Today we celebrate World Health Day, and for the second year in a row the day is centred on Universal Health Coverage, the bold yet achievable promise that the Government of Bangladesh made to its citizens that by 2030 all people will have access to quality health services, when and where they need them, without suffering financial hardship.

The theme for this year’s World Health Day brings primary health care into the spotlight, the central pillar of universal health coverage.

A well-functioning primary health care system can provide essential medicines and most of the needed basic services, including vaccinations, family planning, treatment for short and long-term conditions, rehabilitation through to palliative care. Strengthening and expanding primary health care is at the core of achieving universal health coverage, allowing people to have access to an integrated essential service package of health services in their community.

The revitalization of more than 13,000 community clinics in Bangladesh demonstrate how the highest level of commitment and will of a country can make health services available and affordable even in remote areas, exemplifying the true spirit of universal health coverage of “Health for All”. This solid foundation of primary health services will be key to achieving universal health coverage by 2030. Strengthening community clinics along with union sub-centres and upazila health complexes and the overall primary health care to deliver effective and efficient essential health services package must be our priority in Bangladesh.

Disease burden due to non-communicable diseases (NCDs) is increasing in Bangladesh. In response to the changing needs, NCDs are being addressed and can be screened at primary health care level. Community level data show an upward trend of the number of patients referred due to diabetes and hypertension. From 2016 to 2018, the number of referrals for diabetes increased from 173,931 to 194,932 while the number of referrals due to hypertension increased from 281,265 to 394,303. But to fully combat NCDs, we need to think about innovative ways through which to extend the scope of NCDs services at community clinic, including promotive and preventive ones. We must also focus on increasing access to delivering high quality health care to those who need them, where they need them, when they need them.

The quality of health services is thus a very critical area that requires further attention. Bangladesh developed a national strategic planning on quality of care in 2015 and various
initiatives have started. However, greater coordination and harmonization of these initiatives is needed as well as institutionalization of those that proved to be effective.

Quality of care should not be constrained by discontinuity or vacancy of health workforce. Adequate number and qualified personnel must be deployed to the right places for the right tasks where their skills and knowledge can be utilized to achieve optimal health of the people. Bangladesh has only 8.3 health workers - physicians, nurses and midwives for 10,000 people which is far below the recommended threshold of 44.5 for 10,000 people, the minimal requirement to achieve universal health coverage. Another important aspect of quality of health services is supportive supervision. With adequate monitoring mechanisms in place and supportive supervision, quality of health services can improve.

Problems of medicines shortages have to be addressed as medicines continue to be the main driver of out-of-pocket spending on health care. At the same time, a strategy is needed to assess rational use of medicine, particularly the use of antibiotics, and this has an impact in very sensitive areas, such as the increase of antimicrobial resistance.

Furthermore, there should be **greater investment in health**. The public sector in Bangladesh spends less than one percent of its GDP on health. Countries that have achieved universal health coverage are spending around 4 to 5 percent on health from public sources. With the increased allocation for the health sector under the current sector plan, we hope to see greater investment in frontline services where we can have a greater impact in improving health and equity.

I am happy that today, on the occasion of World Health Day, we are also awarding the best performing health care facilities and their managers for their efforts in providing the highest quality of care, their innovative ideas and best practices for success that are being shared nationwide.

I congratulate all the winners of this year and I strongly encourage all healthcare providers, health facilities to continue their efforts in providing the best health services, keeping a close eye on the principles of Universal Health Coverage: Quality health care for all people, everyone, everywhere without leaving anyone behind. We are very much grateful to DFID for supporting the Health Minister’s National Award 2018 for promoting best health management practices in Bangladesh.

WHO stands alongside the Government of Bangladesh and other development partners for ensuring ‘health for all’ by 2030. Together, we can achieve this and will be contributing to social wellbeing and economic development.

**Dr Bardan Jung Rana**

WHO Representative to Bangladesh