

Victims of a rotten healthcare system



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NAZNIN TITHI

The tragic death of an expectant mother and her newborn baby at a hospital in Dhaka due to medical negligence has yet again brought to the fore the ills that seem to have gripped our entire healthcare system. Reportedly, Mahbuba Akter Akhi, a 25-year-old pregnant woman, got admitted to the Central Hospital on June 9 with the hope of having a normal delivery. However, she ended up going through a botched C-section, following which both the baby and the mother died – while the baby passed away a day after the surgery, the mother lost her life eight days later.

Reportedly, Akhi was being advised by gynaecologist Dr Sangjukta Saha of the hospital for the past three months. On the night of June 9, she came to Dhaka from Cumilla with her husband Yakub Ali and was admitted to the hospital under Dr Saha. However, when the couple looked for Dr Saha, the hospital authorities lied to them about her absence. She was not there in the labour room where Akhi was trying to have a normal delivery. Instead, there were other doctors and staff trying to assist her throughout the process. As things got complicated (we still do not know what exactly went wrong), they conducted a C-section surgery, following which the tragedy happened.

The heart-wrenching incident has been in discussion in the media and social circles for quite some time now. While people are still debating as to who actually is responsible for the deaths of Akhi and her newborn – her supervising doctor or the hospital authorities – I would like to focus on a different aspect of the incident that has been missing in this discussion. Why could Akhi not have a normal delivery, which she wanted? There are many questions crowding my mind: what complications did Akhi have while trying for a natural birth that the doctors had to go for a C-section? Did the doctors and nurses present there have the necessary knowledge

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and training to assist a natural birth? Did the hospital appoint any trained midwife to assist Akhi? What was the reason for Akhi's excessive bleeding after childbirth? Did Akhi die from the C-section surgery or the flawed normal delivery attempt? Asking these questions is crucial to understanding why such a tragedy happened at a renowned hospital.

One of my relatives was recently

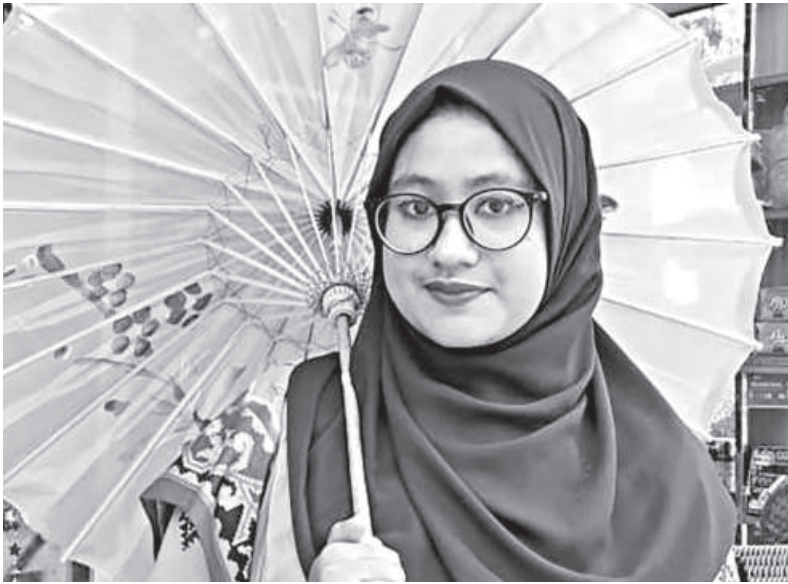
admitted to a reputed private hospital in Dhaka with the hopes of having a normal delivery, but ended up having a C-section surgery. She shared with me her traumatising experience in the labour room, where nothing seemed to go as per her plan. Although she wanted to wait for her labour to start on its own, the nurses present there hurriedly gave her pain medication through an IV to induce labour. This was despite the fact that she wasn't past her due date and both she and the baby were in good condition. While the doctors could have explained why they did what they did, the sad fact is that she had a feeling that not everything was going the right way. She eventually had to go through a C-section while in labour.

Unfortunately, this is not an isolated incident. Ask any woman who went to have a natural birth at any private hospital in the capital, and she will tell you about her terrifying experience in the labour room and the constant pressure from the attending nurses and staff to opt for a C-section

facilities. The second reason is the absence of professional midwives in these hospitals who have the skills to conduct normal deliveries.

Unfortunately, while normal deliveries are always conducted by professional midwives in other countries, in Bangladesh, patients are dependent on their gynaecologists and obstetricians, who mostly perform C-section surgeries. It is not at all surprising because doctors are not supposed to conduct normal deliveries; they should only come forward when anything goes wrong with the natural birth process. However, there are a few doctors in our private hospitals who encourage their patients to go for normal deliveries. But the question is, do they have trained midwives in the hospitals to assist such deliveries? If not, why? If there were trained midwives in the labour room of Central Hospital, the doctors might not have to go for a C-section operation, and Akhi and her newborn baby's lives might have been saved.

The question that further bothers me is, if normal deliveries can be conducted regularly in our upazila health complexes, why can't that happen in our private hospitals? Why can't all our hospitals have a team of skilled midwives to conduct such deliveries? Akhi and her newborn's deaths have exposed the misguided approach that our private hospitals



Mahbuba Akter Akhi

PHOTO: COLLECTED

instead. Talking to a few new mothers recently, I came to know that doctors and nurses in the labour rooms do not provide any suggestions for pain relief during labour – which is an integral part of the natural birth process in developed countries. They hardly care about the mental well-being of the expectant mothers. Use of birthing chairs, birthing balls or any other tools to assist the expectant mothers is absent here. When my relative asked her gynaecologist whether she needed to do any kind of physical exercise prior to her delivery since she wanted a natural birth, the doctor showed no interest in the conversation.

Why is the system in our reputed private hospitals so inefficient when it comes to performing normal deliveries? Why can't they create a system maintaining the international standards? What I understand with my limited knowledge about the issue is that there could be two reasons. First, our private hospitals are profit-oriented and do not want to invest so much time into natural births when C-sections take much less time and bring more profit. Currently, 84 percent of C-sections performed in the country are done in private healthcare

have taken regarding childbirth, normal deliveries, and C-sections. The time has come now to question these malpractices and demand the much-needed reforms in our healthcare system.

Since Akhi's husband filed a case immediately after his baby's death, we saw some action being taken by police. Our health authorities also took some measures, such as shutting down the operation theatre and intensive care unit of the hospital, directing Akhi's supervising doctor to refrain from providing service at that hospital until further notice, etc. But given the severity of the incident, these steps are not enough. The DGHS must dig deep into the incident and find out the real reasons behind what happened, following which the state should take legal actions against those responsible. The Bangladesh Medical and Dental Council should also play its part now that Akhi's husband has filed a complaint with it, accusing the authorities of Central Hospital and Dr Sangjukta Saha and seeking justice for the deaths of his wife and newborn. Only by holding those responsible to account can such crimes of medical negligence be prevented.

All you need to know about the new Income Tax Act

Taukir Aziz
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TAUKIR AZIZ

The new Income Tax Act, 2023 was passed in parliament last week, and it is going to create quite a stir in the coming days. This is the first complete overhaul since the Income Tax Ordinance, 1984. There are many changes for individuals, companies, and even start-ups. Some rules will be straightforward, while some will leave room for multiple interpretations, settling on a consensus over time. Here, we will go over the key changes that you have to keep in mind while filing your income tax.

Tax exemption on salary

Previously, three separate exemptions on salary existed: medical Allowance up to Tk 120,000; house rent Allowance up to Tk 300,000; and conveyance allowance up to Tk 30,000. Now, these allowances are consolidated into a single tax exemption of up to Tk 450,000, based on the lesser of Tk 450,000 or one-third of the annual salary. The remaining amount after deducting this exemption is considered as taxable income.

The tax slab has been slightly increased. Previously, the first slab with zero percent tax was Tk 0-300,000. Now, it is Tk

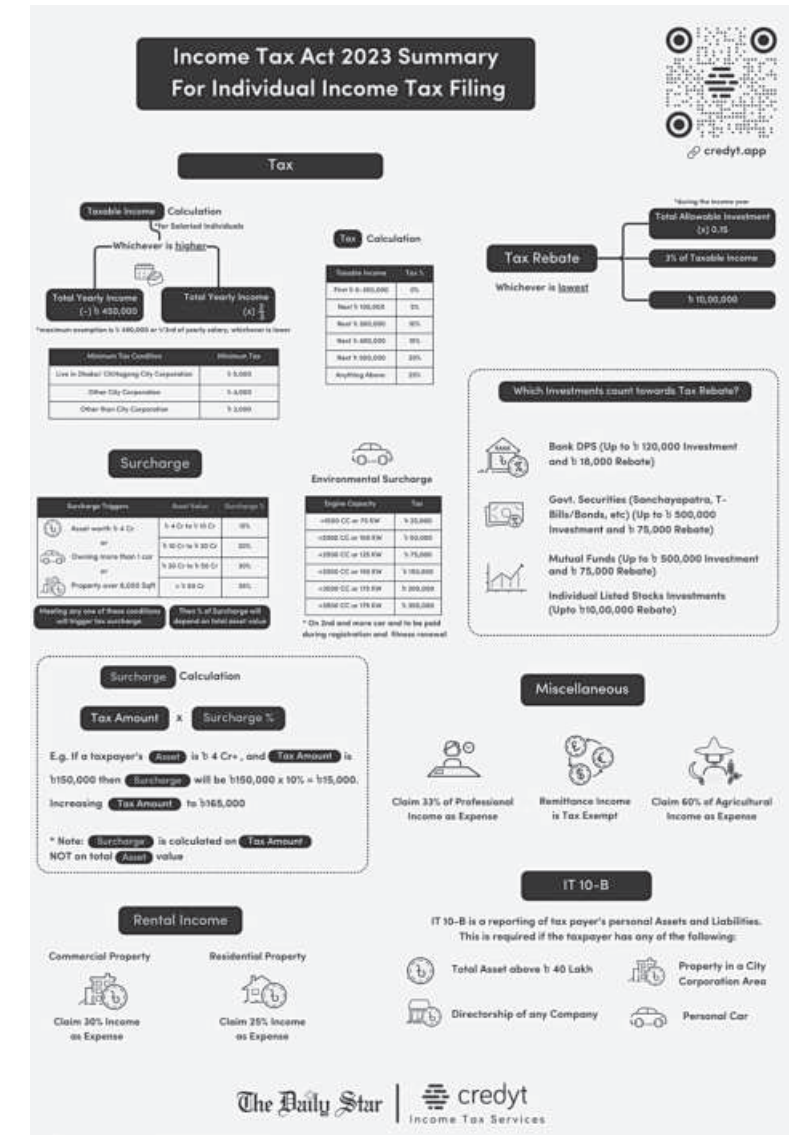
The tax slab has been slightly increased. Previously, the first slab with zero percent tax was Tk 0-300,000. Now, it is Tk 0-350,000. This change, all else being equal, is expected to decrease an individual's annual tax liability by approximately Tk 2,500-12,500. Women, the elderly, and gazetted freedom fighters have even higher zero percent tax slabs, leading to additional tax savings.

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No minimum tax

The government recently introduced a significant measure to boost tax collection, imposing a minimum tax of Tk 2,000 on all e-TIN holders. The aim was to encourage e-TIN holders to file taxes, as currently, less than one-third of them do so. However, the government has since retracted this decision and eliminated the Tk 2,000 minimum tax, avoiding further debate on its fairness.

In addition, the minimum tax of Tk 5,000 will remain in effect for individuals in the Dhaka and Chattogram city corporation areas if their taxable income exceeds the first slab (Tk 350,000). For individuals in other city corporations, the minimum tax



amount is Tk 4,000. For non-city corporation areas, it is Tk 3,000.

Tax rebate

The government has made a significant change by putting a ceiling of Tk 500,000 for investments in *Sanchayapatra* and other government securities for allowable investments that provide tax credits. Mutual funds now have an investment ceiling of Tk 500,000, allowing a maximum rebate of Tk 75,000 from open-ended mutual. The rebate benefit for DPS has been doubled, with an investment ceiling of Tk 120,000 and a rebate of Tk 18,000. While mutual funds have a limit, counterintuitively there is no investment ceiling for listed company stocks, allowing investors to potentially receive higher rebates by directly investing in stocks that perform well in the market. Multiple rebate sources can be combined until reaching the overall ceiling of Tk 10 lakh. Some other avenues for tax rebates include insurance premiums and provident funds. In the case of life insurance, it is equal to the premium paid during the year or 10 percent of the insured amount – whichever is lower.

One very interesting thing that is not getting much press is the removal of tax exemption on dividend income from mutual funds and stocks. Previously, the first Tk 25,000 dividend income from open-ended mutual funds was tax exempted. So was the first Tk 50,000 dividend income from listed stocks. Starting now, these will be fully taxable.

Tax surcharge

Tax surcharge is levied on total tax liability. But the percentage point is decided on one's net asset value. It is crucial to remember that tax surcharge is not calculated as a percentage of total assets. In general, the net asset limit for surcharge has been raised to Tk 4 crore from Tk 3 crore.

Tax on cars

The Advance Income Tax (AIT) on

cars remains unchanged. However, a new environmental surcharge is applicable if an individual owns multiple cars. The surcharge is equivalent to the AIT and is imposed on the car(s) with the highest cubic capacity (CC). Additionally, a CC-KW equivalent has been introduced to accommodate electric cars, a timely decision.

Reporting assets and liabilities

Assets and liabilities are disclosed in a form called IT 10-B, which is often the most challenging part of filing taxes. Unlike income, expenses, and rebates, which pertain to a specific income year, IT 10-B is a comprehensive balance sheet representing a person's assets and liabilities since they began filing income tax. Mistakes made in one year carry forward, causing future complications. Previously, the form was mandatory for individuals meeting any of the following conditions: 1) total assets exceeding Tk 40 lakh; 2) ownership of property in a city corporation area; 3) ownership of a car; or 4) shareholding director of any company. It is crucial for taxpayers to carefully review their IT 10-B and address any past issues. Furthermore, starting this year, the government has the authority to audit tax files from previous years, as the statute of limitation has been extended beyond the previous six-year limit.

In conclusion, the new tax code is likely to elicit mixed reactions initially. However, as time passes and the uncertainties are resolved, a consensus will emerge, enabling a fair assessment of its effectiveness in achieving its intended goals. With patience and adaptability, we can navigate these changes and optimise our tax planning strategies.

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শেখ হাসিনার মূলনীতি
গ্রাম শহরের উন্নতি

Date: 25-06-2023

Memo No. 46.02.6100.000.07.002.22-2616

e-Tender Notice: 01/2023-24

e-Tender is invited in the National e-GP System Portal (<http://www.eprocure.gov.bd>) for the Procurement of

No.	Package No. & scheme name	Tender ID	Last selling date & time	Closing/opening date & time	Tendering method
1	2	3	4	5	6
1	e-Tender/LGED/MYM/GOBM/23-24/W-01 Rehabilitation of Tarakanda GC-Shyamgoni GC Road Ch. 00-3500m under Tarakanda Upazila, District: Mymensingh [Road ID: 361182008]	850461	Date: 20-Jul-2023 Time: 13:00	Date: 20-Jul-2023 Time: 14:00	OTM
2	e-Tender/LGED/MYM/GOBM/23-24/W-02 Rehabilitation of Tarakanda GC-Shyamgoni GC Road Ch. 00-3500m under Tarakanda Upazila, District: Mymensingh [Road ID: 361182008]	850462	Date: 20-Jul-2023 Time: 13:00	Date: 20-Jul-2023 Time: 14:00	OTM
3	e-Tender/LGED/MYM/GOBM/23-24/W-03 Rehabilitation of Tarakanda GC-Shyamgoni GC Road Ch. 7000-10300m under Tarakanda Upazila, District: Mymensingh [Road ID: 361182008]	850463	Date: 20-Jul-2023 Time: 13:00	Date: 20-Jul-2023 Time: 14:00	OTM

This is an online tender, where only e-Tender will be accepted in the National e-GP Portal and no offline/hard copies will be accepted. To submit e-Tender registration in the National e-GP System Portal (<http://www.eprocure.gov.bd>) is required. The e-Tender security submitted last date & time from the National e-GP System Portal have to be deposited online through any registered banks branches respectively. Further information and guidelines are available in the National e-GP System Portal and from e-GP help desk (helpdesk@eprocure.gov.bd) also from E-mail: xen.mymensingh@lged.gov.bd or Call to 02-996664365. Interested persons can communicate with the undersigned during office hours.

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শেখ হাসিনার মূলনীতি
গ্রাম শহরের উন্নতি

Date: 25/06/2023.

Memo No. 46.02.8100.000.07.183.23.2381

e-Tender Notice No: 01/2023-24

e-Tender is invited in the National e-GP System Portal (<http://www.eprocure.gov.bd>) for the procurement of the below Package.

SI No.	Tender Packages No. & Tender ID No.	Description of Works	Tender Documents Last Selling Date & Time	Tender Closing & Opening Date & Time	Tender Method
1	2	3	4	5	6
01.	e-Tender/LGED/Raj/GOBM/23-24/W-05 Tender ID No. 847055	Rehabilitation of Bazarpur Trimohoni R&H – Kaliganj Hat Road from Ch. 00m – 4000m, Road ID No. 181532002 under Mohanpur Upazila, District: Rajshahi.	16-07-2023 Time: 16:00	17-07-2023 Time: 12:00	OTM

This is an online tender, where only e-Tender will be accepted in the National e-GP Portal and no offline/hard copies will be accepted.

To submit e-Tender, registration in the National e-GP System Portal (<http://www.eprocure.gov.bd>) is required.

Further information and guidelines are available in the National e-GP System Portal and from help desk (helpdesk@eprocure.gov.bd).

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