

Covid-19 crisis warrants a comprehensive, strategic rescue plan

Fragmented plans will not produce desired results

While the PM’s Tk 5,000 crore stimulus package for export-oriented industries and government efforts to address the wage and food insecurity of people have been reassuring, especially with the entire country under partial lockdown, we are realising all too well that the present crisis and the measures taken to combat it will have far-reaching effects on practically every sector of the country. In fact, given our economic reality, there will not be a single sector that will not require government assistance. It is, therefore, crucial for the government to devise a well-thought-out, comprehensive and strategic rescue plan that must be multi-sectoral in approach. This means the emergency plan must prioritise certain sectors such as health, business, employment (formal and informal), SMEs (small and medium enterprises) and all marginalised groups.

As resources are limited, it is imperative that this bailout plan is implemented in the most effective and efficient way so that there is no waste of resources or irregularities in distribution or allocation. No doubt this is a mammoth task and a huge challenge for a government in such an overwhelming crisis. This is why the government must mobilise all the resources at hand and all the players who can contribute to implementing this rescue plan. Already we are seeing how businesses, NGOs, individuals and volunteer groups are trying to contribute in their own way. But in order for all these efforts and programmes to reach every sector and be sustainable, these must be done in a coordinated manner. The government must join hands with all these groups; in some cases, the government will lead and in others it will be the private sector or the NGOs depending on the sector being “rescued”.

The need of the hour is thus to formulate this all-encompassing, strategic plan and implement it with efficiency and determination. In this regard, we urge the PM to take a lead on this.

Let journalists perform their duties without fear

Govt must ensure their safety

We are outraged at the news of a journalist being assaulted for reporting irregularities in relief distribution in Nabiganj upazila of Habiganj last Wednesday. The journalist was beaten up with a cricket bat allegedly by a union parishad chairman and his associates for posting a Facebook live video depicting anomalies in relief distribution in the district. Seven other journalists also sustained injuries in the incident while trying to save him. Such behaviour from public representatives is shameful especially when there are allegations against them of being involved in corruption. This, however, is just one small instance of how journalists are harassed and physically attacked across the country when they go for reporting corruption and anomalies committed by government high-ups and politically powerful people. Reportedly, around the same time, another journalist in Bhola was also assaulted for reporting irregularities in relief distribution.

There were many instances in the recent past where journalists were not only harassed and attacked, but also framed in false cases due to personal vendetta. And then there are those who went missing and could not be traced by the law enforcing agencies. Only last month, a journalist went missing and another was picked up from his home at the dead of night, beaten up and framed in a false case for writing against graft. The rampant misuse of power by some of the public representatives and government high-ups against journalists is against with the democratic values we so cherish and deserves urgent attention from the government. In fact, it is through media reports that the government can keep track of whether there is any irregularity that will ultimately hamper the relief efforts it is trying to implement.

In this particular case, we hope the government will take stern action against the chairman and his men. If the chairman thought he was defamed by the journalist, he could go to the local authorities to settle the matter. By attacking the journalist, he only set a bad precedent. We strongly protest this and demand justice for him.

LETTERS TO THE EDITOR

letters@thedailystar.net

May we all defeat this enemy

It is indeed terrifying that all across the globe, from the advanced and rich nations to the poor, people are falling victim to the coronavirus, the deadly disease which is sparing none. From prince to pauper, no one is exempted. Never in my life have I thought that something so microscopic could cause such widespread havoc across the planet.

Many countries that possess the most sophisticated tools, weapons and infrastructure have become helpless to the unfathomable ferocity of the virus. We do not know how and when the rage will stop, and the uncertainty is surely making many of us deeply upset. Yet, we must not give up.

During these difficult times that we are going through, I would like to salute all those fearless people in the front line, including doctors and nurses who are placing their lives in danger to save those who are infected. In their endeavour, many of them have died, but many more are still fighting strongly, which provides a beacon of hope during the ongoing crisis. May the Almighty protect and bless us all.

Nur Jahan, Chattogram

SEITY SABUR AND SHEHZAD M ARIFEEN

PLAGUES, pandemics, floods and blights, we were once taught, are vehicles of retribution, weeding out those who have not prepared for divine wrath—the greedy, reckless, and arrogant. Yet heavenly justice can be merciless and undiscerning, destroying innocent lives for the hubris of their leaders. As the global division of labour has expanded and deepened, decades of “structural adjustment”, privatisation, deregulation, austerity measures and the deliberate destruction of public institutions and social welfare infrastructure have left a fundamentally weak and vulnerable world. Now the West lies crippled, much of the Third World unable to even measure their predicament, and only a handful of governments managing any kind of effective response at all.

Here, in this crowded land, the first phase of an unofficial lockdown began after March 17, becoming official as of March 25. The government had at least two months to prepare since the first wave of both people and news arrived from China; yet it appears that, for some, other activities took precedence over the health of their fellow citizens. Now that we are finally taking it seriously, Prime Minister Sheikh Hasina insists that we must “take measures in such a way that we can protect every person of the country [from the deadly disease],” while Health and Family Welfare Minister Zahid Maleque has declared that “our country is now safe and doing well” (*The Daily Star*, March 30, 2020). Indeed, with very few new cases of infections being reported, it seems that Bangladesh is succeeding where so many of the mighty have failed. A formidable achievement indeed!

We have, however, sincere doubts about what is being said and the integrity of our institutions. Amidst continued claims that there are no shortages (bdnews24, March 29, 2020), only one of the four facilities originally assigned to be used for coronavirus patients is reported to be equipped for the task. There are severe shortages of protective gear for hospital staff, and too many reports of rejected patients, doctors and nurses refusing to approach them, forcing family members to attend to them instead. Even now, in the fourth week of the pandemic’s career in Bangladesh, we are coming across news of a critical patient spending 12 hours in an ambulance, trying to get admitted into six hospitals one after

another, only to die in the end with zero medical attention (*Prothom Alo*, March 29, 2020). Meanwhile, the Institute of Epidemiology, Disease Control and Research (IEDCR) continues to stick to its own narratives with numerous reports coming in everyday of people unable to reach anyone on their “hotline”.

While we preach “social distancing”, practice surgical sanitisation, bemoan the flood of returning migrants and the *en masse* evacuation of Dhaka, we forget that our “remittance soldiers” do not have the support system to stay in a foreign land without daily wages, and that the working classes do not have the luxury of “social distancing” or sanitisation while going hungry for days under the lockdown (*The*

“middle-income” country.

Covid-19 has stripped naked the modern nation-state everywhere. The helplessness of the world’s great statesmen to contain this pandemic has unmasked the deadly flaws in the structure of global capitalism that we have been enduring for ages, under the illusion that such a system is the path to human freedom and progress. This is what happens when we allow private gain to become the organising principle of social life: a world where we can produce enough “fast fashion”, but not enough protective masks—a Bangladesh where we have the space to throw extravagant weddings, but not enough to provide safe housing during a crisis. Nishant

Shah, a friend of one of the writers, has put it well: “[T]he reason why we shall not accept this as normal is because the call for normalcy—and its accomplished rhetoric of productivity, work, business-as-usual—is in the service of the very system that has led to this crisis.”

Encouragingly, collective efforts have emerged to raise funds and provide PPE and other necessities to the “socially distanced”. Such efforts are commendable; yet why do these working-class bodies have to live on our handouts, instead of what they are entitled to as citizens of the state? While affluent voices have cried over the fate of “khete-khawa manush”,

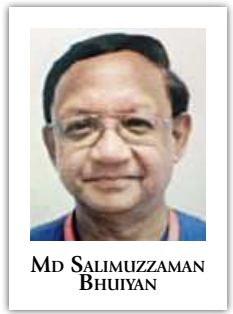


Unable to find work, a porter sits idly under a foot bridge at the capital’s Karwan Bazar, on April 2, 2020.

PHOTO: STAR

Daily Star, March 23, 2020). We have put the onus on able-bodied individuals to ensure their personal safety, while disguising the structural inequality that determines who gets infected and who can save themselves. Social distancing is social inequality: the elite retreat into safety while marginalised communities (the working classes, the impoverished elderly, sex workers, the *hijra*-transgender community, etc.) are left exposed. The nation has been abandoned to figure out how to survive on its own, either by hoarding monthly supplies, self-medicating, or reaching out to people in need. Such is the state of this aspiring

Strengthening our collective preparedness to fight Covid-19



MD SALIMUZZAMAN BHUIYAN

I work as a consultant anaesthetist and intensivist in a small district general hospital in north-west England. I work in the intensive care unit (ICU). I would like to share my experience with this virus and warn my country about the dangers of this pandemic and tell them about how to face it. I have been looking after coronavirus-infected patients for the last four weeks now. We have, unfortunately, lost two patients in our ICU despite multi-organ supports (lungs, heart and kidneys). Both had pre-existing multiple co-morbidities. Five of our ventilated patients came from the same area of Cumbria and both went to the same music festival. They had social contacts with each other before they had been admitted to the hospital. One of our anaesthetist colleagues and three nurses have contacted the infection while looking after ventilated patients in the ICU. We have sent them home for self-isolation. I continue to look after very sick patients in the ICU who are fighting for their lives.

The disease is called Covid-19 (Corona Virus Disease 2019). The viral infection had started in the Wuhan city, capital of Hubei province in China, in December 2019. This is a deadly virus. The virus is encapsulated, highly contagious and dangerous. There is no specific drug that can kill this virus. No vaccine is available against it either. The virus enters into the human body through the respiratory route, mainly nose and mouth. It ultimately settles in the lungs and very quickly damages the lungs by causing acute pneumonia. The chest x-rays of all patients look very similar and horrific. The patient finally dies from multi-organ failure. The initial symptoms of the infection are dry cough, high temperature, running nose, sore throat and shortness of breath. The infection spreads directly from person to person. The majority of patients have mild symptoms and eventually recover from the illness. Only a small percentage of the affected population dies. The elderly population with co-morbidities are mostly at risk and very vulnerable.

The epicentre of this pandemic is moving fast from country to country like a typical tornado. First it was in China, then Iran, then Italy and the rest of the Europe, including the UK, and now the epicentre has moved to the USA. So far, the highest number of people died in Italy. In the UK, the number of reported cases is doubling every five days. The number of fatalities is also rising every day. In the UK, more than 10,000 persons are being tested every day. So far, more than 203 countries and territories worldwide have been affected by this virus. No continent except Antarctica has been spared. The situation in the whole world is unpredictable, dangerous, crazy and very scary.



PHOTO: COLLECTED

Message to the public: Awareness about the pandemic is vital. Please note that the enemy is very strong and powerful and we need to be prepared fully to defeat this virus. We need to be united as one nation to win this war. Simple measures like good hand hygiene, e.g. hand washing with soap, and maintenance of public health hygiene is important to stop the spread of infection. Self-isolation is very important. Don’t go out of your house unless it is absolutely necessary and urgent. Don’t invite your relatives or friends in your house. If anyone develops symptoms at home, isolate him/her in a well-ventilated room. If the health of the affected person

deteriorates, please seek medical help or take him/her to the nearest hospital for further treatment. Strictly maintain social distancing. Avoid meetings, public gathering, crowds and mixing with others. Avoid public functions, shopping malls, bus and railway stations, sea beaches, holiday places, clubs, restaurants and gymnasium. Don’t come in close contact with others. We may have to consider isolating the elderly, especially those with significant health conditions, e.g. chest disease, diabetes, hypertension, and heart disease, for at least 2-3 months. Listen to the public health warnings and follow their recommendations. Support the elderly, vulnerable people in your area with food, medicine and necessary

Message to the doctors, nurses and healthcare workers: You have an ethical and moral responsibility to look after the sick patients with Covid-19. Protect yourself from contacting the disease. Hand washing with water and soap is a simple measure and very effective to stop spreading the virus. Avoid close contact with an infected or suspected patient, if you can. Take all the precautions before you approach an infected patient or even a suspected patient. Avoid a

they have looked on at the state agencies beating and humiliating citizens, the “undisciplined” bodies, denying them the right to live with dignity. Where are these “small punishments” for the hoarders, or for the factory owners who forced workers to continue to expose themselves to hundreds and thousands of others in crowded factories every day? Even as late as March 21, the state minister for labour declared that RMG factories would continue to operate unless the prime minister directed them to stop, ignoring warnings about the disproportionate risk garment workers were facing (*New Age*, March 22, 2020). Despite many impassioned speeches, there is still no official injunction requiring all factories to shut down, for all due wages to be paid, and no guarantee that workers will not be sacked. Meanwhile, beyond the RMG industry, the body-count has begun: when workers at a jute mill in Biral, Dinajpur came out to demand all unpaid wages (fearing a shutdown), the police responded with bullets and beatings, killing a *paan*-seller, a bystander, in the process (Jagonews24, March 26, 2020).

Just like in the aftermath of the Rana Plaza massacre, millions of taka are flowing in from everywhere without any transparent plan about how this money will be managed (such as the BGB’s 125 million donation, *Dhaka Tribune*, March 30, 2020). We demand a full disclosure of the state’s strategy to deal with this pandemic, and accountability regarding the distribution of funds. Charity will not save us. Both the state and the industrial-corporate class have deployed a narrative of common humanity to implore the affluent to help “the needy”, the same narrative that makes us believe that we can help the many without inconveniencing the few. This is an illusion; the wealth and power of the latter rest on the perpetuation of social arrangements that generate the misery and dispossession of the former. If anything, this pandemic has taught us a brutal lesson on just how much our lives are intertwined. Lockdowns and closed doors can only delay the inevitable. When the time comes, the state will have to answer for everyone who may die. Let us not make a man-made disaster look like natural selection. We are all in this together, after all.

Dr Md Salimuzzaman Bhuiyan is the General Secretary of Bangladesh Medical Society in the UK. Email: mszaman57@yahoo.co.uk