

When wars far away hit home: Bangladesh must act now



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There is a dangerous tendency in Dhaka's policy circles to treat conflicts in distant theatres as someone else's problem. The war involving Iran is the latest test of that complacency—and Bangladesh cannot afford to fail it.

The Strait of Hormuz, the narrow waterway separating Iran from the Arabian Peninsula, is one of the most consequential chokepoints in the world. Roughly 20 to 30 percent of the world's fertiliser exports pass through it. A significant share of global energy supplies do, too. When conflict threatens that corridor, the consequences do not stay in the Gulf. They travel—through supply chains, shipping lanes, and remittance flows—directly to countries like ours.

Bangladesh's agricultural backbone relies on nitrogen-based fertilisers, most of which are derived from natural gas and traded through Gulf supply routes. When the Russia-Ukraine war disrupted global fertiliser markets in 2022, Bangladeshi farmers felt it acutely, in higher input costs, reduced yields, and a squeeze on rural incomes. A disruption in the Strait of Hormuz would trigger a similar shock, potentially worse. Fertiliser prices are already climbing. If shipping lanes remain under threat, the next planting season could become a crisis.

Meanwhile, higher oil prices do not merely affect fuel pumps. They raise the cost of running irrigation systems, operating cold

storages, and transporting produce from farm to market. Every link in Bangladesh's food supply chain becomes more expensive. The result is predictable: inflation hits the plate of ordinary families the hardest, while the government faces mounting pressure on its subsidy bill at a time of already strained fiscal resources.

Perhaps the most immediate vulnerability is human. Over three million Bangladeshis work across Gulf states, sending home remittance that acts as a lifeline for millions of families and a critical pillar for our foreign exchange reserve. Prolonged instability in the region threatens workers' safety and the economic viability of the communities that depend on them. History shows that when Gulf economies contract, Bangladeshi workers are among the first to bear the burden through reduced wages, job losses, and forced returns.

Bangladesh does not have the luxury to adopt a wait-and-see approach. Our foreign policy establishment must immediately assess exposure across three fronts: fertiliser import dependence and alternative sourcing options; energy import diversification; and diplomatic engagement to protect the interests of our workers abroad.

Here, history offers both inspiration and obligation. Late President Ziaur Rahman was a pioneer in building Bangladesh's diplomatic bridges with the Middle East, cultivating relationships of trust and mutual respect that

opened doors for our workers and traders for decades to follow. That legacy is not merely a matter of pride; it is a living diplomatic asset. Prime Minister Tarique Rahman, as his son and political heir, carries both the name and the moral authority that commands genuine warmth across Gulf capitals. A proactive diplomatic initiative from Dhaka at this moment—to signal solidarity with affected partners, safeguard Bangladeshi workers,

and secure supply chain continuity—would be received not as the intervention of a small nation seeking favours, but as the principled engagement of a trusted friend. That is a valuable form of leverage, and it should be used.

This is, however, not a call for Bangladesh to take sides in a geopolitical conflict that is not ours to resolve. It is a call for proactive statecraft—the kind that small and medium

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A map showing the Strait of Hormuz is seen in this illustration taken on March 23, 2026.

VISUAL: REUTERS

economies must practise to shield their citizens from storms they did not create. And in that endeavour, our foreign ministry, commerce ministry, and the Bangladesh Bank all must be working in coordination, not in silos.

The Iranian conflict is a reminder that in a deeply interconnected world, no country is truly insulated from the consequences of war. Food security, energy stability, and the welfare of our diaspora workers are not secondary concerns—they are at the core of national interest. Bangladesh has navigated global shocks before. But this time, navigation requires a firm hand on the wheel. This is the moment for our policymakers to demonstrate that they are watching, thinking, and acting, before the crisis further affects our fields, markets, and migrant households.

The cost of inaction is one we cannot afford.

Proper budget utilisation is key to reforming the health sector



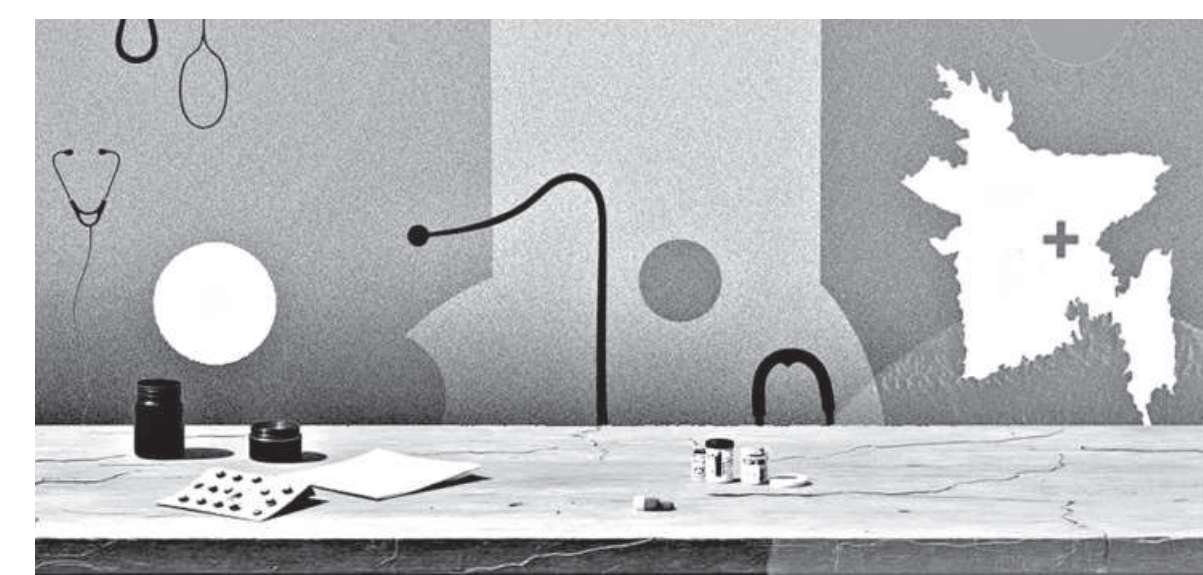
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When it comes to our healthcare sector, the BNP government faces the dual challenge of meeting the high public expectations set by its election manifesto while ensuring that the existing system delivers tangible benefits immediately. Quick, practical improvements in service delivery can build trust and create space for deeper, structural reforms, but long-term change requires careful planning. Striking the right balance between urgent action and sustainable transformation is therefore essential.

One of the most serious structural challenges facing the health sector today is the persistent inability to utilise or spend the allocated budget efficiently. The current resource allocation for the health sector is only one-third of what is ideally required for an effective system. This initial shortfall is further compounded by a fragmented budgetary process; during mid-year reviews, approximately one-third of this already inadequate allocation is typically slashed due to a lack of implementation progress. Of the remaining funds, another third often goes unspent, and of the portion that is finally utilised, nearly one-third is lost to systemic waste. Consequently, only about one-third of the total proposed health sector budget is effectively utilised for public service delivery. At every stage, resources are lost in an invisible web of inefficiencies. To break this cycle and justify a larger budget, the government must demonstrate a vastly improved capacity to spend effectively and create clear, productive areas for expenditure.

The root causes of this poor budget utilisation are well known. The management of the health sector remains highly centralised, and government health services operate under general civil service rules. Recruitment, posting, transfer, procurement, and maintenance are all governed by bureaucratic procedures that are ill-suited to the dynamic and time-sensitive nature of hospital operations. Hospitals



FILE VISUAL: SALMAN SAKIB SHAHRIYAR

require rapid decision-making daily, yet they are constrained by rigid rules that slow down or prevent timely action. As a result, due to the shortage of necessary manpower and equipment, hospitals are often forced to provide services with half or even less preparation.

Hospital services also depend heavily on several other government agencies, including the Essential Drugs Company Limited, the Directorate of Health Engineering, the Public Works Department, the Central Medical Stores Depot (CMSD), the National Electro-Medical Equipment Maintenance Workshop and Training Center, and the Transport and Equipment Maintenance Organisation (TEMO). The inefficiencies, delays, and limitations of these institutions affect the entire health sector. Moreover, the existing Public Procurement Act (PPA) and its rules are not tailored to the specialised requirements of healthcare. Without a clear understanding of this complex ecosystem and targeted reforms, simply increasing the health budget will not resolve the underlying crisis.

To make the healthcare system more effective in the short term,

the government must urgently enhance its capacity to utilise allocated funds. As pledged in the election manifesto, the process of raising health sector allocation to five percent of GDP should begin immediately. Five percent of GDP currently equates to approximately Tk 300,000 crore—more than 40 percent of the national budget for

operational flexibility.

The fragile state of the national economy, compounded by global uncertainties—particularly the ongoing conflict involving Iran, Israel, and the United States—poses serious challenges. Any prolongation or escalation of the conflict could severely damage the economy. With government revenue under pressure

and expenditure demands rising, securing additional resources for health will not be easy. In this context, the Ministry of Health must prioritise the maximum and most effective utilisation of whatever is allocated.

While comprehensive administrative reforms and decentralisation are ultimately necessary, several practical short-term measures can deliver quick improvements. One such step is the urgent establishment of a dedicated help desk within the Directorate General of Health Services, staffed with procurement specialists to provide expert advice and technical assistance to hospital procurement committees, thereby speeding up processes and reducing wastage.

Equally important is the need to strengthen the capacity of supporting institutions. To enhance transparency and accelerate their performance, a specialised monitoring cell should be established under an additional secretary of the health ministry.

Furthermore, to translate the commitments of the election manifesto and the recommendations of the Health Reform Commission into reality, a high-level implementation

cell should be formed under the Prime Minister's Office (PMO). This cell, comprising relevant experts, can drive key initiatives including the launch of integrated primary healthcare services, the establishment of a national health commission, and a national health fund. It can also move to relax or exempt the health sector from rigid Public Financial Management rules, initiate the development of an integrated digital platform for unique health IDs, electronic medical records, and Shareable Health Records (SHR), and introduce a ceiling-based Family Health Card to cover outpatient, inpatient, critical illness, and emergency accident-related care.

Major reforms of this scale cannot be effectively led by the health ministry alone. Strong leadership and coordination from the PMO will therefore be indispensable. The time has come for the government to pursue a balanced strategy that gives equal importance to immediate, visible improvements and sustainable, long-term transformation. If it can advance steadily on both fronts, the health sector can achieve an effective and lasting change that truly serves the people of Bangladesh.

Trading Corporation Of Bangladesh.
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Notice
Tender preparation including registration in e-GP system

Trading Corporation of Bangladesh (TCB) is conducting local/international procurement following the government procurement rules to sell essential commodities (edible oil, sugar, lentils, dates, chickpeas, potatoes and onions) among 10 million low-income TCB Card holders according to the direction of the Ministry of Commerce. Presently, the procurement process is being conducted through manual system. According to Public Procurement Rules, 2025 all government procurements have to be completed through e-GP system. Therefore, TCB will conduct local and international procurement activities through e-GP system from July 2026. In that context, all local and international business stakeholders/traders/suppliers who are interested to supply goods to TCB are requested to register in e-GP system (www.bppa.gov.bd) and prepare for future tenders (from financial year 2026-2027).

(Signature)
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