CHAPTER 2: HEALTH

Efforts to establish modern medical facilities in Bhutan were begun in 1962.The Department of Health Services now has wide spread network of Health Facilities across the country, covering around 90%of the population. Institutional health facilities were earlier concentrated in the urban centers, but today the emphasis has shifted to the rural areas where the majority of the population live. Health care is delivered in totally integrated system through an organized structure place at the National, Regional and District Hospitals serving as Referral Centres follow by the Basic Health Units (BHUs) at the community level. Basic Health Units (BHUs) serve remote areas staffed by well trained paramedical personal are equipped to treat minor ailments and advise on preventive measures to avoid the spread of communicable diseases. Extended Health Centres (Outreach Clinics) and Mobile Health units support these BHUs.

There are also numbers of special health programs in Bhutan administered by the department of Health. These cover child Health and Immunization program, Reproductive Health Program, Acute Respiratory Infection (AR) Program, National Control of Diarrhoeal Diseases Program NCDDP), National STD/AIDS Control Program, Rural Water Supply & Sanitation Program (RWSS), Village Health Workers Program (VHW), National Leprosy Program, National Malaria Control Program (NMCP) and Mental Health Program. As of 2001, there were 29 hospitals, 168 BHUs and over 445 Outreach Clinics manned by over 2000 health personnel of different categories.

Beside the allopathic system, there exists a well established network of indigenous Medical Facilities under the institute of Traditional Medical Services that has basically three functions, Medical services for out patients; collection and manufacturing of indigenous medicines; and research and training of the Physicians (Drungtsho) and Compounders (Menpas). As of 2001, there were 13 Dzongkhag Level Indigenous Medical Units attached to Dzongkhag Hospital, each run by Drungtsho or Menpas. There were 31 Physicians (Drungtsho) and 17 Menpas working in indigenous medical service units.

The main indicators of the health status of the population are morbidity and mortality. Morbidity refers to the type of illness people suffer from, while mortality relates to death rates and causes of death. The Health Department has been conducting the National Health Surveys every five years and this is the source for mortality statistics. Over all level of mortality have been estimated from the Demographic Sample Survey, but causes of death data have not yet become available. Efforts are under way to improve the vital registration system. Morbidity data are obtained from the patients recorded in Hospital and Basic Health Units whose data are presented in the annual publication of Health Department the “Annual Health Bulletins”. The available morbidity statistics are based on patients treated by hospitals, basic health units and dispensaries.

General health conditions in Bhutan are affected by low nutrition intake, poor sanitation, high prevalence of parasitic infections and contagious diseases. Acute Respiratory Infection continues to dominate entire morbidity situation. There is also a rising condition of the non-communicable diseases.