



MY DHAKA

Who cares for our aging parents?

RBR

I once watched a documentary series featuring abandoned widows of the Hindu sect seeking refuge in Varanasi, India. A video clip from the series shows a woman in her late seventies saying, "I find it ironic that a mother can take care of 10 children, but 10 of them cannot take care of one mother."

This realisation resonated strongly with me. She listlessly uttered the most tragic truth of her life and casually put the spotlight on the need for a recognised care economy in city lives. At this point in time, I am looking for one for my own loved ones.

This is a familiar and common story for us, who now need to take care of the person who helped raise us. The roles are reversed and our aging parents are now like our own children.

Health issues leading to fatal catastrophes, unnoticed or misunderstood mental health changes, and becoming financially dependent on us, their children, plague their minds. These are the unkindest dependencies to adjust to.

You do not realise when your mother's grip on your hand slips and you hold her hand instead. This shift is very crucial. I strongly believe if you cannot commit yourself to this responsibility, then you find a better



solution to aid you in taking care of your ailing parents.

In Dhaka, there are plenty of caregiver services and agencies catering to this urgency to provide trusted, trained professionals and systematic plans tailored to your needs.

Enterprises such as Life Nursing Care; DHCL - Nursing Services & Home Care Services for Elderly & Patients; No Chinta Limited; AYAT Care and Maisha Care Ltd started to acknowledge the growing need for certified home caregiver support systems, particularly for the elderly when you cannot manage time to

monitor their everyday medical routines.

"Services like feeding, bathing, diaper changing, medication management, dressing, toileting, maintaining their hygiene, keeping them happy with an engaging activity, but most importantly respecting their dignity is something these organisations offer. They also have 24-hour services, and respite care services, which means when you tire out, they take on your caregiving duties. The permutation and combination are such that they provide comprehensive support that is suitable for your unique requirements," says Rahima Begum, a busy homemaker, who availed such

services in Dhaka.

"I need such a trusted professional caregiver or companion for my loved ones. Someone who would watch old Uttam Kumar movies with them or take them out for a walk in the park, and on a serious note, call for doctors when any emergencies arise or administer the SOS drug when I am not around," says Imtiaz Ali, who is an event planner and has erratic working hours.

There are many of us like Rahima and Imtiaz. We need caregiving assistance for our mothers who need palliative care, for fathers who fell in a bathroom and broke their back, for mothers-in-law who require tube feeding, or for cases where the mother is active and exuberant, but one does not have time to sit with her for chats over tea; all these situations, small or big, are harsh realities for us.

In my opinion, there is no harm in hiring professionals to care for the aging when you cannot give your 100 percent. In Dhaka, working couples prefer a nuclear family structure. The reasons can be either they do not live in the same cities as their parents, or live separately to not crowd their parent's homes. But at the end of the day, they feel guilty for not being able to give their parents quality time.

Thus, all paid and unpaid activities that provide care and support to children, the elderly, and those with disabilities make up the crucial care economy that is booming in Dhaka. And if we ignore the minor changes in them, if we do not give full attention to major issues, then we pay a high price for our indifference.



PHOTO: STAR

Drone shot down near Iraqi airport hosting US troops

AFP, Arbil

A drone was intercepted late on Thursday near Arbil airport, which houses US-led anti-jihadist coalition troops in Iraq's autonomous Kurdistan region, Kurdish security forces said.

"At 21:58 (1858 GMT) an explosive-packed drone was downed near Arbil International Airport, without causing casualties or damage," said the counterterrorism services of the Kurdistan region.

Arbil airport, which includes a military base of the international anti-jihadist coalition, was a frequent target in previous years for rocket and drone attacks.

A US defence official told AFP "we are aware of an explosion from a UAV that occurred outside of the airbase in Arbil", adding that the "incident is under investigation".

"All US personnel are accounted for and there were no injuries or damage to the base or US assets in the area," he said.

Rice, veggies, fish get pricier

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Bazar, Farmgate, Mirpur 11, Shewrapara, and Mohammadpur Krishi Market, similar prices were found.

Muhammad Sumon, manager of a boiler house in Karwan Bazar, said, "After Eid, the price of Sonali chicken went up by Tk 50-60 per kg. But now it has come down by Tk 10 per kg."

He said broiler chicken still sells for Tk 150 to Tk 170 per kg, and local chicken remains at Tk 580 to Tk 600 per kg.

Fish prices have also gone up, said Shukur Ali, a fish trader in Karwan Bazar.

"Hilsa now costs Tk 2,400 to Tk 2,500 per kg, which is Tk 100 more than last week."

Shrimp prices range between Tk 800 and Tk 1,200 per kg. Before Eid, it was Tk 700 to Tk 1,200 per kg. Other fish like Rohu, Katla, Sperata aor, small local fish, and Pangas have increased by Tk 20 to Tk 50 per kg after Eid.

Vegetable prices have remained high after Eid. Potatoes now sell at Tk 25 per kg, up from Tk 20 before Eid. Local onion prices remain the same at Tk 55 to Tk 60 per kg.

Vegetables like yardlong beans, ridge gourds, bitter melons, pointed gourds, okra, and brinjals are selling for Tk 40 to Tk 80 per kg. These are Tk 10 to Tk 20 higher than usual, and the prices are not dropping.

The price of eggs has slightly decreased. A dozen eggs now cost between Tk 110 and Tk 130, down from Tk 115 to Tk 130 last week.

ADB to provide \$1b in budget support

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identify impaired assets and ensure regulatory and provisioning compliance.

The central bank will also submit the Ordinance for the Bankruptcy (Amendment) Act, 2024, for approval to strengthen the insolvency process.

It will finalise the framework of a financial stability fund for emergency recapitalisation of banks that breach capital adequacy requirements. The BB will ensure its implementation, while the finance ministry will provide the agreed initial corpus to operationalise the stability fund.

"Bangladesh Bank is currently assessing the required amount to create the stability fund," said an official with knowledge of the matter.

According to finance ministry officials, the government has already earmarked an allocation for the stability fund in the current fiscal year's budget.

The ADB, alongside the International Monetary Fund and the World Bank, is supporting Bangladesh's banking sector reforms. Among them, the ADB is one of the lead development partners helping

advance critical changes to strengthen the country's financial sector.

"Key reforms supported by ADB include the completion of comprehensive asset quality reviews (AQRs) of key banks," the ADB report said, noting the reviews were funded through its technical assistance.

As of May, AQRs for six systemically important banks had been completed. The reviews applied standardised templates and methodologies to ensure consistency across institutions.

"ADB's work in completing AQRs will serve as a diagnostic foundation for correctly sequenced, evidence-based reforms on recapitalisation, resolution planning, and broader financial stability reforms leading to improved governance, increased market confidence and a more resilient banking sector in the next five years," the report added.

In a major consolidation effort, the BB has initiated the merger of five Islamic banks into a single entity following AQRs conducted by global audit firms. Reviews are also underway for 11 other stressed banks.

The legislative measures under the ADB's loan programme include

submitting the Ordinance for the Negotiable Instruments (Amendment) Act, 2024, to strengthen legal recourse against dishonoured cheques and failed loan recoveries. The BB will also propose the Ordinance for the Money Laundering (Amendment) Act, 2003 to improve loan recovery processes.

Additionally, the BB will issue an executive order to establish asset management companies responsible for managing and recovering troubled loan assets. The government is expected to operationalise these companies as part of efforts to resolve non-performing assets.

The ADB anticipates that these reforms will lead to a more stable banking sector, improving access to finance -- especially for small and medium-sized enterprises (SMEs).

"An improved and stable banking system with strong governance and gradual adherence to international norms will be able to channel funds to the desired segments of the economy, including SMEs," the report said.

"A stronger banking system will be conducive to enable higher access to finance to the private sector of the country," it added.

Life-saving care hampered

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Narayanganj, Sherpur, Tangail, Jashore, Sunamganj, Chuadanga, Bagerhat and Madaripur.

Similar ICUs were also established in Shaheed Suhrawardy Medical College Hospital in Dhaka, and nine medical colleges in Khulna, Dinajpur, Barishal, Sylhet, Faridpur, Tangail, Manikganj, Bogura and Cumilla.

Moreover, five-bed ICUs were set up at the Infectious Diseases Hospital in Dhaka and Bangladesh Institute of Tropical and Infectious Diseases in Chattogram.

The Daily Star spoke with the authorities at 11 of the hospitals and found that at least four couldn't launch ICU services due to a manpower shortage and other infrastructural problems. They are 250-bed Jashore General Hospital, Manikganj Medical College Hospital, Tangail Medical College Hospital and Dinajpur Medical College Hospital.

Six of the hospitals are providing ICU services partially. They are Gopalganj General Hospital; Noakhali General Hospital; Cumilla General Hospital; Cumilla Medical College Hospital; Sher-e-Bangla Medical College Hospital in Barishal; and the Infectious Diseases Hospital in Dhaka.

"We somehow have kept the ICU functional... But it's not functioning properly," said Jibitesh Biswas, superintendent of Gopalganj General Hospital.

In January this year, Munshiganj General Hospital suspended its ICU services due to a manpower crisis.

"We now refer patients requiring life-saving care to hospitals in Dhaka," Ahmed Kabir, superintendent of the hospital, told this correspondent.

DGHS and project officials said the ICUs at 14 other hospitals were also non-functional or partially operational.

THE ERPP PROJECT

The government launched the project in April, 2020, a month after Covid-19 hit the country, with an allocation of Tk 1,127.51 crore to prop up the country's health system in response to the pandemic.

Following a revision in January, 2021, the cost of the project, largely funded by the WB, rose to Tk 6,786.58 crore as several components were incorporated into it. However, the cost was revised down to Tk 6,386.64 crore after another revision in July, 2023.

The government initially hired 393 health workers under the project. Later, the workforce was expanded to 1,154, including medical officers, nurses, and technologists.

As their job contracts expired in December last year, Directorate General of Health Services (DGHS) officials verbally requested them to continue working, assuring that salaries would be paid later -- a request many complied with, according to DGHS sources.

However, in late May, DGHS officials asked them to discontinue their services.

Seeking anonymity, a DGHS official said that though disruption in ICU services began in January, some hospitals kept providing life-saving



A group of students from Khulna University formed a human chain in the city on July 5, 2024, protesting the reinstatement of quota system in government recruitment.

FILE PHOTO

crush these movements through repression. Jonayed Saki, chief coordinator of GonoSonghoti Andolon, declares, "The government has entered a death game. It is killing people, abducting dissenters, and destroying the country, yet it refuses to relinquish power."

Saki affirms that the student

suppress protests on campuses, but insists that these tactics cannot defeat the collective uprising.

As the day ends, it is clear that the July uprising is spreading its roots deeper into the country's political landscape -- transforming into a broader movement for democracy, accountability, and fairness.

CU teacher's promotion suspended in face of student protest

STAFF CORRESPONDENT, Ctg

Chittagong University authorities yesterday suspended the promotion process of a Sanskrit professor in the face of a student protest on campus.

Dr Kushal Baran Chakraborty, an assistant professor at the Sanskrit department, was being considered for a promotion to the post of associate professor.

As part of the process, he was supposed to be interviewed by a university board at the vice chancellor's office at 3:00pm yesterday.

Before the scheduled meeting, a group of students, opposing his promotion, locked the main entrance of the administrative building.

They alleged that the teacher was an accused in an attempted murder case and an accomplice of the previous fascist regime.

Ashiqur Rahman, a leader of the Students Against Discrimination, claimed that they were protesting the administration's decision to

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Fear grips Cumilla village after mob kills 3

OUR CORRESPONDENT, Cumilla

A day after a mob killed three members of a family in Karaibari of Cumilla's Muradnagar, accusing them of being involved in drug trading, the village yesterday took a deserted look.

Locals said most male residents have fled, fearing arrest. Most of the shops in the village also remained shut.

An auto rickshaw driver said, "I did not get any passengers today. Men have fled the village, and even women are staying inside their homes."

A local youth Moshiur Rahman told this correspondent that most adult males have left the village, and a sense of fear is prevailing in the area after the killings.

Acknowledging the situation, Mahfuzur Rahman, officer-in-charge of Bangrabazar Police Station, said police had to bring a gravedigger from Muradnagar Sadar to bury the victims.

Additional police forces have been deployed in the area, said law enforcers.

Talking to The Daily Star, at least two people

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care by deputing staff from their existing workforce. Besides, a number of health workers employed under the project continued to perform their duties.

UNCERTAINTY OVER IMPLEMENTATION

Several components of the project remain incomplete as the WB declined to extend the contract period, according to DGHS and project officials.

Under the project, the government was supposed to set up 10-bed ICUs at 33 more district hospitals; paediatric ICUs at 16 medical college hospitals; obstetric ICUs for critically ill pregnant women at 15 medical college hospitals; 10-bed ICUs at two specialised hospitals and one-stop emergency service centres at 21 medical college hospitals.

It also includes other components such as installation of microbiology laboratories at 19 medical college hospitals; establishment or expansion of liquid medical oxygen systems at 30 hospitals; and setting up of medical waste treatment plants at 20 hospitals and medical screening facilities at airports and seaports.

While construction of the facilities is nearing completion, uncertainty persists regarding the purchase of equipment and recruitment of manpower, said the officials.

The health authorities had earlier sought to complete the pending work under three "operational plans" of the proposed Fifth Health, Population, and Nutrition Sector Programme (HPNSP), and absorb the health workers hired for the project into those plans.

However, the interim government scrapped the proposed 5th HPNSP and decided to absorb the health programmes into regular ones to improve coordination and strengthen infrastructure.

In the first week of June, the health ministry held a meeting to discuss two options: announce completion of the project without finishing the remaining work or initiate a new project to complete the pending work.

"No final decision has been made regarding the project," a DGHS official told this newspaper on June 28, seeking anonymity.

The project authorities have been asked to assess how much money and time are needed to complete the remaining work, added the official.

Prof Sayedur Rahman, special assistant to the chief adviser for the health ministry, said the ICUs were built during an emergency period, and many of those remained unutilised afterwards.

He said the government plans to introduce a cluster system under which the ICU at one hospital will be designated to serve patients from two to three neighbouring districts, as it may not be feasible to deploy adequate manpower to all