

# COMMUNITY CLINICS: ‘THE SHEIKH HASINA INITIATIVE’

## UN recognition of the Bangladeshi innovative model to achieve Universal Health Coverage (UHC)



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# Sheikh Hasina's Initiative Community Clinics save lives



**THIS BANNER IS USED IN ALL COMMUNITY  
CLINICS FOR BRANDING PURPOSE**

- Community clinic is one of the ten special initiatives of Prime Minister Sheikh Hasina.
- The community clinic is a shining example of the success of the current government's health care, which is praised at home and abroad.



# All about Community Clinic

- A community clinic is often seen along rural roads in a small building of the same design.
- One clinic has been set up for every 6000 people in rural townships.
- Clinics are planned to be located within a 20 to 30 minutes walking distance of health care.
- Initially, clinics were established in 5 decimals of the area. But the number of users is increasing with time. For this, a new model clinic is being constructed on 8 decimals land.
- Each building has four rooms. Two for the accommodation of health workers, one for patient waiting room, another for labor (delivery) room. There are two bathrooms.
- Many of these clinics are becoming modern quality clinics with more and more health care facilities for active participation of communities.



## The United Nations has unanimously adopted the first-ever resolution on community-based health care

- The resolution, titled "Community-based primary health care: a participatory and inclusive approach to universal health coverage," acknowledged the important role-community clinics play in promoting primary health care, women's empowerment, community engagement and mobilization towards achieving universal access to health.
- The resolution, in recognition of Prime Minister Sheikh Hasina's stellar contribution in establishing model community clinics in Bangladesh, highlighted "the Sheikh Hasina Initiative" as a classic innovative model of public-private partnership.

# The United Nations has unanimously adopted the first-ever resolution on community-based health care

Adoption of the resolution is a great recognition of the dynamic leadership of Prime Minister Sheikh Hasina in accelerating the progress to universal health coverage and implementation of SDGs by 2030.

**UN Secretary General Ban-Ki-Moon visited a Community Clinic**



# Introduction of initiatives

- The **concept of community-based health service** dates back to the **Alma-Ata Declaration of 1978**, which emphasized the importance of primary healthcare in achieving **"Health for All."**
- Bangladesh was one of the countries who signed the “Alma-Ata Declaration” in 1978 with a pledge to ensure “Health for All” (HFA) by 2000 through Primary Health Care (PHC).
- But in 1996 it has been observed that we were far behind the destination as per the set indicators.
- Unavailability & inaccessibility of PHC to the rural community of Bangladesh (about three fourths of national population) with lacking in community participation were the important reasons.

# Introduction of initiatives

- To address those shortfalls, the Government of Bangladesh in 1996 planned to establish Community Clinic (CC) (1 CC for about 6000 population) to extend PHC at the door steps of the villagers all over the country.
- Bangladesh has achieved notable progress on different health parameters of MDG and SDG during the last 2 decades through the service deliveries of the community clinics.



# Introduction of initiatives

- This service delivery has emerged as a **pioneering model of primary healthcare in Bangladesh**, contributing significantly to the country's efforts in achieving **Universal Health Coverage**
- Bangladesh's commitment to providing accessible and quality healthcare to all; led to the establishment of community clinics, which have gained recognition and recommendation from the international community.



# Director General of World Health Organization Dr. Margaret Chan with the Community Group (CG)

A World Health Organization booklet on the success story of community clinics is called- **Community Clinic: Health Revolution in Bangladesh.**



# History of community-based health services

- In the last 50 years since independence, several important innovations and initiatives have been behind the remarkable success in the health sector of Bangladesh. One of these is the community clinic. Community clinics have revolutionized the health sector in Bangladesh.
- The community-based health service movement began in the mid-20th century in response to healthcare disparities and the need for accessible healthcare for all.
- United states of America, China, Thailand, Korea, Japan adopted such healthcare services in different models at different times in the last century.
- Countries in Africa, Latin America, and other regions have also adopted community-based health service models to improve healthcare access.

# History of community-based health services

- Such community-based health service centers continue to evolve, responding to changing healthcare needs and addressing new challenges.
- Challenges persist in terms of resource allocation, infrastructure development, and political instability.
- Community clinic plays a significant role in extending healthcare services to marginalized populations in Bangladesh and this initiative may also extend globally.





# **Journey of Community Clinics in Bangladesh**

- The journey of community clinics in the country began in 1998 when a pilot project was initiated to provide basic healthcare services to rural communities.
- During 1998-2001, 10723 CCs were constructed & about 8000 started functioning.
- Health Assistants (HA) from the health service division and & Family Welfare Assistants (FWA) from the Family Welfare division of the ministry were service providers in addition to their domiciliary services.
- They had been trained on Essential Service Package (ESP).

# Journey of Community Clinics in Bangladesh

- In 1998, Bangladesh introduced a well thought-out and structured Community Based Health Care (CBHC) programme through the Health and Population Sector Programme (1st HPSP 1998–2003).
- Government Launched this unique CC-based health system with the objective of ensuring primary health care (PHC) for all citizens of Bangladesh
- However, after a change in government in 2001, support for the CCs was withdrawn, leading to a suspension of services.

# Journey of Community Clinics in Bangladesh

- It wasn't until 2009, when PM Sheikh Hasina was re-elected, that the project "**Revitalization of the Community Health Care Initiatives in Bangladesh**" (RCHCIB) 2009–2015 was introduced, which revived the CCs.
- In 2011, this project was mainstreamed within the DGHS, with the incorporation of CBHC activities within the operational plan of the 3rd Health, Population and Nutrition Sector Development Program (HPNSDP) as CBHC operational plan July 2011–December 2016.
- It has been continued through the CBHC operational plan January 2017–June 2022 (extended up to June 2024) under the 4<sup>th</sup> Health, Nutrition and Population Sector Program (HNPSP).



# Uniqueness of community clinics

## Public-Private-Partnership (PPP) model

- the land is donated by the community people (private) and also the clinic is managed by a committee from the community people
- the Government (public fund through MOHFW) build the clinic, recruit the Community Healthcare Provider (CHCP) and provide medicines and logistics as per needs of the community.



# Uniqueness of community clinics

- Community Clinics were aimed to be built in every administrative ward of a union or for approximately every 6000 population in rural areas distant from Upazila health complexes or union subcenters to reach PHC to the marginalized people. Presently 14,275 Community Clinics are functioning in full fledge.

# Management of Community Clinic

- There is a Community Group (CG) for each CC comprising of 13-17 members and 3 Community Support Groups (CSG) to support the CG.
- This Community Group is presided by the elected local government representative.
- The CHCP is the member secretary while the land donor or his/her family member or representative is the vice president.
- Other members are from different professions of the community. The CSG is made from community people of different professional and age groups to support the CG.





# Community Health Care Provider (CHCP)

- New category of service provider (1 for each CC) has been recruited in phases following all the necessary steps.
- After the last phase of recruitment, the existing number of CHCPs becomes 14,250.
- They are higher secondary school graduates and given a 3 months long training to provide basic primary health care and preventive care services.



**A CHCP providing service to a service seeker**

# **Role of Community Clinics in Primary Healthcare**

**Community Clinics are one of the major components of Primary Healthcare System that provides:**

- 1. Limited curative services**
- 2. Functional Referral to Upazila Health Complexes**
- 3. Preventive care services: Screening, vaccinations**
- 4. Promotion of health education: ANC, PNC, NCD related care**
- 5. Dispensing of Medicines (Over-the-Counter, OTC) and Family planning commodities**

# **Role of Community Clinics in Primary Healthcare**

- Community clinics have gained popularity among rural people and become family hospitals due to easy, free, reliable services close to home.
- More than 1 lakh 70 thousand taka of medicines are given free every year in each clinic.
- From July 2021 to June 2022, the total number of visits to the clinics has been more than seven and a half million.
- More than 10 crore people have received this free healthcare.

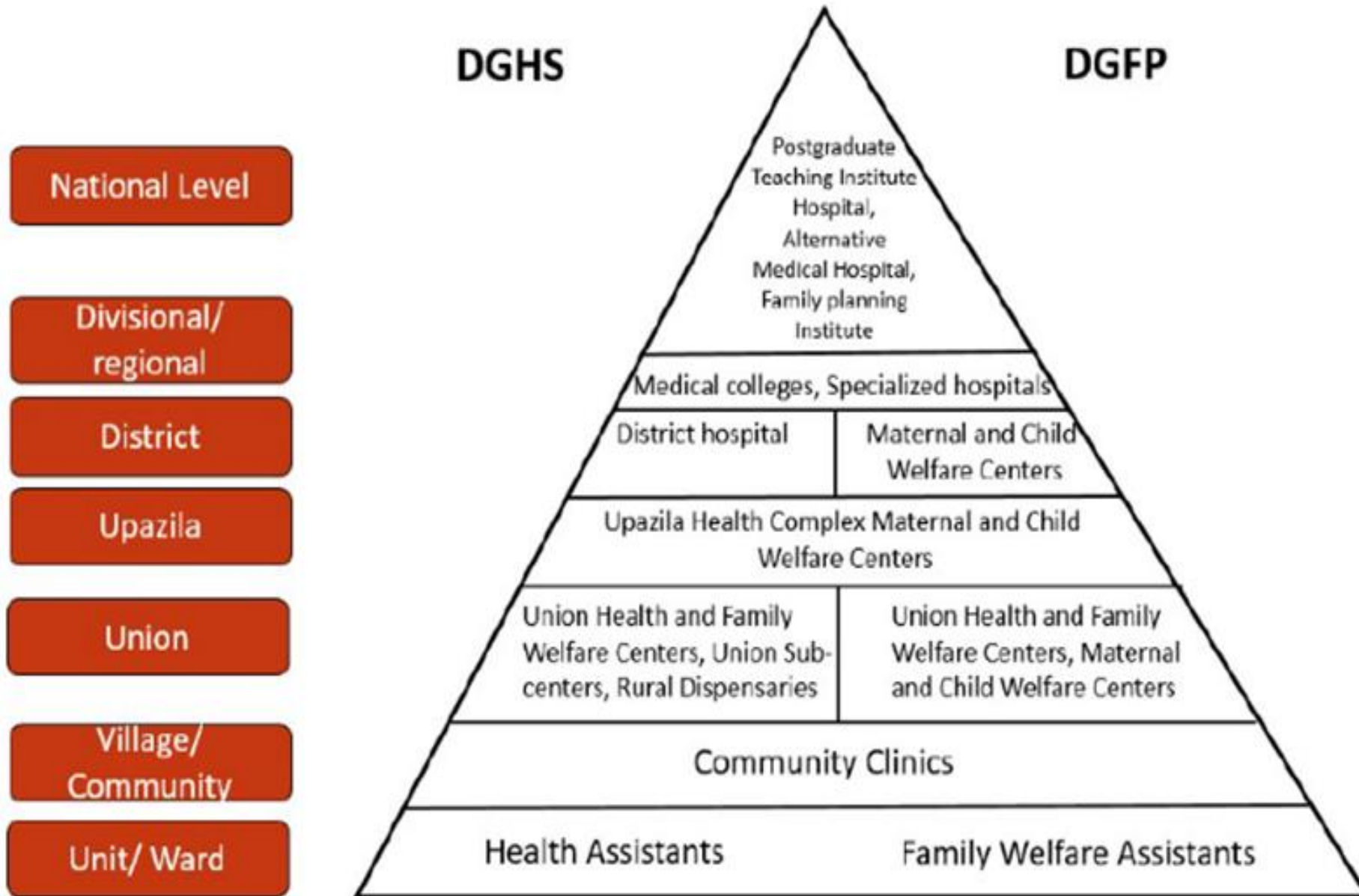
# Role of Community Clinics in Primary Healthcare

- More than 70-80 people visit each clinic every day and 80 percent of them are women and children.
- So far, 4000 community clinics have given safe normal delivery to around 1 lakh mothers.



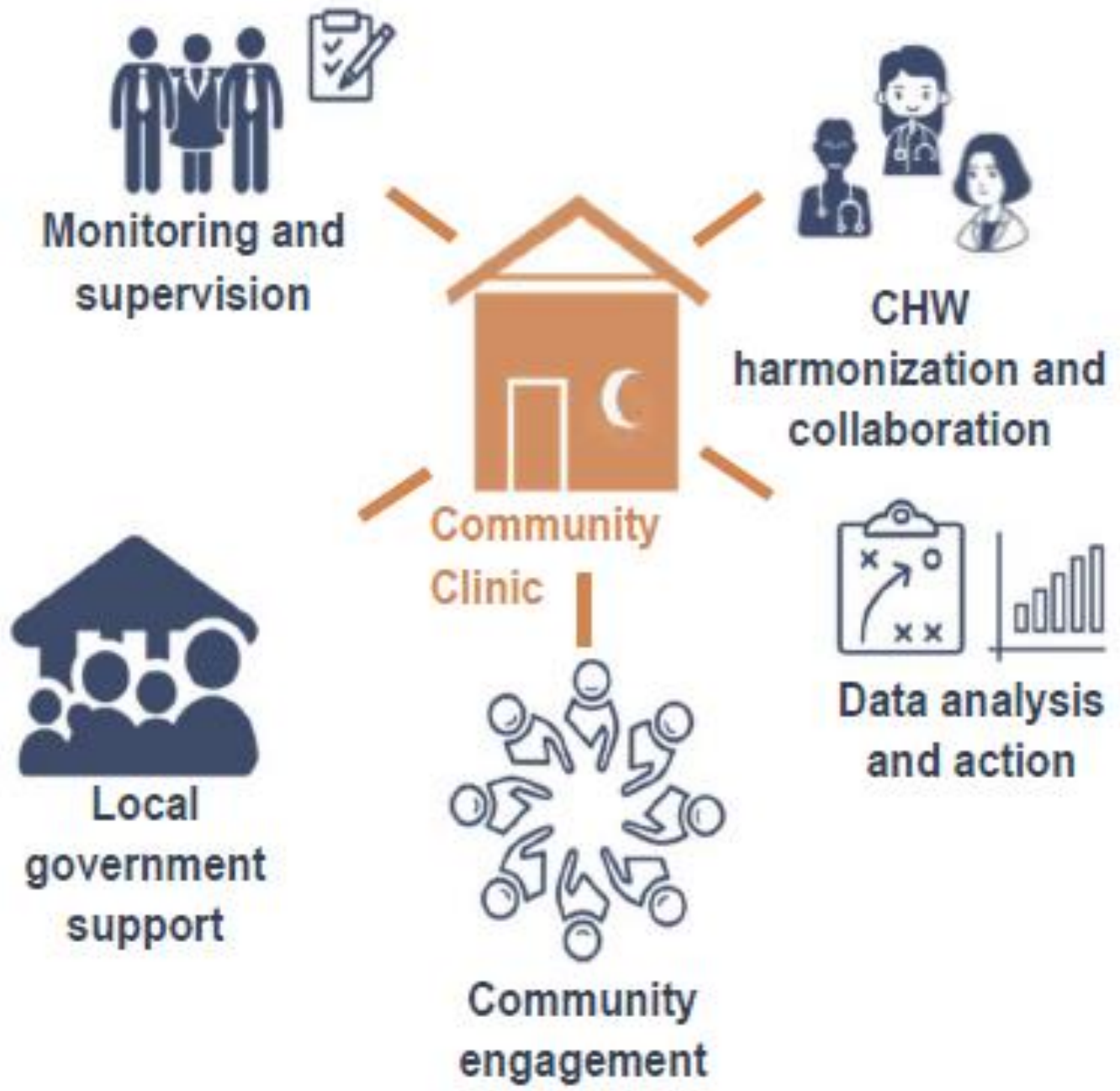


# Different levels of facilities for referral



# Framework of the Community Clinic Program by CBHC

- **Staffing:** Ensuring services of CHCP and coordination with HA, FWA
- **Supply chain:** 27 types of Medicine and other logistics
- **Infrastructure:** making new clinics and maintenance of old ones
- **Community engagement:** through CG, CSG and NGOs
- **Monitoring and Supervision:** on site supportive supervision by different levels of technical and non technical supervisors
- **Reporting of data**



# The Sheikh Hasina Initiative- Recognition by the United Nations

- The successful initiative of CC in Bangladesh has gained worldwide recognition.
- The United Nations itself praised this initiative, leading to the unanimous adoption of a historic resolution titled “Community-Based Primary Health Care: A Participatory and Inclusive Approach to Achieving Universal Health Coverage” on May 16, 2023, after more than 4 months of intensive negotiations with 193 member states.



# The Sheikh Hasina Initiative- Recognition by the United Nations

- That 70 countries have co-sponsored the resolution is a testimony to Bangladesh's strength in multilateral diplomacy.
- This recognition highlights the innovative leadership of PM Sheikh Hasina in establishing a CC-based PHC model in Bangladesh through public-private partnership.
- The resolution refers to this initiative as “The Sheikh Hasina Initiative,” reflecting the PM's strong commitment to improving public healthcare and promoting equity in global health.

The UN resolution holds three crucial global implications:

- First, the CCs in Bangladesh serve as a reference point for successfully **scaling up PHC**, showcasing the Bangladesh model.
- Second, the resolution emphasizes the **need for both domestic and external financing** to support the strengthening of innovative approaches in healthcare systems.
- Lastly, the World Health Organization (WHO) and other UN agencies will provide **technical support to other countries** for the implementation and long-term sustainability of CC-based PHC.

# Key aspects that contributed to this acclaim

- Addressing Healthcare Disparities
- Primary Healthcare and Preventive Services
- Empowering Local Communities
- Cost-Effectiveness
- Political Commitment and Leadership

# Future scopes for improvement

- Technical Assistance
- Financial Support
- Knowledge Exchange
- Advocacy and Awareness
- Integration with UHC Efforts



# Conclusion

- The international recognition and commendation received by Bangladesh's community clinic program underscore its significance as an innovative model of primary healthcare.
- The program's impact on healthcare access and health outcomes is evident, especially in rural and underserved areas.
- However, to ensure its continued success and expansion, sustained support and recognition from the international community are crucial.

Watch Video to Know CC

<https://youtu.be/vBe4HoPq7tE?si=exzw-LwDsslSSMOI>



*Thank  
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