Public Health and COVID - 19: the Role Urban Local Governments in Bangladesh

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Introduction

In Bangladesh, the pandemic Covid-19 is not only a grave socio-economic crisis but it is simultaneously an unfolding public health crisis. Like other developed and developing countries across the world, Bangladesh has been struggling to combat the pandemic COVID -19 with its limited resources since its outbreak in March 2020. Since Bangladesh is one of the most-densely populated countries of the world, it is extremely difficult to provide basic health care facilities and services to all the citizens which is one of the constitutional rights of the citizen. In the midst of this disparaging situation, the global pandemic has posed a serious challenge for the country: how to address effectively this emerging crisis. Though Bangladesh has the long outstanding experiences of handling the natural calamities and disasters but its know-hows and capabilities in respect of the worldwide epidemic like the COVID-19 are not so much updated, efficient and structured as well as contextual and appropriate.

However, in context of addressing public health issues of the people living in the urban areas of Bangladesh, the Urban Local Governments (ULGs) i.e., the City Corporations and the Paurashavas have been institutionally and legally empowered for dealing with the pandemics like the COVID 19. This paper discusses about the meaning of public health, legal provisions of ULGs addressing the public health issues, a critical evaluation of the ULGs in respect of public health related activities particularly the COVID – 19, lessons learnt and the way forward.

Definitions of Public Health

According to the American Public Health Association, "public health is the practice of preventing disease and promoting good health within groups of people, from small communities to entire countries." According to the World Health Organization (WHO), "public health refers to all organized measures (whether public or private) to prevent disease, promote health, and prolong life among the population as a whole. Its activities aim to provide conditions in which people can be healthy and focus on entire populations, not on individual patients or diseases."

Public health promotes the welfare of the entire population, ensures its security and protects it from the spread of infectious disease and environmental hazards, and helps to ensure access to safe and quality care to benefit the population. These diseases are of great interest in the field of public health.

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There are 10 essential services of public health which describe the ideal public health activities. And these services should be undertaken by the appropriate authorities so as to address the public health issues of the communities.

- Monitor health status to identify and solve community health problems
- Diagnose and investigate health problems and health hazards in the community
- Inform, educate, and empower people about health issues
- Mobilize community partnerships and action to identify and solve health problems
- Develop policies and plans that support individual and community health efforts
- Enforce laws and regulations that protect health and ensure safety
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable
- Assure competent public and personal health care workforce
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services
- Research for new insights and innovative solutions to health problems

The above discussion clearly indicates the possible role of the urban local governments i.e., the City Corporations and the Paurashavas of Bangladesh in respect of ensuring public health of the people.

Legal Provisions of the Urban Local Governments of Bangladesh in Addressing the Public Health

The Municipal Administration Ordinance (1960), the Pourashava Ordinance (1977), the City Corporation Ordinance (1983) and finally the revised Unified Ordinance for the all City Corporations and the Paurashavas - the Local Government (Paurashava) Act, 2009 and the Local Government (City Corporation) Act, 2009 have clearly assigned responsibilities to the Urban Local Governments (ULGs) i.e., the City Corporations and the Paurashavas to ensure urban health for their residents. These pieces of legislation have given them the mandate to provide a wide range of primary and public health services including primary health care (PHC), sanitation, water supply, drainage, food and drink, birth and death registration, vector and infectious disease control, etc. As independent autonomous bodies, the ULGs are required to ensure good health for all populations within its jurisdiction. ULGs' responsibilities cover the following charter areas of work: (i) food and environment, sanitation, and environment control; (ii) birth and death registration and certification; (iii) veterinary services and rabies control; (iv) vector control; (v) conservancy services; (vi) medical and relief services including mobile clinic services; (vii) prevention and control of dangerous and offensive articles; (viii) promotion of public health and health education; (ix) hospital and dispensary operation and management; (x) provision of vaccination and community health; (xii) prevention of infectious and communicable diseases; and (xii) slaughterhouse operation. It appears that the ULGs of Bangladesh have been legally entrusted with a wide range of roles and responsibilities in the field of public health.

An Evaluation of the Public Health Activities of Urban Local Governments

Based on Bangladesh Government's decision, the mandate to provide urban public health services lies with the ULGs. The role of City Corporations and the Paurashavas has been redefined through the enactment of the City Corporation Act, 2009 and the Paurashava Act of 2009. These Acts have

empowered City Corporations and the Paurashavas to maintain public health and establish and operate hospitals, PHC centers, dispensaries, and mobile health units for urban people. Under the Acts, all private clinics, hospitals, diagnostic centers, and paramedical institutes are subject to licensing from concerned City Corporations and the Paurashavas. However, the responsibility of ULGs for urban health support has not been fully realized due to (i) the relatively recent health problems associated with rapid urbanization; and (ii) ULG's limited human and financial resources for coping with this growing unmet need in urban health.

Each City Corporation and Paurashava has a health department (HD) which provides public health services. Each HD is headed by a chief health officer (CHO), assisted by medical officers, a number of paramedics, and other staff to deal with public and environmental health, basic sanitation, and water supply. These health departments in the ULGs are beset with a number of institutional problems which eventually contribute to the non-attainment of the provisions of desired services to the people. There are insufficient resources and authorities in ULGs which hinder effective provisions of public health and PHC services in urban areas. Lack of realistic planning, organizational structure, updated management and coordination, and effective monitoring and supervision are the main features of the HDs of the ULGs. The actual organization varies considerably among ULGs, with no proper job descriptions and clear lines of authority. It is noticed that the HD staffs often perform tasks according to priorities set by the respective public representatives of the ULGs. ULGs have difficulty in recruiting qualified health personnel due to low salaries, a lack of career progression and job transfers, and inadequate pension and benefit systems. At present, the HDs have huge staff vacancies, particularly among senior management and mid-level medical officer positions. It can be mentioned here that the ULGs are largely handicapped by the non-availability of required medical staffs to deal with issues related to the public health, in general and to the prevailing COVID -19, in particular.

Role of Urban Local Governments Combating the COVID - 19

Among others, the following are the major activities that so far have been undertaken by the City Corporations and the Paurashavas of Bangladesh in combating the COVID -19:

- Emergency meetings of the Standing Committee on Disaster Management of the City Corporations and the Paurashavas;
- Since the announcement of the lockdown, financially disadvantaged families such as the poorest
 of the poor, day laborers, small traders, rickshaw pullers, easy bike drivers, slum dwellers, motor
 vehicle workers and other types of distressed poor people were given some reliefs in the form of
 cash and kinds;
- Circulation of awareness-raising leaflets;
- Miking on maintaining social distance and undertaking other precautionary health measures;
- Arranging hand washing or hand sanitizing system at public places like markets, shopping malls, mosques etc.;
- Intensive arrangements of cleaning drains;
- Distribution of Personal Protective Equipment (PPE) to the workers engaged in cleaning drains and removing solid waste; and
- Arranging separate corners and emergency burials for the coronavirus deaths in the graveyards.

Lessons Learnt

The lessons learnt in addressing the pandemic COVID – 19 by the ULGs of Bangladesh are as follows:

- The ULGs should be technically equipped to deal with such types of pandemic coronavirus diseases in terms of man-power and equipment.
- There should be adequate financial allocations in annual development programs of ULGs.
- The Coronavirus pandemic is more severe than any form of natural disaster and can only get worse. Keeping this reality in mind, the City Corporation and the Paurashava Disaster Management Committees must be activated to render the best possible support to prevent the spread of the deadly virus. The impact of the COVID-19 pandemic could be minimized through proper disaster management planning and by integrating disaster management activities with local and national development plans. It is apparent that effective coordination is an essential ingredient for disaster management.
- More green spaces are to be created near to the low income areas of the City Corporations and the Paurashavas so that the poor people can spend their leisure time over there.
- The public representatives of the City Corporations and the Paurashavas need to be equally oriented towards the software issues as they are towards the hardware issues. Among the software issues, awareness building towards public health is an important matter.
- The mindset of the public representatives of ULGs i.e., the Mayors and the Ward Councilors are to be attuned towards undertaking all possible measures to deal with the issues relating to the COVID - 19 considering as one of their responsibilities that come within the purview of ensuring public health of the people.

The Way Forward

There is no doubt to say that the existing COVID-19 is a global issue but there should be local level approach which is essential to estimate the incidence and prevalence of COVID-19 at the community, to identify the proportion of the community with protective immunity (herd immunity), to plan on-going and future interventions, and to inform decision-making for gradually returning to normal activities within communities. To this effect, the ULGs can play a pivotal role in ensuring public health at the grass root level since the local conditions are more familiar to them. However, the combination of such comprehensive and integrated measures may help resist the growing trend of COVID-19 in the country and moving forward towards a new normal age.

The National Preparedness and Response Plan for COVID-19, Bangladesh (Version-5), prepared by the Directorate General of Health Services of the Ministry of Health and Welfare in March 2020, is aimed at preventing and controlling COVID-19 and reducing its impact on the health and well-being of the people as well as on the economy of the country. The primary objective of the plan is to prevent the entry of the disease into the country as well as to prevent or limit local transmission. In line with the objectives of the

above mentioned plan, all the ULGs need to translate and revisit their own plans and programmes relating to the COVID -19 so as to undertake measures in view of local as well as the national contexts.