Inadequate Relief

Dhaka Friday, July 31, 1998

While we have been worrying over what happens to the Kaptai Dam, Faridpur protection embankment has been breached and water has entered the jails in Narayanganj and Manikganj. The Dhaka-Sylhet highway as well as Dhaka's outlet to southwestern districts through Mawa have been put out of commission by surging water. It is feared the Dhaka protection embankment may be breached any moment. Weathermen said yesterday water would continue rising for some days in Dhaka. Responsible quarters have expressed fears that the vast watery expanse could be here till mid-September without much change from now.

These are frightening possibilities. The Aus paddy loss has already amounted to about 5 lakh ton in only 15 days of the floods. A month and more under water will surely make an irreparable dent in the national economy. At least 250 lives have so far been lost. What is the condition of the surviving two crore flood victims? They must be helped. It is being said that relief is reaching most devastated places. But how much? In Bogra 135 thousand direct victims of flooding and erosion have received 150 thousand taka and one in every 111 has got a used lungi, one in every 26 women a

This is but a travesty of help. Relief should be geared to enabling victims to survive till they get their feet on dry ground. And ready relief must be followed by rehabilitative assistance when the waters go. Relief is not compensation for the loss caused by the deluge. It is planned to mitigate the sufferings up to a bearable point. For that to be materialised the quantum of cash help must be raised substantially. One can go without food for a day or two but not without clothes for even an hour. There must simply be more clothes for the victims.

Food, clothes and medicines, the three main items of immediate relief, seem to be in very short supply with the government. Why? Diarrhoea is spreading. What is being done to stop it? This year the flood is far bigger than usual. The agencies charged with caring for the affected ones think small. Perhaps the government itself cannot take in the dimensions of the thing and think in small terms, behoving clubs and private organisations. This is unfortunate. And must change.

A Productive SAARC Day

The inaugural day of the SAARC summit in Colombo ended on a substantive rather than ceremonial note true to the gravity of the situation staring in the face of the 7-nation economic grouping. Although the atomic clouds overhanging the podium — by way of a figure of speech — were not put on the official agenda of the summit none of the South Asian leaders could afford to be Ostrichlike ignoring their stupendous bearing on the course of events. Hence they took full advantage of the plenary session and spoke out on the politicomilitary fall-out of the nuclear tests anxiously seeking ways to lesson tensions in South Asia over the likelihood of a full-scale nuclear arms race threatening a devastating Indo-Pak showdown on

the Kashmir flash-point. While it was for the Prime Ministers of India and Pakistan to assure the leaders of smaller neighbouring countries of an undistracted quest for economic emancipation of the commonman in all of South Asia the latter in a chorus had to remind the big two that they better resolve their differences peacefully to let the whole grouping func-

tion to its full potential.

A certain unity of thought discernibly wove through the first day's proceedings and we are so happy for that. Sharif said, "it is for us to steer away from the gathering storm." Vajpayee noted with some satisfaction, "both India and Pakistan have already declared moratorium on conducting further nuclear tests.

And, on the focal-point of attention — Kashmir - did they not sound conciliatory in their approaches to it, the finer nuances regardless! Well, to the satisfaction of the whole world, Nawaj Sharif and Atal Behari Vajpayee held their first bilateral meeting since the nuclear tests and agreed to resume formal talks for easing the aggravated tensions between them. Territorial and other disputes' will be taken up after the foreign secretaries of the two countries have charted out a course for the dialogue.

Our Prime Minister laid stress on constructive dialogue between India and Pakistan, collective fine-tuning to the impact of WTO, establishment of complementarities between key sectors in South Asia, collective development of infrastructures and creation of a SAARC fund for the 100 million

disabled people in South Asia. The host Sri Lankan leader Kumaratunga spoke

for everybody when she asked for a joint quest for economic cooperation and peace and stability. Let the Railway Really Roll

Buoyed by positive results of its earlier experiments, Bangladesh Railway authority has decided to lease out commercial operations of two more trains to private hands. Selling and checking of tickets, service and, maintenance of the Karnaphuli Express on the Dhaka-Chittagong route and Balaka Express on the Dhaka-Mymensingh route will be looked after by private sector companies. We welcome this initiative of the BRA which is fighting for a release from the deadening weight of inefficiency and corruption of its administration. The earlier decision of leasing out the commercial operations of train service on the Dhaka-Narayanganj route to the private hands has expectedly and apparently paid off. BRA earned Taka 6.6 million in the last fiscal year as against 3.5 million of the previous. One hopes the enhanced revenue does not get soaked by corruption; rather is ploughed back into the system for an overall

improvement. Experts in urban transportation are of the opinion Bangladesh should go for Light Rail Transit (LRT). It is a modern and modified version of tram. It is less expensive than full subway and offers high capacity service with modern image. Judged from environmental or economic point of view, railway should be the most advanced and used mode of transport in a country like Bangladesh.

Health for All

"He who has health has hope and he who has hope has everything." (An Arab Proverb)

Twas Saturday, 25 July. encouraging newsreport made my day. The headline read. Minister briefs National Health Policy. According to the minister's statement at a press conference, at least 60 per cent of the budgetary allocation for health sector will be spent for primary health care services under the Essential Service Packages (ESP), the rest 40 per cent for infrastructure development. salaries and meeting other costs. Women, children and the poor would have priority claim on public health delivery systems. "For every 6000 people there will be one community clinic to ensure better health care services. A special focus of the policy is to provide

the rural population)." care has been identified by the earlier successive governments as the key to attain Health for All by the year 2000. Bangladesh has endorsed the goal of 1978 Alma-Alta declaration and accepted the political and social challenge to achieve this.

services to maximum number

of people (about 85 per cent of

As an assessment of the governance of public health in Bangladesh points out, all past governments emphasized health sector development through adopting various programmes in the national development plan with the purpose of building a network of primary health care services. The goal has been improvement in the health status of the common masses through reducing morbidity, mortality and poverty related diseases. (Abul Barkat, A Review of Bangladesh's Development, 1997).

The author goes on to say that, "in terms of infrastructure facilities, Bangladesh is one of the well resourced countries... In Bangladesh at the grassroots union-level one service delivery within a static facility is available for a unit of 20,000 population; one thana level facility services 200,000 people; one district level facility (district hospitals and Maternal and Child Welfare Centres) services 1.5-million population and one medical college hospital can serve a 9.3-million population. In addition to the public facilities, a large number of facilities in the private sector cater to the needs of the general

and empirical evidence indicate, there is a yawning gap between the actual and officially recommended services in those facilities. The efficacy with which the existing health care and manpower are utilized or not utilized becomes clear from the following dismal numbers.

Life expectancy for women is 56 years, substantially below India's 61, Pakistan's 63 and Sri Lanka's 74 years. Crude death rate in Bangladesh is the highest in South Asia. Despite improvements, infant mortality still accounts for more than half of all deaths in Bangladesh. Compared to the numbers in neighbouring

Yet, as a number of studies

higher than in India. "Access to and utilization of the three pillars of safe motherhood (antenatal care, clean and safe delivery, and essential obstetric care) remain woefully

countries, it is six times higher

than in Sri Lanka and one third

inadequate." A recent study reports that only 39 per cent of the district hospitals function as comprehensive, emergency obstetric care (EOC) facilities. Sixty-four per cent of the Maternal and Child Welfare Centres and 56 per cent of the Thana rural Health Centres render the minimum basic EOC services. None of the Family Welfare Centres at the grassroots level, the unions, provide first aid and EOC services. And the crisis of maternity related deaths is concentrated in the country-

Coming back to our children, roughly seven out of ten of the below five age-group are underweight, compared with four out of ten in Sri Lanka, Child malnutrition is so pervasive that it corresponds to devastating natural disaster. Over 90 per cent of all children suffer some degree of undernutrition. More than one quarter of them are measurably stunted. Severe malnutrition, particularly in rural Bangladesh is perhaps a grave danger and challenge which continues to persist.

The defects of childhood malnutrition begin with low birth weight, afflicting 30 to 50 per cent of the newborn, and continue into adult hood with

gers at all. The anxious and

worried passengers came to

know that the flight has been

delayed for two days, only after

asking the Saudia personnel on

their own accord. When we

asked how long we had to wait

in the lounge - in a damn -care

attitude the answer was, 'you

can go home or you can wait

until we arrange hotel accom-

modation.' Passengers were not

served any kind of food or

snacks during the waiting pe-

riod. For the unfortunate pas-

sengers who could not go home.

hotel accommodation was ar-

ranged in two different hotels:

Hotel Zakaria at Mohakhali

ternational airline like Saudia

choose Plaza Inn (at best a third

rated one in terms of food and

lodging) for its passengers?

Imagine an international air-

line providing you a hotel room

with no TV, fridge, telephone or

no working A/C. A very poor

quality food was served at 3:15

pm, also after much pleading

Saudia — which earns huge rev-

enue from their flights to

Dhaka — is so apathetic to its

passengers. I wonder whether it

is because we are the citizen of a

poor country like Bangladesh

or because we do not have white

Abuses by US

Embassy?

about the Bangladesh Home Of-

fice's recent "verbal" protest to

US Embassy about "mistreat-

ment" received by visa appli-

dent brings to mind earlier al-

legations of discrimination

practised by the US Embassy in

Brazil. These allegations came

to light after Robert Olsen, a

former visa officer brought a

case against the State Depart-

ment for wrongful dismissal. In

his lawsuit, Olsen alleged that

he was fired because he refused

to follow visa screening guide-

lines that he considered dis-

Times (March 21, 1998) Olsen,

who joined the State Depart-

ment at age of 47 after practis-

ing law for 14 years, argued that

he was wrongfully fired because

he refused to use "profiles" that

he said generalised about appli-

cants for non-immigrant visas

"based on race, colour, national

origin, sex and appearance." In

court. Mr Olsen presented doc-

uments showing that visa offi-

cers at the consulate in Sao

As reported by The New York

criminatory.

The recent Bangladesh inci-

Sir, It is interesting to read

It is really unfortunate that

and persuasion.

A Sufferer

I wonder how could an in-

and Plaza Inn at Uttara.

70 per cent of mothers suffering from nutritional anemia. Some 30,000 children go blind due to vitamin A deficiency and about 2 million suffer from iodine deficiency. The extent of childhood malnutrition is a national emergency which calls for urgent and concerted action. As an yet to be published document, Bangladesh 2020, notes, measured by the international norms of the Human Development Index, Bangladesh's level

- HDI of 0.37 - is far too low. "Lifting it will be costly, but no better or more productive investment of public funds can be imagined than a programme which would increase annual

Hekim's and Kaviraj) and more recently by bare-foot doctors of NGOs like BRAC or Gono Shasthya Kendra. One should not forget that public health need not just be equated with public sector health care since it embodies the public health care as well as public policy on the private sector health care.

I would like to repeat in that context what I said in my last week's column. According to Dr. Amartya Sen, many things that affect our lives deeply, especially in poor countries, depend greatly on public support, e.g., availability of health services, having an epidemic-free surrounding, living in a safe



outlays for health and population from the current level of \$7 per capita to \$9 per capita by 2005, by virtue of which it would be possible to deliver the Essential Package of basic health services (ESP)"

However, much of the increased allocation must be targeted towards those segments of population who are as yet deprived of immunization and basic health care services. Let us remember that only 12 per cent of the rural population have access to the Rural Health Centre facilities at the Thana level. The patients from the richest quintile are more than five times as likely to be admitted for in patient hospital care than patients from the poorest quintile. Patients from the urban areas are more than twice as likely to be admitted than rural patients and male patients predominate over female patients.

A recent BIDS study shows that the poorest of the poor spend anywhere between 25 to 30 per cent of their miniscule income for private health care. That is provided by non-degree holder practitioners, grocers who also act as pharmacists, village 'dais', traditional herbalists (the dying breed of

Paulo, Brazil, routinely

screened applicants based on

and sound environment. It is therefore that I applaud

the formulation of first ever National Health Policy as reported in the newspapers on 25 July. The focus is appropriately on delivery of essential services package and the priority clientele are women, children and the poor, particularly in the countryside and depressed urban neighbourhoods, an euphemism for urban slums. It is also heartening that the

conflict ridden and fragmented services for health care, family planning, maternal and child welfare will be integrated. What is equally and perhaps more important than the increased outlays for public health is community managed and participatory delivery mechanism that can vastly improve the efficacy with which the existing facilities and man power are utilized.

In considering the mechanism, the first challenge to be squarely faced is the question of who benefits, the powerful few or the powerless many. Allow me to paraphrase and sometimes quote verbatim from the soon to be published document, Bangladesh 2020.

In an environment of limited resources, difficult choices

are to be made. One such choice is between building new hospitals versus strengthening primary health care. For instance, and this is my personal opinion, if a government decides to allocate resources to build a large city or urban hospital, it may mean deciding not to build a large number of rural community clinics. It may also mean investing disproportionately on specialized urban doctors rather than village health workers. Resources spent on expensive curative care benefit fewer and relatively richer people than if the same resources where spent on primary and preventive care services that address health needs of the

A second problem is that the poor have relatively little access to hospitals which then end up subsidizing the care of the well to do in society at the expense of the less fortunate and the least privileged.

Consider a proposal, and

here I quote from the 2020 report, to establish a new 250 bed hospital in a district head quar-ter. This would cost in excess of Tk. 21 crore to build, will provide in patient care to 11,500 patients annually (at 100 per cent occupancy and 8 day average length of stay) and outpatient care of 105,000 patients. It would further cost an estimated Tk. 108 lakh annually to cover staff costs, equipment and physical maintenance, supplies, etc. The equivalent costs can be spent instead on making available an essential package of cost effective services (health and family planning) to one quarter million Bangladeshis a year for five years; providing complete immunization to 28 million Bangladeshi children; or buying enough Iron and Folic Acid supplementation to malnourished and lactating women for every thana in

It is undoubtedly true that with 3200 people per hospital bed in Bangladesh, compared to 388 in China and 365 in Sri Lanka, Bangladesh is behind in the provision of curative health care for its population. Building hospitals, a highly visible activity, is politically difficult to argue against.

Bangladesh for two years.

Yet, for optimum social ben-

efits of health expenditures, public policy requires a balance between cost effective preventive health care for the entitlements of large segments of our population and the relatively expensive hospital care that tends to benefit the rich more

than the poor. As I applaud the announcement of the National Health Policy, I would make an urgent plea as has been made in the 2020 document, that in order to have a realistic chance to fund the essential package and meet the health and population sector needs, the government might set it self some priorities for simultaneous implementation. Urgent elements among

them are: Raising expenditure on these services from about 1 per cent of GDP to at least 2 per cent of GDP by the year 2005. A reasonable target for 2020 would be 6 per cent of GDP (private and public) to provide adequate services to

the population. By 2005, 70 per cent of the health and population budget should be devoted to the essential package, up from 60 per

cent in FY 96. the efficiency of impetus and service delivery by raising the non-salary input of the health budget as has already been proposed in the draft National Health Policy.

Expand the partnership with private health providers and NGOs and expand community participation.

Greater cost recovery and cost sharing must be ensured, while protecting the poor, to augment the flow of resources for health population and nu-

Expand the Bangladesh Integrated Nutrition programme to cover the entire country by the turn of the century.

Reinvigorate and integrate the current family planning programme with the public health services, especially to help unwanted pregnancies, reduce maternal mortality and

improve reproductive health. No less a personality than the Prime Minster has said that if human development is to be woven around people and by the people themselves, the primary pre-requisite is the health and nutritional status of the vast majority of our people. Let us not fail our people and the political commitment of a truly people's democracy.

To the Editor...

Letters for publication in these columns should be addressed to the Editor and legibly written or typed with double space. For reasons of space, short letters are preferred; and all are subject to editing and cuts: Pseudonyms are accepted. However, all communications must bear the writer's real name, signature and address.

Death of Rubel

Sir, I found the death of Shamim Reza very disturbing. In a civilized society where there is supposed to be rules and regulations to keep the society crime-free, what I can see is that now we need to protect ourselves from the very people who are out in the streets to protect

I have been living in the US for the last four years as a student and what I have seen so far is that this society also have bad elements. People of the law enforcing agency are out there to save the common people from them. So far what they are trying seems to work just fine, and the protectors turns out to be the aggressors we see incidents like Rodny King, and LA Riots. Because this society has accountability - people just don't get away with whatever they want to do.

In a supposedly democratic society like us in Bangladesh should we also not have any sort of accountability? Arresting the five DB people, I think is a very positive step towards finding the real story behind Rubel's death. I think nobody gave those DB officials any right to kill a human being for no apparent reason.

We should exercise the freedom of not only us but also of the people around us, to ensure a free society. Anybody suspected of any wrongdoing should be considered innocent until proven guilty.

Shahnawaz

I condemn

Sir, I am a Bangladeshi (now Australian) residing in Australia. I am horrified and shocked at the event which caused Shamim Reza Rubel's death while he was in police custody.

One of the reasons we left the country was the lawlessness in the country. Can you find one citizen in Bangladesh who gets proper help from police when needed? I am sure you won't fine a single person.

I strongly condemn the death of Shamim Reza at police custody. In a democratic country like Bangladesh, this should not happen any more.

Shuvra Melbourne, Australia

No courtesy for Bangladeshi people?

Sir, I was a passenger of Saudia Airlines from ZIA to Riyadh on 25-7-98 at 12 noon. Due to engine problem, it couldn't fly as scheduled.

But the behaviour of Saudia at this time of despair was entirely unexpected and I would like to share my bitter experience with the readers:

Although the condition of the engine and the possibility of

appearance. A manual, presented in court, encouraged officers to use abbreviations in reviewing applicants: "RK=Rich kid, LP=Looks poor, TP=Talks poor, LR=Looks rough, TC=Take Mr Olsen, who did not have tenure as a foreign service offiflight cancellation were known cer, strongly protested, refusing to use the profiles in evaluating to the airline people, they kept applications, even though other all the passengers in total officers did. In December 1993 darkness. While the flight was scheduled to take off at 12 noon, he learned that he would be they did not bother to make any dismissed and started his legal challenge. In his lawsuit, Olsen announcement to the passen-

> most likely to apply these discriminatory codes against black Brazilians. The State Department admitted the abbreviations were developed by junior visa officers to alert each other about which applicants should be called in for interviews and carefully screened for indications that they planned to commit fraud by using tourist

submitted nine visa applica-

tions as examples, and alleged

that the US visa officers were

visas to settle permanently in the US. In December, Judge Stanley Sporkin sided with Olsen, ruling that the consulate's visa policies were illegal and that Olsen was justified in refusing to follow them. In January a Federal judge ordered the Foreign Service Grievance Board (which mediates disputes between the government and foreign service officers) to reconsider the dismissal of Olsen, after finding that the screening policies used in Sao Paulo from 1992 in 1994 were "clearly illegal." In March, the State Department was finally ordered to

ous job. The Washington Post reported on the same day that although Olsen was reinstated in his old job, the board refused to grant his request for an injunction barring the use of visa fraud "profiles" at all US consular offices. The board said that it had "no authority to issue such sweeping injunctions' and that the "illegal profiles" in question were confined to the consulate in Sao Paulo. But it said such guidelines "must be carefully drafted to avoid any

suggestion of discrimination.

reinstate Mr Olsen in his previ-

On the topic of these infamous "profiles". The New York Times also wrote: "The State Department's screening policies include the

use of profiles to single out visa applicants for further questioning. Although officials insist that the profiles are not used to reject applications based on race or ethnicity, the practice has been criticized, particularly by Arab-Americans, who say they are unfairly suspected of being terrorists.

A Citizen Dhaka

Thanks, FO!

Sir, Our Foreign Office deserves appreciation for handing a 'note verbal' to the US Charge d'Affairs (CDA) Theodore Nist on harassment of Bangladeshi nationals seeking US visa allegedly by visa and consular officers at the US Embassy in Dhaka. The CDA has been requested to take necessary steps

so that this kind of incidents do not take place. The CDA however requested the Foreign Office to bring to their knowledge any specific allegation against any official.

As a matter of fact Bangladeshis who go to the US Embassy, honestly expects that their visa application are sympathetically reviewed and considered by the visa officials and in case of any lapse, the applicants expect the officer concerned to guide them to overcome the lapse through polite

cooperation. Of course, it is also a fact that in some cases some visa applicants la very few in number) submit false or even forged documents which the officer on duty often detects through verifying information or by machine and which irritates him and other officials. As a result all other innocent and genuine

visa-seekers suffer. Meanwhile, it may be suggested that the US Embassy in Dhaka may establish a formal link with our Ministry of Foreign Affairs to help protect the genuine visa-seekers against any sort of harassment.

M Zahidul Haque BAI, Sher-e-Bangla Nagar Dhaka-1207

Experience of an experienced smoker

Sir. As an experienced smoker, the message I get from the no-smoking campaign is that not only my lungs have blackened and burnt out, but the power of my brain has also been impaired, and I am a greater menace to the society than an alcoholic and the latter wield more power, money and influence than those who simply hide themselves beside smoke-screens.

I foggily note that the smuggling of foreign brands of cigarettes is not diminishing, and the worldwide turnover of sales and profits in the cigarette industry is impressive, in spite of the massive no-smoking catagons of the UN and oth-

The data and curves of the decrease or increase of smoking in Bangladesh are not released to the press for reasons best known to the authority. Perhaps the medical experts who dominate the campaign are not PR experts, and are content in confining the criticism to anatomical parts of the human

body. Why the sociologists are degraded in the team? Where are the inputs and the outputs of the psychologists? What are the views of the tobacco industry? Why are they being suppressed? The public should be provided with an overall picture, including the weak, strong, and the debatable points. Good propaganda meets the points of the

The purpose of the campaign appears to be to depict the smokers as some sort of minor criminals whose company should be avoided, not for questionable character, but to avoid passive or second hand smoking. Still the government does not dare to declare smoking as a punishable and criminal offence, but it spares no change to heap indignities on the smokers for no offence covered by the

aw. A persuasion campaign should not smell of indirect blackmail.

In view of this pessimistic situation, the following proposals may be considered from a slightly off-centre smoker possibly suffering from damaged brain functions of the logical control centres in the left and right sides and in the cere-

bellum due to smoking. - all government service holders who smoke should be asked to give up smoking or finally resign; otherwise they must go out of the premises to smoke, including the senior of-

— no smoker can contest any seat in any election. It means that MPs and Ministers have to be non-smokers; as also all office bearers.

- no smoker can hold the post of the head of any department in any limited company, bank, corporation, hospital, clinic, school or educational institution, airlines, military

service. the post of teacher should be banned to all smokers at all levels of education.

 smokers and non-smokers may talk to each other only over the telephone or through recorded or written messages. as no direct face-to-face contact may be allowed for fear of passive disease due to passive smoking.

 a law should be enacted on husbands who smoke, to reserve the human rights of the wives who are the victims to the smoking cruelty of such husbands.

 during marriage negotiations, the boy's side must not hide the fact that the future groom is a smoker (a marriage should never, never, go up in smoke!).

Examining the above short list, it appears that about half the resulting vacancies cannot be filled up with competent fore it is better to have separate smoking and non-smoking departments and offices, keeping up with public polarizations in other unmentionable fields.

A Middle Aged Smoker Dhaka.

The French leave

Sir, Bagerhat Govt Mohila College has become a den of malpractice and misconduct. The principal of the college doesn't attend office regularly.

He is seldom found except on Saturday and Thursday. Besides these two days, everyday is like Friday to him. The majority of the teaching staff including the vice-principal have taken the principal as

an ideal model of French leave. They are also doing the same. The newly recruited lecturers have been enjoying such leaves so regularly that they even forget to submit their monthly pay bill to the treasury/audit office in due time.

Though an eyewash vigilance team has been formed but its purpose is to 'show' that teachers' attendance to daily classes are being supervised and ensured - their motive is to yield some 'voucher-based' benefit against it.

Ali Ahmed Howlader Bagerhat

Hartal and medical team

Sir, During hartal time the police often injure the hartal idligwers: Sometimes such victims condition get very critical and the person is about to die for want of medical aid. And surprisingly our so-called politicians wait for the victim to die, because a deadbody would make their movement more fierce.

Therefore, my suggestion is, along with the police van there should also be a medical team for the injured hartal followers.

Maeen Uddin Sabuj 416. Zia Hall Dhaka University Dhaka-1000.

It's dead

Sir, So it's dead. Nobody is bothered about the dead body since nobody knows who should care. But when it'll start to decay it's predictable everyone will take notice. The "department x" has been dead for a while and soon it will be in a decaying stage. It's just a matter of time: we can't tolerate an institution in decomposed state,

The rotting smell will be too much for us to bear. Will someone bury the dead or is there still light at the end of the tun-

A Student Dept. of Architecture, BUET

To study, or not to study

Sir, The situation in BUET is very disappointing to those who have kept on trying to keep it going smoothly; disheartening for the students who would have rather carried on with their lives (after all life is more important than study). It has been an accomplishment to those who have brought about all the chaos and marred the institu-

tion's reputation. Classes have resumed once again from the 14th July. Meanwhile Architecture students still dwell on whether to go to class or to follow their mentors and refrain from class. The general students' urge to go to class is being crushed and contained by life threatening influences and forces of the mentors and their aides. As if they have the power to punish and avenge anyone who dares

displease them. So questions arise — what kind of teachers are they who plan to get back at the cost of their students' precious time? Don't they realise that the students have sacrificed all they had to offer? Even now the students are wasting an opportunity to start a new term, to avail the courses or receive a failing grade for registering and not withdrawing from it officially. While the doors of the department remain open for the second week, the students have not yet made their move. Enough fruitless discussions have taken place - it is high time that the students are set free.

A Concerned Guardian Dhaka