

Ageing with dignity: Why Bangladesh must invest in long-term care

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Some argue that institutional care models are "Western" and incompatible with Bangladeshi values. Indeed, the tradition of family-based care especially by women remains strong. But this tradition is under strain. Smaller families, labour migration, urbanisation, and the rise of women's employment mean that many households are struggling to care for ageing members. In the ADB-DSS study, nearly 29 per cent of surveyed older persons had no one to regularly assist them with daily tasks. Rather than replacing family care, a public LTC system can complement it—offering options like trained home care aides, day-care centres, or community volunteers. These services can help reduce caregiver burnout, prevent elder neglect, and offer dignity to all.

Based on the ADB-DSS roadmap and international experience, a five-pillar framework can be proposed to help Bangladesh build a gender-responsive, financially viable, and sustainable LTC system over the next decade. First, Develop a National LTC Policy and Legal Framework and create a comprehensive policy that defines LTC, sets service standards, ensures quality, and integrates it into the national development agenda and 9th Five-Year Plan. Second, Invest in the



Investing in long-term care is essential to ensure every elderly person in Bangladesh can age with the dignity and support they deserve.

PHOTO: PRABIR DAS

By 2050, nearly one in five Bangladeshis will be aged 60 or older, yet formal institutional care currently reaches fewer than 1% of the elderly population.

Care Workforce and establish structured training, certification, and employment pathways for caregivers through existing platforms like the Skills for Employment Investment Program (SEIP) and TVET institutions. Third, scale Community-Based and Home-Based Care Models Pilot and expand services delivered at

the union and municipal levels through local NGOs, community clinics, and DSS centres. Prioritise models that allow aging in place while creating jobs for women and youth. Fourth, ensure Sustainable Financing and introduce a blended model of public financing, co-payments for those who can afford it, and social insurance mechanisms. Link with existing allowances (e.g., Old Age Allowance, Widow's Allowance) to bundle cash with care services. Fifth, harness Data and Technology and create registries of caregivers and older persons, use mobile applications for monitoring and reporting, and build a

robust data system to inform planning and accountability.

A common concern is affordability. Can Bangladesh finance such a system? The ADB-supported study estimates that even a modest LTC system, phased in over 10–15 years, would require strategic reallocation within existing social protection budgets, new budget lines, and co-financing options. Pilot programs can be launched at manageable cost, particularly if they tap into existing health and local government infrastructure. Over time, scale-up can follow based on results, capacity, and fiscal space.

One of the biggest challenges will be institutional. Currently, responsibility for elder care is spread across DSS, the Ministry of Health, local governments, and NGOs, with limited coordination. A national LTC strategy must clarify mandates, establish governance arrangements, and build technical and management capacity at all levels. Without this, even well-designed programs will falter.

Ultimately, long term care is not just a service, it's a reflection of national values. Do we, as a society, believe that older persons deserve to age with dignity, regardless of income or family

status? Do we believe that care work, often invisible and unpaid, is worth public investment? Answering "yes" means building a system that reflects both tradition and transformation. One that respects families while easing their burden. One that uplifts caregivers rather than exploits them. One that sees care not as a cost, but as a contribution.

Bangladesh stands at a demographic crossroads. If we act now, we can build a care system that supports women, protects older persons, and strengthens families. If we wait, the burden will fall silently and disproportionately on those least able to bear it.



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