Review of: "Strengthening Healthcare in Bangladesh: Challenges and Pathways to Equity and Quality"

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General Point

There is a general discussion of problems and solutions for the Bangladesh health care system. Concise papers like this one can be helpful for encouraging discussions about UHC. Although this is a sweeping overview of the issues, I was looking for more insights on how political leadership, nationally and sub-nationally, can be held accountable for health outcomes and for the resourcing of front-line health care. Does the author have solutions for this fundamental problem?

Other points:

Introduction: "However, the healthcare sector in Bangladesh suffers from a range of problems, such as (a) a lack of public health facilities, (b) a shortage of skilled workers, (c) inadequate financial resource allocation, (d) a lack of accountability and established guidelines, and (e) healthcare inequity" — is the distribution of the workforce a major issue, also i.e., concentration of medical workforce in urban areas? I see this addressed later in the article but could be emphasized more here.

Introduction: After this problem statement in the introduction, what is the objective of this manuscript, and how were the conclusions reached?

Challenges: An introductory sentence is required before the listing of challenges. Equally, with the solutions section. Are each solution meant to address each problem? Can the sections be linked more to make the paper more analytic?

Problems and Solutions: For both problems and solutions, I suggest the author shifts to the use of subheadings and paragraphs. A listing of points does not seem to fit a public journal format. This approach is more helpful for a policy brief, perhaps.

For points 1 and 2 in solutions, there is no referencing to back up claims.

Point 6: Do many of the problems refer to accountability of political leadership for resourcing of frontline care? Point 6 refers to accountability of health providers and the role of community empowerment. For me, the article leaves unanswered the question of what the trigger is for increased accountability by national and subnational leadership for the resourcing of front-line community-based care, as opposed to concentrating on hospital services. Do we have more actionable solutions/recommendations on this point?