

Responsiveness of urban primary health care delivery system in Bangladesh: A comparative analysis

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This study analyses the responsiveness of outpatient care to assess the quality of urban primary healthcare of all five varieties of healthcare providers in Bangladesh, namely Urban Primary Health Care Services Delivery Project (UPHCSDP); NGO Health Services Delivery Project (NHSDP), NGOs; private clinics/hospitals; and Ministry of Health and Family Welfare (MOHFW). There is a lack of exclusive study on responsiveness in Bangladesh. Other than some public-private comparisons, there is also lack of literature in the international context, which compares the responsiveness of different delivery channels of healthcare. An absolute knowledge gap in this context of urban health research, particularly in the Bangladesh context, motivates this study. The study uses primary data based on a survey, conducted during July 2016, of 810 exit patients selected using systematic random sampling technique from three old city corporations. A

structured questionnaire, which contained questions on all seven domains of responsiveness of outpatient care suggested by World Health Organization, was used to conduct the survey. The estimated mean responsiveness score reveals that overall about 33 percent of the patients reported poor health system responsiveness. NHSDP is the top and MOHFW is the bottom in terms of responsiveness. Overall, prompt attention and autonomy are the worse performing domains and choice of provider, dignity and clear communication are the better ones. The results suggest improving the degree of responsiveness of all domains, especially, which are more concerned to access to healthcare namely, prompt attention, dignity, clear communication, and confidentiality. MOHFW facilities should give additional attention to promote prompt attention, autonomy and quality of basic amenities. Private facilities should also provide additional stress on improving prompt attention and autonomy. Emphasis on non-therapeutic quality of healthcare needs to be given in the medical education system. Further research based on household survey could be worthy to measure responsiveness more comprehensively.

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