IN BANGLADESH, ONE OF THE GREATEST CHALLENGES IN ACHIEVING THE SDGs AND ADVANCING UNIVERSAL HEALTH COVERAGE IS THE SHORTAGE OF SKILLED HEALTH PROVIDERS IN REMOTE AREAS. IN THIS REGARD CARE BANGLADESH PARTNERING WITH GOVERNMENT OF BANGLADESH TO INNOVATE A SUSTAINABLE SOLUTION “SKILLED HEALTH ENTREPRENEUR (SHE)” FOR REMOTEST SUNAMGANJ DISTRICT.

Consequently, the results in 2018 shows statistically significant improvements in several maternal health, early childhood health, family planning indicators in Sunamganj district. For instance, delivery by skilled birth attendant increased from 13.4% to 37.4%. Most of the services are reaching low-income households. Also this model is adopted in other CARE projects and scaled up in Netrokona district.
Under CARE-GSK Community Health Worker Initiative, Skilled Health Entrepreneur (SHE) model developed:

To address the health service gap of 2.8 million in all 11 sub-districts of Sunamganj, we develop 300 sustainable private skilled health providers, supported by communities, public health system, local government bodies. The private providers are accredited by Bangladesh Nursing Council with 06-month community skilled birth attendant training complemented by community based integrated management of childhood illness (C-IMCI), FP, nutrition and social entrepreneurship training. Each provider has a market size of about 7500 population and is supported by 10 community health workers (CHWs).

Skilled Health Entrepreneur - SHE model

Local Government
Supports in selection, promotion, setting service price and making them accountable

Ministry of Health & Family Welfare (MOHFW)
Recognize SHE with training, logistics, supply, monitoring, reporting and overall coordination

Community group and Community Support group
Creates an enabling environment, demand for quality services of SHE along with financial and non-financial support to the poor and extreme poor in accessing MNCH services

Community Health Volunteer
Supports SHE with pregnancy identification and conducting birth planning sessions

Social Entrepreneurship
Includes social business training, market linkage and business plan

UNION 30,000 POPULATION
3 SHE in a union

The Basket of Skilled Health Entrepreneur

Ante Natal Care (ANC)
Safe Delivery and referral
Post Natal Care (PNC)
Investigations (Pregnancy test, Urine protein and sugar, HB)
NCD Screening for HTN and Diabetes
Family Planning (FP)

Nutrition Services: GMP, IFA, MNP
Eye Screening and referral
Hygiene Products and OTC medicines
Community IMCI
BROADENING THE HEALTH HORIZON
Transformation from a Maternal New Born Child (MNCH) provided to a multipurpose skilled health care provider

Training Steps of Skilled Health Entrepreneur

Key Achievements & Results November 2013 – October 2019

- 300 Skilled health service provider
- 1.6 million Service contacts in last six years
- 47,123 skilled deliveries
- 34,619 SHE service contacts/month

3000 Community Volunteers (CHVs)

872 Community Group & Community Support Group re-activated and strengthened

1,677,008 BDT ($20,000) local fund raised in a year

586,952 BDT ($7,000) Utilized in a year

6,000 Woman and children supported by CG and CSG during referral in three years

136 Institutional linkage

136 Private CSBA Seating at CC (Community Clinics)

29 Private CSBA once in a week Seating at UHFWC (Union health and family welfare)

Government provided safety net commodities

Such as 2.7 million iron & folic acid (IFA), 7.1% Chlorhexidine and misoprostol tablets to the Private CSBAs.

Local Government allocated

14,352,500 BDT in last FY and utilized at least 3.75 million

13,127,386 BDT for blood grouping and ANC campaign, labor room construction at Community Clinic and helping poor families for seeking health care.
Impact of SHE

Combined effort by GOB. and Development partners result in reduction of early Childhood Mortality

- Neonatal Mortality Rate (NMR) increased from 33 to 42
- Infant Mortality Rate (IMR) increased from 46 to 78
- Under-five Mortality Rate (IMR) increased from 52 to 97

Increased uptake of skilled MNCH (Maternal Newborn and Child Health) services

- ANC by medically trained provider (%): Baseline 2012 = 43%, Endline 2018 = 60%
- Delivery by skilled birth attendant (%): Baseline 2012 = 13%, Endline 2018 = 37%
- PNC within 2 days of delivery from a medically trained provider: Baseline 2012 = 9%, Endline 2018 = 30%

The Entrepreneurs Served more Mothers from Poor and Extreme Poor Families

Coverage of Any services by the Private CSBA by Wealth Quintile

- Highest: 49%
- Fourth: 58%
- Middle: 57%
- Second: 56%
- Lowest: 60%

Saved 60% Household lowest Wealth Quintile

Distribution of clients of private CSBA by wealth Quintile

- Highest: 18%
- Fourth: 21%
- Middle: 61%
- Second: 21%
- Lowest: 20%

SUPPORT SHE FOR IMPROVING HEALTH AND NUTRITION OUTCOME IN THE HARD TO REACH GEOGRAPHIC LOCATION OF BANGLADESH