

CORONAKOTHA

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Community feedback bulletin on Covid-19 pandemic

Covid-19 is a disease of 'happy people'

Rural people in Bangladesh have their own perception about getting infected by Covid-19. They believe that Covid-19 is a disease of 'happy people' who live in cities or urban areas and feel that those who work hard, like rural people, will not be infected. They also believe that, since they are religious and perform ablutions and prayers five times a day and fast during Ramadan, they will be safe. They also think that those who live in urban areas like slums are most at risk because of the density of population and that rural people will not be infected. These perceptions mainly came from people living in coastal areas in Barguna. Because to these perceptions, people in that area may not be following enough precautionary measures. Another issue emerging from feedback from Kurigram suggests that, due to rural culture, people have found it difficult to stop visiting other people's homes and expect visitors to continue to call on them, too. Social interaction is felt to be an important part of the culture of rural Bangladesh and is not something that people feel able to stop doing.

Covid-19 impact and concerns



Lack of drinking water

Feedback suggests that, in rural areas, those who don't own a tube well or water source are suffering from a lack of drinking water. This is because, in the past, they used to collect water from other people's tube well or water source. Now, people are not allowing outsiders to collect water from their tube well or water source because of the fear of getting infected.

Difficulties and fears about safer delivery (childbirth)

Pregnant women say that they are looking to have a home delivery as they are afraid of being infected from other patients at the health centres. They feel that, as gynaecological wards are always crowded with patients and there might be patients there from infected areas, there is high possibility of getting infected.

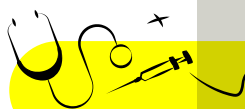


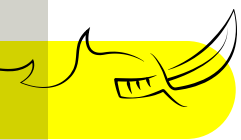
Difficulties with using mobile phone information services

Some people say that they are finding the mobile phone based IVR (Interactive Voice Response) systems complicated, as they cannot follow the instructions. They say that this has made them less interested to look for health support.

Difficulties in accessing health facilities

People say that they are not seeking medical support, even if they have symptoms or are suffering from other types of diseases or complications. They say that this is because of lack of money, transport difficulties, lack of facilities in their locality, a perception of poor support from doctors, or fear of getting infected by other patients. Some people say that they don't know about the hotline numbers where they can get health support.





Decreasing income, food scarcity and increasing crime

Due to the current restrictions, people say that they are not able to work or to run their business and earn money. They say that they are facing hardship and cannot afford to buy what they need. Scarcity of food is now a major concern for some people, who say they are starving and not able to ensure balanced nutrition. People say that the relief they are getting is not enough, while some people say that they haven't received any relief at all. Because of these difficulties, people say that maintaining hygiene and distancing is not their priority now. Instead, they are just looking for scope to earn money. Some people felt that this was the reason behind increased levels of crime, like robbery, in recent times.

Impact on the education system and students

The education system has been affected due to the current restrictions. In rural areas, people say that poor internet connectivity is preventing students from taking classes online or studying online. People also say that students due to sit their Higher Secondary Certificate (HSC) exams this year are suffering from depression due to uncertainty about whether their exams will go ahead or not.



Gender based violence and malnutrition among women

Some people say that, in the present lockdown situation, gender-based violence has increased. Some people mentioned a suicide case that had been reported in Dhaka. Others say that women are being sexually harassed while collecting relief.

Women, mostly in rural areas of Bangladesh, tend to serve food to their husband and other male members of the family first, and wait until others have eaten before taking their own meal. Some women say that, sometimes, there is little or no food left for them after the men have eaten. They said that, due to current food scarcity, women were now at risk of suffering from malnutrition.

Barriers to maintaining physical distance

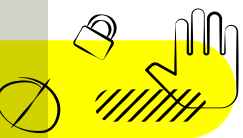
In rural areas, especially in coastal areas of Barguna, some people live very close to their neighbours. Most families say that they don't own an individual latrine due to poverty and that a number of families share a single latrine. People highlighted how these situations made it impossible to maintain physical distancing. They also reflected on how children in rural areas frequently go outside to play with other children and feel that it is not possible to confine children in the house like in urban households. In that way, they feel that children are at risk of getting infected.



Concerns of people with disabilities

Becoming more financially vulnerable

Community feedback suggests that most people with disabilities are poor or are from poorer families. Some people with disabilities reflected that their disability already made it challenging for them to work or earn money and that the additional problems caused by the current pandemic were pushing them into a more vulnerable situation. Most of the people with disabilities who gave feedback run a small business, like selling tea, vegetables, betel leaf or nuts. Some of them work in shops and garment factories, some are rickshaw pullers or daily laborers and some of them generally obtain money by begging. There are other people with disabilities who said that they were not capable of working and that they were dependent on their family. Due to the current restrictions, people with disabilities said that they were struggling to continue their livelihood activities and that this was affecting their income. Those who work in garment factories said that they were not getting their salary. People said that this meant they were facing challenges to buy daily necessities and meet their families' needs. Some reflected that their mental health was also being affected due to the situation. To cope with these challenges, people said that they had started going outside to earn, despite the risk of getting infected.



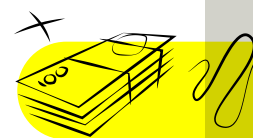
Deprived while getting aid

People with disabilities mentioned that they were not getting enough aid. They said that, even though the government had instructed that people with disabilities should be prioritised when aid was distributed, this was not always happening. Disabled persons' organisations (DPOs) said that they were not being included in the process of determining which people in a particular area should receive aid. They felt that this meant that the needs of people with disabilities were being overlooked. They feel that situation is worse in the areas where DPOs are not present, since they feel that no-one would then be able to raise concerns on behalf of people with disabilities.

People with disabilities in some areas said that those who are already getting social safety net allowances were not entitled to any other relief items. People affected by this rule said that the amount of their existing allowance (BDT 750 for three months) was not enough to meet their daily needs and that they should therefore be entitled to receive additional aid. People with disabilities also said that travelling to the aid distribution areas and collecting aid in a crowded place was more difficult for them.

Rising demand for financial help

Feedback suggest that people with disability want financial as well as (or instead of) in-kind relief. According to them, the food being provided as aid (like rice, potatoes and lentils) is not enough. People say that they cannot afford to buy the items they need to cook (e.g. edible oil, spices, etc) and that they also do not have money to buy other non-food items. People with disabilities also said that, if they became sick, they could not afford to see a doctor or buy medicine. Some people said that they were struggling to re-start their businesses due to lack of capital, since they had already used their money to cope with their immediate financial needs and were now worried about their uncertain future.



Getting regular treatment is challenging

Some people with disabilities – for example, those who have cerebral palsy – need regular therapy but said that their families were not able to take them for therapy due to lack of transportation, or lack of money to pay for transport or treatment costs. Others said that, even when they could get to the hospital or medical centre, there were sometimes no doctors or that the doctors were not giving them any time for consultations or treatment. Some people with cerebral palsy said that, because of these difficulties, their health condition was getting worse.

Lack of information

People with disabilities said that, as most of the awareness raising campaigns are on television and most of their families did not own a television, they were not getting enough information. They noted that, because of the lockdown, they could not even go to other people's houses to watch television. They said that, due to lack of information, they had limited knowledge about hygiene measures to be followed and didn't know about the hotline numbers where they could get help or support.



The bulletin has been produced by BBC Media Action and the Bangladesh Red Crescent Society, on behalf of Shongjog – the national platform for community engagement and accountability. Inputs into this edition have been drawn from feedback collected by volunteers, hotlines, phone interviews, face to face communication and meetings. Feedback analysed was collected by Access Bangladesh Foundation (Bhararia Union, Dhamrai), Sharirik Protibondhi Unnoyon Shangstha (Tongi City Corporation), Sharirik Protibondhi Union Shango (Gazipur), Society for Education and Inclusion of the Disabled (Dhaka), Bandhob Protibondhi Unnoyan Sangstha (Khulna), Alliance of Urban DPO (Chattogram), Sheba Protibindhi Nari Porishad (Narsingdi), Breaking The Silence (Dhaka, Satkhira, Srimongol), Jago Nari (Barguna), Mahideb Jubo Somaj Kallayan Somity (Kurigram), Eco-Social Development Organization (Thakurgaon, Lalmonirhat, Panchagarh and Nilphamari) and Dushtha Shasthya Kendra (Bagerhat).

BBC Media Action (in cooperation with Translators without Borders) is also producing the regular *What Matters?* bulletin, which analyses community feedback and concerns in Cox's Bazar, related to Covid-19 in the context of the Rohingya emergency. These bulletins can be found on the [Shongjog website](#).