

From Policy to Practice: Field-Level Regulation for Sustainable Antibiotic Stewardship in Bangladesh

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INTRODUCTION & AIM

Antimicrobial resistance (AMR) poses a major global threat, particularly in low- and middle-income countries (LMICs) like Bangladesh. The widespread use of antibiotics—often without prescriptions—is exacerbated by weak enforcement, pluralistic healthcare systems, and limited access to formal healthcare, particularly in rural areas.

Aim: To examine how antibiotic regulation operates at the grassroots level and how bottom-up regulatory approaches can foster sustainable stewardship practices in Bangladesh.

RESULTS & DISCUSSION

47.06%
of respondents
used antibiotics
in the last 6 months

50%
practiced
self-medication

52% were
unaware of legal
restrictions on
antibiotic sales

Gaps identified:

Institutional inefficiencies

Lack of stakeholder engagement

Weak public awareness

Disconnect between policy and
local enforcement

METHOD

Design: Qualitative, case-oriented

Data Collection:

- Key informant interviews with district drug inspectors
- Focus group discussions with community members
- Semi-structured interviews with local pharmacists
- Secondary data from official reports and policy documents

CONCLUSION

Effective antibiotic stewardship in Bangladesh requires bridging the gap between national policy and grassroots implementation. An integrated approach—combining both top-down and bottom-up strategies—can enhance the responsiveness of regulatory practices.

FUTURE WORK / REFERENCES

- Focus on co-designed interventions with pharmacists and community leaders
- Expand research to other LMIC settings for comparative insights
- Selected references available upon request