**A report on the implementation of the Convention on the Rights of the Child and the Optional Protocol on the sale of children, child prostitution and child pornography**

**in Bhutan**

**Submitted by**

**RENEW on behalf of the CSOs working on child rights protection**

**in Bhutan**

**to the**

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**List of Acronyms**

CCPA: Child Care and Protection Act

CEDAW: Convention on the Elimination of All Forms of Discrimination Against Women

CICL: Children in Conflict with Law

CIDC: Children in Difficult Circumstances

CIMS: Central Information Management System

CSO: Civil Society Organization

CRC: Convention on the Rights of the Child

CWD: Children with Disabilities

DET: Disability Equality Training

DIC: Drop-in Centre

DVPA: Domestic Violence Prevention Act

ECCD: Early Childhood Care and Development

GCFP: Gender and Child Focal Point

LGBTIQ: Lesbian Gay Bi Trans Intersexual and Queer

NACG: National Action and Coordination Group

NCWC: National Commission for Women and Children

PO: Protection Officer

PWD: Persons with Disabilities

RENEW: Respect, Educate, Nurture and Empower Women

SAARC: South Asian Association for Regional Cooperation

SoP: Standard Operating Procedure

WCPU: Women and Child Protection Units

**Introduction:**

1. Bhutan has a population of 748,900. Under-five children comprise 8 per cent of the population; children aged 0-18 years: 30 per cent; and adolescents (aged 10-19): 18 per cent[[1]](#footnote-1).
2. A number of new initiatives for the protection and rights of children have been introduced in Bhutan, and existing initiatives strengthened since 2017[[2]](#footnote-2). Given Bhutan’s economic development, rapid modernization and increased urbanization coupled with emerging challenges, such as the COVID 19 pandemic, the need for more effective service delivery, improved coordination between service providers, and the development of institutional and individual capacity has grown. This includes improving the quality of protection services, facilitating access to justice services to address child protection and child rights violations, and supporting the Government to comply with its domestic and international obligations. The overall need for enhanced effectiveness of services has primarily come about as lessons learnt in the process of implementation of the related Acts.
3. The COVID 19 pandemic that hit Bhutan in March 2020 and the subsequent nationwide lockdowns meant that regular service delivery especially to remote areas were affected, while the number of protection cases affecting children rose. However, it also provided an opportunity for service providers including the CSOs to rise to the challenge and explore innovative ways of ensuring that the services reach those most in need.
4. A collective work on strengthening the protective environment for children is a priority of the

Royal Government of Bhutan and the CSOs through the reinforcement of the policy and legislative framework for child protection and the child protection systems in the country.

1. Bhutan ratified the Convention on the Rights of the Child (CRC) in 1990 without reservation and subsequently ratified the Optional Protocols on the Sale of Children, Child Prostitution and Child Pornography and on the Involvement of Children in Armed Conflict in 2009 and 2010, respectively. Bhutan also ratified the UN Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) in 1981 and signed the Convention on the Rights of Persons with Disabilities (CRPD) in 2010. At the regional level, Bhutan ratified the South Asian Association for Regional Cooperation’s (SAARC) Convention on Preventing and Combating Trafficking in Women and Children for Prostitution and Convention on Regional Arrangements for the Promotion of Child Welfare in South Asia.
2. Bhutan has a progressive child protection policy and legislative environment. Legislative measures include the Child Care and Protection Act (CCPA), 2011, the Child Adoption Act, 2012 and the Domestic Violence Prevention Act (DVPA), 2013. The Standard Operating Procedures for implementation of laws exist to ensure protection of all children in their best interests.

1. The National Plan of Action for Child Protection (2013-2018) focusing on a protective environment for children is being implemented. Child Protection Programme Strategy and Action Plan for Monastic Institutions (2017-2022) and Standard Operating Procedures (SOPs) for protection of children in monastic institutions and nunneries were developed, including to cater to child monks and nuns with special needs.
2. Bhutan decriminalized same-sex activity in February 2021 following the royal assent from His Majesty the King, and the Penal Code of Bhutan’s Amendment Act became a law. The process for the amendment which began in 2019 not only reflects the growing acceptance by the general public but also recognizes the privacy, respect and dignity of the LGBTIQ community and their access to the essential services they need, including treatment, prevention and care services. With a growing number of CSOs/networks[[3]](#footnote-3) working for LGBTIQ and PWDs, sensitization and advocacy platforms[[4]](#footnote-4) have been created to reduce stigma and discrimination while bringing positive changes in the community. Sensitization materials have been reviewed and refined to ensure that the content is holistic and balanced, and helps identify appropriate solutions for children with different sexual orientation including the special needs of children with disabilities. A National Policy for Persons with Disabilities was endorsed in 2019. Eighteen inclusive schools have been established and ten more inclusive schools will be set up bringing the total number of inclusive schools in the country to 28 by 2023.

**Methodology:**

1. The purpose of this report is to provide the CRC Committee with background information and recommendations for suggestive questions for the List of Issues Prior to the Reporting (LoIPR). The content of this report is based on the consultation meetings among the CSOs working in the field of child rights and protection.
2. The consultation was organized around the 9 clusters of rights defined by the Committee as set out in the reporting guidelines for States. The Committee’s observations and recommendations were reviewed to assess developments and steps taken, good practices, and challenges in taking forward the recommendations. Emerging challenges were also discussed.
3. This is the first time that the CSOs in Bhutan have had thorough discussions on the full observations and recommendations of the CRC. Organized by RENEW and Nazheon Lamteon, about 14 participants[[5]](#footnote-5)participated in the consultations. As part of the process, a desk review of existing documents on Child Rights protection and all related Acts (CCPA, Child Adoption Act, Penal Code of Bhutan, Marriage Act), was conducted including a review of national and CSO statistics on child rights issues.

**Substantive analysis:**

1. **General measures of implementation (Arts.4.42.and and 44(6))**

Legislation:

12. Full implementation of the Child Care and Protection Act (CCPA) 2011, the Child Adoption Act 2012, Penal Code of Bhutan 2011, Marriage Act 2009 and the Citizenship Act 1985 continues to be a challenge, primarily for two reasons: lack of alignment between the different Acts, and secondly, limited human resource capacity to implement them.

13. As per the CCPA, Section 47-50, the Government is expected to establish and maintain as many child homes, remand homes and special homes to give assistance for the protection of children in difficult circumstances (CIDC). However, there are only three such facilities, namely the Youth Development and Rehabilitation Centre (YDRC) in Chukha; RENEW’s Gawailing Happy Home and Nazhoen Lamtoen’s Shelter in Thimphu.

14. Given the rise in CICL and CIDC cases[[6]](#footnote-6), it has become crucial to establish child care homes and institutionalize alternative care in all 20 districts in collaboration with the CSOs so as to ensure adequate service provisions with a concrete system of integration. The NCWC received 448 cases last year, which is an increase of 90.6 percent compared to 235 in 2019. Out of 448 cases, 22 were CICL cases and 94 CIDC cases. NCWC could provide reintegration services to only 136 individuals last year, which officials explained was done after they explored budget[[7]](#footnote-7).

15. According to CCPA 2011, a child should be given alternative sentencing called diversion and Chapter 20 of the Act states that ‘all institutions or organizations whether government or private shall protect the dignity of the child observing the principle of decriminalization, diversion and restorative justice’. NCWC facilitates diversion of CICL but it is not readily available as there are no concrete programmes by the government where the children should be engaged.

16. A separate Family and Child Bench has been set up since 2017 at the Thimphu district court to provide right care and protection to children who are either victims or come in conflict with law. Women and Child Protection Unit/Desk have been set up in 13 districts under the Royal Bhutan Police (RBP) to ensure that acts relating to the protection of women and children including survivors are implemented and to liaise with other agencies concerning women and children issues. CIDC and CICL face the issue of getting exposed in the process, especially due to lack of adequate and equipped facilities.

17. Human resource capacity continues to impact the full implementation of the Acts. Child Welfare Officers and Probation Officers are required as per the CCPA, and Protection Officers and Social Welfare Officers are as per the DVPA. In the absence of these Officers due to lack of human resources, the Gender and Child Focal Persons (GCFP) identified by the National Commission for Women and Children (NCWC) in the districts perform the dual duties of GCFP and Probation Officers in addition to their core legal duties.

18. District Legal Officers perform the function of Protection Officers (PO), which not only means shouldering multiple responsibilities, but a possible conflict of interest, resulting in lack of the desired services. Procedural lapses such as delays in informing the PO within 24 hours after a child comes in conflict with the law by the Police[[8]](#footnote-8) as per the CCPA is a frequent occurrence which affects service delivery efforts.

19. The Marriage Act 1980, Section Kha 7.2 states that in the case of divorced parents, children under the age of 9 years shall remain under the custody of the mother unless the court finds compelling reasons to order otherwise. This clause needs to be revisited to ensure that children are given a voice and the right to express what is the best/better option for him/her. One of the long-standing issue with the Marriage Act is that the age of marriage for girls is still reflected as 16 years in the English edition. Despite the Courts not issuing marriage certificate for couples below the age of 18, having it as 16 years in the Act provides a loophole.

20. Child adoption procedure as per the Adoption Act 2012 is lengthy. Additionally, after adoption, regular monitoring and follow up on the child’s growth is weak. The adoption process needs a review based on experiences and ground realities so as to be able to fast track the process. There are cases of abandoned children in shelter homes, for whom adoption is not possible due to the requirement of parents’ consent.

21. While Section 213 of the Penal Code of Bhutan has been amended to decriminalize sexual intercourse between two consenting same sex adults, it still penalizes “unnatural sex” which includes sexual conduct that is against the order of nature, regardless of consent, thereby discriminating against LGBTIQ youth.

Coordination

22. Coordination has become critical in the implementation of instruments for ensuring the protection and rights of all children. However establishing a separate Government entity as per the Committee’s recommendation is not deemed fit since it would be a lengthy process.

23. As per the findings of the 2021 capacity assessment of Government agencies and CSOs working on women and children[[9]](#footnote-9), NCWC, ‘as the competent regulatory authority could gradually engage CSOs in implementing activities such as advocacy, awareness raising, communication, helplines, crèche management etc.’ and NCWC focus on policy implementation, coordination including information data management, and capacity strengthening of service providers.

24. NCWC would need to be the policy arm and focus on its coordinating, regulatory and monitoring role, to ensure the right policies are in place and that all programs for ensuring children’s protection and rights are effectively implemented through a coordinated and collaborative approach.

25. Children have limited access to quality guidance and learning of personal development, as schools are found to be academic focused. A gap exists between a child’s academic learning and his/her wholesome development. Additionally, early identification of children’s issues especially in the schools and health facilities, including referrals of cases between the two institutions is weak.

26. The CSOs should step up as services providers and be responsible for providing quality and prompt services to all children. The CSOs also propose establishing and or revamping existing platforms such as the National Action and Coordination Group for Ending Violence against Children (NACG)[[10]](#footnote-10), to enhance coordination and collaboration within the CSOs, and bring about a coordinated engagement with the Government and relevant stakeholders.

Allocation of resources

27. Lack of financial and human resources continue to impede realizing children’s rights. During the COVID-19 pandemic, when the priority of the Government is on economic recovery, protection issues were not prioritized.

28. There is no tracking system to assess the budget allocation for child protection measures nor of its utilization, which impacts program sustainability. Further, the focus has been on protection and child rights issues, while after care services both for the survivors and their affected families are not given due importance.

Data Collection

29. There has been some progress over the years in collecting sex-disaggregated data. However, there is limited access to child specific segregated data such as children with disabilities, cases of child marriage, child labour and out of school children. As a result, almost all CSOs have their own data management system based on the services they provide. NCWC operates the Central Information Management System (CIMS), which is not used by all agencies and therefore not routinely updated.

30. Therefore a central data management system which caters to the requirements of the State and the service providers has become crucial. Documentation of best practices including a monitoring and evaluation framework to track the services and programmes, to ensure quality services is necessary.

Dissemination, awareness raising and training:

31. With many service providers working in the area of child protection and rights, there are overlaps and duplication of efforts in the dissemination, awareness raising and training programs. Such overlaps lead to different messaging and competition among service providers thus hampering sustainability of programs. The reach of the awareness training programs is not uniform especially in remote areas and to children with disabilities.

32. Awareness raising and sensitization programs are at times rights’ focused and do not adequately emphasize on the responsibilities and duties for caregivers and parents. Similarly, such programs are not context specific, thus failing to address core issues affecting the children.

Cooperation with Civil Society:

33. CSOs working on child rights and protection are being involved through all stages of the CRC implementation, such as in awareness raising and capacity building programs, policy making, including in consultations and reporting on the CRC. However coordination on the ground is inadequate given the territorial mind-set and reluctance to work together on both sides.

34. Bhutan does not have a dedicated CSO to champion Child Rights however there are about 7 CSOs working for child rights protection in specialized areas. While most of them work in silos, they have been engaged in discussions pertaining to the CRC. With NCWC focusing on the coordination role, cooperation between all stakeholders engaged in child rights protection including with the CSOs will be enhanced.

Children’s rights and the business sector:

35. Acts, policies and standards are in place[[11]](#footnote-11) to safeguard children’s rights in business setting such as private schools and in the tourism sector, in line with the CRC. Awareness raising programs are conducted regularly. However, work environment in the business/entertainment sector is not child friendly, which impacts the overall wellbeing of children. For instance, given the lack of a uniform maternity leave, children are left behind with relatives and other caregivers and regular breast feeding for at least the first six months is impacted. There are also cases of young children who are employed in some business sectors during their school breaks.

**E. Violence against children: (Arts.19,24 (3), 28(2), 34, 37(a) and 39)**

36. Every 6 out of 10 children in Bhutan have experienced some form of physical violence[[12]](#footnote-12). Parents, teachers, adult caregivers and peers are among the common perpetrators of violence. About 12 per cent of children experience sexual violence and nearly 50 per cent of children report experiencing emotional violence.

Corporal punishment

37. While alternative forms of disciplining in schools and institutions have been implemented with trained counsellors, enforcement has been low. There continues to be a high prevalence of corporal punishment by parents and caregivers; and there is lack of adequate sensitization and capacity/skills development to effectively institute alternate forms of discipline.

38. Contradicting laws and policies continue to impact child protection. Section 109 and 111 of the Penal Code 2004 provides a defense for the use of force by parents and others in disciplining children[[13]](#footnote-13). While the CCPA states that the use of ‘restraint or force shall never be used as a means of punishment.’[[14]](#footnote-14)

Violence, Abuse and Neglect:

39. With the enforcement of the DVPA 2013 and CCPA 2011, several measures have been taken for its implementation. These include development of SoPs on case management for women and children in difficult circumstances; launch of a 24/7 toll-free helpline; establishment of dedicated Women and Child Protection desks, and continued sensitization and capacity building programs for service care providers.

40. However, issues remain. For example, reintegration of CICL and CIDC back into the community is difficult due to lack of aftercare services. As per the shelter homes policy, children are expected to be kept in the shelter homes for a maximum of three months, however reintegration especially in cases of abandoned and orphaned children is difficult. Children especially from broken families get sent to monastic institutions and nunneries due to lack of childcare homes and services. A method of accrediting CSOs with the capacity to implement aftercare services needs to be explored.

41. Awareness raising campaigns and programs on the harmful effects of child marriage, including child sex tourism on the physical and mental health and well-being of girls need further strengthening. Sensitization on the policies, safety and prevention of these social issues especially in the rural areas has become crucial. Children's exposure to pornography and access to the internet have made them vulnerable to online abuse.

42. Sustainability of programs and services is difficult due to high staff turnover, as many of the critical care givers (POs) are hired on contract basis, resulting in the lack of technical capacity to deliver. Overlaps and duplication of advocacy and training programs is recurrent given the high turnover of service providers in the field.

43. Strengthening of immediate care/service facilities such as psychosocial support, medical and legal aid for children who face abuse and exploitation, including forensic/DNA testing facilities is critical. Bhutan will have a forensic laboratory by the end of next year. Without a forensic laboratory, especially DNA testing facilities, there are many unresolved cases. Results for more than 1,000 samples involving 137 cases are pending, meaning there are 137 criminal cases unresolved, including the rape and murder of an eight-year-old girl in Paro and a nine-year-old girl in Dechencholing in Thimphu in 2019[[15]](#footnote-15). Currently, DNA samples have to be sent to other countries, which not only delays justice but has huge cost implications. Additionally, it also means children’s mental/emotional well-being is affected while the alleged suspects are scot-free.

44. While much has been enforced in terms of child rights protection, after-care and support services for survivors of child abuse is not optimum. There is a lack of systemic follow up on the child survivors. Often affected families live in a state of trauma, unable to access support services (rehabilitation) on their own. Likewise there is no follow up mechanism on perpetrators once they are bailed out.

45. Increasing penalties for child abuse cases need to be looked into. Currently, both compensation and penalties for child abuse related cases are at a minimum. As per Section 222 of the Penal Code of Bhutan, the ‘offence of child abuse shall be a misdemeanor’, while the offence of ‘child molestation shall be a felony of a fourth degree’[[16]](#footnote-16), and the offence of ‘trafficking a child shall be a felony of the third degree[[17]](#footnote-17).’

**G. Disability, Basic Health and Welfare (arts.6,18 (3),23,24,26,27(1)-(3) and 33)**

Children with Disabilities:

46. As per the 2017 Population and Housing Census, 2.1 percent of the Bhutanese population (8111 females and 7456 males), have some form of disability.

47. A national policy for persons with disabilities (NPPWD) was approved in 2019 and an action plan is in the pipeline. The policy has interventions in education, health, economic security, protection and access to justice, family and care giver among others, and recommends disability-inclusive development. One of the challenges of this policy is the lack of a lead agency to coordinate and implement the interventions identified in the Policy. Ten more inclusive schools will be set up bringing the total number of inclusive schools in the country to 28 by 2023. While inclusive schools are being opened, many times, they are not physically accessible or have amenities in place for CWDs.

48. Physical accessibility remains one of the most important provisions that need immediate attention. Ensuring accessible quarantine facilities in case of emergencies and as is evidenced by the COVID 19 pandemic, easy access to information and services coupled with a dedicated helpline for children and PWDs is urgent.

49. There is a need to enhance the capacity of teachers, including front liners, enhance resource mobilization for diverse disability needs, make infrastructure including public buildings more user friendly and accessible to CWDs.

50. Early diagnosis of children with disabilities to identify birth defects, developmental delays and disability needs strengthening for timely intervention for under-five children. The Bhutan Child Development Screening Tool (BCDST) developed by the Ministry of Health (MoH) in collaboration with the Ministry of Education (MoE) for early detection of developmental delays and disabilities needs to be fully implemented including improving service coverage for young children. A proper system of referrals of children between the two Ministries need to be developed to facilitate timely intervention.

Health and health services:

51. Access to health services for persons with disabilities in the rural areas is challenged by the long distance walk to reach a health center. Additionally, the need for dedicated service centers for children in the rural areas is essential. There is a lack of adequate facilities for CWDs and the requirement for speech therapists, occupational therapists and other specialized professionals need attention.

Adolescent health:

52. Teenage pregnancy is of concern in the country. The pandemic and the lockdowns further worsened the situation. Records show that there were more than 237 reported cases of teenage pregnancy in 2020 alone in 18 Districts. The protection system for children, be it at home, school or public places, is weak. Awareness on existing legal policies on child marriage and teenage pregnancies are lacking. Enforcement of laws and policies need to be strengthened.

53. Mental health is on the rise in Bhutan impacting many young children. The COVID 19 pandemic has further exacerbated the number of mental health issues and increased risk of suicides in the country. According to a Bhutan Global School Based-Student Health survey 2016, about 11% of students reported having attempted suicide one or more times during the 12 months before the survey. Youth are vulnerable as social issues, like growing unemployment, schools closure, online schooling pressure, school drop outs, increased unwanted pregnancies, addiction and substance abuse during the COVID 19 pandemic have further contributed to the stress[[18]](#footnote-18). Mental health awareness is still low and mental illnesses bear high stigma in Bhutan. There are limited health professionals in diagnosing and managing common mental disorders, and rehabilitation centers are inadequate. There is insufficient support to mental health or suicide programs and recognition without a policy reference, at the moment. The annual budget allocation for mental health programs including suicide prevention is only 1 percent of the Ministry of Health’s (MoH) budget.[[19]](#footnote-19)

54. Sexual and reproductive health education programs in both schools and within communities and its access needs to be enhanced. Advocacy programs to curb substance abuse among children needs to be stepped up, including through the strengthening of parenting programmes.

55. Girls require access to safe abortion and post-abortion care services. Abortion is allowed in Bhutan to the extent when a pregnancy is a result of rape, incest and when the mother is of unsound mental condition or to save the mother’s life.

**Recommendations for the LoIPR:**

Legislation:

* Enforce the child justice system with adequate resources allocated for the required human resource capacity for full implementation of the respective Child Rights Acts. This includes appointment/institutionalization of Child Welfare Officers and Probation Officers as per the CCPA, and Protection Officers and Social Welfare Officers as per the DVPA.
* The existing laws and policies (as highlighted in the Substantive Analysis section and referenced in the subsequent points below) related to child rights protection be reviewed and harmonized. Efforts be taken to implement stricter rules and increase the penalties for child abuse cases, through measures of support for survivors of child abuse and child exploitation, such as support for the child’s education till the age of 18 years, likewise adequate compensation and other support to survivors of child rape, etc.
* NCWC to initiate a review of the Child Adoption Act, 2012 with particular reference to the lengthy adoption process in collaboration with all relevant stakeholders.
* The best interests of the child be considered in the Child Adoption Act 2012 to decide his/her custodian, and courts determine the frequency and conditions under which the other parent(s) may meet with the child/children.
* Post adoption monitoring of the child through an established procedure until the child attains 18 years as per the Child Adoption Act, 2012 be implemented
* The Marriage Act and the Citizenship Act be revised to enable registration of children for citizenship where his/her mother is a Bhutanese, including registration by birth. The Marriage Act of Bhutan (English version) needs to be amended to reflect the legal age of marriage for girls as 18 years, as is reflected in the Dzongkha (National Language) edition of the Act.

Coordination:

* NCWC to fully take on the mandate and responsibility to lead the coordination among the different service providers to ensure full implementation of the Acts and establish a coordinated, sustainable and comprehensive system to mainstream, protect and promote the rights of both women and children in Bhutan, as per its mandate.
* NCWC initiate accreditation of service providers/CSOs both to maintain the quality of services and value the services provided.
* A mapping exercise to ascertain the services provided by the CSOs and other service providers be conducted for an effective and coordinated implementation of child protection programs.
* An effective coordination system be set up among the CSOs/services providers to both enhance collaboration, avoid duplication of activities, ensure standard advocacy and messaging and value addition of every activity conducted. This should be backed up with an effective monitoring through a one system database to help with reporting, monitoring of impact of services delivered and evaluation of programs. Collaboration between the NCWC and the CSOs be strengthened through existing platforms such as the CSO Authority or the NACG for a coordinated approach to addressing issues related to child rights protection.

Allocation of Resources:

* An inclusive tracking system (CSOs and private sector) be set up to both assess the utilization of funds and its impact in undertaking child protection measures.
* In order to ensure investigations, administrative and legal proceedings are initiated promptly and systematically, capacity building programs need strengthening and child friendly reporting mechanisms enhanced. Additionally, an effective monitoring system be established and trained personnel be retained in educational institutions, including in the districts.
* Provide financial support for CSOs for specific services rendered to communities, such as for the ECCD facilitators, including expenses borne by CSOs to provide care for survivors/clients in the shelter homes.
* Strengthening of human resource capacity (both in the interim and long term) across all programs and services catering to the protection of children’s right is critical. A trained pool of technical professionals are required, for instance for providing psychosocial help, for specialized counselling services including for early diagnosis and management of disabilities in children, such as speech therapists and occupational therapists. Additionally, the long term human resource planning for the country would need to take into consideration the requirement for need-based professionals as a long term objective, so that the country is able to produce its own technical expertise in the future. And in the interim, existing professionals be trained and staff turnover be addressed through regularization of critical positions.
* Access to quality guidance and learning of personal development for children from a young age is found essential. There needs to be a proper balance between the academic curriculum and wholesome education. Aside from textbooks learning, children need to have better access to their overall development, and promote human positive attributive of warmth, acceptance, genuineness, empathy and spiritual values.
* The Bhutan Professional Standards for Teachers which is based on the principles of child-centeredness, inclusivity, lifelong learning, and Bhutanese culture and values need to be enforced more strongly. Building on the momentum created by the pandemic, NCWC would need to work closely with the Ministries of Health and Education to build the capacity of the current counselors.
* Capacity building of primary school teachers and ECCD facilitators is suggested to address the limited capacity in providing appropriate support to children with disabilities.

Data Collection:

* Strengthen the functioning of the NCWC managed Central Information Management System (CIMS) or have in place a centralized data management and information system on women and children.

Dissemination, awareness raising and training:

* A coordinated mechanism be set up to help maintain standard advocacy messaging, capacity building of caregivers, reduce duplication of efforts and ensure there is value addition of the diverse programs provided. The awareness raising programs need to be more context specific aligned to the Buddhist values and principles for greater acceptance and adherence. Likewise, it is strongly recommended that impact assessment(s) of the awareness programs and trainings be carried out on a regular basis to ensure its reach and sustainability.
* Initiate positive parenting, starting from homes, through greater awareness and by enhancing capacities of parents and elders on alternative discipline. There is a need to change individual’s perspective and mindset.
* Literacy and awareness raising programs for children, parents and caregivers on the proper use of technology - the Internet and social media platforms need to be introduced to address the increasing cases of online sexual abuse and exploitation. There needs to be a stronger emphasis on how to responsibly use social media.
* Advocacy programs to curb substance abuse among children needs focus and enhancement.

Violence, Abuse and Neglect:

* Strengthen immediate care/service facilities such as mental health and psychosocial support, medical and legal aid, and ensure timely justice through establishment of forensic/DNA testing facility.
* The introduction of mandatory trainings for CSOs and their employees on child rights and protection and mandatory child safeguarding policies, including for other service providers such as hoteliers, those in the entertainment industry including in the tourism sector is recommended.
* Enhance reintegration programs for CICL in collaboration with the respective CSOs to keep CICLs safe and promote their physical and mental well-being.
* Child rights and protection education be enforced in the entertainment industry (*drayangs*), hotels, and in the tourism sector, in particular for the Guide Associations and Tour Operators, including integrating it into the school curriculum as mandatory learning. Alongside this, it is recommended that orientation on child rights during the value education week is integrated into the policy agenda of all schools to ensure continuity and make it accessible to children, teachers and parents alike.
* NCWC to ensure child rights and protection measures are in place in the private and corporate sector through enforcement of minimum standards such as uniform maternity and paternity leave, standard working hours, daycare facilities for children of working mothers including workers’ compensation, gratuity and provident fund as per the Labour and Employment Act, 2007, and the fifteen Regulations outlined in the Regulations on Working Conditions, 2012.
* Incidents of child sex tourism and transitional sex work of children is a growing concern in Bhutan. The COVID 19 pandemic has further impacted it. An assessment on child sex tourism be conducted to ascertain the problem and come up with measures to curb it.

Children with Disabilities:

* A Standard Operating Procedure (SoP) be developed in close collaboration with the CSOs working for PWDs to ensure all children with disabilities are able to have the required access to dedicated helplines, quarantine facilities, including shelter homes during emergencies.
* More Disability Equality Training (DET) be provided in particular to front liners to ensure appropriate service to both PWD and CWD in pandemic/emergency scenarios.
* Special services for children with severe disabilities, for instance, dedicated shelter homes, be introduced.
* The existing Disabled Friendly Construction Guideline needs to be fully operationalized starting with the schools and other public service facilities such as the banks, hospitals, public toilets, etc. Additionally, conduct advocacy sessions for relevant stakeholders, particularly, the Ministry of Works and Human Settlement, the Construction Development Committee, the municipal authorities, among others.
* Provisions for accessible information formats to cater to the different disability needs of children needs to be looked into.
* Initiate a systemic welfare system/trust fund for PWDs so that they can be economically independent, and not a burden to their families.

Adolescent Health:

* Ensure that all children have better access to sexuality education. Sexual and reproductive health education programs and its access in both schools and within communities need strengthening so that both children and communities are equipped with the necessary knowledge, attitudes and skills to support their health and wellbeing, regardless of age, sex, marital status, socioeconomic status, ethnicity, sexual orientation or gender identity.
* Contraceptives to be made readily available and ensure girls have easy access to safe abortion and post abortion care services
* Strengthen preventive and treatment programs on mental health, through a review of the current programs and initiatives of the Government to ensure that adequate human and financial resources is allocated to diagnose and manage common mental disorders.
* Protection systems for the child be strengthened through extensive awareness programs targeting parents, the communities; and children’s knowledge and education on sexual and reproductive health including addressing the increasing problem of substance abuse be enhanced by making the ongoing comprehensive sexual and reproductive health and rights education in school mandatory, with special educational programs targeting out of school youth.

**Emerging Issues**:

Bhutan is not spared of emerging social issues that come about with its rapid development process. While general awareness on these issues are being created through the social media, radio and TV, the CSO community feels that adequate measures need to be in place to address them at the earliest.

Cybercrime: With the advancement of technology, cyber-crime is on the increase. Children these days are easily exposed to inappropriate websites and fall victim to pornography and online abuse. While the reported cases of child exploitation, online bullying and child pornography via the Internet is limited, there are many that go unreported. Often, this is because of social stigma and discrimination attached to it. Strict legislations are required to address the problem, alongside the awareness raising programs for both children and adults on the proper use of technology.

Child sex tourism: Incidents of child sex tourism and transitional sex work of children is a growing concern in Bhutan. The COVID 19 pandemic has further impacted it. An assessment of the issue be conducted both to ascertain the problem and come up with measures to curb it*.*

COVID pandemic related:

The COVID 19 pandemic which led to nation-wide lockdowns meant that schools had to be closed for several months. E-learning and online classes were introduced to cope with the school closure, which had its own challenges especially for children in rural areas. The method of online learning itself was new. Unstable internet connections made it expensive for most students to access, with some dropping out of school. Additionally, young children became vulnerable to online exploitation. According to a study undertaken by UNICEF[[20]](#footnote-20) to understand the impact of COVID-19 on young people, almost 17,000 students either from socio-economically disadvantaged families or from remote areas did not have access to television or the internet, and therefore were excluded from the online learning sessions. And out of the 149 responses that were analyzed for the report, a majority, 89 out of 149, felt satisfied with the learning materials provided both online and by their schools, but almost half, 68 still felt frustrated, and felt a loss of interest in their studies.

During the pandemic, the Government has had to prioritize certain development sectors, which meant capacity building trainings of caregivers, awareness campaigns had to be reprogrammed. Social issues need to be prioritized as experience has shown that emergencies such as the COVID 19 pandemic lead to an increase in child protection cases, sexual and domestic based violence. Alternative facilities need to be set up and readied for ALL vulnerable groups, especially children, so that survivors of child abuse and exploitation have a 24/7 access to a safe facility.

Substance abuse among children and adolescents remain a critical concern in the country. Use of tobacco, alcohol and solvents (sniffing) including drug use is an increasing trend. Of over 90 cases of substance abuse reported to the Drop-In Center (DIC) in Wangduephodrang District since its establishment in 2017, nearly 40 percent of the abusers are minors or students[[21]](#footnote-21). According to a survey on substance abuse, domestic violence and mental health conducted by Young-Volunteers in Action in 2020, nearly 64 percent of the participants responded to having a friend who drank alcohol. Most of the participants in the survey were between 13 and 18 years. A national survey conducted in 2017[[22]](#footnote-22) also found that 70% of students consumed alcohol and that the average age adolescents first used alcohol and tobacco was 14 to 15 years, and for cannabis and other substances was 16 years[[23]](#footnote-23).

**Best practice example:**

The COVID 19 pandemic and the lockdowns and other movement restrictions meant to contain the outbreak also led to unintended consequences, including an escalation in sexual violence of the most vulnerable, women, children and PWDs.

2020 saw an increase in the cases of abuse of children. Out of the 409 reported cases, which included a majority of girls, about 366 children, all survivors of different forms of abuse received shelter support over a period of 12 months in 2020. The limited facilities (7 service centers also used as shelter homes in six districts and one in Thimphu) made it difficult to reach out to all survivors of child abuse.

Inspired by a call from Her Majesty The Queen Jetsun Pema Wangchuck to provide shelter services for those in need during the second nationwide lockdown in December 2020, the district administration with support from community volunteers set up temporary relief homes in all the twenty Districts. Municipal offices, community halls were converted into temporary relief shelters to accommodate survivors of domestic violence, homeless individuals and those stranded by the latest nationwide lockdown. The local community stepped in with food supplies, blankets and mattresses while service providers ensured availability of counselling and other care services to those in need. This practice not only helped control the number of abuse cases and ensured access to shelter facilities across the country, but more importantly inculcated a greater sense of collective responsibility among the citizens - the perpetrators, the service providers and care givers.

1. Bhutan Population and Housing Census, 2017 [↑](#footnote-ref-1)
2. Concluding Observations on the combined third and fifth periodic reports of Bhutan, 2017 [↑](#footnote-ref-2)
3. Rainbow Bhutan work for LGBTIQ community; while Drak Tsho Vocational Centre for Special Children and Youth, Ability Bhutan Society, Disabled People’s Organization of Bhutan, Bhutan Stroke Foundation work with for PWDs [↑](#footnote-ref-3)
4. Queer Voices of Bhutan; Pride Bhutan [↑](#footnote-ref-4)
5. Ability Bhutan Society (ABS); Bhutan Centre for Media and Democracy (BCMD); Bhutan Nuns Foundation; Disabled People’s Organization of Bhutan (DPOB); Loden Foundation; Nazheon Lamten; Organization for Youth Empowerment; RENEW; Tarayana Foundation; Youth Development Fund(YDF). [↑](#footnote-ref-5)
6. RENEW alone reported 9 CIDC cases in 2020 against just one such case in 2018. [↑](#footnote-ref-6)
7. <https://kuenselonline.com/ncwc-shortchanged-to-look-into-women-and-child-cases/> [↑](#footnote-ref-7)
8. Section 63,CCPA 2011. [↑](#footnote-ref-8)
9. Capacity assessment of Government agencies and CSOs working on women and children, commissioned by NCWC, 2011 [↑](#footnote-ref-9)
10. An Independent platform composed of UN agencies, multi-lateral and bi-lateral agencies, NGOs, civil society organizations and children’s (girls and boys) and young people’s group with the objective to strengthen inter-agency work including with governments and children groups to end violence against women and children. [↑](#footnote-ref-10)
11. Tourism Rules and Regulations, 2017: Tourism Council of Bhutan [↑](#footnote-ref-11)
12. UNICEF Bhutan [↑](#footnote-ref-12)
13. “A defendant shall have the defense of justification, if the defendant uses force on an incompetent or incapable person and the defendant is the parent or guardian or other person responsible for the general care and supervision of such person and the force: (a) is used with the purpose of safeguarding or promoting the welfare of the incompetent or incapable person, including the prevention of serious misconduct; (b) used is not designed to cause or known to create a substantial risk of causing death or serious bodily injury; and (c) used is no greater than that which is necessary.” Section 109, Penal Code of Bhutan [↑](#footnote-ref-13)
14. Restraint or use of force Section 23. Restraint or force shall be used only when the child poses an imminent threat of injury to oneself or others and only when all other means of control have been exhausted. The use of restraint or force shall never be used as a means of punishment. CCPA, 2011 [↑](#footnote-ref-14)
15. https://kuenselonline.com/what-after-a-forensic-lab-facility/ [↑](#footnote-ref-15)
16. Section 204, Penal Code of Bhutan [↑](#footnote-ref-16)
17. Section 228, Penal Code of Bhutan [↑](#footnote-ref-17)
18. <https://thebhutanese.bt/survey-says-10-to-13-percent-of-students-considered-suicide-nc/> [↑](#footnote-ref-18)
19. Review report on Suicide and Mental Health Issues in Bhutan, prepared by Social and Cultural Affairs Committee, June 2021 [↑](#footnote-ref-19)
20. Sparkling Wellbeing: Selected Learnings from an Adolescent-Led Engagement and Enquiry during COVID 19:

    Systhesis and Country Reports, 2021 [↑](#footnote-ref-20)
21. <https://kuenselonline.com/substance-abuse-common-among-students/> , November 2020 [↑](#footnote-ref-21)
22. Movendi International (2019) ‘Bhutan: Addiction Epidemic Hinders Development’, < <https://movendi.ngo/news/2019/10/09/bhutan-addiction-epidemic-hinders-development> [↑](#footnote-ref-22)
23. <https://kuenselonline.com/alcohol-and-substance-abuse-rampant-among-students/>, June, 2017 [↑](#footnote-ref-23)