

## UN Secretary General's call

### Stop the violence, open humanitarian aid access

We are heartened by the UN Secretary General's categorical condemnation of what he has termed a "humanitarian nightmare" referring to the unbelievable trauma experienced by Rohingyas who have fled to Bangladesh to escape indescribable violence. In line with Prime Minister Sheikh Hasina's five-point solution to the crisis that she placed at the UN General Assembly, the UN Secretary General called for an immediate end to Myanmar's military operations and immediate humanitarian aid access to areas affected by the violence.

We appreciate the candour of the SG in highlighting the atrocities committed against the Rohingyas that include indiscriminate firing, the use of landmines and sexual violence against civilians. The urgency of international intervention cannot be emphasized enough. The stories of mass killings, gang rapes and torture keep pouring in as fleeing Rohingyas give testimonials of the violence they have suffered. The bodies of at least 20 Rohingyas drowned at sea on Wednesday while trying to reach Bangladesh are haunting examples of their desperate situation. The UNSG has rightly warned that the violence could spread to the central Rakhine where 250,000 more people were at risk of being displaced. In fact, he has rightly alluded to the fact that the crisis has serious implications for neighbouring states and the region. This includes inter-communal strife and the possibility of rising radicalism resulting from decades-old discrimination against the Rohingyas.

It is reassuring to see that more and more countries are joining in the call for Myanmar to end the crisis. But Myanmar's stubborn resistance in allowing humanitarian access is concerning and gives rise to fears that more Rohingyas will be targeted. International pressure to stop the violence, grant humanitarian access and ensure the return of Rohingyas to their country with full citizenship rights, has to be kept up. Most of all, the world must ensure that those Rohingyas who return must be guaranteed security and dignity as our Prime Minister has insisted upon at the UN General Assembly.

## Jaywalking on the streets

### Pedestrians should obey law for their own safety

A picture published by *The Daily Star* on Thursday tells the all-too-familiar tale of jaywalking as reckless pedestrians cross the streets near a city intersection, apparently oblivious to the presence of a footbridge just a few steps away. The result is a mishmash of cars, public transports, and pedestrians all vying for space in what may seem like an attempt at street repurposing. In recent years, jaywalking—flouting road barriers and traffic regulations—has become a common practice in our cities. Worryingly, despite being a punishable offence and a safety risk, it doesn't seem to bother us anymore.

Pedestrian safety is at the heart of any road management plan and there are rules in place meant to guard against illegal road crossing. These regulations are as much for a smooth traffic flow as for the safety of the pedestrians, who are expected to abide by them for their own protection. The importance of responsible street use cannot be stressed enough, especially when driven by the mobile courts of metropolitan police departments have failed to rein back jaywalking. Last July, a DMP mobile court fined 60 reckless pedestrians at the airport intersection in Uttara and similar drives have been conducted sporadically in other areas of Dhaka also, to little avail however.

We think our urban planners and road authorities should seriously reconsider their strategy to tackle jaywalking. There should be more easily accessible and available mediums of pedestrian crossing, but the citizens also have a role to play here. They can't expect the traffic situation to improve without first learning to respect the traffic regulations themselves.

## LETTERS TO THE EDITOR

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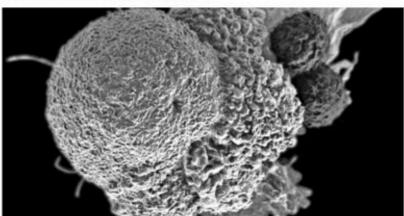
### Cancer drugs should be produced domestically

Bangladesh government has set up the Essential Drug Company to produce a number of drugs, contraceptives, saline solution and a few other items required to treat some common diseases. The company built a number of factories in different districts, which are producing medicines and medical accessories.

Having said that, the incidence of cancer has been rising in Bangladesh rapidly. Citing experts, *The Financial Express* recently reported that cancer would be a significant cause of mortality in Bangladesh by 2030. Drugs required to address cancer are mostly imported from abroad, but they are so expensive that most of the cancer patients cannot afford them.

Essential Drug Company, being a state-owned enterprise, should start producing cancer drugs domestically. It will largely reduce the price of drugs needed to treat cancer patients.

Md Ashraf Hossain, Savar



# Saving the miracles

## The challenge of caring for new mothers and their babies in the Rohingya camps

NAZMIN TITHI

THE photo in the newspaper, of a baby girl born a few days ago at Kutupalong refugee camp in Ukhiya makes me marvel at how beautiful she is; but the next moment I remember the reality she has been born into—what the future holds for her, what her mother had to go through while fleeing her own country and whether she too, will have to face hunger, disease and emotional trauma. The caption says this baby girl was born in the open, 20 days after her mother came to Bangladesh.

And she is not alone. The government estimates that around 200 babies were born in the last one month in the makeshift refugee camps of Cox's Bazar and Teknaf. And *The Guardian* reported on September 17 that more than 400 babies have been born in the no man's land between the borders of Bangladesh and Myanmar in just 15 days.

As of now, an estimated 480,000 Rohingya refugees have fled violence in Myanmar's Rakhine State and crossed the border into Bangladesh; among them 80 percent are women and children. UNFPA says at least 13 percent of the Rohingya women are either pregnant or lactating mothers. Many of these more than 16,000 expectant mothers (in the vulnerable category) have faced violence in their own country, seen their husbands and children die in front of their eyes, had to hide in the hills for days and take a grueling journey to reach Bangladesh.

While the government, UN agencies and NGOs have been struggling to provide the Rohingya refugees with food, drinking water, toilet facilities and medicine, providing the expectant mothers with proper medical care still remains a big challenge. Many of the expectant and lactating mothers, moreover, still remain undocumented; the number is most likely to reach well above 50,000. A Bangla daily has recently reported that on average eight children are being born in the camps each day. Thus, the needs of the expectant and new mothers should receive special and immediate attention.

As *The Daily Star* has reported, most of the babies in the refugee camps have been born in unhygienic conditions, mostly without any assistance of midwives. Therefore, the first thing that needs to be ensured is that these expectant mothers can live and give birth in a hygienic environment.

"Not only pregnant women, all women and girls need 'hygiene kits' in

which there will be sanitary towel, torch, nail clipper, antiseptic cream, etc.," says Gawher Nayeem Wahra, Adjunct Faculty, IDMVS, Dhaka University and also the Founder Convener of Disaster Forum.

"Everybody is thinking about food. But these are the practical needs of all women." He adds that there should also be "hygiene corners" which are particularly very important for expectant mothers where they can get clean or breastfeed their babies.

We have known from reports that the UNFPA has deployed a number of trained midwives to attend the women

during childbirth. At present women are giving birth inside their tents which is made of polythene and bamboo. There is no arrangement for the women to even lie down. According to him, pregnant women are catching cold as they are sleeping on polythene sheets and they might also develop pneumonia which can be life-threatening.

"There is no electricity in the camps. So if we have to deliver a baby at night, the situation gets really difficult," says Dr Shahjahan.

While basic healthcare needs are crucial to ensure that these mothers and their babies survive, there are other

that the government has been carrying out immunisation programmes in the camps and has already vaccinated a large number of children against the diseases like measles, rubella and polio. It should continue with this programme and make sure that the newborn babies are protected against such diseases.

On September 22, 2017, the BBC published a video of a newborn boy named Anwar Sadiq at Kutupalong refugee camp of Cox's Bazar. He was in his mother's womb as she fled Myanmar to find a safe zone in Bangladesh. The 15-year-old mother talked about her suffering to the BBC. She said that she



A newborn at Kutupalong camp in Ukhiya. She was born last week, about 20 days after her mother came to Bangladesh fleeing Myanmar.

PHOTO: RASHED SHUMON

and girls in the refugee camps, and other national and international NGOs have also been working in their own capacity to provide the pregnant women with antenatal care. But this is just not nearly enough considering the number of women who are expectant. Only by increasing the number of qualified doctors, nurses, midwives and other medical practitioners, can their medical needs be properly addressed.

According to Dr Shahjahan Ali, Team Leader, Health Programme, Brac, there are some basic problems which need to be solved right away. The need for delivery centres is one of them. Without a proper delivery centre, it is quite difficult to assist a pregnant woman

issues that need to be addressed. These women and children have suffered unbelievable mental and physical trauma and need psychological counselling. According to Gawher Nayeem Wahra, the government has trained around two to three thousand people in psychosocial counselling. They can be deployed in the camps to give counselling to the expectant mothers and children.

For the newborns in the Rohingya camps, there is danger everywhere, starting with diseases that are spreading throughout the camps. Fever, cold, pneumonia and diarrhoea are widespread. Experts also fear that there might be a public health emergency under such circumstances. We know

never thought her child would have to live in a refugee camp.

But then there is Khadija, a young woman, who is grateful that she and her baby have been given a chance to live and start over. She has named her newborn baby girl after Prime Minister Sheikh Hasina. Khadija's mother told *India Today*, "We have come to Bangladesh in a lot of pain. My daughter was pregnant. She gave birth to a daughter here. We have named her (after) Sheikh Hasina. She has given us hope of a new life and we now expect some peace in our lives."

The writer is a member of the editorial team at *The Daily Star*.

## PROJECT SYNDICATE

# Is South Asia the new Middle East?



DOMINIQUE MOISI

Hindu nationalism in India, under Prime Minister Narendra Modi's Bharatiya Janata Party.

The good news for South Asia is that a "Middle Eastern" future is not inevitable. But the mere possibility indicates the febrile state of affairs that rising nationalism, often couched in religious terms, is producing across the region. It is as if the growing fundamentalism within Islam has now encouraged

according to the United Nations High Commissioner for Refugees—persecution of the Rohingya is nothing new. Since independence in 1948, successive governments have denied even the most basic rights to the Rohingya, refusing to grant them so much as citizenship.

As the international community has condemned the crackdown, Myanmar's *de facto* leader Aung San Suu Kyi has stood largely silent, a choice that has done untold damage to her once impeccable image as a courageous champion of democracy and human rights. Even when she finally did address the issue—at a press conference, delivered in English, after weeks of violence—she refused to mention the Rohingya by name.

Suu Kyi's problematic response has often been attributed to her political calculations regarding how to deal with Myanmar's military, which ruled the country until just last year and remains beyond civilian control. But, as unbecoming as it is for a Nobel Peace Prize winner, the truth is that her response probably also reflects her

Myanmar, neighbouring Thailand is a majority-Buddhist country; Malaysia and Indonesia are mostly Muslim; and India is majority Hindu. Pakistan, for its part, was created as the homeland for the Muslim minority in Britain's former Indian empire after independence.

For religious minorities in the region, security can be hard to come by, not least because of the British and Dutch imperial legacies. The British Raj used minorities to help enforce colonial rule, by promising to provide a better life for those enduring discrimination. But when the British went home, discrimination resurfaced—sometimes with added zeal, given resentment of minorities' collaboration with colonial rule.

It is that discrimination that has led a small minority of young Rohingya to choose violence, such as the attacks in August on security outposts and police stations. The militants may have been egged on by fundamentalist Muslim preachers from the Middle East, or even by homegrown fanatics. In any case, they are typically seeking to strike back at the system and people responsible for oppressing them.

And radicalisation within Myanmar's Muslim community has proceeded alongside the growth of religious extremism among the Buddhist majority. Buddha preached peace and tolerance. Yet some Buddhist priests today are inciting hatred and violence.

In fact, even before the latest eruption, a succession of massacres garnered only indifference from the international community. Like the horrors inflicted on Bosnia's Muslims during the Balkan wars in the 1990s, the assault on the Rohingya seems to reveal the Western world's selective empathy.

The result is a vicious circle of radicalisation and violence. Terrorist organisations like the Islamic State, now defeated on the ground in Syria and Iraq, undoubtedly hope to use the Rohingya's plight to mobilise Muslims, particularly in Asia, for their own ends.

As religious tensions escalate, regional cooperation is in jeopardy. How can an organisation like ASEAN, which has promoted gradual progress on security and economic collaboration, weather the killing and displacement of religious minorities in its member states?

If a geostrategic catastrophe is to be avoided, the unholy alliance of religion and nationalism must be broken. The United Nations should take the lead in this regard, by committing to bringing an end to the Rohingya crisis. Beyond the moral imperative of doing so, a successful intervention could help to restore multilateral institutions' tarnished image. The last thing the world needs is another politically fragmented region mired in violent conflict.



PHOTO: STAR

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fundamentalism in other religions.

The situation is particularly dire for the Rohingya. Since August, the military has been engaged in a brutal campaign that, despite being nominally focused on stopping Rohingya militants, has targeted civilians and burned entire villages, forcing hundreds of thousands to flee to neighbouring Bangladesh.

But while this latest crackdown is particularly devastating—"a textbook example of ethnic cleansing,"

indifference to the fate of a small minority. Muslims comprise just 4 percent of Myanmar's population. To her Burman aristocratic sensibility, their interests barely register.

What began as a localised tragedy has now become an international crisis—and not just because of the refugee flows into Bangladesh and elsewhere. As in the Middle East, national and religious identities tend to be inextricably linked. Like

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