

# National Health Policy Ministry of Health

## Table of contents

L

PART I: INTRODUCTION	1
1. Health and Development	1
2. Vision and Mission	2
3. Aspirations	3
4. Implementation Framework	4
PART II: HEALTH SYSTEM	5
5. Service Delivery	5
6. Health Human Resource	7
7. Health Research and Information	8
8. Medicinal Products, Vaccines and Technologies	9
9. Health Financing	10
10. Leadership and Governance	12
PART III: DISEASE CONTROL AND MEDICAL CARE	14
11. Preventive, Promotive and Control	14
12. Medical Care	17
PART IV: PARTNERSHIP IN HEALTH	19
13. Community Participation	19
14. Multisectoral Collaboration	19
15. Public-private Partnership	20
16. International Partnership	21
Bibliography	22

### **PART I: INTRODUCTION**

### 1. Health and Development

Bhutan has achieved remarkable health development since the advent of modern health care in the early 1960's. Bhutan has sustained primary health care coverage at above 90 % (Percentage of population within 3 hrs walking distance each way to a health service delivery point).

Consequently, Life expectancy rose from 37 years in 1960 to 66 years in 2005 and infant mortality rates dropped from 103 per 1000 live births in 1984 to 40.1 per 1000 in 2005 (*Office of the Census Commissioner*, 2005).

Further, Bhutan declared Universal Childhood Immunization in 1991 and has sustained immunization coverage of above 90 percent. Similarly, access to safe drinking water and sanitation has improved drastically over the years and in 2011, 83% of the population has access to safe drinking water and 91% to safe excreta disposal (*Ministry of Health, 2011*).

Bhutan is also well on its way to attaining most of the Millennium Development Goals (MDGs). Despite its rugged terrain and limited resources, these achievements in health indicators make Bhutan a model and a pioneer for promotion of primary health care.

These achievements in the overall health has been brought about primarily by the far-sighted leadership of our monarchs; focus on primary health care approach; integrated well functioning traditional and modern health system; socio-economic growth; increase in literacy rate; and the pursuit of balanced development path guided by the philosophy of Gross National Happiness (GNH).

The Royal Government of Bhutan (RGoB) continues to accord high priority to the provision of equitable and quality universal access to free health care services including referral of patients abroad for life saving treatments beyond the clinical capacity and facilities available in Bhutan.

The Section 21 and 22 under Article 9 of the constitution of the Kingdom of Bhutan states that, "the state shall provide free access to basic public health services in both modern and traditional medicines" and "the state shall endeavor to provide security in the event of sickness and disability or lack of adequate means of livelihood for reasons beyond one's control" respectively stands as a testament to the Government's commitment in the provision of free and quality universal health care.

Health has held a prominent place in Bhutan's economic development where the government spends around 7.4 to 11.4% of total government expenditure on health (*Policy and Planning Division, 2009*). As a proportion of Gross Domestic Product (GDP), public health spending alone (not counting private health expenditure) constitutes approximately 4% (*V.selvaraju, Wangmo, Wangchuk, & Dendup, 2009-10*).

While Bhutan has overcome many obstacles in the past, it now confronts new and varied challenges such as 1) rising health care expenditure; 2) changing life style and disease pattern; 3) inadequate human resources; 4) changing political environment; 5) Increasingly evolving health care needs of the population; 6) international health obligations and 7) new health technologies.

Despite numerous challenges, it is envisioned that the National Health Policy shall set the agenda and provide general direction to guide the government in achieving the national and international health goals within the spirit of social justice and equity.

### 2. Vision and Mission

### 2.1. Vision

Build a healthy and happy nation through a dynamic professional health system, attainment of highest standard of health by the people within the broader framework of overall national development in the spirit of social justice, and equity.

### 2.2. Mission

Achievement of national health goals through sustained provision of quality general and public health services.

### 3. Aspirations

Bhutan recognizes health as a prerequisite for economic and spiritual development, poverty reduction and the road to Gross National Happiness. The National Health Policy aspires to be congruent with the philosophy of Gross National Happiness and reflects various inputs ranging from social, spiritual, cultural and environmental aspects.

It recognizes the values of democracy, transparency, and equity especially addressing the needs of the poor and underprivileged through partnership in health. It also aspires to further pursue decentralization policy in the delivery of health services to its population.

It aims to promote self-reliance and sustainability by increasing efficiency, productivity, accountability and ownership in health care interventions and service delivery.

This policy is gender-sensitive, respects the rights of the people, seeks informed consent and maintains confidentiality in relation to medical decision-making and information sharing.

This policy ultimately aspires to improve the health outcomes by translating these statements into strategic framework through collective national and international efforts.

### 4. Implementation Framework

The Royal Government of Bhutan shall assume the main responsibility for implementation of the National Health Policy. This shall be realized through collaborative action at national and international level.

Other policy instruments and Regulations shall complement the implementation of the National Health Policy. This shall be done through a synergized approach and harmonized action among the relevant sectors and stakeholders.

The realization of this Policy shall be supported by programme and financial outlay within the five yearly strategic planning framework of the country. The annual work plans of the relevant sectors and Districts shall play a key instrument in implementing the National Health Policy.

The Gross National Happiness Commission shall take responsibility to coordinate and review the joint action towards realizing the aspirations of the Policy.

This policy shall be supported by regulatory framework and National Strategic Plan to incrementally improve the quality of health service delivery.

The National Health Policy is a living document and should be updated when deemed necessary to accommodate the evolving needs and changes.

### PART II: HEALTH SYSTEM

Bhutan shall continue to pursue the comprehensive approach of Primary Health Care, provide universal access with emphasis on disease prevention, health promotion, community participation and intersectoral collaboration.

Quality health care services shall be provided through integrated modern and traditional health care system that responds equitably, appropriately and efficiently to the needs of all Bhutanese citizens.

### 5. Service Delivery

- 5.1. The health care service delivery shall continue to be structured into a three-tiered health system with hierarchy ascending from Out Reach Clinic to Basic Health Units at the primary level and District Hospitals at secondary level and the Regional Referral Hospitals to National Referral Hospitals at tertiary level.
- 5.2. The health care coverage shall be sustained with at least 90% of the population living within 3 hour walking distance from a health facility (Out Reach Clinic, Basic Health Unit and District Hospital).
- 5.3. The primary health care shall also reach out to the communities through Out Reach Clinics, Village Health Workers, and other available modes of communication.
- 5.4. The Royal Government of Bhutan shall provide 100% nationwide access to a health care professional through technology-enabled solutions.
- 5.5. The District hospitals, as the secondary level health centre besides other functions, shall serve as the nodal referral centers for the Basic Health Units within their jurisdiction and to the adjoining Basic Health Units of other districts.

- 5.6. The Regional Referral hospitals, as the tertiary level health centre besides other functions, shall serve as the nodal referral centers for the District Hospitals and Basic Health Units within their jurisdiction and to the adjoining Basic Health Units of other districts.
- 5.7. Jigme Dorji Wangchuck National Referral Hospital, though autonomous shall provide technical backup services to Regional Referral Hospitals and District Hospitals.
- 5.8. Health facilities shall be supported by appropriate communication facilities and Advanced Life Support (ALS) ambulance with competent medical team.
- 5.9. Optimal utilization of health services available at all levels shall be ensured through institution of referral system; which shall act as a gate keeper to ensure effective and well organized referral and feedback mechanism between primary, secondary and tertiary care.
- 5.10. Ministry of Health shall institute strict Gate keeping system supported by good information and patient registration system at all the health facilities to proper utilize the health services.
- 5.11. Patient requiring life saving /specialized care not available within the country shall continue to be referred to designated referral centers abroad as per the National Referral Guideline.
- 5.12. Provision of standardized quality and required levels of health care services in all types of facilities in the country shall be ensured.
- 5.13. Health Facilities shall monitor quality of their services on an annual basis, and draw up Action Plan for quality improvement in priority areas.

- 5.14. All health infrastructures shall be of sustainable design and user-friendly thereby integrating disability, women, child and elderly friendly and other necessary features.
- 5.15. The Royal Government of Bhutan shall continue to provide accommodation facilities to the essential health service providers within the campus of health center.
- 5.16. The District authorities under the decentralization policy shall be responsible for management and maintenance of all health infrastructures in their respective Districts.

### 6. Health Human Resource

- 6.1. The Royal Government of Bhutan shall continue to accord priority for the development of appropriate health human resources.
- 6.2. Ministry of health shall device appropriate deployment and recruitment strategies to address the shortages of skilled health workers.
- 6.3. The Royal Government of Bhutan shall promote and strengthen existing linkages with the institutes and universities in the region and beyond where health professions can pursue their trainings and specialized courses in Health.
- 6.4. The Royal Government of Bhutan shall upgrade the existing health institutes, establish new health training institutes, nursing colleges; thereby making Bhutan the centre of excellence in producing quality and competent medical and health professionals to address the health human resource issues within the country and beyond.
- 6.5. The Royal Government of Bhutan shall continue to follow the Primary Health Care approach with primary health care workers at the primary level, general

practioners at the Districts and specialized professionals at the tertiary level.

- 6.6. Health Human Resource projection and deployment shall be based on epidemiological, demographic profile and evolving needs.
- 6.7. Ministry of Health shall institute appropriate incentives that can attract, retain, and change the behavior of medical and health professionals to perform productively and efficiently.
- 6.8. Only those medical and health professionals certified and recognized by the Bhutan Medical and Health Council (BMHC) shall be allowed to practice their profession in the country.
- 6.9. Village health workers shall be trained in order to sustain achievement of universal health coverage and to encourage community participation in the health care delivery system.

### 7. Health Research and Information

- 7.1. Comprehensive quality health information shall be generated, regularly updated and maintained through Centralised Health Management Information system (HMIS).
- 7.2. Digitized Health record and information system shall be instituted in all the health facilities for faster and effective health information generation to support decision making.
- 7.3. The national health research system shall be enhanced to provide an enabling structure to facilitate in conducting research that improves human health and supports evidence based decision making.

7.4. Any health related research shall comply with the ethical code of conduct as specified by the Research Ethical Board for Health.

### 8. Medicinal Products, Vaccines and Technologies

- 8.1. The Royal Government of Bhutan shall strive to provide the essential drugs to all the health centers with at least 90% of essential drugs available at any given time.
- 8.2. The National Drug Committee shall annually review the Essential Drug List (EDL) to continually standardize and promote rational use of drugs in the health centers.
- 8.3. The Royal Government of Bhutan shall continue the central procurement and distribution system of medical supplies.
- 8.4. Introduction of any new health technologies shall be allowed only after assessment and evaluation for its safety, efficacy, quality, indication and costeffectiveness by the Health Technology Assessment Panel.
- 8.5. Safety, effectiveness, and quality of essential medicines and vaccines shall be ensured through an efficient supply management system and promotion of rational drug use.
- 8.6. Donations of medicines and technologies shall conform to the specifications and standards of the Ministry of Health and authorized by Drug Regulatory Authority.
- 8.7. Bio-medical Engineering Services shall be strengthened in the country and be responsible for development of specifications of all medical equipments and devices. They shall be responsible for the maintenance and upkeep of all the medical equipments by using standard protocol.

8.8. Facility-based ownership for care and maintenance of medical equipment shall be mandated and institutionalized.

### 9. Health Financing

- 9.1. The state shall "provide free access to basic public health services in both modern and traditional medicines" as enshrined in the constitution.
- 9.2. The Royal Government of Bhutan shall continue to secure adequate budget for health care services to continue providing universal coverage to the Bhutanese citizens and ensure protection against catastrophic expenditure and impoverishment.
- 9.3. The Royal Government of Bhutan shall continue to pursue and sustain the universal health coverage achieved; by providing all Bhutanese citizens with access to equitable and quality basic health services including prevention, promotion, treatment and rehabilitation through the three-tiered health system with exclusion of non-essential health services in the context of maximizing population benefit of public expenditure on health.
- 9.4. Ministry of Health, using transparent and well defined criteria shall develop the list of the health care practices, procedures, technologies, pharmaceuticals and clinically ineffective or cost inefficient practices that are deemed to deliver less value or low health gain for their cost to be excluded from the list of basic health care services.
- 9.5. The Royal Government of Bhutan shall continue with the strategy to charge user fees for non-essential health care services, but not limited to private cabins, secondary and tertiary dental services.

- 9.6. Bhutan Health Trust Fund shall continue to be one of the sources of health financing to provide sustainable universal access to essential drugs and vaccines.
- 9.7. The Royal Government of Bhutan shall continue to explore alternative strategic options for efficient, affordable and sustainable financing of health care services.
- 9.8. Ministry of Health shall ensure to prioritize investment in more cost effective and cost beneficial health care interventions.
- 9.9. Ministry of Health shall explore and institute appropriate mechanisms suitable to Bhutanese context to ensure efficient utilization of health resources and maximize value for money
- 9.10. Ministry of health shall streamline the procurement of drugs, vaccines and equipment through proper regulation and governance thereby making appropriate changes in the procurement system to avoid unnecessary spending.
- 9.11. The Royal Government of Bhutan shall institute mechanisms to charge the patients bypassing the referral system through self referral to the regional and national referral hospitals and demanding advanced diagnostic medical services without clinical indication to rationalize use of health services.
- 9.12. Ministry of Health shall institute mechanisms for the rational use of medicine and advanced medical technologies for diagnostic purposes.
- 9.13. Health care services shall be provided to Non-Bhutanese on payment basis.
- 9.14. Ministry of Health shall explore innovative interventions to create awareness on health care cost to

the service providers and users through mechanisms such as institution of billing and Health Card system for citizens of Bhutan.

9.15. The Royal Government of Bhutan shall not make any commitments during trade negotiations with regard to health and health services in order to retain maximum flexibility for the government to adopt policy measures that guarantee the quality and equitable access to health services.

### 10. Leadership and Governance

### 10.1 Policy Setting

- a. Ministry of Health shall be responsible for the formulation of policies, programme designs, technical guidelines and directives to all the preventive, promotive, curative and rehabilitative health programmes and monitoring of standards and quality.
- b. Ministry of Health shall formulate policies and strategic plans based on the overall development philosophy of Gross National Happiness and decentralization policy of the government.
- c. Introduction of any new programme shall be based on the evolving needs and proper assessment by Ministry of Health.
- d. The participation of the private sector or foreign companies and individuals in the health sector shall not under any circumstances, lead to privatization of Public Health Services

### 10.2 Health Legislation and Regulation

a. Any health interventions not exclusively captured in the policy statements / all health interventions shall be carried out in compliance with the existing health related Royal Decree, Constitution of Bhutan, Acts and Regulations of Bhutan along with international and regional conventions, resolutions and treaties.

- b. A comprehensive regulatory system shall be instituted to regulate the quality, safety, equity and efficiency of health services. This regulatory system then shall apply to all the health care facilities and services in the country.
- c. Recruitment, deployment, training and termination of health professionals shall be in compliance with the relevant Acts and Regulations of the country.
- d. The Bhutan Medical and Health Council shall regulate all categories of medical and health professionals in Bhutan to safeguard human health from harmful medical and health practice.
- e. Drug Regulatory Authority shall safeguard the human and animal health against harm resulting from the spurious quality of medical products available in the kingdom.
- f. Health Care Providers shall respect the dignity of the individual at all times, including the need for informed consent as per international practice and national laws.
- g. Human organ and tissue transplantation shall be on voluntary bases with explicit consent of both the donors and recipient and shall comply with the national legal and ethical instruments.
- h. Until a National Law on Organ and Tissue transplant is in place, Ministry of Health shall institute a National Level Committee or an authority to oversee any issues on Human Organ and Tissue transplant.

### PART III: DISEASE CONTROL AND MEDICAL CARE

# **11.** Preventive, Promotive and Control Services

### **11.1 Communicable Diseases**

- a. Priority shall be accorded to cost-effective public health interventions in the prevention and control of diseases of known epidemic potential, highly pathogenic and emerging & re-emerging infectious diseases of national and international importance.
- b. The Royal Government of Bhutan as a signatory to the International Health Regulations 2005 (IHR) shall implement the revised IHR through multi-sectoral approach by liaising and collaborating with relevant national and international agencies.
- c. The public health laboratory and the centre for tropical and zoonotic diseases shall provide technical backup and scientific evidences in the prevention and control of rare diseases, known epidemic-prone diseases, and emerging infectious diseases of national and international public health significance.
- d. HIV/AIDS, Tuberculosis and Malaria prevalence shall be reduced at least to a level at which it no longer constitutes a public health problem through multi-sectoral and multi-disciplinary approach.

#### 11.2 Non-Communicable Diseases and Health Promotion.

a. Non-Communicable Disease (NCD) prevention strategy shall focus on addressing the impact of unhealthy dietary habits/life style/traditional practices on the health of Bhutanese people and their prevention and control through advocacy, risk surveillance and analysis rather than making disease specific interventions.

- b. Health promotion, disease prevention and health care services shall be strengthened and incorporated as a vital component in all relevant programmes.
- c. Appropriate measures shall be instituted to intensify health promotion interventions that address social determinants causing life style related diseases.
- d. Prevention, support and care services for alcoholism and associated mental disorders shall be promoted in collaboration with relevant stakeholders.
- e. National awareness on safety requirements shall be intensified through multi-sectoral collaboration to prevent and reduce the high incidence of mortality and morbidity associated with accidents.
- f. The Royal Government of Bhutan shall strive to contribute towards the national goal of food self sufficiency and security through effective enforcement of standards and regulations and shall endeavor to assure that foods are of good quality and safe for consumption.
- g. The Royal Government of Bhutan shall strive to reduce malnutrition of all types including reduction of micronutrient deficiency diseases through multi-sectoral approach.
- h. Safe and appropriate method of hazardous waste disposal shall be adopted to minimize the potential health risks.
- i. Initiatives to raise awareness on potential adverse effects of environmental pollution and contamination shall be emphasized.
- j. Center for Tropical and Zoonotic Diseases and National Vector-borne Diseases Control Program in collaboration

with National Environment Commission shall guide the government in making choice of pesticides use in public health.

- k. Provision of holistic health education in all educational institutions shall be promoted through multi-sectoral approach.
- 1. Ministry of Health shall establish awareness raising modalities to prevent occupational diseases and injuries at all workplaces.
- m. Healthy ageing shall be promoted through social communication and community involvement.
- n. Every individual shall keep themselves healthy and prevent disease by practicing healthy living measures.

#### 11.3 Maternal and Child Health

- a. Comprehensive quality maternal and child health care services shall be provided not limiting to family planning and promotion of institutional delivery.
- b. Free and equitable access to safe, quality and cost effective vaccines for all children and pregnant women to protect against vaccines-preventable diseases shall be provided.
- c. The introduction of new vaccines shall be done only after assessing the disease burden, public health impact, cost effectiveness of the vaccine, affordability and sustainability.
- d. Healthy child growth and development shall be promoted through advocating breast-feeding, appropriate nutrition, and Integrated Management of Neonatal and childhood diseases.

### 12. Medical Care

### **12.1 Traditional Medicines**

- a. The Royal Government of Bhutan shall continue to preserve and promote the traditional medicine system by effectively integrating it into the overall national health care delivery system.
- b. Focused efforts shall be directed towards making Bhutanese "So-wa-rigpa" the centre of excellence in providing quality traditional medical services including wellness center that is recognizable at an international level.
- c. The Institute of Traditional Medicine in collaboration with Tourism Council of Bhutan shall encourage and support the Bhutanese Spa and Resort industries to institute spa therapies with traditional medicinal practices "So wa rigpa" and spiritual healing.
- d. Identification, demarcation and protection of areas rich with medicinal products for care and management by relevant Dzongkhag Administration shall be instituted in conformity with Ministry of Agriculture and Forestry.

#### 12.2 Diagnostic and Curative Services

- a. The Ministry of Health shall ensure that different levels of health care facilities provide adequate and appropriate diagnostic and curative services.
- b. Use of e-Health and telemedicine shall be pursued as alternative and complementary methods to enhance access to quality diagnosis and care to the people in the periphery.
- c. All blood and its component shall be made available in adequate quantities to all those who would clinically require transfusion.

d. Ministry of Health shall ensure that all blood and blood products for transfusion are tested for HIV/AIDS, hepatitis, syphilis and others.

### 12.3 Emergency Health Services

- a. All health facilities shall institute appropriate system of care to deal with emergencies, disasters, epidemics and outbreaks.
- b. All health facilities shall provide a system of emergency for (a) disasters (b) epidemic outbreaks (c) Mass casualty (d) routine emergencies. The services shall be supported by appropriate transport facilities, safe health infrastructures and competent emergency medical teams.
- c. National emergency preparedness plans shall be maintained and appropriate resources provided at all levels to respond rapidly and effectively to all health related emergencies of national and international concerns.

### 12.4 Services for Special Needs Group

- a. Ministry of Health shall address the health services for special needs, vulnerable / at risk groups (such as elderly, physically and mentally disabled, alcoholic, drug addicts, adolescents, out of school population groups etc) and hard-to- reach populations (such as nomadic population groups).
- b. The Royal Government of Bhutan shall promote facilities and services which are disability friendly.
- c. Ministry of Health shall institute Bhutan specific strategies and mechanisms to address Geriatric problems by strengthening social values and encouraging community participation.

### PART IV: PARTNERSHIP IN HEALTH

Partnership in health shall be encouraged to address local health care needs and emerging public health problems through promoting community ownership, multi-sectoral and international collaboration and coordination.

### **13. Community Participation**

- 13.1. Active community participation and empowerment in the health care delivery system shall be encouraged to facilitate in achieving the universal health coverage especially to unreached rural population.
- 13.2. Measures shall be developed to ensure the local populations are better informed about life style, environmental and other health problems inorder to improve the health outcomes through community participation.

### 14. Multi-Sectoral Collaboration

- 14.1. All the sectors shall invest for health in their respective agencies and formulate policies and actions accordingly for overall health development. The sectors shall be accountable for the effects of their polices and actions on health.
- 14.2. The Royal Government of Bhutan shall ensure to facilitate delivery of quality and efficacious traditional medical plants and products in a sustainable manner.
- 14.3. Healthy Public policies shall be formulated to address the public health problems through multi-sectoral collaboration.
- 14.4. Inter and intra sectoral collaboration and coordination shall be emphasized to address National health issues.

- 14.5. Rural water supply and sanitation schemes shall be intensified and decentralized to Districts and Gewogs with active community and multi-sectoral participation to enhance universal access to safe drinking water and sanitation facilities.
- 14.6. Linkage shall be strengthened between Ministry of Health and other stakeholders outside health with regard to urban water supply and sanitation.
- 14.7. Prediction, Preparedness and Mitigation measures to address adverse effects of climate change on health shall be put in place through comprehensive multisectoral plan /emergency preparedness and public education on behavioral adaptations.
- 14.8. Impact assessment of mega projects including Foreign Direct Investments in the country shall be conducted prior to their establishment to screen the risk and impact on human health.
- 14.9. Inter and intra sectoral collaboration and coordination shall be emphasized to support gender responsive plans and programs.

### 15. Public-Private Partnerships

- 15.1. Strategic mechanisms for participation of the private sector in the risk free and feasible areas in health shall be explored with necessary regulations in place.
- 15.2. Private sector and Foreign Direct Investments shall be allowed to provide high-end and specialized medical diagnostic and treatment services in compliance with the National standards and Laws.
- 15.3. Public Private Partnership shall be encouraged to establish Nursing Colleges and other Allied Health Training Institutions in compliance with the National Standards and Laws.

15.4. Ministry of Health shall continue to outsource nonclinical and selective diagnostic services. L

### **16. International Partnerships**

16.1. The Royal Government of Bhutan shall take active part in health development through continued engagement with international organizations.

#### Bibliography

- 1. The Constitution of the Kingdom of Bhutan (2008), RGoB
- 2. National Drug Policy (2007) Ministry of Health, RGoB
- 3. Organizational Development Exercise (Sept. 2007) PPD, Ministry of Health, RGoB
- 4. Medical and Health Council Act (2002), Ministry of Health, RGoB
- 5. Bhutan Medical and Health Council Regulation (2005), Ministry of Health, RGoB
- 6. Annual Health Bulletins (2008&2009), BHMIS, Ministry of Health, RGoB
- 7. The Medicines Act of the Kingdom of Bhutan (2003), Ministry of Health, RGoB
- 8. Guideline for Infection Control and Health Waste Management in Health Facilities (Third Edition 2006), DMS, Ministry of Health, RGoB
- 9. National Guideline for Patient Referral Outside Bhutan (2008), National Referral Committee, JDWNRH, Ministry of Health, RGoB
- 10. Draft National Forest Policy of Bhutan , (Aug 2009), Ministry of Agriculture, RGoB
- 11. Bhutan Population Policy, Goals and Strategies, (2009), Gross National Happiness Commission, RGoB
- 12. Draft National Human Resource Development Policy of the Kingdom of Bhutan (2009), Ministry of Labour and Human Resources, RGoB
- 13. Bhutan Situation Analysis Population and Development (2009), Gross National Happiness Commission – UNFPA, RGoB
- 14. National Blood Policy Bhutan (1st Edition 2007), Ministry of Health, RGoB
- 15. Rural Water Supply and Sanitation Foundation for Health, Productivity and Well – being in Rural Areas of Bhutan, RWSS

Sector Policy (Dec 2002), Ministry of Health and Education, RGoB

- 16. National Environment Protection Act of Bhutan (2007), National Environment Commission, RGoB
- 17. On the Trail of the National Women's Association of Bhutan (2008), National Women's Association of Bhutan, RGoB
- 18. National Health Act B.E.2550 (2007), The Kingdom of Thailand.
- 19. Bye Laws Staff Welfare Scheme, Health Services, Ministry of Health, RGoB
- 20. Strategy for Gross National Happiness (SGNH), GNHC, RGoB
- 21. WHO Country Cooperation Strategy for the Kingdom of Bhutan 2009-2013 (April 2009)), World Health Organization, Bhutan
- 22. National Health Policy (2002), India
- 23. Bhutan 2020, A Vision for Peace, Prosperity and Happiness (1999), Planning Commission, RGoB
- 24. The Lancet Series Volume 373, Issue 9663, Trade in Health Related Services (14th Feb 2009)
- 25. Revised National Health Policy (Sept, 2004) Federal Ministry of Health Abuja, Federal Republic of Nigeria.
- 26. Draft National Health Policy (Oct, 2003) Ministry of Health, The United Republic of Tanzania
- 27. Draft National Health Policy (Review 2005), Division of Health Planning and Republic of Information, Republic of Seycelles.
- 28. National Health Policy 2006-2015 AND Strategic Plan 2006-2010, Ministry of Health, Jamaica.
- 29. Labour and Employment Act of Bhutan (2007), Ministry of Labour and Human Resources, RGoB
- 30. National Health Policy (Oct 2002) Ministry of Health and Sanitation, Republic of Sierra Leone.
- 31. National Health Policy (2007) Federal Ministry of Health, Sudan Government of National Unity.
- 32. Written replies of RGoB to the List of Issues prepared by the Committee on the Elimination of all Forms of Discrimination

Against Women Contained in Document No. CEDAW/C/ BTN/Q/7 DATED 12 AUGUST 2008 (July 2009), National Children and Women Commission, RGoB.

- 33. Second Periodic Report of the Kingdom of Bhutan to the Committee on the Right of the Child (2007), National Children and Women Commission, RGoB.
- 34. Study of Gender Seterotypes and Women's Political Participation (Women in Governance) (2008), NCWC, RGoB
- 35. Draft Transport Policy ( ), Ministry of Information and Communication, RGoB
- 36. Protocol for Policy Formulation in the Royal Government of Bhutan, GNHC, RGoB
- 37. Improving Health Service Delivery in Developing Countries, The World Bank, Washington, DC
- Health Master Plan Summary, Healthy & Shining Island in the 21ST Century (2007 – 2016) Ministry of Healthcare & Nutrition, Democratic Socialist Republic of Sri Lanka
- 39. Health 21, The health for all policy framework for the WHO European Region ( ), World Health Organization, Regional Office for Europe, Copenhagen.
- 40. Draft National Health Policy ... An Update (Aug, 2008) Ministry of Health and Family Welfare, Govt of the Republic of Bangladesh.
- 41. Draft Economic Development Policy of the Kingdom of Bhutan (2009), Ministry of Economic Affairs, RgoB
- 42. Ministry of Health. (2011). Annual Health Bulletin. Thimphu: Ministry of Health, Bhutan.
- 43. Office of the Census Commissioner. (2005). Population and Housing Census of Bhutan. Thimphu: Royal Government of Bhutan.
- 44. Policy and Planning Division. (2009). Health Expenditure Review . Thimphu: Ministry of Health.
- 45. V.selvaraju, Wangmo, S., Wangchuk, U., & Dendup, T. (2009-10). Bhutan National Health Accounts. Thimphu: Policy and Planning Division.