

MIGRANTS CRISIS IN MEDITERRANEAN

IOM accused of forcing Bangladeshis to go home

STAFF CORRESPONDENT

The UN migration agency has been accused of forcing Bangladeshi migrants, including children, in Tunisia to return home following weeks at sea.

A Tunis-based NGO, Forum Tunisien pour les Droits Economiques et Sociaux (FTDES), filed a complaint to the International Organization for Migration (IOM) in Tunisia this month in this regard.

The group of 64 Bangladeshis said they felt pressed by the IOM to sign a voluntary return paper, or risk arrest, according to a report by British daily The Guardian published on August 26.

The migrants were among a group of 75 -- about half of whom were unaccompanied children -- rescued by vessel Maridive 601 in May.

They started their journey from conflict-ridden Libya aiming to cross the Mediterranean to reach Europe.

After 19 days at sea, they were allowed to disembark in Zarzis, Tunisia, and were taken to a Red Crescent reception centre in Tunis, the report said.

Over the following days, dozens of people were deported to Bangladesh through the voluntary return and reintegration programme.

The migrants also said diplomats from the Bangladeshi embassy in Libya, who had visited Tunisia to arrange repatriation, had warned them that if they did not sign the voluntary return document, they would become victims of organ trafficking, The Guardian report said.

"Based on the testimonies we collected, FTDES files this complaint to the IOM to raise severe concerns about the treatment of migrants by IOM Tunisia," read the complaint.

"The testimonies of the migrants were consistent and all allude to forms of malpractice on the part of IOM."

"According to the migrants, IOM staff members used intense psychological pressure during the interviews to force them to accept their 'voluntary' return to Bangladesh," said FTDES.

Nine of the migrants, interviewed by the Guardian, said their lives would be at risk if they returned to Bangladesh. Many had accumulated debts to reach Libya and if they were to return they feared they would be threatened and

tortured.

But they felt the IOM had put all of the Bangladeshi migrants under immense psychological pressure to return to Bangladesh while they were still on the boat, and after they'd docked.

"The IOM gave us a sheet," one of the migrants told the Guardian. "The documents said nobody would force us to leave. They told us the police here in Tunisia will arrest us and they don't know when we'll be released. The government in Bangladesh is not helping and neither are the Tunisians. Please, we want to stay."

The IOM, however, has denied any pressure was applied to the migrants to return to Bangladesh, and said that all documentation was explained to them in a language they understood, the Guardian report says.

They said migrants were informed of all options available to them regarding asylum and remaining in Tunisia.

IOM Tunisia spokesperson, Leonard Doyle, said those who opted to return received counselling and had the contents of documents explained to them in a language they understood.

He said, "The migrants who expressed a wish to stay do not have passports. Passports cannot be obtained in Tunisia. Therefore, IOM staff detailed the risk of staying in an irregular situation. It is fundamental for IOM that migrants take informed and free decisions."

A spokesman from the Bangladeshi embassy in Tripoli, which is responsible for Tunisia's affairs, said he couldn't comment on the specific incident, but was aware of the allegations against embassy officials, and was "taking the accusations very seriously."

He said the embassy was "willing to collaborate with the foreign ministry in Dhaka in case they decide to launch an investigation". The embassy does not have the authority to launch its own investigation.

"If it did happen, then the ministry of foreign affairs in Dhaka could go on with the charge.

FTDES has confirmed that four of the Bangladeshis who refused to sign the voluntary return agreement and decided to remain in Tunisia were eventually granted asylum seeker status by the UNHCR last week.

Venezuelans surge into Ecuador to beat visa deadline

AFP, Quito

More than 13,000 Venezuelans surged into Ecuador over the weekend ahead of strict new immigration controls that took effect Monday, the government said.

"Between Saturday 24 and Sunday 25, 13,110 Venezuelan people entered the country," a government source said.

New visa controls that came into force at midnight Sunday (0500 GMT), require Venezuelans to hold a passport -- difficult to get in their own country -- and certified criminal record details.

Previously, Venezuelans could enter Ecuador using simple ID cards.

The vast majority crossed into Ecuador via the Rumichaca bridge bordering Colombia.

The government says around 300,000 Venezuelans fleeing the country's economic crisis have taken refuge in Ecuador.

That number is already straining the country's health care system, and the figure is expected to grow to 500,000 by the end of 2019.

Horror is all

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nation spending around Tk 60,000, which she borrowed from friends and relatives.

"Despite his meagre income, at first my husband did not agree with my plan to go there. Later I convinced him, saying I would be able to support the family and build a better future for our child," Dalia said.

As per her contract with the local recruiting agency, Concorde Apex, she was supposed to get Saudi Riyal 1,000 (about Tk 22,500) every month. But first employer in Al Khari, where she worked for five months, gave her only 800 riyal a month. That too was irregular.

"They used to beat me almost regularly. They did not give me food properly. I fell sick," she said.

The house owner then "sold" her to an office. She worked there for around a week before being sent to a new house.

"Though I was sick, I was beaten up here as well. They gave me only a little food. Sometimes I starved. I had to work despite my illness," Dalia said.

After about four months, her new employer sent her to another office, where she worked for only four days. There she found another Bangladeshi woman, Murni.

"On the fourth day, two Saudi men attempted to rape us. It was time for morning prayers. We then jumped off the window of the first floor of the building. I got my vertebra and leg broken and was lying on the road."

After a while, some devotees from the mosque opposite the building rescued them and took them to a hospital. Dalia took treatment for two months. She was sent to the Bangladesh embassy in Riyadh on May 13. The embassy shifted her to the safe home, where she stayed for three months before being sent back home.

She said she saw four to five pregnant women at the safe home, although The Daily Star could not independently verify this.

"All my dreams are shattered now. My child wants to sit on my lap, but my broken back and leg won't allow it," she said.

Contacted, Golam Moshi, Bangladesh ambassador to Saudi Arabia, said, "Due to the hajj, we couldn't send back any migrant workers in the last two months. So, we have sent them together now. More would be sent back soon."

Asked about the torture, he said although torture was evident, the severity was sometimes exaggerated.

"The problem is Bangladeshi workers can't cope with the new environment while the house owners are not happy with their performance," he said.

Language is another big barrier, said Golam Moshi.

"They [women workers] must be sent after proper training and orientation. The agencies are cheating innocent women and proper steps should be taken against them. We have written to the foreign ministry and the expatriate welfare ministry several times in this regard."

Asked about the government's liability, he said, "We are responsible... We can't avoid our responsibility. This is very unfortunate."

Shariful Hasan, head of Brac Migration Programme, said, "If the ambassador mentioned that there are problems on both sides -- employers as well as workers -- the whole system should be reviewed to decide whether our women should be sent or not."

He also suggested that the government explored alternative destinations.

"We need to bring the recruiting process under a framework," he said.

Salim Reza, additional secretary and director general of the Bureau of Manpower, Employment and Training, said that as the number of woman migrant workers increased, incidents of torture have also shot up.

"We want no incident of torture. We are working to find out the reasons behind this by studying all the individual cases."

Asked about the findings in previous cases, he said without elaborating: "There are multiple reasons. We are working on it."

About the role of the agencies, he said, "We are slapping fines on the agencies and filing cases against them."



Dengue patient Sumaiya Akter fans her newborn baby lying on the corridor beside the gynaecology ward of the city's Shaheed Suhrawardy Medical College Hospital yesterday as there is no bed available. She gave birth to the baby on Sunday, eight days after being admitted to the hospital. Doctors said they would release Sumaiya in a day or two as she was getting well.

PHOTO: PALASH KHAN

Six hours at Suhrawardy

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corridor feel any less sultry or stuffy.

After 15 minutes of his uncomfortable stay there, Alauddin was informed by a hospital staffer that he was in the wrong queue.

Hapless, the already physically weakened Alauddin rushed to the right line. At about 11:00am, he could not stand any longer and sat on the floor. He finally met medical officer Lina Kazi after another 15 minutes had passed.

The medical officer advised him to get admitted to the hospital.

While the advice was simple on the surface, it revealed yet another layer of complications.

After depositing money for admission, Alauddin visited the emergency ward for other formalities. The on-duty doctor there advised him to take a few more tests to confirm whether he had dengue and then revisit the resident physician's office.

Around noon, the resident physician office staffers asked Alauddin to get admitted to the hospital the next day after getting the new test reports.

After giving blood samples at about 12:20pm, Alauddin's headache and stomach cramps intensified. He returned to the emergency ward where on-duty doctors put him in observation for 30 minutes.

Alauddin then visited a top official of the hospital as he felt he needed to be admitted immediately, instead of waiting another day. The hospital official then made arrangements for Alauddin, who got the permission for admission at 1:40pm.

He reached the designated ward where on-duty doctors advised him to take some more tests, including an ultrasound, and the IgG and IgM tests.

After doing all these, he was finally given a mattress on the floor of the ward 1. Hospital authorities put him on saline drip at about 2:50pm.

"We are still loaded with dengue patients. There are over 200 patients, including 73 dengue-infected, taking treatment at ward no 1, which has the capacity to treat 60 patients," said hospital Director Uttam Kumar Barua.

Regarding Alauddin, he said the admission should have happened sooner. "The admission process has been made easier and we want to make it even easier. Usually, we do not delay the admission of such patients," he said, adding that since the patient's platelet had dropped so low, he should have been admitted immediately.

He said once he was informed of Alauddin's plight, he immediately instructed that the patient be admitted.

"I will look into why such a delay took place," Barua said.

PATIENT NUMBERS OUTPACE CAPACITY

These correspondents and a photojournalist spent six hours from 9:00am to get a first-hand account of the dengue situation at the state-run Shaheed Suhrawardy Medical College Hospital.

During the visit, many patients were found lying in beds under mosquito nets, while others were taking treatment in the empty spaces between two beds at both special dengue wards for male

and female patients.

A critical dengue patient, Sumaiya Akter, rested at a corridor of the hospital. She had just given birth to a baby on August 25. Due to lack of beds at the gynaecology ward, she was placed at the corridor, where she lay with her newborn baby. "We are both suffering the hot and stuffy condition here," she said at about 1:30pm. She had brought along a small electric fan, but it did little to improve the situation.

A similar sight was found in most of the wards.

Some patients, who did not get a bed, were sleeping in the hospital's balconies or walkways without mosquito nets. This was seen more in the pediatric ward and ward no 1.

A pungent odour came from a corner, where toilets of the ward for children and ward no 1 had overflowed. The surroundings of the wards were also unclean.

A number of people were coming in and going out. There seemed to be no restriction on visitors.

Several doctors and nurses, while talking to the correspondents, said that they were really tired as they needed to work long hours without weekends for three to four weeks.

"Overworked doctors and nurses are already getting sick," said a doctor working at the special ward for dengue patients.

"Yes, they are exhausted. They need to attend to so many patients. They need to work two shifts in a row," assistant director of the hospital, KM Mamun Murshed, said.

He said they were trying to keep the hospital clean.

Although the number of dengue patients decreased over the last few days, there were still many coming to the hospital, Director Barua said. Currently, there were 279 dengue patients taking treatment at the hospital, with a daily average admission of around 45 to 55.

According to hospital authorities, prior to the ongoing spell of dengue fever, they were treating 1,100-1,200 patients per day, but now the number was 1,500-1,600. The hospital has 850 beds with 350 doctors.

Apart from admission, every day, around 500-600 people come to the hospital for dengue tests.

During the first week of August, the hospital was so congested that they had to advise less critical patients to take treatment at home.

To deal with the growing number of patients, hospital authorities have set up two new temporary wards dedicated to those with dengue, with each having a capacity of 120 official beds and 60 portable beds. They also have 10 doctors, 32 nurses and 5 technicians for managing dengue patients.

The country is currently witnessing the worst ever dengue spread. A record 66,064 dengue patients were admitted to different hospitals across the country till yesterday, according to the Directorate General of Health Services (DGHS).

A total of 118 people died of dengue, however, DGHS has confirmed 52 deaths so far.

Dhaka did its part, now it's up to the world

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Two repatriation attempts -- one on November 15 last year and the other on August 22 this year -- have failed as the Rohingyas refused to return, arguing that the situation in Myanmar was not safe and that there was no guarantee of citizenship.

Meanwhile, Bangladesh is facing immense economic and environmental challenges to continue to provide shelter to the Rohingyas.

About two-thirds of the funding appealed in the United Nation's 2019 Joint Response Plan for the Rohingyas in February is still unmet and its December deadline is looming close.

According to the United Nations Office for the Coordination of Humanitarian Affairs, \$330 million was received till Friday, which is 36 percent of the \$920 million requested.

Addressing yesterday's programme as a guest of honour, Mia Seppo said the various aspects of the solutions to the Rohingya crisis include response, protection and justice. The problems faced regarding the crisis today are complicated and inter-related.

"The people of Bangladesh as well as the people of Myanmar, including the Rohingya refugees in this country,

deserve the world's support in confronting these problems," she said.

The solutions, however, need to be sustainable and they take time and thoughtful consideration.

"A key role for the international community is the range of tools we can provide to the government's leadership. Different communities need different kinds of support.

"We need to be smart in ensuring that how we plan, fund and implement programmes is tailored to the specific problems we are trying to address. The UN is committed to getting this right for both the refugees and the people of Bangladesh."

Mia Seppo also said the humanitarian agencies must continue to have the resources and space they need to serve the peoples' most urgent needs.

She said Bangladesh has done sophisticated work in using the full range of diplomatic tools at their disposal in the international forums. "As a UN representative, I would encourage more countries to engage like this."

On holding accountable the perpetrators of crimes against the Rohingyas, she said the UN was working to that end. "Impunity cannot

be acceptable for the serious human rights violations that are alleged to have occurred."

Speaking at the programme, Prof Imtiaz Ahmed, director of Centre for Genocide Studies at Dhaka University, said Bangladesh needs to have deeper political engagement with Myanmar as well as the important allies of both the countries -- China, Japan and India -- for a sustainable solution to the Rohingya crisis.

Apart from the Bangladesh government, national and international civil societies and NGOs as well as human rights organisations also need to keep up the pressure from within and outside Myanmar.

He said a sustainable return of the Rohingyas was possible if Myanmar amended the existing laws regarding Rohingya citizenship and rights and created a safe zone in Rakhine with deployment of security personnel from China, Japan and India along with the Myanmar security forces.

It is important to identify the investors in Myanmar and flag them internationally, drawing the attention of global rights bodies. With this process, Prof Imtiaz said, the world will know who are doing businesses with a

country which committed "genocide".

He also sought initiatives to wake up cultural personalities, singers, poets and civil society members so that they can speak up in favour of the Rohingyas.

Prof Imtiaz reiterated that Myanmar was not at all serious about the Rohingya repatriation. "Myanmar has so far been staging drama."

Canadian High Commissioner to Bangladesh, Benoit Prefontaine, said his country was working internationally to build consensus. He said most of the countries agreed to work together to address the crisis -- both in solving the humanitarian problem in the Rohingya camps as well as changes within Myanmar.

"Those who have done serious human rights violations should come under accountability," he added.

Bangladesh Foreign Ministry Secretary (bilateral, Asia-Pacific) Mahbub Uz Zaman, Centre for Peace and Justice Executive Director Manzoor Hasan OBE, Justice Dr Syed Rezaat Ahmed of the Supreme Court, NGO Affairs Bureau Director General KM Abdus Salam and ActionAid Bangladesh Country Director Farah Kabir also spoke.

Banned sweetener found in sugar

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imported or it was mixed with sugar later over here.

Mohidus Samad Khan, associate professor at Buet's chemical engineering department, said long-term consumption of sodium cyclamate may upset gut health and instigate tumor formation.

It may also cause metabolic problems, which is related to obesity, he added.

The import, production or use of sodium cyclamate in any form is banned and a punishable offence in Bangladesh, according to Bangladesh Food Safety Act.

"After we receive the report from BARC, we will examine ourselves

and we will take action accordingly," Mahbub Kabir, member of Bangladesh Food Safety Authority, told The Daily Star recently.

Sodium cyclamate is 30 to 50 times sweeter than sugar. It is stable under heat and is commonly used in baked goods where other artificial sweeteners cannot be used.

Experts said some unscrupulous businessmen use sodium cyclamate in items like ice cream, juice and sweetmeats for more profit because it is cheap.

Sodium cyclamate is not produced in the country and maybe it is imported under false declaration. It looks like citric acid and sodium

citrate and so, it could be imported as these chemicals to dodge the eye of custom officials, they added.

Nahid Naushad Mukul, joint commissioner of Chittagong Port, said there is no scope of importing any product the moment it is banned by the government; but it can be imported under false declaration.

"We can only monitor 10-15 percent of all imported products. The rest are examined randomly. Dishonest businessmen take this opportunity. But for sugar items, we usually do not release any item without lab examination," he said.

Mostafa Kamal, chairman of

Meghna Group of Industries, one of the largest importers of sugar, said sugar with sodium cyclamate is really dangerous.

"It's a chemical," he told The Daily Star over phone yesterday.

"Some unscrupulous traders might have imported sodium cyclamate and the government should take actions against them," he added.

According to Bangladesh Bureau of Statistics, the import of raw sugar rose 20 percent year-on-year to 26.15 lakh tonnes in fiscal 2017-18.

In May last year, the US Department of Agriculture estimated Bangladesh's sugar consumption at 26.95 lakh tonnes in 2017-18.