



THIRD CHILD PLUS PROGRAM (TCPP)

Framework and Implementation Guideline



Office of Cabinet Affairs and Strategic Coordination
Royal Government of Bhutan

June 2026

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ROYAL GOVERNMENT OF BHUTAN

PRIME MINISTER

FOREWORD

The evidence is unambiguous. Bhutan's fertility has declined to near or below replacement level, 8,153 births were registered in 2024 against 11,001 a decade earlier, and births at the third order and above, the focus of this program, have fallen by 27 percent since 2020. These are not abstract statistics. They represent real and compounding pressures on Bhutan's workforce, fiscal sustainability, and the social fabric of communities across the country.

Following a comprehensive situational assessment of Bhutan's population dynamics conducted by OCASC, the Cabinet approved the Third Child Plus (TCPP) Program to address this challenge. This Framework and Implementation Guideline provide the overarching policy and operational framework for the Program, setting out its objectives, eligibility criteria, institutional roles and responsibilities, benefit disbursement procedures, and monitoring and evaluation mechanisms to ensure effective, transparent, equitable, and accountable delivery.

The TCPP is also embedded within a broader government commitment to creating a genuinely family-friendly Bhutan. Complementary measures on childcare, flexible working, parental leave, and fertility services are tasked to line ministries in this framework, recognizing that a cash incentive alone cannot reverse structural barriers to family formation.

I am deeply honored and privileged that this Program is launched on the 4th of June 2026, coinciding with the Birth Anniversary of Her Majesty the Gyaltshen, Jetsun Pema Wangchuck, an auspicious occasion that lends special meaning to a program devoted to children, families, and national renewal. I extend sincere thanks to all partner agencies for their collaborative commitment, and to the UNFPA Country Office in Bhutan for the financial support that made this work possible.

(Tshering Tobgay)

ACKNOWLEDGEMENTS

The Third Child Plus Program (TCPP) Framework and Implementation Guideline is the product of a coordinated effort across the Royal Government of Bhutan. The Office of Cabinet Affairs and Strategic Coordination (OCASC) gratefully acknowledge the contributions of the Ministry of Health, Department of Civil Registration and Census (DCRC), Ministry of Home Affairs, Public Service Delivery Division (PSDD), PMO, The PEMA Secretariat, Ministry of Finance, and Local Governments for their technical inputs, data, and information in the development of this document.

The OCASC would like to express its sincere gratitude to all other stakeholders who have contributed to the formulation of this Framework and Implementation Guideline. Special appreciation is extended to the UNFPA Country Office in Bhutan for its generous financial support for the development of this framework and guideline. This initiative reflects the strong and enduring partnership between the Royal Government of Bhutan and UNFPA in advancing sustainable population development and promoting the well-being of Bhutanese families.

LIST OF ACRONYMS

Acronym	Full Form
ANC	Antenatal Care
CCT	Conditional Cash Transfer
DCRC	Department of Civil Registration and Census
DPHOs	District Public Health Officers
FYP	Five-Year Plan
GovTech	Government Technology Agency
HAS	Health Assistants
LGs	Local Governments
M&E	Monitoring and Evaluation
MCH	Maternal and Child Health
MOF	Ministry of Finance
MoH	Ministry of Health
MoHA	Ministry of Home Affairs
MoU	Memorandum of Understanding
NCWC	National Commission for Women and Children
Nu.	Ngultrum (Bhutanese Currency)
OCASC	Office of Cabinet Affairs and Strategic Coordination
PEMA	The PEMA Secretariat
PMO	Prime Minister's Office
PMU	Program Management Unit
PNC	Postnatal Care
PSDD	Public Service Delivery Division
RCSC	Royal Civil Service Commission
SDG	Sustainable Development Goal
SMS	Short Message Service
SoEs	State-owned Enterprises
TCPP	Third Child Plus Program
TFR	Total Fertility Rate

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A. Framework

1. Background

Bhutan is undergoing a significant demographic transition marked by declining fertility, rising overseas outmigration, and an increasing ageing population, with far-reaching implications for labour supply, economic sustainability, and social protection systems. The Total Fertility Rate (TFR) declined from 5.6 in 1994 to 2.5 in 2005, and further to 1.7 in 2017. The National Health Survey 2023 reported the TFR at 2.0, which is below the replacement level of 2.1. Consistent with this trend, live births have continued to decline sharply, with 8,153 births registered in 2024 (Bhutan Civil Registration System), a 5.7 percent decrease from 8,649 in 2023, and representing a 34 percent decline from 11,001 births in 2015.

Concurrently, Bhutan's demographic profile is changing rapidly with an increasing ageing population. The proportion of the population aged 65 and above stood at 5.9 percent in 2017 and is projected to rise to 7.4 percent by 2027, 9.6 percent by 2037, and 13.4 percent by 2047, meaning that nearly one in five Bhutanese will be aged 65 and above by mid-century. This rapid ageing will significantly intensify old-age dependency and pressure on health, pension, and social protection systems.

These trends are compounded by rising overseas outmigration, particularly among young and working-age Bhutanese. As of May 2026, an estimated 71,327 Bhutanese were residing across 140 countries worldwide. Of these, 39,460 are living in Australia, accounting for approximately 55 percent of the Bhutanese population overseas. While migration brings remittance benefits, its concentration among prime working and reproductive ages further constrains labour force participation, domestic fertility, and long-term population momentum.

The Third Child Plus Program (TCPP) is a strategic intervention aligned with Bhutan's 13th Five-Year Plan objectives and global development goals. It directly supports Social Outcome 3, Output 3 (Sustainable Population Maintained) of the 13th FYP, and contributes to SDG 11 (Sustainable Cities and Communities) by helping stabilize Bhutan's age structure in support of resilient labour markets, cohesive communities, and sustainable urban development.

2. Rationale

While Bhutan provides free antenatal and postnatal healthcare services, the financial burden of raising a child, compounded by the rising cost of living, remains a key factor influencing fertility and childbearing decisions among families. Within this context, the Third Child Plus Program (TCPP) is designed as a time-bound, evidence-based response to Bhutan's declining fertility. Data from the Bhutan Civil Registration and Census System show that there are 62,271 women with two or more children within the age range of 25–45 years. This cohort is either already in, or rapidly approaching, late childbearing age, significantly reducing the likelihood of a third birth and above. The Program also extends to fourth and higher-order births, recognizing that families with three or more children face the greatest economic disincentives to further childbearing. Moreover, births at these higher orders have experienced the most pronounced proportional declines in recent years, underscoring the need for continued support.

Accordingly, this cohort represents a diminishing demographic opportunity. Without targeted intervention, a substantial number of potential third and higher-order births are likely to be foregone as women age out of their reproductive years, limiting the country's capacity to stabilize population growth and strengthen its future human capital base. The TCPP aims to support childbearing decisions by easing the financial burden faced by families considering a third or subsequent child. The program's focus on the third child and above is a strategic and fiscally prudent choice. First and second births continue to occur with existing health and social support, while third births and above are particularly sensitive to economic pressures such as childcare, education, housing, and work–family balance. Targeting third births and beyond, therefore, offers the highest marginal demographic impact within a constrained fiscal environment.

Furthermore, recent trends reinforce the urgency and priority to act on the higher-order births. Third-child and above births have declined from 2,772 in 2020 to 2,038 in 2024, a fall of 27 percent. The TCPP is thus designed as a voluntary, targeted, and time-bound measure to prevent irreversible demographic losses, with scope for future review and expansion as fiscal space permits.

3. Third Child Plus Definition

For the purpose of the TCPP, the “Eligible Child” is defined as any living biological child of a mother whose birth order is the third or higher (i.e., third child, fourth child and any subsequent child thereafter), as registered in the Civil Registration and Census System.

4. Objective

The Third Child Plus Program (TCPP) is expected to yield several short and long-term socio-economic benefits by supporting families that choose to have three or more children. Some of the key objectives are as follows:

4.1 Decrease gap between the desired and actual family size and improve maternal and child health (MCH)

Evidence indicates that high living costs, limited access to childcare services, job insecurity, and the absence of adequate family-friendly work policies significantly affect an individual’s decision on family formation and expansion. The TCPP is expected to reduce the financial burden of the family to raise children and thereby reduce the gap between desired and actual family size and thus, increase the Total Fertility Rate (TFR) in the long-term. Beyond its demographic objectives, the program is expected to improve maternal and child health outcomes. By encouraging completion of all recommended Antenatal Care (ANC) and Postnatal Care (PNC) visits, the TCPP supports healthier pregnancies, safer deliveries, and better early childhood development, reinforcing the country’s broader public health goals.

4.2 Economic Security for Mothers and Families

The incentive is intended to offset the costs of essential child necessities, including nutrition, diapers, and out-of-pocket childcare expenses. It provides targeted financial relief, especially to middle- and lower-income families, for whom the birth of an additional child can place significant strain on household budgets. This support allows mothers adequate time and resources to care for their newborn without the pressure of an early return to work. In essence, TCPP invests in the family unit, recognizing the costs of raising children and rewarding parents who choose to contribute to the nation’s demographic growth.

4.3 Workforce and Demographic Dividend

Children born under this program will, within approximately two decades, transition into the working-age population, helping to rebalance the dependency ratio and expand the productive labour force. Sustaining this demographic base is critical for long-term economic growth, innovation, and national development. In addition, children raised in families supported by the incentive are likely to benefit from improved early-life conditions, which evidence consistently links to better health and educational attainment and, by extension, a more productive and capable workforce in adulthood.

4.4 Social and National Well-Being

The TCPP is expected to reinforce the social value of family while directly responding to the issue of declining fertility and ageing population. A sustained increase in births supports community vitality, intergenerational continuity, and the preservation of cultural values across generations. Beyond its demographic objectives, the TCPP recognizes the disproportionate caregiving burden borne by women and takes a concrete step toward offsetting it through state support. This acknowledgement advances gender equity and contributes indirectly to improved maternal and child health outcomes by reducing financial and caregiving pressures on families.

5. Ethical and Legal Considerations

Legal and ethical safeguards have been embedded into the TCPP to ensure the program upholds human rights, gender equity, and child protection standards. The program explicitly respects reproductive autonomy and does not discriminate on the basis of income, marital status, or geographic location, provided the child is a registered Bhutanese citizen. Participation in the program is entirely voluntary, and no family is pressured or coerced into having additional children.

The program also includes provisions for safeguarding child welfare. Where credible concerns arise regarding a child's care or well-being, The PEMA Secretariat shall review the situation and advise the PMU on whether benefits should be suspended.

All personal information collected for the administration of the program is protected under data protection and privacy laws and policies. Family data is stored securely and used only for the purpose of administering benefits with strict access controls and consent protocols.

6. Institutional Mechanism

The TCPP will operate through a coordinated multi-agency mechanism to implement, monitor, and evaluate the program. The Office of Cabinet Affairs and Strategic Coordination (OCASC) shall provide overall oversight, while the Ministry of Health shall serve as the lead implementing agency. A Program Management Unit (PMU) shall be established under the Ministry of Health, responsible for the day-to-day management and delivery of the program.

The Public Service Delivery Division (PSDD) under the Prime Minister's Office shall ensure that assistance, including grievance redressal, are available through existing service counters at the Integrated Service Center in Thimphu, Dzongkhag Service Desks across the Dzongkhags, and Community Centers in the Gewogs. The Department of Civil Registration and Census (DCRC) shall verify birth eligibility and update beneficiary status. The Ministry of Finance shall ensure timely fund allocation and transparent disbursement. The PEMA Secretariat shall safeguard child welfare by reviewing cases of concern and recommending corrective actions to the PMU and relevant stakeholders.

The roles and responsibilities of key institutions are detailed in Part B, Section 5.1: Delivery Platform and Institutional Arrangements.

7. Other Interventions

Recognizing that declining fertility is a complex and cross-cutting issue, cash incentives alone are not adequate to address it. Creating enabling, family-friendly conditions is critical to approach the issue holistically. Considering this, agencies and institutions shall initiate key measures as follows:

- 1. Ministry of Finance:** Review, assess and introduce pro-family fiscal measures and incentives.
- 2. Ministry of Industry, Commerce, and Employment:** Review, assess and implement initiatives to create a conducive framework and regulations on the import of foreign childcare support workers.
- 3. Ministry of Health:** Review, assess and initiate expansion of fertility and other clinical services.
- 4. Royal Civil Service Commission:** Review, assess and initiate measures on Parental leave, Flexi working, Work from Home, Increase Paternity leave and improve work-life balance.
- 5. National Commission for Women and Children:** Review, assess and implement the establishment of creches.
- 6. SoEs:** Review, assess and implement initiatives to improve work-life, flexi working, Work from Home, and improve balance, establish creches.

B. Implementation Guideline

The implementation of the TCPP will involve a coordinated, multi-agency effort to ensure efficient delivery of benefits to all eligible children (third child and above) and compliance with program conditions.

1. Approach

The TCPP will be implemented as a Conditional Cash Transfer (CCT) scheme designed to encourage families to have a third child or more. As a CCT model approach, the program provides a direct cash benefit to eligible children, conditional upon fulfilment of the requirements as stated in the guideline.

2. Coverage and Benefit Start Date

The Program shall be effective from 4 June 2026. The following children shall be eligible for benefits, provided all other eligibility criteria are met:

- 2.1 Any third or higher-order child born to a mother on or after 4 June 2026 (from 12:01 AM onwards); and
- 2.2 Any third or higher-order child born before 4 June 2026 who has not yet attained 3 years of age as of 4 June 2026.
- 2.3 For children covered under Clause 2.2, the benefit shall commence from 4 June 2026 and continue until the child attains 3 years of age. No retroactive payment shall be made for any period prior to 4 June 2026.

The Government shall notify the general public of any changes to the eligible birth orders, or the discontinuation or closure of the program, as deemed appropriate.

3. Eligibility Criteria

A child must meet all of the following criteria to qualify for TCPP benefits.

3.1 Citizenship

3.1.1 The child must be a registered Bhutanese citizen.

3.2 Birth Order

3.2.1 A living biological child of a mother whose birth order is the 3rd or higher (3rd, 4th, 5th and any subsequent birth thereafter), as registered in the Civil Registration and Census System, shall be eligible under the program.

3.2.2 The birth order of the child shall be counted from the mother's side, as registered in the Civil Registration and Census System.

3.2.3 Remarriage, separation, divorce and adoption shall not reset the birth order of the child.

3.2.4 Each eligible child shall be enrolled independently; a mother may simultaneously receive benefits for multiple eligible children of different ages.

3.3 Multiple Births

3.3.1 Children born in a multiple birth event shall be assigned birth orders by counting consecutively from the mother's existing living biological children.

3.3.2 All children from that multiple birth assigned a birth order of three or above under (3.3.1) shall each be independently eligible for TCPP benefits, regardless of the total number of children born in the event.

4. Conditions for Maintaining Eligibility

Since the program is designed to benefit the mother and each eligible child (third child and above) until the child reaches 3 years of age, beneficiaries are expected to meet certain criteria for maintaining their eligibility.

4.1 Survival of Beneficiary Child

- 4.1.1 In the unfortunate event that a beneficiary child passes away before reaching 3 years of age, the payments for that child will be discontinued from the following month onward.
- 4.1.2 In accordance with the Civil Registration and Census rules and regulations of the country, the beneficiaries (parents, legal guardians and primary caregiver) must report the death of a child within 5 days of the incident either to the PMU or the respective local government authorities.
- 4.1.3 Local Government authorities and Public Health Centres shall independently report the death of a beneficiary child to the PMU and the Department of Civil Registration and Census (DCRC) within five working days of the death coming to their attention, irrespective of whether the family has already reported the matter.
- 4.1.4 The DCRC shall share information on the death of children with the PMU on a monthly basis.
- 4.1.5 Upon receipt of information from the DCRC, the PMU shall initiate the termination of monthly payments for the deceased child per clause 4.1.1, while ensuring that benefits for any other eligible siblings enrolled under the program remain unaffected.
- 4.1.6 Where a mother or legal guardian fails to report the death of a beneficiary child, any benefits disbursed from the month following the child's death shall be recoverable by the PMU. The PMU shall issue a formal notice of recovery to the concerned party, specifying the amount to be refunded and the timeline for repayment.
- 4.1.7 Wilful concealment of a beneficiary child's death for the purpose of continuing to receive benefits shall be treated as misappropriation of public funds and referred to the relevant authorities for action under applicable laws.
- 4.1.8 Where a Local Government authority or Public Health Centre fails to report the death of a beneficiary child, the PMU shall record the default and refer the matter to the relevant supervising authority. Administrative action shall be initiated against the responsible official in accordance with applicable service rules, regulations, and disciplinary procedures.

4.2 Child Welfare Conditions

While the program respects families' autonomy in determining how cash benefits are used, this autonomy carries a corresponding responsibility to ensure the child's well-being. Where credible concerns of serious neglect or harm arise, the program shall trigger a formal intervention process.

4.2.1 In such cases, The PEMA Secretariat shall review the situation and advise the PMU on appropriate corrective actions, including the potential suspension of benefits.

4.2.2 Local Governments and Public Health Centres shall promptly report to the PEMA Secretariat and Program Management Unit (PMU) any credible concern or observed instance of child neglect, abuse, or serious risk to the well-being of a beneficiary child.

4.2.3 Upon receipt, the PMU shall notify the PEMA Secretariat, who shall review the matter and advise the PMU on the appropriate course of action.

4.2.4 Where a child is placed under alternative care, legal guardianship, or transferred to a verified primary caregiver due to child welfare concerns, custody changes, or other circumstances affecting the child's primary care arrangement, the benefit shall move with the child.

4.3 Reinstatement of Suspended Benefits

4.3.1 Where monthly payments have been suspended due to non-compliance with child welfare, benefits may be reinstated by the PMU upon demonstration of renewed compliance by the beneficiary, in consultation with The PEMA Secretariat and the concerned Local Government authorities.

4.3.2 The PMU shall process reinstatement within 30 days of receiving confirmation of compliance from the relevant agencies. Benefits suspended for more than six consecutive months shall require a fresh eligibility verification before reinstatement is approved. No retroactive payments shall be made for the period of suspension.

5. Implementation Modality

5.1 Delivery Platform and Institutional Arrangements

Sl. #	Agencies	Role	Activity	Collaborating Agencies
1	Office of Cabinet Affairs and Strategic Coordination (OCASC)	Program Oversight and Coordination.	Promote awareness and advocacy in collaboration with MoH, The PEMA Secretariat and PSDD.	MoH, MoHA (DCRC), The PEMA, Secretariat, PSDD, MOF
			Monitor and review the progress of the TCPP implementation quarterly.	
			Carry out periodic review of the framework and guideline.	
			Monitor and evaluate any unintended consequences/effects of the program.	
2	Ministry of Health	Lead Implementing Agency, Program Management Unit.	Ensure effective implementation of TCPP.	DCRC, LGs
			Collect and send beneficiary list for verification to DCRC on eligible births, where required.	
			Facilitate the enrollment of beneficiaries into the program.	
			Report on TCPP's financial expenditures quarterly.	Ministry of Finance
			Compile monthly monitoring progress reports and share with OCASC.	
			Create awareness among expectant mothers about the TCPP conditionalities.	DPHOs and HAs
			Manage program registry database which also includes the payment schedule tracking and compliance with conditionalities.	PMU and GovTech
3	Department of Civil Registration and Census (DCRC)	Validation and verification of citizenship, birth and death information	Verify and validate each new birth and birth order of the child from the civil registry database.	LGs, MoH, Public Health Centers
			Ensure data quality for eligible beneficiaries.	
			Compile a list of eligible beneficiaries and submit to PMU on a monthly basis.	
			Update information on the death of any beneficiary children and share with PMU on monthly basis.	

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4	Local Government	Validation, monitoring, reporting and follow-up	Report and facilitate registration of home births.	DCRC, MoH, OCASC
			Validate and submit report/information on death of a child beneficiary to the PMU and to respective Civil Registration and Census authorities in the Dzongkhags.	
			Coordinate with local health workers to ensure health and well-being of the child.	
			Monitoring and reporting of child neglect and well-being to The PEMA Secretariat.	
			Carry out sensitization and awareness on the TCPP to all communities within respective jurisdiction.	
5	Ministry of Finance	Fund Flow and Financial Oversight	Mobilize resources for the implementation of the TCPP.	OCASC, MoH
			Ensure that the necessary budget is allocated to PMU, MoH.	
			Timely release of funds to PMU, MoH for disbursement.	
6	Public Service Delivery Division (PSDD)	Outreach, assistance and grievance redressal	Oversee outreach and grievance redressal, resolution of support, helpline support and walk-in assistance at every service counters.	MoH, OCASC
7	The PEMA Secretariat	Child Welfare Intervention	Review incidences of a beneficiary child's well-being and protection and share report with the PMU on a timely basis.	MoH, OCASC, LGs
			Based on the review of cases, The PEMA Secretariat shall advise the PMU on the way forward.	
			Monitor quality of child welfare and protection services throughout the program.	

5.2 Disbursement Modality

- 5.2.1 The incentive shall be Nu. 10,000 per month per eligible child (third child and above) until each child reaches 3 years of age.
- 5.2.2 For eligible children born before 4 June 2026 who have not yet attained 3 years of age as of 4 June 2026, the benefit shall commence from 4 June 2026 and continue until the child attains 3 years of age. No retroactive payment shall be made for any period prior to 4 June 2026.
- 5.2.3 Where a mother has more than one eligible child, each eligible child shall receive Nu. 10,000 per month independently.
- 5.2.4 Payments shall be made on a monthly basis. The benefit is calculated from the month of birth; however, the first payment shall be made

only after the eligible child has been registered in the Bhutan Civil Registration and Census System.

- 5.2.5 If the child is born before the 15th of the month, then the child will receive one month's incentive and, if the child is born after the 15th of a month, the first payment will be prorated.
- 5.2.6 A fully enrolled child born on or after 4 June 2026 shall receive up to 36 monthly payments, amounting to Nu. 360,000 over three years. For eligible children born before 4 June 2026 who have not attained three years of age as of 4 June 2026, the total benefit shall be determined based on the remaining period of eligibility until the child attains three years of age.
- 5.2.7 The primary mode of payment shall be through direct bank transfer. The benefit shall be credited monthly to the mother/legal guardian/primary caregiver's bank account.
- 5.2.8 In the event of the mother's death, legal incapacity, prolonged absence, or where legal custody or primary caregiver of the child has changed, the benefit may be transferred to a verified legal guardian or caregiver responsible for the child's care.
- 5.2.9 Where a prospective beneficiary does not hold an active bank account, the PMU shall facilitate account opening in coordination with relevant financial institutions.
- 5.2.10 A Memorandum of Understanding (MoU) with the banks will be established to facilitate the opening of bank accounts.
- 5.2.11 This arrangement will help ensure that officials are not required to handle cash, thereby reducing the risk of mishandling of funds while also introducing women without existing bank accounts to the formal financial ecosystem.
- 5.2.12 Each payment will be logged in the program's management system. Beneficiaries will receive SMS notifications of bank credits where possible.

6. Financial Requirements

Implementing the Third Child Plus Program (TCPP) will require a substantial financial commitment from the Government.

- 6.1 The total projected investment is estimated at approximately Nu. 1.5 billion over three years and Nu. 2.2 billion over five years.

- 6.2 Initial funding of Nu. 31.5 million has been allocated, but future costs will need to be integrated into national budgets.
- 6.3 TCPP is viewed as a strategic investment in reversing demographic decline and securing Bhutan’s socio-economic future.

7. Monitoring and Evaluation

Monitoring and evaluation (M&E) is integral to the effective implementation of the TCPP, ensuring that the program remains on track to achieve its objectives and that public resources are utilized with accountability and transparency. The M&E framework shall provide for continuous monitoring of implementation processes, supported by biannual and annual reviews, as well as periodic evaluation of outcomes and impact over the medium to long term.

7.1 Monitoring and Evaluation Matrix

	Indicator	Means of Verification	Frequency	Responsible Agency
Outcomes	Reduction in gap between desired and actual family size	NSB population statistics/Vital statistics	5 years	NSB/OCASC
	Increase in Total Fertility Rate (TFR)	NSB vital statistics/ Health Statistics	Annually	Ministry of Health
Outputs	Number of beneficiaries enrolled	Internal Reports	Monthly	PMU
	Number of PNC visits completed by enrolled mothers	Health Reports	Monthly	Ministry of Health

8. Review and Revision of the Framework and Guideline

- 8.1 The TCPP Framework and Implementation Guideline shall be reviewed and revised periodically.
- 8.2 The review shall assess the demographic impact of the Program at the designated birth order and consider whether an adjustment to the eligible birth order, benefit amount, or Program duration is warranted based on evolving demographic data.

