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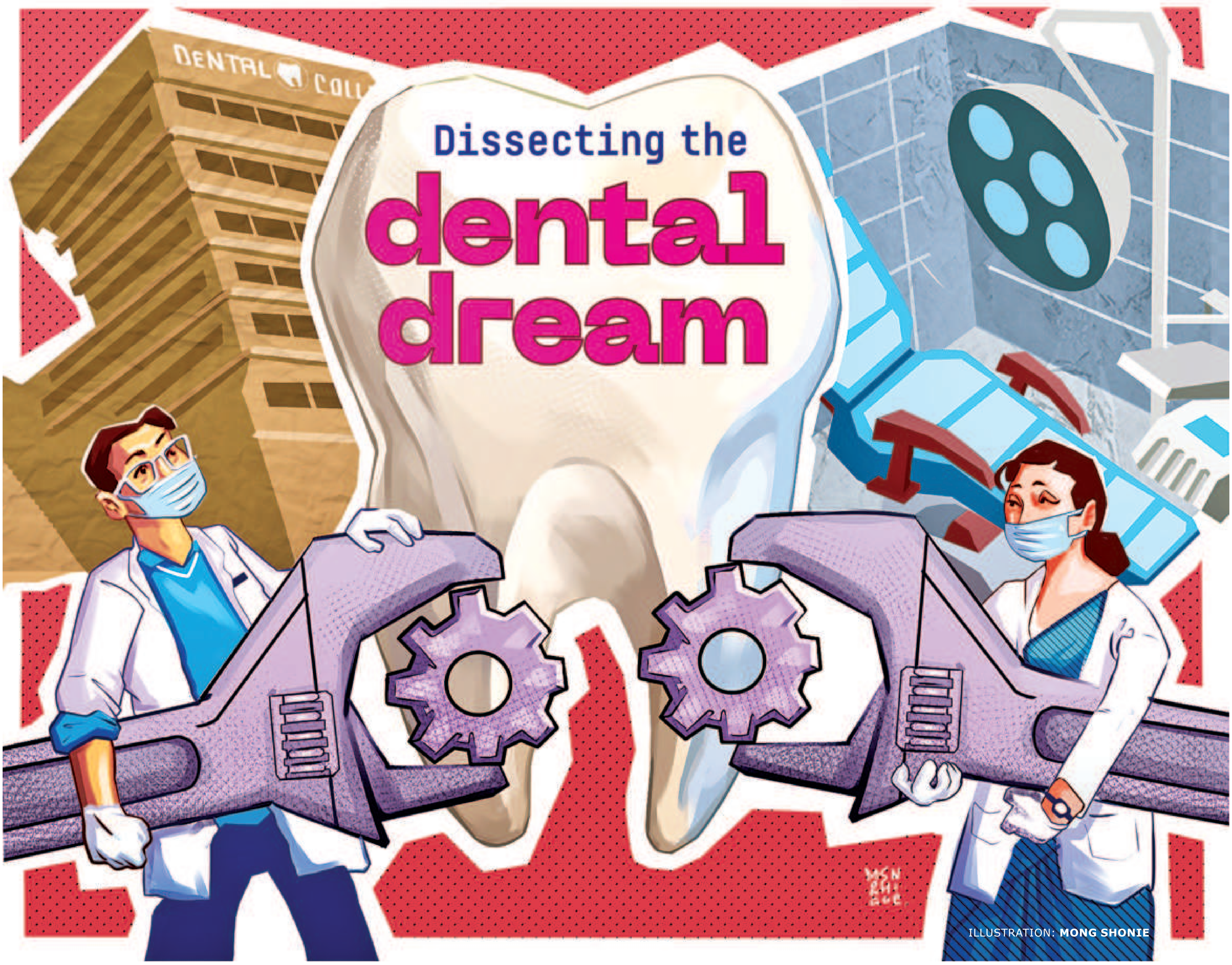


ILLUSTRATION: **MONG SHONIE**

OFF CAMPUS

Understanding the complexities of DU's student health insurance

ADRIN SARWAR

PHOTO: **ORCHID CHAKMA**

"Three months. That's how long it took me to get reimbursed for just 20 percent of my medical expenses under Dhaka University's student health insurance policy," shares Abu Sayad, a student of Printing and Publication Studies at Dhaka University (DU) who has been dealing with ongoing health issues.

His experience reflects the larger struggles many students face navigating a slow, insufficient, and often frustrating insurance system.

DU has introduced a healthcare insurance scheme for its regular students, providing coverage for those up to 28 years old in various listed hospitals for an annual premium of BDT 330. Students can access a maximum insurance benefit of BDT 80,000 per year for hospital admissions, including BDT 16,000 per day for cabin or ward rent, medical services, and doctors' fees.

For outdoor treatment, the university provides an annual total of BDT 11,000 per student, divided into BDT 4,000 for doctor's consultation fees, BDT 3,500 for medicines, and BDT 3,500 for tests and medical examinations. To avail of the insurance, students must submit various documents, including a doctor's prescription, test reports, pharmacy receipts for prescribed medications, hospital discharge bills, and other relevant paperwork to their respective departments/institutions within 45 days of receiving treatment.

Md Wasif Haider, a student of Printing and Publication Studies at DU, who had to wait four months to receive the insurance cheque, said, "We have to submit the medical documents within 45 days of receiving the treatment. Otherwise, we cannot apply for the insurance. But when it comes to getting the insurance cheque, it's a waiting game."

While the premium fee of BDT 330 may seem like a small amount compared to their overall tuition fees, the collective sum paid by all students is significant. Given the rising costs of healthcare, this amount seems inadequate. "As someone with a seizure disorder, I am constantly undergoing treatment. The insurance coverage is insufficient, and the long wait discourages me from using it," explains Abu Sayad.

This prolonged waiting period demotivates students from applying for insurance at all. For those who only need a one-time reimbursement, the hassle doesn't seem worth it. For students like Abu Sayad, who need constant medical consultations, the extended waiting time undermines the entire purpose of the insurance.

Nadira Anjum, a student of the Institute of Health Economics, DU, recounts her experience, "I had dengue fever, followed by some other health complications, and I applied for insurance coverage for both conditions. While I was reimbursed for both, I had to wait four months to receive the insurance cheque. Although I am satisfied with the reimbursement amount, I believe the waiting period was too long."

As for Md Din Islam, a student of the Finance Department, it took around a month and a half to get the reimbursement. This demonstrates that the timeframe for reimbursement is not as concrete.

When asked about this extended waiting period, Dr Syed Abdul Hamid, Professor at the Institute of Health Economics, who led the pilot project for DU's student health insurance scheme, said, "Initially, students were required to submit all necessary documents to the university authority for insurance claims. However, over time, delays became common due to procedural changes. To address this, the insurance company developed a system allowing students to submit documents directly. Unfortunately, the system cannot be fully implemented yet due to out-of-date student information in university records."

Another significant issue is the lack of transparency in the verification process for medical reports and the cooperation from the insurance company. After a student submits all necessary documents to the department or institute, the authorities compile a file and forward it to the insurance company for verification.

However, in the case of Abu Sayad, he submitted his electroencephalogram (EEG) report along with the other required documents. However, the insurance did not cover the cost of the EEG test. "I tried reaching out to the authorities, from my department to the DU Registrar Building, but received no answers. The insurance representative gave me another contact number, but despite multiple attempts, I never received clarification or a response," Sayad recounts.

A similar experience is shared by Shihab Uddin, a student of the Finance Department, "When I applied for insurance the second time, they provided me only 30 percent of my claim and rejected one of my documents as fake, which is authentic," he states.

Once a student submits the necessary documents for verification, there is no clear channel of communication with the insurance company. There is no way to resolve queries or seek clarification on rejected claims. On this, Dr Syed Abdul Hamid reflects, "Claims are sometimes denied due to documentation issues. Both the insurance company and university authorities need to prioritise this area. There should be a clear process for follow-up or resubmission, which is currently lacking."

The problems don't end with the delays. The insurance company issues a cheque on an account-to-account basis. For students without bank accounts, this creates difficulties in accessing their funds. "When I went to the bank to withdraw my money, they told me I needed an account," explains Asraful.

"But my existing account had dues, which would have taken half of what I received from the insurance. In the end, I didn't withdraw the cash. It would have been much easier and time-saving if the cheque had been issued on an account-to-cash basis," he adds. Even if students have accounts, they often face issues like pending dues or limited services, making it harder to access their funds. This inefficiency further disincentivises students from using the insurance system.

Previously, the insurance coverage was limited to general medical concerns and did not include treatments for conditions like asthma, allergies, mental health issues, skin conditions, or eyesight issues — which are common among students.

Hasibul Islam, a student of the Institute of Social Welfare at DU, shares, "I had to consult a doctor for an eyesight problem. I was prescribed some medications, eye drops, and a new prescription for my glasses. When I checked the insurance plan to see if it would cover these costs, I found out that it doesn't include eye treatment."

However, in the new term, they have introduced coverage for tests for eye checkups, medication, and thyroid-related issues (non-obesity).

The insurance scheme is not familiar to many students. They often think the process is too complex and avoid claiming the insurance altogether. Md Lokman Hekim, a student of Women and Gender Studies at DU, says, "We deposit the insurance fee each year, but most of us do not have enough information on how to claim the insurance. I did not know anything about this. I heard from one of my friends, and then I applied for the insurance."

The DU health insurance scheme was introduced by the Institute of Health Economics. Nadira says, "I understand the insurance plan well, but many students don't. If students were more aware of the benefits, I believe more of them would take advantage of it. We've launched awareness campaigns in the past from our department, and we have plans to continue these efforts in the future as well."

Currently, the insurance system running in DU is mainly a reimbursement model. Prof. Syed Abdul Hamid has emphasised that the university should work to introduce a cashless system to the insurance policy. He believes that it will be beneficial for the students. He says, "Introducing cashless services at affiliated hospitals could help resolve many reimbursement issues. The university needs to align more closely with this approach to improve efficiency."

The current DU student health insurance is inadequate, especially for students with chronic conditions or ongoing treatment needs. Delays in reimbursement, insufficient coverage, and poor communication discourage students from using the system. Digitising the claims process would improve efficiency, reduce wait times, and enhance communication. Expanding coverage to include mental health support and chronic illnesses, as well as increasing reimbursement limits, would better address students' health needs. Reforming the policy is essential for providing true health security to students. It appears that the beneficiaries of the insurance system, the students, are victims of the system itself.

Adrin Sarwar is a final-year student who is working hard and resting harder. Reach her at adrinsarwar@gmail.com

How UCBD is redefining access to world-class UK education in Dhaka

The dream of studying abroad is shaping a new generation of globally minded Bangladeshis. Each year, thousands prepare for a future beyond borders, hoping that an international degree will open doors to innovation, research, and change.

One of the first few options that comes to a student's mind when planning to study abroad is the United Kingdom. The country's solid reputation for safety, inclusivity, and openness continues to resonate with students.

However, soaring study costs, visa complexities, and global political uncertainties often make pursuing that dream difficult right after completing HSC or A Levels.

But what if students had the chance to access the same quality education, get the same prestigious UK degree, and also the same global career opportunities, all of that without leaving the comfort of home? This is what Universal College Bangladesh (UCBD) has made possible.

As the first and only institution in Bangladesh, UCBD is offering full degree programmes under the academic direction of the London School of Economics and Political Science (LSE) in collaboration with the University of London (UoL), and degrees from the University of Central Lancashire (UCLan). Students who have completed their HSC or A-Level exams can now enrol direct in UK degree programmes at UCBD. All the students enrolled in UK degrees at UCBD follow the same syllabus and exams as students studying these degrees in Britain. When UCBD students finish their degree they receive certificates from the UK partner university, and they can even choose to attend a graduation ceremony in the UK.

The degrees earned through UCBD have the same quality, academic value, and worldwide acceptance as those obtained in the UK. Employers and universities worldwide view these qualifications with the same significance because of their rigorous academic standards and their focus on developing analytical and critical thinking skills. As a result, UCBD graduates can easily continue their Masters education abroad or get top jobs in Bangladesh or elsewhere with confidence.

UCBD combines academic excellence with practical experience. The institution is committed to preparing career-ready graduates who are adaptable, analytical, and equipped to lead in a rapidly changing global environment. Students benefit from partnerships with local and international organisations that provide opportunities for internships, professional networking, and hands-on learning experiences.

UCBD's modern campus in Gulshan offers digital classrooms, mentorship programmes, and a dynamic learning environment designed to mirror global academic standards. The top-notch academic faculty are all approved by the UK partner universities and teach using the latest technology and methods. Regular seminars, guest lectures, and student development workshops help UCBD students connect classroom knowledge with real-world skills.

By bringing globally benchmarked UK programmes to Bangladesh at a fraction of the cost of studying abroad, UCBD enables students to pursue world-class education without financial or geographical barriers. UCBD's mission is to empower Bangladeshi youth with the same quality of education and recognition that students receive overseas, while keeping the benefits of studying in Bangladesh. With UCBD students can stay local and go global.

ILLUSTRATION: AZRA HUMAYRA

DISSECTING THE DENTAL DREAM

AHNAF TAHMEED PURNA

Ever wondered why medical colleges in Bangladesh draw a line when it comes to teeth? You can study every inch of the human body in an MBBS degree, but when it comes to the mouth, an entirely separate discipline takes over: the Bachelor of Dental Surgery (BDS).

Despite being one of the oldest branches of healthcare, dentistry remains strangely unfamiliar to many. Some see it as a mere subset of medicine, others as a secondary option. Yet, behind those white coats and tiny mirrors lies a science that combines medicine, precision, and artistry in ways few professions can.

What's taught in the BDS programme?

The BDS programme in Bangladesh runs for five academic years followed by a year of internship. Just as medical aspirants take the Medical Admission Test, dental hopefuls sit for the Dental Admission Test, usually held a week after the medical one. Admission into government dental colleges or the dental units of medical colleges depends entirely on merit scores. Even those who plan to study in private institutions or abroad must qualify by securing at least 40 marks out of 100 in the national dental admission test.

The BDS programme structure resembles that of the MBBS curriculum, though with a much more focused lens on the oral and maxillofacial region.

The course is divided into four phases. The first and last phases span one and a half years each, while the second and third are one year each. In the first phase, students study Anatomy just like Medical Students, but their scope is narrower. They focus intensely on the head and neck rather than the entire body. Dental students also study Physiology and Biochemistry as a single integrated subject, and two additional subjects that medical students do not encounter: Dental Anatomy and the Science of Dental Materials.

In the second phase, General and Dental Pharmacology are taught alongside Pathology and Microbiology. The third phase includes Medicine, Surgery, Periodontology, and Oral Pathology, gradually narrowing from general medical sciences to dental specialisation. In the final phase, students study five core subjects: Oral and Maxillofacial Surgery, which focuses on the mouth, jaw, and facial bones; Conservative Dentistry and Endodontics, which involves root canals and restorative work; Prosthodontics, covering dental prostheses such as crowns, bridges, and implants; Orthodontics and Dentofacial Orthopaedics, which deals with braces and facial growth modification; and Paediatric Dentistry and Dental Public Health, focusing on oral health in children and within communities.

One unique feature of the dental curriculum is the logbook system. During their final phase, students must record every clinical procedure they perform under supervision. This ensures that theoretical knowledge is consistently reinforced through practical experience and accountability.

Dental education in Bangladesh has gone through significant reforms over the years. A major change took place in the 2017-18 session, when the curriculum was extended from four to five years to allow for more clinical exposure. Another reform is scheduled for the 2026-27 session, which will introduce Dental Radiology as a separate subject and divide Paediatric Dentistry and Dental Public Health into two independent courses. These changes are designed to modernise the curriculum, align it with international standards, and increase opportunities for hands-on learning.

Understanding the intricate layers of the dental profession

Reflecting on the deeper dimensions of the dental profession, Dr Nitish Krishna Das of the Department of Oral and Maxillofacial Surgery at Shaheed Suhrawardy Medical College said, "In our society, professional choices are often guided by convention rather than conviction. Many pursue fields that are socially celebrated, and MBBS naturally becomes the most coveted option for aspiring physicians. Yet, success is rarely determined by the path one takes. It depends instead on the wisdom to recognise opportunities and the perseverance to utilise them fully."

Dr Das elaborated that Dentistry offers precisely such a space, one that is profoundly underappreciated yet abundant in scope. Among its branches, Oral and Maxillofacial Surgery (OMFS) stands as one of the most intellectually demanding and versatile. It encompasses the surgical treatment of diseases, injuries, and congenital or acquired defects of the mouth, jaws, and facial region.

Maxillofacial surgeons undertake a wide spectrum of procedures. These include the removal of impacted teeth and cysts, corrective jaw surgeries that restore alignment and balance, and the management of facial fractures resulting from trauma. They also diagnose and surgically treat oral tumours and cystic lesions, perform reconstructive surgeries for cleft lip and palate, and address complex congenital deformities. Many also contribute to oral oncology and facial aesthetic surgery, bringing together restoration, precision, and compassion in one delicate practice.

"Dentistry is a discipline that constantly evolves with science and human need," Dr Das continued. "It is expansive, encompassing clinical care, academic teaching, aesthetic enhancement, surgical mastery, and the endless possibilities of research. The more one immerses in it, the more it reveals its depth. Many might step into dentistry as an alternative after missing out on MBBS, but often they discover that it was their true calling all along."

What to expect during the internship phase

After completing the academic phases, graduates begin a mandatory one-year internship designed to bridge theory and practice. Interns rotate through General Surgery and Medicine for one month each, followed by one and a half months in each of the five specialised dental subjects. They also spend fifteen days in emergency care, where they handle dental trauma and acute infections that test both their technical skill and composure.

Dr Qamrun Nesa Alam Uzma, currently an intern at Shaheed Suhrawardy Medical College, describes the experience with honesty. "As interns, we are privileged to learn under skilled mentors," she explains.

"But dentistry is a highly technical field, and we often face shortages of instruments and materials. That limits our ability to practise many of the procedures we study. With high patient flow and limited resources, maintaining quality care becomes a challenge. On top of that, patient management can be difficult. Expectations are often unrealistic, and frustration sometimes turns into aggression. But these experiences teach us resilience and adaptability, lessons as valuable as any technical skill."

Similarly, Nujhat Tabassum, an intern at Sher-E-Bangla Medical College Hospital in Barisal, shared that being located outside Dhaka brings both challenges and opportunities. "We often have to work with limited resources, whether it's access to advanced dental materials, high-end equipment, or frequent workshops and seminars that are usually held in the capital. But these limitations have shaped our clinical experience," she said.

"For example, we encounter a wide range of patients from rural and semi-urban areas who have never had access to oral treatment, often with advanced oral diseases. This gives us unique clinical exposure that sharpens our diagnostic, management, and communication skills. We learn to be resourceful and make the best out of what we have. Patients trust us and appreciate the service we provide, resulting in strong doctor-patient relationships rooted in empathy and communication."

Tabassum further emphasised the importance of adaptability for new interns, "The world of dentistry has become extremely advanced. You need to know about CAD/CAM, 3D printing, laser dentistry, and also be competent in low-tech, high-impact skills that serve most patients around us. Theoretical knowledge alone isn't enough; strong communication and counselling skills, understanding locally available restorative materials, and continuous learning are key."

What's next after completing internship?

Once the internship ends, the horizon of opportunity begins to expand. In the clinical sector, dental graduates can sit for the Bangladesh Civil Service (BCS) exam to join the health cadre. Their questions and seats are separate from those of MBBS graduates, and successful candidates are appointed as Assistant Dental Surgeons.

For those interested in specialisation, Bangladesh offers postgraduate training through Fellowship of the College of Physicians and Surgeons (FCPS) and MS degrees in all five specialised subjects, except Paediatric Dentistry, which currently lacks an FCPS programme.

Academic tracks include MD programmes in foundational sciences and two-year diploma courses. Bangladesh Medical University offers a Diploma in Dental Surgery, while the Armed Forces Medical Institute offers specialised diplomas across all major fields.

Non-clinical avenues are equally rewarding. Graduates can pursue a master's in Public Health and work in research, policy, or international health projects focusing on community-based oral care. Internationally, dental graduates from Bangladesh can sit for licensing exams in the United States, the United Kingdom, Australia, and the United Arab Emirates. Japan has also become a popular destination for higher studies in Dentistry because of its increasing number of English-taught postgraduate programmes in Dental sciences and research.

While government institutions offer structured exposure and diverse patient inflow, private dental colleges often present a different learning dynamic. Resources can vary, but smaller class sizes, modern labs, and closer faculty interaction sometimes allow for more personalised guidance.

"In private institutions, students often learn to be resourceful with what they have, which helps build adaptability and independent problem-solving skills," shared Maysha Rahman Rodry, a fourth-year student at Bangladesh Dental College.

Her own experience reflects this adaptability through active networking and guidance from mentors; she secured opportunities to work on two research projects, one with the Directorate General of Health Services (DGHS) and another with Oral Cancer Care Research (OCCR) focused on oral cancer. These early exposures, she noted, not only strengthened her academic curiosity but also revealed how much untapped potential exists within dental research in Bangladesh.

The broader role of Dentistry in human health

Despite the diversity, misconceptions about Dentistry persist. Many still assume that dentists deal only with teeth, unaware of how deeply oral health is connected to overall well-being. In reality, the mouth often reveals the earliest signs of systemic disease.

Conditions such as infective endocarditis, diabetes, and certain autoimmune disorders frequently manifest oral symptoms before other organs are affected. Dentists are trained not only to treat oral conditions but also to identify and refer cases that indicate wider medical problems. They often serve as the first line of detection for illnesses that extend far beyond the oral cavity.

Final-year dental student Raad Wrik Hassan of Shaheed Suhrawardy Medical College-Dental Unit believes that the BDS curriculum can evolve even further to meet the demands of modern healthcare.

"To strengthen Dental education in Bangladesh, we need better integration between Medical and Dental disciplines," he says. "Subjects like Forensic Odontology and Medical Ethics should be introduced. Many dentists remain unaware of their legal responsibilities compared to MBBS graduates because these topics are not adequately covered. Anatomy should also be expanded to include the limbs, which would help students pursuing Oral and Maxillofacial Surgery. Beyond the content itself, our teaching approach needs to change. Shifting from slide-based lectures to case-based discussions and interactive tutorials will bridge the gap between theory and practice and help us become more confident professionals."

His suggestions echo a broader sentiment among Dental students and educators. As technology, materials, and patient expectations evolve, the education that prepares future dentists must evolve as well. Incorporating clinical simulations, self-directed learning, and interdepartmental collaboration could bridge the persistent divide between academic knowledge and practical expertise.

The future of Dental education in Bangladesh

Despite the challenges, Dentistry in Bangladesh is steadily progressing. The demand for skilled dental surgeons, cosmetic specialists, and community oral health professionals continues to grow as awareness about oral hygiene spreads. Digital dentistry, involving 3D printing, CAD/CAM prosthetics, and laser-assisted procedures, is gradually entering both private clinics and academic institutions. Young dentists are exploring subfields such as forensic odontology, trauma surgery, and implantology, transforming what was once considered a narrow profession into a dynamic field of innovation and research.

In this expanding professional landscape, private chambers stand as the linchpin of dental practice and the principal avenue of income for most practitioners in Bangladesh. Beyond ensuring financial autonomy, they serve as a gateway to entrepreneurship, allowing practitioners to build loyal patient bases and integrate advanced modalities like implantology and cosmetic dentistry at their own pace.

With rising public awareness, aesthetic demand, and urban growth, the horizon of private practice continues to widen, offering young dentists not merely stability but the latitude to innovate, specialise, and define their professional identity on their own terms.

However, much work remains to ensure that progress reaches every corner of the country. In rural Bangladesh, access to dental care is still limited, and awareness about oral hygiene remains low. Strengthening public dental facilities and integrating oral care into primary healthcare could transform the nation's overall health outcomes.

Dentistry, at its essence, is not only about perfecting smiles. It is about restoring dignity, confidence, and comfort. Every extraction, restoration, and patient encounter reflects years of rigorous study and the delicate balance between technical mastery and empathy. As Bangladesh continues to reform and modernise its dental education, perhaps it is time we redefine how we view this field: not as a branch beneath medicine, but as a vital science of its own.

Purna is a third-year Medical student at Shaheed M Monsur Ali Medical College, Sirajganj. You can reach her at ahnafpurna@gmail.com.

NOTICE BOARD

Eastern University holds National Debate Competition 2025

The grand finale and award ceremony of the National Debate Competition 2025, organised by the Eastern University Debate Club, was held on September 29 at the Rezakul Haider Hall of Eastern University.

The event was presided over by Prof. Dr Farid A Sobhani, Vice Chancellor of Eastern University. Prof. Dr Mohammad Kamrul Ahsan, Vice-Chancellor of Jahangirnagar University (JU), attended the programme as the Chief Guest, while Abul Kasem Haider, Founder Chairman of the Board of Trustees of Eastern University, was present as the Special Guest.

Among others, Prof. Md Shamsul Huda, Treasurer; Dr Abul Basher Khan, Registrar; Meherba Sabrin, Lecturer of the Department of Law and Coordinator of the Debate Club; and Sabit Ibne Mahmud, President of the Debate Club and a student of the Department of Law, also spoke at the event. The programme was attended by deans, heads of departments, officials from JU, and a large number of students, making the event vibrant and engaging.

In the inter-college segment, which featured participation from 32 colleges across the country, Government Science College emerged as the Champion, while Government Bangla College became the Runner-Up. Imon Ahmed from Government Bangla College was named the "Best Debater" in this category.

In the inter-university segment, Bangladesh University of Textiles (BUTEX) clinched the Champion's title, defeating North South University (NSU), which became the Runner-Up. Alvi Salman from NSU was awarded the "Best Debater" title.

IQAC Seminar on "Compliance Management for BAC Accreditation" held at UITS

The Institutional Quality Assurance Cell (IQAC) of the University of Information Technology and Sciences (UITS) convened a seminar titled "Compliance Management for BAC Accreditation" on October 8 at the university's conference room.

Vice-Chancellor Prof. Dr Md Abu Hasan Bhuiya attended the event as Chief Guest, while Prof. Dr Siraj Uddin Ahmed, Treasurer of UITS, was present as Special Guest. The seminar was presided over by Engr Md Safaet Hossain, Director of IQAC.

This seminar was organised as a follow-up to a specialised training session on compliance management, conducted by the Bangladesh Accreditation Council (BAC) on September 28. UITS was represented at the training by the heads of the departments of Computer Science and Engineering, Civil Engineering, and Business Studies, who participated in their capacity as Programme Self-Assessment Committee (PSAC) Chairs. During the IQAC seminar on "Compliance Management for BAC Accreditation", the following distinguished faculty members delivered presentations: Al-Imtiaz, Head, Department of Computer Science and Engineering; Md Mohiuddin Ahmed, Head, Department of Civil Engineering; and Dr Mahadi Hasan, Head, Department of Business Studies.

Drawing upon insights gained from the BAC training, the seminar aimed to enhance participants' understanding of compliance management and the documentation practices essential for achieving BAC programme-level accreditation. Discussions focused on the 10 standards and 63 criteria outlined in the BAC Accreditation Manual (2nd Edition). Speakers provided detailed analyses of the required documentation procedures, emphasising the importance of structured evidence collection, alignment with institutional policies, and the implementation of continuous quality assurance mechanisms. Particular attention was given to fostering a culture of evidence-based reporting, data-informed decision-making, and process-driven compliance across all academic and administrative units.

The seminar was attended by several distinguished members of the university, including Prof. A N M Sharif, Controller of Examinations; Prof. Dr M Robiul Hossain, Dean, Faculty of Law; Prof. Dr Md Ashraful Islam, Dean, Faculty of Science and Engineering; Syeda Afsana Ferdousi, Dean, Faculty of Liberal Arts and Social Sciences; Dr Faruk Hossain, Dean, Faculty of Business; Md Tariqul Islam, Proctor; and all heads of departments and members of the PSAC.

The seminar concluded with a collective reaffirmation of UITS's commitment to fostering a quality-centric academic environment. Participants pledged to strengthen internal quality assurance mechanisms, ensure systematic compliance with BAC standards, and promote a sustainable culture of academic excellence through effective documentation and continuous improvement.

Grand Graduation Show of FDT Department held at Shanto-Mariam University

The Department of Fashion Design and Technology (FDT) of Shanto-Mariam University of Creative Technology (SMUCT) hosted a "Graduation Show" for its 42nd batch at the BGMEA Auditorium in Uttara. The event featured stunning runway presentations where graduating students showcased their final design collections.

Addressing the ceremony, Prof. Mostafizul Haque, eminent artist and Chairman of the Board of Trustees, highly praised the students' hard work and innovation.

"As an artist myself, I can relate to the devotion and challenges of creative work. What I witnessed today was truly impressive – a perfect blend of modern concepts, elegant presentation, and cohesive organisation. I firmly believe you will thrive as competent professionals capable of making a global impact, Insha'Allah," said Prof. Haque.

Among the distinguished guests were Prof. Dr Md Shah-E-Alam, Vice-Chancellor of the University; Prof. Dr Pradeep Nandy, Dean of the Faculty of Fine Arts; Md Matiur Rahman, Head of the FDT Department; and Dr Par Mashiur Rahman, Registrar. The event was also attended by prominent industrialists, leading fashion designers, faculty members, and officials of the university.

At the end of the ceremony, the Chief Guest and other dignitaries handed over crests to the graduating students, commending their creativity and presentation.

EDUCATION

SURVIVING YOUR THESIS DEFENCE AS AN UNDERGRADUATE STUDENT

ILLUSTRATION: **SANJANA SABAH KHAN**

NUSRAT MEHERIN FAIZA

For most undergraduate students, the thesis defence marks both the grand finale and the ultimate test of their academic journey. It's the day when months of hard work, sleepless nights, and endless revisions culminate in one defining moment before a panel of evaluators.

However, as exciting as it sounds, it can also feel nerve-wracking. Standing before professors and peers, defending your ideas and research methods, can make even the most confident student anxious.

Thankfully, with the right mindset and preparation, surviving your thesis defence becomes a lot easier.

Know your research inside and out

When you're presenting your thesis, the panel expects you to thoroughly know and understand what you have worked on. Just being aware of the conclusion or findings won't do; you also need to know the research methodology used, why you chose that particular methodology, how you collected your data, and so on. Basically, every aspect of your thesis is up for discussion, so you should prepare yourself accordingly. It's also crucial to highlight the gaps in your research.

The more you review your material beforehand, the more prepared you will feel to navigate any challenges that may come your way.

Rehearse the tough questions

Thesis panel or committee members rarely make the viva during the defence easy. They can jump in with questions at any point, often targeting you with the weakest part of your research. This can feel unsettling, especially if you are already nervous. That's why it's crucial to know and rehearse the tough questions beforehand.

But how exactly will you know what these "tough" questions are?

The best way to do so is by analysing your research's weakest areas, which is something you should continuously keep track of as you work on your thesis.

This will help you realise the common viva queries that might pop up and anticipate challenges to your methods or findings. Also, don't hesitate to seek help from your thesis supervisor. Their experience and judgement can prepare you to navigate any tough question that you might have to face during the defence or viva.

You can even ask your seniors, friends, or other faculty members experienced in the particular subject matter to grill you with tough questions. The more challenging you feel while rehearsing, the easier it will be for you to answer on the final day.

Stay mentally and physically grounded

Let's be real, by the time the defence arrives, you might be skipping meals to get more work done or staying awake night after night to finish your thesis. This can backfire during your defence presentation or viva.

If your mind feels foggy and your body starts to shake, your anxiety will only intensify. Even the simplest question can suddenly seem confusing. That's why it's essential to eat properly and get enough sleep before your viva—never skip meals or stay up too late.

A short walk or listening to calming music before facing the panel can also help relax your body and reduce stress.

In the end, don't think of your thesis defence as a battle that you must win. Instead, think of it as a way to communicate the hard work and effort you have put into the research and your final paper. With focus and a bit of confidence, you can turn your defence into a proud conclusion to your undergraduate journey.

Nusrat Meherin Faiza is a writer, tutor, and chronic overthinker. Reach out to fuel her overthinking at nmfaiza15@gmail.com

Thesis anxiety: How writing an academic paper can get to you

The pressure of perfection

Writing a thesis often feels like balancing on a tightrope. Every sentence must sound intelligent, every argument must align with existing research, and every citation must be flawless. This constant demand for perfection can make even the most confident student second-guess their work.

The weight of expectations

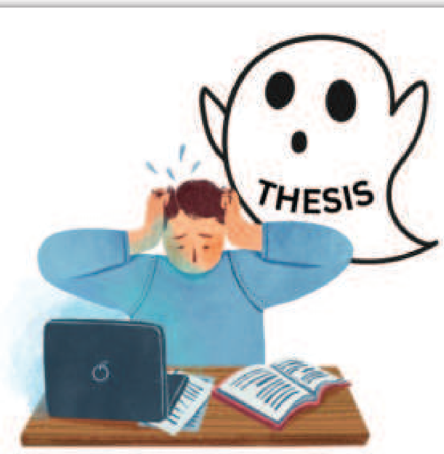
Whether it's from professors, peers, or family, expectations can feel crushing. Many students fear disappointing those who believe in them, which only amplifies the anxiety of each draft or deadline.

Isolation and overthinking

Thesis writing—or academic writing, in general—can be a lonely process. Long hours spent alone with your research can lead to overthinking, burnout, and a sense of disconnect from everyday life.

Finding calm amid the chaos

Coping with thesis anxiety means taking breaks, reaching out for feedback, and remembering that progress matters more than perfection. So, every time you sit yourself down to write your thesis, tell yourself that it's not just about finishing the paper. It's about surviving the process.



OFF CAMPUS

Understanding the complexities of DU's student health insurance

ADRIN SARWAR

PHOTO: **ORCHID CHAKMA**

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His experience reflects the larger struggles many students face navigating a slow, insufficient, and often frustrating insurance system.

DU has introduced a healthcare insurance scheme for its regular students, providing coverage for those up to 28 years old in various listed hospitals for an annual premium of BDT 330. Students can access a maximum insurance benefit of BDT 80,000 per year for hospital admissions, including BDT 16,000 per day for cabin or ward rent, medical services, and doctors' fees.

For outdoor treatment, the university provides an annual total of BDT 11,000 per student, divided into BDT 4,000 for doctor's consultation fees, BDT 3,500 for medicines, and BDT 3,500 for tests and medical examinations. To avail of the insurance, students must submit various documents, including a doctor's prescription, test reports, pharmacy receipts for prescribed medications, hospital discharge bills, and other relevant paperwork to their respective departments/institutions within 45 days of receiving treatment.

Md Wasif Haider, a student of Printing and Publication Studies at DU, who had to wait four months to receive the insurance cheque, said, "We have to submit the medical documents within 45 days of receiving the treatment. Otherwise, we cannot apply for the insurance. But when it comes to getting the insurance cheque, it's a waiting game."

While the premium fee of BDT 330 may seem like a small amount compared to their overall tuition fees, the collective sum paid by all students is significant. Given the rising costs of healthcare, this amount seems inadequate. "As someone with a seizure disorder, I am constantly undergoing treatment. The insurance coverage is insufficient, and the long wait discourages me from using it," explains Abu Sayad.

This prolonged waiting period demotivates students from applying for insurance at all. For those who only need a one-time reimbursement, the hassle doesn't seem worth it. For students like Abu Sayad, who need constant medical consultations, the extended waiting time undermines the entire purpose of the insurance.

Nadira Anjum, a student of the Institute of Health Economics, DU, recounts her experience, "I had dengue fever, followed by some other health complications, and I applied for insurance coverage for both conditions. While I was reimbursed for both, I had to wait four months to receive the insurance cheque. Although I am satisfied with the reimbursement amount, I believe the waiting period was too long."

As for Md Din Islam, a student of the Finance Department, it took around a month and a half to get the reimbursement. This demonstrates that the timeframe for reimbursement is not as concrete.

When asked about this extended waiting period, Dr Syed Abdul Hamid, Professor at the Institute of Health Economics, who led the pilot project for DU's student health insurance scheme, said, "Initially, students were required to submit all necessary documents to the university authority for insurance claims. However, over time, delays became common due to procedural changes. To address this, the insurance company developed a system allowing students to submit documents directly. Unfortunately, the system cannot be fully implemented yet due to out-of-date student information in university records."

Another significant issue is the lack of transparency in the verification process for medical reports and the cooperation from the insurance company. After a student submits all necessary documents to the department or institute, the authorities compile a file and forward it to the insurance company for verification.

However, in the case of Abu Sayad, he submitted his electroencephalogram (EEG) report along with the other required documents. However, the insurance did not cover the cost of the EEG test. "I tried reaching out to the authorities, from my department to the DU Registrar Building, but received no answers. The insurance representative gave me another contact number, but despite multiple attempts, I never received clarification or a response," Sayad recounts.

A similar experience is shared by Shihab Uddin, a student of the Finance Department, "When I applied for insurance the second time, they provided me only 30 percent of my claim and rejected one of my documents as fake, which is authentic," he states.

Once a student submits the necessary documents for verification, there is no clear channel of communication with the insurance company. There is no way to resolve queries or seek clarification on rejected claims. On this, Dr Syed Abdul Hamid reflects, "Claims are sometimes denied due to documentation issues. Both the insurance company and university authorities need to prioritise this area. There should be a clear process for follow-up or resubmission, which is currently lacking."

The problems don't end with the delays. The insurance company issues a cheque on an account-to-account basis. For students without bank accounts, this creates difficulties in accessing their funds. "When I went to the bank to withdraw my money, they told me I needed an account," explains Asraful.

"But my existing account had dues, which would have taken half of what I received from the insurance. In the end, I didn't withdraw the cash. It would have been much easier and time-saving if the cheque had been issued on an account-to-cash basis," he adds. Even if students have accounts, they often face issues like pending dues or limited services, making it harder to access their funds. This inefficiency further disincentivises students from using the insurance system.

Previously, the insurance coverage was limited to general medical concerns and did not include treatments for conditions like asthma, allergies, mental health issues, skin conditions, or eyesight issues — which are common among students.

Hasibul Islam, a student of the Institute of Social Welfare at DU, shares, "I had to consult a doctor for an eyesight problem. I was prescribed some medications, eye drops, and a new prescription for my glasses. When I checked the insurance plan to see if it would cover these costs, I found out that it doesn't include eye treatment."

However, in the new term, they have introduced coverage for tests for eye checkups, medication, and thyroid-related issues (non-obesity).

The insurance scheme is not familiar to many students. They often think the process is too complex and avoid claiming the insurance altogether. Md Lokman Hekim, a student of Women and Gender Studies at DU, says, "We deposit the insurance fee each year, but most of us do not have enough information on how to claim the insurance. I did not know anything about this. I heard from one of my friends, and then I applied for the insurance."

The DU health insurance scheme was introduced by the Institute of Health Economics. Nadira says, "I understand the insurance plan well, but many students don't. If students were more aware of the benefits, I believe more of them would take advantage of it. We've launched awareness campaigns in the past from our department, and we have plans to continue these efforts in the future as well."

Currently, the insurance system running in DU is mainly a reimbursement model. Prof. Syed Abdul Hamid has emphasised that the university should work to introduce a cashless system to the insurance policy. He believes that it will be beneficial for the students. He says, "Introducing cashless services at affiliated hospitals could help resolve many reimbursement issues. The university needs to align more closely with this approach to improve efficiency."

The current DU student health insurance is inadequate, especially for students with chronic conditions or ongoing treatment needs. Delays in reimbursement, insufficient coverage, and poor communication discourage students from using the system. Digitising the claims process would improve efficiency, reduce wait times, and enhance communication. Expanding coverage to include mental health support and chronic illnesses, as well as increasing reimbursement limits, would better address students' health needs. Reforming the policy is essential for providing true health security to students. It appears that the beneficiaries of the insurance system, the students, are victims of the system itself.

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