

BHUTAN

The vision of the Joint Programme (JP): All children and adolescents achieve the highest possible standard of mental health and psychosocial well-being and development.

CONTEXT AND BACKGROUND

Bhutan is facing rapid changes linked to structural economic shifts, urbanization and environmental risks. Child and adolescent mental health is growing as a priority in the country, creating momentum to build responsive, locally grounded systems that support young people to thrive. Building on its strong focus on population wellbeing, strengthening community and primary care services, particularly in rural and remote areas, offers an important opportunity to expand access to mental health support.

GLOBAL INDICATORS		JOINT PROGRAMME INDICATORS (UP TO 2025)	
Total population (000s)	763	Total individuals directly reached through the Joint Programme	200,251
Total child and adolescent population (000s)	209	Total individuals trained in child and adolescent mental health, psychosocial support and/or development	4,570
Suicide rates (per 100,000 population)	5.07	Total individuals predicted to reach through trained professionals, annually (<i>indirect reach</i>)	516,208
Stand-alone or integrated policy or plan for child and/or adolescent mental health	Yes	Total individuals reached through multisectoral care, and prevention/promotion services	197,953
Stand-alone or integrated strategy/policy/plan for suicide prevention	Yes	Total individuals with access to multisectoral care services (<i>indirect reach</i>)	4,362
Mental health workers in child and adolescent mental health services	91	Number of non-state actors and partners engaged	4

Sources: *WHO Mental Health Atlas 2020*; *WHO Global Health Estimates, 2024*

KEY ACTIVITIES AND ACHIEVEMENTS ENABLING IMPACT

Multisectoral leadership and coordination	Multisectoral service delivery and care systems	Promotion and prevention in mental health	Data, evidence, and research systems
<ul style="list-style-type: none"> The National Mental Health Strategy 1.0 2025 has been endorsed for implementation in October 2025 by Her Majesty the Queen. This update modernizes guidance, reflects current evidence and practices, and strengthens the foundation for improved mental health and psychosocial support services nationwide. 	<ul style="list-style-type: none"> A dedicated child and adolescent psychiatric ward was established at the national referral hospital. Anti-bullying guidelines launched in 2022 enabled schools to implement tailored interventions, while teachers and health workers were trained to identify violence, neglect, and psychosocial distress. UNICEF strengthened school-based support by training psychosocial focal teachers and peer helpers, and expanding counseling services for substance use. New systems including the Health and Wellbeing Screening System and revised manuals enhanced early identification, referrals, and parental support, complemented by specialized professional training and community mental health promotion. 	<ul style="list-style-type: none"> Bhutan marked World Mental Health Day with a multisectoral national campaign led by the PEMA Secretariat, where the Health Minister presented the regional Paro Declaration. Partnerships with WHO, UNICEF, CSOs, scouts, and sports organizations expanded mental health awareness and reduced stigma among youth. UNICEF supported community scout training, football-based engagement, and creative advocacy initiatives. MHPSS was integrated into national events, and a draft SBC action plan was developed following situational analysis findings. 	<ul style="list-style-type: none"> The PEMA Secretariat is finalizing a Health and Wellbeing System to screen communities, guide timely support, and generate data for informed action. A national consultant is being recruited to analyze drivers of low MHPSS literacy and stigma to inform an SBC strategy. UNICEF supported the Druk Journal's mental health edition and a joint Mental Health Symposium. Additional efforts included participation in an international CAMH conference, a national MHPSS situational analysis, and mapping of CAMH services, revealing significant community-level service gaps.

KEY STAKEHOLDERS AND PARTNERS

Key stakeholders include the PEMA Secretariat, the Ministry of Health, the Ministry of Education and Skills Development, the Bhutan Scouts Association, the Bhutan Institute of Wellbeing, Chithuen Phendey Association, Bhutan Football Federation, traditional medicine services, and CSO networks. UNICEF and WHO serve as core partners, supporting government agencies, schools, health workers, faith groups, and community organizations.

FUTURE OUTLOOK AND PRIORITIES MOVING FORWARD

Multisectoral leadership and coordination	Multisectoral service delivery and care systems	Promotion and prevention in mental health	Data, evidence, and research systems
<ul style="list-style-type: none"> Under the leadership of Her Majesty, The Queen, The PEMA Board will serve as the highest national level decision making body. The board will be supported by the Technical Advisory Committee in the specific technical decisions making. PEMA Secretariat will work with various agencies, development partners, including CSOs, to foster partnership and advocate for commitment and investment to place mental health and wellbeing at the center of development. 	<ul style="list-style-type: none"> Increase the availability of accessible and acceptable mental health services including for vulnerable groups. Continue to expand the workforce by deploying trained mental health workers to sub-national levels using task-sharing models and investing in training of community health workers. Strengthen school-based mental health services, including provision of structured training and supervision. Scale existing caregiver support initiatives 	<ul style="list-style-type: none"> Priority placed on the implementation of a CAMH people-centered, community-based mental health care and delivery built on primary health care. 	<ul style="list-style-type: none"> Establish a robust information system, innovative research initiatives and integration of mental health information systems.