Health protection challenge for developing country is: Informal health care service provider

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Statement of Problem: Out of 193 countries of the planet 75 countries have only 2.5 healthcare worker per 1000 population. World Health Report also said that it is not possible to achieve the 80 percent coverage target of skilled birth attendance and or child immunization if health care worker (doctor, nurses, midwives) is less than 2.28 per 1000 population. This shortage pushed patients especially the poor and disadvantaged mostly seek health care from informal sectors as they are more socially and community focused. Purpose of Study: To develop an effective, efficient and equitable health systems to improved population health; appropriate formal health workforce needed. There are a shortage and crisis of it. It is nearly impossible to produce the huge numbers of estimated health care providers by the public and private sectors combined. Transform informal health care service providers (HCSP) into a well-trained government registered HCSP. It would able to stop malpractice, ensure standard treatment and accountable for referral responsibility. Methodology- Both Primary and secondary data was taken in a purposive manner. Record review and the interview were done.

Findings: Regards to maternal and child health care, RTI/STI treatment, the problem of reproductive and sexuality, nutrition, limited curative Care were taken from informal health care providers.

Conclusion and Significant: The possibility of miss diagnosis, underdiagnosis and non-useful medication to an individual is very harmful that may lead the person even death. A standard, knowledgeable and skilled health workforce can prepare to provide a fix duration of training, conduct and maintain by Government Regulatory Authority of Health Sector, using a standard curriculum. It will certify them to provide health care service formally. Health care accessibility, quality, equity, and efficiency will increase. And it is very possible to abolish the term informal health care provider for providing and received health care services from anywhere on the globe.

Biography
After completion of medical graduation, she started profession with national NGO operating 25 districts of Bangladesh. Then work for different National and international NGO in a different position for about seven years. Where task was mainly to monitoring, supervision, implementation, and evaluation of different programs of USAID’s. Also maintain liaison with different Government bodies and compliance accordingly both donor, government and organization. Here, she also organized and provide training for employees and develop manually. Then switch the profession and start work as an Academician at the Institute of Health Economics at the University of Dhaka. Presently working as an Assistant Professor in same. she took classes in Medical Sociology, Introduction to Health Science, Health System, Management in Health Sector and Policy and Planning in Health Sector. Here beside compliance with different task provide from the institute also work with UNICEF, SURCH, and KOIKA in different research.

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