



GAVI Alliance Board

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COUNTRY BRIEFING – BANGLADESH



Content

- 1. Basic information about Bangladesh**
- 2. Economic, political and social context**
- 3. Health and development**
- 4. GAVI Alliance support to Bangladesh**

I. Basic information about Bangladesh¹

Geography

Area: 147,570 sq. km. (55,813 sq. mi.)

Cities: *Capital*--Dhaka (pop. 10 million). *Other cities*--Chittagong (2.8 million), Khulna (1.8 million), Rajshahi (1 million).

Terrain: Mainly flat alluvial plain, with hills in the northeast and southeast.

Climate: Semitropical, monsoonal.

People

Nationality: *Noun and adjective*--Bangladeshi(s)

Population (July 2009 CIA est.): 156 million

Annual population growth rate (July 2009 CIA est.): 1.29%

Ethnic groups (1998, CIA): Bengali 98%, other 2% (including tribal groups, non-Bengali Muslims)

Religions (1998, CIA): Muslim 83%; Hindu 16%; Christian 0.3%, Buddhist 0.6%, others 0.3%

Languages: Bangla (official, also known as Bengali), English

Education: *Attendance*--61%. *Adult literacy rate*--47.5%. (UNDP Human Development Index 2007/2008)

Work force (70.86 million): *Agriculture, forestry, and fisheries*--63%; *manufacturing*--11%; *mining and quarrying*--0.2%



Government

Type: Parliamentary democracy

Independence: 1971 (from Pakistan)

Constitution: 1972; amended 1974, 1979, 1986, 1988, 1991, 1996, 2004

Branches: *Executive*--president (chief of state), prime minister (head of government), cabinet. *Legislative*--unicameral Parliament (345 members). *Judicial*--civil court system based on British model

Administrative subdivisions: Divisions, districts, subdistricts, unions, villages

Political parties: 30-40 active political parties. Largest ones include Bangladesh Nationalist Party (BNP), the Awami League (AL), the Jatiya Party, and the Jamaat-e-Islami Party.

Suffrage: Universal at age 18



History²

Europeans began to set up trading posts in the area of Bangladesh in the 16th century; eventually the British came to dominate the region and it became part of British India. In 1947, West Pakistan and East Bengal (both primarily Muslim) separated from India (largely Hindu) and jointly became the new country of Pakistan. East Bengal became East Pakistan

¹ <http://www.state.gov/r/pa/ei/bgn/3452.htm>

² <https://www.cia.gov/library/publications/the-world-factbook/geos/bg.html>

in 1955, but the awkward arrangement of a two-part country with its territorial units separated by 1,600 km left the Bengalis marginalized and dissatisfied. East Pakistan seceded from its union with West Pakistan in 1971 and was renamed Bangladesh. A military-backed, emergency caretaker regime suspended parliamentary elections planned for January 2007 in an effort to reform the political system and root out corruption. In contrast to the strikes and violent street rallies that had marked Bangladeshi politics in previous years, the parliamentary elections finally held in late December 2008 were mostly peaceful and Sheikh HASINA Wajed was elected prime minister.

II. Economic, political and social context in Bangladesh³

Economic context

Although one of the world's poorest and most densely populated countries, Bangladesh has made major strides to meet the food needs of its increasing population, through increased domestic production augmented by imports. The land is devoted mainly to rice and jute cultivation, although wheat production has increased in recent years; the country is largely self-sufficient in rice production. Nonetheless, an estimated 10% to 15% of the population faces serious nutritional risk. Bangladesh's predominantly agricultural economy depends heavily on an erratic monsoonal cycle, with periodic flooding and drought. Although improving, infrastructure to support transportation, communications, and power supply is poorly developed. Bangladesh is limited in its reserves of coal and oil, and its industrial base is weak. The country's main endowments include its vast human resource base, rich agricultural land, relatively abundant water, and substantial reserves of natural gas.

Since independence in 1971, Bangladesh has received more than \$30 billion in grant aid and loan commitments from foreign donors, about \$15 billion of which has been disbursed. Major donors include the World Bank, the Asian Development Bank, the UN Development Program, the United States, Japan, Saudi Arabia, and west European countries. Bangladesh historically has run a large trade deficit, financed largely through aid receipts and remittances from workers overseas. Foreign reserves dropped markedly in 2001 but stabilized in the \$3 to \$4 billion range (or about 3 months' import cover). In January 2007, reserves stood at \$3.74 billion, and they increased to \$5.39 billion by January 2008, according to the Bank of Bangladesh, the central bank. Bangladesh's resilient economy has so far weathered the global economic crisis, growing some 5.9% in FY 2009. Exports dipped slightly, but the decrease was modest compared to other developing nations. Remittances from overseas workers remain strong, though growth in remittances could slow following an apparent slowdown in the numbers of Bangladesh workers going abroad. The United States is Bangladesh's third-largest export market, and trade between the two nations reached \$4.2 billion in 2009. The economy is predicted to grow near 6% in 2010.

Moves Toward a Market Economy

Following the violent events of 1971 during the fight for independence, Bangladesh--with the help of large infusions of donor relief and development aid--slowly began to turn its attention to developing new industrial capacity and rehabilitating its economy. The static economic

³ <http://www.state.gov/r/pa/ei/bgn/3452.htm>

model adopted by its early leadership, however--including the nationalization of much of the industrial sector--resulted in inefficiency and economic stagnation. Beginning in late 1975, the government gradually gave greater scope to private sector participation in the economy, a pattern that has continued. A few state-owned enterprises have been privatized, but many, including major portions of the banking and jute sectors, remain under government control. Population growth, inefficiency in the public sector, resistance to developing the country's richest natural resources, and limited capital have all continued to restrict economic growth.

In the mid-1980s, there were encouraging, if halting, signs of progress. Economic policies aimed at encouraging private enterprise and investment, denationalizing public industries, reinstating budgetary discipline, and liberalizing the import regime were accelerated. From 1991 to 1993, the government successfully followed an enhanced structural adjustment facility (ESAF) with the International Monetary Fund (IMF) but failed to follow through on reforms in large part because of preoccupation with the government's domestic political troubles. In the late 1990s the government's economic policies became more entrenched, and some of the early gains were lost, which was highlighted by a precipitous drop in foreign direct investment in 2000 and 2001. In June 2003 the IMF approved 3-year, \$490-million plan as part of the Poverty Reduction and Growth Facility (PRGF) for Bangladesh that aimed to support the government's economic reform program up to 2006. Seventy million dollars was made available immediately. In the same vein the World Bank approved \$536 million in interest-free loans.

Efforts to achieve Bangladesh's macroeconomic goals have been problematic. The privatization of public sector industries has proceeded at a slow pace--due in part to worker unrest in affected industries--although on June 30, 2002, the government took a bold step as it closed down the Adamjee Jute Mill, the country's largest and most costly state-owned enterprise. The government also has proven unable to resist demands for wage hikes in government-owned industries. Access to capital is impeded. State-owned banks, which control about three-fourths of deposits and loans, carry classified loan burdens of about 50%.

The IMF and World Bank predict GDP growth over the next 5 years will be about 6.0%, well short of the 8%-9% needed to lift Bangladesh out of its severe poverty. The initial impact of the end of quotas under the Multi-Fiber Arrangement has been positive for Bangladesh, with continuing investment in the ready-made garment sector, which has experienced annual export growth of around 20%. Downward price pressure means Bangladesh must continue to cut final delivered costs if it is to remain competitive in the world market. Foreign investors in a broad range of sectors have been increasingly frustrated with the politics of confrontation, the level of corruption, and the slow pace of reform. Investors viewed favorably steps taken by the interim government to address corruption, governance, and infrastructure issues, though most believed it was too early to assess the long-term impact of those developments. With the reemergence of Sheikh Hasina in a position of political leadership, and her subsequent interest in international outreach, opportunities to build upon U.S.-Bangladesh economic cooperation exist. For prospective economic cooperation to be further realized, Bangladesh must address its market shortcomings and vulnerabilities in a timely manner.

Agriculture

Most Bangladeshis earn their living from agriculture. Although rice and jute are the primary

crops, maize and vegetables are assuming greater importance. Due to the expansion of irrigation networks, some wheat producers have switched to cultivation of maize which is used mostly as poultry feed. Tea is grown in the northeast. Because of Bangladesh's fertile soil and normally ample water supply, rice can be grown and harvested three times a year in many areas. Due to a number of factors, Bangladesh's labor-intensive agriculture has achieved steady increases in food grain production despite the often unfavorable weather conditions. These include better flood control and irrigation, a generally more efficient use of fertilizers, and the establishment of better distribution and rural credit networks. With 28.8 million metric tons produced in 2005-2006 (July-June), rice is Bangladesh's principal crop. By comparison, wheat output in 2005-2006 was 9 million metric tons. Population pressure continues to place a severe burden on productive capacity, creating a food deficit, especially of wheat. Foreign assistance and commercial imports fill the gap. Underemployment remains a serious problem, and a growing concern for Bangladesh's agricultural sector will be its ability to absorb additional manpower. Finding alternative sources of employment will continue to be a daunting problem for future governments, particularly with the increasing numbers of landless peasants who already account for about half the rural labor force.

Industry and Investment

Fortunately for Bangladesh, many new jobs--1.8 million, mostly for women--have been created by the country's dynamic private ready-made garment industry, which grew at double-digit rates through most of the 1990s. The labor-intensive process of ship-breaking for scrap has developed to the point where it now meets most of Bangladesh's domestic steel needs. Other industries include sugar, tea, leather goods, newsprint, pharmaceutical, and fertilizer production. The country has done less well, however, in expanding its export base--garments account for more than three-fourths of all exports, dwarfing the country's historic cash crop, jute, along with leather, shrimp, pharmaceuticals, and ceramics.

Despite the country's politically motivated general strikes, poor infrastructure, and weak financial system, Bangladeshi entrepreneurs have shown themselves adept at competing in the global garments marketplace. Bangladesh exports significant amounts of garments and knitwear to the U.S. and the European Union (EU) market. As noted, the initial impact of the end of quotas on Bangladesh's ready-made garment industry has been positive. Downward price pressures, however, mean Bangladesh must continue to cut final delivered costs if it is to remain competitive in the world market.

The Bangladesh Government continues to court foreign investment, something it did fairly well in the 1990s in private power generation and gas exploration and production, as well as in other sectors such as cellular telephony, textiles, and pharmaceuticals. In 1989, the same year it signed a bilateral investment treaty with the United States, it established a board of investment to simplify approval and start-up procedures for foreign investors, although in practice the board has done little to increase investment. Bangladesh also has established export processing zones in Chittagong (1983), Dhaka (1994), Comilla (2000), Mongla (2001), Iswardi (2005), Uttara (2006), and Karnafully (2007).

The most important reforms Bangladesh should make to be able to compete in a global economy are to privatize state-owned enterprises (SOEs), deregulate and promote foreign investment in high-potential industries like energy and telecommunications, and take decisive

steps toward combating corruption and strengthening rule of law.

Political Context

The president, while chief of state, holds a largely ceremonial post; the real power is held by the prime minister, who is head of government. The president is elected by the legislature (Parliament) every 5 years. The president's circumscribed powers are substantially expanded during the tenure of a caretaker government. Under the 13th Amendment, which Parliament passed in March 1996, a caretaker government assumes power temporarily to oversee general elections after dissolution of the Parliament. In the caretaker government, the president has control over the Ministry of Defense, the authority to declare a state of emergency, and the power to dismiss the Chief Adviser and other members of the caretaker government. Once elections have been held and a new government and Parliament are in place, the president's powers and position revert to their largely ceremonial role. The Chief Adviser and other advisers to the caretaker government must be appointed within 15 days after the current Parliament expires.

The prime minister is appointed by the president. The prime minister must be a Member of Parliament (MP) who the president feels commands the confidence of the majority of other MPs. The cabinet is composed of ministers selected by the prime minister and appointed by the president. At least 90% of the ministers must be MPs. The other 10% may be non-MP experts or "technocrats" who are not otherwise disqualified from being elected MPs. According to the constitution, the president can dissolve Parliament upon the written request of the prime minister.

The legislature is a unicameral, 300-seat body. All of its members are elected by universal suffrage at least every five years. Parliament amended the constitution in May 2004, making a provision for 45 seats reserved for women to be distributed among political parties in proportion to their numerical strength in Parliament. Several women's groups have demanded direct election to fill the reserved seats for women.

Bangladesh's judiciary is a civil court system based on the British model; the highest court of appeal is the appellate court of the Supreme Court. At the local government level, the country is divided into divisions, districts, sub districts, unions, and villages. Local officials are elected at the union level and selected at the village level. All larger administrative units are run by members of the civil service.

Despite serious problems related to a dysfunctional political system, weak governance, and pervasive corruption, Bangladesh remains one of the few democracies in the Muslim world. Bangladeshis regard democracy as an important legacy of their bloody war for independence, and they vote in large numbers. However, democratic institutions and practices remain weak.

Bangladesh is generally a force for moderation in international forums, and it is also a long-time leader in international peacekeeping operations. It is the second-largest contributor to UN peacekeeping operations, with 10,481 troops and police active in November 2009. Its activities in international organizations, with other governments, and with its regional

partners to promote human rights, democracy, and free markets are coordinated and high-profile. Bangladesh became a member of the United Nations Human Rights Council in May 2006, and began a second term in 2009. However, an explicit goal of its foreign policy has been to strengthen relations with Islamic states, leading to actions such as voting against a December 2009 UN resolution to improve human rights conditions in Iran.

Bangladesh lies at the strategic crossroads of South and Southeast Asia. Potential terrorist movements and activities in or through Bangladesh pose a potentially serious threat to India, Nepal, Bhutan, and Burma, as well as Bangladesh itself. Consequentially, the Bangladesh Government has banned a number of Islamic extremist groups in recent years. Given its size and location, a major crisis in Bangladesh could have important consequences for regional stability, particularly if significant refugee movements ensue.

The Government has a strong partnership with the civil society in implementation of all social sector programmes. As an example, the organisation Bangladesh Rehabilitation Assistance Committee, now known as BRAC and the largest NGO in the world, reaches over 110 million Bangladeshis with its programmes on microfinance, education, health, ultra poor, social development, agriculture, and gender equality.⁴

III. Health and Development⁵

Population and Health Indicators 2010	
Total population ¹	148.69 million
Population annual growth rate ¹	1.1%
Population less than 5 years ¹	14.71 million
Female 15-49 years ¹	41.06 million
Percentage urban population ¹	28%
Life expectancy at birth ¹	69.43
Live births ¹	3.04 million
Surviving infants ¹	2.90 million
Infant mortality rate (2009) ²	41 per 1000 live births
Under five mortality rate (2009) ²	52 per 1000 live births
Number of districts in country (2009) ³	64
Number of districts with DTP3 < 50% (2009) ³	0
Number of districts with DTP3 > 80% (2009) ³	51
% of districts using autodisable syringes (2009) ³	100%

Sources:

¹ United Nations, Population Division. The World Population Prospects – the 2010 revision. New York, 2011

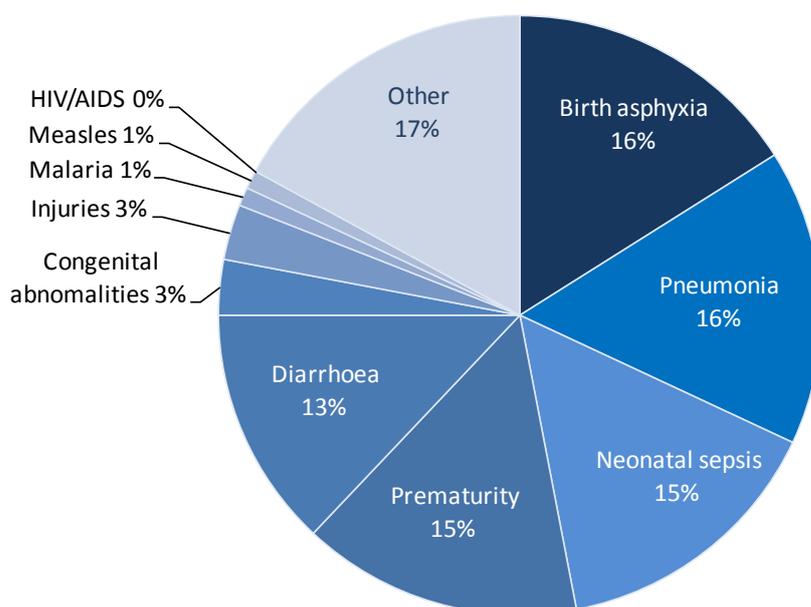
² World Health Organization, World Health Statistics 2011

³ World Health Organization – Joint Reporting Form

⁴ BRAC Annual Report 2010.

⁵ Narrative text in this section drawn from World Health Organization – Country Cooperation Strategy at a glance

Proportion of under 5 deaths by cause (2008)



Source: WHO, World Health Statistics 2011

Bangladesh has made considerable progress in recent decades in improving the health of its people. The population growth rate has declined, life expectancy at birth has increased, infant and under-five mortality rates have decreased, and a demographic transition is beginning to emerge. Health services are moving steadily from the age-old, free public services to for-profit private services. Public health provisions are now mainly concentrating on services for the lower quintile of the population and there is emphasis on improving equity in access to care.

Health of Vulnerable Groups: Women, Children, Adolescents and the Elderly

Child health in general has been improving, though neonatal and maternal mortality remains unacceptably high. Nearly half of pregnant women suffer from malnutrition and anaemia, and the proportion of deliveries assisted by skilled personnel was low (13.4%). Malnutrition continues to be a serious problem in children and adolescents, especially girls. In addition, risky sexual behaviour is common among youth (10-25 years).

Disease Burden: Communicable and Noncommunicable Diseases

Considerable progress has been made in communicable diseases control, but noncommunicable diseases (NCD) are showing a rising trend. Among communicable diseases of concern are malaria, tuberculosis, vaccine preventable diseases, HIV/AIDS, endemic diseases such as kala-azar and emerging diseases like avian influenza. Unhealthy lifestyle, tobacco use, and an ageing population have contributed to the increased burden of NCDs.

Environmental Health

Ensuring safe drinking water is a major challenge but the recent introduction of water safety plans will help develop preventive management capacity. Access to sanitation has increased steadily but adoption of appropriate hygiene practices has been slow. Climate change is a great concern and needs a multi-sectoral approach. Indoor air pollution, food safety, occupational health and safety, and health care waste are also important issues.

Emergency Preparedness and Response for Disasters

Bangladesh is prone to natural disasters including cyclones, floods and tornadoes. Improved disaster preparedness including early warning systems and provision of cyclone shelters in coastal areas have led to substantial reduced mortality from cyclones and tidal bores in recent years.

Health System's Response

Health system performance has been improving steadily in recent years. However, governance and stewardship functions are not adequate to make the services efficient and equitable. In addition, the total health expenditure is not sufficient to scale-up interventions needed for improvement. There are chronic shortages, mal-distribution and imbalances in the skill-mix of the health work-force.

Development Challenges⁶

Bangladesh received a UN award in 2010 for its remarkable achievements in attaining the Millennium Development Goals (MDGs), particularly in reducing child mortality. It has also made some good progress on reducing income poverty, and getting nearly all boys and girls enrolled in primary school. Bangladesh has also strengthened its disaster preparedness and management and effectively leads the Least Developed Countries caucus in global climate change negotiations. It shows commitment to robust adaptation planning through innovative climate financing mechanisms using its own revenue, which is complemented by donor funds; and through active participation in a South Asia regional initiative on water resource management.

Millennium Development Goals Key health indicators	1990	2000	2009
MDG 4 - Infant mortality rate (per 1000 live births)	102	66	41
MDG 4 - Under five mortality rate (per 1000 live births)	148	90	52
MDG 5 – Maternal mortality ratio (per 100,000 live births)	870 [440-1700]	500 [250-970]	340 [170-660]*
MDG 6 – Malaria mortality rate in 2008 (per 100,000 population)			1.8 [0.9-2.9]*
MDG 6 - HIV/Aids mortality rate (per 100 000 population per year)			0.1 [0.0 – 0.2]
MDG 6 - Prevalence of HIV among adults aged 15–49 years			<0.1%
MDG 6 - Incidence of tuberculosis (per 100 000 population per year)		225 [180–270]	225 [183–271]
MDG 6 - Prevalence of tuberculosis (per 100 000 population)		484 [223–796]	425 [197–697]

Sources:

WHO, World Health Statistics 2011

*refers to 2008

Bangladesh is most lagging on Millennium Development Goal (MDG) 7 (access to water and sanitation) and MDG 5 (improving maternal health), though data from the 2010 maternal

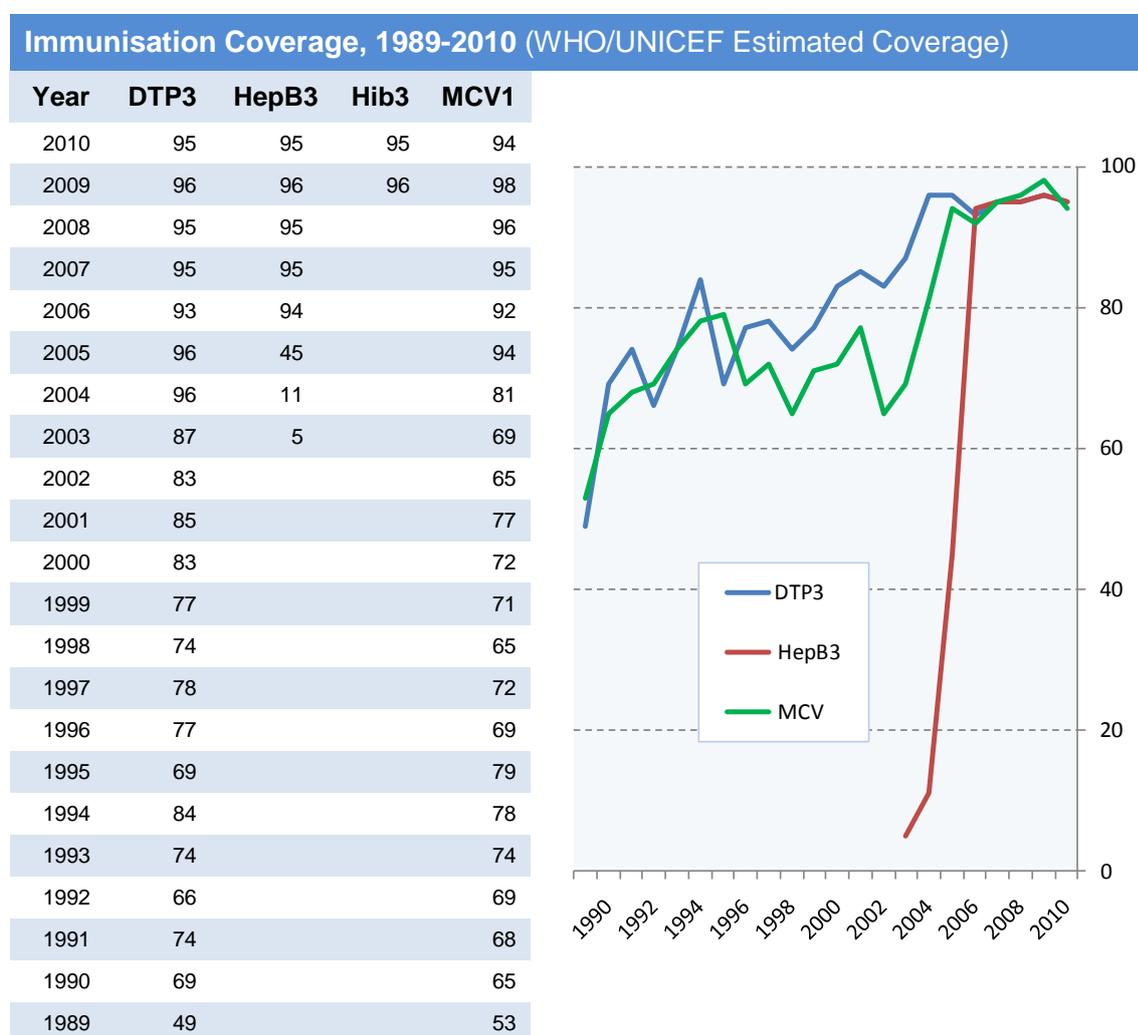
⁶ Extracts from DFID Bangladesh Operational Plan 2011-2015 (April 2011)
<http://www.dfid.gov.uk/Documents/publications1/op/Bangladesh-2011.pdf>

mortality survey show significant progress over the last decade, giving cause for real optimism that strategies are working.

Immunisation

The Bangladesh immunisation program has been recognized for its sustained high coverage and contribution towards improving child survival and economic development. Since the EPI intensification activities that started in 1985, a robust immunisation infrastructure is now well established in all districts.

Vaccination coverage has increased significantly in terms of coverage and quality. WHO/UNICEF estimated DTP3 coverage in 2010 at 95%. The country reports that out of 64 districts, 51 (80%) had more than 80% coverage for DTP3 and 33 (52%) had more than 90% coverage for measles. In 2010, no district reported more than 10% drop-out-rate DTP1 to DTP3.



Source: WHO/UNICEF Estimates

DTP3: Third dose of diphtheria toxoid, tetanus toxoid and pertussis vaccine

Hep3B: Third dose of hepatitis B vaccine

Hib3: Third dose of Haemophilus influenzae type B vaccine)

MCV: Measles-containing vaccine

OPV3: Third dose of oral polio vaccine

IV. Bangladesh and GAVI at a glance

The GAVI Alliance has been assisting the Government of Bangladesh in the area of immunisation and health development since 2001. Bangladesh has received the following support:

- New and underused vaccine support (NVS) for the Hepatitis B monovalent vaccines and since 2009 for pentavalent vaccines. In September 2011, the GAVI Executive Committee also approved support for measles second dose;
- Immunisation services support (ISS);
- Health system strengthening (HSS);
- Injection safety support (INS).

GAVI SUPPORT TO BANGLADESH – As of 30 September 2011						
GAVI Window	Year	Approved ^[2] (USD)	Disbursed (USD)	Disbursed (%)	Committed ^[3] (USD)	Years
HepB mono	2002-2008	20,224,465	20,224,465	100%	-	
HSS	2009	7,243,500	7,243,500	100%	6,428,000	
INS	2004-2006	6,144,414	6,144,414	100%	-	
ISS	2001-2004 & 2006 & 2009	23,340,200	23,340,200	100%		
Pentavalent	2009-2012	145,324,000	120,427,043	100%	70,279,000	2013- 2015
Measles	2012-2016	2,605,000	0		11,905,500	2012- 2016
Vaccine Introduction Grant	2002 & 2008 1012	2,582,500	1,387,000	100%	0	2012
TOTAL SUPPORT		207,464,079	178,766,623			

Co-financing

- Bangladesh started mandatory co-financing of pentavalent vaccine in 2009;
- Good performer: timely payment of co-financing obligation and 2011 co-financing requirement already completed.
- With a Gross National Income of US\$ 640 per capita⁷, Bangladesh falls into the low-income country grouping for co-financing in 2012;

Key Issues for GAVI

- Introduced DTP-HepB-Hib pentavalent vaccine in 2009; the immunisation programme in Bangladesh is successful with an increasing coverage of all antigens over the last two decades;
- Approved for measles second dose by the GAVI Executive Committee in September 2011. Pneumo application received a 'conditional approval' as IRC was not convinced of country's cold chain capacity;
- Expected to apply for rota vaccine in 2012 for introduction in 2013;
- Polio-free since 2007;
- HSS support approved in 2008;
- EVSM carried out in April 2011 - cold chain storage capacity is considered adequate at district and sub-district (upazila) levels to accommodate MCV2 and PCV vaccines but inadequate at the national level to accommodate these additional vaccines.

⁷ 2010 GNI data as per World Bank estimates of July 2011