

## The Daily Star

FOUNDER EDITOR: LATE S. M. ALI

### The rising cost of a distant war

Iran-US war is worsening our day-to-day economic situation

The prolonged war of choice initiated by the US and Israel against Iran has inflicted severe hardship on millions of already strained working people in Bangladesh and across the world. The situation is approaching a breaking point. Although there was a fragile two-week pause in hostilities, the mutual blockade and counter-blockade imposed by Iran and the US on commercial shipping through the Strait of Hormuz effectively disrupted a vital economic lifeline for countries across the Asia-Pacific that depend heavily on supplies from Gulf nations.

The conflict has not only disrupted global supply chains but also sharply increased shipping costs due to the lack of insurance coverage and the sudden surge in premium rates. Disruptions in oil and gas supplies have led to shortages, rising prices, and long queues at fuel stations in Bangladesh, resulting in lost work hours. The ripple effects are widespread: power generation has been curtailed, factories are either idle or operating at reduced capacity, and the agricultural sector faces mounting difficulties. Farmers are struggling to operate irrigation pumps due to diesel shortages, cannot secure essential fertiliser, and are sometimes being forced to let crops rot in the fields as transportation costs become prohibitive.

This war has come at an especially difficult time for Bangladesh, where ordinary people have already been grappling with repeated inflationary shocks. The lingering effects of Covid pandemic, coupled with domestic political instability, have deepened these challenges. Years of economic mismanagement and corruption under the previous administration, followed by a turbulent political transition and prolonged uncertainty, have further strained the economy. During this period, people have endured currency depreciation and stagnant wages. The finance minister recently said the ongoing conflict has already cost us an estimated \$2 billion.

At the recent World Bank-IMF Spring Meetings in Washington, up to \$150 billion in new financing was pledged to support developing countries most affected by the global energy price shock. Yet, financial leaders expressed concern at being drawn into yet another crisis triggered by geopolitical conflict. Reflecting the seriousness of the situation, the IMF has revised global growth projections downward to 2.5 percent, warning that a prolonged war could push the world economy into recession. The meeting underscored both the limited capacity of global financial institutions to offset such shocks and the urgent need for a resolution to the conflict.

In light of these unusually harsh conditions, a pragmatic policy response is essential. Our government must take all possible steps to ease the burden on low- and middle-income households. Recent increases in cooking gas prices have raised concerns that further price hikes may follow, which would inevitably drive up the cost of essential goods. Policymakers should therefore avoid making overly optimistic or unrealistic claims about inflationary pressures. For example, the commerce minister's statement in parliament on Monday that fuel price hike is unlikely to stoke inflation is not supported by any evidence. A transparent acknowledgment of external factors driving the crisis would likely foster greater public understanding and trust, rather than creating false expectations.

### Can we ever seek justice?

Protect sexual assault survivors, their families from intimidation

Yet another recent incident highlights the lack of security that haunts women and children in Bangladesh. We share the sentiments in Manusher Jonno Foundation's (MJF) statement condemning the attack, vandalism, and threats against the family of a teenage girl in Noakhali's Subarnachar after they filed a case against a madrasa superintendent for attempting to rape her. On Saturday afternoon, a five-minute video of the incident went viral on social media, showing a large group of people attacking a house, with many of them carrying sticks. The victim's family members were seen crying, and the attackers were asking them to withdraw the case. How deep does the rot in our systems go that such groups feel emboldened enough to attack and demand the withdrawal of an attempted rape case?

According to the case statement, when the grandmother of the teenage girl went to visit her in the residential madrasa, the superintendent told the guardian that the girl had been "attacked by an evil power." Then he took the girl to his room under the pretext of performing an exorcism and tried to rape her. When the survivor's family members informed their union parishad's acting chairman, he pursued social arbitration instead of helping the family take legal action. Following the filing of the case around two months after the incident, around 100 people assaulted family members.

Given that such heinous incidents are disturbingly common and frequent across the country—only a month ago, a teenage rape survivor in Narsingdi was abducted and killed for seeking justice—how is it that rape survivors are still not receiving the protection they need? Even more worrying is that, according to the Subarnachar survivor's father, his daughter is not the sole victim of the accused. But others have not come forward due to the fear of social stigma. Of course, mob attacks such as the one this family had to endure will only silence survivors further, especially since police protection after filing a case is next to nil.

All three arms of the state must realise just how systematically unsafe women and children are in Bangladesh. There must be a strict protocol for the police to follow when a rape case is filed, so that survivors do not feel threatened for their lives for seeking justice. Government representatives in union parishads must also be trained to direct survivors to seek legal help, rather than trying to "resolve" through social arbitration.

### THIS DAY IN HISTORY

Hitler admits defeat

On this day in 1945, Adolf Hitler admitted in his Berlin bunker that World War II was lost after failed defences against Soviet forces, concluding that suicide was his only remaining option.

# How poor governance broke our immunisation model



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Bangladesh's Expanded Programme on Immunization (EPI) has long been one of the country's most celebrated public health successes. Built on sustained government commitment, strong development partnerships, and a vast network of frontline health workers, it delivered consistently high coverage and sharply reduced the incidence of vaccine-preventable diseases. For years, it positioned the country as a model for the developing world.

That model is now being undone. The ongoing measles vaccine crisis is not merely an isolated disruption but points to institutional weakening. National vaccination coverage reportedly fell to around 60 percent in 2025, the lowest in nearly a decade, down from 85-92 percent between 2010 and 2022.

Such steep declines do not occur suddenly or without warning. It is not merely due to a logistical problem. It is a failure of governance. Immunisation systems depend on predictable structures: coordinated procurement, stable financing, functioning leadership, and a reliable workforce. When these are disrupted—especially simultaneously—the system breaks down.

For years, vaccine procurement operated under the Health, Population and Nutrition Sector Programme (HPNSP), which provided a clear and functional administrative pathway. Its effective dismantling in 2025, without a credible transition mechanism, represents a critical policy failure. There is little evidence that this decision was guided by broad technical consultation or risk assessment, an omission that is difficult to justify given the stakes.

The consequences were foreseeable: delayed approvals, leadership gaps, and uncertainty in funding flows. These are direct outcomes of institutional disruption and cannot be written off as technical glitches. At the same time, the system failed to confront a growing and highly visible threat: misinformation. Vaccine hesitancy did not emerge overnight either. It intensified during the Covid pandemic and continued to spread, largely unchecked. What was needed was sustained public communication and active counter-engagement. What followed instead was a deafening silence.



The ongoing measles vaccine crisis is not merely an isolated disruption but points to institutional weakening.

PHOTO: MEHEDI HASAN

The impact became evident during the 2025 Typhoid Conjugate Vaccine campaign, where misinformation drove refusal rates high enough to push coverage below herd immunity thresholds in several urban areas. Misinformation does not need active advocates so much as it thrives in the absence of challengers or counterarguments. Equally concerning is the lack of urgency around emerging scientific questions. Why are infants under six months increasingly vulnerable? Are maternal antibodies weakening? Is the virus evolving? These are not just academic concerns; they are central to programme strategy. Yet, they remain insufficiently investigated, reflecting a deeper neglect of research and evidence-based planning.

The system's structural weaknesses are equally stark. Nearly 45 percent of EPI field-level positions in 37 districts remain vacant. These workers operate across roughly 150,000 vaccination centres, which are the backbone of the immunisation programme. Without them, coverage declines are inevitable.

analysis by Unicef, WHO, and Gavi suggests that hundreds of thousands of children remain under-immunised, particularly in urban areas. The gap is not just in delivery but also in visibility. Fragmented data systems that exclude private and informal providers create blind spots, preventing timely intervention.

This pattern is not confined to immunisation. A parallel regression is underway in family planning—another sector once considered a global success. Bangladesh reduced its total fertility rate from 6.3 in 1975 to 2.3 by 2022. That progress is now reversing, with the rate rising to 2.4. As per a recent report citing data from the Directorate General of Family Planning (DGFP), more than one-third of the 487 upazilas in the country have run out of all types of government-supplied contraceptives. Condoms are out of stock in 397 upazilas, while at least 220 upazilas have run out of oral pills. Meanwhile, implants, intrauterine devices (IUDs), and injectables are out of stock in all upazilas. The causes are familiar: workforce

protect essential public health systems from administrative disruption. Dismantling functioning systems without tested alternatives is far from reform. Such steps only scale up the risk to a national level. And we are now paying that price.

The priority now must be to restore institutional stability, re-establish clear procurement pathways, urgently fill workforce gaps, invest in research and surveillance, and rebuild public trust through sustained communication. Just as importantly, critical health systems must be insulated from abrupt policy shifts and administrative discontinuity. If addressed now, the broader system stress remains manageable. If not, they will escalate into crises that are far more costly, both financially and in human terms.

The narrative of success that once defined Bangladesh's health sector was built over decades. It is now at risk of being undone in a matter of years. Unless there is a course correction, this will not be remembered as a temporary setback, but as a preventable reversal.

## Nutritional literacy can reduce healthcare costs



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The proverb "Health is wealth" is widely quoted but remains overlooked in practice in our society. While our national curriculum and social discourse place immense weight on academic excellence and professional degrees, we have systematically ignored a vital component of human development: food education. As we strive to become a developed nation, it is imperative to recognise that nutritional literacy is a fundamental necessity that should be integrated into every household and classroom.

From a legal standpoint, the right to health and food is intrinsically linked to the right to life guaranteed under Article 32 of the Constitution of Bangladesh. However, the right to food should not merely mean the right to a full stomach; it must encompass the right to "safe and nutritious food."

While we have the Safe Food Act, 2013, and the Consumers' Right Protection Act, 2009, these laws primarily focus on the supply side, regulating producers and sellers. We are missing the "demand side" of the equation: educated consumers. Without food education, a citizen

cannot exercise their right to choose what is healthy for their body. The legal framework provides protection, but literacy provides the power to utilise that protection. If a citizen cannot read a nutritional label or identify harmful additives, the laws protecting them remain partially ineffective. For instance, Section 44 of the Consumers' Right Protection Act deals with misleading advertisements, but without food education, how can a consumer distinguish between a genuine health claim and a marketing gimmick?

In Bangladesh, we have made significant strides in increasing the general literacy rate, but that has not translated into better nutritional literacy. Even highly educated families often unknowingly consume excessive amounts of sugar, trans fats, and sodium-rich processed foods simply because they lack basic knowledge of food science. This ignorance leads to a rising tide of non-communicable diseases (NCDs) like diabetes, hypertension, and cardiovascular issues.

According to World Health

Organization, NCDs now account for a staggering 67 percent of total deaths in Bangladesh. This is an alarming figure for a nation like ours. We are suffering from what experts call "hidden hunger," where the stomach is full, but the body is starving for essential micronutrients. This gap can only be bridged through systematic food education that starts from the dinner table and extends to the classroom. Our education system teaches us how to solve complex equations, but fails to teach us the chemistry of what we consume daily.

In this regard, Bangladesh can look towards countries like Japan for inspiration. Japan enacted the Basic Act on Shokukoku (food and nutrition education) in 2005, making food education a mandatory part of the school curriculum. It teaches children not just what to eat, but the history, culture, and science behind their food. Similarly, in Finland, school meals are used as a pedagogical tool to teach balanced dieting. If these nations can prioritise food education to build a resilient workforce, why shouldn't Bangladesh, a nation with a large young population, do the same? While the country's National Food and Nutrition Security Policy 2020 outlines several strategic goals, the implementation lacks grassroots educational engagement. We need a curriculum that reflects our local dietary needs and addresses the specific challenges of food adulteration prevalent in our markets.

If health is wealth, then a sickly population is a national liability.

When a family spends a large portion of its income on medical bills due to preventable diet-related illnesses, it drains the family's savings and, by extension, the national economy. The burden on our public healthcare system is immense. By making food education mandatory, we can shift our national healthcare focus from "curative" to "preventive." Teaching a child how to identify balanced nutrients or the dangers of food adulteration is just as important as teaching them mathematics or science. Nutritional literacy is, therefore, a long-term investment in our human capital that will reduce the national expenditure on healthcare.

Therefore, the government should consider incorporating a comprehensive food and nutrition module into the primary and secondary school curriculum. This shouldn't just be a theoretical chapter but a practical guide. Furthermore, community-based awareness programmes should be launched through legal aid clinics and local government bodies to reach homemakers, who are primarily responsible for a family's diet.

We need to empower our citizens to demand safe food, not just as a matter of preference, but as a constitutional right. Food education is the first step towards a society where health is truly prioritised as our greatest wealth. It is time to treat food education with the same urgency as our general education system. Health is, after all, the only wealth that allows us to pursue all other forms of prosperity.