

Health minister calls for calm

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stronger than the first one in the country, more and more patients require oxygen support. The recent sliding of transmission, however, was relieved for now.

The health minister said the production of liquid oxygen in the country is about 150 tons in the private sector while gas mask oxygen production is 250 to 300 tons.

"On the contrary, daily oxygen demand in the country is 125 to 150 tons. So far Bangladesh is in a fairly good position," he added.

The minister said, "When there was no central oxygen supply, most hospitals used oxygen in the gaseous form which we have no shortage of. We have asked many hospitals which can use gaseous oxygen."

"We have planned to supply liquid oxygen by taking from different industries if needed. We already have reserved 40 tons of liquid oxygen."

He informed that the government will import small oxygen plants soon.

"There is no reason to worry about. But if the number of patients Covid-19 increases, from 7,000 to 21,000, it is not possible to tackle it. So we have to work to ensure no rise in infection rate," Zahid Maleque said.

Many countries like the United States, Europe, and India have been facing a shortage of oxygen crisis due to the increase in the number of patients.

VACCINE
About three crore doses of Oxford-AstraZeneca vaccine that the country purchased, the minister said, "Beximco, as well as the government, are trying to get those soon. But we do not know the timeline. There is a global crisis over the vaccine."

About other vaccine sources, he said, "We have green signalled the drug administration to approve vaccines which

are available now. A committee led by the Principal Secretary is working on it."

He also said, "We have provided all documents to China's Sinopharm for the five lakh doses of Covid-19 vaccine they will send as gift. Now, we're waiting for their response."

Referring to the global demand and politics over Covid-19 vaccines, the health minister said, "There is tension over vaccination. The raw material for making vaccines is in short supply in India. Ten rich countries have stocked 80 percent of the vaccines produced so far. But we are trying to get vaccines as early as possible."

'80 PERCENT INFECTION IN BIG CITIES'
The minister said if infection in big cities of the country can be controlled, the transmission will go down soon.

"We have seen that 70 to 80 percent of infections and deaths occur in cities including Dhaka, Chittagong, Rajshahi, Sylhet, and Khulna City Corporation areas. People in these areas need to be more aware and follow health safety guidelines," Zahid Maleque said.

DAILY UPDATE
Meanwhile, 78 Covid-19 patients died during the past 24 hours till 8:00am yesterday, according to a press release issued by the Directorate General of Health Services (DGHS).

With this, the total number of deaths reached 11,228 and the death rate stands at 1.49 percent.

At least 3,031 new infections were recorded in the meantime taking the total number of people infected to 751,659, added the release.

The positivity rate was 12.51 percent against a total of 24,237 tests yesterday.

At least 5,234 Covid-19 patients have recovered during the period.

Project delayed, data obsolete

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on time and before the Covid-19 pandemic hit the country in March last year, he added.

Former lead economist of World Bank Dhaka Zahid Hussain expressed similar concerns, saying the NHD may now only help implementing agencies to identify the households covered.

A major purpose of the NHD was to simplify the selection of beneficiaries for the government's various social safety net programmes targeting the ultra-poor and help avoid overlapping.

Lack of accurate, organised data to reach the poor has been a major challenge for the government, which became more evident during Covid-19, the experts said.

In July last year, a staggering two-thirds of 50 lakh poor families who were hit hard by the pandemic-induced shutdown were yet to receive Tk 2,500 each in cash support from a government fund of Tk 1,250 crore because of a flawed beneficiaries' list.

Experts noted that due to the delays, the NHD project has lost relevance significantly as the socioeconomic conditions of households countrywide have changed drastically in the pandemic, with many more "new poor" now added to the ranks of poverty.

In January, the results of a survey conducted of 5,577 households by the South Asian Network on Economic Modelling (SANEM), and Sathkhi, only 10 percent of people in these districts received benefits from programmes introduced to tackle Covid-19 induced shocks. A majority of these recipients, 68.8 percent, were first-time beneficiaries.

Currently, the project has no plans to upgrade the data, said BBS officials. It only kept an option for grievance management, where someone not identified as poor in the MIS can claim inclusion in the registry by applying to their 10-member upazila NHD verifying committee.

Another recent study jointly conducted by SANEM and ActionAid Bangladesh revealed that in Barguna, Kurigram, Rajshahi, and Sathkhi, only 10 percent of people in these districts received benefits from programmes introduced to tackle Covid-19 induced shocks.

A majority of these recipients, 68.8 percent, were first-time beneficiaries. Currently, the project has no plans to upgrade the data, said BBS officials. It only kept an option for grievance management, where someone not identified as poor in the MIS can claim inclusion in the registry by applying to their 10-member upazila NHD verifying committee.

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"Applying for inclusion to the committee will create further poverty, as many people had to bribe the local administration for inclusion in the PM's cash relief schemes during Covid-19," said Zahid Hussain.

In case of an economic shock or crisis like Covid-19, people need the money immediately and if someone has to wait for months to get included, it won't be any help because the damage is already done, he added.

Dr Selim Raihan, executive director of SANEM, said many people will be reluctant to apply for inclusion due to bureaucratic tangles and timidity.

He blamed the authorities' negligence and an inefficient bureaucratic machinery for the prolonged delay in making the final database.

"This is just another lesson for us. The Covid-19 crisis has made it clear to all that this [project] must be done on a priority basis and the responsible must be held accountable," Dr Selim said.

REASONS FOR DELAYS

There was no relevant and timely data available for the NHD project as the last BBS household income and expenditure survey was completed in 2016.

To identify households' socioeconomic status for the project, BBS' questionnaire gathered information on housing type such as the number of rooms, electricity connections, a separate dining room and kitchen, type of roof, status of toilets, source of water; appliances like a television or fridge; ownership of land and animals; any remittance received; and number of family members.

Kabedul Islam, NHD project director of BBS, said BBS was designated to collect, capture, store and analyse this household data and upload the information to an interoperable MIS, developed by DDM.

Although BBS initially wanted to opt for manual data collection procedure, the project's steering committee decided to collect data through a tablet PC, with the technical assistance of WB, he said.

BBS conducted a pilot in Rangpur and Nilphamari districts, collecting data on tablets before this became unviable due to poor internet connection in these remote districts. The piloting, however, took a year and a half.

buy vaccine jabs from China. Bangladesh is also trying to import Astrazeneca vaccine from the US, which has some 60 million shots for export.

"I don't think any vaccine will be brought home in less than two weeks," said Foreign Secretary Masud Bin Momen at the foreign minister's residence from where the minister joined the meeting.

Bangladesh also raised the Rohingya issue at the meeting. There was a tripartite mechanism involving Bangladesh, China and Myanmar on Rohingya repatriation but that was halted due to the military intervention in Myanmar.

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After the first unsuccessful attempt, the committee decided to collect data using the information collection request (ICR) method by 2018. A total of 213,264 enumerators and supervisors, directed by BBS's zonal statistical officers in every upazila and district coordinators, were given a three-day training on the data collection process.

Only after the completion of the MIS and successful uploading of the data, BBS can sign memorandums of understanding with the relevant government departments to share the poverty data, said the NHD project director.

DDM, tasked with developing the MIS, had contracted an Armenian software company Synergy International Systems.

DDM Director General Md Atiqul Islam said that Synergy didn't work for around nine months due to the pandemic, during which time there was also a communication gap with the local consultancy firm.

The DG, however, added, "We have given them the deadline to complete the whole thing before June."

The NHD project director says BBS is currently assisting the disaster management department and the contractor with the progress of the MIS.

However, according to BBS officials, the deadline is likely to be pushed again as much work remains even after the completion of the MIS.

Zahid Hussain, former WB lead economist, said "Since the data collection is done, the interoperable system can easily be done within six to 12 months. There must be accountability for the work because it is related to the poverty status of a large number of people."

He, however, added that the government could use other methods like the databases of mobile financial services organisations and Bangladesh Bank's Tk 10 account holders, to identify poor households faster and cheaper.

"If these organisations could be given certain variables -- such as the location of the households, number of family members, monthly transaction amounts, seasonality of the transactions -- and these could be analysed by the experts, it is enough to identify poorer households," he added.

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