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Section A

Bangladesh
Positive Deviance Initiative
Tufts University
Friedman School of Nutrition Science and Policy
150 Harrison Avenue
Boston, MA 02111
Outline

- Overview of Bangladesh and health
- Development of primary health care services
- Importance of community-based services
- BRAC and its integrated development programs
- BRAC’s primary health care programs
- BRAC’s urban maternal, neonatal, and child health program
- Summary and conclusion
Three Pillars of Alma Ata

1. Extension of facilities and effective and affordable services as close as possible to where people live
2. Genuine community participation
3. Inter-sectoral cooperation
“If I were asked to compose an epitaph on medicine throughout the 20th century, it would read:

*Brilliant in its scientific discoveries, superb in its technological breakthroughs, but woefully inept in its application to those most in need*”

—N.R.E. Fendall (1972)
The 20th century will be chiefly remembered in future centuries not as an age of political conflicts or technical inventions, but as an age in which human society dared to think of the welfare of the whole human race as a practical objective.

—Arnold Toynbee (quoted in Unicef, 1995)
Bangladesh at a Glance

- Area (sq. km): 147,570
- Population: 144 million
- GNP per capita: 440 USD
- Per capita health expenditure: 12 USD
- Life expectancy: 63.3 years
- Population living below $1 per day: 36%

“Recent” History of Bangladesh

- Fertile farmland with dense population
- Partition in 1947: East and West Pakistan
- War of Independence
- Situation in 1970 similar to Afghanistan’s today
Health Scenario

- Bangladesh has considerably improved health status over the last few decades
  - NGOs working side by side with the government have contributed significantly

<table>
<thead>
<tr>
<th>Indicators</th>
<th>1970s</th>
<th>2007</th>
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<tbody>
<tr>
<td>Total fertility rate</td>
<td>6.3</td>
<td>2.7</td>
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<tr>
<td>Immunization coverage</td>
<td>2%</td>
<td>82%</td>
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<tr>
<td>Under-five mortality rate (per 1,000 live births)</td>
<td>221</td>
<td>65</td>
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<tr>
<td>Maternal mortality ratio (per 100,000 live births)</td>
<td>750</td>
<td>322</td>
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<tr>
<td>Prevalence of tuberculosis</td>
<td>700 (est.)</td>
<td>400</td>
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</table>
### Countries with a Per Capita Gross National Product of US$ 250 or Less, by Population Size

<table>
<thead>
<tr>
<th>Country</th>
<th>Population (in millions)</th>
<th>Per capita GNP (US$)</th>
<th>Infant mortality rate (per 1,000 live births)</th>
<th>Total fertility rate (children per woman of reproductive age)</th>
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<tbody>
<tr>
<td>Bangladesh</td>
<td>122.2</td>
<td>240</td>
<td>77</td>
<td>3.3</td>
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<tr>
<td>Vietnam</td>
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<td>240</td>
<td>38</td>
<td>3.1</td>
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<td>Ethiopia</td>
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<td>100</td>
<td>120</td>
<td>6.6</td>
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<tr>
<td>Congo (formerly Zaire)</td>
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<td>120</td>
<td>95</td>
<td>6.7</td>
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<tr>
<td>Tanzania</td>
<td>29.5</td>
<td>120</td>
<td>91</td>
<td>6.3</td>
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<tr>
<td>Nepal</td>
<td>22.6</td>
<td>200</td>
<td>79</td>
<td>4.6</td>
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<td>Mozambique</td>
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<td>80</td>
<td>118</td>
<td>6.5</td>
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<td>Burkina Faso</td>
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<td>230</td>
<td>103</td>
<td>6.9</td>
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<tr>
<td>Mali</td>
<td>9.9</td>
<td>250</td>
<td>134</td>
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<tr>
<td>Niger</td>
<td>9.8</td>
<td>220</td>
<td>124</td>
<td>7.4</td>
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<tr>
<td>Malawi</td>
<td>9.6</td>
<td>170</td>
<td>134</td>
<td>6.7</td>
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<tr>
<td>Zambia</td>
<td>9.4</td>
<td>240</td>
<td>109</td>
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<td>Rwanda</td>
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<td>85</td>
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<td>Haiti</td>
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<td>250</td>
<td>48</td>
<td>4.8</td>
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<tr>
<td>Burundi</td>
<td>6.1</td>
<td>160</td>
<td>120</td>
<td>6.8</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>4.4</td>
<td>180</td>
<td>195</td>
<td>6.5</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>455.3</strong></td>
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Source: Population Reference Bureau, 1997; Mitra et al., 1997.
Contraceptive Use, Bangladesh

Trends in Contraceptive Use Among Currently Married Women 10-49 Years of Age in Bangladesh, 1975-1997

Adapted by CTLT from Mitra et al., 1997.
Health Expenditures

Distribution of Public Sector Expenditures for Health

- Hospitals: 65.1%
- Primary health care: 18.7%
- Other: 16.2%
Millennium Development Goal 4

- Reducing under-five mortality
Millennium Development Goal 4

Progress in Bangladesh in Achieving Millennium Development Goal 4

Bangladesh is one of only 19 out of 68 countries (that have 97% of the world’s under-five deaths) on track to achieve MDG 4
Current National Health Statistics

- Infant mortality rate: 52/1000
- Under-five mortality rate: 65/1000
- Percentage of under-five children stunted: 43%
- Total fertility rate: 2.7
- Contraceptive prevalence rate (% of married women using contraception): 56%
Historical Factors

- ORS/Matlab MCH-FP Project/ICDDR,B
- Bifurcation of MOH with targeted funding for family planning
Historical Factors

- Scaling-up of evidence-based family planning intervention
- Reliance on home visitation for providing family planning motivation and distribution of birth control pills and condoms
- Strong national EPI, diarrhea, TB programs
Historical Factors

- Strong NGO programs—such as BRAC
- Policy-friendly environment for NGOs