RESEARCH COVID-19

















COVID-19 is expected to disproportionately affect Bangladesh's poor and most vulnerable, including informal slum settlement residents, the rural poor and extreme poor, sexual minorities, ethnic minorities, refugees, persons living with disabilities, sex workers, domestic workers, factory workers, daily-wage earners, and so forth. Without comprehensive mitigating measures, these groups will be among the worst affected from a personal, social, health and economic perspective. It is therefore of critical importance for immediate research to be conducted for informing and providing appropriate insights into: (1) the types of decisive action and policies that must be undertaken to blunt the impact in these communities, and (2) the designing of short, medium, and long-term rehabilitation programs.

The School, with its large multidisciplinary team of researchers comprising of epidemiologists, medical anthropologists, anthropologists, biostatisticians, development economists, health economists, statisticians, health policy and health system experts,

implementation researchers, nutritionists, doctors and social scientists, who are actively working together to conduct research in many vulnerable communities and populations, firmly believe that the pandemic is a socio-economic phenomenon as much as it is a biological one. Our aim, therefore, is for a comprehensive approach to understanding people's vulnerability to illness and disease, perception and knowledge about COVID-19, level of comprehension and acceptance of the preventive messaging, access or barriers to health care, impact on behaviors and fears, stigma, influence of cultural norms and values, and the structural, social, political and economic realities of their everyday lives.

To this end, the School is carrying out rapid large-scale surveys, qualitative case studies, and short focused ethnographies with diverse communities. Research briefs with key findings will be regularly posted on our website with the hope that the evidence documented will be of critical value for adapting and improving our national response.

Current Ongoing Research

Vulnerable Populations

JPG COVID-19 Rapid Survey in Urban and Rural Sites

Atonu Rabbani, Associate Scientist, Malabika Sarker, Professor & Associate Dean, Malay Mridha, Professor Tanvir Hasan, Associate Professor, Sabina Faiz Rashid, Professor & Dean and JPG research team

The 2014 census conducted by the Bangladesh Bureau of Statistics (BBS) states 2.23 million people are currently living in slums across the country, and the number of slum dwellers has increased rapidly over the years by 60.43 percent in 17 years as of 2015. Dhaka, with a current population of around 21 million people, is one of the fastest growing cities in the world. Between 1990 and 2005, the city doubled in size – from 6 to 12 million. By 2025, the U.N. predicts Dhaka will be home to more than 20 million people — larger than Mexico City, Beijing, and Shanghai. Everyday 1000 migrants enter Dhaka in search of employment as garment workers, daily laborers, rickshaw pullers, maids, informal sector workers and so forth. Chittagong, the main port city and the second largest urban center, has experienced similar trends with the number of recorded slums growing from 186 in 1997, to 2216 in the 2014 Slum Census (BBS 2015).

With 24.3 percent of the population living under the national poverty line and a large portion of the

workforce involved in low skilled daily wage labor, the implications of an extended social and economic shutdown will, needless to say, be far reaching. Enforced measures are placing immense additional pressure on the urban poor as they face immediate looming concerns of survival due to curtailment of their livelihoods. Many have resorted to borrowing from money lenders and cutting back on consumption. They also shared that the messaging of social distancing and of washing of hands was unrealistic and would not resonate given the stark reality of their dwellings where space and availability of water are luxuries beyond their reach.

A world bank study in 2014, found that about 47 million people still live in poverty and 70 percent of them live in rural areas. Rural poverty continues to be significantly higher and more extreme than urban. Extreme poverty continues to be a rural phenomenon and the poorest in the poorest regions are also less able to cope with shocks such as natural disasters. Rural poverty and food security thus remain critical development challenges, and worries about their health and services in the context of the pandemic is an added burden to their existing vulnerabilities.

The survey will draw samples from several nationally representative surveys as well as surveys carried out by the School over the past year and a half addressing specific population groups such as RMG workers, informal settlement residents, rural poor, adolescents and adult men and women among others. The survey is being conducted via phone interviews, with follow ups,

towards understanding the possible effects of the pandemic on several domains of a household or family such as consumption, income, health, coping strategies, psychological well-being, and gender issues. The survey

will have a dynamic approach in the sense that the questions and approaches will be modified based on current understandings and relevant emerging issues related to the crisis.

Lived Experiences and the Impact of Shutdown of the People Living and Working in Dhaka Urban Slums during COVID-19

Bachera Akhter, Assistant Director, Centre for Gender and SRHR, and Sabina Faiz Rashid, Professor & Dean and ARISE Research team

The ARISE Bangladesh team is conducting a rapid appraisal with 80 case studies, documenting the lived experiences of slum dwellers in Dhaka city. Community people residing in seven selected slums across both Dhaka North and South City Corporations are being interviewed via a series of telephonic interviews for this purpose. NGO community health workers and frontline workers, who are also members of the respective

community, providing services on the COVID-19 response in those selected slums are also being interviewed. The main focus of this research is to investigate health and wellbeing of the marginalized and vulnerable people residing in the urban informal settlements, understanding current practices, behaviors, local beliefs of COVID-19, and the impact on livelihoodsand their coping mechanisms.

ARISE is a multi-country multi-disciplinary action research working with and focusing on the overall health and wellbeing of people living and working in urban informal settlements. The partners of ARISE are Liverpool School (UK), LVCT (Kenya), COMAS (Sierra Leone), APHRC (Kenya), SDI (India, Kenya and Sierra Leone), SLURC (India), George Institute (India), and York University, Glasgow University and IDS (UK).

Transgender Communities

Tasfiyah Jalil, Coordinator, Regional Platform on Gender and SRHR, Mostafizur Rahman, Assistant Coordinator, CREA project, Maruf Rahman Research Assistant

The transgender group of people are commonly known as 'Hijra' in South Asian countries. Their lack of education compounded by the stigma discrimination surrounding their non-conventional lifestyles has made it next to impossible for them to be employed in any conventional occupation. There have been cases where some members obtained regular jobs but were later dismissed when their employers learnt about their identities. Furthermore, Hijras are often victims of verbal, physical and sexual abuse in the workplace, for which they seldom receive any justice. Many of the members resort to sex work for their livelihood and face physical and verbal abuse and harassment from law enforcers and clients. They also collect money from shops, work in beauty parlors, and dances at paid for events. Stigmatized as criminals or as deviants, many have had to develop their own networks of trust which have been severely affected from the self-isolation, sequestration of the vulnerable, and confusion and fears regarding existing public health information.

The shutdown has severely curtailed if not brought the earning sources of the Hijra community to a complete halt. Initial findings from a series of in-depth interviews with 22 members indicate that the community is even being shunned from the various relief initiatives by government bodies, private organizations, mosques, and well-off families in their locality. Some expressed the view that the general public perceived them to be carriers of the virus resulting in many refraining from venturing outside their homes during this time.

Street workers: Uncertainty in the Context of Panic and Fears

Aisha Siddika, Senior Researcher, and Anuskha Zafar, Research Fellow

Focused micro-narratives, conducted through repeated phone interviews, are being documented of adolescents and young adults who work as street peddlers in Dhaka city. The study is looking at the ways in which the pandemic and shutdown are affecting their mental and emotional health, exploring their social behaviors and

any changes effected, their current practices, perceptions of stigma, access to food, income, and basic everyday survival. Many have shared their deep anxieties with regard to meeting rental payments and managing their families, who on average number between 5-7 members crowded into small one room slum dwellings. With daily wage earnings at a standstill, the fears of basic survival tend to overshadow the health implications of managing prevention in overcrowded spaces, where access to water and sanitation is dismal at best.

Mental and Emotional Well-Being of Residents in Informal Urban Settlements

Bachera Akhter, Assistant Director, Centre for Gender and SRHR, Kuhel Islam, Senior Coordinator and Sabina Faiz Rashid, Professor & Dean and Arise Research Team

Mental and emotional well-being is currently being negatively amplified under the current COVID-19 environment, with poorer working adolescents and youth left without a daily wage. A recent systematic review led by icddr,b found the overall prevalence of mental disorders in Bangladesh is between 6.5 to 31% among adults, with psychiatric and psychogenic disorders such as depression, anxiety and neurosis

most commonly reported among the vulnerable young population in urban slums. Mental disorders was much higher in overcrowded urban communities than rural ones, and among the poor, particularly women.

While the Government of Bangladesh has implemented policies and programs to address mental and emotional well-being, it remains even in the best of times a neglected area, and more so now under the present pandemic situation. The School in partnership with the ARISE Bangladesh team and Imperial College (UK), is carrying out rapid appraisal interviews with informal urban settlement residents, for sharing with service delivery organizations in the hope that it will contribute to designing appropriate interventions that can better meet the mental and emotional needs and challenges of these communities.

Stories of the Rohingya Refugees

Kaosar Afsana, Professor, Saira Parveen Jolly, Senior Research Fellow and Mahmuda Akter Sarkar, Qualitative Data Manager,

The Rohingya population have faced decades of systematic discrimination, statelessness and targeted violence in Rakhine State, Myanmar. As of January 2019, over 900,000 stateless Rohingya refugees are residing in Ukhiya and Teknaf Upazilas with the vast majority living in 34 extremely congested camps. The largest single site, the Kutupalong Balukhali Expansion Site, hosts approximately 626,500 Rohingyas. While the overall humanitarian response endeavor reports that the

conditions in the camps have achieved stability, the severity of the crisis and the limits on humanitarian programming mean that activities remain, more or less, oriented towards meeting immediate needs. The COVID-19 pandemic has added further complexity to the operational challenges involved in the response. The spread of the virus within the camps would no doubt lead to an unmanageable tragic and catastrophic human disaster of immense proportions. Rapid case stories are being collected to understand social behaviors and changes in practices if any, the stigma associated with the virus, the concept of "social distancing", and their overall understandings of the pandemic itself.

Health Systems and Service Delivery

In Bangladesh, healthcare is offered either through government-run hospitals or through privately-run clinics. Bangladesh is still lagging in health care services for the poor as well as the affluent. The most critical challenge faced by the health system in Bangladesh is in the area of human resources, with the 2007 Bangladesh Health Watch report stating a staggering shortage of over 60,000 doctors (the current figure stands at 31,000 physicians), and a deficit of almost 140,000 nurses. Moreover, Bangladesh has one of the worst

nurse-physician ratios in the world. Eighty percent of the population still seek their first line of care from informal healthcare providers such as traditional healers, faith healers and community health workers. Absenteeism, inefficiency, and weak governance are common traits within the current health infrastructure. Considerable challenges remain in improving the population health status, reducing health inequalities, improving quality of care and public satisfaction with healthcare, and increasing the efficiency and sustainability of service-delivery agencies. This fragile situation has considerably worsened in the context of the Pandemic.

Perspectives of the Frontline Health Workers Regarding Personal Safety Measures

Syed Masud Ahmed, Professor and Centre for Health Systems and UHC Research team

The Government Institute of Epidemiology Disease Control and Research (IEDCR) has recently stated that community transmission of COVID-19 has started in Bangladesh but within a handful of clusters. Some health experts fear that the extent of the transmission is far greater given the paucity of testing across the country. There has also been anecdotal evidence of patients who have not been forthcoming about their recent foreign travel history or their association with persons coming from COVID-19 affected countries. Added to this is the woeful supply of appropriate personal protective equipment for medical personnel to attend to COVID-19 suspected or confirmed patients. As a result, several medical staff members from doctors to nurses in different hospitals have become COVID-19

positive. Media reports indicate that absenteeism of medical staff have increased while patients with respiratory symptoms are being denied treatment due to the general fear amongst the medical community of getting infected.

Given the above worrying scenario, it is imperative that the frontline health workers comprising of doctors, nurses, laboratory technicians, supporting staff and so forth in emergency, out-patient, and in-patient departments be equipped with all necessary amenities and personal protective equipment in order for them to tend to the prevailing medical system. Failure to do may lead to further weaking of an already fragile health system.

A quick survey is being undertaken to better understand the ground realities and gage the morale and motivations levels of health care professionals in this situation. It is hoped that the information will help in evidence-based advocacy with the government and relevant stakeholders.

Documenting the Critical Role of BRAC during COVID-19

Kaosar Afsana, Professor, Nazrana Khaled, Deputy Coordinator, Ishrat Jahan, Research Associate, and Selima Kabir, Research Associate and Fouzia Khanam, Senior Research Fellow

BRAC, one of the largest NGOs in the world, has always played a critical role in humanitarian crises in Bangladesh and beyond and is naturally playing a key role in tackling the current COVID-19 public health emergency. With 50,000 community health workers, the organization is participating in mass awareness campaigns across the country, visiting individual homes, bus stations and tea stalls. BRAC is also working

closely with the government in managing hotline numbers, supporting training programs, providing medical supplies, arranging hand washing stations with soap, and supplying hand sanitizers. Most importantly, BRAC is working on critical livelihood support for the poorest. From a public health perspective, it is important to document in real time the organizational responses that BRAC is undertaking to COVID-19. It is important for a few key reasons namely (1) to document the strategies being implemented so that the learnings can be shared immediately, widely, and efficiently, (2) to allow for quick reflection and adaption of interventions as the pandemic moves forward, and (3) to document the learnings for future such crises. adapted as the pandemic moves forward.

Mental and Emotional Health and Well-being of University Students

Kuhel Islam, Senior Coordinator, Sameen Nasar, Research Associate, Rituja Shome, Senior Research Assistant and Sabina Faiz Rashid, Professor & Dean

More than 20% of Bangladesh's population lies between the ages of 10 and 19 years, and around 30% belong to the age group between 15-24 years. Among students aged 13-17, 4% of boys and 6% of girls consider attempting suicide due to depression². With all educational institutions shut under the current COVID-19 environment, the mental and emotional well-being of university going students risk being further negatively amplified.

To address this issue, the School in partnership with Imperial College, UK will be carrying out a needs assessment to better understand the emotional and mental affects brought on by the onslaught of the pandemic on University students, and the support required to tend to their concerns.

Exploring Opportunities to Improve Health Outcomes and Enable Better Health Systems Delivery through Mobile Money

Farzana Misha, Researcher Coordinator (Men Engage Project), Selima Kabir, Research Associate, , Ishrat Jahan, Research Associate, and Sabina Faiz Rashid, Professor & Dean

Given the nature of the crisis resulting in enforced "social distancing" measures, the pressure on the poor are immense with larger looming concerns of survival. During crises such as these, liquidity becomes an increasing source of concern – particularly if the quarantining of bank notes receives serious consideration to curb transmission of the virus. A possible alternative in such a scenario is the availability of Mobile Financial Services (MFS) who are well placed to serve millions of registered clients throughout the country including formal and informal workers, businesses and service industries.

This research comprising of rapid survey and case studies will examine ways in which mobile financial services can impact on the user health seeking behavior and outcomes.

Content Analysis of Media Coverage of COVID-19

Syed Masud Ahmed, Professor and Centre for Health Systems and UHC Research team

Media plays a critical role in shaping opinion and disseminating information. The messaging around COVID-19 across the global media has, like many other issues, been varied depending on different factors including ideology, politics, fear, denial, frenzy and so forth. From fake news to sensationalism to rational scientific discussions, the role played by the media in shaping opinion and disseminating information is important to study for understanding the social construction of fear and trust with regard to the pandemic response. This study aims to do so by reviewing and analyzing media content on the novel coronavirus pandemic in different countries including Bangladesh with the hope that it will provide key insights to assist with shaping narratives and messaging for future crises.

Potential Future Research Areas in the Context of COVID-19:

- Impact on Persons Living with Disabilities
- Gender and Relationships
- Access to Vaccination Services
- Masculinity and Access to Sexual Reproductive Health Services
- Poor Urban Adolescent Lives and Aspirations
- Frontline Workers In the Rohingya Refugee Camps