

# FROM CHALLENGED BEGINNINGS TO STANDING TALL

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## State of healthcare and Covid-19 management in Bangladesh



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Bangladesh's health system has four key factors in its structure and functioning. Though the government sector is huge, the private sector is drastically getting bigger, as is private investment. Non-government organisations and donor agencies are also playing a significant role in the health sector. The government by contribution is solely responsible for policy, regulation, and provisions of healthcare services from primary to tertiary levels.

The government or the ministry of health, is constitutionally responsible for both policy and strategy, and the rules and regulations for implementation of the policies and strategies. The main objective is to ensure total healthcare for the whole population, with necessary services and provisions, including medical services necessary to obtain this goal.

The ministry of health implements its policies, and provide services through its two director generals of services. One of them on health services, and the other on family planning services. The services are offered through a dual system of general health and family planning, through districts, sub districts, "upazilla" health complexes, union health and family welfare centres. These are provided at union level and at ward level with community clinics in villages with population of 6,000.

The third is the vibrant non-profit healthcare services managed by



NGO's, and supported by many donor partners/agencies, as well as local NGO's.

Different ministries also have their independent health establishments to provide services to their employees and families. Army, railway, police, and local governments for example.

Municipal authorities have their own health establishments and provide healthcare services to their staff and family members. There is no proper coordination among all these healthcare establishments in the country.

The health budget in Bangladesh

is one of the lowest among the countries in the South East Asian region. Moreover, there is corruption and misuse of the allocated funds and resources, which is an open secret. Patient satisfaction of the existing healthcare services is also questionable.

At the national level there are

tertiary specialised hospitals, and at district level, there are districts hospitals. At subdistrict or upazilla level, there are upazilla hospitals with approximately 30-50+ indoor beds, as well as specialised services of internal medicine, surgery, OBS and more.

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ঐতিহ্যের আর এক তাস আধুনিকতা  
ঠিক যেমন রূপচর্চায় আড়িজাত্য স্নাতক

স্যান্ডালিনা  
সোপ



রূপচর্চায় আড়িজাত্য...

KOHINOOR  
CHEMICAL