



Good Practices: UNFPA Thailand 10th Programme (2012-2016)



Population Dynamics and Policy Responses

Making the public sector
workforce aware of planning
challenges resulting from
Thailand's demographic shift

Platform for Positive Sexuality of Young People

An innovative approach that
connects and convinces multiple
stakeholders on board a common
goal to reduce adolescent pregnancy

Thailand-Laos-UNFPA South-South Triangular Cooperation for Safe Motherhood

Mobilizing Thailand-based experiences
ensuring sustainable management to
reduce maternal and child mortality in Laos

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Executive Summary

UNFPA operates in a five year programme cycle, and its country programme for Thailand is in its 10th cycle spanning 2012-2016, coinciding with an interesting period for Thailand indeed as the country has seen a government change, and a landmark law titled Prevention and Solution of Adolescent Pregnancy Problem passed in early 2016 and promulgated in July.

In this programme cycle, UNFPA continues its collaboration and partnership with line agencies namely Ministry of Public Health, National Economic and Social Development Board, Thailand International Cooperation Agency, among others. UNFPA's approach is evidence-led, demand-driven and valuing its partnership. The key pieces of evidence which serve as a basis of its programmatic interventions, as advocacy tools, as well as being widely utilized by line agencies, commissioned during this cycle include the "Impact of Demographic Change in Thailand. (2011), "State of Thailand's Population Report 2013: Motherhood in Childhood," and State of Thailand's Population Report: Changing Features of Thai Families in the Era of Low Fertility and Longevity."

From among the range of UNFPA's work in Thailand, this report captures three aspects of

what could constitute good practice, documenting the process, result and lessons learnt.

In the area of youth sexual and reproductive health and rights, UNFPA strategy employs the "3Cs" approach (Create-Convince-Connect) through the key intervention on "3C4Teen Platform for Positive Sexuality of Young People." This intervention has three actions: platform on the ground for policy advocacy; platform on the media through the establishment of the 3C4teen website; and platform on the move which enables voices of young people and their concerns to make changes at the grass-roots level and at the policy level through policy and programmes related to sexual reproductive health and rights. With the Thai government identifying adolescent pregnancy as the main challenge, adolescent pregnancy is thus the focus of all these three platforms. With the passage of the much-awaited law to address teenage pregnancy, the work that UNFPA has done, and the partnership it has forged, contributes substantially to laying the ground work for the law to deliver what it promises to youth population.

In terms of policy response to demographic change, UNFPA along with NESDB

successfully advocated for the Office of Civil Service Commission to integrate a curriculum on policy response to demographic change into its training courses for public sector workforce from leadership to new recruit levels. With this, awareness will be raised across the entire State apparatus.

Beyond Thailand, the trilateral partnership on south-to-south cooperation on the theme of safe motherhoods has expanded. The UNFPA-TICA-Bhutan partnership has matured now into a bilateral cooperation between the Thai and Bhutanese government counterparts. In this programme cycle, UNFPA, TICA and the Lao government apply the trilateral partnership model to advance the institutional capacity of midwifery education in Lao PDR.

In all three cases, partners express appreciation for UNFPA's role in aggregating international standards and good practices which broaden their horizons as well as helping to stimulate them to adapt certain solutions to the Thai contexts.

In all, UNFPA and partners have worked together to strengthen Thailand in the face of new demographic reality, where the entire population enjoys equal well-beings and quality of life.



GOOD PRACTICE ONE: POPULATION DYNAMICS AND POLICY RESPONSE

The Office of the Civil Service Commission (OCSC), which is mandated to provide training for government officials at all levels, has adopted the Policy Response to Demographic Change curriculum into its existing range of training courses. Aimed at making the public sector workforce aware of planning challenges resulting from Thailand's demographic shift, the curriculum is the outcome of partnership between UNFPA, planning agency National Economic and Social Development Board, and OCSC.

Context

Given the dramatic changes in the context of low fertility rate, ageing population, shrinking workforce and eventual population decline, Thailand has found itself up against pressing need to reconsider its population policy and to formulate strategies and options to deal with implications of demographic change. Changing population structure is a complex issue that touches upon all aspects of human development across a person's lifespan. Managing it effectively – especially when Thailand is aspired to get out of its middle-income country trap to be a more competitive member of the globalized economy, requires effective institutions to design and implement



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programmes and interventions, which in turn require well-informed and competent public sector workforce to operationalize these. Lack of awareness and know-how among policy makers posed a main constraint in formulation of effective response to demographic implications. Signs of population imbalance have in fact started to emerge towards the end of 8th National Economic and Social Development Plan (1997-2001). For a long time, awareness on implications of changing population structure on the future of Thailand has been restricted within planning and certain quarters of line ministry officials. Or even where certain level of awareness existed, it was confined to the narrow view of ageing society hence welfare for the elderly. The substantive awareness that changing population structure affects well-beings and needs actions across life cycle has not permeated across the entire State apparatus.

UNFPA and NESDB have been working in close partnership particularly in the area of evidence on population and development. In 2011, UNFPA and NESDB co-commissioned a report on "Impact of Demographic Change in Thailand." The report has documented the trends of population evolution in Thailand and analysed some significant implications and policy issues. It analyses the impact of demographic changes

on education, labour-force participation, urbanization, migration, and health. It also probes into past population policies, examines recent policy changes and critically discusses different threads of arguments relating to policy implications of Thailand's demographic trends.

The report, which NESDB as planning agency itself utilizes, serves as an advocacy tool and basis for a series of interventions to follow, including an initiative to develop a curriculum on policy response to demographic change for Thai public officials.

The Process

- **Evidence-led.** UNFPA's strategy emphasizes evidence -- generating it, and with a view to practical application as advocacy tool and as inputs for policy and programme formulation within UNFPA itself and partner agencies. In addition to filling the evidence gap, "Impact of Demographic Change in Thailand" report in 2011 provided an advocacy tool for UNFPA and NESDB to engage and seek entry point into agencies that train public sector workforce. With this mission in mind, the partners approached, among others, the Office of the Civil Service Com-



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mission, and Thailand National Defense College, entities whose main functions are to train public officials.

In 2013, dialogue proceeded among OCSC, UNFPA and NESDB. The public sector employs over 2 million people in its workforce. For civil servants of all levels (new entry, mid-ranked, and top administrators) OCSC is mandated to provide training and capacity building for them to have the competencies required of their positions throughout their service career.

- **Users-oriented.** As a result of the dialogue in which UNFPA and NESDB impressed upon the pressing importance of raising awareness on impact of demographic change in Thailand and following consultation with the Secretary-General of OCSC, OCSC

opened up the opportunity for impact of demographic change contents to be integrated into 4 of its existing training curricula. These are two courses requisite of top administrators at decision-making level, one training course for mid-ranking officers who are division directors and bound to be promoted to the policy-making top rung, and introduction to population and development for junior officers. This means government officials from top to junior operative levels from 20 ministries can get exposure to what demographic changes mean to Thailand and how they are relevant to their work in light of the breadth and depth of its implications.

UNFPA in collaboration with NESDB contracted the Faculty of Economics, Chiang Mai University to develop the Policy Response to Demographic Change curriculum for OCSC training of government officials in 2014 to mid-2015.

The curriculum is built on the premise that high-level administrators think policy response and strategy, mid-ranking officials are then assigned to translate those policies into work plan to achieve the intended outcome. Entry level officials are



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the operatives - new and inexperienced. For junior officials the curriculum is designed as an e-learning course to familiarize them with demographic concepts and measures, impact of demographic shifts from macro to micro level and implications on Thailand and ASEAN. For mid-ranking officials bound to rise in their ranks and for top-level administrators, the Policy Response to Demographic Change curriculum uses problem-based learning approach and hands-on group work to enable them to brain storm, get a grip on situational analysis, impact of demographic change on aspects including economy, financial security, health, environment and family's well-beings. The focus is to equip them to be the breed of civil servants that Thailand needs in dealing with challenges over the next 20 years to bring the country out of middle income trap with its ageing population plus all other segments properly cared for.

We should bear in mind that population change affects all of us.

Associate Professor Dr. Sasipen Phuangsaijai, Faculty of Economics, Chiang Mai University led the team of faculties and experts to develop the Policy Response to Demographic Change curriculum planned by UNFPA/NESDB for the Office of Civil Service Commission to train officials at top, middle and new entry ranks. Upon completion of the curriculum, Dr. Sasipen had opportunity to join a training course for mid-ranking officials—so called New Wave officials -- where the curriculum was put to use in mid-2015. The approach is group work exercise in which officials from different State agencies mingled, interacted and brainstormed on aspects of policy response to demographic impacts.

Officials from the Transport or from Corrections Department, for instance, were unaware of the population situation. Essentially, they could not picture why demographic shift could be relevant to their work, and they simply did not see why they should care about it at the start.

Dr. Sasipen shared her observation of the course, saying: "We had to be able to point out, these cases as with other public agencies, how what they do are part of the broader demographic response picture. Transport is no longer about the linear responsibility of building roads, in the context of an ageing society." The group discussion and group work joined up officials from disparate corners of the State mechanism help to broaden their exposure and connect the dots to the big picture, as most of them tend to be specialized and occupied with their own line of work. Through the curriculum, participants found it eye-opening to learn what their peers at the line ministries of Public Health, or Social Development and Human Security are doing.

Moreover, it is eye-opening for the curriculum team development themselves. The contents featured in the curriculum that include good practices from outside Thailand, and impacts of population change on all aspects of living drawn out from the process should be disseminated at the level of local governments too. "We 're trying to find entry points to do so. So now for my other research projects, I try to insert this message of population change impact for our research partners and key informants. This issue is something we all have to bear in mind. We are actually using some of the curriculum contents to teach Economics students at undergraduate and graduate levels. Our Dean instructs that we should also constantly update our manual and international good practice."



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Results

- The Office of the Civil Service Commission, which trains public sector workforce from policy-making, planning to operational levels across the government machinery has at its disposal a curriculum that prepares civil servants for policy response to demographic changes, in line with Thailand's 20-year National Strategy to achieve developed country status. Following delivery, the curriculum had been tested at one training course for top level public officials and at the annual training course for 39 mid-ranking officials bound for fast track promotion.
- Increased awareness of population and development among public officials beyond line ministries, through the delivery of policy response to demographic change curriculum through OCSC. The scope and coverage within public sector workforce will be expanded, as in late 2016, OCSC using its own budget commissions the production of e-learning materials to be distributed among civil servants. One of the five subjects of e-learning in the OCSC pipeline is impact of demographic change on national development.

"For the first time, our strategy formulation uses demographic evidence," said Mr. Sirivit Klinpakdee, Director, Central Land Consolidation Office, Irrigation Department, Ministry of Agriculture and Cooperatives.

"The last time I studied something about population was during the Master's degree. Thailand's demographic shifts and impacts were never part of the work life picture. So yes, it's new knowledge for me," said Mr. Sirivit. A Level 9- official, Director Sirivit was one of the students in the 2015 OCSC course for high-level government administrators, the first course to have incorporated parts of the Policy Response to Demographic Change curriculum commissioned by UNFPA and NESDB.

The Central Land Consolidation Office is mandated to help land-owning farmers to consolidate their plots to facilitate irrigation for enhanced productivity. "Our line of work has always been strictly about water and engineering. The population aspects we learnt during the course were solid evidence and credible data from real experts. To many of us, we were not aware of the demographic implications in relations to what we do before. At policy level, we really need to be able to see the linkage of line agencies' work with broader contexts including the country's population dynamics. The knowledge on policy response to demographic change is very useful and relevant to my work."

The Irrigation Department recently launched a consultation process to formulate the departmental strategy to be aligned with the 12th National Economic and Social Development Plan (starting from 2017). For the first time, the strategy formulation process utilizes evidence and data from the national population plan. There will be demographic evidence integrated into its analysis of investment in water supply, and how such investment would yield contribution to GDP for respective sectors that are water users.

Lessons Learnt

Effectiveness of UNFPA strategy.

UNFPA's strategy works in such a way that it produces evidence to frame a broad and complex issue as the "Impact of Demographic Change in Thailand" report, in collaboration with National Economic and Social Development Board. As a planning agency working around five-year planning cycle, NESDB could be counted among the first State agencies to be acutely aware of and concerned about the situation. With evidence in hand, UNFPA and NESDB utilize it to bring about changes – by raising awareness and stimulating key actors. The fact that the training arm of the government, Office of Civil Service Commission, endorsed and agreed to be part of the initiative to develop "Policy Response to Demographic Change" curriculum generates the outreach impact required within in the 2-million strong public sector workforce to be change agents. Instead of letting the 5-year planning cycle to run along its own course, such proactive advocacy in engaging OCSC, to invest the curriculum into the

existing mechanism to train civil servants helps to speed up the process of raising awareness and stimulating key actors.

"On our own, we cannot possibly do everything and address every aspect of demographic impact. The challenge is how to make everyone aware of what development at each stage and age of population affects the country, policy response is required to step up or modify at which point, so that they can come up with appropriate solutions," said NESDB Senior Advisor in Policy and Planning Jinanggoon Rojananan. Changes will take time, but in the view of Ms. Jinanggoon, encouraging first steps have already been taken. Now the awareness has reached the critical mass within the public sector workforce as they have started acting, be it in education, labour, agriculture, health, etc. The first encouraging signs are tangible, as virtually every agency now refers to and incorporates population and development perspective into their process of formulating strategy and work plan under the 12th economic and social development planning cycle.





GOOD PRACTICE TWO: YOUTH SEXUAL REPRODUCTIVE HEALTH & RIGHTS

Platform for Positive Sexuality of Young People

An innovative approach that connects and convinces multiple stakeholders on board a common goal to reduce adolescent pregnancy by creating teen-centered solutions laid solid foundation for effective implementation of the landmark law passed in early 2016.



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Context

UNFPA's 10th programme cycle spanning 2012-2016 found Thailand managing a new demographic reality – an ageing society, shrinking workforce, spiking adolescent pregnancy rate, an era commonly known as “fewer births, of lesser quality.”

Given its far-reaching implications over all aspects of development, adolescent pregnancy was identified a top priority within National Reproductive Health Strategy Plan (2010-2014). Among the rank of middle-income countries, Thai adolescent birth rate over the past decade stood out. Evidence shows that delivery rates among 15-19 years old increased from 49.3 per 1,000 in 2005 to 53.6 in 2011. The National Reproductive Health Development Committee endorsed in 2012 a goal of reducing

adolescent (15-19) delivery rate from 53.6 to 50.0 per 1,000 by 2017.

Despite response from certain quarters of the government most prominently the health sector and civil society organizations working on health issues, institutional arrangements required to implement rights-based interventions targeting youth lagged behind the rapid pace of changes unfolding. In the absence of a law dedicated to addressing adolescent pregnancy, efforts by multiple agencies were uncoordinated, not strategically targeted, not always informed by strong evidence, and without tracking or accountability mechanism. Ministry of Public Health and Ministry of Social Development and Human Security (MSDHS), for instance, each pursued its own ministerial mandate to tackle different aspects of the problem on the basis of different data sets and implementing actions according to its own monitoring and evaluation system. In sum, Thailand lacked the single most important tool with a common goal and strategy in place to join up actions in the face of new challenge of teenage pregnancy. For decades earlier, the State mechanisms were pretty much oriented towards family planning.

With force unleashed by digital technology and evidence pointing to high teen

pregnancy and birth rates, Thai youths were not equipped with Comprehensive Sexuality Education that would enable them to transition well through puberty into adulthood. Deep-rooted patriarchy norms that still prevail stigmatize and place pregnancy-related burden squarely on girls and women. Social norms make sex a taboo subject not to be brought up between parents and teachers and children, therefore raising barriers to dealing with unsafe sex among adolescent Thais which is the source of unplanned pregnancy and sexually transmitted infections. While norms place children and adolescents outside the orbit of age-appropriate sexuality education and place them far away from reproductive health service, behavioural surveillance data collected showed age at first sex was decreasing across cohorts among secondary and vocational school students.

Against such backdrop, UNFPA strategy employs the “3Cs” approach (Create-Convince-Connect) through the key intervention on “3C4Teen Platform for Positive Sexuality of Young People.” This intervention has three actions: platform on the ground for policy advocacy; platform on the media through the establishment of the 3C4teen website; and platform on the move which enables voices of young people and their concerns to make changes at



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the grassroots level and at the policy level through policy and programmes related to sexual reproductive health and rights. With the Thai government identifying adolescent pregnancy as the main challenge, adolescent pregnancy is thus the focus of all these three platforms.

A draft legislation on youth reproductive right – which among other things would spur, integrate and govern multi-sectoral actions – has been in the making and languishing along the legislative path since 2002. After more than a decade of difficult journey, and concerted efforts amongst the coalition with whom UNFPA collaborated, the Prevention and Solution

of Adolescent Pregnancy Problem Act was passed in February 2016 by National Legislative Assembly, the law making body appointed by the post-coup government. The law was gazetted on 31 March 2016, and became effective from 29 July 2016. The relatively smooth and rapid passage of the law under the current government surprised many stakeholders and observers. Yet still, setting the law in motion does not start from zero, because key elements resulting from UNFPA's Create-Connect-Convince strategy in partnership with multiple stakeholders have put in place the requisite building blocks to make the promises laid out in the law happen.

Interventions through UNFPA Platform for Positive Sexuality for Young People (3C4Teen)

Step 1: Setting the Stage

Adolescent pregnancy has emerged a challenge in Thailand, where negative-sex approach and social norms label sexuality a taboo issue. Along with prevalence of negative-sex approach, societal disapproval of young people's rights to control their own sexuality and sexual and reproductive health make it almost impossible for adolescent and young people to access

sexual and reproductive health service. Under such circumstances, the catalysts for change ought to look elsewhere for good practice. In November 2012, UNFPA organized a study visit for key decision makers to the United Kingdom to learn how and why the UK succeeded in reducing teenage pregnancy and to the Netherlands for comprehensive sexuality education management. Participants included senior figures from the Ministry of Public Health, Ministry of Social Development and Human Security, Office of Basic Education (in charge of design and implementation of comprehensive sexuality education), private sector (DTAC), media partner (Channel 3) and CSOs partners including the Thai Health Promotion Foundation. The collaboration and partnership forged before, during and post trip contribute significantly to the formation of an alliance of public/CSO actors that would subsequently be instrumental in policy and social dialogue, in advocacy leading to the passage of the Adolescent Pregnancy Act. In 2013, the Thai Health Promotion Foundation rolled out its multi-sectoral collaboration for a comprehensive programme, based on the UK good practice, operated by provincial mechanism aimed at reducing teen pregnancy in 20 provinces. These pilot provinces turned out to have the first movers' advantage in activating provincial

mechanism to play the role required by the Act on Prevention and Solution of Adolescent Pregnancy Problem B.E.2559. What they do can now join seamlessly into what the rest of Thai provinces have to do under the supervision of the Ministry of Interior, according to Dr. Kittipong Saejeng, Director, Bureau of Reproductive Health. And these 20 provinces can provide lessons learnt and stimulate other provinces to follow suit with the law coming to effect.

Step 2: Strengthening evidence capacity, joining up strategic actions

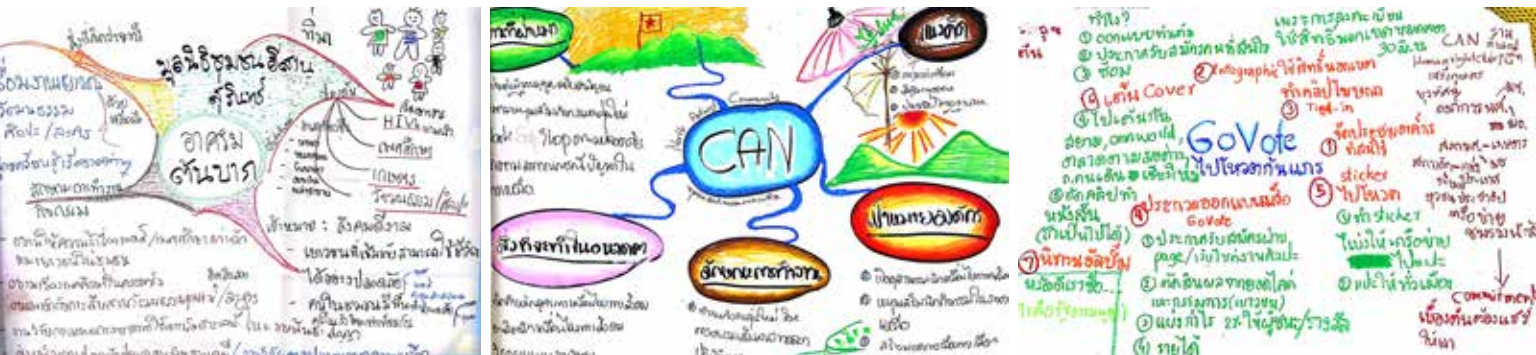
Lurking in the background was the lengthy on-and-off process of submitting the draft reproductive health and rights law, which also addresses teenage pregnancy, for considerations within the executive branch. Since the start of this programme cycle, UNFPA continued its core work on preparing essential data and evidence within Thailand and internationally, to diagnose the situation and identify gaps in adolescent sexual health programmes. It supported a series of workshop to ensure that the law was drafted based on evidence and reproductive rights. It also convened a series of in-depth interview with core stakeholders including the Ministry of Education [in charge of developing Comprehensive



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Sexuality Education], MSDHS [in charge of youth development, women and family affairs], MOPH and CSO partners. As a result, the Platform for Positive Sexuality of Young People in Thailand was developed and activated to coordinate hitherto disperse efforts and resources.

Prior to and throughout this programme cycle, UNFPA supported the Department of Health to collect and make use of evidence to advocate for changes that improve youth reproductive health. With youth-friendly service delivery at the heart of successfully reducing pregnancy, UNFPA has supported the development of guidelines now adopted by MOPH including Integrated Youth-Friendly Health Services Standard, Guideline for Adolescent Maternal Care, and Guideline for Contraceptive Services for Adolescents. These guidelines were



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previously generic and not youth-specific. Progress on this front effectively prepared MOPH-hospitals nationwide to be able to service the key population group as required by the Prevention and Solution of Adolescent Pregnancy Act B.E.2559.

To address the widespread circulation of wrong information within the Thai media citing a so-called “WHO recommendation” implying that a 10% cut off level of teenage birth rate is acceptable, UNFPA initiated a dialogue with WHO and, in February 2015, jointly clarified and confirmed to stakeholders that it is never acceptable that a girl should have to take on the role of a mother when she is neither physically, emotionally, and economically ready for this role. In addition, to resolve teenage birth data discrepancy between the versions referenced by MOPH and by MSDHS, which actually originated from the same single source of census data maintained by the Ministry of Interior, UNFPA hosted a series of interagency meeting

to clarify issues, resulting in common methodology for data collection in place from June 2015.

Step 3: A law, national strategy to reduce adolescent pregnancy, and a unified coalition to drive implementation of the law.

The coalition of key stakeholders formed during the UNFPA Study Visit to the UK and Netherlands together with partners in several other join force to work on the complex issue of addressing adolescent pregnancy. In the absence of legal framework (the Act and the National Strategy that requires all arms of the State to act) UNFPA proposed One Goal One Plan strategy as an interim avenue to integrate and leverage actions by public and civil society actors working to reduce teenage pregnancy. While doing their own respective parts, one of the main missions of this coalition consisting of government agencies as well as civil society orga-

nisations working on youth’s sexual and reproductive health and rights issue was advocacy for the passage of the youth sexual and reproductive health law. Following the passage of the Adolescent Pregnancy Act, this same coalition would see through the implementation. Essentially, the bulk of foundation and building blocks are in place to ensure that provisions of the law are translated into support and service the target population group needs.

Results

● Solid ground paving the way for implementation of Adolescent Pregnancy Act B.E.2559

Many aspects of UNFPA’s collaboration with partners – gap analysis, evidence generation, policy dialogue and advocacy, the partnership – have laid the strong foundation for Thailand to implement the Adolescent Pregnancy Act in earnest.

The Act prescribes a national strategy with which all efforts must align towards one set of outcomes. There is a national committee chaired by the Prime Minister, with 8 ex-officio committee members from the ministries of

“One life, one pregnancy, with the right decision we can enable a young mother and her child to become productive citizens, and this can solve the whole host of other socio-economic problems. This law is our national pride, it gives rights to pregnant girls to have her future,” Dr. Jetn Sirathranont, NLA member, Secretary-General of Asian Forum of Parliamentarians on Population and Development. A landmark law by international standard, the legislation is anchored upon youth sexual and reproductive health and rights. UNFPA collaborated with the Bureau of Reproductive Health to make sure the draft sponsored by line ministry is rights-based, served as technical expert in parliament during vetting and voting process. What adolescents get from this law include age-appropriate and practical Comprehensive Sexuality Education, reassurance that pregnant adolescents can continue education, confidentiality at clinic when they seek service and no parental consent required in seeking RH related service, and that teen parents get the support they need. There is an accountability structure established by the law to have 2 representatives from the National Child and Youth Council alongside other representatives to follow up implementation of comprehensive sexual health programme from national to sub-national level.”



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Social Development and Human Security, Education, Public Health, Interior, Justice, Labour, Culture and Bangkok Metropolitan Administration. In addition to five other experts, 2 youth representatives will also be part of this committee. The Department of Health is mandated by law to undertake several essential tasks including monitoring and evaluation. Pending appointment of experts, the Department of Health serves as the focal point according to the interim provision of the Law. By the last quarter of 2016, the National Strategy to Prevent and Resolve Adolescent Pregnancy was being finalised. This 10-year strategy sets the target of adolescent birth rate at 25 per 1,000 (adolescents aged 15-19), compared with the current rate of 44 per 1,000, according to Dr. Kittipong Saejeng, Director of

Bureau of Reproductive Health. UNFPA also supports the development and implementation of the strategy.

- **Evidence-based policy formulation.**

The National Health Security Office and Department of Health jointly announced that effective 1 May 2014 adolescents under 20 can access long-acting contraceptives [implant and intrauterine device] free of charge nationwide at State hospitals and private hospitals that are part of NHSO's universal coverage scheme. Previously these categories of contraceptives were available only to married women. The Bureau of Reproductive Health with UNFPA collaboration has generated evidence to support its advocacy leading to this eventual outcome, which is deemed to be another effective solution to addressing adolescent pregnancy problem.

- **Youth empowerment and improved sex-positive communications.**

Adolescents have to be able to participate meaningfully in policy and actions that affect them, such as those resulting from the Adolescent Pregnancy Act B.E.2559. An important aspect of UNFPA's 3Cs approach is to actively engage young people in the process

Hipsters' Positive Power, engaging boys and young men in Phrae

Since 2009, the Creative Center for Development and Environment in Phrae province targets a particular segment of youth: "stigmatized as troubled boys with questionable behaviour" aged 13-20, some of whom do not go to school, racing motorbikes, into drugs and unsafe sex. Under the theme "Hipsters' Power for Good," the Center organizes interactive activities focusing on building self-esteem and imparting health knowledge for male adolescents through peer educators who in turn further inspire and educate others around them. "Before joining this programme, I spent a lot of time banding together with friends to fight with other rival gangs. I used to rough others up quite

bad and I myself once got 3 stitches on my chin. It never occurred to me to do volunteer work and be positive," said one secondary school boy. "I always thought that one has to get rich and powerful before one can be an agent of change. But now I know that a high school student from a poor family like me can make a difference by starting to do something myself and others would do the same without me asking. The best thing about joining Hipsters' Power for Good is that it has changed me from a useless truant to become an attentive student and community volunteer." Phil, 18, leads the "Red Eagles Camp." "I like this kind of programme to talk this stuff. I do not go to school, so no way I get access to this sort of session. And this stuff I did not know of before." Teenagers outside the formal education system like Phil are further marginalized for their behaviours that

community adults find repulsive, driving them further away from access to positive sexuality education they need. Phil has joined the programme, and now he's one of the peer educators. "The other day I did a safe sex session with my friends at workplace. One of them said afterwards that he's going to use condom from now on because he learns from me that it prevents sexually transmitted disease and pregnancy. Others asked me to do this knowledge stuff again because they enjoy and find it useful." Another school-based peer educator shared what's changed in him. "I have to act as good example for my junior year friends with whom I share information on safe sex. As peer educator I always have to strive to be better. I gave up street fighting. I date one girl at a time now. We have a code of conduct that we never wear Hipsters' Power shirts to do bad things."

School bus driver and a positive sexuality communicator

Every day Mrs. Buanak drives a van full of primary and secondary school children from a village to the main school in town and back home. Round trip, twice a day, she got to hear youngsters chatting about friends, boyfriend girlfriend, menstruation and the like. She often wondered how she would answer some of those typical teen questions should they ask her. That motivated her to volunteer to represent the village to attend a training workshop on communicating positive sexuality with adolescents. A mother of a teenager herself, Mrs. Buanak took up her voluntary job with enthusiasm, offering space in her own house to run the village youth service center. The Center for Girls at Maekaewpatana Village in the same sub-district which involves Mrs. Buanak on board is one of the 17 UNFPA youth empowerment grantees in 2015. The grant enabled the Center to train community-based volunteers like Mrs. Buanak as positive sexuality communicator, and equip her with related gears and kits for her young clients. Mrs. Buanak's Center is located in Mai Chaoroen village, and it fits in the Center for Girls' goal to expand coverage of such youth-friendly community-based facility to cover all 20 villages within Mae-or sub-district of Chiang Rai. The familiarity and rapport with teen passengers she transports on school days makes Mrs Buanak's center an instant crowd puller, a well-known spot for youth to gather for activities, and to turn to when seeking advice.

of translating policies into actions for healthy sexuality which is critical to the successful reduction of adolescent pregnancy in Thailand. UNFPA works in capacity building to youth networks across the country supported by the Women's Health Advocacy Foundation and the Thai Volunteer Service Foundation. As part of its advocacy work, UNFPA engaged youth representatives in the development of the Bill, as well as advocating for youth to be presented in a national committee appointed by law to oversee implementation of the law. The Act requires two members of National Child and Youth Council to sit alongside adults in the national committee, as well as in provincial level committee. In 2015, UNFPA provided small grants to 17 projects relating to youth empowerment for sexual and reproductive health and rights.

- **Multi-sectoral partnership to drive implementation of the law.**

As a result of working together under same theme over a stretch of years, an alliance of line ministries and CSOs joined up under a Core Team on Adolescent Pregnancy established by Thai Health Promotion Foundation, and UNFPA has helped expand and



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strengthen this working group. It is the same alliance that advocated for the passage of the Act, that is implementing the One Goal One Plan as well as monitoring the progress according to the Act. The pilot projects in 20

provinces initiated and funded by the Thai Health Promotion Foundation, for example, turn out to have provided 2 - year head-start of compliance with the Prevention and Solution of Adolescent Pregnancy Act at provincial level.

What makes this a good practice?

- **Dr. Kittipong Saejeng**, Director of the Bureau of Reproductive Health, Department of Health, identified as good practice UNFPA's collaboration with Bureau on developing standards for youth-friendly reproductive health service. The collaboration on this particular aspect started since 2005 and continued throughout the 10th Programme cycle. Integrated Youth-Friendly Health Services Standard, Guideline for Adolescent Maternal Care and Guideline for Contraceptive Services for Adolescents constitute a set of national standards applied across Thailand. With the health workforce trained, the coverage of provincial and community hospitals under MOPH certified to have complied with the standards is now about 70%. The Bureau intends to achieve 100% compliance of all MOPH hospitals that operate youth-friendly reproductive health service by 2017.

- **Reframing of adolescent pregnancy discourse within the Thai society.** UNFPA generated a range of evidence and research from technical guidelines and manuals to general report like "Motherhood in Childhood, facing the challenge of adolescent pregnancy. State of Thailand's Population 2013," for its own use as well as to support

partners as advocacy tools. Experts observe that since 2014, the social dialogue has changed particularly among policy makers. Previously, adolescent pregnancy was often framed as adolescent behavioural issue, but now change makers tend to place it in the context of demographic reality, population and development. This represents very strong policy message, reflecting acceptance of the issue. Such discourse has gained currency beyond Bangkok to provincial level where actors now frame the issue similarly in the context of Thailand's new demographic reality.

- **Advocacy and stakeholders' communication.** When the Bill was being circulated and controversy arose, UNFPA provided technical assistance to the MOPH to develop communication materials to promote the law among stakeholders. "UNFPA has played an instrumental role in providing technical inputs to the parliamentary extra-ordinary committee through successive readings of the Bill, and section-by-section review in the National Legislative Assembly, leading to the eventual passage of the law. Prior to that, UNFPA has been supportive to our work particularly in the area of evidence, collection of international practices and examples," said Dr. Kittipong.

- **Inclusion of the voices of youth.**

The Challenge Ahead

After 14 years of efforts for Thailand to pass the law protecting sexual and reproductive health rights for the people including youth, the next big challenge involves accountability of actors. Whereas Teenage Pregnancy Act provides broad framework, line ministries have to exercise their power vested by the law to issue sub-ordinate laws in the form of ministerial regulations/guidelines and follow up on compliance and quality assurance. Works and actions by different agencies will be integrated and aligned with the National Strategy as required by the law, and accountable to the national committee presided over by the prime minister. For instance, the Ministry of Labour must regulate that business establishments that employ teen workers must make space available to give information to young workers including where and how they can access reproductive health service if they so wish. The Ministry of Interior, per Section 10

of the law, through the Department of Local Administration must ensure that local government bodies have work plan to support, prevent, and resolve adolescent pregnancy issue.

One of the toughest challenges has to do with Comprehensive Sexuality Education (CSE) for adolescent pupils and students. The law makes CSE mandatory at schools and educational institutions regulated by the Ministry of Education. The Ministry of Education does have a CSE curriculum but schools and institutions manage it exercising their own prerogatives whether and to what extent CSE would be delivered. Hence there is no consistency when it comes to the number of periods, qualification of CSE teachers. Some schools have teachers with proper CSE training but not enough slots assigned to CSE inputs. Others may not even have trained teachers to deliver CSE. Availability, quality and effectiveness of age-appropriate CSE

deliveries in Thailand are varied and haphazard dependent upon school leadership's attitude, or even the role of Parents Teachers Associations. Many still oppose because they perceive CSE as the old Thai adage goes "pin-pointing to squirrels where they can burrow,"-- arousing kids' curiosity to try sex. However, large-scale public communications in recent years are bound to redress this deep-seated sex-negative perception. Dr. Kitting is among the optimists who see change in the making. "I do believe that in general school leadership and parents will understand the importance of CSE." The mandatory nature of the Law will also change this.

On the evidence front, UNFPA continues to identify good practices from international experience to relevant line ministries in the process where they develop ministerial regulations equivalent to subordinate law to implement the Adolescent Pregnancy Prevention and Solution Act.



Lessons Learnt

Clear strategy and approach. UNFPA's Connect-Convince-Create approach to work on youth sexual and reproductive health and rights provides direction on how to work with partners, in so far as who to work with, what issues/tasks to give weight onto and at what timing.

Evidence-based advocacy. UNFPA on its own and with partners generate plenty of evidence that are used internally within UNFPA and as advocacy tool among partners and stakeholders to bring about changes.

Nurturing the true partnership. To be part of a policy advocacy alliance in which different

actors follow different mandates on a common issue of adolescent pregnancy reduction, the major challenge for UNFPA as an international agency is how to foster collaboration and leverage the strength and resources—a delicate role to play. Of utmost importance is to manage partnership among multiple stakeholders to make sure every partner has a say and has a part to play.

UNFPA supports whereas stakeholders “own.” The alliance that has been together since advocacy for the passage of the Adolescent Pregnancy Act has the major task ahead of ensuring that the provisions of rights-based youth sexual and reproductive health are acted out on the ground and reaching the target population.



GOOD PRACTICE THREE: THAILAND-LAOS-UNFPA SOUTH-SOUTH TRIANGULAR COOPERATION FOR SAFE MOTHERHOOD

Mobilizing Thailand-based experiences ensuring sustainable management of maternal health programme to reduce maternal and child mortality in Laos



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Context

Thailand has joined the Middle Income Country rank since 2003, and repositioned itself as a “Global Development Partner” able to offer its development skills and expertise to share, particularly among developing countries. UNFPA has collaborated with TICA (Thailand International Cooperation Agency, under the Ministry of Foreign Affairs) to build capacity as a development partner under a model of trilateral partnership. Following a series of consultations with partner countries, Thai experts, and UNFPA Country Office in Bhutan, Laos, Myanmar and Thailand, it was identified that such partnership would focus on Emergency Obstetrics Care, Advanced Midwifery for Health Assistants and Community Participation in Maternal Health Services. These are areas where Thailand has proven track records

to offer. A relatively new agency following its restructure, TICA sought a suitable model to work with other countries, shifting from previously ad-hoc projects operating training for individuals into more effective institutional capacity building and sustainable partnership.

Under a framework agreement on strengthening institutional capacity, with reduction of maternal mortality rate in Bhutan as ultimate goal, the partnership implemented an initiative aimed at improving the capacity of Bhutan’s health institutions and personnel in dealing with emergency obstetric care, referral services, and prenatal and postnatal care and services. Training of health managers and the health workforce has been customized to meet the real needs of Bhutan. UNFPA Thailand and Bhutan country offices facilitated communications and coordination, as well as quality assurance. Needs assessments were conducted in earnest and in a participatory manner. With UNFPA as facilitator, the three partners agreed upon their respective roles and responsibilities as well as sharing of resources. From needs assessment to programme design, implementation and monitoring and review, the entire process fully engaged the three partners. Upon completion of the project, the two countries pledged in December

2015 to continue collaboration on bilateral basis between Praboromarajchanok Institute of Health Workforce Development (PBRI) under the Ministry of Public Health and the Faculty of Nursing and Public Health of Kesar Gyalpo University of Medical Sciences on nurse training.

The UNFPA-Bhutan-Thailand partnership for safer motherhood is deemed a good practice because the entire operation represents learning process for all partners, the programme in place is demand-driven, ensuring applicability and relevance of knowledge. In addition, working at institutional capacity guarantees long-term outcome. As a consequence of participatory process from design to operation and management, partners share strong sense of ownership when undertaking their roles and responsibilities.

After Bhutan, UNFPA and TICA implement the trilateral partnership with Lao PDR on “National Midwifery Institutional Capacity Development 2015-2017”

The Process

Similar to Bhutan, the trilateral partnership of UNFPA-TICA and Lao PDR follows a process of participatory steps starting from identifying implementing partners, needs assessment, programme formulation and implementation. The aim is to support Laos in adopting the International Confederation of Midwifery (ICM) standards recognized by the World Health Organization, and adopted by UNFPA as global standards of midwifery core competencies.



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● Shopping and Planning

In 2014, UNFPA hosted a validation workshop for Thailand’s partner countries to meet with Thai institutions that provide international programme on maternal health. Prior to the workshop, UNFPA and the Thai government completed a number of essential preparatory works including: Quality

Assurance of Thai Maternal Health Programmes; documentation of lessons learnt from the UNFPA-Thailand-Bhutan technical cooperation, a comparative review of international development cooperation modalities, and mapping of potential funding sources on safe motherhood work.

A delegation from Lao PDR joined the forum. It sought support to improve midwifery education in Laos. Meanwhile as part of quality assurance work, a network of 11 Thai institutions eligible to offer international maternal health programme was established.

With UNFPA facilitating communications and exchanges, the three partners in 2014 formulated a framework outlining the scope of cooperation, sharing of responsibilities, and management modality. UNFPA in Thailand and Laos work as one team, sharing responsibility, costs and tasks. In tandem, the process was initiated to select an implementing partner from the pool of 11 accredited institutions. UNFPA, Thai and Lao governments applied a fair selection process. The two candidate institutions were the Faculty of Nursing, Khon Kaen University and Udon Thani Nursing College under

the Ministry of Public Health. The Selection Committee conducted facility visits and reviewed their international midwifery training programme based on the selection criteria. The Faculty of Nursing, Khon Kaen University, was selected.

● Needs assessment, the most crucial step

In 2015, Khon Kaen University, UNFPA and TICA representatives conducted needs assessment in Vientiane, Champasak and Luang Prabang. The team visited all 12 regional midwifery institutions and hospitals, and interviewed 31 midwifery educators and 22 clinical preceptors.

Key findings include the fact that even though national midwifery education standard is in place, yet in practice variations exist as different schools/colleges modify the national standard. The thorough needs assessment also identified limitation in human resource capacity regarding quality of supervision and coordination of midwifery educators, preceptors and school administrators.

To ensure that the programme is comprehensive and effective, the partners



agreed to extend the length of training programme from four to six months for educators and preceptors, and to have a separate 4-month training course for school/college administrators and supervisors. In addition, selection criteria were set with participation of Khon Kaen University, Department of Training and Research, Ministry of Health of Laos, and UNFPA Laos Country Office. Partners also agreed during a study visit in April 2015 to Khon Kaen University before finalizing the programme that selecting the right Lao participants is one of the most crucial elements for the best outcome and sustainable result for institutions in Laos.

Emerging from the working dialogue is the consensus that there should be a single standard of midwifery teaching in Laos. It is suggested that standard



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of the national midwifery curriculum for all institutions is essential and that ICM standard must be adopted. In implementing Laos Midwifery Education and Training Programme, the Faculty of Nursing, Khon Kaen University adopts the ICM-WHO-recognised standard.

In yet another finding, to enhance supervisors' skill, it is agreed that supervisory skills be included in the practical component of the trilateral cooperation programme. To enlist policy support at national level, it was suggested and agreed to organise a high-level study visit to Thailand and to other countries with one standard and established system of midwifery education.

As part of finalizing the programme to align with needs, UNFPA and TICA

conducted ICM-WHO standard for midwifery core competency for all 11 Thai institutions to advocate for their compliance. The Nursing and Midwifery Council participated and endorsed the idea.

“What is delivered must be genuinely demand-based so that our partners get to use and apply what’s learnt,” said Mrs.Sasitorn Wongweerachotkit, Director of International Organizations Partnership Branch, TICA. She and her team have been working closely with the Laos partnership, and prior to that the trilateral partnership with Bhutan. Even if needs assessment exercises in the case of Laos turned out to have taken longer than planned, and the scope widened to cover three



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regions of Laos, it has proven to be “slow but worth it” undertaking in that it has laid solid foundation for programme development and implementation to proceed. And with regional variations and internal disparities in Laos identified, this has given room for adjustment of the context-based offering.

● Enlisting High Level Support

By the time of third leg of needs assessment mission to Luang Prabang (after Vientiane and Champasak) in December 2015, partners agreed on the need to advocate for the national policy makers to understand and conceptualise midwifery/nurse programme in light of the situation of regional variations and disparity inside Laos. A high-level study visit was planned in order to provide opportunity for 12 policy makers involved in midwifery policy and plan to exchange with and learn from Thai institutions how they operate and supervise midwifery education programmes at both national and sub-national levels. Dr.Som Ock Kingsada, Vice Minister, Ministry of Health led a delegation consisting of key actors and leadership of health, training and education from Vientian, Champasak and Luangpra-

bang to Thailand on 13-17 June 2016. The visit sought to demonstrate to the Lao delegation the system in Thailand, starting from the legal framework of the Professional Nursing and Midwifery Act and its applications in terms of implementation and quality standard control for the midwifery education, different roles and responsibilities among institutions namely those that control and manage the standard (Nursing and Midwifery Council and

Bureau of Nursing under the Ministry of Public Health, and Office of Higher Education, Ministry of Education) and the implementing agency (Phraborom-rajchanok Institute of Health Workforce Development and its Nursing College, and Faculty of Nursing under university.) “We recognize that without high-level support at policy-making level, the work is unlikely to be sustainable,” said Mrs. Sasitorn of TICA.

Results

- Following needs-based curriculum development with calls to emphasise practical sessions, and on the heels of the high level study visit from Laos in mid-June 2016, Faculty of Nursing, Khon Kaen University operated two courses for Lao trainees under this partnership: a six month-training for 18 midwifery educators, and four months for ten midwifery education administrators. Khon Kaen University is also tasked with developing teachers’ manuals on four topics.
- There will be the regular follow up post-training - unlike in the past when TICA operated ad-hoc training projects where it’s proved virtually impossible to track if individual recipients go back and apply the knowledge to their work.
- Strengthening TICA’s capacity as global development partner in managing official development assistance under South-South Cooperation, through direct experience partnering with UNFPA in Bhutan and Lao PDR.

Lessons Learnt

- The trilateral South-South cooperation with UNFPA and Thailand with Bhutan and Laos both reinforces the importance of demand-driven approach to ensure maximum effectiveness.
- Needs assessment is the most important step.
- Identifying the right individuals in partnership agencies to work with is very important in getting actions done in both ends of the country. UNFPA Laos Country Office and the TICA representative at the Thai Embassy in Vientiane reached and worked with the right people to get things done.
- In both cases of Bhutan and Laos, UNFPA Country Office, along with the Thailand country office play instrument role in facilitating and leveraging multiple actors and partners. The different country offices of UNFPA operate as one team.
- As demonstrated in the case of Laos, endorsement by high-level government can ensure aid effectiveness, and sustainability.
- The partnership with Laos minimizes language and cultural barriers. In addition, the geographical proximity between Laos and Khon Kaen University in northeast Thailand allows for lower travel cost and living expense.

