



## 47<sup>th</sup> Pre-session Universal Periodic Review 2024

### **Promoting sexual reproductive health including adolescent sexual reproductive health, and addressing gender based violence through building community capacity for effective service delivery**

*Key words:* GNH, MSTF-CBSS, DAISAN-Peer Helper; Community Service Centers, Comprehensive Sexuality Education, Volunteers Committee; Sustainability; Accessibility

#### **Introduction**

Bhutan, a landlocked country in the Eastern Himalayas, is known for its progressive values, commitment to sustainable development based on the philosophy of Gross National Happiness introduced by His Majesty the King 4<sup>th</sup> Druk Gyalpo Jigme Singye Wangchuck in 1972. Bhutan is a spiritual country with 74.7% Bhutanese following Buddhism and 22.1 % Hinduism. Bhutan has recorded total population of 820,752 (with growth rate 0.69%) comprising 53% male and 47% female. 45% of its population constitutes young people below the age of 24 years. More than 50% of the population live in rural areas and often difficult to connect due to difficult terrain.

Amongst other challenges, Sexual and gender-based violence (SGBV) is growing concern in Bhutan, exacerbated by rapid urbanization and digitalization. There have been continuous efforts by the government to combat GBV, including embedding a GBV prevention and response mechanism within the broader health and social empowerment programs.

#### **RENEW and Its services**

Respect, Educate, Nurture, and Empower Women (RENEW) is a Civil Society organization founded in 2004 to promote gender equality and women's health with a special focus on Domestic violence and sexual and gender-based violence. RENEW complements and supplements the efforts of the government to promote sexual reproductive health and rights of women/girls and other vulnerable population. RENEW has specialized services such as counseling, legal aid, shelter homes, advocacy and awareness campaigns, emergency medical aid, educational scholarships, and facilitates sexual reproductive health (SRH) services to empower women and children. RENEW aims to tackle challenges in addressing sexual and gender based violence through delivering rights-based education on SRHR, providing quality SRH care, offering livelihood training for survivors of violence, and engaging men and boys to advocate for ending SGBV and changing harmful norms.

Over last 20 years RENEW has been vigorously working to address the issues of sexual & gender based violence in close collaboration with the government agencies Viz. Ministry of Health, Ministry of Education, district and local government, Religious bodies and with wide range of community volunteers network popularly known as Community Based Support System (CBSS) formed in 2005 under RENEW. Initially, in the absence of the dedicated service centers for the survivors in the districts, RENEW CBSS joined the Multi Sectoral Task Force (MSTF) formed in 2001 under the Ministry of Health. Formerly, MSTF was formed to take forward the agenda of advocacy against HIV & AIDS. Currently, together with CBSS (now MSTF-CBSS), the network represents Government-CSO synergy to advance public health priority and social issues encompassing SRHR, Adolescent SRH, domestic violence, sexual and gender based violence as a holistic SRHR service package. The two networks (MSTF-CBSS) have deepened and formalized their partnership through the formation of Volunteers committee in 2023. Awareness and

advocacy program has gained momentum over the years and every year we see the reported cases of GBV because people have started coming forward for support. The slow yet steady improvement in women's knowledge, access to healthcare and economic independence is leading to a positive uptake in overall agency of women.

Engaging children and young people in awareness and advocacy through comprehensive sexuality education (CSE) has been a priority for RENEW. RENEW has network of young volunteers called Druk Adolescent Initiative for Sexual Awareness Network (DAISAN), and have joined Peer helpers in the schools to strengthen the network. We are one of the key partners to Ministry of Education to roll out CSE to youth out of in particular and community at large.

Since 2022, in the wake of COVID 19, RENEW in collaboration with the district administrations has established 10 community service centers (CSCs) in 10 districts with the funding support from UNICEF. This initiative has enabled RENEW to bring the services closer to the community and frequency of consultation workshop, advocacy and training with the community volunteers and service providers have improved the service delivery. The need assessments and the impacts are being undertaken. Establishment of CSCs in rest of the 10 districts are being explored.

We have reached thus far with great effort in mobilising community, developing partnership with national and international partners, and resource mobilization has been the greatest challenge for RENEW and the concerned government partner agency. We have not reached the unreached in the far flung areas because of the distance and difficult terrain and inadequate resources because of which we continue to face following challenges:

I. Bhutan is facing numerous challenges in addressing SRHR and social issues due to constraints in terms of human resources, facilities, accessibility of services despite its most progressive legislation. The sustainability of the services is still a question in the absence of proper facilities, adequate professionals and adequate budget allocation to this sector.

- The most recent National Health Survey 2023 conducted by Ministry of Health revealed increase of GBV in Bhutan. 1 in 4 women (43.9%) women agreed that a man is justified in hitting women for one or the other reason. The report findings revealed 16.5% respondents faced physical violence in 2023; 6.9% sexual violence; 17.5%; emotional violence; 11.3% economic violence. 29% of respondents experienced controlled by their husbands. There has been significant increase as compared to that of 2017 study by National commission for women and children (13.9%; 4.5%; 15.8%; 10.9 respectively). RENEW has received more than 10,000 survivors till date since its inception in 2004. With the awareness created, we see men and boys who are also victims. The issues of SGBV with LGBTQI+ and women and girls with disability are surfacing.
- **Adolescent fertility rate** stands at 18.6 per 1000 girls aged between 15-19 years old. **Unmet needs of contraceptives** is still high with 11.7% women between the age 15-49 married and 8.5% between the age 15-49 married.
- **Unwanted pregnancy** and mostly among **teenagers** is rising. 70% of the rape cases reported are children and disgustingly 62% of perpetrators are known to the these children and 16% blood related. A total of 86 cases of teenage pregnancies have been reported to the Royal Bhutan Police since 2019 till date.

- **Contraceptive prevalence rate** is 74.2%, however there is a disparity district-wise with Haa district in the west reporting highest contraceptive use with 89.0% and Phuntsholing in the south (bordering India) lowest with 58.7%.
- **Maternal mortality rate** stands at 53 per 100,000 live births and **child mortality** at 15.2 per 1000 live births.
- **HIV** is also rising and out of the total (935) 48% are female. 70% of HIV infected people fall under the age between 25-49 years; 13% between 15-24 years. Considering the size of the country's population, the issues are of the great concern.

II. The trend of teenage pregnancy is growing in Bhutan often leading to illegal and unsafe terminations of the pregnancy across the border in neighboring town of India. Nevertheless, in such situation it is important to provide/strengthen access to post care support services with no legal implication to motivate these girls to access information and services timely.

- As per the Penal code of Bhutan, 2004, abortion is restricted except for purpose of saving life of mother; pregnancy resulting from incest; or mother is mentally unsound.
- Women and girls in remote rural areas have very little or no access to basic contraceptives such as emergency pills, condoms and have no access to pregnancy test kits. Women and girls in the rural areas have little access to psycho socio support, legal aid, shelter services during the emergencies.
- Therefore, there are not many choice left for women and girls wanting to prevent unwanted pregnancy. The only place they could go is basic health units (BHUs) where women and girls may not choose to go for these services due to stigmatization, shame, poverty, acceptance, fear and low awareness on the contraceptives and the services.
- There is stringent law against teenage pregnancy whereby if a man aged 18 years and above is found guilty of impregnating a girl below the age 18, he is sentenced to prison but the child mother and her child in terms education, livelihood and child care and other adequate support services must be ensured by the government or any other organisation deemed relevant.
- The **sustainability** of the services is still a question in the absence of proper facilities, adequate professionals and adequate budget allocation to this sector.

## **Recommendations**

1. Conduct nationwide survey on the causes of unwanted pregnancy and teenage pregnancy and accessibility of contraceptives.
2. Establishment of Community Service Centers is one of the strategies to ensure improved outreach and accessibility of the services to all the women and children, particularly those in marginalized or remote communities and areas.
3. Ensure adequate human resources are in place and that professional development opportunities, organizations can ensure that front line workers are equipped with the skills and knowledge needed to effectively support survivors. The Royal Government must make sure investment in these areas is a priority.
4. Ministry of Finance and Royal Civil Service Commission also take equal accountability along with National Commission for women and children for ensuring increased investment and adequate human resources to reach the unreached. Since the gender is cross cutting, the government should ensure gender mainstreaming also at the national level to ultimately cascade at the district and block level.
5. Harness the potential of CSOs and their technical expertise to enhance service delivery especially in the rural areas. To consider CSOs as a development partner rather than mere service providers.

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