

Don't Let Kosovo Become Another Bosnia Private

by Dr A R Chowdhury

Bosnia will always be a stain on the conscience of the international community. Kosovo should not be allowed to become another.

FOR nearly three years, the international community issued oaths of outrage but did little else while Bosnia was systematically dismembered and ethnically cleansed by the Serbians. The same process of slaughter and pillage has started in Kosovo, another region of the Balkans. This time, the world community cannot allow itself to indulge in merely rhetorical flourishes.

The breakup of violence in Serbia's northern province of Kosovo has broken the uneasy calm that descended over the Balkans since 1996, when the Dayton Agreement was signed. In late May, Serbian President Slobodan Milosevic sent his security forces into Kosovo to put down a popular uprising. The Serb crackdown on the ethnic Albanian majority has sparked a big exodus of refugees into neighbouring Albania. It has also set the stage for a war that could kill hundreds of innocent people and spread into the region. The specter of a conflict that might draw Macedonia and Albania, Bulgaria and even Greece and Turkey, onto opposite sides, can no longer be ignored. The current situation has all the familiar hallmarks of the Bosnian war.

After the death of Marshall Tito in 1980, the question of the future of the Yugoslav federation arose. The federation included six republics — Serbia, Croatia, Bosnia and Herzegovina, Slovenia, Macedonia, and Montenegro. Inside Serbia, there were two autonomous regions — Kosovo and Vojvodina. The 1974 constitution of Yugoslavia gave republics the right of self-determination (including secession), but without those rights from the autonomous regions.

In 1981, Albanian students in Kosovo started to raise demands for changing Kosovo's status from autonomous region to republic. The Yugoslav authorities considered their demands as an effort to unite Kosovo with neighbouring Al-

bania and suppressed their protests.

In 1987, Slobodan Milosevic, then the second ranking official in the Serb republic, was sent to Kosovo for mediation purposes. Instead, he whipped up Serb fears of Albanian domination to build himself a nationalist power base. Using this base, he eventually managed his way to the top position in Serbia.

The collapse of Yugoslavia and the consequent violence led to many changes in Kosovo. Ethnic Albanians, overwhelmingly Muslims and accounting for 90 per cent of Kosovo's 1.8 million population, stopped participating in the institutions of former Yugoslavia and elected Ibrahim Rugova as the president in an election that has not been recognised by the Serbian authorities. Since that time, the ethnic Albanians have boycotted elections at all levels, keeping as their sole goal the creation of an independent state. The Serbs, though comprising less than 10 per cent of the population in Kosovo, remained determined to keep the region an inalienable part of Serbia.

During the Bosnian war between 1992 and 1995, Ibrahim Rugova aimed to achieve independence peacefully, by cultivating western support. But this strategy became increasingly untenable after the Dayton peace accord. Young ethnic Albanians became disillusioned with the political development in the region and, not surprisingly, some of them decided to abandon pacifist Rugova's non-violence strategy. They formed a more radical movement, the "Liberation Army of Kosovo" (KLA).

The KLA is openly demanding independence. Countries in Western Europe have opposed independence fearing that an independent Kosovo would trigger a further conflict in Macedonia, where the large Albanian minority is as disenfranchised with Serb rule as the majority in Kosovo. They

favour a solution where Kosovo would be given equal status with Montenegro as a third republic in the Yugoslav federation, in return for a guarantee that they would not secede.

Counting on western vacillation regarding Kosovo's future, Slobodan Milosevic sent Yugoslav troops and Serbian police into the region to crush the ethnic Albanian dissent. The Serbian offensive, which began last February, has intensified in the past two weeks.

The latest turn of events have raised concern in the western world that the conflict could escalate to the level of the Bosnian war. The western leaders seem to have learned at least two lessons from that war. First, if you are going to get involved in a conflict, better to do so sooner than later, before the situation gets out of hand. Second, in the Bosnian war, the western nations intervened in stages, with levels of intervention proportionate to their stake in the outcome. This gradualist approach turned out to be self-defeating by reducing their commitment as well as credibility.

This time the West has responded swiftly. The British Premier Tony Blair took the initiative in exhorting NATO not to allow Kosovo to become another Bosnia, and organising a quick response to the Serbian crackdown.

The six-nation Contact Group including Canada, Britain, Japan and the United States have announced sanctions against Yugoslavia including a ban on air flights, new investments and freezing Yugoslav and Serbian assets. The European Union has also announced a ban on investment in Yugoslavia. In their latest move, the Foreign Ministers from the Contact Group have warned Milosevic that unless Serb attacks in Kosovo are stopped immediately, they would draw up plans to launch assaults on his country. Such a measure would be a forerunner

of possible NATO air strikes.

One of the lessons learned from the Bosnian war is that it is dangerous to make threats unless you are prepared to follow through. The United States and the European nations repeatedly threatened Milosevic to stop ethnic cleansing in Bosnia but never carried out those threats. Milosevic took the opportunity arising from this delay, muddle and inaction to consolidate his position in Bosnia. We can only hope that the West has learned from Bosnia.

In the past, bid to punish Milosevic had been repeatedly thwarted by Russia's reluctance to get tough with its ally, Russia and Serbia, both Slavic countries, have a long history of cooperation. Even in light of Milosevic's latest violent campaign, the Russians have resisted strong pressure against him. Any UN resolution to give legal sanction to foreign involvement in Kosovo may also be blocked by Russia.

Facing economic crisis at home, Russia is now depending on various western nations including the United States, Britain, and Germany for financial bail out. These countries should use this opportunity to twist Russia's arm in doing what every decent human being considers to be the right thing to do.

It is in the interest of world peace, in general, and peace in Europe, in particular, to stop Milosevic before it is too late. A long-term solution to the Kosovo problem can only come from a formal recognition and implementation of the political wishes of ethnic Albanians.

Bosnia will always be a stain on the conscience of the international community. Kosovo should not be allowed to become another.

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The Mighty Ganga May Not Flow Forever

Sharat Pradhan writes from Gangotri

"The 18 km trekking route to Goumukh was full of trees. Today it is not only barren but also littered with garbage, including the non-organic and toxic packaging material that was harmful for the health of the glacier."



Gangotri—the source of the Ganga

THE mighty river Ganga which originates at the foot of the Himalayas and meanders through 2,510 km of northern and eastern Indian subcontinent may not be there forever.

The rate at which the Gangotri glacier, which is the source of the river, is receding, the Ganga may dry up in the next few thousand years, say geologists and defence personnel.

A senior army officer posted in the area said their teams, as well as Indian Air Force pilots had observed that the glacier was shrinking at an alarming rate. The officer, who didn't want to be named, said the Gangotri was shrinking at more than 20 metres a year, and that the rate had decidedly increased in the past decade.

"IAF pilots too have confirmed that the glacier is contracting from all sides," he said.

Experts in glaciology have carried out studies confirming a continuous recession of the Gangotri glacier over the past several decades. The first formal study by the Geological Survey of India (GSI) was done in 1934. It was updated in 1990, and then in 1996.

There is no denying that this glacier has been receding at a rate of 10-30 metres per year over this half a century," says Deepak Srivastava, director of GSI's Glaciology division.

While some Hindu ascetics living in this town, which is known as the original home of the Ganga, firmly believe that the great Indian river, deified in Hindu religion and glorified in its folklore, will vanish in the next 5,000 years, scientists too do not rule it out completely, though they grant it a longer life.

One of the largest glaciers in the Himalayas, the Gangotri originates at a height of about 7,100 metres above sea level and descends about 30 km to a height of some 4,000 metres, covering an area of about 143 square km. Its estimated volume in 1990 was of the order of 27.75 cubic km.

While the snout of the glacier, known as 'Goumukh' (mouth of a cow) has been a place of Hindu pilgrimage since times immemorial, ancient scriptures and subsequent scientific documents have recorded its recession.

"Hindu scriptures show that the Ganga actually descended

on the earth at Gangotri, which is why a temple was built over here in the later years," points out Swami Sunderanand, a Hindu monk from Andhra Pradesh who has made this place his home for the past 50 years. He is also an avid mountaineer and an expert on the Himalayas.

The first ever scientific study on the Gangotri glacier was carried out in 1842 by two British scientists, Hogson and Herbert. They have shown the source of the Ganga at a spot some two km downstream from today's 'Goumukh'.

GSI studies however show that while the rate of retreat was slow between 1935 and 1956, it became faster in the subsequent years. "Recession in terms of total area was of the order of 2,530 square metres in 1935. It increased by two and a half times during the 1956-62 period and five times during the 1962-71 period," says an official GSI study. It goes on to add: "The recession process slowed down between 1971-77, only to revert to its earlier pace after 1977."

Perhaps it is the sudden change in the trend between 1971 and 1977 that lends sci-

entists some hope. "If there is a recession and melting largely due to global warming, there is also a certain amount of snowfall that the area receives annually, so some kind of balance is bound to be maintained," says Srivastava.

Ravi Kumar, another senior scientist at GSI, attributes the recession of the Gangotri glacier also to "increasing human activity, and indiscriminate deforestation in and around the region". According to him, "That speaks of the increased pace of recession in the recent years."

Swami Sunderanand, who has been waging a single-handed battle against the ever-increasing human activity in the Gangotri-Goumukh region, endorses the view. "When I had landed here in 1947, this Gangotri town was full of green cover. Now it has turned into a concrete jungle," he points out.

"The 15 km trekking route to Goumukh was full of trees. Today it is not only barren but also littered with garbage, including the non-organic and toxic packaging material that was harmful for the health of the glacier."

— India Abroad News Service

Why Mothers Have to Die?

by Dr M Zakir Husain

It is bad culture when people, including women themselves, are conditioned to believe that death during childbirth is something ordained by fate and nothing can be done about it.

BANGLADESH is observing the safe motherhood day for two years now. With one of the highest death rates in the world, it is estimated that at least 3 mothers die due to pregnancy-related causes every hour of the day every year. Many of these deaths are unnecessary and could be prevented if only concerted actions were taken.

Motherhood remains unsafe in Bangladesh due to a combination of reasons. Non-availability of reliable and continuous healthcare is only one. Lack of confidence in health facilities and their non-utilisation is another. Inability to meet the cost of good care and quick and safe transportation to hospital deprive many from seeking and getting needed care during pregnancy and after childbirth.

Many of the health facilities are in a poor state of functioning; public confidence in them is low. Due to lack of information and poor credibility regarding facilities, nearly 80 per cent of pregnant women are delivered in home usually by untrained or semi-trained attendants. Pregnant women are not screened for possible risks and are not moved to a hospital before it is too late.

Women in Bangladesh do not have free access to healthcare and are not free to travel in search of care they need. Their family members, particularly the husband, in-laws, or the head of the household have a special responsibility. They have to become aware of the woman's needs during pregnancy and nutrition needs. They must also be sensitive to the particular risks if and when these are associated with pregnancy. They should also find time to ensure that the pregnant woman gets regular pre-natal care and timely attendance during childbirth by trained health workers. The pregnant woman herself and the husband need to know how to gain control over pregnancy and birth of children by using safe and sure contraception. The woman must have more say in, and control of, decision regarding contraception and pregnancy with greater understanding and support of her family.

The traditional beliefs and practices that adversely affect the health of women, particularly of pregnant women, will become a thing of the past through enlightenment and communication, empowerment and empathy. Pregnancy is a normal event, has been so from the beginning of human race, and now can be regulated at will. That will now needs to be exercised in the greater interest and welfare of the family. Contrary to the belief in some quarters, the woman does not become unclean nor does she deserve to be removed to a dark unclean corner of the house during childbirth.

Many of these practices are a mere reflection of a much more pervasive denial of women their social and human rights in the name of tradition and culture. It is bad culture when people, including women themselves, are conditioned to believe that death during childbirth is something ordained by fate and nothing can be done about it. This belief is reinforced by the general apathy

towards women and denial of equal status to them. All of this is perpetuated by denial of education to girl children particularly when it comes to higher education. There is enough evidence that with high female education, employment, and social equity, countries as poor as Bangladesh have achieved not only high health status, lower mortality, and higher quality of life.

The myth of tradition and culture that prevents societies to be progressive and rational has to be dispelled. There is no glory in unsafe and neglected motherhood however benign the predisposing causes. Not surprisingly, in matriarchal societies and countries with high female literacy, maternal mortality is merely a small fraction of what it is in Bangladesh.

Women in our neighbourhood, for example in Thailand and Myanmar, play a larger role in the family affairs including finance, are far more secure in a variety of work outside home and on the streets. This may come to the surprise of many that it is not due to any legislation or police effort, but due to regard and respect the society is ready to give to their women.

The observance of Safe Motherhood Day (Observed on May 28, '98) by itself is important as it brings fresh focus to the issue. But by itself it will be of little effect. We may observe ten consecutive days but without some determined actions on the ground and a deep change in our attitude, belief, and practice, little if anything is likely to change. Mere wordy expressions of concern or resolve will be of little practical consequence.

In Bangladesh, many mothers will continue to go through the hazards of pregnancy when for so millions of mothers in the country and elsewhere, pregnancy is an experience of joy and fulfillment with total caring support from the family and good service by trained health workers. True, regular

healthcare to mothers during pregnancy, even before pregnancy, and after-birth care can, and will make a big difference. But for some of us who have looked deep into the problem of maternal deaths, we cannot accept that mere extension of healthcare is enough in the context of Bangladesh. In any case much of the general health service is either absent or effectively out of reach for many of the poor and remotely located who need it most. Even when services are presumed to be there, lack of attending personnel, equipment and drugs often do not inspire great confidence and thus many of these remain under utilised.

This is not to under-rate the need to improve the capacity and functioning of many if not all health facilities that have been established at high cost to public funds. Indeed, that will be a great step forward. Already, pilot projects have shown the feasibility of carrying out many essential surgical operations in modest health facilities even at the Thana level.

What will bring about a real change is the change in the perception of women's health needs and the needs of the pregnant women in particular. That change has to start with the woman herself, who has to be better informed, educated, and more aware of her own needs. But in Bangladesh perspective, that change must equally if not more, take place in the families and communities who must change their thinking and habits, and be willing and able to give due attention to their womenfolk, their health and safety, their status, and their rights. That is not the function of any health service system. That is for the society as a whole, and it is in particular who must learn to nurture a value system and culture that will require in many instances abandoning old attitudes and benign or malicious neglect of the women.

The male-dominated Bangladesh society will also have to unlearn many old prejudices and undo many discriminatory practices against the girl child, against young women, and indifference to the health and well-being of mothers. They must learn to accept women seeking identity and recognition, respect and dignity, employment and income, and above all learn to accept women gaining control over their reproductive rights. Let there be misconception, safe motherhood is not a feminist issue and let it not be dismissed or undermined on that count. It is an issue that affects not merely the physical well-being of women, but also the core value system of the entire society. And by securing the rights and status of women, we also raise the quality of life of all members of the society.

Ensuring safer motherhood also minimises a colossal human loss to numerous families, death and destitution of many new-borns, and thereby minimises loss to the national economy as a whole.

Dangers in Re-using Surgical Mops

by Husnara Kamal

Any conscious individual can understand that re-using Mop is evidently hazardous for health. As such, the practice of re-using of Mops clearly reflects the outdated and unscientific outlook of the surgeons concerned.

THE World Health Organisation (WHO) has expressed its deep concern in a recent report about the prevalence of contagious diseases in the countries of South East Asia region including Bangladesh. The report states, the contagious diseases which are eradicated or nearly eradicated will emerge or re-emerge more readily and extensively than ever before. And cautioned that these diseases will cause premature deaths of many people if appropriate preventive measures are not taken.

Disclosing the present position of the contagious diseases in the countries, the report highlights that more than 5 per cent of the total population are carriers of the deadly virus Hepatitis-B, most of whom will die of liver cancer or cirrhosis. These carriers, during their lifetime, will spread the virus among the healthy individuals. The report added, approximately 20,000 of our fellow Bangladeshi brothers and sisters are infected by HIV which causes the most deadly disease AIDS.

The above warning expressed by WHO regarding contagious diseases triggered me to share my recently gathered experiences with you on Surgical Mop. I feel it necessary to share since these new observations are related to spread of communicable diseases in our country.

A few weeks back, I had to stay for several days in a modern private hospital in Dhaka as an attendant. In the hospital, I got acquainted with Surgical Mop for the first time which is mainly used to swab blood and other body fluids during surgical operation. Surgical Mop, called Mop in hospitals, are made of cotton gauze fabric. The gauze is folded as the size of handkerchief in several layers and then sewed so that the layers do not get unfolded. This is folded in several layers to maximise blotting of blood at a time during operation. The Mop has other purpose like to support the internal body organs for aiding the operating surgeon to carry out the operation smoothly.

Mops used in the hospitals are of different sizes depending on suggestions of the operating surgeons. A Mop of general size and thickness costs around Tk 20. A visceral operation like gastric ulcer generally requires Mop of Tk. 100-150 in total.

My new observation is that Mops after one use in the hospitals of Bangladesh are not re-used. It is a custom to re-use the used Mops in all the hospitals, both private and government. After one use, the absorbent Mops get completely soaked with blood including its inner most layer. Then, these blood soaked Mops are washed to re-use. These washing and re-using continue till the Mop's

endurance fail.

In a private hospitals, the cost of Mops is negligible in comparison to the total cost of the operation that a patient has to bear. In the government hospitals, operating cost is very less because the government bears most of the charges and as such the patients and easily afford the cost of Mops. For very poor patients, various government and non-government organisations or benevolent individuals come forward to support the operating costs. So for these poorest patients, Mops can also be made available free of costs like other charges.

Deadly viruses like HIV, Hepatitis-B mainly spread through blood from an infected individual to a healthy person. Today, therefore, the use of blood and blood products are strictly restricted. All blood contacted products like injection syringes etc., are disposable world-wide. But, for unknown reasons, cotton-made Surgical Mops are not disposable in our country.

As a conscious citizen, I find the re-use of Surgical Mops as most unscientific and precarious for health for the following reasons:

1. By re-using Mop, a patient who is undergoing surgical treatment is pruned under the risk of being inducing other deadly viruses. The patient is kept completely in dark about this risks that underlie in the re-use of Mops.
2. Re-use of Mops causes occupational hazards for individuals who are engaged in the profession of washing and cleaning of our dirty clothes. They handle the blood soaked Mops with bare hands without knowing the risks of attracting deadly viruses that underlie in the job.
3. The Mops develop loose particles due to washing since they are made of cotton yarns. These Mops with loose particles when come to the contact of open blood vessels during operation, may enter the body circulation as foreign body that may cause serious disorders in the long run.
4. Incidence of side effects among the post-operative patients are common in our country and recovery is not expedited at an expected pace after successful surgical operation. The major reason for this delayed recovery, among others, is re-use of Surgical Mops. This causes enormous suffering to the patient and enhances cost of surgical operations in Bangladesh.
5. Many financially solvent patients, in spite of availability of technology and expert surgeons leave the country for better surgical treatment mainly due to high rate of incidences of post-operative side effects causing delayed recovery. Even, it is heard that patients sell their valuable belongings for foreign treatment. Thus, our hard-

earned foreign currencies are misused.

We are at the door steps of the twenty first century when medical science is at the peak of development. Scientists and researchers are now striving hard to find out ways and means to prevent diseases. Many countries have made it possible to prevent large number of diseases particularly the contagious diseases which are taking irreparable tolls in countries like ours. More than twenty-five years have passed since our independence, yet we could not be able to change our decades old obsolete outlook. Though costly medical technologies are coming in the country, the outlook of our medical professionals in the area of preventing diseases are still lagging behind. As a result, the contagious diseases are firmly rooted in our country and pose serious threats to our health.

Nowadays, the act of re-us-

ing Mops or not pertains to general hygienic knowledge. Any conscious individual can understand that re-using Mop is evidently hazardous for health. As such, the practice of re-using of Mops clearly reflects the outdated and unscientific outlook of the surgeons concerned. Now, it is inevitable to update this outlook without delay.

Considering the timely warning report of the WHO, doctors and surgeons are supposed to lead actions. They are expected to take initiatives to wage a social movement against the contagious diseases. Before that they are needed to update their decades old views and stop re-use of surgical Mops and other blood contacted products. Otherwise, the health leaders will have no language to console the future victims of the contagious diseases.

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Screen Test: Failed

SUNSCREENS do not help prevent skin cancer. This startling revelation came recently at a science conference in Philadelphia, USA, where the widely-held belief that sunscreens lower the risk of deadly melanoma skin cancer was questioned.

Sunscreens prevent sunburns, and since there is evidence that frequent burns, especially at an early age trigger melanoma, many assume that using them help ward off this cancer. However, melanoma cases have risen dramatically over the last 25 years despite the numerous brands of sunscreens that have flooded the markets. The lethal cancer now strikes 42,000 Americans each year, killing more than 7,300.

Cheers to That

SERGE Renaud, the French scientist who had earlier proved that drinking wine is a heart-friendly activity, recently came up with some more heartening news for wine lovers. According to him, two to three glasses of wine per day keeps not the doctor, but death away. Yes, if Renaud's claims are correct, then a daily intake of the intoxicant can reduce death rates from all causes by as much as a whopping 30 per cent.

DSE/Down To Earth Features

Well-oiled Swedes

PETROL in Sweden will contain less sulphur than any in Europe by the year 2000. Swedish oil companies recently agreed to switch to petrol containing fewer than 50 parts sulphur per million (ppm). Planned European legislation will set a higher limit of 150 ppm.

Rolf Annerberg, director-general of the Swedish Environmental Protection Agency, argues that cleaner fuel will reduce air pollution and encourage the design of more efficient automobile engines. "It paves the way for lower fuel consumption, thereby automatically reducing carbon dioxide emissions," he says.

Walled Paper

DO not throw away those old telephone books and fruit juice packs, build your walls with them. Australia's national research centre, CSIRO, is backing a project to turn these 'raw' ingredients into flat panels and mouldings that would normally be made of wood.

CSIRO claims that the mix of paper and plastic is twice as strong and three times as stiff as conventional polymer boards. This water-proof material is also free from knots and defects that weaken wood, claims CSIRO.

DSE/Down To Earth Features

