

Uber seeks intervention

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enlisted with the road transport authority. Enlistment with the BRTA is a must for both the company and the vehicles to operate the service.

According to BRTA officials, although there are some 1.23 lakh vehicles registered with 12 ride-hailing companies, only 1,300 of them are enlisted with the BRTA.

Although bus and other public transport hit the streets on June 1, operations of ride-hailing services remained suspended until notice citing health safety issues.

Two major ride-hailing companies -- Uber and Pathao -- recently wrote to the BRTA, requesting it to allow them to resume operations like other public transport.

The BRTA, in a reply on June 4, asked them to inform it the number of owners and riders of enlisted vehicles (with vehicle registration number and driving licence number) who were interested to resume operation given the current situation and how they would ensure health safety guidelines, especially for motorcycle users.

BRTA officials said the letter bears a hint that they would not allow any unlisted vehicles from now.

BRTA SENDS LETTER AGAIN

Sources at BRTA said following their letter, Uber and Pathao sent a reply, where they mainly highlighted several technical limitations in the BRTA enlistment portal and process and they also sought more time to ensure enlistment of all drivers.

On June 10, BRTA sent another letter to those companies, refuting the allegations and said BRTA has solved all problems case to case basis. It also said although those companies in their letter, told about safety measures taken for motor cars but did not say anything how they main safety in motorcycle services.

Mentioning that as per the Ride-Sharing Service Guideline-2017, there is no scope to allow any unlisted vehicles under ride-hailing services, BRTA once again asked them to inform it the

number of owners and riders of enlisted vehicles who were interested to resume operation now.

But the companies did not get the list till Tuesday, BRTA acting chairman said.

According to the BRTA June 4 letter, only 126 vehicles (15 cars and 111 motorcycles) under Uber have the enlistment certificate while 118 (two cars and 116 motorcycles) under Pathao have it.

But according to the latest BRTA documents, a total of 20,637 vehicles operate under Uber and 20,000 under Pathao.

As per the Ride-Sharing Service Guideline-2017, each vehicle has to be enlisted with the BRTA after paying a certain amount of money.

When the BRTA started enlisting ride-hailing companies in July last year, it made the enlistment of at least 100 vehicles mandatory for the companies to have the certificates. Later BRTA on several occasions asked those companies to enlist their vehicles, but they did not comply, officials said.

Contacted, Sayeda Nabila Mahabub, director (marketing and public relations) at Pathao acknowledged receiving the latest letter.

She said BRTA reiterated their requests from their earlier letter dated June 4 to which they provided a prompt and comprehensive response on June 6.

"BRTA observed that there are no issues with the enlistment portal. As we had submitted letters to BRTA on multiple occasions and had a meeting with them at BRTA headquarters to raise these continuing problems with server load, one-time-passwords, payment options that remain unresolved. We had reiterated these issues in our letter to BRTA dated June 6," she said.

She said Pathao, in collaboration with other ride-hailing companies with guidance from the e-Commerce Association of Bangladesh, has developed a detailed Standard Operating Procedures (SOPs) for car and motorbike-hailing.

They have already submitted the SOPs to BRTA, she added.

Stories that our photographs tell



A child dies of his wounds at DMCH after being denied treatment at four hospitals on Tuesday and a mother, right, holding on to her sick child breaks down after being denied admission at CMCH on Monday. These are some of the most heartbreaking stories our photographers captured over the last few months.

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kilometres away. Till the 16th, when our photojournalist met her, she was yet to get her result. And all this while, from the 8th till today, she, with her mother as an attendant, was sleeping in an open space in the hospital as they cannot afford any rented place to sleep. Given the pressure on Mugda Hospital and the fact that many more tests are being done now, her Covid-19 test could take weeks.

Last Tuesday, June 16, we published a set of photos depicting the problems being faced by patients in various hospitals. There was a helpless mother in Chattogram, Morium Akhtar, of a 10-month-old, Rafa, sitting on a road divider and clutching her baby as the hospital she came to refused to admit her infant without a Covid-19 certificate. Hers was a case of inexpressible desperation as she had lost her two previous babies to liver complications and feared to also lose Rafa.

There was a case of a patient from Cox's Bazar suffering from a stroke whose attendants carried him from ward to ward with none to help them find out where exactly they need to go for proper treatment. For stroke patients, as we well know, not every minute but every second counts.

On June 15 we carried the heart-breaking story of a 22-year-old Habiba Sultana, a nurse at the capital's Ibn Sina hospital, who was refused admission and died at the doorstep of the very hospital where she worked. The reason, somehow the Covid-19 negative certificate that she had went missing in her files. Habiba suffered a stroke earlier on June 10 and was admitted to the National Institute of Neurosciences. When her condition

deteriorated the doctors felt that she needed to be in ICU and none was available at the Institute. The doctors advised that the patient be taken somewhere else. Her attendants took her to Ibn Sina, being certain that she will receive treatment there as she was an employee. The hand-written note on the file that she tested negative for Covid-19 and telephonic assurances by doctors from the Neuroscience Institute failed to convince the authorities at Ibn Sina who refused to take her in, where she later died.

We carried a photograph from Sylhet of an ailing woman, with an oxygen mask to help her breathe, waiting in an ambulance for a token to submit her swab sample for Covid-19 testing, with no idea how long it will take, before which no treatment or even a consultation by a doctor will be possible. Hundreds of patients, regardless of how serious their conditions are, wait for long hours at hospitals for Covid-19 test.

On Sunday, June 13, we carried photographs of two cancer patients, a boy of eight and a girl of 13, both being refused their chemotherapy without Covid-19 clearance. They have spent days just trying to give their samples after which the long process of waiting for the result will begin.

On June 11 there was the story of Abdul Quddus of Kushiā, a heart patient, who arrived at the Rajshahi railway station. As he was being helped by his son and daughter towards the exit of the station he collapsed and fell on the ground. Everybody around them ran away thinking that Quddus was a Covid-19 patient. Nobody helped and no ambulance came to take him to the hospital. Crucial time was lost that proved fatal in the end. To

their credit the police came forward, helped them to an autorickshaw, and soon after arriving at the hospital he was pronounced dead. He may have lived if things had happened on time.

We all sadly remember the story of the additional secretary, Goutam Aich Sarkar, who died after being refused treatment at four hospitals. Since then there have been several such deaths numbering probably around 50. This paper itself reported more than 15 such cases.

As of yesterday, we crossed 4,000 new infections from a testing sample of 17,000, which experts feel to be far from adequate to get a realistic picture. Also, these samples are from people who either come forward to be tested or seek it over telephone because of symptoms. So, the testing sample is not representative in any statistical sense which can be used to either assess how infected our population is or predict in any scientific way what the future scenario is likely to be. We seem to have learnt nothing from other countries, especially South Korea, Vietnam, Taiwan or Thailand, most of whom are readying themselves to reopen their countries.

The question is given our inadequate and highly stressed health system, as depicted in the sample stories above, and in which our doctors and nurses are already suffering from unacceptable and tragic level of casualties and overall weak health infrastructure, how are we going to handle the rising cases of coronavirus infection which appear to be upon us? Rhetorical exhortation, if not even remotely matched by reality, runs the risk of widening the credibility gap, which is the worst thing that should happen during this pandemic.

BSMMU speaks

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Scientists say RT-PCR, in which samples from nose and throat are swabbed, is considered gold standard for Covid-19 tests, but it is expensive and time-consuming.

On the other hand, rapid test can give result in 15 minutes and is low cost. The tests can be done on a large scale. Many countries, including the US, UK, European Union and India, have approved antibody tests for coronavirus detection.

It takes five to seven days for antibody to develop in a human body after someone is infected. Antibody kits cannot diagnose the disease before the antibody appears, scientists say.

Gonoshasthaya also has antigen kits that can diagnose Covid-19 both in blood and saliva at the very initial stage. Scientists suggest combination of both tests can provide more than 90 percent accurate results.

Asked about the findings on the trial, Bijon Kumar Sil, leader of the Gonoshasthaya team of scientists which developed the kit, yesterday said they were yet to get the report from the BSMMU.

He said they would respond to its findings after receiving it.

He, however, told The Daily Star: "We are still confident that the kit is highly effective in detecting Covid-19. Our position is very clear about it."

Bijon said Gonoshasthaya Kendra Founder Dr Zafrullah tested positive both by rapid test and RT-PCR kits. Again, when he recovered, the test results came negative following both the tests.

"We have found similar results in several hundred tests. We have no doubt

about the effectiveness of our kit," he said.

In a press statement yesterday, GR COVID-19 Rapid Dot Blot Project Coordinator Mohibullah Khondoker said Gonoshasthaya Kendra was yet to receive any official communication from the BSMMU and that there was no discussion on it.

"Once we receive the detailed report from the BSMMU, we will inform our decision to the BSMMU," he said.

On April 30, Gonoshasthaya decided to get the antibody kit's performance trial done at the BSMMU, situated in the capital's Shahbagh. After formal communication, the BSMMU formed a committee and on May 12 it wrote a formal letter asking Gonoshasthaya to supply the kit.

Since May 13, Gonoshasthaya supplied about 600 antibody and 500 antigen kits to the BSMMU, which was scheduled to submit the report on the performance to the DGDA on June 10.

The date was postponed thrice and the BSMMU has finally submitted the report.

About the antigen kit's performance trial, the BSMMU in its media statement said Gonoshasthaya had requested the BSMMU on June 2 to suspend the antigen test, saying that the result that was coming was not expected.

Mohibullah of Gonoshasthaya said clear saliva was necessary for testing antigen, but the monitoring team comprised of scientists of the BSMMU and Gonoshasthaya Kendra identified issues in sample collection procedures.

He said they have developed a new device to properly collect saliva for the antigen test kit, but they were waiting for the antibody trial to be completed first.

Virus cases keep on rising

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On Saturday, ASM Alamgir, principal scientific officer of virology at the Institute of Epidemiology, Disease Control and Research (IEDCR), told reporters that the transmission may start to go down within the next four to five days.

Asked about it yesterday, Alamgir said, "It is my personal observation. The trend may start going down within days."

On Tuesday, Prof Abul Kalam Azad, director general of the Directorate General of Health Services (DGHS), also told this newspaper that the transmission rate might start to go downwards within a week.

Meanwhile, in the 24 hours preceding 2:30pm yesterday, 43 Covid-19 patients were reported dead.

The total number of confirmed cases rose to 98,489 while the death toll reached at 1,305, said Prof Nasima

Sultana, additional director general (administration) of the DGHS, during yesterday's daily briefing.

Of all the infected, 71 percent were male and 29 percent were female, according to the IEDCR.

According to the data, 77 percent of the deceased were male and 23 percent were female.

In the previous four days, the numbers of daily new cases reported were below 4,000 with the hitherto highest 3,862 cases recorded on Tuesday.

Dhaka city remains the worst affected region, with 24,187 infected patients, followed Chattogram where 3,768 cases were detected as of yesterday.

Within the last 16 days, the number of confirmed cases almost doubled.

On June 1, the country passed the 50,000 confirmed cases mark and the 75,000 mark on June 11.

On April 6, number of confirmed

case were only 100.

Meanwhile, 1,925 more Covid-19 patients have recovered, taking the total to 38,189, Nasima said.

The current recovery rate is 38.77 percent, she said.

In the last 24 hours, 17,527 samples were tested by 61 labs across the country.

A total of 718 people were put under isolation, she added.

Among the 43 reported dead yesterday, 28 were males and 15 females, she said, adding that 21 were from Dhaka, 12 from Chattogram, four from Rajshahi, two from Khulna, one from Sylhet, two from Mymensingh, and one from Rangpur divisions.

One of the deceased was less than 10 years old, one between 11 and 20, one between 21 and 30, four between 31 and 40, four between 41 and 50, nine between 51 and 60, 12 between 61 and 70, nine between 71 and 80, and the other two between 81 and 90 years old.

Covering loss

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Due to the closure, educational activities of more than 3.5 crore primary- and secondary-level students are being hampered.

Half yearly exams at the secondary schools and first terminal exams at the primary schools have also been cancelled.

In a bid to minimise the losses, the government started airing classes on Sangsad TV for secondary students on March 29, for primary students on April 7, and for technical and madrasa students on April 19.

Many educationists and guardians said it was only partially fulfilling the objective, as about a half of the country's people -- many of them underprivileged -- do not have access to TV sets.

The Multiple Indicator Cluster Survey-2019 of Bangladesh Bureau of Statistics shows that 50 percent households of the country do not have television.

The education officials are also considering syllabus cuts for the Primary Education Completion Examinations (PECE) and equivalent exams after class V and Junior School Certificate (JSC) and equivalent exams after class VIII.

These two are the largest public exams of the country. Usually, JSC exams take place during the first week of November and PECE exams begin on the third week of the same month.

Officials at Directorate of Secondary and Higher Education (DSHE), National Curriculum and Textbook Board (NCTB), Directorate of Primary Education, and education boards are in discussion about finding out alternatives plans.

Talking with this newspaper, they said that they were unsure of the resumption of classes at schools and the way of finishing the syllabus for public and final exams within such a short

time.

On April 27, Prime Minister Sheikh Hasina said all educational institutions may stay closed until September if the situation caused by the coronavirus outbreak does not improve.

"If the schools open in September, then we will get only a couple of month. We closed the school on March 17, so there were only a few classes. So we are considering cutting down the syllabus for PECE and JSC exams as an option," an NCTB official said.

On the other hand, a section of education officials are proposing extension of the current academic year till February 2012. Normally, the academic calendar is from January to December.

"In that case we are thinking to cut down some vacations from rest of 2020 and for 2021 so that the students do not lose lessons in both academic years," NCTB chairman Prof Narayan Chandra Saha said.

DSHE director general Prof Syed Golam Faruk said regarding the solution they were in discussion with stakeholders of field level.

"No concrete decision have been taken so far."

3 more doctors

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deteriorated in the morning," said the civil surgeon.

At Chattogram Metropolitan Hospital, senior resident medical officer Nurul Haque died at the hospital's ICU around 4:00am.

Executive Director of the hospital Abdur Rob told The Daily Star that Nurul Haque died at his workplace of 19 years. He was admitted there for treatment three days ago.

Nurul was a 38th batch graduate of Chattogram Medical College.

Fifth-grader raped by stepfather

OUR CORRESPONDENT, Jhenidah

A Jhenidah court yesterday sent a man to jail on charge of raping his fifth-grader stepdaughter in the district's Kaliganj upazila.

The accused, an employee of a local hotel, married the victim's mother a year back, said the mother who supplies water door to door.

On Tuesday, both the parents went out for work in the morning. After a while, the man returned home and raped the 11-year-old girl, alleged the mother who also filed a case with Kaliganj Police Station on the same day.

The man also asked the girl not to disclose the matter to anyone and threatened her of dire consequences otherwise, the mother added.

On information, police arrested the accused in Kaliganj municipality area around 8:00pm Tuesday. He was produced before the court yesterday, said Mahfuzur Rahman, officer-in-charge of the police station.

The victim was sent to Jhenidah Sadar Hospital for medical tests around 11:00am yesterday.

India, China

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on the violent face-off and accused that "the Chinese side took pre-meditated and planned action that was directly responsible for the resulting violence and casualties."

He warned that "this unprecedented development will have a serious impact on the bilateral relationship" and urged Beijing to "take corrective steps".

The Chinese foreign ministry said in a statement that Wang demanded "India conduct a thorough investigation" and punish those responsible.

"The Indian side must not misjudge the current situation, and must not underestimate China's firm will to safeguard its territorial sovereignty," it added.

But the two ministers also sought to de-escalate tensions.

China said both sides agreed to "cool down the situation on the ground as soon as possible".

India's foreign ministry said the two sides would implement a previously agreed disengagement, and "neither side would take any action to escalate matters".

Official sources said front-line bases of the Indian Army and the Air Force along the nearly 3,500 km de-facto border with China were put on high alert, reported PTI.

The Indian Navy has also been asked to raise its alert level in the Indian Ocean Region where Chinese Navy has been making regular forays.

The decision to raise the alert level of the three defence forces were taken at a high-level meeting Indian Defence Minister Rajnath Singh held with Chief of Defence Staff Gen Bipin Rawat and the three service chiefs, our New Delhi correspondent said.

The army has already rushed in additional troops to all its key front-line bases and formations along the de facto border in Arunachal Pradesh, Uttarakhand, Himachal Pradesh and Ladakh states, they said.

China's state broadcaster CCTV, meanwhile, showed footage of People's Liberation Army tanks and soldiers holding live fire drills in Tibet.

China has refused to confirm if it suffered any casualties in the first deadly clashes at the border in decades, although Indian media said more than 40 Chinese troops were killed or seriously hurt.

'APPROPRIATE RESPONSE'

The incident, which took place Monday at around 4,500 metres (15,000 feet) up in the Galwan valley area dominated Indian news channels and inflamed social media in both countries.

"Gloves are off, with the Galwan valley clash, China pushed too hard," the Times of India wrote in an editorial. "India must push back."

Small groups of protesters called for the boycott of Chinese goods, with some burning posters of Chinese president Xi Jinping.

In his first remarks on the deadly clashes, Prime Minister Narendra Modi yesterday told the nation the deaths of the soldiers "will not be in vain".

"There should be no doubt that India wants peace, but if provoked, India will provide an appropriate response," Modi said.

Top opposition leader and Congress party President Sonia Gandhi said that "in this time of crisis, my party stands with the army and the government. We are confident that the country will unite to face enemy."

The Prime Minister has called an all-party meeting tomorrow to discuss the situation at the India-China border after the clashes in Ladakh. Presidents of various political parties will participate in the meeting on Friday via video, the Prime Minister's Office said.

'VIOLENT HAND-TO-HAND SCUFFLES'

The Monday's clashes reportedly involved intense hand-to-hand fighting but no gunfire, in line with longstanding practices aimed at avoiding a full military confrontation.

An Indian army source told AFP there were "violent hand-to-hand scuffles", while media said that Chinese troops attacked with rods and nail-studded clubs. Many of these killed appear to have been punched or shoved off a ridge onto rocks and into an icy river below.

Post-mortem examinations on some of those killed showed that the "primary reason for death is drowning and it looks like they fell from a height into the water because of head injuries," an official told AFP.