

5 rules set for importing Hindi films

STAFF CORRESPONDENT

The information and broadcasting ministry on Monday green-lighted the import of 10 Hindi films this year under certain conditions.

In a notice, it also stated that around eight more Hindi films would be imported next year.

Based on the positive response from the Ministry of Commerce, in compliance with certain conditions of the existing Import Policy Order 2021-2024, the import of films from South Asian Free Trade Area (SAFTA) countries has been granted on an experimental basis.

The conditions are: Legitimate film producers and distributors of Bangladesh will have the opportunity to import films made in sub-continental languages; films produced in sub-continental languages with subtitles shall be allowed to be imported against export, only on an experimental basis for two years; producers may import 10 foreign films against the export of 10 Bangladeshi films in the first year; imported subcontinental language films must obtain a certificate from the Bangladesh Film Censor Board, prior to screening; and films imported under this order cannot be screened during the week of Eid-ul-Fitr, Eid-ul-Azha and Durga Puja.

For the next two years, these regulations will have to be strictly adhered to in order for a sub-continental language film to be imported to Bangladesh.

At the same time, all the cinema halls where Hindi movies will be screened will have to run an e-ticketing system.

Many artistes have opposed the release of Hindi movies in the country,

Monowar Hossain Dipjol, producer and actor, said the consequences of the decision will be detrimental while giving the example of Nepal, whose film industry has been on the brink of destruction after allowing Hindi films to be released in their country.



Members of the Ukrainian White Angels Special Police Team look at debris of a residential building, destroyed following an air strike in the frontline town of Avdiivka, Donetsk region on Monday, amid the Russian invasion of Ukraine. PHOTO: AFP

50 killed in Myanmar military's attack on rebel gathering

REUTERS

At least 50 people were killed in central Myanmar yesterday in an air strike by the military on an event attended by opponents to its rule, according to media and members of a local resistance movement.

Citing residents in the Sagaing region, BBC Burmese, Radio Free Asia (RFA), and the Irrawaddy news portal reported between 50 and 100 people, including civilians, had died in the attack.

Myanmar has been in turmoil since a 2021 coup, with attacks by ethnic minority armies and resistance fighters challenging the rule of the military, which has responded with air strikes and heavy weapons, including in civilian areas.

A member of the local People's Defence Force (PDF), an anti-junta militia, told Reuters fighter jets had fired on a ceremony

held to open their local office.

"So far, the exact number of casualties is still unknown. We cannot retrieve all the bodies yet," said the PDF member, who declined to be identified.

At least 1.2 million people have been

A member of PDF said fighter jets had fired on a ceremony held to open their local office.

displaced by post-coup fighting, according to the United Nations.

Yesterday's incident could be one of the deadliest among a string of air strikes since a jet attacked a concert in October, killing at least 50 civilians, local singers and members of an armed ethnic minority group in Kachin State.

Myanmar's pro-democracy government-in-exile, the National Unity Government, condemned the attack, calling it "yet another example of (the military's) indiscriminate use of extreme force against civilians".

Last month, at least eight civilians including children were killed in an air strike on a village in northwest Myanmar, according to a human rights group, ethnic minority rebels and media.

The military has denied international allegations it has committed atrocities against civilians and says it is fighting "terrorists" determined to destabilise the country.

Western countries have imposed sanctions on the junta and its vast business network to try to choke off its revenue and access to arms from key suppliers like Russia.

Shahabuddin to take oath as president April 24

BSS, Dhaka

President-elect Md Shahabuddin is scheduled to take oath as the country's 22nd President at 11:00am on April 24.

Cabinet Secretary Mahbub Hossain yesterday apprised Jatiya Sangsad Speaker Shirin Sharmin Chaudhury of the date and time of the swearing-in ceremony.

The cabinet secretary met the Speaker at her JS office yesterday to apprise her of the matter, read a press release.

The Speaker will administer the oath.

4 killed in road crashes

STAR REPORT

Four people were killed and another was injured in three road crashes in Rangpur and Dinajpur yesterday.

Two were killed after a bus hit a battery-run three-wheeler on Rangpur-Pirganj highway in Rangpur's Pirganj.

Three-wheeler driver Mokhlesur Rahman, 50, and passenger Rezwana Islam, 16, died on the spot, said Solaiman Sheikh, officer-in-charge of Borodargah Highway Police.

In Dinajpur, a school student was killed after a truck hit his bicycle on Dinajpur-Rangpur highway near Ichhamati College in Chirirbandar upazila around 7:00am.

Proshanta Roy, 15, was a class-X student of JB High School in the upazila, said Bazlur Rashid, officer-in-charge of Chirirbandar Police Station.

Meanwhile, Kabir Hasan, 20, died on the spot after a bus rammed his motorcycle in front of Nawabganj Pilot High School in Nawabganj upazila of Dinajpur, said Ferdous Wahid, officer-in-charge of Nawabganj Police Station.

BNP will join city polls wearing veil Says Obaidul Quader

BSS, Dhaka

Awami League General Secretary Obaidul Quader yesterday said although the BNP does not directly participate in the upcoming city elections, it will participate in the polls wearing a veil, which is the hypocrisy of its politics.

"The BNP did not participate in local government elections at different levels with the party symbol (sheaf of paddy), but the party had its candidates wearing veils. Candidates wearing veils will also participate in the upcoming city polls," he said while speaking at a view-exchange meeting at the AL Bangabandhu Avenue central office in the capital.

A revolutionary's journey

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the patients were labourers, domestic workers, teachers, civil servants and beggars. It was the first time I heard that patients could get an insurance card -- for Tk 150. Insurance holders did not have to pay to see an on-duty doctor, and to see a specialist the fee was only Tk 200. The most innovative part of the insurance scheme was that it was designed to provide healthcare to people according to their ability to pay. So, for someone who was destitute, the treatment would be free, for a poor person, it would be highly subsidised, for an upper middle-class person the cost would be higher. It was hard not to be floored by the foresight of the individual behind what seemed to me, a fantasy world where poor people had access to affordable, efficient medical attention.

But that is what Zafrullah Chowdhury is -- a larger-than-life figure who had the vision to realise that it was the lack of access to affordable healthcare that condemned the poor to a life of continuous ill health. His fierce determination to break this vicious cycle led to the creation of an institution like Gonoshasthaya that has made revolutionary changes not only in healthcare but in public perception of women as vital nation builders.

When my team and I went to interview him at the hospital, I was a little taken aback by his appearance; longish white hair and clad in a batik Hawaiian shirt and khaki trousers, sandals half worn, he looked more like an eccentric artist than the founder of a mammoth development organisation. It was hard to gauge his mood as he went on his inspection of the wards, blasting the nervous staff at the top of his voice for some inefficiency and then suddenly cracking a joke to make them laugh, his hawkish eyes twinkling. His staff called him Boro Bhai, no "sir" or "doctor" for this no-nonsense man. But the respect and love he evoked among patients, paramedics, doctors and the staff, was obvious.

And when he met patients, he was extremely gentle and kind.

At present, Nagar Hospital has among other facilities, a burn and plastic surgery unit, cardiac unit, dental unit, surgery, counselling, physiotherapy, Ayurveda, Yoga and of course 24 hour emergency services.

So how did a vascular surgeon looking towards an ascending medical career in the UK end up being the founder of a multidisciplinary organisation in his home country that would be committed to the welfare of the poor and marginalised? The Liberation War of 1971 changed the trajectory of his life. He and his

friend Dr MA Mobin left their studies in London to join the resistance by treating wounded freedom fighters. It was pure patriotism that laid the foundation for Gonoshasthaya Kendra. Zafrullah and his fellow doctors set up a 480-bed field hospital near the border with India to treat the wounded and sick. The young surgeon realised that while there were doctors in this hospital, the facility didn't have any nurses. So girls and young women in the refugee camps were invited to learn first aid and assist in operations.

"I realised that it was not the amount of training that was important in this context but the access to training," he said during the interview. When the war was over, the Field Hospital was renamed Gonoshasthaya Kendra (GK) which relocated to Savar with sub centres in surrounding areas and other districts. From his experience at the Field Hospital, Zafrullah knew how he could build a team of paramedics. GK started training girls and women who had completed their SSC (Secondary School Certificate). Soon it was a common sight to see these young women in the villages, going on foot or bicycle to visit households, telling them about basic healthcare, sometimes giving vaccines, even assisting in deliveries. The presence of these female paramedics gave women a new status. Villagers began to realise their importance and appreciate their work. GK's involvement with the community had a major role in the success of national family planning, immunisation and ORS campaigns.

Gonoshasthaya Kendra (GK), which is a multidimensional development programme, involves the community as a whole. It includes projects ranging from primary healthcare centres and hospitals, community schools, agricultural cooperatives, women's vocational training centres, training women drivers, to economic enterprises to help finance GK Trust activities. But GK's most obvious success is its primary healthcare programme (mainly in the villages) that benefits over a million people.

GK has proved that primary healthcare can be a successful, sustainable system. In 1982, GK's pioneering effort in forming a National Drugs Policy allowed local companies to produce essential drugs at much lower prices than multinationals did. GK itself produces essential drugs at subsidised prices. GK's Gono Bishwabidyalaya (People's University) trains doctors, paramedics and physiotherapists who will provide primary and tertiary care to poor communities.

The accolades he has received are many. Among them are a 'Certificate of

Commendation' for his contributions during the Liberation War in 1971, the Swedish Youth Peace Prize, Sweden for founding Gonoshasthaya Kendra providing primary healthcare to rural communities, Maulana Bhashani Award, Ramon Magsaysay Award, The Right to Livelihood Award, Sweden, One World Action Award, UK, Public health Heroes Award, UK, Fr.Tong Memorial Award, India, Doctor of Humanitarian Sciences Award, Canada.

His undeterred commitment to the welfare of the disadvantaged was probably because of his unconventional upbringing. His mother, Hasina Begum, a courageous, self-educated woman, who believed in the equal rights of women and men, taught him the value of sharing with the less fortunate. His father, Humayan Murshed Chowdhury, was an honest police officer and instilled in him love for one's motherland. Zafrullah found his perfect match in his life partner Shireen Huq, a professor of English, a passionate human rights activist and one of the founders of Naripokkho, a women's rights organisation. Their children are Brishti and Bareesh.

The basic philosophy that Zafrullah modelled all his endeavours on was to come up with indigenous solutions for all problems. Thus Gonoshasthaya's mission was to 'go to the village and build the village'. The GK Savar hospital serves the community and provides all the medical services as well as alternative medical treatment such as ayurveda and acupuncture.

In fact, he has been unequivocally, an advocate of local medical expertise. In 2019, GK inaugurated its second dialysis centre in the Savar hospital, the largest such centre in the country. During the pandemic, he tried to popularise a locally made antigen testing kit and was ready to help set up a 2,000 bed Covid hospital which did not receive the support it warranted during the most challenging moments of the crisis. For his own treatments which included regular dialysis he would come to his hospital even when he was on life support. There are few individuals who can display such conviction of their own principles.

Considered at times a controversial figure for his incendiary remarks in public, he remained unapologetic and brutally frank all throughout, a fighter till the end. Battling with formidable ailments, waging a war against crippling poverty and ill health of people, to bring some solace to the most vulnerable and neglected, his contributions to this country cannot be listed within the confines of this article.

[Some information has been taken from Star Weekend Magazine, published on November 30, 2007]

On course to meet

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reform implementation, Rahul Anand, the IMF mission chief, told The Daily Star.

"The authorities are taking steps to meet programme objectives, such as reducing un-targeted subsidies by raising electricity and natural gas prices and gradually moving toward a unified market-determined exchange rate. Further, increasing exchange rate flexibility and strengthening the foreign exchange reserve management framework will enhance external resilience," he added.

An IMF staff team will visit Bangladesh from April 25 to May 2 to discuss recent economic developments and policy implementation under the IMF-supported programme, an IMF spokesperson told The Daily Star.

To this end, March's performance will lend the IMF staff team an indication of how the authorities are faring with the programme objectives. "We will be close to the March's floor for net reserves," Md. Mezbaul Haque, BB's spokesman, told The Daily Star.

NIR is calculated as gross international reserves minus short-term foreign currency drains. Short-term foreign currency drains include impending import bills and loan repayments.

As of March, gross international reserves (GIR) stand at \$31.14 billion, according to data from the BB.

But going by the IMF's balance of

payments and investment position manual (BPM6), which is followed faithfully by central banks around the world, GIR calculation does not include the various funds that the Bangladesh Bank has formed from the reserves as well as the loan guarantees provided for Biman, the currency swap with Sri Lanka, the loan to Payra Port Authority, deposits with the Islamic Development Bank and the below-investment-grade securities.

At present, these account for about \$6.9 billion.

So Bangladesh's GIR at the end of March was about \$24 billion, Haque added.

Another target for March is keeping the primary balance within Tk 148,340 crore.

For programme monitoring purposes, the primary balance is defined as the overall balance of the government excluding interest payments and including foreign grants.

As of December last year, the overall balance stood at Tk 10,166 crore.

By March, the government needs to collect at least Tk 207,380 crore in tax, as per the IMF's task sheet for Bangladesh.

As of February, the National Board of Revenue has collected Tk 196,037.5 crore. The non-NBR tax collection stands at Tk 3,563 crore in the first half of fiscal 2022-23, according to data from the finance ministry.

Medical College in 1964 and went to London to study FRCS. When the four-year FRCS course was about to be completed, the Liberation War broke out in Bangladesh.

He chose to abort the exams and dedicated himself in mobilising the people for the independence of the nation, setting an example of unparalleled patriotism.

Zafrullah also tore apart the Pakistani passport during a rally in London, protesting the massacre of Bangladeshis by the Pakistan occupation army. In May 1971, without any passport, Zafrullah and Dr MA Mobin decided to fly to Kolkata.

They collected travel permits and started for Kolkata on a Syrian Airlines flight. Damascus was their stopover. The Pakistan government was watching their every step and tried to arrest them with the help of the Syrian government.

All the passengers left the aircraft. However, sensing the danger, the duo did not move as they knew the police cannot arrest anyone from an international flight.

At the end of May, they reached Agartola. There, he built Bangladesh

Data on collections up to March is not available yet, but from the trends in NBR and non-NBR receipts, it is safe to infer that March's target would be met comfortably.

At the end of March, reserve money, which comprises currency in circulation issued by the BB and deposits banks hold with the central bank, cannot be more than Tk 357,500 crore.

As of February, reserve money stood at Tk 350,346.90 crore, according to data from BB.

There is a floor on development capital investment undertaken by the government, which would be monitored by the annual development programme.

By March, the expenditure must be at least Tk 38,990 crore.

As of February, Tk 82,170 crore has been spent under the ADP, according to data from the planning ministry.

There is also a minimum level of priority social spending stipulated by the Washington-based multilateral lender.

For programme monitoring purposes, priority social spending comprises all expenditures on education, health and social safety nets.

The minimum spend for this must be Tk 60,500 crore in the first nine months of the fiscal year. Data for this could not be obtained.

Field Hospital, which primarily took shape in Bisramganj village of Agartola, India.

It was the seed of Gonoshasthaya Kendra, which would revolutionise the public health sector after independence.

During the war, freedom fighters wounded in battle were treated in that field hospital -- a structure made of bamboo and grass that had 480 beds and an operation theatre.

Zafrullah and Mobin provided paramedical training to a group of volunteers who worked as nurses for the hospital.

In a heavily conservative society, Zafrullah took the challenge to break the stereotype by empowering women and engaging them in his workforce.

The total number of staffers at the Gonoshasthaya Kendra is now around 2,500. Of them, 40 percent are women.

Zafrullah's most remarkable contribution after the Liberation War was formulating the drug policy that served as a cornerstone of today's robust pharmaceutical industry.