

# GNH, Health and Economic Status of Bhutan

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**Theme:** Social Transformation

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## Abstract

Happiness is defined as the degree to which the people in a country enjoy the life, as they like to live without harming anyone in the society. Happiness is the ultimate objective of human being at the individual level, but GNH is the national goal in Bhutan. There are numerous factors that bring happiness in human's life which differ from person to person. For instance, in some individuals' point of view they may feel that money brings happiness and some other individuals' point of view it may not. Culture, celebration, festivals, economic status, education, environment, health and people desire are playing an important role in human's happiness at different stages. The attainment of Gross National Happiness is not an easy task as we all think. It cannot be measured if individual needs and concerns of the people do not paramount to make a macro level of social and national development. A high level coordination is needed between government and people at all level to synchronize the basic goals of GNH as a national policy. If a country can be described by high sophistication of life style, high-tech at all level, development in the industrial sector, good enough resource accessibility, and material well-being across the state, will pursue the problems of unstable politics, not harmonized peaceful environment and society, weak health status and moreover threats from the terrorism either at the domestic level or from outside. As a result of these Problems, ultimately the economic status of the country would shake. However, on the contrary, the kingdom of Bhutan is described to be very limited in all the above-mentioned elements. Consequently, Bhutan has gained the reputation of being a peaceful country around the world and where there is no much treats from the terrorism, economic disparity, sophisticated life style and material well - being are virtually absent. In this case, Bhutan is more fortunate than other neighboring countries in the South Asian region. This paper is the overview of the Gross National Happiness, Health and Economics status of the country.

## Introduction

The countries economic status is been measured into many ways like GNP, GDP, Per capita income, personal income, X-M and so on. No country around the globe would have the objective

- To make harmful actions against its environment and culture.
- Not to obtain the self-sufficiency in the productive and non-productive sectors.
- To promote the terrorism and violence in the society.
- To have intentionally a bad government to the country and to the people.

The self-reliance, good governance, promoting cultural heritage and environmental wealth are measured by almost all the countries around world by their GNP, GDP and other economic elements which are popular and known to all the people as a Cardinal or quantitative concept. But Bhutan tries to measure the economic self-reliance, environmental conservation which promotes and protects the cultural heritage and good governance by Ordinal or immeasurable terms which are unpopular concept of Gross national Happiness (GNH). The elasticity of the economic status of the country is highly based on the amount of investment by social developmental activities such as in education and health care sector

. The economic status of any country should not be in a static manner, obviously it must be in a dynamic concept. The dynamic status in the country's economy is based on many factors as well as by both sides internally and externally.

### **Objectives**

- To examine the health status of Bhutan.
- To assess the role of financial flow in the health and educational sectors.
- Describe the essence of Bhutan's idea of GNH.
- To find the role of GNH in health and economic status.
- To examine the health and education to economic betterment.

### **Version of Bhutan**

A small Buddhist kingdom in the eastern Himalayas is known to be as Bhutan in the geography. People of Bhutan in the early stages had a sustainable relation with nature for the basic needs. Before 1960 Bhutan was the isolated society from the world's communication. Even there were no basic infrastructure facilities such as roads, schools, communication and health care facilities, etc. Mules, horses and yaks had been used as a mode of transport in those days. Many of the Asian and African countries resorted to exploit natural resources to begin industrialization without consideration for the existing traditional systems of sustainable living with limited human and technical resources. This led to social and cultural disruptions, which were more vulnerable to economic and environmental calamities latter. Since 1961, Bhutan had decided to make a path for modern development by the influence of the modernization and rapid development in the global society. Even though the country has many limitations especially in the structural aspects the government policy, public support and approach towards economic development with adequate attention paid to preserve the culture and environment attributed the Buddhist values inherited in Bhutanese society. As a result, today the country is at the decent stage at all levels.

In the health care sector more than 90% of the people have the medical access and 90% of the children are immunized, even this status couldn't be achieved by other developing countries around the globe. In 1961 the country had only one hospital at the capital (Thimphu) and 10 dispensaries around the boundary. But as per the 2004 records, there are 29 hospitals and 172 Basic health units (BHU) in Bhutan. From the social welfare point of view 65% of the people are having the safe drinking water access. Bhutan's development policy is based to improve and maintain the economic growth, cultural values, spiritual and environmental conservation and quality of life of the people.

## **Vision for Health and Education**

Human capital generates an important policy implication like divergence between private and social benefits. Human capital for education would be very low, when social benefits are higher than individual benefits, which induce for more government investment in educational sector. Investment in human capital in both education and health care sector by an individual in the country is negligible. The Royal Government of Bhutan provides free of cost both education and medical facilities to all. HRM and HRD of the country lack behind in all the sectors. In the educational sector more than 50% of the people are literate with estimated 75% of the enrolment. The bilateral relationship between India and Bhutan fulfills all the basic and necessary needs of the country at different level for many decades. The direct and indirect supports by the government of India especially to the educational sectors are immense. Bhutan has sufficient infrastructure and good educational facilities up to the school level education like primary, secondary and higher secondary. However, for the degree and for the technical course education the adequate facilities are not available at the domestic level, still people are depending on other countries. For the UG degree there is a college in the country at the eastern part affiliated with Delhi University for more than a couple of decades. In June 2006, the Royal government of Bhutan has launched the first batch degree courses under Royal University of Bhutan (RUB). Now the government is seriously thinking about not only for the expansion of different courses in the college but also to increase the number of more colleges and launching PG degree courses in the near future.

The Royal Government of Bhutan gives more priority in its vision 2020 for the development of health and educational sectors. Some of the important targeted goals in the vision are

- Targeted universal primary school enrollment – 2002
- Achieve full enrollment at junior high school of 8<sup>th</sup> std – 2007
- Achieve full enrollment at high school level of 10<sup>th</sup> std – 2012
- Introduce full Bhutanization of secondary school curricula – 2007
- Implementation of distance education programme – 2007
- Targeted full adult literacy rate – 2017
- Establishment of own university - 2007
- Achieve average doctor / population ratio – 2007
- Show the significant improvement in the reduction of IMR and MMR by the end of 9<sup>th</sup> and 11<sup>th</sup> FYN respectively (2007,2017)
- Increase life expectancy to average for developed nations – 2012
- Introduce telemedicine operation – 2002
- Introduce the operational system of private health care – 2007

*Source: Bhutan 2020, Planning commission Royal Government of Bhutan*

## **Health care sector**

The Royal Government of Bhutan gives more importance to social sectors like education and health. The Government pursues a policy of providing essential health care and education to all free of cost. Bhutan has adopted the primary and integrated health care system. Presently the primary health care services are providing 90% of the population. Basic infrastructure and developed modern health care systems were

commenced during early 1960's. Now the country has 4-tiered network of 29 hospitals at all levels. Traditional medicine also plays an integral part of the health care sector. There is no training facility for medical doctors in Bhutan. The shortage of skilled labor and technical expertise is chronic and severe. Various advanced methods had been facilitating substantial improvement in public health, understanding of disease processes to eradicate large reductions in communicable disease epidemics and rise or decline of serious and most dangerous chronic diseases. In total government expenditure, health sector was carrying 12.2% in 2000. The Bhutan's health system as described by the WHO is "one of the best programs in South-East Asia," and the country has won WHO 50<sup>th</sup> anniversary awards for primary health care in 1998. Bhutan has limited financial resources as per capita gross national product is about \$ 875. The main financial supporters to Bhutan are Denmark, India, UNICEF, the UNPF, the World Bank and WHO. In 2004, the country spent 4.6% of its GDP on health care with the government providing for 64.2% of that amount according to the WHO. By comparison, India spent 5.0% of its GDP on health to the government provided a far smaller share of that amount (17.3%). The recent UNDP's Human Development Report (2006) shows a life expectancy of 63.4 years, in India at 63.6 years, and fractionally above compare to Bangladesh and Nepal. The percentage of underweight children under 5 years of age is 19%; India's is 47%, with Bangladesh and Nepal at 48%. According to UNICEF, the mortality under 5 years in Bhutan has been reduced by 55% from 166 deaths per 1000 in 1990 to 75 deaths per 1000 in 2005, and the numbers continue to drop. Maternal mortality also dropped down to 400 per 1,00,000 live births in 1994 from 770 per 1,00,000 in 1984. India's maternal mortality ratio is still floating around 400. According to UNICEF's State of the World's Children 2007 said 95% of the households use iodized salt, compared with 57% in India. Bhutan has the rate of immunization / Vaccination of 93% for tuberculosis, DPT, polio, hepatitis, and this rate is slightly better than Bangladesh and well above the rate of India. In South Asia, only Sri Lanka tops Bhutanese figures with near 100% immunization. According to WHO figures, malnutrition in Bhutan is proportionately much lower than in India and approaching the levels of Thailand. The household incomes of Bhutan still remain the world lowest, but life expectancy rose to 63.6 years from 46 years in 1984 to 2006.

**Table – 1: Population, Health and Economy Indicator of Bhutan 1980 – 2003**

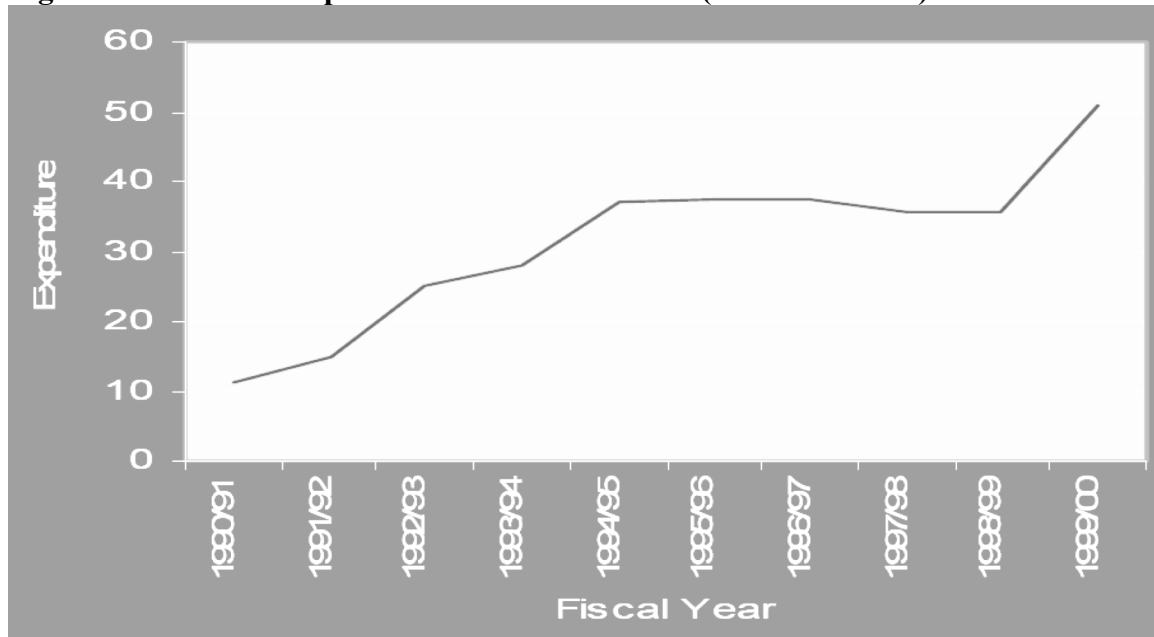
S. No	Particulars	1980	1990	2000	2003
1	Total population (In Millions)	1.32	1.70	2.06	2.26
2	Rural population (In % of total)	96.1	94.7	92.9	91.4
3	Population growth rate % per annum	2.1	1.8	3.4	3.2
4	Population density (Per square kilometer)	28	37	44	48
5	Life expectancy Years: Males	46.5	51.5	60.0	62.0
	: Females	49.0	54.0	63.0	65.0
6	Adult literacy rate Percentage: Males	41.1	51.3	61.0	
	Females	15.0	23.2	34.0	N.A
7	Gross domestic product (Nu. In Millions)		4879	20104	28542
8	Domestic saving Percentage of GDP	7.9	28.0	19.5	N.A
9	External debt (Millions of US dollars)	N.A	84	203	406

Source: Journal of Bhutan Studies

From the above table we get broad range idea about the country's population, health and economic indicators and its growth status. Low level of population with supported high rate of rural population is the main advantage of the country to come up with some of the new ideas like GNH. Bhutan's life expectancy of more than 60 years is highly remarkable compared to other fast developing countries in the world. As per the recent UN's human development index, Bhutan is economically least country in the world, however the rate of literacy even nearly equals to some of the other countries in the South Asia.

In the present FYP a total outlay was Nu.6536 millions, in which 10% of the total budget was allocated to the health care sector and out of which approximately Nu.1000 million was budgeted for the essential drugs, vaccines and equipments. In 2005, a total amount of Nu.82 million was spent on procurement of essential drugs and Nu.80 million of referral costs for the treatment of 500 patients outside of the country. The Government of Bhutan had initiated the trust for the health care sector with capital of \$24 million. Expansion in the health infrastructure of the country is steadily improving over the years. As per the annual health bulletin of 2006, the doctor- nurse and patient ratio of country is 2:8:10000 populations. For human resources in the health care sector, the government sends people to do MBBS course outside only. However the other subordinate levels such as health assistance (HA), basic health workers (BHWs), auxiliary nurses and some sort of technicians are trained at the domestic level.

**Fig: -1 Health cares Expenditure from 1990 –2000 (Nu. In Millions)**



*Source: Integrated Health Care-reaching the Un-reached: Bhutan's experience.*

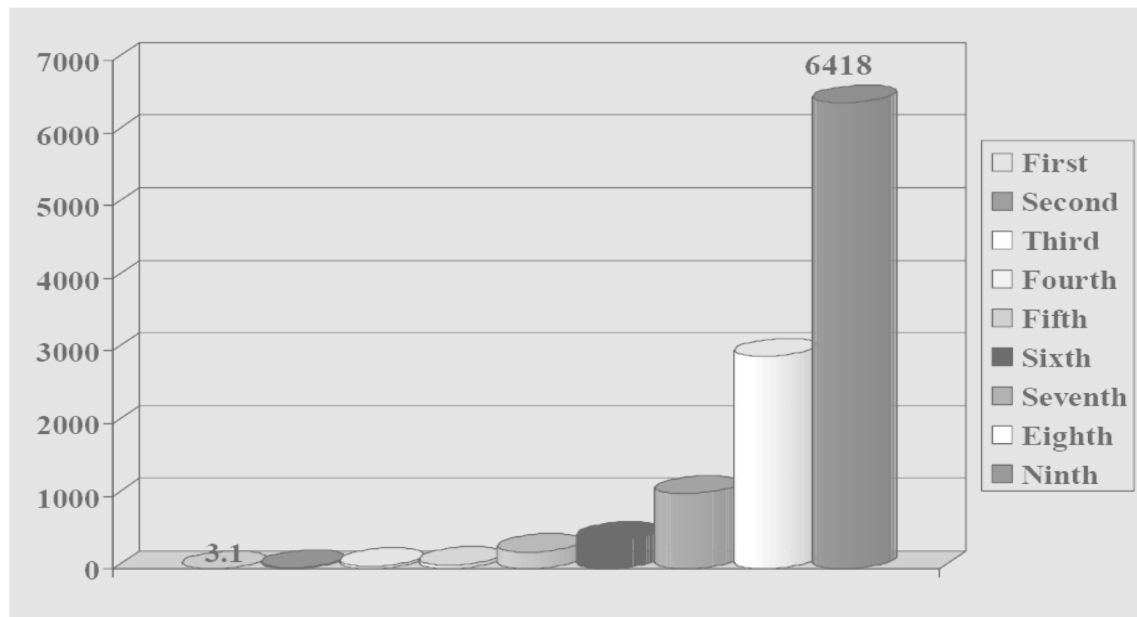
The increasing rate of investment in human capital especially in health care sector in Bhutan from 1990 to 2000 is lucid from the above figure-1. Bhutan has good greenhouse by nature where there is no reckless chemical industries at the domestic level and not much of health hazardous waste from industry and households which is the prime reason

for strong good health status. But in reality it is not true as said. There are many reasons behind the actual health status which are not at remarkable rate. Such reasons are

- Food habit of the people
- Influence of external factors like civilization and modernizations
- More consumption of alcohol by male and female
- Usage of drugs and other substance by the youths
- Kinds of pan items used by majority of the people
- Some weaknesses in the culture of the society like living together without legal marriage.

As a result of the above-mentioned factors the country has contrary situations in the health record, which are the reasons for the increasing health care expenditure. Below is the clear graphical representation of it.

**Fig: - 2 Five year plans health care outlay (Nu. In Millions)**



*Source: Integrated Health Care-reaching the Un-reached: Bhutan's experience.*

Since 1961-76, the first three development plans of the country was mainly focused to improve the transport facilities, construct basic infrastructure and the improvement of internal communications to develop for good path of the future economic progress. But the health and education expenditure by the government in the first and second plans were very limited. However the social development programs of education and medical were heavily emphasized in the 3<sup>rd</sup> plan and thereafter the expenditure has been increasing gradually in human capital up to 7<sup>th</sup> FYP of the country. But the health care expenditure has become more than double from 7<sup>th</sup> to 8<sup>th</sup> and from 8<sup>th</sup> to 9<sup>th</sup> FYP. In the 9<sup>th</sup> FYP, the health sector has emphasized to improve the quality of health and to enhance sustainability. Since from the inception of the health system in Bhutan, the basic objective was to prevent and reduce morbidity and mortality. In light of this, the health system has striven to cater quality care and treatment through different stages of life cycle

of the people from pregnancy to delivery, childhood to adolescence, and from youth to old age people.

### **Functional Behaviour**

The technical progress and implementation in the productive and non-productive sector can change in response to policy as well. The choice of the people at country determines how swift they can obtain the growth in the productivity by diverting their time from the normal work to enhance the productive activities. The coefficient on human capital is insignificant in labour abundant countries because of low records and poor quality in education and health care sector. Life expectancy can be a rod to measure the health status of the country and people. In most of the developing countries the demand and supply of the human capital are likely to differ due to many factors like strongly influenced and financed by the state, which would lead to ignore institutional differences. The measurement of skills, competencies and human capital over a period of time is complicated. The theory of production function states that there is a flow of productive services from the human capital stock, which means the increase in production or economic development depends upon the increase in human capital. The production function and lucrative behaviour of the enterprise derives the demand for human capital. However the supply of the human capital is dominated by nonprofit organizations. The supply of human capital may be expected to respond to future demand and gross domestic product depends upon human capital. Poverty is an impediment to the development in the agrarian society. To eliminate or reduce the poverty in the 3<sup>rd</sup> world countries, there are three effective pathways like

- Agriculture intensification (land, tenancy reforms and Green Revolution)
- Improvement in the rural non-farm activities
- Migration to towns and to abroad

Agriculture intensification contributes significantly to rural poverty alleviation especially when agriculture is a dominant source of livelihoods for the poor. However, a recent study at the household level shows that it is non-farm development rather than agriculture for rural income growth and poverty alleviation in south Asian countries. The income growth of the rural masses has shifted from agriculture to human capital.

Along with development of the agriculture sector, expansion of education coupled with health care and non-farm development strategy would help to remove the mass of the rural poverty and will lead a pathway for the rapid development at all sectors. Human capital investment and its return to the development progress are a long-term process, which can be measured over a period of time. Income dynamics is needed to identify the causes and consequences of the human capital. In the analysis of investment in human capital, we should identify the impacts of education on the choice of occupation and range the different sectors according to the occupational opportunities in the urban areas or abroad and employment in rural non-farm activities. The coefficient of the number of adult members has a positive and significant impact on per capita income on non-farm activities, but a negative impact on per capita agricultural income. Year after year, the investment in human capital increases rapidly around the map especially in the South Asian countries. As a result the youth's contribution to agriculture sector decreases. The decrease adult member in land-labour ratio would reduce the  $MP_L$  in the agriculture

sector. Nevertheless, adults' contribution to the non-farm activities is significant and makes a positive effect to the development or to increase the  $MP_L$  to the respective sector. This indicates that highly educated people tend to work in non-agriculture activities rather than agriculture sector to measure the investment in human capital to the economic development and to the income growth of the people.

In recent decade, there has been an increasing focus on resource extraction Industries such as hydroelectric power, mining and forestry as these activities are energy intensive and yield higher productivity increases. Reliance on labour intensive technology proposed in the early stages of industrialization in most developing countries is not applicable in Bhutan due to shortage of labour (as its small population size). The government's strategy is to create a leading growth sector and to promote economic self-reliance by increasing domestic savings and reducing dependency on foreign aid. The government also started primary resource processing plants to increase their value added to the country. With the given high growth rate of the Indian economy, exports from such sectors look hopeful and their development holds the potential to reduce Bhutan's large saving- investment gap. The Chuka Hydroelectricity project, which was commissioned in 1988, contributes substantial revenue to the government through power exports to the northeastern states of India. A renewable natural resource sector offers a promising source of revenue as Bhutan is endowed with numerous swift mountain streams.

### **Idea of Gross National Happiness**

Happiness is oftenly equated with money by around the world except Bhutan. GDP is the common rod to measure the economic growth, progress, public welfare and well being of a nation by the economists. Nevertheless, since 1972 the kingdom of Bhutan has been trying out for a different thought like **GNH** (Gross National Happiness), which was conceded by his majesty of Bhutan *Jigme Singye Wangchuck*. GNH is being presently pursued through four platforms

- Sustainable development in primary, secondary, and tertiary sectors
- Environmental preservation, cultural promotion in the aspect of associate family values
- To promote the traditional cultural heritages
- Transparency, accountability and decentralization policy by the good governance.

The policy of economic transformation places certain pressures on society, but the country cautiously avoided the trend of rapid growth maximization rather it developed its new phenomenon of GNH. The competent leadership of the Wangchuk monarchs had undertaken the major reforms and innovations. Bhutan and its Buddhist concept has internalize the overall sustainability of economic, ecological, ethical and spiritual aspects of human progress. Bhutan is much remarkable than other South East Asian Countries in some aspects because of their idea of GNH. There are many factors behind to support the concept of Gross National Happiness by the government and by the people over here which are

- ❖ Isolated land in the high Himalayas



- ❖ Sustainable political situation in the monarchy
- ❖ Good Governance
- ❖ People in the country are not very greedy
- ❖ Negligible social crimes
- ❖ Very low population (as per the recent date only 6, 00,000)
- ❖ Highly dependent economy of the outside source
- ❖ More than 75% of the land area is covered by forest
- ❖ Very less chemical based industry at the domestic level
- ❖ People are abiding the legislation and respect the monarchy
- ❖ Medical and education are completely free to all the people
- ❖ Most of the people are happy with whatever they have
- ❖ Civilization, modernization and liberalization are not much influenced the Bhutanese society
- ❖ Non corrupted system in Bhutan
- ❖ The strong support to the concept of GNH from the public

The University of Leicester in Britain conducted a survey and ranked Bhutan as the 8<sup>th</sup> happiest place in the planet's, ahead of the US and Canada. Moreover, even some of the developed countries like Japan and France could not come in the top 10. The reason for Bhutan to be equal to the other developed countries around the world is due to the concept of happiness rather than Gross domestic product. These factors have proved that money, financial status and economic conditions and other facilities alone do not bring happiness and good health conditions to the people unless they develop their selfless life, moral, behaviour and character of the people in general. Now, the idea of GNH has started to influence other countries around the world where numerous economists, social scientist are trying to develop policies, which take into considerations not only the flow of money alone but also health care, leisured time with family, conservation of natural resources and other non economic factors.

A Canadian political philosopher, **John Ralston Saul** defined happiness as a balance of individual community interests. "The Enlightenment theory of happiness was an expression of public good or the public welfare, of the contentment of the people."

### **"Health is Wealth", "Wealth is ill-health"**

Happiness is an immeasurable and an individual phenomenon. It is an exogenous variable, which means no one can say how much a person would be happier even after he or she achieves his or her objects and goals. One of the reasons for the basic economic problems of unlimited human wants could be the reason for this exogenous concept. Of course, there is no doubt that good health condition of the human being would keep them to work efficiently at all level to obtain the economic maximization personally at the micro level and generally at the macro level of the country. Here I would like to say a very popular fictional story, "There was a poor and good healthy person in the metropolitan city. His economic status even could not allow him to buy a cycle. He used to go for work by walk. However he had the desire to buy a cycle. The days came true in his life to get it. After few days, he desires to buy a motorcycle that too came true in his life one day. Then after few years with humans' basic nature of unlimited wants and greediness, this person decides to construct a new house and buy a luxurious car too. The days had gone and he obtained everything whatever he decided to get it over a period of

time. He had become economically very strong but weak from the health aspect. One day he met the doctor for check up and the doctor advised him to do some excises like walk for some kilometers everyday to keep his body fit. Then he realized the early stages of his good health which made him wealthy but wealth brought him to ill health.” This story reminds us “Health is Wealth” and “Wealth is ill-health”. Moreover, if wealth were being to fulfill the basic needs at limited and at the necessary level, wealth would give the protection and healthy life to human being. However if it is being abundantly or limitless then human has to protect them from the social crimes of steal, robbery and that it give them lot of pressures and ultimately make them ill health. This proves that “Too much of anything is good for nothing”, whether it is money or anything else.

### **Findings**

- Improvement had been seen in the health care sector in recent years
- Expenditure has increased in both health and educational sector of the country
- Life expectancy of the people have improved because of the better medical facilities
- Positive improvement in the health sector and as a result reduction in some of the major illnesses such as leprosy, tuberculoses, malaria and etc
- Human resources and facilities in the health care sector has improved

### **Suggestions**

In case, any country would like to obtain the selfless development and improvement in social sectors which is prevailing in the country they would try to implement the following methods to get better education and health care status.

- ✓ Effective utilization of the existing resources in the social development activities of education and health care sector.
- ✓ Proper allocation, utilization and implementation of the financial resources in the fiscal police.
- ✓ Proper implementation of cost-sharing and risk-sharing in the health care sector
- ✓ Introduce the decentralization policy in the health care sector
- ✓ Strengthen the idea of gross national happiness (GNH)
- ✓ Government has to give the proper awareness to all the people through medias about the importance of cleanliness, sanitations and safe boiled drinking water for the better status of health.
- ✓ Presently, in all the district head quarts the Government is having only one public hospital, this trend needs to be changed, if the government takes the decision to open a rival public hospital, it would encourage the healthy competitions between the two public hospitals, in light of their performance some sort of promotions or rewards to be given to the better performed hospital staffs periodically by the government, which improves the work culture of the employees.
- ✓ Government should create a good rapport between public – private education and health care systems.
- ✓ Government has to find the selfless and public concerned private education, health care providers and they should be appreciated in the way of giving

- subsidies, rewards, awards and reputations which is to be noticed by the public and other private providers.
- ✓ Public and private organizations should make much easier health care insurance schemes especially for the poor people, which can be afforded to be paid and hence enjoy the benefit when the necessity comes without any difficulty.

## **Conclusion**

Material well being in the aspect of capital, instrument, machines, money, weapon, nuclear and so on determines the wealth of the nation. The economists and other experts may classify the country by their GNP, GNI and GDP status as developed countries, developing countries or third world countries. Bringing all this macro concepts to the micro level would give the answer for the simple question, “Will it be the actual rod to measure human happiness at the individual level and the GNH as the whole?” This paper is not altogether neglecting or against the material well being of the country. Economic development is a necessary condition for GNH, as it is for human development and it also gives happiness to the people but not only that. Happiness is defined as the degree to which the people in a country enjoy the life, as they like to live without harming someone in the society. In reality the social crime such as pilfer, steal, robbery, murder, and killing at the domestic level and terrorism at the international level are harming the happiness and peace of the society. When looked into the real cause for these things modernization, civilization, material well-being might increase the crime and terrorism, which disturbs the peace and happiness of the society. The basic needs of human beings are food, medicine, clothing, shelter and a decent education. For a balanced development vision, all efforts will be made to ensure that

- ❖ Not a single person remains hungry in the earth
- ❖ Not a single person lacks the basic human needs of medicine, clothing and shelter
- ❖ Not a single school-age child is denied the opportunity to attend school

The social and political peace enjoyed by the people of the country would be a cause of good governance, which makes Bhutan the envy of the neighboring countries. This sort of development approach focused on improving the quality of life, rather than increasing lucrative, is being experienced in some countries. Bhutan, which has faultless environmental protection system in place, puts its priority not on Gross National Product (GNP) but on Gross National Happiness (GNH). Compared to China’s incredible economic development, Bhutan’s pace of development might not be that impressive. However, in terms of raising and maintaining the quality of life of the general masses Bhutan has rendered inestimable service to its people. The absence of poverty, good health and educational facilities, the high standard of environmental protection law enforces the country to be at the remarkable rate in the Asian continent. Currently, the Bhutan’s idea of GNH may not be a popular concept around the map, but there is no doubt that days will come nearer to accept GNH and it would become as popular as GDP, GNI, and GNP very soon.

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