

## Editorial

# Challenges for the Non-Governmental Medical Colleges in Bangladesh

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Bangladesh started its journey with eight government medical colleges. The first non-government medical college was established in 1986. Now the country has 37 government, 66 non-government and 7 military medical colleges. Among the total seats of 11,556, government medical colleges have 5,100, non-government have 6,001 and military have 455 seats (DGME 2025). Thus, the share of government in graduate medical education is 34 percent considering the number of medical colleges and 44 percent considering seats in the medical colleges; while share of non-government sector is 60 percent in the number and 52 percent in the seats. Though the non-government sector out-number the government in both the number and seats for the medical colleges and thus major contributor in the medical education and subsequently health service delivery, yet they face enormous challenges.

Non-government medical colleges are regulated by the Non-Government Medical College and Dental College Law, 2022. According to the Constitution of the People's Republic of Bangladesh, *all citizens are equal before the law and are entitled to equal protection of law* (article 27). Thus, having a law applicable only for the non-government medical colleges and not for the government and military medical colleges conflicts with the constitution.

The law specified three masters for the non-government medical college: (i) Government represented by the Ministry of Health and Family Welfare (MOHFW) together with the Directorate General of Medical Education (DGME) (sections 9 and 10), (ii) Bangladesh Medical and Dental Council (BMDC) (section 12), and (iii) respective public or public medical university (section 13). Each of

these masters undertake annual visit in the non-government medical college, look for the same type of issues and make more or less similar recommendations. The MOHFW need 1,00,000, DGME 70,000, BMDC 1,50,000 and Dhaka University 700,000 (Khulna Medical University 600,000) taka as fees for each of such visit. The visiting team also need to be hosted with due hospitality. Consider the time and resources devoted for such masters visits annually. Non-government medical colleges turn to be the milking cow.

However, the law has the provision of Inspection Committee (section 7) formed by drawing members from MOHFW, DGME, BMDC and public university. Since this inspection committee has representation from all the masters, a single visit annually should serve the purpose instead of separate visits by each of them. This will save hassle and resources from all parties concerned.

The law specified about the formation of the Governing Body of the non-government medical college (section 18) with members from the Government (represented by the MOHFW), respective public university and DGME. These three constituencies are also the masters. As members of the governing body, they are part of the medical college governance and operation, yet again they are also part of regulators as masters to oversee operation of medical college. As if they are players and also referee! The two roles are conflicting.

About the Governing Body formation, the law is somehow contradictory. Section 18(1) mentions formation of the Governing Body by following rules-regulations of the respective public university. But section 18(3) mentions to have one member from each of the Government, public university and DGME. Dhaka University referring to its syndicate approved policy (on 27.1.2010) is nominating 5 members (2 education-fonder, 2 nominated by Dhaka University academic council and respective dean The Journal of Ad-din Women's Medical College; Vol. 13 (2), July 2025; p 1-2

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of the faculty) in the Governing Body. Khulna Medical University syndicate approved policy (on 2.4.2022) on Governing Body formation has 2 members nominated by the vice-chancellor and 1 member from the BMDC. Confusion continues.

According to the law, the qualifications for the teachers of the non-government medical colleges are supposed to be determined by the BMDC (section 15.2). However, BMDC has not fixed such. In practice, non-government medical colleges follow the teachers' selection criteria followed for the government medical colleges. Since the government medical college teachers belong to Bangladesh Civil Service (Health), the government follow the Bangladesh Civil Service Recruitment Rules, 1981 (amended in 1988) for Health. However, this is almost four decades old rule and thus faces implementation difficulty in the changed context. For example, in those days there were no post-graduate qualifications available for Forensic Medicine in the country and thus 5 years experiences were fixed for Assistant Professor's qualification, when for other subjects, post-graduate qualifications were fixed for Assistant Professors. Now with the post-graduate qualifications available in Forensic Medicine, ideally their promotions should be like other subjects, which is post-graduate qualifications without

any experiences. But many of the teacher selection committee members still demand experiences mentioned. Another confusion is about the required duration of teaching experiences in the feeder post. With the practice of placing in current charge of the position, confusion arises whether current charge experience to be considered or not. The other requirement for Associate Professor and Professor is specified number of publications. Just required number of publications is mentioned, without specifying whether those publications need to be as first author or co-author. Thus, interpretation is made differently by different teacher selection committee members.

Since the non-government medical colleges play significant role for the country, their challenges need to be addressed immediately to support their smooth operation. Government should take steps to address the issues, so that non-government medical colleges can operate without difficulties and thus contributing to the country.

## References

1. DGME 2025. <https://dgme.gov.bd/site/page/34eda39c-9c0d-4a01-af51-2fe8fca5cdcb> accessed on 31 December 2025