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POSITION STATEMENT
on NCDs and COVID-19 in Bangladesh
Developed By
Bangladesh Non-Communicable Diseases Forum
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Dr. Md. Shamim Hayder Talukder
Member Secretary
Bangladesh Non-Communicable Diseases Forum
Email: ceo@eminence-bd.org
Mobile: +8801713066602
Web: www.bncdf.org
Facebook: bncdf (Bangladesh Non-Communicable Diseases Forum)
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Position Statement from Bangladesh NCD Forum

Background:

More than 160 million people reside in Bangladesh where the number of NCDs patients is increasing rapidly and 67% of total death is directly contributed by NCDs that turns 886,000 deaths a year. A study published in The Lancet Global Health expresses that one in five people are at an increased risk of severe COVID-19, mostly as a result of underlying NCDs. As the prevalence rate of diabetes is 10% and hypertension is 17% among the Bangladeshi population, it is giving a fatal outcome in the context of COVID-19. According to ICDDR, B, study raised blood pressure has been found in 20% of men and 32% of women. On the other hand, different published news suggested that COVID-19 death cases had high number of co-morbidities like diabetes, CVD, and other non-communicable diseases. WHO completed a rapid assessment survey in May 2020, and found that 75% of countries reported interruptions to NCD services. Up to 6th November 2020, Bangladesh has identified around 400k COVID-19 cases among them death cases are more than 6k. In this context, Bangladesh Non-Communicable Diseases Forum (BNCDF) and Eminence started advocacy-related activities, supported by Global NCD Alliance under the Civil Society Solidarity Fund to improve quality treatment care and support services for general people and people living with NCDs during COVID-19 pandemic.

Statement Development Procedure:

The activities engaged different stakeholders to assess the present situation and coping strategies for NCDs related health care management system with the professionals associations, stakeholders, patient groups, the National Technical Committee for COVID-19 and policymakers by arranging webinar to gather information related to health service for NCDs, experience to take health services during pandemic period for identifying gaps and scope to place in the proposed policy papers and statement. As a result of these activities, we developed a National Policy Brief and the Statement on behalf of Bangladesh Civil Society Members, which will be endorsed by the different stakeholders and shared with the Government of Bangladesh, regional and global WHO, regional and global NCD alliance together with other relevant stakeholders.
Position of Bangladesh Civil Society Organizations for NCDs:

The following position have been identified by several consultation meeting to ensure the NCDs in different activities related to COVID-19 management in Bangladesh

1. Health service management should be reorganized to provide NCDs related services for emergency management in public and private hospitals in Bangladesh.
2. NCDs management should be clearly described in national guideline of COVID-19.
3. Personal Protective Equipment (PPE) should be available for all NCDs related physicians, nurses, and other health service providers who provide clinical services for the patients.
4. A separate Telemedicine service for NCDs needs to be financially and technically supported to be functionalized for the urban and rural areas of Bangladesh.
5. Instruments and logistics for diagnosis and treatment of NCDs should be available in all upazila, district, and community level hospitals in Bangladesh.
6. NCDs related laboratory investigation should be available at upazila to community clinic level in Bangladesh.
7. Drugs prices monitoring system and accessibility of all socio-economic groups of people should be ensured by the Director General of Drugs and Bangladesh Pharmaceutical Owners Association.
8. NCDs related drugs should be available for all public hospitals and minimum 15 days drugs need to distribute at once time instead of three days
9. National Nutrition Service (NNS) should take initiative for ensuring nutrition for NCDs patients at hospitals and households in Bangladesh
10. Child nutrition and physical activity related initiative should be continued during lockdown of school during the COVID-19 pandemic
11. Training for the front-line health care service providers need to be ensured to provide them with the knowledge and skills to improve healthcare services for NCDs.
12. Comprehensive 360-degree mass media and social media based year round awareness program should be implemented to change the lifestyle and improve compliance rate towards the regular treatment for NCDs.
13. Nationwide community based NCD registrations and surveillance system should be implemented as early as possible. Moreover, systemic investigations and clinical researches need to be conducted on NCDs to know the disease trends and risk factors, results of treatment, hospital prognosis, functional abilities etc. for the further improvement of NCDs Health Care System.
14. Children and Youth people should be focused in all activities related to the COVID-19 plan in Bangladesh.
15. Community engagement related activity is essential for ensuring COVID-19 related prevention and management. Hence, the government should ensure community participation in all COVID-19 related activities in Bangladesh.

16. Bangladesh Preparedness and Response Plan for COVID-19 should include NCDs as a priority agenda and establish a NCDs committee in future COVID-19 related activities.

17. NCD should be prioritized by the multi-stakeholders on the basis of national multi-stakeholder’s action plan on NCDs. Moreover, the multi-stakeholders action plan also needs to be updated on the basis of the experience of COVID-19 and its outcome in Bangladesh.

18. Resource should be allocated on the basis of the cause of mortality in Bangladesh. In this perspective, the Government should increase the allocation of NCDs budget. Moreover, donors and developments partners (USAIDs, UKAid, European Union, SIDA, CIDA, JICA, World Bank, ADB, etc.) should also increase their budget for NCDs as they prioritize their actions on the basis of evidence.

19. As WHO always provide technical support for the government to improve the health management system as well as prioritize the actions related to the diseases status, it is important to help the government of Bangladesh for generating more evidence related to the NCDs and set actions at public and private health care system. WHO country office of Bangladesh may provide technical support to the Ministry of Health and Family Welfare for generating data and evidence related NCDs and COVID-19 from the screening of the disease to the death registration. Furthermore, a strategic planning for research on NCDs and COVID-19 can be developed to ensure future data generation to improve health system management. It is also important to prioritize several clinical researches related to the NCDs and COVID-19 in Bangladesh.

20. As NCD Alliance has a strong global network, they may help us by disseminating the statement among the NCD Alliance’s partner, global and regional WHO, donors and academic institutions to recognize the NCDs related gaps and necessary requirement, hence to prioritize in their scope of partnership and investment for the improvement of the NCDs health service in Bangladesh. The NCD Alliance may also provide us with opportunities to engage with various activities and scope of work related to the NCDs and COVID-19 and help in strengthening the network of Bangladesh NCD Forum to ensure the engagement of multi-stakeholders for NCDs.
Affiliation:

Participants from the following organizations contributed to developed the position statement

- Aparajita
- Shimantik
- ARK Foundation
- Nowzuwan NGO
- Come to the Work
- Eliza Nursing Home
- Gana Unnayan Kendra
- North South University
- Gram Unnayan Sangstha
- Addin Hospital Foundation
- Universal Hospital Limited
- Bangladesh Cardiac Society
- Youth Drugs Control Initiative
- Bangladesh Endocrine Society
- Bangladesh Society of Medicine
- Bangladesh Mental Health Forum
- Centre for Women and Child Health
- Institute of Child and Mother Health
- Ministry of Health and Family Welfare
- Bangladesh Association of Psychiatrist
- Medical Oncology Society of Bangladesh
- Population Services and Training Centre
- National Heart Foundation of Bangladesh
- Arshi Nagar Sebamulak Unnayan Sangstha
- Arshi Nagar Sebamulak Unnayan Sangstha
- Non-Communicable Diseases Control, DGHS
- Eminence Association for Social Development
- Basundhara Social Development Society (BSDS)
- Urban Primary Healthcare Service Delivery Project (UPHSDP)
- The Obstetrical and Gynecological Society of Bangladesh (OGSB)
- Association for Prevention of Septic Abortion, Bangladesh (BAPSA)
- International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B)
For more details, please contact:

Bangladesh Non-Communicable Diseases Forum
Secretariat, Eminence Associates for Social Development
3/6, Hena Nibash (2nd Floor)
Asad Avenue Mohammadpur, Dhaka-1207
Email: bncdf@eminence-bd.org
Contact Number: +88 01713066602
Web: www.bncdf.org