



Country Profile: Bhutan

Introduction

Bhutan, officially the Kingdom of Bhutan, is a mountainous country in South Asia. It has made significant strides in maternal and child health, yet micronutrient deficiencies remain a concern. Specifically, there has been little progress in reducing anemia among women of reproductive age (WRA).¹ According to [The 5th National Health Survey, 2023](#), 33.3% of pregnant women were anemic in 2023,¹³ and 3.4% of women of reproductive age were underweight in 2022.¹³ Birth outcomes show persistent vulnerabilities: 6.9% of low birthweight¹³ and an infant mortality rate of 15.2 per 1,000 live births in 2023.¹³ Only five stillbirths were recorded in the two years preceding the survey.¹³ These outcomes persist even though 87.2% of women had more than 4 antenatal care (ANC) visits and substantial public health investments.^{7,13} These indicators reflect the need for more comprehensive nutritional interventions during pregnancy.

Bhutan's Ministry of Health (MoH), in collaboration with UNICEF and Vitamin Angels, launched a national Multiple Micronutrient Supplementation (MMS) program in May 2024, integrating it into routine antenatal and postnatal care. The MMS package included in the comprehensive maternal nutrition and child health (CMCH) program aims to reduce maternal anemia and prevent prematurity, low birth weight, and intergenerational stunting.⁸

Bhutan's country profile presents a concise overview of its transition from iron and folic acid (IFA) supplementation to MMS. This document aims to inform policymakers, partners, and stakeholders of the current progress, challenges, and opportunities for further implementation of MMS as part of maternal nutrition and health strategies.

MMS Policy and Regulatory Status

Bhutan's 12th five-year plan (2018-2023) aligns with the World Health Assembly's global targets (2015) on maternal and child nutrition. Under universal health care, ANC visits are free for all women.⁹ The maternal nutrition services are well integrated into a single delivery platform for maternal and child health (MCH) services.¹⁰ UNICEF's Bhutan Country Office Annual Report 2023 states that UNICEF supported the launch of a Comprehensive Maternal and Child Health (CMCH) program, including conditional cash transfers and the 1,000 golden days initiative of the Accelerated Maternal and Child Health (AMCH) policy. In addition to multiple strategies to improve the quality of care and build capacity for maternal nutrition, the key aim of this policy is to transition from IFA to MMS.^{7,11}

In May 2024, Bhutan's MoH, in collaboration with UNICEF and Vitamin Angels, launched the MMS program as part of its antenatal checkups for pregnant and breastfeeding women through 6 months postpartum. To support national scale-up, the MoH collaborated with Vitamin Angels in 2024 to supply MMS and provide programmatic support to strengthen MMS implementation across Bhutan. In addition, it included the co-design and implementation research to develop and test strategies to strengthen the MMS program.¹² However, MMS is not yet included in the Essential Medicines List (EML), and efforts are being made to include MMS in Bhutan's EML,¹⁰ with the MoH currently gathering evidence for its inclusion.

Implementation Status

Bhutan's National Health Survey (NHS) 2023 assessed the country's nutrition situation, including anemia, ANC, and supplement coverage.¹³ Strategies and actions to optimize MMS implementation outcomes included strengthening delivery systems, such as training health workers and engaging community health workers and midwives to promote MMS.¹² Documentation from partners and MoH indicates support for health worker orientation, health worker capacity building, and the development of advocacy materials.

MMS Coverage and Utilization

In 2024, [UNICEF's NutriDash](#) reported that MMS was delivered freely through ANC facilities to pregnant women in Bhutan.¹⁴ UNICEF Bhutan Annual Report 2024 reported that "MMS were introduced in all 20 districts, targeting both pregnant women and breastfeeding mothers".⁸ A national rollout is in place targeting pregnant and postpartum women (e.g., in the first six months post-birth), independently of lactation status. Bhutan's ANC coverage is strong, with over 85% of women attending at least four ANC visits,¹² providing a solid platform for MMS distribution. Uptake strategies include mass media campaigns, individual counseling at health centers, and community outreach.¹²

Key Program Actors and Partners

The MMS initiative in Bhutan is led by the MoH, with technical and logistical support from Vitamin Angels and UNICEF¹². [UNICEF NutriDash](#) reported that the government of Bhutan established a standalone MMS coordination mechanism that supports the planning and implementation of MMS programs and activities in the country.¹⁴ Bhutan's broader reproductive, maternal, newborn, child, and adolescent health (RMNCAH) strategy states that health and nutrition sector programs were implemented in partnership with various national and international partners, as listed in Table 1.

Table 1: List of national and international partners working to scale up MMS in Bhutan ¹⁴	
National Partners	International Partners
MoH – Royal Government of Bhutan	United Nations Children's Fund (UNICEF)
Faculty of Nursing and Public Health (FNPH)	Vitamin Angels

National Medical Services (NMS)	World Health Organization (WHO)
Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB)	

Supply Chain

MMS is imported into Bhutan, and there are no production facilities in the country. Since 2024, Vitamin Angels has been providing MMS supplies, with distribution coordinated by the MoH.^{10,12}

Monitoring, Evaluation, and Research

The NHS 2023, DHIS2 (routine HMIS), and periodic National Nutrition Surveys (NNS) are the primary data sources for anemia, ANC, and supplement coverage in Bhutan. A comprehensive situation assessment of the MMS program is planned for 2026 to examine the current implementation landscape and identify gaps in program implementation, training, and assessment. The assessment aims to inform the co-design of implementation research between various stakeholders to develop and test strategies for the long-term scaling up and sustainability of MMS delivery.¹²

Financing and Sustainability

The MMS program is currently funded through in-kind donations and technical support from Vitamin Angels. To ensure sustainability, Bhutan is working to include MMS in the EML and to secure financing through the Bhutan Health Trust Fund.¹²

Challenges and Next Steps

Bhutan’s MMS program has achieved early success in policy integration and frontline training, but several challenges remain. The key challenges are limited domestic financing and the need for stronger monitoring systems, especially for MMS. Priority next steps include establishing a national MMS task force, integrating MMS into the national EML, conducting implementation research, supporting the integration of MMS into national health financing schemes, and coordinating with pharmaceutical suppliers to improve access.⁷

MMS Tools and Resources

The Bhutan MoH published Bhutan’s national strategy for reproductive, maternal, newborn, child, adolescent, and aging health. See: [Reproductive, Maternal, Newborn, Child and Adolescent + Health of Aging Strategy \(RMNCAHA Strategy 2025–29\)](#)

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The information and country-level data provided herein were received from our partners as of 2025 and are shared with permission for public dissemination. This profile will be updated periodically. If you have updates or additional information to share, please [fill out this feedback form](#). For questions, contact us at HMHB@micronutrientforum.org.

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