



National Health Policy
Final Draft

Ministry of Health

Foreword:

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PART I: INTRODUCTION

I.I. 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) of a health service delivery point (hospital, Basic Health Unit, Outreach clinic)*). 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. Further, Bhutan declared Universal Childhood Immunization in 1991 and has sustained immunization coverage of above 90 percent. Similarly as per 2005 data, access to safe drinking water and basic sanitation is maintained at over 82.5 percent and 90.8 percent respectively. 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 endeavor to provide free access to basic public health care services both in 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 it spends around 7.4 to 11.4% of total government expenditure on health. As a proportion of Gross Domestic Product (GDP), public health spending alone (not counting private health expenditure) constitutes approximately 4.1%, which is one of the highest in the South Asia region.

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 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.

I.II. Vision and Mission

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.

Mission

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

I.III 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.

I.IV. 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 like the Economic Development Policy 2010, Foreign Direct Investment Policy, and Regulations shall complement the implementation of the National Health Policy. This shall be done through a synergistic approach and harmonized action among the relevant sectors and stakeholders.

The realization of in 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.

The National Health Policy is a living document and may be updated if deemed necessary to accommodate the evolving needs and the change in socio-economic scenario of Bhutan.

PART II: HEALTH SYSTEM

Bhutan shall provide quality integrated modern and traditional health care services to all Bhutanese citizens at all levels of health care system. The health care delivery shall continue to be structured into a four -tiered health system with the hierarchy ascending from Out Reach Clinic to Basic Health Units in gewogs to District Hospitals to the Regional Referral Hospitals and National Referral Hospitals at the center.

II.I Service delivery

1. The Primary Health Care approach with appropriate technical backup with secondary and tertiary care services shall be the guiding principle of Health service delivery.
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).
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.
4. Bhutan shall provide 100% nationwide access to a health care professional through technology-enabled solutions.
5. The District hospitals, as the secondary level health centre, 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.
6. The Regional Referral hospitals, as the tertiary level health centre, 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.
7. Jigme Dorji Wangchuck National Referral Hospital, though autonomous shall provide technical backup services to Regional Referral Hospitals and District Hospitals.
8. Health facilities shall be supported by appropriate communication facilities and Advanced Life Support (ALS) ambulance with competent medical team.
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.

10. Patient requiring life saving /specialized care not available within the country shall continue to be referred to designated referral centers abroad only if approved by the National Referral Committee.
11. The National Referral Mechanisms shall not be applicable to patients who have complicated or life threatening conditions that needs immediate evacuation to seek appropriate specialist care for timely interventions to the designated referral centers within the country or abroad.
12. Provision of standardized quality and required levels of health care services in different tiers of facilities shall be ensured.
13. All health infrastructures shall be of sustainable design and user friendly by integrating environmental and earth quake resilience features, health principles including disability, women and child friendliness.
14. The Royal Government of Bhutan shall provide accommodation facilities to the essential health service providers within the campus of health center.
15. The District authorities under the decentralization policy shall be responsible management and maintenance of all health infrastructures in their respective Districts.

II.II Health Human Resource

1. The Royal Government of Bhutan shall continue to accord priority for the development of appropriate health human resources.
2. Ministry of health shall device appropriate deployment and recruitment strategies to address the shortages of skilled health workers.
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.
4. The Royal Government of Bhutan shall institute long term health human resource strategies like establishment of new health training institutes (Bhutan Institute of Medical Sciences) and up gradation of the existing health institutes to address the health human resource issues.
5. 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. Health Human Resource projection and deployment shall be based on epidemiological, demographic profile and evolving needs.
7. A performance-based incentive mechanism shall be put in place to retain qualified and essential (trained in specialized services) health professional in the system.

8. Only those medical practitioners certified and recognized by the Bhutan Medical and Health Council (BMHC), shall be allowed to practice their profession in the country.
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.

II.III Health Research and Information

1. Centralised Health Management Information system shall be instituted in collaboration with National Statistical Bureau that provides comprehensive quality health information.
2. Information Communication Technology (ICT) shall be optimally harnessed and utilized as an empowerment tool for all kinds of health information storage and generation to support health research and information system.
3. The national health research system shall be enhanced to provide an enabling structure to facilitate in conducting research that improves human health and wellbeing in Bhutan.
4. Health research shall be encouraged to assist evidence based decisions making and health Policy interventions.
5. Any health related research shall comply with the ethical code of conduct endorsed by the Research Ethical Board.

II.IV Medicinal products, vaccines and technologies

1. The Royal Government of Bhutan shall strive to provide 100% of essential drugs in all the health centers with at least 90% of essential drugs available at any given time.
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.
3. The Royal Government of Bhutan shall continue the central procurement and distribution system of medical supplies.
4. Introduction of any new health technologies shall be allowed only after assessment and evaluation for its safety, efficacy, quality, indication and cost-effectiveness by Health Technology Assessment Panel.
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.
6. Donations of medicines and technologies shall conform to the specifications and standards of the Ministry of Health and authorized by Drug Regulatory Authority.
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. Facility-based ownership for care and maintenance of medical equipment shall be mandated and institutionalized.

II.V Health Financing

1. The state shall “provide free access to basic public health services in both modern and traditional medicines” as the constitutional obligation.
2. The Royal Government of Bhutan shall continue to explore alternative strategic options for sustainable health financing.
3. 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.
4. The Royal Government of Bhutan shall institute mechanisms to charge patients for unprescribed advanced diagnostic medical services.
5. Mechanisms shall be instituted for the rational use of advanced medical technologies for diagnostic purposes.
6. Health care services shall be provided to Non-Bhutanese Nationals on payment basis except for emergency services.
7. 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.
8. The Royal Government of Bhutan shall secure adequate budget for health sector (At least 10% of the five year plan budgets) to continue providing universal quality health care to the Bhutanese citizens and ensure financial protection against impoverishment due to cost of catastrophic illness.
9. Ministry of Health shall define the levels of health care services permissible for private and Foreign Direct Investments.
10. The Royal Government of Bhutan shall design appropriate regulatory framework to regulate Foreign Direct Investment and other private sector engagement in health services.
11. The 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 Health Card system.
12. 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.

II.VI Leadership and Governance

1. Policy setting

- a. The 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. The Ministry of Health shall formulate its 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.

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 safety, equity and efficiency of health services provided/financed by both Public and Private sectors.
- c. Private sector engagement in health, including private academic and research institutions, shall be endorsed and regulated by the Ministry of Health, Bhutan in compliance with the regulatory system. (In consultation with RUB)
- d. Recruitment, Deployment, Training and Termination of health professionals shall be in compliance with the Bhutan Civil Service legislations.(To be moved to Health HR)
- e. The Bhutan Medical and Health Council shall regulate the practice of medical and health professionals in Bhutan.(II.II sec 8 duplicates)
- f. Health service and patient care will 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 through voluntary donation with explicit consent of both the donors and recipient shall be accepted subsequent to/ after/once fulfilling the requirements of the legal and ethical instruments

The process leading from donation to transplant is complex and is influenced by many factors, such as legislation, training, public attitude, and cost. Hence, necessary legal instruments and standard operating procedure shall be developed.

PART III: DISEASE CONTROL AND MEDICAL CARE

III.I Preventive, Promotive and Control Services

1. Communicable Diseases

- a. Priority shall be given to emphasize cost-effective public health interventions in the prevention and control of diseases of known epidemic potential and other communicable diseases of national and regional importance.
- b. The Ministry of Health shall establish a National Focal Point **for the revised** International Health Regulations to facilitate its implementation 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 significances.
- 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.

2. Non-communicable diseases and health promotion.

- a. Non-Communicable Disease (NCD) prevention strategy shall focus on the identification of the major common risk factors and their prevention and control through 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 patients suffering from alcoholism (only?) and mental disorders shall be promoted in collaboration with relevant stakeholders.**
- e. **National awareness on safety requirements (for occupation health safety/traffic??) shall be intensified to prevent and reduce the high incidence of mortality and morbidity associated with injuries.**

- f. The Royal Government of Bhutan shall strive to contribute towards the national goal of food (and nutrition security) self sufficiency 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 multisectoral 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 (further relevant control actions/mitigation).
- j. Center for Tropical and Zoonotic Diseases and National Vector-borne Diseases Control Program in collaboration with National Environment Commission (relevant agency or MoAF) 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.
- l. Ministry of Health shall establish awareness raising modalities to prevent occupational diseases and injuries at all workplaces.

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.

Provision of vaccines for rare diseases on payment mechanism (Against the principle of health care for all.....new provision)

- d. Healthy child growth and development shall be promoted through advocating breast feeding, appropriate nutrition, and Integrated Management of Neonatal and childhood diseases.

III.II Medical Care

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. Identification and demarcation of areas rich with medicinal **products** (herbal resources) for care and management by relevant Dzongkhag Administration shall be instituted in conformity with Ministry of Agriculture and **Forestry**.
- d. The Royal Government of Bhutan shall explore the feasibility of allowing alternative **medicines forms** such as homeopathy, aryuvedic and unani.

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.

3. Emergency Health Services

- a. All health facilities shall institute appropriate system of care to deal with in case of 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.

4. Services for special Needs group

- a. The Royal Government of Bhutan shall promote facilities and services which are easily accessible to people with disabilities.
- b. Healthy ageing shall be promoted through social communication and community involvement.

(Special clause to be stated for age-old care)

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.

IV.I: Community participation

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.
2. Measures shall be developed to ensure the local populations are better informed about life style, environmental and other health problems in order to improve the health outcomes through community participation.

IV.II Multisectoral collaboration

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 policies and actions on health.
2. The Royal Government of Bhutan shall ensure to facilitate delivery of quality and efficacious traditional medical plants and products in a sustainable manner.
3. Healthy Public policies shall be formulated to address the public health problems through multi-sectoral collaboration.
4. Inter and intra sectoral collaboration and coordination shall be emphasized to address National health issues.
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.

6. Linkage shall be strengthened between Ministry of Health and other stakeholders outside health with regard to urban water supply and sanitation.
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.
8. Impact assessment of mega projects including FDIs in the country shall be conducted prior to their establishment to screen the risk and impact on human health.

IV.III. Public-private partnerships

1. Strategic mechanisms for participation of the private sector in financing and provision of health services shall be explored with necessary regulations in place and strict enforcement.

IV.IV: International partnerships

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

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