

Iftar with no gathering

shopkeepers for example -- a big plastic washing bowl is brought out. In goes anything and everything under the sun: chhola, muri, broken up bits of deep-fried batter, a few crushed syrups jilapi to add a sweet surprise at every odd mouthful. The whole thing is garnished with mustard oil and piyaj-morich and mixed and mushed by many hands. This is one way of making sure that if there are five begunis and 10 people, everyone gets a bite.

The Ministry of Religious Affairs passed a statement on April 23 banning any form of congregations relating to iftar. While this strictly relates to public events like iftar mahfil, the new norms of social distancing mean that this ban extends to homes and private spaces as well.

Nowhere will this effect be felt more than the street-food scene. From the first day of Ramadan, tables are taken out and set up on the sidewalks and eateries churn out a medley of finger foods. From large veterans like Star Kabab to the alleyway bhaater hotel, all hotels, restaurants or cafes join in on this business.

Within hours, the tables are cleared; tough luck and empty cooking pots is all that await those trying to buy some last minute haleem!

This year, iconic iftar streets like Satmasjid Road, Baily Road or Chawkbazar will remain empty, it seems.

As this correspondent called up one restaurant after another, she was met with numbers switched off and landlines ringing away with nobody on the other end there at the shop to answer.

Shah Alam, the owner of Lalbagh Biriyani House, said that there will be no chhola-piyaju on offer this year at this shop.

"I have two shops in Shankar and one in Dhanmondi Road 15. I usually set up roadside tables to sell iftar. But this year, the government has not given any such directive allowing such

shops. I have only kept my kitchen open to cater to biriyani deliveries," he said.

This also means no jilapi, which has been a staple of the month for as long as memory exists.

While religious texts may recommend the breaking of the fast with the energy-filled dates, the sugary crunchy dessert is a strong (albeit unhealthy) contender to the historic fruit.

The tales of jilapi do not end there -- society is divided into people who like thin crunchy jilapi and people who like juicy, syrupy thick jilapi. At this correspondent's house for example, there has to be both on the table.

Social media however suggests that for the first time, many are learning how to make the squiggly tangled circles at home. A Facebook page called "Recipes by Sheza's Mom" uploaded a video showing how to make jilapis at home "just like the ones at stores" and in eight hours, the video had garnered over 87,000 views. But solitude also brings self-reflection, and maybe for the first time for many, the true spirit of Ramadan can be adhered to.

CRESCENT MOON SIGHTED
The Holy Ramadan, the lunar month of self-purification through fasting and abstinence, begins in the country today as the new crescent moon was sighted in the Bangladesh sky last night, reports UNB.

Lailatul Qadr, the night of divine blessing and benediction, will be observed on the night of May 20.

The National Moon Sighting Committee took the decision at a meeting held at the Islamic Foundation's Baitul Mukarram office with the Religious Affairs Secretary Nurul Islam in the chair.

This year, a maximum of 12 people, including two imams, can attend Tarabi prayers in each mosque during the holy month of Ramadan.

The step was taken to prevent the transmission of coronavirus.



PHOTO: ANISUR RAHMAN

Workers of embroidery factories block Ring Road in front of the capital's Adabor Police Station yesterday during a demonstration demanding payment of wages and arrears. They staged the protest for about an hour.

April is cruel, May may be cruelest

FROM PAGE 1
of Dhaka are gradually turning into beggars. Quite aggressive beggars.

These daily earners, who make up the 20 percent of Dhaka's 20 million population, would stalk you for alms and hurl diatribes in case you don't oblige. Confronted by their intense stare and aggressive approach, you would start to feel vulnerable for being affluent to some extent.

Live out the recent experiences of The Daily Star journalists and a few others who shared their shocks with us, you would wish not to have this unusual April in Dhaka and worry more about May.

On Wednesday, the moment a senior journalist of this newspaper came out of the high-rise apartment building he lives in (on Shahjahan Road in Mohammadpur) to buy medicine from a nearby shop, 5-6 rickshaws appeared from nowhere and each of the drivers insisted him to get on board.

"No, not going far." Barrage of questions followed his response.

"Sir, if you don't take rickshaw, how do we eat?" "We have to live, no?" "Don't you care about us?" Then came the demand with an intense stare. "Alright. Give us some money then."

Shrugging off, he walked away, only to be stopped by a stranger about 100 yards down the road. "Assalamualaikum, sir," addressed the middle-aged man, who claimed to be a shop assistant and without a job for two weeks. "My two children are starving ... You people have money," he said with clenched jaws.

Turning around to leave the medicine shop, he was circled by four house helps.

"Sir, we're told not to come to work three weeks ago." "Haven't eaten since yesterday." "Starving along with the children." "You buy medicine. And we don't have food to live!"

Kamal Hossain, manager at a garments industry, bought a few groceries from a Modhubagh area shop and turned around to face two men in their 50s. "Give us some [money]."

Startled and about to say 'sorry', Kamal faced an unnerving question: "Only you would eat, no? Won't we?" "I wish I could help them. But I myself am barely living with a family of five," he said on Thursday. "My factory is considering lay-off. Not sure if I would have a job."

On Tuesday, senior banker Foyez Ahmed was carrying a few bags full of groceries for 15 days from a super shop on Dhanmondi Road-27 to the car he parked about 100 yards away. Coming out shops, he forked out Tk 500 and gave away to a group of beggars he was circled in. Still, a group of young people with no worn-out clothes followed him, harassing him for money. At one stage of this hustle and bustle, one of his bags was torn apart and items were all over the place.

"Some items are lost. But, I'm more worried about the days ahead," he told The Daily Star.

Car that stops on roads is destined to be besieged by beggars and some people with desperate looks. Businessman Moslem Uddin loaded his car with some groceries and stopped it near City College to

distribute those among the poor sitting on the pavement there. Soon, a group of youths showed up, shoving and beating away the beggars.

"Get lost!" they barked at him, taking away most of the bags from the car.

Photojournalist Prabir Das stopped his bike at Mouchak intersection on Thursday to take picture of some people waiting in a long queue for government's subsidised groceries to be sold from a truck.

A group of young people chased him like a gang, prompting him to get on the bike fast and drive off. "From my experience, I could tell the difference in the looks. Their looks were so scary!"

Unfed and half-fed faces are growing in huge numbers with every passing day. Most people are seen to be helping people, but in a crisis of this magnitude it's the job of the government to feed the poor.

According to the website of the Ministry of Disaster Management and Relief, 3,603 tonnes of rice were allocated mainly for the poor in Dhaka city corporation area. Was it distributed rightly or not enough for the four lakh poor?

A good number of daily-earners are allegedly denied of subsidised rice for not having NID card with them. "We didn't bring the card when we came for work in Dhaka. We can't go to village amid this strike [lockdown]," said a labourer at around noon, waiting for government rice to come since 3:00am Thursday at Muga area bus stand. "Must we die then?" he asked photojournalist Sk Enamul Haq, with tears in his eyes and anger all over his face.

Nothing but loss

FROM PAGE 1
"I spent Tk 35,000 to cultivate cucumber in one bigha of land. But now, I will get only Tk 9,000 after selling these cucumbers," said 56-year-old Abdul Khajia Mia, a farmer from Milkipur village in Shibganj upazila.

"We usually send at least 150 trucks loaded with vegetables to the capital daily. But now, we send only 50 to 70 trucks," said Md Babu Mia, president of the Mahasthan Vegetable Samity.

Contacted, Abul Kashem Azad, deputy director of the Bogura DAE, said vegetable farmers in the district will not be getting any incentives as compensation.

On Thursday morning at the district's largest wholesale vegetable market, in Gobindanagar in Thakurgaon municipality, 55-year-old farmer Mozaffar Hossain was frustrated about the lack of buyers after selling his produce at a nominal price.

Mozaffar, from Kaharpara village in Thakurgaon Sadar upazila, said he had brought a total of 21 sacks (each sack containing 60 kg) of cucumber. He managed to sell only seven sacks

of his produce at a nominal price of Tk 2.5 per kg, having to leave the rest in a wholesaler's custody in the market.

This has been a dismal month so far for Mozaffar. On April 1, he brought six sacks of cucumber but was unable to sell any that day. The following day, he was able to sell at a price of Tk 2 per kg only.

This season, he had cultivated cucumber on 3.5 acres of land spending around Tk 2.2 lakh, with hopes of a handsome profit. Observing the current state of the vegetable market, he has lost hope of recovering his production costs.

Md Rafiqul Islam, from Yakubpur village in Thakurgaon Sadar upazila, said he cultivated bottle guard on one bigha of land. Where he sold per piece at Tk 14-15 earlier, bottle guard prices have now dropped to Tk 4-5 per piece. "How will I cover my production costs? The shutdown ruined any hope of getting a good profit," he said.

At the market on Thursday, tomato was being sold at Tk 3-4 per kg, brinjal at Tk 2-4 per kg, large bottle gourd at Tk 4-5 per piece, pumpkin at Tk 4-5 per kg, and green chili at Tk 8-10 per kg.

UN joins global push

FROM PAGE 1
It included UN chief Antonio Guterres as a speaker, as well as global leaders like German Chancellor Angela Merkel and South African President Cyril Ramaphosa.

Conspicuously absent were leaders from China, where the novel coronavirus first surfaced late last year, and from the United States -- the country currently hardest-hit by the pandemic, with nearly 50,000 dead and close to 900,000 infected.

Worldwide, more than 190,000 people have died in the pandemic and more than 2.7 million have been infected.

"We face a global public enemy like no other," Guterres told the briefing. "A world free of COVID-19 requires the most massive public health effort in history."

He stressed the need to ensure that any diagnostic tests developed to detect the new virus, any drugs produced to treat it, and any vaccine made to prevent it should be provided to all of those in need.

"The world needs the development, production and equitable delivery of safe and effective COVID-19 vaccine, therapeutics and diagnostics," Guterres said.

"Not a vaccine or treatments for one country or one region or one-half of the world, but a vaccine and treatment that are affordable, safe, effective, easily-administered and universally available, for everyone, everywhere," he said.

"None of us is safe until all of us are safe."

"COVID-19 respects no borders. COVID-19 anywhere is a threat to people everywhere."

Earlier, Dr Maria Van Kerkhove, the technical lead for the World Health Organization's coronavirus response, told CNN that the world was "weeks to months" away from knowing what drugs will work to fight Covid-19.

Meanwhile, the experimental coronavirus treatment remdesivir has failed in its first randomized clinical trial,

inadvertently released results showed Thursday, dampening expectations for the closely watched drug.

A draft summary went online briefly on the website of the WHO and was first reported by the Financial Times and Stat, which posted a screenshot.

But Gilead Sciences, the company behind the medicine, disputed how the now-deleted post had characterized the findings, saying the data showed a "potential benefit."

The summary said the Chinese trial involved 237 patients, with 158 on the drug and 79 in a control group. Remdesivir was stopped early in 18 patients because of side effects.

The authors said remdesivir was "not associated with a difference in time to clinical improvement" compared to the control.

After a month, 13.9 percent of the patients on remdesivir had died compared to 12.8 percent of those in the control group. The difference is not statistically significant.

The WHO told the Financial Times that the draft is undergoing peer review and was published early in error.

Remdesivir, which previously failed in trials against Ebola, belongs to a class of drugs that act on the virus directly -- as opposed to controlling the abnormal and often lethal autoimmune response it causes.

It mimics one of the four building blocks of RNA and DNA and gets absorbed into the virus's genome, which in turn stops the pathogen from replicating.

The antimalarial drugs hydroxychloroquine and chloroquine are also being widely used on COVID-19 on a so-called "compassionate basis" pending results from large trials, with early studies decidedly mixed.

Other therapies that are being studied include collecting antibodies from COVID-19 survivors and injecting them in patients, or harvesting antibodies from genetically-engineered mice that were deliberately infected.

Exposed to virus risk

FROM PAGE 1
Each clinic has a community healthcare provider (CHCP), a health assistant under the Directorate General of Health Services, and a family welfare assistant (FWA) under the Directorate General of Family Planning.

Together, they provide a wide range of services to people related to increasing immunity and promoting health and community mobilisation.

Soon after the government enforced the countrywide shutdown late last month to stem the coronavirus outbreak, these clinics started witnessing a sharp rise in patients. It happened after many hospitals, other clinics, and private doctors in the rural areas refused treating patients out of fear, according to reports from our correspondents in several districts.

Recently, health workers at the community clinics wrote twice to the project office for providing them with adequate protective materials, but they were yet to get any response.

In the meantime, the government decided to use them to collect samples from suspected Covid-19 patients as coronavirus cases continue to soar, hitting 4,689 with 131 deaths until yesterday. The health workers are expected to be given one-day training in this regard.

"A letter has been issued and it says we have to collect samples from suspected patients after the one-day training. But without sufficient protective gears, things will be quite risky for us and our families," said Suraiya Aktar, a community healthcare provider at Sabgram Chak Alam community clinic in Bogura Sadar upazila.

'WE'RE IN GRAVE RISK'
Healthcare providers at different community clinics said most of the patients they were dealing with suffer from seasonal fever, cough, and cold.

They are providing services from 8:00am to 1:00pm. Also, whenever they find any patients with further complications, they refer them to the upazila health complexes.

In many cases, patients appear at clinics without even wearing any mask. So, the health workers need to deal with them maintaining a safe distance.

"Earlier, we used to get 10 to 12 patients a day, but 53 people turned up yesterday. Sometimes the number rises to 70 to 80," said a community healthcare provider (CHCP) in Barishal's Gourmadi upazila on Tuesday, wishing not to be named.

The situation is almost similar in all 25 clinics in the upazila.

"We are asked to keep our clinics open, but we are not given enough safety tools to protect ourselves," said the CHCP.

He said each of them received two masks and two pairs of hand gloves a week ago and two sets of PPEs five days ago, but the quality of the PPE was not up to the mark as "those were made from shopping bags".

"Most of the people who come to us are already panicked. Yet some of them don't use masks. We feel a bit nervous as we sometimes need to touch them to check their blood pressure," said Suraiya of the clinic in Bogura.

Umme Kulsum, another healthcare provider, of Shakharia Tilerpara community clinic in Gourmadi, said, "We still didn't get any PPE. We've bought masks, hand sanitisers, and gloves on our own. We also maintain social distancing while providing treatment to people."

Shahidul Islam, convener of Bangladesh Community Healthcare Providers Association, said, "Each of the CHCP is dealing with almost 50 patients every day without wearing proper protective gears. We are in grave risk."

Two of their colleagues already got infected, and the number could rise if their safety was not properly ensured, he told The Daily Star.

Shahidul said upazila health complexes in many areas provided them with only two pairs of one-time gloves and two masks and two sets of PPEs, which were "basically similar to raincoats".

But in many areas, the clinics didn't even get those, he said.

"We have written twice to our project office for adequate safety measures, but to not avail."

'ENSURE OUR SAFETY'

Some 267 health assistants are working in nine upazilas of Pabna.

"These health workers are giving medicine, injections to patients and even visiting their homes, but their safety is being compromised," said Fazlul Haque, president of Pabna district unit of Health Assistant Association.

Echoing the view, HM Arifur Rahman, general secretary of Community Healthcare Providers Association in Patuakhali, said, "We are compelled to risk our lives as we have to do our job without adequate safety gears."

Similar is the picture in 176 community clinics in Patuakhali. Also in Tangail, each of the healthcare providers in four upazilas got one-time PPE, a pair of gloves, a mask, and a bottle of hand sanitiser around two weeks ago. But clinics in the remaining eight upazilas got only masks and hand sanitisers.

"I have not used the PPE yet as it cannot be reused," said Reza Khan, a CHCP at Chinmura Mosinda Community Clinic in Kalihati upazila.

"We are always ready to provide services during crisis time, but what about our safety? We request the government to ensure that first. We also demand that it provide financial support to any of us who would die while performing duties."

Contacted, Sahadeb Chandra Rajbongshi, the line director of community clinics, said CHCPs would not directly treat any Covid-19 patients.

"We have already supplied gloves, [three-layer] masks and soaps or hand sanitisers to all the community clinics," he said.

[Our correspondents from Pabna, Bogura, Barishal, Tangail, and Patuakhali also contributed to this report]

Daily essentials

FROM PAGE 1
market. The price of garlic also shot up to Tk 165 from Tk 155 a kg just a week ago. A month ago, a kg of garlic was sold for Tk 100-110.

"I have already been running my family by taking loans. Now, the prices are rising. How will we survive?" asked Swapan Mia, who worked at a clothing store.

Shabnam Ahmed, a housewife, said, "Middle class people like us have nowhere to go."

The government should do something to prevent the price hikes.

"I request the government to control the prices. It would be a relief for us," she said.

According to the TCB and Department of Agricultural Marketing (DAM), the prices of each kg of lentil increased by Tk 22-25 while the prices of a kg of chickpeas and sugar shot up to Tk 85 and Tk 75 from Tk 75 and Tk 70. Onion prices also increased by Tk 5 while palm and soybean oil prices increased by Tk 3-5.

The price of local chicken increased by Tk 100 per kg while the broiler breed by Tk 15 a kg.

Contacted, former vice president of Bangladesh Retail Edible Oil Traders Association Abul Hashem said, "The problem lies in transportation. On top of that, people are buying more ahead of the Ramadan. Therefore a supply shortage has been created in the market."

General Secretary of Badamtali Arot Malik Samity Nizam Uddin said each trip for a truck now costs Tk 3,000 which was Tk 2,000 before the shutdown.

INTELLIGENCE REPORT
The report mentioned that the prices of some essentials were hiked just after the shutdown.

The report urged the government to strongly monitor large kitchen markets in the capital's Karwan Bazar, Shyambazar, Jatrabari and Mohammadpur.

The agency also recommended ensuring trucks for the suppliers and arranging uninterrupted import.

It said coordinating with noted importers and monitoring their imported products could help rein in the price. If necessary, the importers could be given tax cuts.

Strict monitoring on markets through mobile courts and actions against hoarders were also recommended.

It further suggested increasing the reserve of TCB and opening more centres to increase the sale in the open market.

On Wednesday, in a video conference, the Inspector General of Police Benazir Ahmed directed all unit chiefs to strengthen market monitoring to control prices of essentials.

Big jump in new

FROM PAGE 1
below the 500 mark with the hitherto highest 492 cases recorded on Monday.

On April 9, the number of daily cases was 112 while it was 219 on April 14 and 306 on April 18.

Meanwhile, four more Covid-19 patients have recovered, taking the total number of recoveries to 112, Nasima also said.

A total of 3,686 samples were tested in 21 PCR labs across the country in the last 24 hours until yesterday, which is 7.9 percent higher than the previous day, she added.

So far total 39,776 samples have been tested.

All of the four deceased were male and aged between 52 and 60, the DGHS official said, adding that all of them were from Dhakadivision.

A total of 123 were put under isolation around the country since yesterday, she also said.

As of yesterday, a total of 6,513 people have been kept under institutional quarantine.

TESTS CONCENTRATED IN DHAKA
Meanwhile, experts have pointed out that the concentration of coronavirus tests in Dhaka may leave a significant number of Covid-positive patients undetected across the country.

According to DGHS data, 10 laboratories for testing Covid-19 in Dhaka have so far tested the majority of the samples, resulting in a higher number of positive cases detected in the capital and 14 other districts in Dhaka division.

As of yesterday, samples of 39,776 individuals were tested across the country.

Of them, ten labs in Dhaka city conducted more than 69 percent tests while 11 labs in divisional cities and other districts across the country tested the rest of the samples.

Talking to The Daily Star recently, Prof Nazrul Islam, member of the national technical advisory committee on Covid-19, said, "As tests are concentrated in Dhaka compared to other regions, we are getting a high number of new cases here [Dhaka division]. With a few tests, we cannot measure the reality."

Prof Ridwanur Rahman, a specialist of medicine and infectious disease, said since our population density is higher, more cases would have been detected if more tests had been conducted.

Both the experts recommended that the daily number of tests be increased to 10,000 to understand the extent of the coronavirus situation.