

Focus on better, effective health services

Health experts, academics, policymakers and NGO activists yesterday at a roundtable on "Health Budget 2009-10: Allocation and Utilisation" called for effective utilisation of the health budget to ensure better services to the people.

Prof Ruhul Haque
Minister for Health and Family Welfare

Chief guest Prof Ruhul Haque said bureaucratic tangles are a major obstacle to improving the healthcare services in Bangladesh.

The minister spoke of government's plans for a massive overhaul of the community clinic network.

He said they will recruit heavily to improve community clinics that are expected to provide primary health services for every 6,000 people.

He also said that community clinics will be made available for the people of areas like haor even if less than 6,000 people live there. Involvement of local people with the community clinic is also important to activate these clinics.

"The community clinics will be connected for free through the internet," Ruhul Haque said, adding a central hub would connect laptops placed in all community clinics to help upload data and provide information on health and services to the people.

Ruhul said the government has already started a project to better manage community clinics as part of the government's broader review of the health sector.

"Committees headed by the local elected representatives have been formed for each hospital to ensure monitoring and accountability in the public health sector," he said.

The minister also said the government is trying to revitalise the family planning programs given their poor state.

Ruhul also expressed concern over overlaps in health services. But said the government has already held a preliminary meeting to thrash out plans on integrating the local government health systems with the health services provided by the Ministry of Health and Family Welfare.

The government is also looking at ways to earn money from the public health care centres with 40 percent of this income going towards hospital authorities' capability to manage emergencies. Ruhul assured, however, that "The poor will be treated there free."

He stressed there are a myriad problems in the health sector such as promotions of health professionals, strong monitoring system for the private health care centres, recruitment of doctors, nurses and health technologists.

"Our Prime Minister is very positive towards the nurses. Nursing institutes will be established soon while four nursing institutes will be upgraded to college. Japan, Philippines and the USA already agreed to support us in establishing these institutes and providing training to the nurses," he added.

Prof Barkat-e-Khuda
Economics Department, Dhaka University

In his keynote paper, Prof Barkat said the health budget for fiscal year 2009-10 (FY10) is inadequate to ensure adequate health services and achieve Millennium Development Goals (MDGs).

Barkat said although the overall health sector has been identified as one of the priority sectors, only 1 percent of the GDP and 6.15 percent of the total budget has been allocated in the health sector, which in per capita is a meagre amount of Tk 428.76.

Unless the financial allocation is increased to at least 10-12 percent of the national budget and utilised properly, achieving the Millennium Development Goals by 2015 will be difficult, he said.

Despite achievements in the health sector, Prof Barkat warned the neonatal mortality and child mortality rate are still unacceptably high. The rate of increase in the contraceptive Prevalence Rate (CPR) over the last decade has slowed down and the nutritional status of the population remains a major area of concern.

The government's review of the health policy, including the creation of 13,500 community clinics and revitalizing the primary health care services, is still up in the air as there is no clear timeframe for these projects.

The government would need to extend the National Nutrition Project (NNP) to 123 upazilas to ensure quality nutritional demand for 85 percent of the population by 2021, he said. But he warned the target is optimistic because the level of malnutrition among the children, adolescents and pregnant women remains high.

Barkat proposed the formation of a pragmatic population policy to address the problems of overpopulation, which he said was worsened by problems in family planning such as staff shortage, staff absenteeism, lack of trained personnel and lack of adequate monitoring and supervision.

He noted that the government's pledge to establish a viable export-oriented pharmaceuticals sector through the 'Drug Policy 2005' could be undermined by the budget's failure to specify a more pragmatic plan of action to implement the policy.

Barkat lamented the government's failure to provide any tangible timeframes for several health projects, such as the planned Tropical and Infectious Diseases Institute, modernization of 5 hospitals, several medical colleges, health technology institute and nursing institutes.

Public-private partnerships on these projects were also absent from the budget speech, he observed.

He said that family planning programmes are in need of additional funding and greater priority must be given to nutrition.

Barkat noted FY10 budget does not fix any target on different health indicators except the National Nutrition Programme (NNP).

"If we don't have any target then how can we measure our success and failure," he said. Barkat suggested improvements to the 'traditional' methods of

will be established for every 6,000 people, the number of that community will be 12,000," he added.

Nabi also expressed his frustration over the wastage of good budgets every year by poor implementation rates.

He suggested an injection of funds and effort towards the health of women, adding it should not be limited to hospitals and doctors. Nabi also proposed more programmes to develop human resources in the health sector.

On public-private partnerships, he said although it

quality service at the peripheral level.

Mohammad Zobaer Hossain
Researcher, Development Organisation of the Rural Poor

Zobaer Hossain said the system of budgetary allocation is inefficient and needs to be changed to better reflect the health needs of Bangladesh.

He said the current system of allocating budgets based on tertiary facilities, such as medical colleges, and grassroots level (upazilas), is inadequate for Ban-



Health Minister AFM Ruhul Haque addresses a roundtable titled "Health Budget 2009-2010: allocation and utilisation" organised by The Daily Star at its conference room yesterday.

budgetary allocation, otherwise, he warned of the difficulty to implement 80 percent Annual Development Programme (ADP).

"A policy should be adopted for monitoring the private hospitals," he suggested.

The government should also expand opportunities outside the capital and look to incorporate union health centres with community clinics, Barkat said.

Dr Sarwar Ali

Former secretary general of Bangladesh Medical Association (BMA)

Dr Sarwar Ali said the existing 'improper' process of formulating the budget should be changed and the private health sector has flourished in the country due to negligence in the public health sector.

He said the development of a regulatory mechanism for the private health sector is an imperative, adding, "The government will have to fix standards for the private health sector since the sector has been growing so fast."

He also said the government as well as the organisations concerned can set a goal that no person in Bangladesh would die without treatment.

To do so, Dr Ali said, the government has to restore the people's confidence in the public health sector by developing a better health infrastructure.

He was sceptical about the Public Private Partnership (PPP) initiative in the health sector but said "Talking about the public private partnership initiative would be hypothetical unless the policies of the initiative are spelled out."

The BMA former secretary general also suggested consulting health professionals working at the grassroots level to make the health policy effective.

Maj Gen (ret'd) Shahjahan,
Chairman, Health 21

Maj Gen (ret'd) Shahjahan stressed the need for finding out why health professionals are unwilling to go to rural areas and how they could be induced to work there.

Presiding over the discussion, he said the doctors should be given better opportunities to improve their expertise and knowledge.

He also suggested better management of the health service delivery system.

Prof AKM Nurun Nabi
Department of Population Sciences,
Dhaka University

Prof Nurun Nabi said the family planning programmes in Bangladesh are a 'mess' and could lead to stretching the already struggling health sector.

He also lamented the low supply of contraceptives, which is far below the demand in the market, and the set contraceptive prevalence rate of 80 percent.

"A mess has been created in family planning and it should be addressed properly. If we cannot do that then soon after starting the community clinics that

is a good initiative, its implementation remains a big challenge.

He also stressed on greater care for the elderly, saying that despite rising life expectancy, the government has not done much for elderly people.

Dr Ubaidur Rob, Population Council

Prof Ubaidur Rob of Population Council said human resources should be improved in the union and upazila level before revitalising the community clinics.

"There is an existing infrastructure in the upazila and union levels. But the health system there is still not fully functioning. We cannot send doctors to the upazila health complexes or union sub-centres. So it is important to ensure manpower and service to those levels through resource mobilisation," he added.

Morol Nazrul Islam
Journalist

Journalist Dr Nazrul said the health budget is significantly undermined by the politicisation of the health sector.

He said politics is a major impediment in the health sector. "Whenever a government comes to power the candidates loyal to the ruling party usually win the Bangladesh Medical Association (BMA) election," he said.

Politicisation in health sector forces the doctors to get involved with politics to influence their transfers and postings, he said.

Morol said it would not be possible to implement the budget without separating politics and the health sector.

The veteran journalist stressed the need for developing tertiary level health care services in rural areas as they are absent from the rural areas and even in big cities like Khulna, Sylhet and Chittagong.

Dr Abu Jamil Faisal
Country Representative, Engender Health

Dr Faisal said the health bureaucracy in Bangladesh needs to be simplified to see better results.

He also said better results in the health care sector would be possible with more effective budget implementation.

Faisal said the only 30 to 35 percent of the budget is utilised due to inadequate infrastructure and an ineffective health care system, which is reflected in the health care performance of the country.

Jalaluddin Ahmed
Brac

Jalaluddin Ahmed said doctors, nurses and health technicians should be given extra facilities and inducements to ensure they work and stay in the rural areas.

He proposed extra facilities and benefits in higher education for doctors, while nurses and medical technicians should be given proper training to ensure

gladesh.

Instead, Zobaer suggests, the budget should be allocated on the basis of need of population or based on the morbidity rate.

He also suggested developing a mechanism to monitor budget utilisation.

Dr Sikder M Zakir

Managing Director, Telemedicine Ref Centre Ltd
Sikder Zakir said the health care system needs to be overhauled immediately to reach government healthcare targets by the year 2021.

He said a large part of health care resources get wasted, which could be prevented or at least reduced by the establishment of a community based monitoring mechanism.

Dr Rumana Dowla

Director Communications, Health 21
Rumana Dowla urged the government to allocate money for cancer prevention, as it is fast becoming a major health problem in the country.

Palliative care and old-age care have become an international human rights issue, she said, adding that painkillers like oral morphine tablet are unavailable in Bangladesh.

Dr Rubaiul Murshed
Executive Director, Health 21

Dr Rubaiul Murshed suggested the creation similar to the Joint Commission International to closely monitor the country's burgeoning private health care industry.

The proposed commission would accredit private health care providers to maintain health care standards that are often neglected in Bangladesh.

"The private health care sectors need to be monitored how quality service these private health care centres are providing. There could be a private accreditation body like Joint Commission International for all these hospitals," he added.

Runa Khan
Executive Director, Friendship

Runa Khan lamented the depth of the problem in reaching sustainable healthcare services to rural areas.

She also stressed that population control programs would need to complement family planning with the provision of contraceptives. "It is not enough only to create awareness about family planning, but also the products that they need for population control," said Runa.

Mahfuz Anam
Editor and Publisher, The Daily Star

Mahfuz Anam said the newspaper will have spaces to place the debate in public domain.

He said the dialogue on health policy in Bangladesh should continue but would also require the health practitioners to bring this dialogue to the public dialogue by contributing to the media.