Bhutan's Foresighted Resilience in the Initial Period of the COVID-19 Pandemic: Through the Lens of Gross National Happiness*

Ritu Verma** and Kuenga Wangmo***

Introduction

When COVID-19 first emerged in late-2019 in Wuhan, China, without adequate containment, the virus and the economic shock waves that followed quickly spread across the world, leaving few countries unaffected by the contagion. COVID-19 quickly escalated into an ongoing and widespread global crisis, placing acute pressure on prevailing economic systems, governance structures, development institutions and health systems not experienced since the Spanish flu of 1918. In doing so, it crippled economies and ruptured trajectories of globalization and development, with a myriad of negative impacts as well as unintended positive effects such as reduced carbon emissions. As the pandemic continues to unfold, the responses of individual nation-states and sub-national regions have been both varied and divergent.

Even in its initial stages, COVID-19 has affected nation-states in profound and sometimes fatal ways, regardless of

^{*} The authors are grateful to Dendup Chophel for providing valued comments on earlier drafts of this paper, and would like to thank Sangay Chophel for his useful comments and assistance.

^{**} Cultural anthropologist, professor, researcher, and scholar (international development, political-ecology, climate change, GNH and degrowth). She is also principal socio-cultural researcher at the Tarayana Centre for Social Research and Development (TCSRD) and Associate Professor at the College of Language and Cultural Studies (CLCS), Royal University of Bhutan. Email: <u>rvermapuri@gmail.com</u>

^{***} Archaeologist, professor, and researcher (environment, political ecology, conservation, history, art). She is also a Research Fellow at the Bhutan Ecological Society (BES) and faculty member at the Centre for Himalayan Environment and Development Studies. Email: <u>kuenga@gmail.com</u>

'developing' nation status. During the initial months of the pandemic, while countries such as the United States, Russia, Brazil, Italy, Spain, Russia, the United Kingdom were impacted severely in terms of human fatalities and high cases of reported COVID-19 virus infections, others including New Zealand, Iceland, Cuba, Nepal, Mongolia, Mozambique were less affected (John Hopkins University and Medicine, 2020). Most notably, a handful of countries managed to rapidly and effectively contain the pandemic during this initial phase of the contagion, thereby limiting spread of infection and human fatalities. Among those nations with no reported cases to the end of May 2020 included Kiribati, Tonga, Samoa, the Marshall Islands, and among those countries with less than fifty reported cases included Lesotho, Malawi, Laos, Fiji, Bhutan, as outlined in Table 1. It should be noted that official data compiled below collates "reported" cases, and does not factor skewed data due to lack of widespread testing, reporting capacity, under-reporting and distorted or false reporting.

> 100,000 Cases	< 50 Cases	< 25 Cases	No Cases
United States – 1,601,434	Burundi – 42	Bhutan – 24*	Kiribati
Russia – 335,882	Eritrea – 39	Timor-Leste – 2	Tonga
Brazil – 330,890	Botswana – 30	Grenada – 22	Samoa
United Kingdom – 225,544	Antigua and Barbuda – 25	Namibia – 20	Vanuatu
Spain – 234,824	Gambia – 25	Laos – 19	The Marshall Islands
Italy – 228,658		Belize – 18	Tuvalu

Table 1. COVID-19 cases worldwide (as of May 23, 2020)

France – 182,015	Fiji – 18	Nauru
Germany – 179,730	Saint-Lucia – 18	Palau
Turkey – 154,500	Saint Vincent and the Grenadines – 18	Nauru
Iran – 131,652	Dominica – 16	Micronesia
India – 125,149	Saint Kitts and Nevis – 15	Turkmenistan
Peru – 111,698	Holy See – 12	North Korea
	Seychelles – 11	
	Suriname – 11	
	Papua New Guinea – 9	
	Western Sahara – 6	
	 Lesotho – 2	· · · ·

Source: John Hopkins University of Medicine, Coronavirus Resource Centre, <u>https://coronavirus.jhu.edu/map.html</u>

Amidst this variegated landscape of severe economic impacts and reported virus infections in the initial phase of the pandemic, a central question about human development emerged centering on differences in success or failure in initial containment of the COVID-19 pandemic. Although neighboring the originating epicenter of the virus, the small land-locked, under-resourced Himalayan Kingdom of Bhutan which borders two carbon emitting giants with high rates of COVID-19 virus infections, managed the pandemic in resilient, responsive and adaptive ways, as evidenced by minimal infections and no deaths. This paper explores determinants that contributed to Bhutan's robust resilience in containing the pandemic during its early phase (February to May 2020), exemplified by initial evidence-based analysis of the effects of its approach on various sectors of development and domains of wellbeing.

While heralded as an "example to the world" (Nelson, 2015), it can be also argued that Bhutan is an 'outlier' in the development landscape due to context-specific historical, geographic, political-economic, socio-cultural and spiritualecological factors. However, its purposeful, foresighted and pro-active engagement with the pandemic, guided by the alternative development path and holistic principles of Gross National Happiness (GNH), provide useful reflections on development, sustainability and resilience in other contexts. GNH balances aspects of 'modernization' while valuing the environment, good governance, culture and spiritual-ecology, resulting in Bhutan being the only carbon negative country in the world and with a unique "high value-low volume" approach to tourism (TCB, 2019). The approach, conceptual framework, measurement and other manifestations of GNH have also been applied and gained traction in other countries such as Thailand, Japan, Bolivia, Ecuador, France, Canada, and international bodies such as the United Nations (Verma, 2017).

This paper argues that Bhutan's purposeful, foresighted and pro-active engagement with the pandemic provides salient reflections for contemporary thinking about development, lessons on resilience that are applicable in other contexts, as well as useful reflections for later stages of the pandemic in Bhutan. Through the use and triangulation of primary and secondary evidence¹, it provides and reflects on the evidentiary basis of the country's successful response, as well as some of the challenges arising. Most critically, in the initial responses to COVID-19, such experience indicates the pressing need to move beyond narrow, conventional development approaches that have proven flawed in response to the global pandemic in

¹ The ongoing study, carried out from March 2020 engages in primary data including research and analysis of social media, interviews, participant observation, as well as secondary sources of data.

other parts of the world. In a rapidly changing and uncertain world, a holistic and balanced development approach is urgently required for resilient responses to managing the pandemic, as well as future global shocks. This in turn rests on disrupting the very concept of 'development' itself to ensure meaningful sustainable and equitable wellbeing outcomes.

What Makes Bhutan Unique: Pre-existing Conditions

Bhutan is one of the smallest countries in the world with a population of 734,374 living in a land area of 38,394 sq. km (NSB, 2019). Yet, Bhutan's rugged Eastern Himalayan terrains and vast altitudinal range between its northern reaches and its southern foothills allow for rich ecological and cultural diversity. Varied ecosystems ranging from subtropical broadleaf forests in the south to subalpine conifer forests, alpine shrubs, and high-mountain meadows are found within the country's small geographical landscape. Bhutan is home to over 770 species of birds and several rare faunal species, including the takin, snow leopard, golden langur, and tiger. It is part of the important Himalaya biodiversity hot spot, one of the ten global biodiversity hotspots in the world. This small, landlocked country also comprises a diverse set of people with distinct cultural practices and over twenty languages (Dorjee, 2014).

Early accounts of Bhutan are associated with Buddhist historical figures and are apocryphal in nature and content as they were written by Buddhist clergymen (Aris, 1979). Bhutan's historical trajectory as a nation state began with the existence of small agricultural communities independent of a higher single authority, to their unification by Zhabdrung Ngawang Namgyal into a single administrative apparatus founded on a two-fold system *(lugs gnyis)* of religion and secular government from 1626 to 1651 (Kinga, 2009; Ardussi, 2004). This was followed by the creation of its first legal code in 1652, with the subsequent legal code in 1729. A hereditary monarchy was established in 1907, which eventually led to the formation of its first national assembly in 1953 by the Third King Jigme Dorji Wangchuck (Kinga, 2009). Through all these transformations, Bhutan remained isolated over many years, with limited and purposively controlled exposure to the outside world from its geographically remote location in the Himalayas. Bhutan fundamentally shed its isolationist policy in 1959 in reaction to Chinese invasion and occupation of Tibet, which generated fears about sovereignty. Henceforth, political and development priorities became a function of national security concerns, sovereignty and self-reliance triggered by a shift in the regional balance of power (Priesner, 1999). The 1960s were characterized by the cautious opening up to the outside world politically and economically through the establishment of diplomatic ties with India and other countries. In 1962, Bhutan became a member of the Colombo Plan Group, soon followed by its joining the International Postal Union in 1969, and its admission as a member of the United Nations in 1971 (Phuntsho, 2013). In 1998, the Fourth King Jigme Singye Wangchuck relinquished sovereign power through the election of the Council of Ministers by the National Assembly to govern the country (Phuntsho, 2013; Kinga, 2009). In 2005, the King declared his intention to hold the first national democratic elections in 2008. He also announced his abdication of the throne to his oldest son in 2006. Soon after, the accession of the Fifth King Jigme Khesar Namgyel Wangchuck to the golden crown was celebrated nationwide in 2008 (Dorji, 2008). Thus, in just under four centuries, the country went from a collection of loose feudal communities to a constitutional democratic monarchy with a ground-breaking vision of development.

Bhutan's coming of age as a modern nation and cautious emergence on the global stage occurred in the context of rapidly shifting geopolitics of the region, with emerging superpowers exercising their political reach directly to its north and to its south. The volatile politics of the region were further exacerbated by conflicts between and within neighboring countries, with spill-over effects in Bhutan. Further, amidst insurgencies on its southern border, Bhutan's ability to defeat, overcome and push back against threats to its sovereignty, national identity and social fabric proved critical in maintaining its status as a modern nation. These complex issues have been the subject of substantial discussion, debate and critique, as noted by Schroeder (2018) and Phuntsho (2013), for example. Most relevant to the discussion on GNH is Bhutan's ability to encapsulate its cultural identity as one of the defining strengths of its sovereignty. This has allowed for the existence of Bhutan as a nation-state, its cultural and political integrity (Phuntsho, 2013), as well as its ability to develop an alternative development path.

Bhutan's innovative development policy priorities are informed by historical, spiritual influences and socio-cultural values that were not ruptured by the impacts of colonization common in most other countries of the South (Verma, 2020). Its approach to balanced and holistic development is also informed by Vajrayana Buddhism's middle path principles (NEC, 1998). An appreciation of interdependency, largely arising from Vajrayana, which is predominantly followed in Bhutan (Kumagai, 2015), and a close relationship between humans and nature are two characteristics with profound environmental logic that have today found their way into the Bhutanese Constitution. For example, the Constitution of Bhutan (2008) pronounces each citizen a custodian of the natural environment and compels the government to leave 60 percent of its land under forest cover for perpetuity. These highlight collective principles which have been central in confronting COVID-19 as the King, citizens, and government work in lockstep in supporting the nation.

Bhutan's unique historical, political-economic and demographic circumstances created the conditions for the germination of a rare, living alternative development paradigm, encapsulated in GNH. Rather than an "intellectual construct detached from practical experience", it resulted from the translation of a cultural, social and spiritual consciousness into development priorities (Priesner, 1999, p.27). That the focus of the distinctly indigenous vision of development was on happiness, resulted organically from historical and sociocultural features embedded in Buddhist and feudal values of a nation that was for many centuries isolated from the outside world (Priesner, 1999).

In the contemporary context, Bhutan's alternative development approach of GNH shares some similarities with other development alternatives such as degrowth globally, Buen Vivir in Ecuador and Bolovia and ubuntu in South Africa in that it places wellbeing at the centre of development (Verma, 2020). What sets GNH apart from other approaches is its encoding in Bhutan's constitution, development vision, five-year plans, institutions and policy discourses (Schroeder, 2018; RGoB, 2008). For instance, in 2008, Bhutan became a democracy with the adoption of its constitution which ensures "the State shall strive to promote those conditions that will enable the pursuit of Gross National Happiness" (RGoB, 2008, Article 9). It also stands in stark contrast to conventional approaches to development that narrowly focus on GDP-centric economic growth while externalizing environmental, social and cultural costs from the development equation. Rather, within GNH's holistic conceptual framework, four development pillars of socio-economic development, good governance, environmental conservation and cultural preservation are held in equal weight. GNH also manifests itself in others ways: as a moral concept, guiding principles for holistic development, the basis for policy and project screening, individual practice, global influence, and secularization of Buddhist concepts that allow GNH to be implemented in other global contexts (Verma, 2020). Together with the index of measurement, these different manifestations form the basis of a holistic, development alternative (ibid). Although Bhutan also measures GDP to track economic growth and progress as per global development reporting criteria, the GNH index measures national levels of happiness and wellbeing in Bhutan at regular intervals through a nationally representative survey, approximately every five years, using nine domains covering health, governance, living standards, education, culture, environment, psychological wellbeing, time use and community vitality (CBS 2015; Ura, 2015; Ura et al., 2012a, 2012b). It is through the lens of these nine domains, with more elaboration on the first three domains of health, governance and living standards, that we analyze Bhutan's engagement with the initial period of the COVID-19 pandemic.

Bhutan Engagement with COVID-19 in the Initial Period of the Pandemic

The compilation of globally reported COVID-19 cases by nation-state by John Hopkins University (Table 1) indicates that Bhutan effectively contained the virus in the early period of the pandemic, with twenty-four cases and zero deaths as of May 23, 2020². In doing so, its efforts earned recognition from various sources and authorities around the world (Drexler, 2021; Yoder 2021; Jesionka, 2021; Penjore, 2020; Eurasion Times Desk, 2020; Ongmo & Parikh, 2020; South Asian Monitor, 2020a, 2020b; Day & Sunar 2020), as well as within the country itself as reflected in news and social media. The central concern of this paper is to investigate, through evidence-based analysis, factors that evaluate the level of preparedness, resilience, and efficiency in Bhutan's early response, before turning to the question of whether lessons can be applied elsewhere, and situating this within broader question of international development. Here, we examine the myriad of ways the country responded and the challenges it faced in the face of containing the COVID-19 pandemic to the end of May 2020, through a diverse array of development sectors as reflected in the nine GNH domains of health. governance, living standards, education, environment, community vitality, culture, time use and psychological wellbeing.

Health

The total healthcare expenditure of Bhutan as a share of GDP is around four percent and is financed predominantly by the

² This paper refers to data on the initial period of COVID-19 cases globally and in Bhutan as of May 23, 2020. The authors recognize that worldwide and in-country numbers have changed significantly since then, and hope the foundations laid during the early stages of the pandemic will help to analyze later stages of the pandemic.

Government as mandated by the Constitution of Bhutan (Ministry of Health, 2020). Bhutan's annual expenditure on health makes up over eight percent of its overall annual expenditure (Ministry of Finance, 2018) and all aspects of healthcare, including medications, are free. Although the Constitution guarantees free and universal access to healthcare, the increasing cost of healthcare and declining external financial resources are challenges for healthcare (MoH, 2020a). The financial impact on the decline in Bhutanese tourism sector due to COVID-19 exacerbated this challenge, given that funds raised from tourism are used towards providing universal healthcare. Much of Bhutanese health infrastructure is under-resourced and under-staffed on the one hand, and scattered on the other due to Bhutan's dispersed population settlement patterns. Urban thromdes like Thimphu and Phuentsholing are densely populated and healthcare resources overstretched while most rural areas consist of small and/or isolated villages that are sparsely populated but still require access to universal healthcare. In addition, Bhutan only has about 376 doctors (MoH, 2020a) serving a population of over 700,000. The focus of the Ministry of Health, therefore, especially during the early stages of the pandemic, was on prevention.

Prior to the World Health Organisation's (WHO) declaration of the novel coronavirus disease as a pandemic on March 11, 2020, the government had already closed its land borders, advised its citizens to self-isolate and avoid social gatherings, instructed schools and colleges to close, and restricted the entry of all air traveling tourists. These directives from the government immediately followed Bhutan's first positive COVID-19 case, confirmed on March 6, 2020, of a 76-year old American tourist from the US state of Maryland (The Economic Times, 2020). In the days that followed, close to a 100 people who had come in direct contact with the index patient were traced and tested for COVID-19 (LeVine et al., 2020). To minimize any potential risk of spread, people who travelled with the tourist, including his partner, guides and driver were quarantined in a facility while others were home quarantined even after their tests were negative (ibid.). No other new cases were reported until the fourteenth day of this first quarantine period when the index patient's partner, also an American tourist, tested positive after repeat testing (Lamsang, 2020a). Given that this second positive confirmation of the virus was detected only on the last day of quarantine (fourteenth day), the government expeditiously extended its quarantine period for all returning Bhutanese to twenty-one days even though, at the time, the international WHO standard was set at fourteen davs (South Asian Monitor, 2020). The government's early actions and repeat testing of exposed individuals ensured no community transmission of the virus for several months after the first positive case. This was buttressed by free screening, monitoring, quarantine, medical care and recovery, contract tracing, counseling and elderly program as provided under its universal health care system.

By March 23, 2020, all land borders were sealed off with imports prohibited, except for the importation of medicines and essential food items (Khan, 2020). In the initial ban phase, agricultural produce such as vegetables, fruits and animal products were also banned to prevent the spread of the disease (North East Now, 2020). Following this phase, all imported food, their vehicle of transportation and driver underwent stringent sanitization and quarantine protocols. Air and ground passenger transportation was limited to repatriating Bhutanese living and working overseas on official, government sanctioned rescue flights and buses. All repatriated Bhutanese underwent mandatory quarantine in government-authorized facilities for twenty-one days, with testing undertaken on the twenty-second day, and subsequent release from guarantine with contact tracing if they tested negative. Following advice from the Ministry of Health's technical advisory group, this approach estimates 98.9 percent certainty that a person would not test positive later (Tshedup, 2020b). Some 120 quarantine centres were set up through the generous support of hotel owners who allowed the use of their hotel rooms, while free meals and security were provided by the government. This same coverage, including costs incurred for the testing, care and recovery, was extended to the first two COVID-19 foreign cases and other foreigners in similar situations. In return, those quarantined were required to comply with the rules of quarantine, for the safety of the population at large. After the first breach of the quarantine rules by quarantined youth, however, the government introduced penalties entailing the paying of Nu 21,000 (300 USD) to recover the cost of food during quarantine, as well as mandatory community service (Wangmo, 2020).

Ensuring that Bhutanese abroad who wished to return home were able to do so, regardless of their medical status, was a humanitarian decision, but one with risks. Although early repatriations came from United Kingdom, the United States, Canada, Australia, Dubai, Kuwait, Qatar, Maldives, Sri Lanka, Bangladesh and other countries, the majority of 24 positive cases in the country, during this early phase, were imported by those returning from high viral-load countries such as United States, United Kingdom, the Middle East, and India (BBS, 2020b). Given the government's strict quarantine stipulation and rigorous enforcement, these early cases were detected while the individuals were still in quarantine, thereby preventing further spread.

Bhutan's rigorous approach of widespread testing and mandatory twenty-one day quarantine were supplemented by campaigns for social and physical distancing, hand washing, mandatory mask usage in public places, rapid development of "Druk trace," a freely-available voluntary contact trace app, and overall vigilance with the support of the *desuups* (guardians of peace). Without these early preventive actions, it would have been impossible to contain the highly infectious COVID-19 in Bhutan. This is remarkable, given Bhutan's healthcare facility to population ratio is 3.9 facilities per 10,000 Bhutanese, and its doctor to population ratio stands at 0.5, demonstrably lower than the WHO recommended ratio of 1 doctor per 1000 people (MoH, 2020a). The ratio of 18.4 nurses to 10,000 Bhutanese is also one of the lowest in the region (MoH, 2020a). Based on careful analysis of the pandemic's global trend, the Minister of Health surmised that approximately eighty percent of COVID-19 cases would require hospitalization, and of one hundred infected cases, only five would require ventilators (Tshedup, 2020b). Although Bhutan has approximately one hundred ventilators, the greater concern was having enough qualified operators to use the devices. Furthermore, to minimize the risk of transmission, any person who tested positive for COVID-19 in Bhutan would need to be isolated under the Ministry of Health's care, an approach that is uncommon in other countries (Tshedup, 2020b). The Ministry of Health also developed specific plans in the event that Bhutan enters the Red Zone, the highest level of risk. These plans included maintaining zero deaths, providing early clinical treatment, and recalling all Bhutanese doctors who were pursuing higher education abroad to bolster health care professionals available in the country.

The government's initial proactive preventive measures, therefore, demonstrated an acute awareness of the country's low healthcare resource reality and assessment of the risks involved. They were evidently pragmatic resilience measures rather than actions of a country that had the luxury of time and resources. Some consequences of the self-isolation and social distancing measures in the early period of the pandemic resulted in the closure of public and social events, but in its stead, saw the rise of Bhutanese women and men engaging in nature walks, hikes and outdoor activities, while maintaining social distancing. As we elaborate below, they also demonstrated an early overall collective willingness and assumed responsibility by Bhutanese citizens to respond to a common threat.

Governance

The novel coronavirus disease, more than anything else in recent times, revealed the weaknesses of governance systems the world over and sometimes unraveled them, while also highlighting the strengths and characteristics of effective leaders. In effect, successful public health responses to the pandemic depended largely on leadership skills and ability to respond to citizens' concerns. Even with 340,000 global deaths from the virus by May 23, 2020, some nation-state leaders were unwilling or unable to address the hyper-infectious nature of the disease. In the so-called 'developed', 'modern' and 'free world' representing some of the most affluent societies such as the United States and the United Kingdom, science was ignored and/or health advisories were circumvented. Rather than leading by example, leaders refused WHO health advisories to wear masks or maintain physical distance, and instead let themselves be swayed by unfounded 'cures', populist opinions, social media memes, and the politicization of the disease for political or personal financial gain. In middleincome and some countries of the South, democratically elected leaders such as India's Narenda Modi and Rodrigo Duterte of the Philippines, decisively placed their countries under lockdown while Jair Bolsonaro of Brazil ignored warnings and failed to respond in a timely manner to the growing spread of the pandemic, with little responsiveness or patience for public opinion. The effects of these decisions have been devastating and fatal, especially for indigenous people and their fragile environments.

The Bhutanese leadership, from the first outbreak of COVID-19, have been guided by scientific data and relied on public health advisories. This was enabled partly by having a practicing medical surgeon and a former public health professional at the helm of the elected government as its prime minister and health minister respectively. Having leaders who understood and upheld evidence-based scientific information helped both in appreciating the seriousness of COVID-19 as it broke out in Wuhan and the threats of the disease to Bhutan, a landlocked country which lies just south of the Chinese border. In addition, King Jigme Khesar Namgyel Wangchuck, deeply respected and revered by Bhutanese citizens. compassionate leadership demonstrated as well as pragmatism, a rare combination of *jam* dhang nying-jay (loving-kindness) to those infected by COVID-19, including Bhutan's first COVID-19 foreign patients whom he personally conveved concerns about their welfare and speedy recovery. Demonstrating visible leadership in response to the pandemic, the King extensively toured every district in the country and interacted with citizens to listen to their concerns, took a first hand and direct role in stock-piling of provisions at the Indian border, and by Royal Command requested every possible scenario and risk be carefully thought through and planned for. Over and above changes in democratically elected government, which has seen three different parties in office since the country's first elections in 2008, the same year the fifth King was crowned, Bhutan has been endowed with the long-term, foresighted guidance of the King. His commitment to the wellbeing of Bhutanese citizens, as evidenced by his actions during the time of the pandemic, played a key role in Bhutan's timely COVID-19 response, further deepening respect and reverence towards him. This is substantiated by the proliferation of independent messages by individuals on social media that expressed continued or renewed devotion to the King, Nation and the value of being born Bhutanese, when compared to other countries in the world where initial COVID-19 responses tended to lack empathy, humanity and compassion. Another factor that supported a somewhat unified response was the lack of politicization of the pandemic by the opposition party, which demonstrated maturity, collectivity, and sense of common purpose.

A National Preparedness and Response Plan for Outbreak of Novel Coronavirus (COVID-19) was prepared by the National Preparedness Committee, an emergency committee, on February 25, 2020, before the first detection of the novel coronavirus in Bhutan. Under this plan, special isolation facilities were set up in major regional hospitals alongside flu clinics where screenings and testing for the virus could be carried out (MoH, 2020b). Additional ventilators were ordered, and personal protective equipment for health professionals and frontline workers were acquired and distributed. Widespread public health campaigns for physical distancing, hand washing, general lockdown and self-isolation were developed and implemented. In addition, the government, committed to keeping its citizenry informed through this pandemic, met with the press for daily updates and widely disseminated frequent public health notices and daily COVID-19 case updates, which were published in news and social media. These efforts continue to-date, thereby increasing public confidence in government, and the belief that their wellbeing was being taken seriously. This was evidenced by the increased number of articles and posts in social media by the public, highlighting pride and gratitude of being Bhutanese citizens.

In order to support Bhutanese citizens living outside the country, efforts were made by multiple government ministries to repatriate those who desired to return after the borders closed. To the end of May 2020, approximately two dozen rescue and repatriation flights brought back more than 4000 Bhutanese from the Gulf Region and the Middle East, the Maldives, Australia, the United Kingdom (MoFA, 2020). Bhutanese living in the Indian border town of Jaigoan who lacked affordable housing inside Bhutan were repatriated and sheltered in empty school buildings and temporary housing built by the armed forces and volunteers (Penjor, 2020). Those who tested positive for COVID-19 in places such as New York were taken, upon the King's command, to special apartments rented by the Government to house infected Bhutanese to enable their full recovery.

In addition to the rapid, pro-active responsiveness and benevolent initiatives of the King, the Prime Minister and government officials kept up vigilant monitoring through the assistance of the *DeSuups* (volunteer guardians of peace), while swift penalties on infringements to current guidelines contributed to Bhutan's successful initial fight against COVID-19. The fact that there was no community transfer approximately three months and longer after the index case emerged was a testament to the close cooperation and sense of common purpose between the people and government in keeping the virus at bay. This was echoed in the King's belief, as encapsulated in his now famous quote, "the reckless action of a single person...can undermine all our national efforts...it will require the unstinted cooperation of each and every person" (ROM, 2020).

Education

To contain the spread of COVID-19 and conserve hospital capacity, governments around the world instituted lockdowns, self-isolation, stay-at-home and social distancing orders which resulted in widespread school closures. For more than 1.5 billion students worldwide, translating to at least 9 out of every students, classroom learning was interrupted and 10 continued for many months after the initial outbreak (UNESCO, 2020). With no proven treatment for COVID-19 in the initial stages of the outbreak, containment measures continued to varying degrees in the face of the second waves of the pandemic. To prevent the possibility of an outbreak within Bhutan, all school campuses in Bhutan were closed since 19 March 2020 (OVC, 2020). Continued education depended on the deployment of remote learning strategies that attempted to meet the needs of different students in various locales. In addition, returning home from a residential district school posed a number of challenges to students. Aside from the psychological trauma of abrupt transitions, studying from home sometimes meant limited access to communication technologies for continued study, obligations of girls especially to carry out household, livelihood and community work, challenges of distributing printed materials during lockdown, and psychological impact of increased incidents of genderbased violence (Tshedup, 2020b).

In 2020, there were close to 200,000 students enrolled in the 1007 schools and institutions in the country (Ministry of Education, 2020). As teaching moved from classrooms to online platforms, several challenges emerged for educators and learners. To ensure the safety and wellbeing of students and to manage the impact of the coronavirus pandemic, the Royal University of Bhutan released a Response Plan for COVID-19 which delineated the following challenges students faced while learning from home: lack of internet connectivity, lack of access to laptop computers or smartphones, and engagement in

activities to help parents (OVC, 2020, p.i). These challenges were similar for all students. Reporting in Bhutanese media corroborated the concerns of the RUB, such as shortages of smartphones as reported by electronics stores due to a surge in purchases by students around the time when e-learning was rolled out in March 2020 (Yuden, 2020). It can be deduced from this that many Bhutanese students did not own a personal computer. This issue of accessibility to technology was exacerbated further for students who lived in areas with no reliable internet network and households where they were expected to contribute to helping their parents, relatives and neighbors with household, community, livelihood and farm work in addition to remote learning (Dorji, 2020).

Educators too were abruptly thrust into an unprecedented situation whereby they were required to move lessons and lectures online for which many were not trained. Yet, adapting quickly to the new reality of remote teaching, teachers worked to use technologies at hand, to communicate with students who had varied access to technology. Online social platforms such as WeChat and WhatsApp were used as a conduit to communicate with students, albeit especially challenging for students with illiterate or semi-literate parents. With the support of the government and the Bhutan Broadcasting Cooperation, teachers developed television programmes for students to learn from. The Ministry of Education created selfinstructional materials under the Education in Emergency Programme for remote rural and mountainous areas with limited access to the national television and the internet (MoE, 2020). Yet, even with the best efforts from the teachers and the government, remote teaching was unequal and limiting, especially for special needs students, children with learning difficulties or disabilities, and those living in remote places with poor internet and television connectivity. A key lesson in terms of resilience was the ability to adapt rapidly and flexibly in order to provide the expected education for students.

Living Standards

Since its emergence, COVID-19 has had major impacts on livelihoods and economies across the globe (Adhanom, 2020; Cascella et al., 2020). The pandemic similarly had grave impacts on many Bhutanese lives. Two decades ago, Bhutan was predominantly an agrarian society with more than eighty percent of its population engaged in subsistence farming with agriculture accounting for over thirty-five percent of the country's GDP (NSB, 2019). These figures have fallen dramatically in recent years with only fifty-eight percent of Bhutanese working in the agriculture sector and revenue from this sector accounting for less than sixteen percent of GDP in 2019 (Tshering, 2019). The decrease in agricultural output directly correlates with Bhutan's growing dependency on imported food which accounts to over thirty percent of all food consumed in the country (Chhogyel & Kumar, 2018). These intervening years, however, saw tourism emerge as a major growth sector, earning the highest amount of hard currency for Bhutan (Tshering, 2019). In 2019, tourism revenues accounted for nine percent of GDP (NSB & UNDP, 2020). The tourism sector, directly or indirectly, employed approximately 50,000 Bhutanese, which represents approximately 6.81 percent of the population and 16 percent of the working population (ibid.). and therefore, was a significant sector for Bhutan.

The COVID-19 pandemic hit the tourism sector the hardest everywhere. An initial study found that the threat of the coronavirus caused global tourists to cancel their plans and impacted the tourism industry globally (Hoque et al., 2020). When Bhutan restricted the entry of tourists immediately after the index case was confirmed, tour operators, hotels, tour guides and all auxiliary services supporting the tourism industry were directly impacted. With no clients, several businesses were forced to shut down. A rapid socio-economic impact assessment of COVID-19 in Bhutan revealed that over eighty percent of survey respondents reported facing three or more deprivations such as income loss, loss of livelihoods, food insecurity, indebtedness, etc.³, simultaneously leading to increased vulnerability (NSB & UNDP, 2020, p.2).

The pandemic revealed a skewed approach to development with recent overdependence on tourism and income generated from this sector. A key lesson stressed the importance of diversifying the country's economy, with greater attention paid to localization. Both the construction industry with its overreliance on foreign workers and tourism with its overreliance on foreign tourists proved extremely vulnerable to travel restrictions and border closures. Perception studies found that an overwhelming majority of respondents considered indigenous livelihood practices associated with localized agriculture, pastoralism and natural resources more resilient to the impacts of pandemics (Stouter, 2020), and therefore more stable, reliable and sustainable. This is supported by demographic data of those seeking kidu (wellbeing) or welfare support from the King's office (Lamsang, 2020b). As such, most applicants were urban dwellers whose market-driven employment and market reliant livelihoods were affected when businesses and enterprises came to halt or were severely affected due to the virus.

Foremost among lessons learned from the early stages of the pandemic was the applicability and relevance of indigenous knowledge. Semi-pastoralist communities in the highlands of Bhutan who stock-pile food and practice complex food preservation practices to ensure food security during harsh winter months when access to their already isolated villages are cut off, initially remained resilient to the impacts of the virus. This was in stark contrast to urban residents whose convenient, consumer-led lifestyles are severely affected when complex supply chains, including those emanating from

³ A Multidimensional Vulnerability Index for Tourism and Related Sectors (MVI-T) was designed for this specific study by the Oxford Poverty and Human Development Initiative (OPHI). It identified eight main deprivations: i) income loss, ii) coping strategy, iii) loss of livelihood, iv) food security, v) limited savings, vi) indebtedness, vii) vulnerable household members, and viii) tourism dependent.

foreign countries such as India, Thailand, Europe and other far-flung locales were more acutely disrupted.

Localization efforts ensured rapid response and self-sufficiency such as the government's ability to produce and distribute hand sanitizer, local Civil Society Organizations to produce hand-made face masks that follow international health standards, and repayment relief provided by national banks for Risk assessment, aversion people with loans. and preparedness for future impacts, such as the possibility of reduced food available in local markets, were addressed through the Prime Minister's appeal for households to stock approximately six months of food staples and essentials. In the initial phase of the pandemic, food shortages were minimal and food prices remained more or less stable.

Environment

As earth's atmosphere is affected by greenhouse gases, its natural capacity for environmental resilience and adaptive capacities are impacted negatively. The impact of human negligence towards the natural environment has led to the demise and decline of animal species, shrinking habitats, human-wildlife conflicts, and increased risks of pandemics. In the Himalayan region including Bhutan, climate-related changes have affected food security due to increase in extremes, with farmers facing more frequent floods as well as prolonged droughts with ensuing negative impacts on agricultural yields and increase in food insecurity (Hussain et al., 2016; Manzoor et al., 2013). Climate change has also exacerbated women's workloads, while barriers continue to exist in terms of their participation in governance and decisionmaking (Verma and Wangdi, 2018; Nellemann et. al., 2011). Hence, both climate mitigation and adaptation are paramount in response to the climate crises. This is of importance in high altitude mountain areas, where isolation, steep slopes, inaccessibility and hazard exposure of landslides, avalanches and glacial lake outburst floods are greater (IPCC, 2019).

Even though COVID-19 has seen global greenhouse gas (GHG) emissions fall by a greater extent than any other year on record due to massive global reductions and halt to air travel, closure of factories, falling of energy demands, and drop in vehicular transportation, the likely "percentage declines in 2020 would need to be repeated, year after year, to reach net-zero emissions by 2050" (Hepburn et al., 2020, p.4). When the two crises climate change and COVID-19 coincide, the impacts are exacerbated by a multiplier effect. The relationship between climate change and COVID-19 as put forth by Hepburn et al. suggests that the "climate emergency is like the COVID-19 emergency, just in slow motion and much graver" (2020, p.4). they both involve market failures, externalities, Yet engagement with science. resilience of governance/environmental/societal systems, political leadership, and action that hinges on public support (ibid.). While the response to climate change by many countries has been slow if not non-responsive or marked by failure to respond, the speed at which COVID-19 initially emerged prompted rapid responses due to its perceived risks, escalation and crisis over a short period of time.

In stark contrast, Bhutan's response to the climate crises has been commendable, with the country upheld as an example for the world, given it is the only country in the world that is carbon negative, absorbing three times more carbon than it emits (NEC, 2015; Nelson, 2015). This is supported by its constitution that specifies sixty percent of its land must remain under forest cover in perpetuity (RGoB, 2008), its policy aim to rely predominantly on organic agriculture by 2035 (Dema, 2020), its reliance on environmentally clean sources of revenue including run-of- the-river hydro-power, "high value-low impact" tourism that limits the number of tourists into the country annually, and regulation of international development organizations, foreign capital, development aid and foreign experts within its borders (Verma, 2017). In this regard, Bhutan was far ahead of the curve in terms of combating climate change when the pandemic hit.

While the positive relationship between climate change and COVID-19 such as a reduction in greenhouse gas emissions in other countries may be short-lived (Hepburn et al., 2020), Bhutan was well-placed in this regard with negative carbon emissions prior to the pandemic. Immediately following the pandemic, pollution and carbon emissions were lower than before, supported by enforced closure of businesses after 7 pm, reduced use of private cars and increased use of public transportation, and reduced vehicular movement due to closing of its borders. Taken together with the country's quick and decisive closure of its border to international flights, tourists and visitors, contributed to reduced environmental and climate change impacts, as well as the prevention of COVID-19 community spread. Most importantly, underlying these efforts was Bhutan's alternative development path of GNH which holds environmental issues in equal weight with socio-economic development, good governance and cultural preservation. This is in stark contrast with dominant economic development paradigms that externalize environmental costs from the development equation, and in particular, from GDP as the prevailing measure of 'progress'.

Community Vitality

Community vitality, or strong social institutions of support, reciprocity and interdependence, played a pivotal role in responses to the initial crisis. Community vitality is founded on a general sense of collective responsibility, consciousness, volunteerism and interdependence. Far from being monolithic or homogeneous, it reflects the idea of epistemic communities, that is, communities composed of persons who share roughly the same sources, modes of knowledge (Knorr-Cetina, 1981), or ways of viewing and giving meaning to the world. These notions have prevailed in both rural and urban Bhutan despite inroads made by globalization, GDP and externally-driven development based on individualism and mass consumerism.

While the GNH index indicates a decline in the measurement of community vitality between 2010 and 2015 (CBS, 2015), initial indications suggest that community vitality has undergone a resurgence in response to the pandemic. This is evidenced by a renaissance in collective responsibility and consciousness reflected in responses that are in lockstep between governance institutions and citizens. The King's Kidu (wellbeing) Fund and the Prime Minister's COVID-19 Relief Fund provided economic support to individuals, families and communities affected by the pandemic. Bhutan is not a wealthy nation and has a GDP per capita of 3555.10 USD (ADB, 2019). Though many of its citizens do not have a great deal of material resources to begin with, and due to the pandemic many businesses were in debt and likely to be further impacted because of the pandemic-induced economic downturn, it was remarkable to observe unprecedented charitable donations made to both funds, demonstrating generosity through the customary practice of dana (giving). Parliamentarians unanimously donated a month of their personal salaries to the COVID-19 relief effort, and donations were made from ordinary citizens, business people, farmers, organizations and the Bhutanese diaspora. Other acts of collective response included charitable donations by hoteliers of their hotel facilities to the government as quarantine centres, agricultural produce by cash-strapped farmers, transportation services by taxi drivers, monetary and in-kind contributions by businesses, rent reduction and/or relief by owners of houses and apartments, trucks and equipment by contractors, etcetera. Also notable was the over nine thousand applications initially made by Bhutanese citizens for three thousand available positions to act as desuups (volunteer guardians of peace) in response to COVID-19 (Kuensel, 2020b).

Culture

While the GNH index predominantly measures tangible forms of culture and intangible forms of formal cultural practices, intangible forms of culture such as everyday norms, practices and beliefs played a significant role in combating the pandemic that require attention (Thin et al., 2017). Collective responsibility is related to cultural norms and practices, further influenced by Buddhist and spiritual consciousness about interdependence, *dana* (giving), compassion, lovingkindness and service to others. Although changing, diverse and non-monolithic, they shape responses to COVID-19 in Bhutan to varying degrees. They were part of the cultural and spiritual landscape during the pandemic, with Bhutan's top religious leader, the *Je Khenpo*, offering blessing and oral transmissions of the Medicine Buddha teachings on live national television and social media channels to thousands of devotees, and monks and nuns across the hundreds of monasteries in Bhutan conducting daily prayers and meditation for the nation, its people, the world and all sentient beings.

Cultural norms regarding contributing to the greater good, providing service to others and giving to those in need played a key role in Bhutan's response. The manner in which cultural norms regarding compassion and kindness prevailed over fear of infection spread, is perhaps best exemplified by the case of Bhutan's first COVID-19 cases. Following the COVID-19 positive cases in March outlined above, Bhutan immediately closed its borders and provided full medical care, support and counseling to anyone infected. This included the now famous case of the first two people infected by the virus: two American tourists who travelled to Bhutan after being infected by the pandemic while vacationing in India. As widely reported by Washington Post (Slater, 2020), while the nation prayed for their recovery, the tourists recovered and publicly expressed gratitude for receiving the best medical care, treatment and attention possible from Bhutanese doctors, nurses and government officials, as well as personal attention and compassion from the King.

Other cultural norms that played a role in ensuring a sense of solidarity and collectivity had to do with practices that create a sense of community at the local level. Common cultural practices in Bhutan include sharing one's meals with others. For example, in offices across the country, people often bring their individual meals to the lunch table to be shared with colleagues. Similarly, sharing a meal in local restaurants and restaurants-cum-bars provides a sense of solidarity and community, and important support mechanisms in the face of a pandemic that many Bhutanese women, men and children had never experienced before in their lifetimes. Sharing food, supplies and other forms of support and service to others between neighbors, friends, extended family and relatives in villages, towns and cities is common in Bhutan. These cultural practices helped individuals get through the crises in its initial stages, both through psychological support and sharing of material and monetary resources. Information technologies and social platforms such as WhatsApp, Facebook, Instagram, Twitter, etc. provided conduits for sources of information, cultural activities such as song and dance, and for people to provide social support towards one another during the initial stages of the pandemic.

Time Use

In late March 2020, Bhutan instituted lockdown measures that included work from home, businesses closures after 7 pm, travel restrictions between districts, and border closures for tourism, and limited trade to essential goods under strict quarantine procedures. This entailed a slowdown in the formal economy, with no foreign tourists and fewer Bhutanese men and women frequenting restaurants, shops, markets and other income-generating locales due to fear of spread and lockdown measures. As a result, more Bhutanese were spending time confined to their homes, carrying out subsistence agriculture, and engaging in outdoor activities including nature walks and hiking while social distancing.

Initial estimates from closure of foreign tourism indicated a national revenue loss of 4.4 million US dollars between January 15 and March 23, 2020 after 2550 international tourists cancelled their trips due to COVID-19, excluding cancellations from regional tourists (Rinzin, 2020). The downturn in an economy that is heavily dependent on tourism resulted in limited work for tour guides, hotel and restaurant staff, shop-keepers, etcetera, who turned to alternative modes of livelihoods and/or subsistence and informal activities. In effect, more people were spending time in their homes and extended households pursuing subsistence and/or small-scale agriculture, food production, and small retail, online businesses or taxi services. The pre-existing gender division of labour and women's triple burdens of household, livelihood and community work increases their work time while decreasing their leisure time (Ura et al., 2012a, 2012b; Verma & Ura, 2017). During the time of COVID-19, this trend was further exacerbated to their disadvantage, as their work time further increased. Prior to the pandemic, the out-migration of men to urban centres was reinforced by both patrilineal and matrilineal land tenure relations, which requires women to "remain behind" in rural homes and villages to carry out unpaid household, agricultural and care work. However, COVID-19 forced many men to return to their rural homes to take up small-scale cash crop farming, subsistence agriculture, livestock breeding and other activities, although some continued to remain in urban centres in desuup positions, government posts, and other work. As the importance and desire for self-sufficiency and localization increased, in the form of farming, home gardening and other activities, instances of gender-based violence increased in both rural and urban settings. As noted earlier, education by elearning during the pandemic placed greater pressure on girls, given expectations for them to carry out household, community and livelihood work.

Psychological Wellbeing

Globally and in other countries, COVID-19 affected the health, safety and wellbeing of individuals causing insecurity, confusion, emotional isolation, stigma, and also impacted communities subject to economic loss, work, school closures and limited interaction (Pfefferbaum, 2020). These effects translated into a range of emotional reactions such as distress, anxiety or psychiatric conditions, unhealthy behaviors such as excessive substance use, domestic violence, or noncompliance with public health directives such as self-isolation, quarantining or social distancing by people who contracted the disease or were in the general population (ibid.). In Bhutan, in order to respond to psychological impacts of COVID-19, a two-pronged approach was taken: to support those individuals undergoing the long twenty-one day quarantine, and to support the general public. When the pandemic first broke, Bhutanese men and women reacted with panic, which also prompted panic buying. However, this quickly subsided as the government ensured stock-piling of food and supplies and freely distributed hand sanitizers and face masks. Upon Royal Command, a mental health and psychosocial response team was formed to protect the mental wellbeing of people in guarantine, as well as to provide COVID-19-triggered psycho-social mental health counseling and support to those who experienced an increase in anxiety or fear as a result of the pandemic (Tshedup, 2020). Under universal health care provisions in Bhutan, this entailed free counseling, free access to mobile health centres, and free phone lines for victims of domestic violence or substance abuse. In order to respond to the needs of those who showed withdrawal symptoms to drugs, such as youth quarantined in quarantine centres, the national mental health and psychosocial response team worked with the Bhutan Narcotic Control Agency to develop a standard operating procedure (ibid.). The early period of the pandemic highlighted issues faced by youth, especially substance abuse, and by women who experienced genderbased violence exacerbated by social distancing and home confinement. Although the GNH findings indicate that women experience greater negative emotions than men (Verma & Ura, 2017), there exist critical gaps in data in general, but more so with regards to gender data pertaining to psychological wellbeing in relation to the pandemic.

Reflections and Lessons from Bhutan's Initial COVID-19 Responses

Some argue that Bhutan is an 'outlier', given its special context-specific historical, cultural, spiritual, political, economic, ecological, demographic and geographical circumstances. There is little question that it is a unique country, as the last remaining culturally-intact Himalayan Kingdom. Indeed, this is what attracts travelers, tourists and pilgrims from around the world to make the journey to Bhutan. However, this does not mean that lessons from Bhutan cannot be considered and engaged elsewhere. As mentioned earlier, various elements of GNH, the foundation for Bhutan's response to the COVID-19 pandemic, have been regularly used, referenced, scaled out and up across the world, as well as provided entry points for rethinking development and conventional economics beyond the narrow confines of GDP (SNDP, 2013; RGoB, 2012; United Nations, 2012). Bhutan's ability to respond initially to COVID-19 was shaped by its conceptual framework of GNH, based on a holistic and balanced approach to development. This is critical, as it allowed Bhutan in the early stages of the pandemic to avert heavily economically influenced and short-sighted COVID-19 approaches taken elsewhere, which widened economic inequality, enabled elite capture of wealth, caused political instability, eroded social cohesion, and failed to contain the virus leading to widespread infections and fatal deaths.

The case of Bhutan illustrates several critical factors that enabled a resilient response to COVID-19 in the first period of the pandemic. First, as Bhutan is an under-resourced country, the Bhutanese case proves that not a great deal of resources were needed to initially respond to the pandemic. This is in stark contrast to well-resourced 'developed' nations in the North that were not able to adequately respond to the pandemic, despite their wealth. Second, critical to the response to COVID-19 was evidenced-based, scientifically-led analysis, planning and implementation by the government, which was able to quickly adapt to changing realities and avoid overloading its healthcare systems. For example, this was reflected in widespread testing, border closure, retraining of tourist guides as agriculturalists, construction workers, desuups, and the swift increase in quarantine days from fourteen to twenty-one days, based on rapid analysis of the second COVID-19 case that was detected only on the fourteenth day of guarantine. This extension of guarantine period played an important role in detecting the virus in other imported cases, and preventing its further spread. Third,

strong, early, decisive and responsive measures by the government such as closure of borders, halt to tourism and passenger flights, widespread testing, and the development of a preparedness and response plan and emergency committee as early as February helped to contain the virus. Fourth, was the importance of strong, unified leadership in lockstep with its citizenry at a time of crisis. Bhutan's response to the pandemic by its leadership was able to garner public support, trust and respect from its citizens, which proved critical in ensuring a collective response. Rather than being monolithic or homogeneous, it was characterized by active debate. openness to critical feedback and discussion as evidenced on social media, which strengthened decision-making through reflection and adjusting approaches in response to citizens' concerns. Fifth, localization efforts such as the production of hand sanitizers, face masks and scaling out local agriculture helped to contribute to the national response and avert shortages of these important commodities. Sixth, was the carefully thought out scenario planning, that valued safety and wellbeing. Even though tourism is one of Bhutan's biggest revenue generators, the welfare and safety of Bhutanese citizens took precedence, with government responses indicating that tourists could only be expected by 2022, and a full tourist numbers would likely occur only in 2025 (Rinzin, 2020). Seventh, is the importance of collective consciousness and community vitality, which highlights cultural values of charitable giving (dana), service to others and robust social institution and cultural practices. Such values transcend beyond Buddhist values, and are reflected in other spiritual and secular practices across the world that value compassion, empathy and harmony with nature. Eighth, is a focus on what matters most in life, the happiness and wellbeing of human and sentient beings, whereby happiness, in this sense, is distinct from "fleeting, pleasurable and 'feel good' moods so often associated with the term [happiness]" (Thinley, 2009, cited in Karma Ura et al., 2012a, p.7). In this way, wellbeing within GNH is about deeper, meaningful, and long-term attainment of happiness, rather than temporary, superficial forms. This enabled wise and foresighted decision-making in response to the COVID-19 pandemic, while noting the impermanence of things including the contagion.

While Bhutan's response to COVID-19 was exemplary when compared to other locales in the world, there were also some research and policy gaps that require attention in the future. These included gendered impacts and effects of the pandemic gender-based violence, gender differences such as psychological wellbeing and decision-making, and the increase in women's work, the need to diversify the economy away from a focus on tourism and its ancillary services and facilities, further localization efforts that take into account food security and organic agriculture, the problem of rural-urban migration and rapid urbanization, youth unemployment leading to outmigration to foreign locales for low-paying, pink and blue collar jobs, and capturing environment benefits through clean energy and transportation solutions such as reduced carbon emissions due to fewer cars used during the pandemic, even as Bhutan remains the only carbon negative country in the world.

Conclusion: Rethinking 'Development'

Perhaps the greatest legacy of COVID-19 within the landscape of development was the way it laid bare the ability of different development conceptual approaches to respond to the rapid and furious spread of the pandemic. In the initial stages of the pandemic, countries where conventional, market-led and GDPcentric approaches as the sole indices of measuring 'progress' did not fare well. For instance, BRIC and affluent countries of the North were most impacted by COVID-19. Further still, countries such as the United States which features a hyperindividualistic, mass-consumption approach suffered the most, with the highest number of pandemic cases in the world (1.6 million cases on May 23, 2020) at the initial period of the pandemic – a status that remains tragically unabated.

In the initial onslaught of the COVID-19 pandemic worldwide, the inability and failures of conventional approaches to development to respond to the pandemic revealed deep flaws,

the imbalanced privileging of materialistic such as and economic factors over environmental, health, culture, social and wellbeing. The evidence indicates that development unwaveringly focused on economic growth during the time of a pandemic, lead to unequal exchange and elite capture, inequitable wealth gaps and accumulation even at a time of negative growth, gender inequalities, spread of infections, elevated fatal deaths of humans, and the under-valuing of all forms of life and our common responsibility towards them. This in turn raises critical questions about inherent flaws within conventional development approaches led by mainstream economics. It also raises interest and stakes in the way development alternatives and alternative economic pathways such as GNH provide an alternative set of moral concepts to view the pandemic, and most importantly, how it fared against such unprecedented pressures.

In the face of growing climate crises caused by human overexploitation and negligence towards the planet and all its inhabitants, it is likely that this will not be the last pandemic we will face in our lifetimes. While scholars and development practitioners have been calling for new economic and development thinking that garners an urgent transition from GDP to sustainable degrowth driven by indicators of wellbeing rather than never-ending growth, Bhutan has been actively pursuing and operationalizing an alternative approach that holistically values people, livelihoods, the environment, culture and good governance. It must be noted that this has been occurring as per Bhutan's middle path of following both GNH and GDP. Many months after the initial phase of the pandemic, the latter is reported to have plummeted dramatically to negative numbers. The same cannot be said about the former, or least not to the same extent. Initial evidence framed against the nine domains of GNH suggests that while wellbeing and happiness have understandably been tested in a myriad of ways, they are still very much part of the Bhutanese landscape, persevering, resilient and in some cases flourishing (in the case of community vitality, for instance) in response to onslaught of the pandemic.

This paper has explored, through the effects of COVID-19 on various development sectors in Bhutan, the degree to which GNH has been resilient to the pandemic. It has explored what Bhutan's approach, buttressed by GNH, can potentially teach us. It has also reflected on whether such learnings can continue to be applied elsewhere, in other national contexts, as has been the case before the pandemic hit. In this regard, GNH has withstood one of the greatest tests of time. Even for its critics and cynics, its ability to inform policy-making in order to avoid fatalities in the early stages of the pandemic and stop the spread of the virus has been commendable. This set up the conditions for Bhutan to remain without community spread and fatal deaths caused by COVID-19 for months afterwards. From the time of its first case, the country remained safe from the spread of pandemic for almost nine months, which in and by itself is commendable. Hence, it is no longer a question of whether GNH is a resilient development pathway, but how it can be scaled out and up to dislodge and disrupt problematic, conventional approaches to development that have failed to protect human life and wellbeing elsewhere during the initial global outbreak of COVID-19. In this regard, while Bhutan can be considered an 'outlier' because of its unique context-specific characteristics, it is simultaneously a successful role model that provides valuable lessons for dealing resiliently with crises such as pandemics for other nations to reflect and learn from.

In a rapidly changing and uncertain world, a holistic and balanced development approach such as GNH is urgently required for resilient, holistic and sustainable responses to future global shocks. This in turn rests on disrupting the very concept of 'development' to ensure meaningful, sustainable and equitable wellbeing outcomes. During the time of COVID-19, the division of countries by their 'developed' and 'developing' status did not seem to matter. Rather, a small resource-strapped 'developing' country such as Bhutan fared much better in combatting the pandemic than more affluent, 'developed' countries. The COVID-19 pandemic challenged received wisdom about 'development', upending hegemonic logic. In the initial stages of the pandemic, it appeared not to matter whether a country was resource-laden, powerful, 'democratic', or big. Many big, rich, 'developed' economies with hyper-individualistic and consumer-driven cultures devoid of universal health care, for example, proved underprepared, disorganized, politically polarized, uncoordinated and under-resourced for the pandemic whereas smaller, 'developing' economies were more resilient in response to the disease, losing fewer lives whilst being able to protect their citizens, healthcare and other essential workers. Most importantly, small land-locked 'developing' nations such as Bhutan and Lesotho, and small island states of the Pacific and the Caribbean such as Kiribati, Tonga, Samoa and Saint Lucia fared better in combating and isolating the COVID-19 virus. In this sense, the meaning of 'developed' and 'developing' nation was disrupted and ruptured, requiring a deep rethink of the very concept of 'development' itself.

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