EDITORIAL How do we keep Omicron at bay? Together.

The Paily Star FOUNDER EDITOR: LATE S. M. ALI

Scourge of the road Implement ban on threewheelers on highways

HERE was nothing wrong with how the problem was approached: First, the government banned three-wheelers on 22 major highways in August 2015 to prevent accidents. Then, in January 2017, the High Court reinforced that diktat by ordering a ban on such vehicles on all major highways of Bangladosh. But the nucleon was with

by ordering a ban on such vehicles on all major highways of Bangladesh. But the problem was with the enforcement of that prohibition. The ban has been followed more in its breach than its execution. The situation, according to a report by this daily, has now turned so bad that the number of road accidents involving three-wheelers tripled last year compared to 2020, according to the Accident Research Institute (ARI) of Bangladesh University of Engineering and Technology (Buet).

The causative factors have been well-identified, corrective measures have been recognised, and orders have gone out from time to time to the relevant people. Yet, we see a continued rise in the number of traffic accidents, because all the honest intentions of the administration flounder in the face of either lack of capability to implement the relevant rules and regulations or unwillingness to do so.

regulations or unwillingness to do so. The question is: Why? There can be nothing more disheartening, and indeed frustrating, than to hear the minister for road transport and bridges express his helplessness—and many times, too—in enforcing the ban on three-wheelers. One need not be reminded that nonimplementation of the orders of the court amounts to violation of its order.

The villain of the piece, according to the minister, are the local representatives who create obstructions in the way of implementing government orders. But imposing the authority of the government in this regard is literally a matter of life and death. Reportedly, along with the number of road accidents involving three-wheelers, the number of these vehicles has also given a quantum jump in that time.

But it is not only the authorised three-wheelers that compound the problem. The situation has been exacerbated by the appearance of contraptions of various shapes and sizes, powered by various devices that should not be seen anywhere, let alone on the roads and major highways. Are we to believe that the law of the land should be subjugated to the might of the local representatives—more so when that law has the backing of a court order?

Given the current state of road safety, one can be forgiven for questioning the seriousness of the government in addressing this issue. The sluggishness in implementing the so-called Road Transport Act is an index of the government's sincerity in this regard, as well as an indication of its helplessness against the might of the transport owners and operators who run the sector. The situation brooks no laxity. The laws and regulations should be implemented strictly and impartially. It is a question of people's lives.

How can demolished brick kilns resume operation? Was the demolition drive an eyewash, then?



A CLOSER LOOK Tasneem Tayeb is a columnist for The Daily Star. Her Twitter handle is @tasneem_tayeb

TASNEEM TAYEB

W ITH Omicron spreading rapidly across the world, Bangladesh is bracing itself for the battle against a potential third wave of the pandemic. The health minister has already stressed that the country is prepared to fight the new variant. Earlier, health authorities had issued a set of 15 soon-to-be-enforced guidelines covering screening at entry points in the country, testing, quarantine, vaccination, and public movement and gatherings.

Meanwhile, according to media reports, the government has also been able to partly reinforce healthcare infrastructure to better handle the new wave, increasing the number of Intensive Care Units (ICUs) and High Dependency Units (HDUs) dedicated for Covid-19 patients.

In addition, more than 1,000 ventilators have been provided to hospitals at the upazila level and over 130 hospitals equipped with a central oxygen system. Abul Bashar Mohammad Khurshid Alam, the DG of the Directorate General of Health Services (DGHS), has been quoted as saying that oxygen generators are being installed in around 40 hospitals across the country. The government is working on installing more oxygen generators to support rising Covid caseloads.

However, the authorities must not lose sight of the fact that in the face of a fullfledged outbreak of the new wave, these reinforcement measures might not be sufficient. Over the last few weeks, there has been a noticeable spike in Covid-19 cases, with more Omicron patients being identified every day. On Monday morning (January 10), the country recorded a 8.53 percent Covid infection rate—with 2,231 new cases registered—a jump from 6.78 percent recorded on Sunday morning. Health experts fear a further rise in cases is imminent.

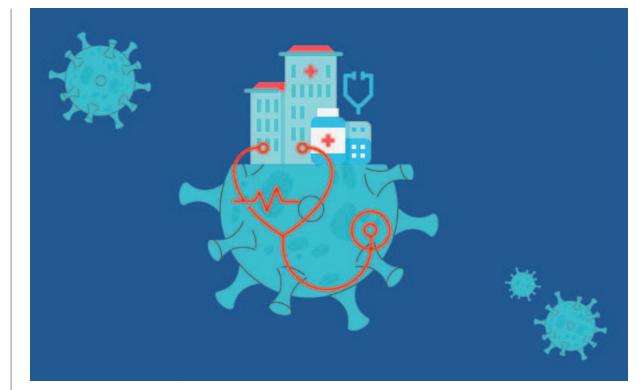
While the new measures being taken point to the farsightedness of the health authorities, including the National Technical Advisory Committee (NTAC) on Covid-19, DGHS, and other related bodies, their effectiveness would depend on how well they are enforced.

In the past, we have seen people

markets and other public spaces, often without wearing masks—the list goes on. Even while many countries, including our next-door neighbour India, struggle in the face of Covid-19 surges, the people here could not help but celebrate the

New Year or Christmas. Then there are those grand winter weddings that come with about half a dozen side events where hundreds, if not thousands, gather to other states including West Bengal and Karnataka have had to impose various other restrictive measures and weekend curfews to cope with the rapid increase in Covid cases.

In view of the current scenario, the government in Bangladesh should consider planning ahead for the worstcase scenarios, including by determining the size and scope of stimulus packages,



"bless" the brides and grooms. There are also the weekend parties with family and friends. These occasions provide the perfect breeding grounds for the Covid-19 virus. Unfortunately, these can only be contained with state-imposed curbs.

For the government, managing the crowd at airports is another sticking point, which has emerged as a major concern in recent weeks. With international flights being suspended for eight hours every day at the Dhaka airport due to on-going construction work for the third terminal, the airport authorities are under increasing pressure to accommodate the cramped flight schedules. It is only natural that the health desks and testing counters would be crowded too, and there should be strict enforcement of social distancing and testing guidelines for both in-bound and out-bound passengers to ensure their safety.

It is understandable that blanket curbs on public movement, including lockdown, are an extreme measure, with profound implications for countless people. Nonetheless, in our case, it would be worthwhile to consider the possibility of such measures in the long run, especially considering that many nations are having to resort to this to contain the new wave. In India, for instance, curfews have been imposed in Delhi and Mumbai and support mechanisms and related logistics for those who would be most affected—especially small businesses and the underprivileged segments. This will help reduce public sufferings and the likely economic backlash. Pre-planned measures are usually better implemented. And in the context of the fast-changing Covid landscape, one cannot be too careful.

Omicron is highly contagious but comparatively less severe than other variants, with lower hospitalisation rates. Therefore, it might not be as demanding on our healthcare infrastructure as the Alpha or Delta variants. But the danger still persists. And with the virus mutating constantly, we cannot risk becoming complacent. We need to be on our guard at all times so that we can anticipate the new challenges and minimise the damage of the new wave. The new set of 15 guidelines also need to be enforced at the earliest.

The general public must also take ownership of their responsibilities and do their part to keep Covid-19 at bay. The government alone is not responsible for fighting the pandemic; it is the responsibility of each and every single citizen of this country. No matter how clichéd it sounds, we are in this together, and we can only flatten the curve if we put up a united front.

ILLUSTRATION: **STAR**

T is frustrating to learn that two illegal brick kilns in Lalmonirhat Sadar upazila, demolished by the Department of Environment (DoE) in February last year, have resumed their operations in full swing. In fact, as alleged by the locals, these brick kilns actually never stopped their operations. Right after a mobile court of the department demolished them, the owners repaired them and started their operations.

The brick kilns were demolished reportedly after protests by local farmers, as their croplands were losing fertility due to the heat generated by the kilns, as well as the toxic emissions. Now that they have started running in full capacity again, the farmers fear that it will further aggravate the situation, resulting in less agricultural production.

Unfortunately, this is not the only case in which powerful businessmen have ignored directives from the authorities concerned and continued with their mindless business. In the past two years, many such closed or demolished brick kilns resumed their operations, ignoring orders from the authorities to stop them permanently. Only last year, five illegal brick kilns in Barguna district resumed their operations after being demolished by the local administration. According to reports, this has been happening in other districts, too.

The question that arises is: How can the owners of these kilns violate orders from the High Court in this regard without facing any consequences? The sincerity of the DoE as well as the local administrations in carrying out demolition drives and stopping the kilns for good also come under question.

In case of the brick kilns in Lalmonirhat, what the DoE did was partially demolishing the kilns, leaving scopes for the owners to repair those immediately and run them without much delay. Does the DoE's job end with just conducting a mobile court drive? Do they have no responsibility to monitor what happens afterwards? Would one be wrong in assuming that the demolition drive was nothing but an eyewash?

It's well known that brick kiln owners are usually powerful people, and the affected local residents and even those in the local administrations hardly raise their voices against them, fearing consequences. It is also common knowledge that, sometimes, people in the administration work as their cohorts, emboldening them to go on with their business.

We, therefore, urge the higher authorities to take immediate action against the owners of these illegal brick kilns, whose action is not only reducing our overall agricultural production, but also polluting air and ruining the surrounding environment. "escaping" quarantine from hotels; public transports running over capacity despite restrictions; people grossly flouting social distancing guidelines, roaming around and enjoying long drives even during lockdowns (including misuse of the "movement pass" introduced to control public movement), or crowding restaurants, shopping malls, kitchen at all times so that we can anticipate the new challenges and minimise the damage of the new wave.

We need to be

on our guard

PROJECT SYNDICATE Victims of the Unvaccinated



Peter Singer, professor of bioethics at Princeton University, is founder of the non-profit organisation The Life You Can Save. Copyright: Project Syndicate, 2022 www.project-syndicate.org (Exclusive to The Daily Star)

PETER SINGER

N OVAK Djokovic, the world's top-ranking tennis player, has just been granted a medical exemption to take part in the Australian Open. Djokovic, who has won the event nine times (one more victory would give him a recordbreaking 21 major titles), refused to show proof of vaccination, which is required to enter Australia. "I will not reveal my status whether I have been vaccinated or not," he told *Blic*, a Serbian daily, calling it "a private matter and an inappropriate inquiry."

The family of Dale Weeks, who died last month at the age of 78, would disagree. Weeks was a patient at a small hospital in rural Iowa, US, being treated for sepsis. The hospital sought to transfer him to a larger hospital where he could have surgery, but a surge in Covid-19 patients, almost all of them unvaccinated, meant that there were no spare beds. It took 15 days for Weeks to obtain a transfer—by then, it was too late.

Weeks became another of the many indirect victims of Covid-19—people who never had the virus, but died because others who did were taking up scarce healthcare resources, especially beds in intensive care units. His daughter said, "The thing that bothers me the most is people's selfish decision not to get vaccinated, and the failure to see how this affects a greater group of people. That's the part that's really difficult to swallow."

Last month, Rob Davidson, an emergency room physician at a hospital in Michigan, wrote an essay for the *New York Times* that provided a vivid picture of life in a hospital that had consistently been at or near capacity for several weeks. The overwhelming majority of the patients had Covid-19, and 98 percent of those needing acute critical care were unvaccinated.

What happened to Weeks was happening at Davidson's hospital, too: those in need of more specialised treatment could not be transferred to a larger facility, because nearly every hospital in the region was already full or close to it. Davidson is unable to view the choice not to get vaccinated as a private matter. "It forces patients with ruptured appendixes and broken bones to wait for hours in my emergency department; it postpones surgeries for countless other people and burns out doctors and nurses."

There has been considerable opposition to vaccine mandates—opposition that I have argued is misguided. With earlier variants, the unvaccinated are more likely to infect others. With the more contagious Omicron variant, the extent to which current vaccines reduce infection and the ability to spread the virus is less clear. But we do know that vaccination reduces the severity of the illness, and therefore the need for hospitalisation.

For the situation that Davidson described, and that Weeks' children

believe led to their father's death, a different solution is available, one that respects the decisions of those who choose not to be vaccinated, but requires them to bear the consequences of their choice. Hospitals that are at or near capacity should warn the populations they serve that, after a certain date-far enough in the future to allow ample time for people to get fully vaccinated—they will give vaccinated patients priority over unvaccinated patients with Covid-19. The unvaccinated patient, or the family of that patient, may object. But if the move is in accord with a previously announced policy, and everyone had the opportunity to be vaccinated before the policy took effect, people who make choices that are likely to harm others, and have been warned of the consequences of those choices, must take responsibility for them.

Hospitals with sufficient capacity should, of course, continue to treat unvaccinated patients with Covid-19 as best they can. Despite the extra strain this puts on hospital staff, everyone should have sufficient compassion to try to save lives. Exceptions should be made for those few patients for whom vaccination is contraindicated on medical grounds, but not for those who claim to have religious grounds for exemption.

Such a policy is likely to increase vaccination rates, which will benefit the currently unvaccinated as well as the vaccinated, and save lives—just as vaccine mandates have saved lives by increasing the number of vaccinated people. But even if the policy does not persuade more people to get vaccinated, at least fewer people would die from health conditions over which they have no control.

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