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World Health
Organization

Evaluation of WHO contribution in Bhutan (2020-2024)

Executive summary

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Cover photo description: A woman inspects bottled water for physical contamination in Bhutan, part of the Codex Trust Fund food-safety project involving Bhutan, India and Nepal (11 August 2023). © WHO / Sue Price

Executive summary

Introduction

Independent evaluations of the World Health Organization (WHO) contribution at the country level are conducted in line with the WHO Evaluation Policy (2018) and the implementation framework of WHO Evaluation Policy. The World Health Organization (WHO) commissioned this evaluation to assess the contribution of WHO to Bhutan over the period 2020 to 2024 in pursuit of the planned outcomes of the WHO Country Cooperation Strategy (CCS), Bhutan, 2020–2025. The evaluation provides accountability for WHO's contributions to national health outcomes and learning to inform the development of the new CCS for 2026–2030, which was conducted in parallel with this assessment. The evaluation was carried out between January 2025 and April 2025 by independent consultants.

Evaluation object

The object of this evaluation was WHO's contribution to progress towards the planned outcomes of the CCS 2020–2025 and related biennial work plans achieved, using input from all three levels of the Organization – country office, South-East Asia Regional Office and headquarters. The strategic priorities pursued, the intended outcomes and the financial expenditures during the evaluation period were part of the object of the evaluation. For the biennia 2020–2021, 2022–2023 and for 2024–2025 up to November 2024, WHO invested US\$ 21.3 million to support the health sector in Bhutan, with the main areas of expenditure being Universal Health Coverage at US\$ 7.3 million (34 percent) and Outbreak, Crisis and Response at US\$ 6.7 million (32 percent).

Evaluation objectives and intended audience

The objectives of the evaluation were to assess WHO's contributions to Bhutan's health goals against the CCS 2020–2025 and biennial work plans; analyse the coherence of WHO's strategy and plans with national priorities; review WHO's technical assistance and partnerships; and propose strategic shifts to align with Bhutan's 13th Five-Year Plan (2024–2029) (FYP13). The evaluation findings are intended to inform the development of the new CCS for 2026–2030 in consultation with key stakeholders and to identify opportunities for organizational learning. Bridging this evaluation and the development of the new CCS, a new Theory of Change (ToC) for WHO in Bhutan was drafted for finalization in discussion with the government.

The evaluation is both summative in assessing WHO's accomplishments since 2020 and formative in identifying lessons learned to improve WHO's ongoing and future initiatives in Bhutan. The intended users of the evaluation are the Who country and regional offices and headquarters as well as the Royal Government of Bhutan, especially the Ministry of Health, health care providers, the UN Country Team, civil society organizations (CSOs) and multilateral donors.

Evaluation methodology

The evaluation employed a participatory, learning-oriented approach that was used focusing on utilization of findings. A theory of change was reconstructed to test assumptions and pathways to expected results. Data collection methods included:

- a desk review examining over 100 documents, including the CCS 2020–2025, WHO workplans, national health policies, regional evaluation reports, strategic frameworks from WHO, UN and Bhutan's government, third party reports and research papers on health in Bhutan;
- quantitative analysis reviewing financial data from the WHO Bhutan Country Office and headquarters alongside health outcome data from national sources; and
- key informant interviews (KIIs) conducted with 50 participants (61% male and 39% female) across WHO's three levels and various Bhutanese stakeholders, including government ministries, academia, development banks, UN agencies and CSOs.

The evaluation employed WHO's standard evaluation criteria (in line with the revised OECD Development Assistance Committee (DAC) criteria) of relevance, coherence, effectiveness, efficiency and sustainability, with an additional consolidation of evaluation questions for equity into an equity criterion added at the reporting stage.

Constraints faced by the evaluation included: a planned CCS mid-term review, which would have provided valuable insights for 2020–2021, could not be conducted due to COVID-19 disruptions; and available documentation was largely descriptive and self-assessed, requiring reliance on secondary sources and qualitative interviews for triangulation. Mitigation measures included third party documentation and research that partially substituted for missing data. Further, additional KIIs at WHO headquarters, while outside the initial plan, were incorporated to enhance understanding of centrally driven processes relevant to the WHO Bhutan Country Office.

Key findings

A summary of key findings corresponding to each evaluation criterion is presented below:

Relevance

WHO is strongly aligned with Bhutan's national health priorities, including FYPs 12 and 13. WHO plays a leading role in developing national action plans and strategies across infectious disease control, noncommunicable diseases (NCDs), emergency response, health financing and human resources development. The Organization has kept pace well with changing circumstances and has been a leader in the collection and analysis of health data, demonstrating a good understanding of the threats facing the health system. WHO has adapted its approach to the changing national financial context, shifting its support for Bhutan in the latter's analysis and planning for its health budget, resourcing and moving to a more strategic level of health financing. The country office has increased communication about its

work through a Media & Communication strategy mainly focusing on social media and holds an annual workshop with local journalists.

Coherence

There is a high degree of coherence between the Bhutan CCS 2020–2025 and key strategic plans and policy documents, namely GPW13 at the international level and Bhutan's FYP12 at national level, with WHO South-East Asia Regional Office Regional Flagship programmes strengthening the coherence of health systems development across the region. WHO participation with the UN Country Team has improved, with WHO playing an active role in developing the UNSDCF 2024–2028 and engaging in relevant UN outcome groups. WHO works very closely with the Ministry of Health by providing technical support in policy development and funding for training, with a unique role in adapting health guidelines into national policy. The country office's location within the Ministry of Health facilities is efficient and allows close collaboration. Stakeholders recognize that addressing health determinants, nutrition, education and environmental health requires collaboration between government and non-government actors, with potential for WHO to strengthen its convening role.

Effectiveness

WHO has supported the government in achieving health goals in many areas, including COVID-19 response, vaccination, disease eradication, strengthening primary health care, mental health, emergency preparedness and in expanding academic training for health professionals. The Ministry of Health greatly appreciates WHO's technical support from country, regional and global levels, with the Regional Office support providing impartial perspective and supplementing country office capacity. During the COVID-19 pandemic, WHO provided strong technical and financial support, working as an honest broker with the Ministry of Health to help coordinate partners. The Service with Care and Compassion Initiative represents an innovative contribution to NCD management through primary health care teams, though challenges remain including inadequate monitoring mechanisms and funding shortages. WHO has also worked innovatively with the monastic sector, developing the Dratshang Health Coordinators' Guide on healthy lifestyles with the Zhung Dratshang and the Ministry of Health.

Efficiency

WHO's targeting of hypertension and diabetes as underlying causes of NCDs is a best-value, strategic and potentially high-impact intervention. WHO has provided significant support to strengthen health system digitization and integrated systems for better data-sharing, interoperability and joint monitoring across disease programmes through the electronic Patient Information System (ePIS). Substantial funds were mobilized for the pandemic response and subsequently from the Pandemic Funds for the One Health approach, with WHO supporting the Ministry of Health in developing a proposal that resulted in a US\$ 4.9 million award. However, the approval of over 100 Direct Financial Cooperation (DFC) grants by the country office in 2024 – many of which were of small amounts (US\$ 10 000–20 000) – highlights the need to further prioritize and streamline funding mechanisms in order to make them more efficient.

Sustainability

WHO's support has contributed to important and nationally owned gains in Bhutan's health system capacity. WHO has supported a field epidemiology training programme and secured pandemic funds to reinforce surveillance, laboratory capacity and human resources, with IHR conformity in Bhutan drawing on regional initiatives like the Delhi Declaration on Emergency Preparedness. While the agenda for health system strengthening is fully owned by the government, there may be potential for WHO to provide additional support to the coordination of delivery against the complex health challenges the country faces. Bhutan has retained rural health workers through support to more effective staffing policies, secure employment packages, reliable resources, transparent Civil Service rules and educational collaboration. However, the country office is conscious that maintaining health systems capacity gains will be challenging due to reducing health budgets and the exodus of skilled health workers, with WHO's own contribution to health system capacity also at risk because of decreasing country office budgets.

Equity

WHO played a lead role in the 2023 National Health Survey, which consolidated results from 14 survey instruments, providing evidence, including about vulnerable populations. WHO has also supported government programmes to address diseases disproportionately affecting vulnerable people including on tuberculosis, NCDs and reproductive health. WHO has implemented toolkits on gender, equity and human rights and Water and Sanitation for Health Facility Improvement Tool (WASH FIT) in Bhutan, providing inclusive hand washing and drinking water stations to all hospitals and training health workers across 20 districts. However, WHO needs to create a deeper analysis of vulnerabilities and pay greater attention to gender equality in its programming, which have been largely absent.

Key challenges facing Bhutan

In support of the development of the new WHO Bhutan CCS, three main challenges to Bhutan's health and well-being were documented: **NCDs**: Rising risk factors including tobacco use, alcohol abuse, poor nutrition and physical inactivity are increasing premature deaths and worsening mental health; **Human resources for health**: Severe shortages of skilled health personnel at all levels, with significant risk from brain drain to developing countries; and **Health financing**: Bhutan's free health care system faces sustainability challenges due to constrained national funds and reduced international aid.

Conclusions

The evaluation conclusions grouped by evaluation criteria are:

Relevance. WHO's strategic priorities demonstrate strong alignment with Bhutan's national health priorities and Five-Year Plans. The Organization has established itself as a long-term, reliable partner, characterized by frequent, catalytic interactions with the Ministry of Health and other health institutions. WHO has been effective in bringing health-related knowledge, expertise, standards and treatment protocols to Bhutan. WHO has tracked Bhutan's evolving health needs well and adapted its approach accordingly. With Bhutan's graduation to Low- and Middle- Income Country (LMIC) status, WHO must strengthen its focus on the three key challenges listed above.

Coherence. WHO's work demonstrates strong coherence with global and regional frameworks and national plans. Effective collaboration exists with UN partners on various initiatives. The Organization has an opportunity to further strengthen its convening role to coordinate stakeholders across sectors, an essential step in addressing the evolving health landscape, particularly the shifting focus from infectious diseases to NCDs. This will require further strengthening of innovative, cross-sectoral partnerships and coordination mechanisms.

Effectiveness. Through its support, WHO has strengthened Bhutan's health system, particularly in disease elimination, NCD management and emergency preparedness. The Service with Care and Compassion Initiative represents a successful adaptation of WHO's package of essential (PEN) interventions for NCDs. During COVID-19, WHO provided critical technical and financial support (US\$ 7 million).

Efficiency. WHO has successfully supported digital health integration and mobilized resources for specific initiatives (US\$ 4.95 million for One Health, US\$ 2.5 million for TB/HIV programmes). Regional technical and financial resources have been used effectively. To enhance strategic impact and operational efficiency, the management of DFCs could benefit from a more streamlined approach consolidating funds into fewer, larger allocations. This would help reduce administrative burden for country office staff, enabling them to dedicate more time to higher value functions such as performance assessment, learning and resource mobilization.

Sustainability. As external assistance decreases, WHO's modest financial resources for Bhutan have become increasingly important to the government. Thus, there is a need for WHO to strategically leverage its financial support alongside its technical expertise to maximize impact and reinforce its role. While WHO's investments in capacity development are extensive and valued, there is a clear need to better demonstrate their effectiveness and value for money. Developing more comprehensive business cases will also support strategic planning and prioritization of interventions aligned with national priorities and reduced WHO financial resources, while informing the next CCS and future resource allocation decisions. Enhancing monitoring and evaluation systems – including the development of tools by headquarters and WHO South-East Asia Regional Office to assess WHO's performance in its core roles – will be critical for improving accountability, informing strategic decision-making and strengthening the case for sustained financial support.

Equity. While WHO has made important contributions to advancing gender equity and inclusion in Bhutan through its leadership in various programmes, its overall performance on gender, equity and human rights has been mixed, with the CCS 2020–2025 lacking appropriate metrics to address the related issues. Moving forward, there is an opportunity for WHO to strengthen this area by integrating more robust vulnerability analyses and systematically mainstreaming gender, equity and human rights across all health programmes.

Recommendations

The following recommendations are offered for consideration by the WHO country and regional offices and headquarters. Recommendation 1 addresses *what* WHO should focus on, as an input to the parallel development of the new CCS for 2026–2030. The remaining recommendations address *how* WHO undertakes its work in Bhutan.

Recommendation 1: Ensure continuity between CCS 2020–2025 and CCS 2026–2030

The Bhutan Country Office should ensure continuity of WHO’s long-term, strategic interventions by:

- 1.1 Focusing on NCD prevention and control, strengthening primary health care (PHC) via the Service with Care and Compassion Initiative (SCCI) approach, scaling up healthy lifestyle and mental health awareness campaigns, advancing the 2021 National Suicide Prevention Strategy and helping to ensure that the NCD Multi-Sector Action Plan II is activated and well-coordinated;
- 1.2 Continuing and expanding technical support to Bhutan in its efforts to eliminate malaria and cervical cancer and reduce the incidence of HIV and sexually transmitted infections;
- 1.3 Addressing the lack of guidelines, reporting, staffing and funding for NTDs and expanding telemedicine-based health communication and consultations; and
- 1.4 Closing the gaps in Bhutan’s emergency response capacity – particularly related to International Health Regulation (IHR) core capacities – by building on the results of the ongoing Joint External Evaluation (JEE) and developing a new National Action Plan for Health Security.

Recommendation 2: Strengthen cooperation and partnership to address Bhutan’s key health challenges

The Bhutan Country Office should:

- 2.1 Leverage its convening power and further strengthen collective, multisector coordination in addressing the drivers of NCD, in alignment with FYP13 and in close partnership with the government, UN partners and the UN Resident Coordinator. This platform could facilitate regular data-sharing and analysis of local and international good practices, formulate integrated strategies for NCDs, health communication and disease prevention, and also serve as a mechanism for stakeholder alignment and resource mobilization.
- 2.2 Continue supporting efforts by the Ministry of Health to address health workforce shortages and retention challenges through sustained technical engagements and policy advice.

- 2.3** Engage with Multilateral Development Banks and UN agencies to formulate strategies for increasing external health financing support.
- 2.4** Further strengthen its strategic focus by reducing the number of DFCs, targeting resources to priority interventions and releasing WHO staff time for strategic planning, monitoring and evaluation – while continuing the practice of using the majority of its resources for the strategic priorities and reserving a percentage for unplanned needs.
- 2.5** Strengthen partnerships with monastic institutions and traditional medicine practitioners to broaden community-level health promotion and public communication on healthy living.

WHO South-East Asia Regional Office and WHO headquarters should:

- 2.6** Support the Bhutan Country Office in enhancing its convening role through technical assistance, tools and best practices that facilitate effective cross-sectoral collaboration.
- 2.7** Explore the creation of a regional coalition of countries facing similar human resource challenges to Bhutan, providing a platform for dialogue and shared learning among officials and advisers.
- 2.8** Provide technical guidance to the Bhutan Country Office on accessing innovative financing sources, including Multi-Partner Trust Funds such as Health4Life and the Health Impact Investment Platform, to diversify funding options and strengthen financial sustainability.

Recommendation 3: Improve equitable access to health services

The Bhutan Country Office should:

- 3.1** Strengthen its work on understanding the gendered inequalities in health, identifying health access barriers for women and girls, develop strategies to overcome them and make these strategies explicit in its programming and communications, building on disaggregated data. Further, to increase access to health services, WHO should support the Ministry of Health with innovations in digital health that will increase the access of more remote and disadvantaged people and collect feedback on their perceived needs.
- 3.2** Work with the Ministry of Health to enable data consolidation of National Early Warning, Alert and Response Surveillance, a District Health Information Software 2--based Health Management Information System and ePIS to reduce the risk of fragmentation amongst health databases to ensure optimal management of data for individuals and to enable targeting of vulnerable populations.
- 3.3** Continue its work on financial protection with the Ministry of Health and National Statistical Bureau and, in partnership with the World Bank, yield data on the affordability of health services by lower income groups, so as to improve targeting of vulnerable groups and their ability to access health services.
- 3.4** Engage local CSOs to maximize their contributions and understanding of local level realities of people living with HIV, cancer and disability. This engagement would be firstly about learning how to make local services most effective and secondarily concern WHO-funded partnerships.

Recommendation 4: Improve budget management, performance monitoring and learning

The Bhutan Country Office should:

- 4.1** Broaden its consultations on Programme Budget planning and management beyond traditional partners, i.e. the Ministry of Health. This approach will help increase transparency and build awareness among a wider range of stakeholders about WHO's financial and budgetary processes.
- 4.2** Integrate evaluation into its major interventions in Bhutan, with technical support from WHO South-East Asia Regional Office, and monitor the progress of interventions regularly with the Ministry of Health and partners. Strengthening the evidence base – particularly regarding the effectiveness and value for money of WHO's capacity development efforts – will be essential to inform future planning and support the development of compelling investment case for continued and expanded health sector support.

WHO South-East Asia Regional Office should:

- 4.3** Establish clear quality standards for its advisory and advocacy functions and introduce mechanisms to monitor the contextual relevance of its recommendations – taking into account the capacity of national partners to act on them. Periodic reviews of the uptake and application of these recommendations by national partners will help inform performance review and continuous improvement.
- 4.4** Facilitate regular learning exchange fora across countries in the region, led by the technical and operational units. These platforms should enable the sharing of practical experiences on cross-cutting themes such as multisector, multisectoral coordination for complex health challenges (e.g. NCDs, nutrition, etc.), performance monitoring, gender equality, value for money, assessment of WHO capacity development, strategic resource allocation and the management of DFC.

WHO headquarters should:

- 4.5** Devise tools for the periodic assessment of the performance of both country and regional offices, covering both self and independent assessment to strengthen their strategic planning, allow course correction and provide evaluative data for mid-term reviews and country programme evaluations.

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