

MOULVIBAZAR DISTRICT

Over 437km of rural roads in disrepair

Floods, lack of funding leave locals stranded

MINTU DESHWARA

More than 437 kilometres of rural roads across Moulvibazar have fallen into complete disrepair, leaving thousands of residents isolated, local economies crippled, and vital transport routes severed.

The roads, managed by the Local Government Engineering Department (LGED), have been left in various stages of disrepair, with many stretches developing large potholes and some areas losing all trace of the original surface.

According to LGED officials, the roads were severely damaged during four floods in 2024. Before repairs could begin, persistent



heavy rainfall this year, coupled with runoff from upstream hill streams, further worsened the situation.

Shahidul Islam, a resident of Rajnagar upazila town, said the Tarapasha road was submerged under two feet of water for about two weeks last year. "Initially, the flood water created small and large holes on the road, which gradually grew larger. The condition of the

road is worsening daily due to the movement of light, heavy, and goods vehicles," he said.

Truck driver Md Jasim said if repairs had been carried out after the flood waters receded, the situation would not have deteriorated so badly. "Due to the delay, the Bhanugach road has worsened. Driving through the potholes means daily car repairs. Vehicles now move slowly and unevenly," he added.

Kohinur Akhter, who travels on the Tarapasha road, said she works at a government primary school and commutes daily by auto-rickshaw. "The shaking caused by the potholes makes travel unbearable, yet I am forced to use the road. It is getting worse

by the day," she said.

LGED estimates put total infrastructure losses from the floods at over Tk 1,000 crore, with damage to rural roads alone accounting for more than Tk 600 crore.

The worst-hit upazila is Rajnagar, where 99km of roads have been damaged. The road leading to Tarapasha Bazar, located in a haor area, has become nearly impassable.

In Kulaura, along the Hakaluki Haor, 66km of roads are in poor condition. Prolonged submersion during the monsoon has left these roads riddled with potholes and erosion.

Similar conditions prevail in Juri and Barlekha upazilas.

In Kamalganj, residents expressed frustration over the dire state of the Adampur road.

"The situation has disrupted transport links and cut off access to essential services in many villages," said Mifta Mia, a resident of Adampur.

Contacted, Ahmed Abdullah, executive engineer of LGED, Moulvibazar, said some urgent repair work on damaged bridges and culverts was carried out under the 2023-24 annual development allocation.

"However, no funds have been allocated specifically for roads affected by the floods. Work will commence once we receive the necessary approval and funds," he said.

Our concept

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of Management Sciences highlighted how British Orientalism reshaped Hindu and Muslim identities in South Asia through literature, language, and education.

Drawing on Edward Said, she called for a "secular critical" approach – resisting all hegemonies while building a humanist, inclusive future.

Prof Yasmin Saikia of Arizona State University said conflicts between modernity and religion arise from ignoring religion's role in the public sphere, which is often politicised.

Religion should promote tolerance, dignity, and shared humanity, she added.

Prof Maszlee Bin Malik said debates on Islam, democracy, and modernity have lost relevance amid global crises like Gaza, which expose failures of Western democratic ideals.

Prof Alex Tack Gwang Lee of Kyung Hee University urged rethinking history beyond Eurocentric models, citing Gaza as evidence of European humanism's collapse.

Meanwhile at another session titled "New Political Dialogue: Transformation in South Asian Politics", speakers said Bangladesh's democracy is under threat from entrenched elites, weak institutions, and flawed political parties.

They also said politics has become dominated by oligarchs and business interests.

Badiul Alam Majumder, a member of the National Consensus Commission, said, "Politics has become

business, and neither politics nor business is doing well," highlighting how oligarchs now dominate political parties and even Parliament.

Prof Taibur Rahman, dean of Social Sciences at Dhaka University, stressed that strong political parties, an independent Election Commission, and parliamentary committees are essential for free elections.

"We have good rules, but the real problem is implementation."

Mirza M Hassan of BRAC University called for reimagining democracy to combine representative systems with direct forms such as citizens' assemblies and referendums.

Prof Harindra B Dassanayake of Muragala Centre for Progressive Politics said South Asian democracies function as "broken machines" where electoral systems fail to translate citizen aspirations into policy.

He urged the use of technology to enhance participatory and deliberative democracy. The session was moderated by Dhaka Tribune's founding editor Zafar Sobhan.

Prof Dipak Gyawali, former Nepali water resources minister; Prof Bulbul Siddiqi of North South University; Mir Nadia Nivin, governance, institutional reform and digital transformation specialist; Asaduzzaman Fuad, joint member secretary of AB Party; and Oliur Rahman Sun of University of Liberal Arts also spoke, among others.

8-10 cases

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Tajul said other security forces, not just the police, were involved in the July-August killings and disappearances.

Tajul said records detailing orders for weapon use and drone and helicopter activity, had been stored by the National Telecommunication Monitoring Centre (NTMC).

"However, once proceedings began and the investigation was underway, NTMC destroyed those records before they could be examined. The deleted data is now being recovered and used in the investigation."

Barrister Sara Hossain discussed the rights violations before, during, and after the July uprising, including extrajudicial killings, mass injuries, arbitrary arrests, torture, and sexual violence against protesters.

She warned of persistent obstacles, including political interference in how cases are filed, often based on party affiliation.

Irene Khan, UN special rapporteur on freedom of expression and opinion, criticised the misuse of laws like the Digital Security Act and Cyber Protection Orders, saying they are used to silence journalists.

"Bangladesh has ratified international conventions on enforced disappearances and others. It's time to live up to those commitments and protect the media."

The session was moderated by Huma Khan, senior human rights adviser at the UN Resident Coordinator's Office in Bangladesh.

Pvt sector, bigger budget vital for better

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Syed Abdullah Muhammad Taher, naye-e-ameer of Jamaat-e-Islami, stressed the need for higher budget allocation and policies to support private sector growth.

He said pharmaceutical companies are forced to spend heavily on product promotion.

After he said so, a member of the audience protested, claiming doctors do not take the money.

In response, Taher clarified that he did not accuse doctors but maintained that companies spend significantly on promotion.

During the exchange, Prof Sayedur Rahman, special assistant to the chief adviser for the health ministry, briefly left the stage. He later returned at the organisers' request to continue the session.

BNP Standing Committee member Amir Khosru Mahmud Chowdhury said Bangladesh has topped the list of South Asian countries in terms of social indicators but failed to make similar

progress in health.

He said the demographic dividend cannot be utilised without greater investment in healthcare, adding that if BNP comes to power, they will allocate 5 percent of GDP to health.

He said the private sector should be freed from government control, promising "serious regulatory liberalisation," and urged businessmen to prepare for self-regulation.

Prof Sayedur Rahman, representing the interim government, said no decision is made without stakeholder consultation and that the government will ensure a congenial environment for private investment.

He noted that even the US, despite being a champion of liberalism, regulates its health sector.

"The government that comes next may deregulate, but no country leaves its health sector unregulated. We will regulate – but regulation will not be repressive," he said.

Joining virtually, Planning Adviser Prof Wahiduddin Mahmud said

there is a crisis of public trust in the country's healthcare system, leading many to spend huge sums abroad, which burdens the economy. He pointed out that many large government-built infrastructures remain unused.

"In some places, there are buildings but no doctors; in others, there are doctors but no nurses or technicians. Coordination is necessary, and involving the private sector can help improve the situation," he said.

He also suggested considering private management for small healthcare clinics.

AM Shamin, general secretary of Bangladesh Private Hospital, Clinic and Diagnostic Owners Association, said they need approval from 18 agencies for licence renewal, calling it a form of "torture". He urged simplification of the process.

Prof Md Abu Jafor, director general of the Directorate General of Health Services, said the private sector provides 70 percent of health services in the country and the

government alone cannot strengthen the system.

Tapan Chowdhury, managing director of Square Pharmaceuticals Ltd, emphasised recognising the contributions of the private sector.

Saidur Rahman, secretary of the Health Services Division, said many unused medical facilities can be made functional by involving private actors.

Md Mosaddeque Hossain Biswas, president of Bangladesh Medical University, and Prof Md Shahinul Alam, vice chancellor of Bangladesh Medical University, also spoke, among others.

The event was moderated by Bonik Barta Editor and Publisher Dewan Hanif Mahmud.

PRAYER TIMING					
AUGUST 31					
Fazr	Zohr	Asr	Maghrib	Esha	
AZAN 4-30	12-45	4-45	6-33	8-00	
JAMAAT 5-05	1-15	5-00	6-36	8-30	
SOURCE: ISLAMIC FOUNDATION					

Neglect, underfunding cripple urban

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primary healthcare centres in every ward to provide awareness, prevention, and treatment services, alongside 100 to 150-bed hospitals in each city corporation zone.

It also recommended establishing Zonal Health Offices, modelled on the Civil Surgeon's Office, to oversee hospitals, clinics, pharmacies, GP chambers, diagnostic centres, family planning, vaccination, and other public health initiatives. These offices would include field workers, service providers, public health specialists, and other staff members.

The declaration also called for an effective referral system linking primary healthcare centres to secondary and tertiary facilities for timely treatment of complicated cases.

It stressed the need to guarantee women's and adolescents' access to SRHR services and counter stigma, misconceptions, and superstitions through awareness campaigns.

Other recommendations included reactivating government and non-government reproductive health call centres, establishing adolescent and women-friendly healthcare centres in educational institutions, and involving the youth in awareness initiatives.

Financial measures proposed included more allocation in the national health budget for urban healthcare, lowering the price of essential medicines, introducing health insurance schemes for the ultra-poor, and providing subsidised diagnostic services for marginalised communities.

The declaration also demanded a more accountable health administration with strict monitoring to prevent exploitation by middlemen in hospitals and health centres.

Speaking as chief guest, Prof Md Sayedur Rahman, special assistant to the chief adviser, stressed the role of the youth and volunteers in

driving healthcare reform.

He emphasised that lasting change comes not from short-term incentives but from civic responsibility and collective action, urging the youth to extend their activism beyond their own rights to include the well-being of the elderly.

On urban health specifically, he admitted to structural gaps compared to rural healthcare. "The rural health structure is very well-organised... But in cities, where more than seventy million people live, the structure for primary healthcare is not as systematic as in rural areas."

He noted the government's plan to introduce ward-based GP units in cities to provide a structured entry point for urban primary healthcare, in line with the Dhaka Declaration's recommendations.

Dr Rahman also emphasised equity and safety, highlighting the critical role of women doctors in both rural


and urban settings, and called for ensuring their protection and dignity alongside patients'.

Ipas Bangladesh Country Director Dr Syed Rubayet said, "Sexual and reproductive health services and rights are highly stigmatised and a neglected issue. We all probably know that sexual and reproductive health is a fundamental right, but there has been widespread indifference towards it."

He admitted that past and current efforts remain inadequate and stressed the urgent need for stronger action.

Edward Cabrera, first secretary (development-health) at the High Commission of Canada in Bangladesh, said the skills and advocacy learned by youth volunteers will shape the leaders of tomorrow.

He called on health professionals, government bodies, and development partners to keep supporting volunteer-led models to strengthen SRHR across the country.



TENDER NOTICE

The United Nations High Commissioner for Refugees (UNHCR), Sub-Office in Cox's Bazar, hereby announces the launch of the following tender:

TENDER REFERENCE NUMBER	ITEM DESCRIPTION
BGD-UNHCR-ITB-1466	FOR THE ESTABLISHMENT OF A FRAME AGREEMENT FOR THE SUPPLY OF AND DELIVERY OF LOT 1: MEDICAL SUPPLIES LOT 2: LABORATORY ITEMS

Interested and potential vendors are invited to participate in this Invitation to Bid (ITB) by accessing and downloading the tender documents from the **UNHCR Cloud ERP Supplier Portal**.

UNGM Notice Link: <https://www.ungm.org/Public/Notice/276411>
BDjobs Tender notice link: <https://hotjobs.bdjobs.com/jobs/unhcr/unhcr536.htm>

ACKNOWLEDGMENT:
Please confirm your participation for **BGD - UNHCR ITB 1494** by using the **"Acknowledge Participation"** functionality in the Cloud ERP Supplier portal.

It is very important to subscribe (Acknowledge Participation) to an ongoing negotiation that you wish to participate in, as this is the only way to receive automatic email notifications with information on any changes related to this negotiation.


Instruction to Bidders:
UNHCR will organize an online supplier **Join Pre Bid Meeting here BGD-UNHCR-ITB-1494 on 02 September 2025 at 10:00 am BST** via Microsoft Teams. Bidders may also join the meeting by scanning the QR Code from mobile:

To register as a prospective supplier and submission of bids, please follow the guidelines: <https://www.unhcr.org/media/guidelines-unhcr-suppliers-how-use-supplier-portal>


Existing suppliers use this link: <https://supplier-portal.unhcr.org/> to log in with your email address and password. Do not create a new profile if you are already registered. If you have forgotten your password, click on **Forgot Password** to reset your password.

Bid submission deadline: Sunday, 21 September 2025 – 14:00 hrs. BST Bangladesh time.

Kindly note that no hard copy is acceptable. The offer must be submitted only through the Cloud ERP portal.



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BGD - UNHCR ITB 1494	FOR THE ESTABLISHMENT OF A FRAME AGREEMENT FOR THE SUPPLY OF AND DELIVERY OF LOT 1: ESSENTIAL MEDICINES LOT 2: SUPPLEMENTARY MEDICINES

Interested and potential vendors are invited to participate in this Invitation to Bid (ITB) by accessing and downloading the tender documents from the **UNHCR Cloud ERP Supplier Portal**.

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