes and deep-rooted stereotypes.¹⁷⁵ Stereotypes continue to shape how the population perceives the role of

¹⁷² Number of years of schooling that a child of school entrance age can expect to receive if prevailing patterns of agespecific enrolment rates persist throughout the child's life. UNDP, Human Development Reports, <http://hdr.undp.org/en/indicators/123406>

¹⁷³ For more information on International Standard Classification of Education (ISCED), see <http://uis.unesco.org/en/isced-mappings>

¹⁷⁴ UNICEF, Monitoring the situation of children and women in Europe and Central Asia, TransMonEE <http://transmonee.org/countries/>

¹⁷⁵ Turkmenistan: Submission to the Committee on the Elimination of Discrimination Against Women by United Nations Country Team – Turkmenistan

women, such as the expectations that a woman remains in the home and not seek employment. Gender disparities in transition to employment was identified as one of the issues faced by women in Central Asia.¹⁷⁶ Overall, there is a significant difference in labour force participation rates – 88.9 percent for males vs. 72.3 for females in 2017. There are also variations in the share of women employed in large and medium enterprises, ranging from 35.8 percent in Ahal velayat to 45.3 percent in Ashgabat city in 2016.¹⁷⁷

In its 2012 Concluding Observations, the CEDAW Committee expressed concern over the lack of laws to address violence against women, as well as the lack of data on the issue.¹⁷⁸ The Committee urged the government to “expeditiously” adopt a law addressing violence against women, provide victims of violence access to redress and protection, and ensure offenders are prosecuted and punished. During its 2013 Universal Periodic Review, Turkmenistan accepted recommendations to identify means of overcoming the culture of silence and impunity surrounding domestic violence, provide protection and assistance to victims, and adopt specific legislation on domestic violence that criminalizes the offense, provides victims means of redress, and holds offenders accountable.¹⁷⁹ In 2018 Turkmenistan reported that “there is no specific offence of “domestic violence” in the legislation of Turkmenistan. However, under the Criminal Code, unlawful acts committed in the domestic sphere are criminalized. The relevant provisions of the Code criminalize unlawful acts of degradation, humiliation or cruelty and the infliction of various types of bodily injury, including on women.”¹⁸⁰

Turkmenistan does not have a special law addressing and criminalizing domestic violence against women nor does it have a legislation on all forms on violence against women. Victims experience higher community pressure thresholds to file complaints of domestic violence with the police as well as social stigma. There are no voluntary organisations in place that have sufficient capacity to provide support through a hotline, face to face psychological support and, if necessary a shelter.

UNFPA, UNICEF and other UN agencies promote multi-sectoral response to address gender-based violence, which brings together several key sectors, including the police, the legal and justice system, social services and health sector. UNFPA, for instance, is strengthening capacity of healthcare services in addressing gender-based violence because health services are among the first places survivors of abuse seek assistance.¹⁸¹

Victims of domestic violence are hindered by social stigma that prevents them from coming forward to file reports before the police and other authorities or avail them-selves of other remedies. MICS assessed the attitudes of women age 15-49 years towards wife beating by asking the respondents

¹⁷⁶ Burnet Institute, *Girls Count: A Review of Gender Inequality and Its Impact on Children and Adolescents in Asia and the Pacific*, 2018

¹⁷⁷ The State Statistical Committee of Turkmenistan, *Statistical Yearbook of Turkmenistan*, 2017

¹⁷⁸ CEDAW, *Concluding Observations on the Third to Fourth Periodic Report of Turkmenistan Adopted by the Committee at Its Fifty-Third Session (1-19 October 2012)*, Nov. 9, 2012

¹⁷⁹ Report of the Working Group on the Universal Periodic Review: Turkmenistan, Human Rights Council, July 5, 2013

¹⁸⁰ Turkmenistan, National report submitted in accordance with paragraph 5 of the annex to Human Rights Council resolution 16/21, Human Rights Council, Working Group on the Universal Periodic Review Thirtieth session, 7-18 May 2018

¹⁸¹ Helping healthcare professionals identify and support survivors of gender-based violence, May 30, 2018, <http://turkmenistan.unfpa.org/en/news/helping-healthcare-professionals-identify-and-support-survivors-gender-based-violence>

whether they think that husbands are justified to hit or beat their wives in a variety of situations. Overall, 26 percent of women in Turkmenistan feel that a husband is justified in hitting or beating his wife in at least one of the five situations. Women who justify a husband's violence, in most cases agree and justify violence in instances when a wife neglects the children (20 percent) or argues with him (12 percent) or if she demonstrates her autonomy, exemplified by going out without telling her husband (8 percent). 27 percent of women justify the husband hitting or beating his wife if she does not respect her husband's parents. Interestingly enough, there is almost no difference across wealth index quintiles, but 28 percent of women with primary education feel that a husband is justified in hitting or beating his wife in at least one of the five situations in comparison with 15 percent of women with higher education.¹⁸²

The Mejlis of Turkmenistan is planning to work on the development of the draft Law of Turkmenistan "On the Protection of Women from Domestic Violence". Successful solution of this problem will largely depend on a deep understanding of its essence, as well as adopting methods of providing timely assistance to victims of domestic violence and, of course, on the inclusion of this problem into the state social policy agenda.

Despite outlawing of corporal punishment, as noted above, child discipline practices demonstrate an intergenerational tolerance of use of physical punishment within families. According to the MICS 2015-2016: "37 percent of children age 1-14 years were subjected to at least one form of psychological or physical punishment by household members during the past month (MICS indicator 8.3 - Violent discipline), while 5 percent of respondents to the household questionnaire believe that physical punishment is a necessary part of child-rearing."

Women with disabilities face multiple deprivations - more than men with disabilities and women without disabilities. Although the unemployment is high among all persons with disabilities in Turkmenistan, the available anecdotal evidence suggested that women with disabilities were less likely to be employed than men with disabilities. This exclusion had ramifications for all areas of life and cut across the domains of time and space, practices and participation, and power and decision-making. As a result, women with disabilities were often denied equal enjoyment of their rights, in particular by virtue of the lesser status ascribed to them by tradition and custom, or as a result of overt or covert discrimination.

Turkmenistan has progressed towards gender equality and women's empowerment over the last decade in terms of their representation at the decision-making level. Representation of women in politics is higher than average in the Central Asian region. The Parliament is led by a woman chairperson, and women account for 24.8 percent of the 125 deputies in the Parliament. The Women's Union¹⁸³ has 16 seats in the Mejlis and the Chairperson of the Mejlis as well as some deputies are women. These achievements are commendable, but there is a need to continue state efforts of increasing participation of women in political and public life as women are underrepresented

¹⁸² Turkmenistan, The State Statistical Committee of Turkmenistan and UNICEF, Turkmenistan Multiple Indicator Cluster Survey 2015-2016

¹⁸³ The Women's Union established as public organization in 1992. The goal of the Women's Union is to support women's rights, assist women in adaptation to the transition toward a market economy and protect the health of women and children. It has structural sub divisions at the central level, and at local levels, in all velayats (regions) and villages.

in the top positions of the executive power as there is only one woman at the level of Deputy Prime Minister in the government.

The areas where additional efforts to advance women rights in Turkmenistan can include introduction of specific mechanisms to facilitate women’s access to justice, including legal aid schemes; establishing one centralized national machinery for the promotion of gender equality and gender mainstreaming. Better targeted mental health supports addressing challenges faced by men can be introduced.¹⁸⁴ More systematic approaches to combat all forms of gender-based violence and abuse against women and girls such as expansion of the Women Union’s regional women’s information and resource centres can be adopted as well.¹⁸⁵ The table below summarizes key findings of the chapter on gender inequities and identifies key determinants and vulnerable groups.

A recent Gender Programme Review identified two areas for accelerated programming for the Turkmenistan CO – the first is with regards to addressing the Target Priority for adolescent girls health, with a focus on nutrition (Anemia) and an Integrated Strategy to address gender roles through ECD programming that promotes engaged fatherhood, reaches grandmother decision makers and supports professionalization of female health cadre, including providing skills building and access to ICT health tracking systems for patronage nurses.

Gender-focused determinants summary

Key determinant	Groups affected	Description
Social norms	All women	Discriminative stereotypes about the place and roles of women and men in the Turkmen society are strong and persistent and affect their access to education and employment
	Women with disabilities	Qualified females facing challenges in accessing higher education Despite progress made in realizing rights of women and girls with disabilities, they experience multiple and intersectional forms of discrimination, which affect their rights to education, health and employment and the right to be protected from violence. ¹⁸⁶
	Men experiencing anxiety and other mental health challenges	

¹⁸⁴ See, for instance, Committee on the Elimination of Discrimination against Women: Concluding observations on the third to fourth periodic report of Turkmenistan adopted by the Committee at its fifty-third session (1-19 October 2012)

¹⁸⁵ Committee on the Elimination of Discrimination against Women Consideration of reports submitted by States parties under article 18 of the Convention on the Elimination of All Forms of Discrimination against Women Combined third and fourth periodic reports of States parties Turkmenistan, 2011

¹⁸⁶ In accordance with the current Law of Turkmenistan "On Education," the state creates conditions enabling all citizens, including girls with disabilities and special needs, to access education in mainstream schools and other educational institutions. According to this Law, girls with disabilities attending mainstream education institutions, along with other children, learn and participate in all activities of these educational institutions in accordance with their interests and desires.

		Men who experience anxiety and other mental health challenges but experience social pressure not to seek help
Legislation/policies	Women and children experiencing violence at home	Insufficient protection mechanisms for children and women experiencing domestic violence
Budget allocations	Women facing prejudices in pursuing higher education or highly paid employment opportunities	Limited allocations do not allow conducting comprehensive awareness raising and education programmes promoting gender equity
Capacity of relevant partners to deliver supports/services	Women, especially victims of domestic violence	Limited resources, skills and capacities of relevant service providers, including CSOs, to support victims of violence
Demand of specific population groups to use services or adopt behaviours	Women, especially victims of domestic violence	Often many women cannot protect their rights, especially in cases of domestic violence

5.4 Early childhood development: cross-sectoral analysis

During first years of life, the brain develops at an astounding rate. The years from conception through birth to eight years of age are critical to the complete and healthy cognitive, emotional and physical growth of children. Decades of rigorous research show that children’s earliest experiences play a critical role in brain development.

Early childhood is key for well-being and success throughout life. Socio-emotional and cognitive skills developed early on in life have a large impact on people’s potential, and inadequate learning environments can prevent full child development.

High quality early childhood development services can change a child’s developmental trajectory and improve outcomes for children, families, and communities. Through play and inquiry, young children practice ways of learning and interacting with the world around them that they will apply throughout their lives. Problem solving and critical thinking, communication and collaboration, creativity and imagination, initiative and citizenship are all capacities vital for success throughout school and beyond.

Early childhood development (ECD) programmes play an important role in supporting children’s learning, development, health, and well-being. Evidence from diverse fields of study tells us that children grow in programmes where adults are caring and responsive. Children succeed in programmes that focus on active learning through exploration, play, and inquiry. Children thrive in programmes where they and their families are valued as active participants and contributors.

Realizing the importance of ECD, the Government of Turkmenistan is exploring a possibility of adopting a comprehensive a National Early Childhood Development and Early Intervention Strategy for 2018-2024. The Strategy aims to reinforce the national policy on early childhood with focus on

cross-sectoral coordination and integration of ECD services and vulnerable children and families, while giving special attention to the quality of early childhood care and education.

In Turkmenistan, the Ministry of Health and Medical Industry has a primary responsibility for children aged 0 to 3 years old, while the Ministry of Education is responsible for 3 to 7-years-old. ECD is a priority of the health sector due to its involvement in activities related to infancy and early childhood. The Ministry of Social Protection has specific responsibilities for social welfare of the most vulnerable groups of children as well.

Turkmenistan reviewed and amended its legislation and changed its practices in the field of comprehensive early identification, care and development by setting up early childhood development centres. Guided by the social model of disability and based on early identification and intervention, two pilot ECD Centres, based on the general kindergarten infrastructure, were introduced with UNICEF support.¹⁸⁷ These services provided in the centres are delivered by a team of professionals including developmental paediatrician, pedagogue, early communication specialist, psychologists, physical and occupational therapists. Based in a regular kindergarten, such services aim to empower the children with disabilities and their families and support their further inclusion in mainstream education and society. This initiative will contribute to the on-going process of development of a cross-sectoral national registry of persons with disabilities.¹⁸⁸

More systemic efforts are needed to introduce a national system of identification, rehabilitation and support of young children. Assessment and service standards would have to be developed, a range of services to be provided identified, staff qualifications determined, and division of responsibilities among national and local authorities defined for successful implementation of the ECD system.¹⁸⁹ ECD services to young children who have or are at risk for developmental delays can positively impact outcomes across developmental domains, including health, language and communication cognitive development and social/emotional development. Families benefit from early intervention by being able to better meet their children's special needs from an early age and throughout their lives.

6 Conclusions and recommendations

Turkmenistan's overall economic prospects remain positive, with GDP growth projected at 6.3% for the period 2018-2020. The economy remains state-dominated and strongly dependent on oil and gas, which comprised more than 90 percent of national exports in 2015. Moreover, the recent oil price dynamics have negatively affected the fiscal space and it is estimated that the families with children may be the ones that will be most affected by the effects of economic/fiscal downturn. If Turkmenistan accelerates its reforms such as domestic price liberalization, reducing explicit subsidies for food, energy and water, strengthened monetary policy and current account convertibility, trade liberalization, WTO accession, greater privatization and elimination of barriers to private entrepreneurship, this will benefit the country as a whole but may create some vulnerable

¹⁸⁷ A trans-disciplinary approach involves staff from different professions (often early childhood educators, social/family support workers, and child and allied health professionals) working together to deliver services and provide resources in a manner that is most effective for the family, rather than a siloed approach based on specific professional disciplines.

¹⁸⁸ Government of Turkmenistan and United Nations Partnership Framework for Development 2016-2020 Progress Report 2016-2017 Agenda 2030 "Leaving no one behind"

¹⁸⁹ Развитие системы помощи по технологии раннее вмешательство в республике Туркменистан

groups that will include children who will require additional systemic and comprehensive supports to realize their rights. Equity and inclusion of all should be the main guiding principles of all national policies and programmes advancing rights of children and women.

National human development indicators have placed Turkmenistan firmly in the medium human development category. The SitAn findings confirm measurable progress made by Turkmenistan in advancing rights of children as more children are surviving and gaining access to education and healthcare. Progress in some areas is commendable; for example, access to free education is almost universal for both boys and girls, and the adult literacy rate is nearly 100 percent. There is universal access to skilled medical care during the birth in Turkmenistan. Between 1990 and 2015, Turkmenistan reduced its under-five mortality from 91 to 51 per 1,000 live birth. Exclusive breastfeeding rate among children under 6 months of age increased from 10.9 percent in 2006 to 58.9 percent in 2015. The pre-school coverage increased from 26 percent in 2006 to 43 per cent in 2015.

Turkmenistan’s adoption of a National Plan of Action on Children for 2018-2022 is certainly going to help further accelerate the realization of rights of all children. The list of achievements can be continued, but as the SitAn indicates, more focus at vulnerability and vulnerable groups is needed. As vulnerable groups are often excluded from decision making process, their perspectives are not considered and as a result, national policies may not be effective in addressing gaps in rights realization in supporting vulnerable groups of children and women. The SitAn identifies key determinants that contribute to inequities and identifies key vulnerable groups of children and women that are presented below.

Key Determinants and Groups Affected

Key determinant	Groups affected	Description
Social norms	Children with disabilities	Dominant views based on medical mode of disability that prevent inclusion of children with disabilities
	Women, particularly women with disabilities	Discriminative stereotypes about the place and roles of women and men in the Turkmen society are strong and persistent and affect their access to education and employment. ¹⁹⁰ Qualified females facing challenges in accessing higher education Despite progress made in realizing rights of women and girls with disabilities, they experience multiple and intersectional forms of discrimination, which affect their rights to education, health and employment and the right to be protected from violence. ¹⁹¹

¹⁹⁰ Aigul Alymkulova, UNICEF Turkmenistan, Gender Assessment: Structures, Policy, and Mechanisms, 2009

¹⁹¹ Committee on the Rights of Persons with Disabilities, Concluding observations on the initial report of Turkmenistan, 2015

Legislation/policies	Residents in rural areas and selected velayats Women and children experiencing violence at home ¹⁹² Stateless children	Gaps in access to education, health and social services in rural areas. Absence of targeted state programmes/policies addressing inequities faced by residents of selected velayats ¹⁹³ Insufficient protection mechanisms for children and women experiencing domestic violence Gaps in the legislation and its realization in relation to stateless children
Budget allocations	Poor families experiencing challenges in access to healthcare facilities, balanced nutrition Children unable to access pre-primary education/ECD programmes	Women and children who have anemia Children living mostly in rural areas who have limited opportunities to access pre-primary education
Capacity of relevant partners to deliver supports/services	Children with disabilities, including those who permanently reside in rehabilitation centres Children not surviving to the age of five due to high infant mortality rate and neonatal mortality ¹⁹⁴ Children at risk, including children without parental care	Lack/limited access to inclusive education Limited skills and capacities of health sector personnel Some children at risk do not receive specialized, comprehensive and timely supports to reduce their vulnerabilities
Demand of specific population groups to use services or adopt behaviours	Women, especially victims of domestic violence Adolescents, especially of vulnerable groups who cannot participate in decision making	Often many women cannot protect their rights, especially in cases of domestic violence Adolescents and children are not empowered to contribute to decision making and make their voices heard. Children unable to express their views and concerns through independent bodies and civil society organizations ¹⁹⁵

Collective efforts of all duty-bearers that include the government, the Mejlis, local authorities, family, schools and service providers are needed to support these groups and reduce vulnerabilities. The following recommendations are based on the SitAn findings.

¹⁹² ЮНИСЕФ Туркменистан Система социальной защиты детей в Туркменистане: концепция развития интегрированных услуг социальной поддержки семьи и детей, 2016.

¹⁹³ Turkmenistan implements a number of state-level programmes that are aimed at equitable development of all territories of the country. Some of them are the “National Programme of the President of Turkmenistan to transform the social conditions of the population of villages, towns, etraps and etrap centers until 2020” and “The National Programme the social and economic development of Turkmenistan for 2011–2030 “These programmes focus at reducing inequalities across various regions and localities of the country.

¹⁹⁴ Tim Cammack and Clara Picanyol, Strengthening equity focused budgeting for Maternal, Newborn and Child Health (MNCH) in Central Asia, Turkmenistan, 2015

¹⁹⁵ Committee on the Rights of the Child, Concluding observations on the combined second to fourth periodic reports of Turkmenistan, 2015

Recommendations:

Improve data quality and availability, including disaggregated data, for effective policy development, monitoring, and evaluation. An overarching, multidisciplinary data system is pivotal to identify vulnerable groups of children and women, to inform development of evidence-based, equity-focused interventions and to monitor the progress towards improved rights realization of vulnerable groups. National data collection analysis should include an explicit focus on disparities (with disaggregated data) towards having a clear understating of the regions and groups of children and should be organised in a user-friendly format so that data could be used practically by policy-makers. For instance, the accurate data on disability is needed not only to capture the real situation in the country but also to assess the real impact of the government actions advancing human rights of and inclusion of children with disabilities. The development of a disability register through a tri-party agreement between the State Statistics Committee, Ministry of Labour and Social Protection, and Ministry of Health and Medical Industry is a very important development and if it proves successful, similar cross-sectoral databases capturing vulnerable groups can be developed as well.

Improve cross-sectoral coordination and management mechanism to protect children and women from violation of rights, especially in light of multiple overlapping vulnerabilities. Intensify horizontal collaboration across social protection, justice, education, and health to strengthen case management approaches to identify vulnerable children at the earliest and to develop and implement cross-sectoral approaches to address the barriers they face. In addition, a functioning and effective cross-sectoral referral services can be established to provide comprehensive support for children and families based on their needs. For example, better cooperation and coordination in providing inclusive education would help Turkmenistan to fulfil its obligations under the CRC and CRPD. Integrated support for children in contact with law would better address multiple challenges and reduce stigmatization and discrimination they face.

Advance results-based budgeting models across all ministries responsible for children and women. Results-based management and budgeting is a comprehensive, integrated approach that informs results-based decision-making, ensuring that all government-funded activities are aligned with strategies that contribute to meeting government priorities. The government-wide introduction of results-based budgeting may help in establishing a framework to better link policy decisions to budgeting. This will facilitate making strategic policy choices through prioritization of programmes within an available resource envelope at a sectoral and national level and improve the efficiency and quality of public expenditures addressing children and women rights with focus on achieving SDGs. It is very important to maintain the focus on participatory approaches to policy development and emphasize participatory budgeting that will provide more scope for NGOs and the public in setting priorities for government expenditures.

Increase government investment into health care services and ensure access of vulnerable groups to free quality healthcare. Despite significant recent investments into health care, the levels of state healthcare funding are still below the international averages. In addition, the effectiveness of health care expenditures could be improved by shifting from input-based allocations to performance-based budgeting, and introduction of additional measures ensuring free (in practice) access of the vulnerable groups to quality healthcare. It is advisable, in particular to review and enhance sustainable financing mechanisms to health promotion and prevention interventions within mother,

newborn, child and adolescent health programmes and ensure funding for required additional human resources in the healthcare system.¹⁹⁶

Invest into continuous capacity building of all professionals working with children, especially the most vulnerable ones. As needs of children vary and can be complex, well trained specialists such as developmental pediatricians, psychologists, social workers, speech and language pathologists are needed.¹⁹⁷ The SitAn re-confirms that some of these highly-specialized experts are not available in Turkmenistan and this gap has to be filled, while other professionals have to be continuously trained on new evidence-based techniques of supporting children.

Expand social services, with particular focus at targeted, community-based services supporting the most vulnerable children and families. In order to achieve equitable outcomes for children, particularly at the times when universal subsidies are reduced, strategic focus should be made at development of quality social services for the most marginalized children, including children deprived of parental care, with disabilities, living in families in difficult life circumstances, and in conflict with the law. The implementation of a limited number of new services will help to test a model of implementation that could be used as a roadmap in implementing other services later. Broader consultations have to be conducted to identify the most pressing needs and identify a few services that could be implemented nation-wide.¹⁹⁸

Promote individualized approaches to identify and support vulnerable children. As children are unique in terms of their needs, strengths, circumstances and aspirations, the services provided should be individualized. “Individual action plans” that take into account such individual characteristics as age, skills, family circumstances, special needs and other important characteristics can be developed. The case coordinators will improve functioning of multi-disciplinary teams of professionals and ensure effective information sharing to support service delivery.¹⁹⁹

Engage civil society extensively into the field of child rights’ realization. The CRC Committee made a recommendation to involve systematically all CSOs working in the field of children’s rights to create a constructive space to reach out communities on child rights related programmes, as well as to take part in independent monitoring of the implementation of those policies and programmes on the ground. To make partnership with CSOs more meaningful, it is advisable to facilitate more

¹⁹⁶ Tim Cammack, Clara Picanyol, Alina Lipcan, and Tomas Lievens, Strengthening equity focused budgeting for Maternal, Newborn and Child Health (MNCH) related programmes Turkmenistan – Key findings and way forward, 2015

¹⁹⁷ Social work is a profession concerned with helping individuals, families, groups and communities to enhance their individual and collective well-being. It aims to help people develop their skills and their ability to use their own resources and those of the community to resolve problems.

¹⁹⁸ Once services are identified, it would be necessary to develop service standards, including eligibility criteria, service parameters, roll out strategies, reporting and accountability mechanisms, delivery tools, capacity building tools and other key elements. Standard applications, eligibility checklists, service plans and other instruments could help the providers to make the services more client-friendly and consistent across the country. Quality assurance measures can be put in place and monitoring of performance mechanisms established.

¹⁹⁹ UNICEF developed comprehensive recommendations on developing integrated social protection system focusing at children and families in Turkmenistan. See, UNICEF Система социальной защиты детей в Туркменистане: концепция развития интегрированных услуг социальной поддержки семьи и детей, 2016

extensive involvement of CSOs into monitoring of child rights, identification of core gaps and delivery of support services for the most vulnerable groups of children.²⁰⁰

Further advance women's rights. Additional measures have to be developed to increase women's representation at the higher education level, especially in non-traditional career paths, such as mathematics, engineering, information technology and natural sciences. The government is strongly recommended to introduce and enforce laws addressing violence against women and establish supports for victims of domestic violence such as legal aid schemes, hotlines, psychological support and, if necessary, shelters. There is also a need to continue state efforts of increasing participation of women in political and public life. More systemic efforts are needed to address negative stereotypes regarding the roles of women in the family and in society, including public awareness raising campaigns, engaging media, distribution information on gender equality, etc.²⁰¹ UNESCO, for instance, recommends to set up public awareness-raising campaigns to inform widely about non-discrimination and girls' and women's right to education and to combat negative stereotypes and attitudes.²⁰² In addition, the Ombudsman office may establish a position of Deputy specifically responsible for advancing children and women's rights.

Reduce regional disparities. A more in-depth analysis of regional variations is needed to determine if such velayats as Dashoguz and Lebap have to be supported with equalization transfers to enhance rights realization of children and women residing there. One of the areas of focus include access to access to preschool and pre-primary education programmes in rural areas. Well targeted transfers may help to reduce inter-regional differences in children and women outcomes.

²⁰⁰ Some specific recommendations for the Government consideration were outlined in CIVICUS: World Alliance for Citizen Participation, NGO in General Consultative Status with ECOSOC, Turkmenistan, Joint Submission to the UN Universal Periodic Review 30th Session of the UPR Working Group, Submitted 5 October 2017

²⁰¹ National Action Plan on Gender Equality in Turkmenistan for 2015-2020, 2015

²⁰² UNESCO, Universal Periodic Review (30th session, Apr-May 2018), Contribution of UNESCO to Compilation of UN information

7 Annexes

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УСТАВ РЕАБИЛИТАЦИОННОГО УЧЕБНО-ВОСПИТАТЕЛЬНОГО КОМПЛЕКСА ГОРОДА АШХАБАДА, 2015

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7.2 List of Organizations Consulted

The Institute of State, Law and Democracy

Ministry of Finance and Economy

Ministry of Labour and Social Protection of Population

Ministry of Interior

Ministry of Education

State Statistics Committee

Ministry of Health and Medical Industry

The Office of Ombudsman

Mejlis (Parliament)

OSCE CO

UNDP CO

UNFPA CO

WHO CO

OHCHR

EU Support to Education Sector Project

Women's Union of Turkmenistan

Youth Organization named after Magtymguly

Children's Fund of Turkmenistan under the Central Council of the Youth Organization named after Magtymguly

"Yenme" Community Organization

