2010

NEWSLETTER

MDG Award for Bangladesh





BANGLADESH RECEIVED THE MDG AWARD FOR REMARKABLE ACHIEVEMENT IN REDUCING CHILD MORTALITY (MDG-4). HONORABLE PRIME MINISTER SHEIKH HASINA RECEIVED THE AWARD DURING THE 65TH UNITED NATION GENERAL ASSEMBLY (UNGA) IN SEPTEMBER 2010. PRIME MINISTER'S LEADERSHIP IN ACHIEVING MDGS WAS HIGHLY APPRECIATED DURING THE AWARD GIVING CEREMONY.

It needs to be mentioned that the world leaders set the eight Millennium Development Goals (MDGs) during the Millennium Summit of UNGA held in 2000 in presence of Honorable Sheikh Hasina - the then Prime Minister of Bangladesh. After the Summit, under her visionary leadership and direct supervision, several initiatives were undertaken that have contributed to reduce child mortality from 146 (1990) to 65 (2007). In order to achieve MDG-4, we need to reduce the rate to 48 by 2015

Success in reducing maternal mortality

Bangladesh is also on track of achieving MDG-5 which seeks to reduce maternal mortality. Recently published 'Bangladesh Maternal Mortality and Health Care Survey (BMMS) 2010' by the National Institute of Population, Research and Training (NIPORT) revealed that maternal mortality ratio (MMR) reduced from 322 (2001) to 194 (2010). During the period, actual annual reduction rate was 5.5% which is relatively

satisfactory (as against of required rate 5.4%). In 1990, MMR was 574 per 100000 live births. To achieve MDG-5, we need to reduce it to 143. If the present trend continues, Bangladesh is expected, in addition to MDG-4, to achieve MDG-5 which will be an outstanding success in achieving the Country's development goals. The Government has undertaken comprehensive programmes under the ensuing Health, Population and Nutrition Sector Development Programme (HPNSDP) to maintain and reinvigorate the present trend of success

Progress in preparation of next sector programme

The preparation for the ensuing Health, Population and Nutrition Sector Development Programme (HPNSDP) for the period 2011-2016 is underway in full swing. The ongoing Health, Nutrition and Population Sector Programme (HNPSP) will end on the 30th June 2011. The Strategic Plan and Result Framework of the HPNSDP have already been finalized in consultation with relevant stakeholders. The Development Partners (DPs) have also completed their pre-appraisal mission in September 2010. The Programme Implementation Plan (PIP) of the HPNSDP has been submitted to the Planning Commission recently. The estimated total budget (revenue and development) of the HPNSDP is Taka 56,665 crore of which 76% will come from GoB and the remaining 24% will be provided by the DPs. Total development budget of the HPNSDP is Taka 23000 crore of which the Government will provide Taka 8255 crore.

The existing Operational Plans (OPs) have been consolidated and reduced to 32 from the existing 38. Moreover, the functions of National Nutrition Programme (NNP) will be mainstreamed in the regular activities of the Directorate General of Health Services (DGHS) and Directorate General of Family Planning (DGFP). Health Economics Unit and GNSP Unit have been extending technical cooperation to the preparation of the HPNSDP.



Bangladesh National Health Accounts (BNHA-III)

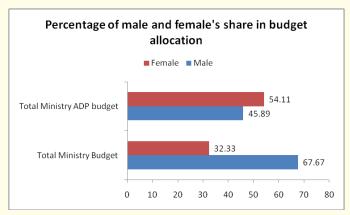
Health Economics Unit has recently published the third round of Bangladesh National Health Accounts (BNHA-III) 1997-2007 which reveals that the Country's total estimated health expenditure in 2006-07 was Taka 16,090 crore which was 3.4% of the GDP. During this financial year, the per capita health expenditure was Taka 1,118 of which out of pocket expenditure (OOP) was around 64%, public expenditure was 26% and remaining 10% came from DPs, health insurance, NGOs, and other sources. In 1997, OOP was 57%. The OOP has increased significantly over the years. To address this, the Government has been exploring option of health insurance as a mechanism of alterative health care financing.

Transferring Gender Issues Office (GIO) to GNSP Unit

Ministry of Health and Family Welfare (MoHFW) has recently closed the GIO Section and transferred its functions to GNSP Unit. An Official Order was issued in this regard on 21.10.2010. Now GNSP Unit is entrusted with all activities related to gender, child health, and health of people with disabilities (PWD).

Gender Budgeting 2010-11

The Gender Budget Report 2010-11 of Ministry of Finance which includes "revenue and development" stipulates that 32.33% of the total Taka 8,148 crore of the MoHFW in 2010-11 is allocated in favour of women. Though in the total budget, women's health represents one third of it, in the "development budget" under ADP, women-targeted allocation is 54%.



Source: Ministry of Finance



Public Expenditure Review (PER)

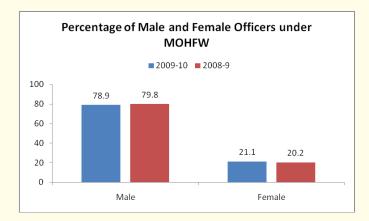
The Public Expenditure Review (PER) for 2007-08 and 2008-09 has been worked out by a team of officials of Health Economics Unit (HEU) and GNSP Unit with the technical cooperation from Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH on behalf of the German Government. This year's speical theme is 'gender analysis of public expenditure in health'. The PER, for the first time, is being prepared by the HEU and GNSP Unit's own professionals.

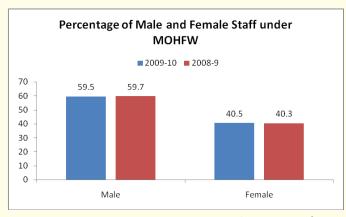
Implementation of a VAW related PIP

A performance improvement project (PIP) titled 'Making upazila health complex more responsive to victims of violence against women (VAW): a model project in Tongibari, Munshiganj' is being implemented by the Team-A (Batch-29) of MATT-2 (Managing At The Top) Course of Ministry of Public Administration. Under the PIP, appropriate medico-legal and rehabilitative services will be ensured to the victims of VAW from Tongibari Upazila Health Complex through active participation and support of the local administration and community, and establishing a network with the One-stop Crisis Center of Dhaka Medical College Hospital (OCC DMC). MoHFW and Ministry of Women and Children Affairs (MoWCA) have given the permission of implementing the PIP. Mr. Md. Mahbub Hossain, Deputy Chief (Deputy Secretary), GNSP Unit is the Leader of the PIP Team.

Women participation in Human Resources of HPN Sector

The Gender Budget Report 2010-11 of Ministry of Finance also shows that in 2009-10 around 21% of the officials of the MoHFW and its attached departments were women. It was 20% in 2008-9. Amongst the staff during the stipulated two years, the percentages were 40.5% and 40.3% respectively. Though this indicates that women's participation as human resources in the Health Sector Programme is still below the expected level, there is a trend of increasing their participation.





Source: Ministry of Finance

New two OCCs in Rangpur and Faridpur

Six OCCs have already been functioning at medical college hospitals located in Dhaka, Chittagong, Rajshahi, Khulna, Sylhet and Barisal under 'Multi-Sectoral Programme on Violence Against Women' (MSPVAW) of MOCWA. Establishment of the 7th OCC at the Rangpur Medical College Hospital is underway. The Government has recently decided to establish the 8th OCC at the Faridpur Medical College Hospital. MoHFW is one of the partners of the Muti Sectoral Program on Violence Against Women (MSPVAW). Based on a Memorandum of Understanding (MoU) with the MoWCA, MoHFW provides the required infrastructure, doctors and nurses to each OCC.

Policy Briefs

Three Policy Briefs have recently been prepared and published by HEU based on the findings and recommendations of the following research initiatives carried out with technical cooperation from GIZ:

- 1. Economic evaluation of demand side financing (DSF) programme for maternal health in Bangladesh;
- Costing of maternal health services in Bangladesh; and
- 3. Incentives to improve retention and performance of public sector doctors and nurses in Bangladesh.

Basically, policy briefs are prepared and distributed to apprise the policy makers on research findings and recommendations, so that they can take necessary actions in response to these.



Institutionalization of Bangladesh National Health Accounts (BNHA)

The Government has decided to institutionalize BNHA in Bangladesh. To this end, a BNHA Cell has already been established at HEU. Bangladesh has also joined a global initiative led by the World Bank for this purpose. Mr. Prasanta Bhushan Barua, Joint Chief (Joint Secretary), HEU has recently attended an International Workshop held in Washington, USA organized by the World Bank to have hands-on knowledge on institutionalization process. So far three rounds of NHAs have been done in Bangladesh through contracting out with the technical and financial support of DPs. It is expected that institutionalization will foster the capacity and ownership of the Government to produce NHA on a regular basis at a minimized cost.

Third National Strategic Plan for HIV/AIDS

The ongoing second five-year National Strategic Plan (NSP) for HIV/AIDS ends in June 2011. The designing and planning process of the third plan –which will be implemented during 2011-15 – is underway. The main objective of the ensuing NSP is to achieve MDG-6 related targets.

Women Friendly Hospital Initiative (WFHI)

WFHI is being implemented in a phased manner to make public hospitals more responsive to women's health needs. Under this initiative, ten district hospitals (Manikganj, Joypurhat, Cox's bazar, Rajbari, Nilfamari, Thakurgaon, Moulvibazar, Norail, Jamalpur and Gaibandha) and three UHCs (Chowgachha of Jessore, Fatikchari of Chittagong and Bhairab of Kishorganj) have been so far accredited as women friendly hospitals. Baseline assessment and other preparatory process are in progress to accredit more five district hospitals (Sherpur, Kishorganj, Madaripur, Bandarban and Kurigram) and one UHC (Borolekha of Moulvibazar). In accordance with the existing policy, the National Accreditation Body declares hospitals as women friendly through a process of intensive assessment and evaluation.



Piloting health insurance scheme

The Government has decided to consider a health insurance scheme in Bangladesh as a mechanism of alternative financing to reduce OOP, ensure equity and facilitate poverty reduction. In this context, HEU, in consultation with key stakeholders, has developed a draft concept paper (CP) through GFA, a consulting firm contracted by KfW (German development partner). This CP was recently shared with high level policy makers, and based on their feedbacks, updating of the CP is in progress. The scheme will include special initiatives for gender issues and women friendly services.

Capacity building activities during July-December 2010

Training

- a. A 10-day Course on 'Different Aspects of Gender Issues' was organized by GNSP Unit under RPA fund during 19-30 December 2010. A total of 24 officials of MOHFW and its departments attended the Course. Main objective of the Course was to sensitize participants about gender issues in HNP sector.
- b. HEU organized a ten-day course on Public Procurement Regulation in September 2010. A total of 20 officials of MoHFW and its departments attended the course. The main objective was to provide updated hands-on knowledge and skills in public procurement.

Workshops

- c. GNSP Unit organized two divisional-level gender sensitization workshops in Barisal and Sylhet under WHO Biennium Programme 2010-11. The three-day workshops were attended by field level officials of different departments of MoHFW, upazila/union parishad chairmen/vice-chairmen. The participants were given hands-on knowledge about gender issues in health and were oriented to undertake appropriate measures for making HNP services gender responsive. GIZ extended technical support to this activity.
- d. HEU organized two workshops for designing a concept paper on health insurance pilot in Bangladesh. Officials of MoHFW and its departments, representatives of private insurance companies, civil society, academics and research organizations attended these workshops.
- e. HEU organized a workshop for disseminating the Report of BNHA 1997-2007 on 19 August 2010. A total of 86 participants attended the Workshop.



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