

Celebrating Bangladesh at 50: A Positive Deviance

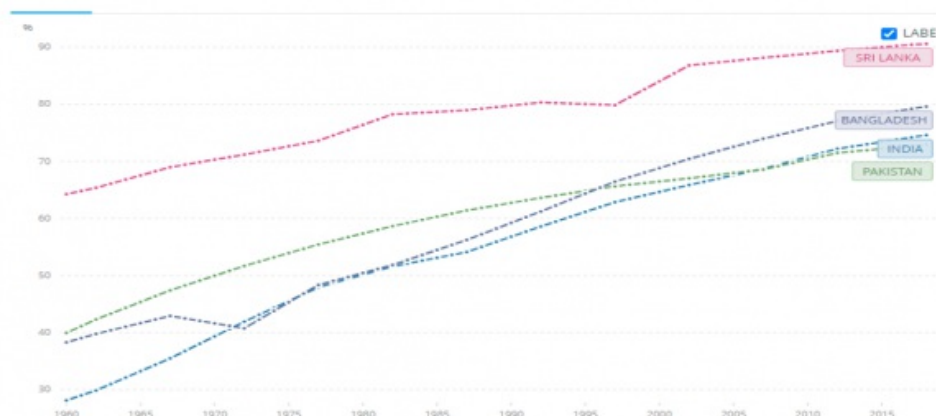


LSE alumnus and Member of our Senior Advisory Board Ahmed Mushtaque Raza Chowdhury's personal account of his journey in independent Bangladesh explains the triumphs of the nation against the odds, the challenges that lie ahead, and his own participation in it.

If someone asked me which year I would like to travel back in time, the unequivocal answer would be 1969–71. In 1969, I joined the [Department of Statistics](#) of the [University of Dhaka](#) as a freshman. In those tumultuous days when history was being inked, my [university](#) was going to [become](#) the epicentre of what was going to unfold over the next months. Before moving to Dhaka, fearing for my safety, my mother made me give her my word that I would not be part of any active politics. When I arrived, however, given the charged situation, could I really ignore what was happening all around me? I ended up taking part in every major political event that was organised. [Bangabandhu Sheikh Mujibur Rahman's](#) words from the [Shaheed Minar](#) (Language Movement monument) on 21 February 1971, and then the fateful [speech on 7 March 1](#) from the Race Course Grounds still echo in my ear as vividly as it did then — about the conspiracy being hatched against the Bengalis, and the impending crisis. And then the war itself which gave us so much — our nationhood. These are some of the memories that make my cohort part of a glorious history.

Yes, the [War of Liberation](#) has given us so much. For the past 20 years, like many others, I too have been talking about the gains that we have seen in the socio-economic fabric of Bangladesh — be it education, poverty alleviation, women's status or health, to the surprise of many sceptics, Bangladesh continues to forge ahead. Most recently, it has moved from 'least developed' to 'developing' country status. More than 90% of our children get enrolled at primary schools now — with no remaining gender gap. Poverty has been cut significantly, and there is hardly any food shortage. The nutritional status of children and mothers has also recorded improvement. While a quarter of our children were unlikely to see their fifth birthday at the time of independence, this has now reduced to less than 3 per cent. The nation has been able to drastically cut its population fertility rate and is now near the replacement level: in 1971, the total fertility rate was above 6 (children per woman) which has now come down to 2.3.

Life expectancy is a robust measure of the wellbeing of a population. In 1971, the life expectancy of an average Bangladeshi was less than 45 years. Since then, it has increased by 70% to 72 years. Until the 1980s, Bangladesh was one of a very few countries where men lived longer than women. As this gender differential is an important marker of progress, I am happy to report that this has now been 'corrected', with women living about three years longer than men! The achievement of Bangladesh and the speed at which this has happened can only be compared to the dramatic changes sought in the 19th century [Meiji Restoration](#) in Japan. Bangladesh's socio-economic gains have exceeded those of some of its economically more powerful neighbours. An average Bangladeshi now lives longer than her/his counterpart in India or Pakistan (Graph below).



Graph 1: Changes in Life Expectancy: Bangladesh compared to Neighbouring Countries

Source: United Nations Population Division. World Population Prospectus: 2019 Revision.

How has this positive deviance occurred? In 2013, the very prestigious and reputable *The Lancet* published a series of articles and commentaries on Bangladesh's progress. The Editors described the Bangladesh experience as 'one of the great mysteries of global health'. The articles attempted to identify reasons why the country did so well despite other constraints, including economic poverty. As mentioned earlier, an important reason is the War of Liberation itself.

Bangladesh fought out its independence through a protracted struggle which culminated in 1971. The struggle was not only for a piece of land but for *freedom*. It was a struggle to safeguard its unique heritages of culture, language and secular values. It was a struggle to accord equal rights and respects to all its citizens, including women. The War saw the defeat of not only the foreign occupiers but also its local agents in the guise of religious extremism. The ground was then set for progressive ideas to flourish like according dignity and rightful status to women. Some of the development issues such as family planning, which was deeply contested and to some extent violently opposed by religious fanatics during the pre-1971 period, now had few social obstacles to overcome.

The subsequent governments of independent Bangladesh formulated policies and plans that were sensitive to equity concerns. New investments increased the reach of the health sector through construction of health centres at grassroots level, and the creation of a trained health workforce. For example, there was just one physician per 10,000 population in 1971; this has now increased sixfold. Similarly, non-government organisations (NGOs) trained thousands of community health workers, which increased its density from zero to about six per 10,000 population. Indeed, NGOs played an extensive role, as outlined in *The Lancet* series of articles. Bangladesh is well-known for its NGOs. In a recent Op-Ed in *The New York Times*, columnist Nicholas Kristoff has advised the new Biden administration to look to Bangladesh for tackling child poverty in America, and cited the positive role played by organisations like [BRAC](#) and [Grameen Bank](#). NGOs' contributions in implementing nationwide programmes on microfinance, primary education, oral rehydration therapy, family planning, drug policy formulations, vaccinations, etc. in Bangladesh are very well known, and has earned them accolades including a [Nobel Peace Prize](#) and a [Knighthood](#)! The War of Independence motivated well-educated Bangladeshis to devote their energy to the development of the country and many of them initiated NGOs like BRAC, Grameen and Gonoshasthaya Kendra. Investments in the social determinants of health including women's empowerment, poverty alleviation, agriculture, primary education, ready-made garments, and infrastructures such as roads and highways have paved the way for impacting on the health status of its citizens. In mitigating the effects of deadly natural disasters, training of volunteers and building of infrastructures (like cyclone shelters) has helped build resilience.

After my graduation, I spent the most part of my professional life with BRAC. Before independence, my aim in life was to follow the footsteps of many university graduates to join the civil service. The War changed my outlook totally as I considered working for BRAC a better way to serve the people in need. Working for BRAC gave me the rare opportunity to directly participate in the various development work that the organisation was delivering, and to see for myself how the lives of common people was being transformed.

Bangladesh has done well. In spite of the gains and a growing economy (average annual growth of 6% for the past two decades), however, there are a number of things that are pulling the country back from reaching greater heights. It is yet to match what our other neighbour Sri Lanka has achieved (Graph 1). Persistence of poverty is a bane with about a quarter of Bangladeshis still poor by any standard. The income inequality is high, and is not lessening. This is related much to issues of governance: corruption in the public sector is amongst the highest in the world. Health and other development sectors are weakly managed, resulting in poor accountability and a haemorrhaging of resources. There is little interest or debate on some of the current or potentially important issues: for instance, with one of the fastest growing urban settlements in the world, of whom a third lives in slums, there is little attention on how to address this. The explosion of lifestyle-related (and other) non-communicable diseases (NCDs) such as hypertension, diabetes and cancer will further tax a poorly functioning health system. Environmental pollution and climate change will likely worsen vulnerability, particularly for the poor. Issues such as arsenic in drinking water unfortunately remain neglected or forgotten. The [Universal Health Coverage](#) (UHC) to reduce out-of-pocket expenses and consequent poverty has not yet received any serious attention despite repeated governmental promise. Bangladesh has successfully harvested the 'low hanging fruits' but addressing the unfinished agenda and future challenges will need a new generation of health systems with increased resources. Bangladesh's investment in health is the world's lowest (less than 1% of GDP). The Covid-19 crisis has shown how vulnerable the health system is.

The War of Liberation provided impetus to the country's forward momentum. It helped reaffirm our faith and commitment to a liberal and modern society. In our journey for a better life for every Bangladeshi, we have done well in some areas. With renewed attention to issues that pull or hold us back, our gains can truly be monumental.

This article gives the views of the author, and not the position of the South Asia @ LSE blog, nor the London School of Economics and Political Science.