# CHAPTER 2 HEALTH

Since the time when the health care facilities in Bhutan were first established in 1962, there has been continuous efforts in improving the modern medical facilities. The Ministry of Health has now a wide spread network of health facilities, covering around 90% of the total population. Institutional health facilities were earlier concentrated in the urban centres, but today the emphasis has shifted to the rural areas where the majority of the population live.

Health Care is delivered in a totally integrated system through an organized structure placed at the National, Regional and Dzongkhag hospitals serving as Referral Centers followed by the Basic Health Units (BHUs) at the Community Level. BHUs serve remote areas staffed by well-trained paramedical personnel who are equipped to treat minor ailments and advice on preventive measures to avoid the spread of communicable diseases. Extended Health Centers, Out Reach Clinics (ORCs) and Mobile Health Units support these BHUs.

There are also numbers of special health programs in Bhutan administered by the Ministry of Health. These cover Child Health and Immunization Program, Reproductive Health Program, Acute Respiratory Infection (ARI) Program, National Control of Diarrhoeal Disease 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 2007, there were 29 hospitals, 178 BHUs and over 519 ORCs spread over 205 Gewogs providing primary health care services. Besides 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 (Drungtso) and Compounders (Menpas).

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 Department of Public Health has been conducting the National Health Surveys every five years, which is the source for mortality statistics. Overall level of mortality have been estimated from the Demographic Sample Surveys, 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’ records in hospitals and BHUs whose data are presented in the annual publication “Annual Health Bulletin”, published by Ministry of Health. The available morbidity statistics are based on patients treated by hospitals, BHUs and ORCs.

