

Country Report

Bangladesh

Brief Background

This *working* report summarises the range of measures taken by Bangladesh in response to the COVID-19 outbreak that can be sourced to a law or policy. As of April 15, 2021, Bangladesh reported 703,170 confirmed cases of COVID-19 and 9,987 deaths. As of 10 April 2021, a total of 6,010,824 vaccine doses were administered.

For more information, visit the COVID-19 Law Lab.

State of Emergency/Public Health Emergency

The Prime Minister of Bangladesh announced <u>a series of measures</u> to control the spread of the virus including a <u>complete lockdown from 24th March 2020 to 6th April 2020</u> after considering the emergency of the situation in consultation with the Ministry of Disaster Management and Relief, the army chief and other officials. For an effective response during the public health emergency the <u>Infectious Diseases (Prevention, Control and Elimination) Act, 2018</u> was invoked and the relevant sections were laid out via an <u>official press release</u>¹. Some of the important sections of this Act that relates to the public health emergency and subsequently brought into force are <u>section 11(1)</u> on containment zone and the restrictions, and sections <u>24(1), (2), S.25(1)</u> and (2) that provides for administrative and criminal penalties for disobeying orders.

Access to Medicine and Intellectual Property

The Ministry of Health and Family Welfare (MoHFW) in April 2020 <u>outsourced²</u> essential medical services such as medical technologists and laboratories as per the <u>Policy for Outsourcing</u> <u>of Services, 2018</u>. The <u>Public Procurement Act, 2006</u> was also invoked for the procurement of

¹Law-enforcement-in-the-public-interest-to-deal-with-the-corona-virus, 12th March, 2020

²Outsourcing-of-Medical-Technologist-for-Emergency-Medical-Services, No.606, 28th April, 2020

medical supplies and other health services. The MoHFW issued a <u>separate guideline</u> for medical care of pregnant women and newborn children and mandated the uninterrupted supply of medicines, logistics and commodities including Personal Protective Equipment (PPE) during the pandemic.³

The <u>Bangladesh Preparedness and Response Plan for COVID-19</u> specified the responsibility of the MoHFW in identifying the risks and challenges in the supply chain and providing solutions in consultation with all the members; widening opportunities for local-level production and long-term supply of PPE; liaison with the NBR/Customs/Ministries in simplifying the importation process of required medical commodities; and managing the Global Supply Chain System in the local context.⁴ The <u>Plan</u> also mentions that the Central Medical Store Depot (CMSD), alongside the Directorate General of Health Services (DGHS) logistics working group, has a critical role to play in the supply chain management in Bangladesh.

Under the <u>COVID-19 Supply Chain System (CSCS)</u>, a supply portal acts as a purpose-built tool to facilitate requests for critical supplies including personal protective equipment (PPE), diagnostics, and clinical medicine from national authorities and all implementing partners supporting the COVID-19 national response. Any approved stakeholder having an active role in the COVID-19 preparedness and response action plan is eligible to place a request on the portal. This includes government agencies, UN agencies, and NGOs.⁵

In Bangladesh, Beximco Pharmaceuticals was granted exclusive distribution rights for the COVID-19 vaccine procured from the Serum Institute of India. To this end, a tripartite agreement was entered into between the Bangladesh Government, Beximco Pharmaceuticals and Serum Institute of India for the supply of the Oxford University-AstraZeneca Vaccine.⁶

Vaccine

³ National-guideline-for-providing-essential-maternal-newborn-and-child-health-services-in-the-context-of-covid-19, Version 1.2, 18h May, 2020

⁴ Bangladesh-Preparedness-and-Response-Plan-for-COVID-19, July 2020, p:44

⁵ Bangladesh-Preparedness-and-Response-Plan-for-COVID-19, July 2020, p: 42

⁶Corona-Vaccine-use-plan, No.4867, 24th December, 2020

On 7th January 2021, the Directorate General of Drug Administration (DGDA) issued Emergency Use Authorization (EUA) to Oxford-AstraZeneca vaccine manufactured by the Serum Institute of India.⁷ Health workers, front-line workers, immune-compromised patients, the elderly, those with comorbidities, education workers and public transport workers were identified to receive the vaccine on priority.⁸

On 11th January 2021, the Ministry of Health and Family Welfare ordered the setting up of a <u>COVID-19 vaccine emergency response team</u> for an effective vaccination program.⁹ To ensure the safe use of the vaccine and prevent adverse effects, the Directorate General of Drug Administration issued a <u>protocol</u> that included guidance on timely detection and reporting of adverse events, investigation and assessment of potential risks, and engagement and collaboration with stakeholders to mitigate the risks.¹⁰

Disease Surveillance and Technology

On 23rd March 2020 to facilitate contact tracing, the MoHFW issued an <u>order</u> to ascertain addresses of all individuals including family members, co-workers and health workers who came in contact two days before and 14 days after the onset of symptoms of an identified COVID-19 patient. The contact tracing process involved interviewing suspected COVID-19 patients and identifying individuals they came in contact with, sorting individuals for collection of respiratory samples based on the seriousness of the condition, and taking necessary steps for further prevention of the infection.¹¹

In July 2020 the government laid down an extensive <u>surveillance mechanism</u> that included the screening of passengers for COVID-19 at all 28 points of entry including air, sea and land ports, screening through self-declaration health forms, visual observation for respiratory-illness like

¹⁰Pharmacovigilance-or-Adverse-Effect-Following-Immunization-Protocol-for-Covid-19-Vaccine, January, 2021, p:5

⁷Pharmacovigilance-or-Adverse-Effect-Following-Immunization-Protocol-for-Covid-19-Vaccine, January, 2021, p:1

⁸ Pharmacovigilance-or-Adverse-Effect-Following-Immunization-Protocol-for-Covid-19-Vaccine, January, 2021, p:1

⁹ Covid-19-vaccine-emergency-response-team-2021, No.58, 11th January 2021

¹¹Guidelines-to-follow-for-COVID-19-detection-test, 23rd March, 2020

symptoms, body temperature recording through thermal scanners, existing sentinel surveillance systems for influenza as well as existing community networks, web apps, as well as telecombased reporting via a number of hotlines.¹²

In April 2020, a leading digital service provider of the country, <u>Robi, came forward with its</u> <u>expertise in Data Analytics to support the government</u> in combatting the pandemic by assisting the government in making data-driven decisions.

Isolation and Quarantine Measures

On 16th March 2020, the MoHFW issued a <u>circular</u> on isolation and quarantine of foreign returnees. The circular mandated home quarantine for 14 days. Violation of home quarantine attracted penalties under the <u>Infectious Diseases (Prevention, Control and Elimination) Act</u>, <u>2018</u>.¹³ Obstructing or impeding the director general, the civil surgeon or any authorized officer in discharging their duties attracted imprisonment up to three months, or a fine under section 25 of the Act. ¹⁴

The MoHFW in a <u>guideline</u> issued on 15th March 2020 recommended home quarantine_of patients with mild symptoms. On 23rd March 2020, the Ministry published another <u>guideline</u> on COVID-19 testing for individuals in quarantine.¹⁵ On 31st March 2020, the MoHFW issued a guideline for <u>Persons with Disability which</u> provided financial compensation to families and caregivers who may need to self-isolate along with a person with a disability.¹⁶

On 7th December 2020, with the onset of the second wave, the Directorate General of Health Services passed an <u>order</u> for quarantine of passengers arriving from abroad by air, land or sea. It was made mandatory for all passengers to submit COVID-19 negative certificate within 72 hours of boarding / immigration by land. Travelers with symptoms were directed to be quarantined in government centers. While mandating institutional quarantine, the order relaxed the requirement

¹² Bangladesh-Preparedness-and-Response-Plan-for-COVID-19, July, 2020, p:24-25

¹³Home-Quarantine-for-foreign-returnees, No.445, 16th March, 2020

¹⁴ Infectious Diseases (Prevention, Control and Elimination) Act,2018, Act no. 61 of 2018

¹⁵Guidelines-to-follow-for-COVID-19-detection-test, 23rd March, 2020

¹⁶Disability-considerations-during-the-COVID-19-outbreak, 31st March, 2020

for a negative certificate for Bangladeshi nationals who were either deported or forced to return home.¹⁷

Movement and Distance Restrictions

The first lockdown (also termed as a 'national holiday'¹⁸) was <u>ordered</u> by the government from the 26th March 2020 till the 4th April 2020. Exceptions to the lockdown included food and drug stores, hospitals and emergency services. The army was deployed to assist the administration in enforcing social distancing and other precautionary measures. All social, political and religious gatherings were banned during the lockdown. The Deputy Commissioners were directed to provide food and financial assistance to the poor.¹⁹

The Cabinet Division of the Bangladeshi government imposed another lockdown on <u>6th May</u> <u>2020</u> and on the 31st May 2020 the lockdown was <u>extended</u> and a night curfew imposed from 8p.m. till 6a.m..²⁰ The penalty for violation of the curfew included either imprisonment or a fine under section 24 of the <u>Infectious Diseases (Prevention, Control and Elimination) Act, 2018</u>. During this lockdown, the movement of individuals from one district to another was strictly regulated by setting up check posts at the entrances and exits of each district. Masks were made mandatory and the government ordered the closure of markets, shops and malls by 4 p.m. Law and order, state security and intelligence agencies and emergency services, such as relief distribution, health care, electricity, water, gas and other fuels, fire services, port activities (land ports, river ports and seaports), telephone and internet, and other essential services were exempted.²¹

The night curfew was again <u>extended</u> from 16th June till 30th June 2020. All government and private offices were closed in the red zone and operated in a limited capacity in the yellow and

¹⁷Notification-regarding-quarantine-arrangements, No.87, 7th December, 2020

¹⁸ Bangladesh-Preparedness-and-Response-Plan-for-COVID-19, July, 2020, p:14

¹⁹ Press briefing on Lockdown, 23rd March, 2020

²⁰ Notice-regarding-infectious-diseases-prevention-control-and-elimination-act-2018, No.7, 30th May, 2020

²¹ Extension-of-conditional-activities-and-movement-ban-to-prevent-the-spread-of-COVID-19, No.109, 28th May, 2020

green zone.²² Another night curfew from 10 p.m. till 5 a.m. was <u>imposed</u> from 4th August till 31st August.²³

In March 2020 the government issued an <u>order</u> cancelling leave of all health workers in the country²⁴ and on 24th March another <u>order</u> made it mandatory for all health workers to be present at their post during the first lockdown starting from 26th March 2020 as well as on the national festival of <u>Eid²⁵</u>. The government made <u>accommodation arrangements for doctors and health</u> workers near their places of work.²⁶

With the lifting of the ban on inter-district movement, the MoHFW, to prevent the rise of the number of cases, made the <u>use of masks</u> mandatory in public places.²⁷ On 12th November 2020, a <u>no mask no entry</u> policy was adopted for employees of the Department of Health.²⁸ The Department of Health also issued detailed <u>physical distancing guidelines</u> and classified containment zones, as red, yellow and green zones.

A <u>Standard Operating Procedure for the burial of the dead</u> was published and included detailed guidelines on physical distancing, use of PPE, rules on disposal of the corpse, and guidelines for family members.²⁹

A <u>travel advisory</u> issued in March 2020 discouraged travel to and from COVID-19 affected countries, unless essential. Civil Aviation Authority of Bangladesh issued a <u>circular</u> on 22nd July 2020 making COVID-19 negative certificate mandatory for travelling abroad except for diplomats, members of the UN, heads of international organizations, foreign investors and foreign passport holders who stayed in Bangladesh for less than 14 days.³⁰

²² Extension of Conditional Curfew, No. 111, 15th June, 2020

²³ Operation-and-movement-to-prevent-the-spread-of-Covid-19, No.140, 3rd August, 2020

²⁴Cancellation-of-leave-until-further-notice-of-staff-of-all-departments-directorates-and-agencies-of-the-

Department-of-Health-Services-to-prevent-Covid-19, No.469, 19th March, 2020

²⁵Order-of-mandatory-presence-of-essential-workers-during-Eid, No.159, 13th July, 2020

²⁶Accommodation-for-doctors-and-staff-near-hospitals, No.521, 29th March, 2020

²⁷ To-comply-with-health-rules-and-to-increase-awareness-about-the-use-of-mask, No.492, 27th July, 2020

²⁸ Rules-for-all-health-workers-and-employees-of-Department-of-Health, No.4149, 12th November, 2020

²⁹ Standard-Operating-Procedure-for-safe-burial-and-management-of-COVID-19-affected-dead, 7th April, 2020

³⁰ Requirement-of-"COVID-19 Test Certificates"-for-passengers-to-travel-abroad, No.3226, 22nd July, 2020

To assist the <u>forcibly displaced Myanmar nationals</u>, the government established additional isolation and treatment centers within the existing as well as makeshift healthcare facilities.³¹

In preparation for the second wave, the MoHFW issued an <u>order</u> on 5th November 2020 ordering all government and private hospitals not to refuse COVID-19 positive patients for treatment.³² With the onset of the second wave of the COVID-19 the office of the Prime Minister <u>ordered</u> another lockdown on 29th March 2021 prohibiting all public gatherings in highly infected areas; requiring 14 day quarantine of international travelers; ordering the closure of all educational institutions and coaching centers; ordering all government and non-government offices, institutions, and industrial factories except those engaged in emergency services to operate at 50 percent capacity; and restricting occupancy of hotels and restaurants to 50 percent capacity.³³

Others

The <u>Infectious Diseases (Prevention, Control and Elimination) Act, 2018</u> prohibits the deliberate spread of any misinformation regarding COVID-19 and a violation attracts penalty including either imprisonment up to 2 months or a fine or both.

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³¹ Bangladesh-Preparedness-and-Response-Plan-for-COVID-19, July, 2020, p:49

³² Necessary-preparation-and-action-to-be-taken-to-deal-with-the-second-wave-of-Covid-19, No.96, 5th November

³³ Government-decisions-to-control-the-current-situation-of-corona-infection, No.124, 29th March, 2021

³⁴ Consultant, O'Neill Institute for National and Global Health Law, Georgetown Law and Co-Founder, <u>Society for</u> <u>Democratic Rights</u>, New Delhi.

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