

The ailing health sector



BITTER TRUTH

ASADULLAH KHAN

PHOTOGRAPHS of some seriously ill patients being treated on the corridor of the Dhaka Medical College and Hospital (DMCH), recently published in a leading daily, reveal the pathetic state of the government-run hospitals; primarily meant for the treatment of the poor.

Lamentably, DMCH with a capacity of 1,700 beds is providing treatment to about 2,500 daily with a capacity of one third of the manpower only. With about 266 doctors and 653 nurses working around the clock, experts say, it's not possible to provide effective services to the increasing number of indoor and outdoor patients that crowd this hospital every day.

With the public health care system collapsing, private hospitals have mushroomed across the city. Many of these hospitals run efficiently and offer state-of-the-art diagnostic and clinical facilities, of course, at a considerable price. But there has also been a profusion of commercialised clinics and hospitals with hardly any accountability.

The incidence of 'quacks' passing as doctors and performing surgeries at a shabby clinic at Mohammadpur near Pangu hospital, as was shown on TV, was alarming. There has reportedly been a surge of such private clinics in the country with no registrations.

No issues or demands strike harder than the welfare of our healthcare system. With diagnostic devices advancing, costs of treatment are mounting; proving burdensome in a country bordered with the impoverished and lacking insurance coverage.

DMCH, Mitford or the Pangu hospital—premier treatment centres for the poor and middle-income groups—unfold a bleak



run hospitals would be the principal providers of healthcare to the poor but reality has betrayed expectation.

Public sector doctors in Bangladesh adopt strategies to accommodate the advantages of both government employment and private practice in their career development, thus maximising benefits from the incentives provided to them, consequently with a compromise in priority areas like care, quality and efficiency.

Admittedly, the nation has made notable progress in many of the key health indicators like absolute eradication of polio, the lowest maternal mortality rate in South Asia, and progressively lowered child mortality rate. However, Bangladesh is still way behind in providing secondary and tertiary health care.

The country's 60% urban population and more than 75% of the rural are beyond the reach of basic healthcare system. On the other hand, hospitals like DMCH and Mitford and

Medicines supplied by the government drug stores for patients seldom reach them because these supplies are allegedly smuggled out by a racket of lower class employees.

Pangu hospital (RIHD) are in a pitiable condition.

Alongside this, two burn units, one located in DMCH and the other in CMCH are in dire strait. The DMCH burn unit receives fund for only 50 patients, but patients admitted there number between 250 and 350 a day. With almost all the medicines spent in the emergency ward and outdoor, inpatients, mostly tortured victims or factory workers have to bear the expenses of their treatment by themselves.

Moreover, medicines supplied by the government drug stores for patients seldom reach them because these supplies are allegedly smuggled out by a racket of lower class employees.

The country's medical system is too ill-equipped to cope out with the masses' illnesses. It is borne out by the fact that even in hospitals in the district towns, doctors are fewer in numbers than the actual need, diagnostic gadgets like x-rays, ECG kits, and potential lab test equipment and technical manpower needed for examination of urine and blood are not available.

Facilities they have at their disposal in these hospitals are pathetically meager—hence the rush to the capital city for 'clean diagnosis and

effective treatment.'

The crisis has long been in the making. Throughout the last three decades substantial amount of funds allocated for hospital development and infrastructure improvement allegedly went into the pockets of corrupt health sector officials. It is only in recent time that a big racket in medical purchase at DMCH and NICVD has been unearthed.

In absence of adequate healthcare facilities being available in the country, we now see a large outflow of affluent Bangladeshi patients to India, Singapore and Thailand. Consequently, the healthcare industry of Bangladesh is losing an estimated amount of US \$500m every year to these countries.

A poor Bangladeshi patient is stuck in a dangerous dilemma. The choice is between a slew of over-burdened, understaffed and under-funded government hospitals where queues stretch longer than your eyes meet. How can a doctor, say at DMCH, examine, say about 150 patients in 5 hours? And if he continues his work without any break, he can at best devote 2 minutes to each patient! And that's the real story of the outdoor departments at DMCH, where patients wait for 5 to 6 hours, and still many of them have to go back without even seeing the doctor.

Patients have no option but to seek treatment from the private clinics that have proliferated in the nook and corner of the country. The private sector hospitals vary in range from glitzy five-star standard charging Tk.10,000 a night to seedy kitchen clinics that advertise in dazzling neon where also the price of service is still very high but the quality very poor.

In the light of the distressing situation prevailing in the country in the realm of medical treatment, the government has to seriously consider setting up at least three 1,000-bed properly equipped affordable hospitals in the outskirts of the city for the poorer sections in the country—one in between Savar and Mirpur, second one in between Narayanganj and Jatrabari and the third one in between Gazipur and Uttara.

The Writer is a Columnist of The Daily Star.
E-mail: Aukhandk@gmail.com

Estranging consequence



HASAN AMEEN SALAHUDDIN

CONSUMER giants fear losing out on profits and outsource their garments to nations such as ours to cut labour wages, paying less than 30 cents for every unit produced in contrast to just under \$8 if it were in their locality. It's understandable when you have to capitalise on every available opportunity. Is it acceptable when these profits come at the cost of lives? It seems to be nothing but — no one has to answer for the consequences, but the victims. It's very strange.

Rana Plaza was designed to be a death trap. Sadly, it has become our culture to believe in actions after calamities, rather than preventing them from the word go. The building did collapse as Physics would dictate. Bangladesh not only lost 1,127 workers, but also the same number of units of its most valuable economic resource. Sure the

How is the employers' 5% of profits promised to the workers being shifted to a "welfare fund" going to help someone who cannot put three decent meals on the family dining-floor-mat?

the law, asked all the victims to produce their identity cards so those could be confiscated in exchange for a month's pay. This move brilliantly works towards securing the BGMEA's stance in keeping themselves safe by not paying out future compensations. How would they even claim such funds, when their only proof of employment was their ID cards? It's very strange.

The BGMEA has finally stepped up demanding all factories in Ashulia implement a biometric database for all employees within August 30. Better late than never; the much needed move will certainly tally the number of workers and their job criteria to better utilise the human resources to maximise profits for the business owners. But, whatever happened to the Labour Act 2006 which makes it mandatory for employers to provide their employees with a letter of appointment? But yes, introducing a biometric identifying system renders the use of ID cards redundant. The labourers are again pushed towards facing the consequences of job insecurity -- this time without even an ID card -- with their records in the hands of their employers, ready to be wiped out if deemed necessary. It's very strange.

Here our nation stands with ministers not ready to hear criticism from anyone. The garments sector lacks proper labour and trade unions -- a portal for dissolving conflicts peacefully so that workers do not have to take to the streets to vandalise other people's property in order to be heard. The 16% of GDP contributed from the RMG sectors falls into jeopardy every time such outbreaks take place because the employers and employees cannot even agree to disagree. Yet our ministers say 'it's an internal matter'. The consequences are shoved down to the lower tiers. It's very strange.

Our government is amending the Labour Law 2006 after questions arose about the country's continued eligibility for generalised system of preferences for the US market. But to what extent? How is the employers' 5% of profits promised to the workers being shifted

to a "welfare fund" going to help someone who cannot put three decent meals on the family dining-floor-mat? What decides a workers conduct to be obstruction and arson, so that they can be sacked? How is it fair for a labourer's job to be terminated, when they don't show up for work for 10 days or more, without notice or compensation? Why will a worker join a trade union knowing that they risk losing their job by joining, as a provision states they cannot be part of the trade union if they lose their job? It looks like the classic tale where it is subtly hinted at how the wealthy are the powerful and the powerful are the scared, because they have the most to lose. The working class consequently have only their lives. It's very strange.

It's all excellent that the Labour (Amendment) Law 2013 will have provisions for keeping tabs on the owners: making sure there are bi-annual fire drills instead of annual ones, the gates would not be barred if there should be any accidents such as a fire, companies with 5,000 or more workers would be facilitated with healthcare centres, and factory buildings not be altered from the plans passed by the authorities. Are these not basic human rights to begin with? Apologies seem to be in order, for it must have been overlooked before posing the question: these workers are valued less than livestock. It must be a privilege for them to be alleviated. It's very strange.

Starting from the big brands not demanding safety protocols for their outsourced employees to the sultans of BGMEA not implementing them, the sufferers remain the labourers, earning less than enough to sustain their families. A fire in a garments factory killed 112 last year, just because the gates were sealed off. It has become the common trend to estrange one from all consequences whenever possible, and force them on the ones in the frontline. It's very strange indeed.

The writer is Sub-Editor at The Daily Star.

ACROSS

1 "Lord of the Rings" actor Ian

5 Spigot

8 Jet forth

12 Cruising

13 Court

14 Baserunner's goal

15 Locale for a 1920s "sitting" fad

17 Settled down

18 Kingdom near Fiji

19 Creators

21 "Carmina Burana" composer

24 Directory data (Abbr.)

25 Humorous utterance

28 Temporary gift

30 Scott's hat

33 Illustrations

34 Flower of New Mexico

35 "I — Camera"

36 Lingerie item

37 Physical

38 Vivacity, in music

39 Genetic letters

41 Ogler's look

43 Jungle expedition

46 Romantic dance

50 Send out

51 Worm holder

54 Leftovers

55 To — and —

56 Writer

57 Wan

58 Ever-green type

59 Horse-drawn carriage

DOWN

1 Sword handle

2 Norway's capital

3 Slender

4 Housefly

5 Pair

6 "You've got mail" co.

7 Verse

8 Drum

9 Calendar

10 Drum major's hat

11 Directing principle

12 Eastern potentate

13 Drenches

14 Dubious

15 Ark builder

16 "The Naked Majat" artist

17 Suitable

18 Anger

19 Piglet's mom

20 Pavlova or Paquin

22 Change

23 Central

25 Poke

26 Blunder

27 Beachcomber's find

29 Top

31 Parisian pal

32 Name in China's history

34 Calendar

38 Lullaby composer

40 Smartly dressed

42 Biblical verb suffix

43 Anti-toxins

44 Iowa city

45 Dubious

47 Ark builder

48 "The Naked Majat" artist

49 Suitable

52 Anger

53 Piglet's mom

1 2 3 4 5 6 7 8 9 10 11

12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59

CRYPTOQUIP

Y C P K O R D I H P M O O F S P

N M X J T M J V V N F H A M J E J B

I J Y N M J E J M M F D I J B K . C J ' A

R H V R S K D R T J N A A X C N P X J K .

Yesterday's Cryptquip: UNUSUAL NOVELTY MESSAGE THAT'S DELIVERED BY GEORGE AND BARBARA BUSH'S DOG: A MILLIE-GRAM.

Today's Cryptquip Clue: A equals D

Solution time: 21 mins.

BEER JUT BOTO
URGE ASH EMIT
MAGAZINE TIED
LIL BLANK
CRAMP RANK
RAGS MAGNETIC
AGO BONUS IDO
MAGNETIC BELT
SALVER AND
AREA MAGNOLIA
LING APE RAMS
KATE NOD AMPIS

Yesterday's answer 4-17

BEETLE BAILY

by Mort Walker

WHAT ARE YOU DOING?

PREPARING FOR OUR MEETING WITH THE GENERAL

10-6

GREG + MORT WALKER

I'M PRACTICING MY EXPRESSIONS OF APPROVAL, ADMIRATION AND ASTONISHMENT!

HENRY

by Don Trachte

EXHIBITION OF SCULPTURE

HEAD

HAND

10-6

QUOTABLE Quotes

"The first method for estimating the intelligence of a ruler is to look at the men he has around him."

Niccolo Machiavelli