



IMPACTS OF COVID-19 ON FOOD-INTAKE AND NUTRITION OF POOR PEOPLE A RAPID APPRAISAL

খাদ্য অধিকার বাংলাদেশ
RIGHT TO FOOD BANGLADESH

Impacts of Covid-19 on Food-intake and Nutrition of Poor People: A Rapid Appraisal

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Introduction

COVID-19 has impacted every sphere of life. The economic crisis induced by this pandemic has hit low-income people the hardest. Both rural and urban poor are severely affected as they are mostly working in the informal sector. Many of them have lost their employment wholly, or the income opportunities have drastically shrunk, and their earning has fallen at stake. These people usually live hand to mouth and, therefore, have very limited or no savings. It is apprehended that they are downsizing their essential livelihood expenditure, which might have implications for their food intake and nutrition. The current study has attempted to have a rapid assessment of the food consumption and nutrition situation of poor people living in different parts of Bangladesh. The study is based on primary data collected by the by the member organizations of the district committee & their volunteers of Right to Food Bangladesh, which has long been working country-wide for ensuring sufficient food-intake and nutrition by people. The study has also enquired about people's awareness about the devastating health-risks of the COVID-19 or Coronavirus and the practice of hygiene to combat those risks.

Methodology and data

COVID-19 has impacted every sphere of life. The economic crisis induced by this pandemic has hit low-income The study is based on a short questionnaire survey among 834 randomly selected economically vulnerable people in 37 districts covering all administrative divisions (Table 1). Poor people involved in various informal activities were randomly chosen to understand their vulnerabilities due to COVID-19. The survey was conducted in mid May to June 2020, both by direct interaction with respondents and through phone calls. For direct data collection, enumerators took necessary health precautions and maintained necessary social distancing. Right to Food Bangladesh developed and executed the questionnaire for data collection from the respondents. After collecting the data, they were processed through standard data processing software, and this report utilizes the results that evolved from the processed data.

The study covers 4 districts from Chattogram, 7 from Rangpur, 6 from Rajshahi and 5 districts from Dhaka. The highest number of respondents are from Khulna (21.2%). Four divisions, Khulna, Dhaka, Rajshahi and Rangpur cover 72% of the respondents.

Table 1: **Division wise respondents**

| Divisions | Number of Districts Covered under each Division | Number of respondents in different divisions | Share of different divisions in total respondents (%) |
|--------------|---|--|---|
| Barishal | 3 | 48 | 5.8 |
| Chattogram | 4 | 73 | 8.8 |
| Dhaka | 5 | 148 | 17.7 |
| Khulna | 8 | 177 | 21.2 |
| Mymensing | 3 | 79 | 9.5 |
| Rajshahi | 6 | 137 | 16.4 |
| Rangpur | 7 | 142 | 17.0 |
| Sylhet | 1 | 30 | 3.6 |
| Total | 37 | 834 | 100 |

Respondents include rickshaw and van drivers, scooter and taxi drivers, transport workers, small shopkeepers, road/pavement vendors, barbers, beauty parlor workers, garbage collectors, part-time housemaids, bricklayers, workers in small workshops, street vendors and street vendors, Individual or commercial drivers, freight workers, carpenters, e-commerce delivery workers, agricultural workers, etc. Many of these workers mostly get paid daily, so they survive one day at a time. The survey also included some respondents from jobless people like beggars, street children, physically challenged people etc.

Basic features of the respondents

The study has covered both male and female respondents from rural and urban areas. Some respondents were also selected from ethnic communities.

Table 2: **Gender of respondents from different divisions**




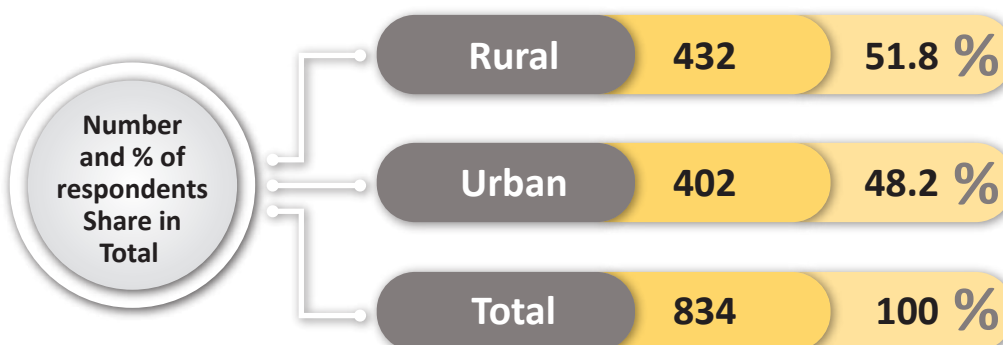
| | | Share (%) according to Gender |  |  |  |
|--|-----------|----------------------------------|---|---|---|
| Males constitute 56.8% of the respondents, while 43.2% are female. However, in Barishal 62.5% of the respondents are female. The highest proportion of male respondents are from Mymensing (67.09%). | Divisions | Barishal | 62.5 | 37.5 | 100 |
| | | Chattogram | 35.62 | 64.38 | 100 |
| | | Dhaka | 39.86 | 60.14 | 100 |
| | | Khulna | 37.85 | 62.15 | 100 |
| | | Mymensing | 32.91 | 67.09 | 100 |
| | | Rajshahi | 48.91 | 51.09 | 100 |
| | | Rangpur | 49.3 | 50.7 | 100 |
| | | Sylhet | 50 | 50 | 100 |
| | | Total Sample (%) | 43.2 | 56.8 | 100 |

Table 3: Respondents from Rural and Urban areas



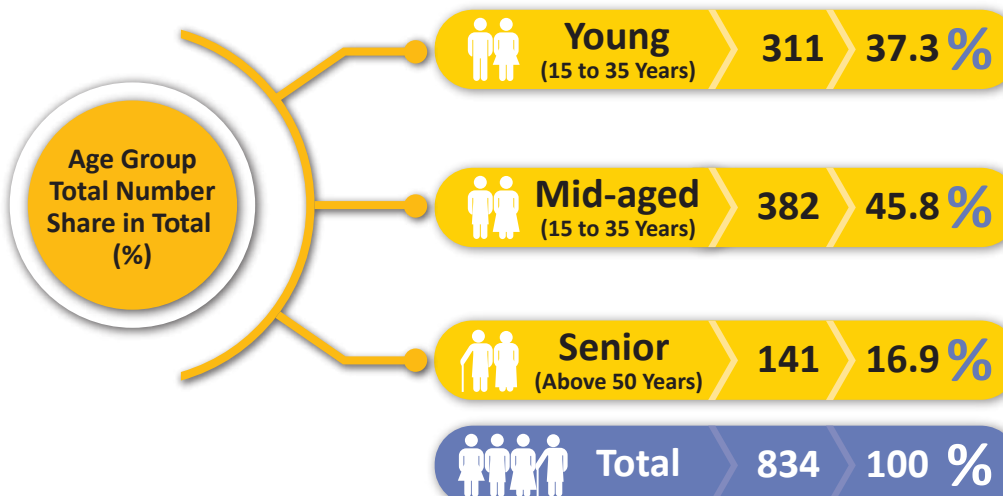
The respondents are almost equally distributed between urban and rural areas. While 51.8% of respondents are from rural areas, 48.2% are from urban areas.

Table 4: Respondents in accordance to their ethnicity



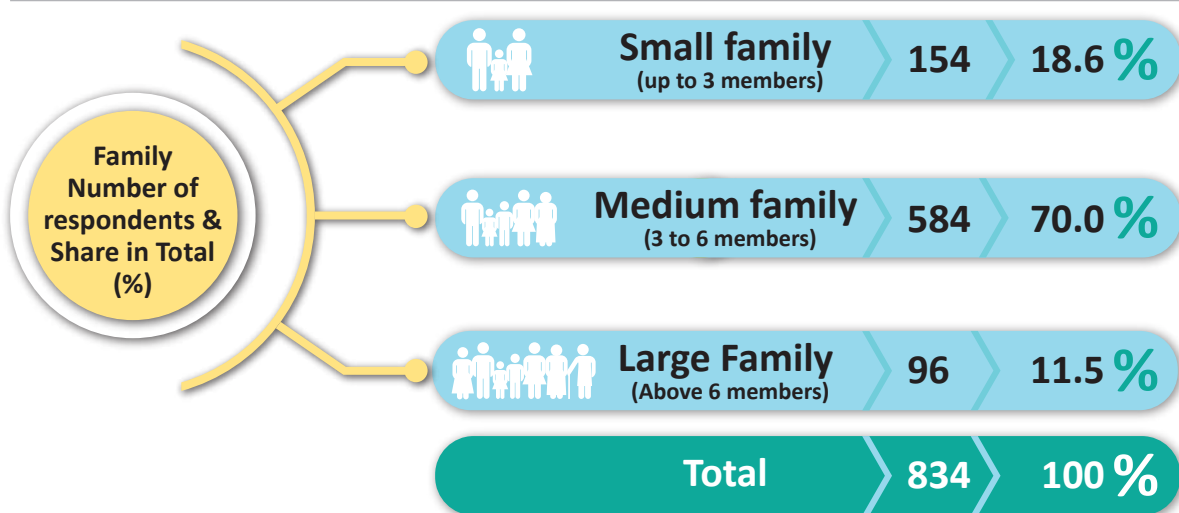
From an ethnicity standpoint, 95.2% of the respondents belong to non-ethnic group and 4.8% were from ethnic communities.

Table 5: Age group of the Respondents



It is noted that 45.8% of the respondents are from the age group of 36 to 50. If we add 37.3% of respondents belonging to the young group, we will note that 83.1% of the respondents are below 50 years, or in an age range where we expect them to be engaged in income-generating activities.

Table 6: The family size of the respondents



70% of the respondents were from medium-sized families containing 4 to 6 members. We also see that 154 respondents belong to small families having up to 3 members (Table 6).

Table 7: Occupation of the respondents

| Livelihood/ Occupation | Number | Share in Total (%) |
|------------------------|------------|--------------------|
| Rickshaw/ van Puller | 91 | 10.9 |
| Hawker | 29 | 3.5 |
| Day Labor | 170 | 20.4 |
| Small Shop owner | 118 | 14.1 |
| Housemaid | 104 | 12.5 |
| Vehicle Driver | 57 | 6.8 |
| Micro Business | 142 | 17.0 |
| Informal Job | 75 | 9.0 |
| Agriculture | 25 | 3.0 |
| Others | 23 | 2.8 |
| Total | 834 | 100 |

Nearly 40% of the respondents were day labours, housemaids, rickshaw pullers, small shop owners and owners of micro-businesses. The remaining respondents are also involved in informal occupations, including agricultural activities.

Impacts of COVID-19 on the livelihoods of poor people

Our primary interest was to enquire about the economic impact of COVID-19 on the poor people. To control the spread of COVID-19 virus, the government announced a lockdown of all economic and

social activities in late March and it continued for more than a month. Though businesses opened on a limited basis since early May, the economic activities have remained at a sub-optimal level. We asked the respondents whether they faced any loss or damage in their occupational activities during the lockdown or not.

In response, 98.6% of the respondents reported a loss or damage during the lockdown.

Table 8: Livelihood/occupational loss during the lockdown

| Responses | Number of respondents | Share in Total (%) |
|-----------|-----------------------|--------------------|
| Yes | 822 | 98.6 |
| No | 12 | 1.4 |
| Total | 834 | 100 |




The respondents faced a decline in income in all divisions. The loss of income was very intense in the Sylhet division. Loss of employment is also faced by a large proportion of poor people, while only a few of them suffered a decline in salary. We mainly observe three types of damages noted by the respondents (Table 9) Those are a decline in income, the decline in sales, and loss of jobs. As most of the respondents are day labours, housemaids, rickshaw pullers, small shop owners, and owners of micro-businesses, three types of damages are faced by them. The picture is similar in all divisions.

Table 9: Division wise picture of livelihood/occupational loss during the lockdown

| Division | % of respondents facing a particular type of loss | | | | | | | Total |
|--------------------|---|------------------------|-----------------------|-------------|------------------|----------------|----------------------------|-------|
| | Income declined | Sale declined in shops | Extreme Food shortage | Shop Closed | Becoming Jobless | Salary reduced | No Income with loan burden | |
| Barishal | 41.7 | 2.1 | 8.3 | 22.9 | 25.0 | 0.0 | 0.0 | 100 |
| Chattogram | 21.9 | 6.9 | 41.1 | 15.1 | 2.7 | 0.0 | 12.3 | 100 |
| Dhaka | 50.0 | 3.4 | 11.5 | 18.2 | 14.2 | 2.0 | 0.7 | 100 |
| Khulna | 58.8 | 4.5 | 15.3 | 12.4 | 5.1 | 2.8 | 1.1 | 100 |
| Mymensing | 53.2 | 0.0 | 5.1 | 5.1 | 31.7 | 1.3 | 3.8 | 100 |
| Rajshahi | 40.2 | 2.9 | 12.4 | 19.0 | 21.9 | 0.7 | 2.9 | 100 |
| Rangpur | 53.5 | 1.4 | 14.1 | 7.8 | 19.7 | 2.1 | 1.4 | 100 |
| Sylhet | 70.00 | 0.0 | 10.00 | 10.00 | 10.00 | 0.0 | 0.0 | 100 |
| Share in Total (%) | 48.9 | 3.0 | 14.6 | 13.8 | 15.6 | 1.6 | 2.5 | 100 |

As medium-sized family constitute 70% of the respondents and as 98.6% of the respondents faced damage in their respective occupation/ livelihood, we observe that 70% of the respondents suffering loss have medium-size families (Table 10). There is not much difference between different family size groups in terms of damage, where we observe a decline in income to be the most common aspect of loss.

Table 10: **Damage of occupation/ livelihood by family size**

| |  Small family (up to 3 members) |  Medium Family (4 to 6 members) |  Large Family (above 6 members) | Total |
|----------------------------|--|--|---|--------------|
| Particulars | | | | |
| Income declined | 9.2 | 33.7 | 6.0 | 48.9 |
| Sale declined in shops | 0.6 | 1.9 | 0.5 | 3.0 |
| Shop Closed | 1.4 | 11.8 | 1.4 | 14.6 |
| No Income | 2.9 | 9.7 | 1.2 | 13.8 |
| Becoming Jobless | 3.6 | 10.0 | 2.0 | 15.6 |
| Salary reduced | 0.4 | 1.2 | 0.0 | 1.6 |
| No Income with loan burden | 0.4 | 1.8 | 0.4 | 2.5 |
| Total | 18.5 | 70.0 | 11.5 | 100 |

Though almost all respondents faced loss in their livelihoods due to lockdown, only 6.6% of them chose to change their regular occupation (Table 11) This finding indicates that it is not easy for these poor, mostly low skilled or unskilled people to change their jobs even when they face a downturn.

Table 11: **Changes in Occupation/ Livelihood activities**

| Responses | Number of respondents | Share in Total (%) |
|--------------|-----------------------|--------------------|
| Yes | 55 | 6.6 |
| No | 779 | 93.4 |
| Total | 834 | 100 |

Those who changed the occupation have mostly become day labourers and agricultural labourers as it is relatively easy to enter into these occupations. About 70% of those changed occupations took these new occupations for survival. As the lockdown period was the harvesting time of the main rice crop of Bangladesh, the boro, many poor people could get some works in agriculture.

Table 12: **New occupations chosen by respondents**

| Livelihood/ Occupation | Total Number | Share in Total (%) |
|------------------------|--------------|--------------------|
| Rickshaw Puller | 3 | 5.45 |
| Agricultural labor | 12 | 21.82 |
| Fisherman | 2 | 3.64 |
| Hawker | 7 | 12.73 |
| Day Labor | 27 | 49.09 |
| Beggar | 1 | 1.82 |
| Others | 3 | 5.45 |
| Total | 55 | 100 |

Impacts of COVID-19 on the food-intake and nutritional status of the respondents

The last section has described that COVID virus-induced livelihood losses have caused damage to income by poor people. As these people have minimal savings or no savings at all, a downturn in their income is bound to have extended negative impacts on their food intake and nutritional status. It is noted that in the pre-COVID situation, 91.6% of the respondents used to take three meals a day, and the remaining used to take two meals a day (Table 13).

Table 13: Meals a day by the respondents in the pre-COVID situation

| Meals/day | Number of respondents | Share in Total (%) |
|--------------------------|-----------------------|--------------------|
| 2 | 70 | 8.4 |
| 3 | 764 | 91.6 |
| Total respondents | 834 | 100 |

Though most of the respondents used to have three meals a day, during the lockdown, 95% to 100% of the respondents of different divisions faced problems to maintain three meals a day (Table 14). All respondents in Mymensing division reported a hardship to manage three meals a day, which indicates a lower level of job opportunities by the respondents.

Table 14: Respondents facing a challenge to have three meals a day during the lockdown

| Division | Responses | | Total % |
|---------------------------|-------------|------------|------------|
| | Yes | No | |
| Barishal | 95.83 | 4.17 | 100 |
| Chattogram | 98.63 | 1.37 | 100 |
| Dhaka | 100 | 0 | 100 |
| Khulna | 98.87 | 1.13 | 100 |
| Mymensing | 100 | 0 | 100 |
| Rajshahi | 98.54 | 1.46 | 100 |
| Rangpur | 99.3 | 0.7 | 100 |
| Sylhet | 96.67 | 3.33 | 100 |
| Share in Total (%) | 98.9 | 1.1 | 100 |

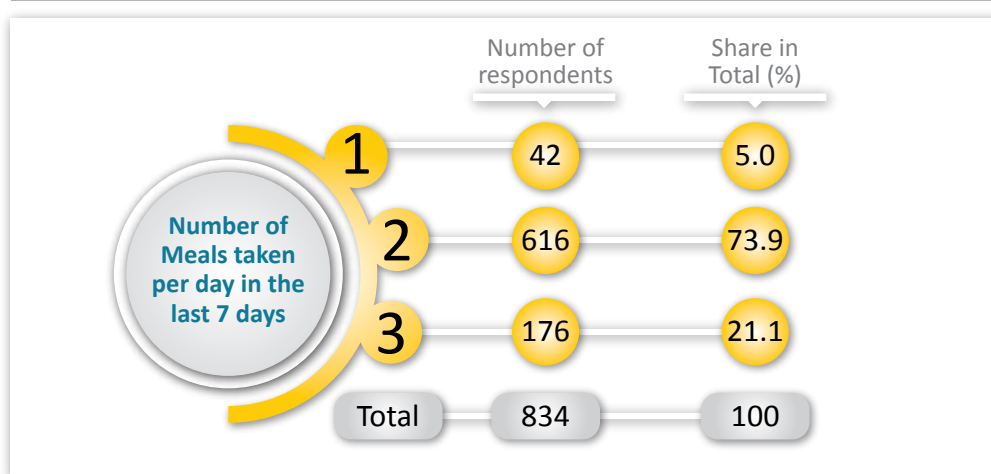
In all divisions, poor people mainly suffered from a shortage of sufficient food and a severe lack of nutritious food. Nearly 87% of poor people faced hardship to arrange for adequate food and nutritious food. Respondents from Rangpur suffered the most from the general food crisis, and respondents from Rajshahi suffered the most from the Nutritious food crisis.

Table 15: Types of the crisis faced by poor people concerning food-intake

| Division | Types of problems (%) | | | | | Total |
|---------------------------|-----------------------|--------------------------|-----------------------|---------------------|--------------------------------|------------|
| | Food shortage | Nutritious Food shortage | Extreme Food shortage | Occasional Problems | Borrowed money to arrange Food | |
| Barishal | 52.08 | 35.42 | 6.25 | 26.25 | 20 | 100 |
| Chattogram | 41.10 | 43.84 | 1.37 | 6.85 | 1.37 | 100 |
| Dhaka | 69.59 | 19.59 | 8.11 | 1.35 | 8.11 | 100 |
| Khulna | 27.33 | 70.93 | 0 | 0 | 0 | 100 |
| Mymensing | 15.48 | 46.43 | 32.14 | 5.95 | 32.14 | 100 |
| Rajshahi | 18.25 | 68.61 | 7.3 | 4.38 | 7.3 | 100 |
| Rangpur | 68.31 | 23.94 | 4.23 | 3.52 | 4.23 | 100 |
| Sylhet | 53.33 | 13.33 | 20 | 10 | 20 | 100 |
| Share in Total (%) | 42.7 | 44.5 | 7.8 | 3.5 | 1.6 | 100 |

The problem with food intake is so severe among poor people that 85% of the respondents could not take three meals a day during the week before the interview was taken. Even 5% of poor lived on one meal a day during the previous week from the interview.

Table 16: Number of meals taken by the respondents in the last seven days

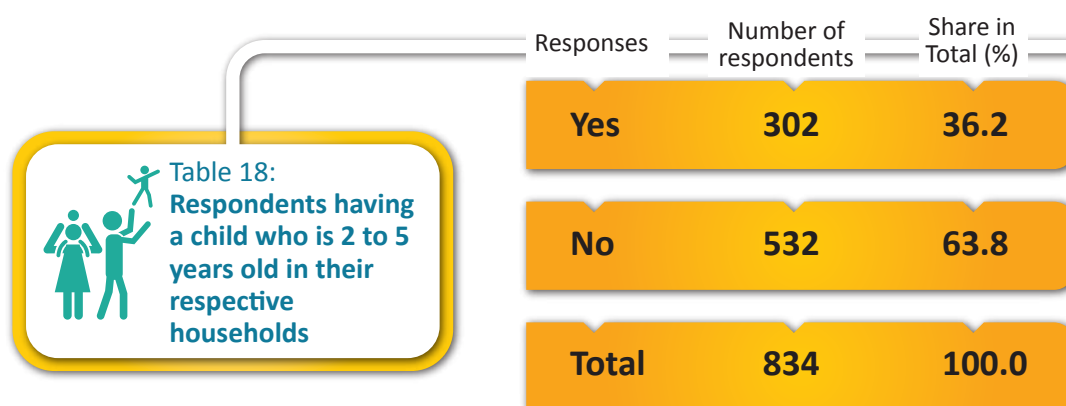


We observe that 41.2% of the respondents could not manage any nutritious food during the week before the interview took place (Table 17). Another 21.7% could manage meat, fish, egg or milk once during the previous week.

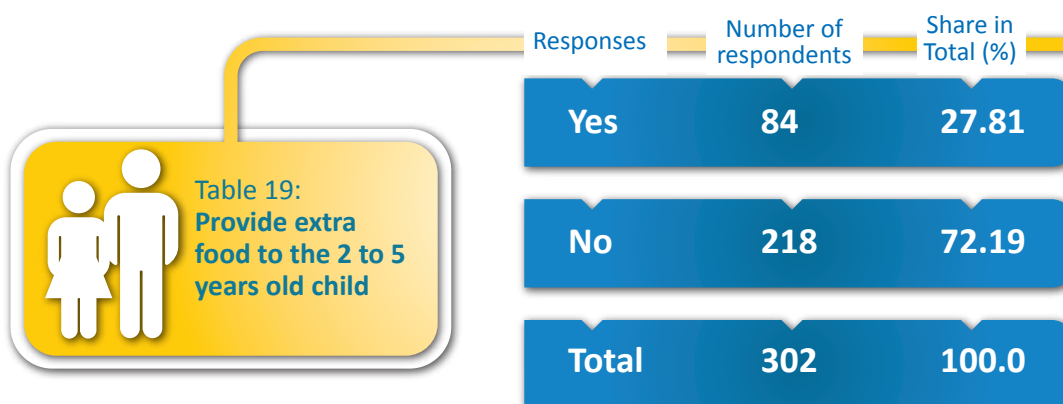
Table 17: Number of times in the last seven days respondents could take at least one nutritious food (fish, meat, eggs or milk)?

| Nutritious food intake in the last 7 days | Number of respondents | Share in Total (%) |
|---|-----------------------|--------------------|
| 0 | 344 | 41.2 |
| 1 | 181 | 21.7 |
| 2 | 139 | 16.7 |
| 3 | 66 | 7.9 |
| 4 | 37 | 4.4 |
| 5 | 35 | 4.2 |
| 6 | 13 | 1.6 |
| 7 | 16 | 1.9 |
| 8 | 3 | 0.4 |
| Total | 834 | 100 |

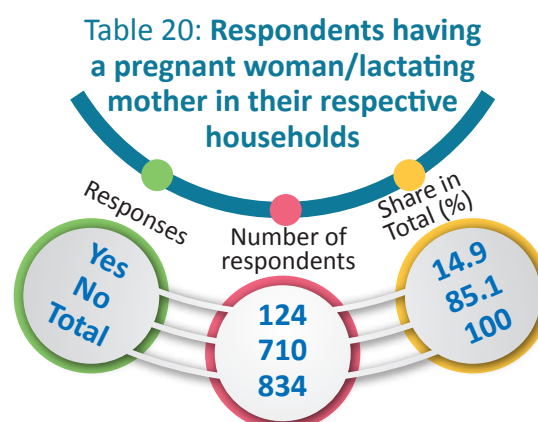
Nutritious food is critical for the growth of children, and therefore, we asked the respondents whether or not they have a child of 2 to 5 years old. It is noted that 36 percent of the respondents have at least one child belonging to this age cohort. The previous table indicated that around 80% of respondents could not manage nutritious food for more than two days during the last week from the interview. This situation is alarming. The children of these households have severe risks of facing health problems related to nutritional deficiencies.



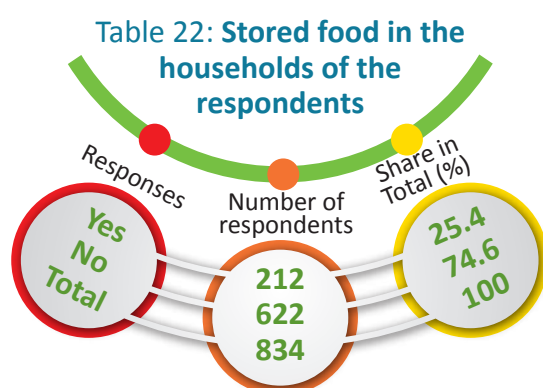
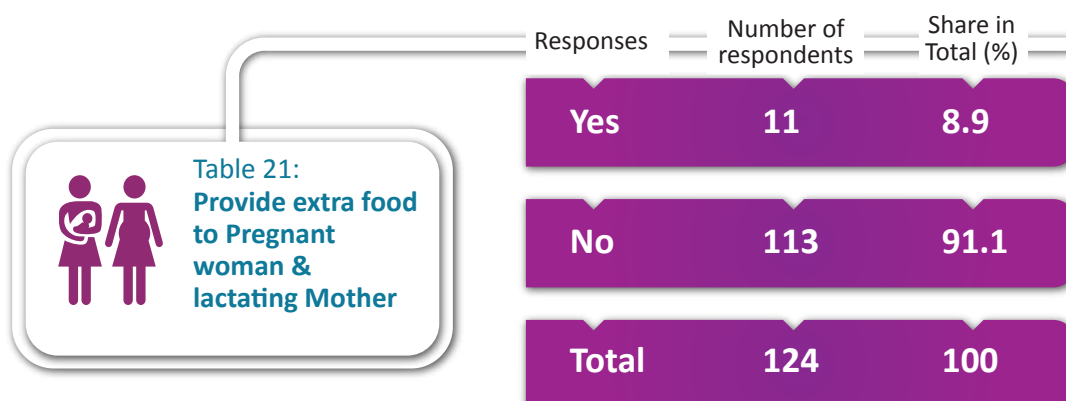
We asked the 302 respondents, who have at least one child belonging to the age cohort of 2 to 5, whether they could provide any extra or nutritious food to those children in the previous week. We note that only 27.8% of the respondents or 84 respondents could provide special food to their children (Table 20). The rest could not manage to provide such extra food.



We further explored that the extra food provided to the children included suji, daal, khichury and milk, not necessarily meat, fish, or eggs. The study also enquired about the nutrition status of pregnant women or lactating mothers during the lockdown. Out of 834 respondents, 124 noted that there is a pregnant woman or lactating mother in their respective households (Table 20).



Stored food in the households of the respondents



The study findings reveal that low-income families are in the food supply problem, which has exposed their families to nutritional and health risks. We also notice that if their livelihood situation is not improved, their food crisis will continue as most of the two-thirds of the respondents do not have a store of food (Table 22). Only 25.4% of the respondents have some stores of food, mostly for about a week.

Coping with COVID-19 induced food crisis

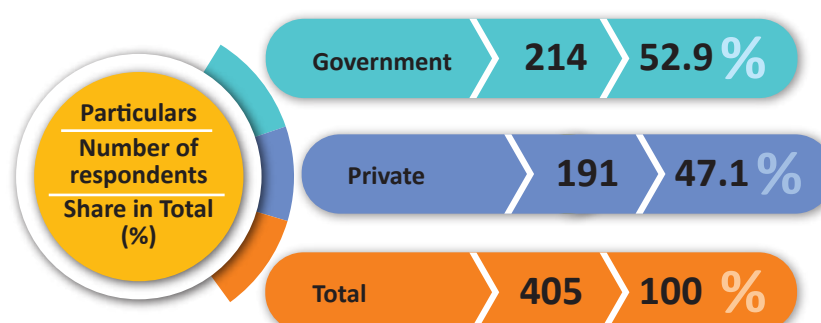
Since the outbreak of the COVID-19 pandemic, both government and private sector people have come forward with various types of help for poor and vulnerable people. Such programmes include the distribution of cash, food and cooked food. We note that only half of the respondents received support and aid during the lockdown (Table 23). Receipt of assistance is highest among the respondents from Khulna division (60%) and people from Rangpur received the least.

Table 23: Receive support / Assistance during the lockdown (cash, food, cooked food)

| Division | Responses | | Total % |
|---------------------------|-------------|-------------|------------|
| | Yes | No | |
| Barishal | 54.17 | 45.83 | 100 |
| Chattogram | 54.79 | 45.21 | 100 |
| Dhaka | 46.62 | 53.38 | 100 |
| Khulna | 59.89 | 40.11 | 100 |
| Mymensing | 39.24 | 60.76 | 100 |
| Rajshahi | 43.80 | 56.20 | 100 |
| Rangpur | 38.73 | 61.27 | 100 |
| Sylhet | 54.17 | 45.83 | 100 |
| Share in Total (%) | 48.6 | 51.4 | 100 |

Those who received supports reported receipts of relief in kind (food, rice, etc.), only a few (around 3%) received cash support. About half of the respondents who did receive aid and support, got it from the government (Table 24). The other half received assistance from private sources.

Table 24: Sources of supports



Those who received assistance mostly were not satisfied with the quantity of food provided to them (Table 25). About 86% percent of the respondents who received food was not sufficient or too little.

Table 25: Satisfaction with the quantity of food assistance

| Responses from the respondents | Number of respondents | Share in Total (%) |
|--------------------------------|-----------------------|--------------------|
| Sufficient | 55 | 13.58 |
| Not-Sufficient/ too little | 350 | 86.42 |
| Total | 405 | 100 |

Condition of health

The study tried to understand the health condition of poor people and asked them about their health situation. When we asked them whether they faced any sickness since the lockdown or not, about 90% of the respondents answered that they did not face any illness. Only 91 (10.9%) respondents got sick.

Table 26: Illness during the lockdown

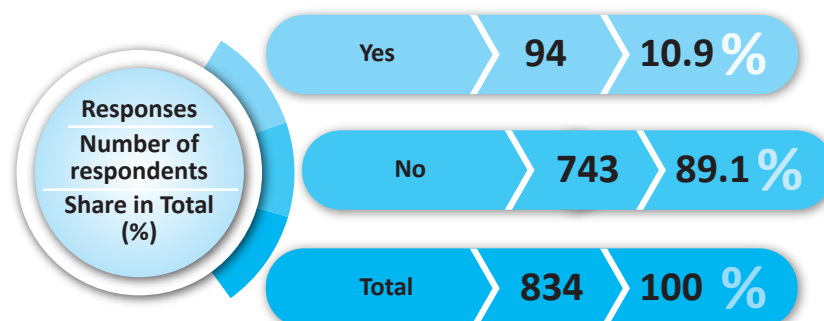
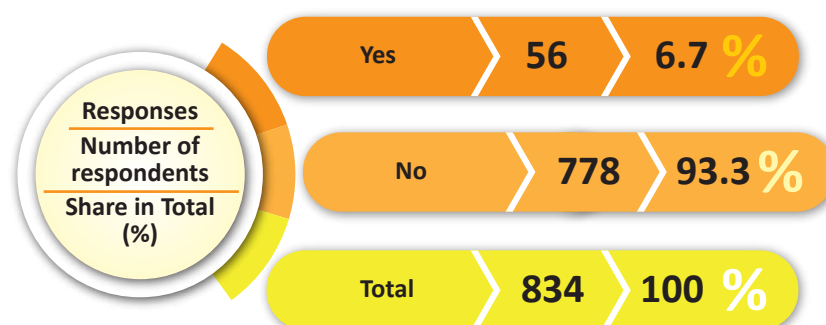


Table 27: Types of illness

| Types of illness | Number of respondents | Share in Total (%) |
|--------------------------------|-----------------------|--------------------|
| Pain (Headache, Body, Stomach) | 16 | 17.58 |
| Non-Infectious Diseases | 9 | 9.89 |
| Fever | 55 | 60.43 |
| Diarrhea | 9 | 9.89 |
| Others | 2 | 2.19 |

We had also found that 93% of the respondents did not receive any healthcare when they got sick.

Table 28: Received any formal health care



Those receiving health care services mostly received that from local doctors, pharmacies, or local level healers. About 65% of the respondents received healthcare from the local doctor, local healer and local pharmacy. One of the respondents also received online services. Also, 16% of them received services from government hospitals.

Table 29: Place of receiving health services

| Responses | Number of respondents | Share in Total (%) |
|---------------------|-----------------------|--------------------|
| Community Clinic | 3 | 5.4 |
| Doctors' Chamber | 1 | 1.8 |
| Government Hospital | 9 | 16.1 |
| Local Doctor | 13 | 23.2 |
| Local Healer | 12 | 21.4 |
| Local Pharmacy | 12 | 21.4 |
| MBBS Doctor | 2 | 3.6 |
| Online Service | 1 | 1.8 |
| Private Hospital | 3 | 5.4 |
| Total | 56 | 100 |

Awareness regarding the risks of COVID-19

It is revealed that during the last three months that the health risks of COVID-19 could be minimized by maintaining social distance, wearing masks and following some basic hygiene at home and outside. It was noted that all respondents know about the COVID-19 virus (they know as Corona Virus). When the enumerator asked them how they can prevent the virus from spreading, they mentioned that staying at home (Table 30). 94% of the respondents stayed home as a precaution to prevent the virus. Only 3% of them wore masks, maintained social distancing and washed hands regularly.

Table 30: Precautions the respondents have taken to prevent this virus

| Types of Precautions | Number of respondents | Share in Total (%) |
|--------------------------|-----------------------|--------------------|
| only mask | 10 | 1.20 |
| only hand wash | 3 | 0.36 |
| Social distancing | 3 | 0.36 |
| Both Mask and Distancing | 11 | 1.32 |
| Mask hand wash | 14 | 1.68 |
| Stay home | 790 | 94.72 |
| Others | 3 | 0.36 |
| Total | 834 | 100 |

When the respondents were asked what they would do if they become COVID-positive, 91.6% noted that they would opt to get tested and follow the doctors' advice, Only 5 of the respondents did not know what to do.

Table 25: Satisfaction with the quantity of food assistance

| Particulars | Number of respondents | Share in Total (%) |
|--|-----------------------|--------------------|
| Call hotline | 2 | .2 |
| Clean | 1 | .1 |
| Doctors' Advice | 42 | 5.0 |
| Doctors' Advice & hot drink water | 5 | .6 |
| Doctors' Advice & home quatrain | 6 | .7 |
| Don't know | 5 | .6 |
| Keep distancing from other members of the Family | 5 | .6 |
| Phone hotline | 1 | .1 |
| Stay home | 3 | .4 |
| Test & Doctors Advice | 764 | 91.6 |
| Total | 834 | 100.0 |

Findings from the case studies

The study conducted 11 case studies to understand the situation of poor people better. We note the following from those case studies.

Before the COVID outbreak, the case study respondents were more or less satisfied with their food intake. But after COVID-19 stroke, all of these families containing 3 to 6 members, were forced to take only one meal a day. Infants are not getting proper nutrition. Their income has gone down drastically. It has become difficult for them to survive with sufficient food intake. The people we interviewed for case

studies were day labors, agriculture labors, household help, rickshaw pullers etc. Therefore, they cannot stay at home. They have to go outside to earn to survive.

These people are stressed because they cannot arrange sufficient food for themselves nor their children.

“*My tummy does not understand there is Corona out there, and I have to eat.*”

Aminul from a Ulipur, an employee of a tea stall.

“*At the end of the day, I cannot look at my innocent, starving kids, it breaks my heart*”

Suraia Begum, a woman who earned 150tk per day before the lockdown and has lost the entire income as she has lost her job as a maid.

There were also pregnant women in 4 families. They were not getting sufficient foods, let alone nutritious foods. Only two respondents out of 11 case study respondents received aid and rations from the government. Most people got rations from NGOs and stretched the rations 7 to 8 days. There are 2 cases where we see the primary earner of the family had a lot of debt to pay off, so that was an extra burden to think about. Ripon, a tea stall owner in the district of Bhola, had

to sell the only piece of land he had to pay off debts during the current COVID-19 crisis.

People also had to change their profession to support the family. Dipali Rongpal from Rajshahi was a day-laborer but after the lockdown, she and her family sometimes just take wild potatoes and sell timber in the local market. The Husband of Salma Begum from Barisal had a fruit business, but after the lockdown, he had to close his business and became a day-laborer. Cases like this indicate that people are suffering, and in these types of situations, you cannot always ask for help; you have to deal with it. When we asked if they received any help, aid, or support from the government, most of them answered in the negative. When the government did try to help, they either received rations that lasted only a couple of days or the ration that was sent, was consumed by local leaders. Most people did receive some aid from NGOs.

Overall the people are not scared of dying from the COVID-19 induced health complications; they are more afraid of dying of hunger. They just want food and some ration.

Discussions and recommendations

The principal aim of this quick appraisal was to understand the situation of livelihoods, food consumption and the nutritional status of the poor people living in different parts of Bangladesh as a result of COVID-19 pandemic. The study also wanted to explore the awareness status of poor people regarding the health risks of COVID-19. With these objectives, a short survey was conducted among 834 poor people from 37 districts covering all administrative divisions. In addition, 11 case studies were conducted among poor people from different occupations. The study only includes those people who were already poor or near-poor in the pre-COVID situation.

Based on field level data collected from different parts of the country, the study has noted the following findings-

- The livelihoods of 98.6% of the poor people are severely affected by the lockdown due to the pandemic. They have faced a decline in their income, loss of a job, the closing of shops and business activities, and even a complete halt of income.

- Though facing economic hardship, only a few respondents have changed their occupations, which implies that it is not easy to get new works.
- Poor people have been suffering from the insufficient food supply. Nearly 87% of poor people have been facing hardship to arrange for adequate food and nutritious food. Even 5% of poor lived on one meal a day during the previous week from the interview.
- The shortage of food is relatively high in Mymensing and Sylhet divisions.
- Their nutritional status of the poor people has fallen at stake, especially the nutritional status of the children and pregnant women and lactating mothers.
- Half of the poor people received some forms of assistance (dry food, cash, or cooked food) from the government or the private sector.
- Therefore, the government should expand support to the poor, encourage the private sector to come forward with more related programs. During the pandemic, we have noted how important it is to have a law for ensuring the right to food.

The study findings call for some urgent steps to help the poor people to have sufficient food consumption that can ensure the required nutrition.

- i) Various government initiatives to support the poor (in cash or in-kind) should be made available to poor people in urgent need of food.
- ii) The transfers of money, including various social protection benefits, should be sent regularly to the beneficiaries by utilizing mobile financial services.
- iii) Nutritional food for children (cookies etc.) should be supplied in the food baskets for the poor
- iv) Various stimulus packages announced by the government for micro, small and medium enterprises (MSMEs) and informal sector enterprises should be implemented immediately. This would ensure livelihood opportunities for many poor people working in these enterprises.
- v) We need to work for the improvement of the supply chain of agricultural products to ensure efficient food supply throughout the country and a good price for the producers.
- vi) Any leakage from the social protection benefits and food and cash assistance should be punished heavily.
- vii) Treatment facilities for COVID-19 health complexities should be increased in rural areas.
- viii) We have to improve on the overall health infrastructure and treatment facilities throughout the country to make the system more capable of dealing with health issues coming out of the current pandemic.

Appendix

Table A-1: Income level of the respondents in different occupations

| Occupation | Daily income (Taka) | Monthly income (Taka) |
|---|---------------------|-----------------------|
| Rickshaw and Van pullers | 400-450 /- | |
| Scooter, CNG, Auto rickshaw driver | 700-1000/- | |
| Other transport drivers | 450-500/- | |
| Salon | 350-400/- | |
| Beauty Parlor workers | | 4000-5000/- per woker |
| Garbage disposal workers | | 3000/- |
| Household help | 1500-4000/- | |
| Carpenter | 450-500/- | |
| Agricultural workers | 400-450/- | |
| Tailor | 700-800/- | |
| Brickfield workers | 600/- | |
| Beggar | 100-200/- | |
| Vegetable vendors | 240-500/- | |
| Hotel and restaurant workers | 150-250/- | 6000-7000/- |
| Goods supply chain workers | 400-500/- | |
| Other workers who earn on a daily basis | 250-350/- | |

The Daily Star

98.6pc poor severely affected by Covid-19

৯৮.৬ শতাংশ গরিবের জীবননাশ করছে করোনা

দৈনিক ইত্তেফাক

করোনাকালে সৃষ্ট দরিদ্র মানুষ বাজেটে উপেক্ষিত

করোনা ভয়াবহ রকম ক্রমে ছড়িয়ে পড়ছে। দেশের মানুষের জীবননাশ হচ্ছে। সরকারি বাজেটের অর্থ ব্যয় করা হচ্ছে, কিন্তু দরিদ্র মানুষের উপেক্ষা করা হচ্ছে।

বনিফ বার্তা

প্রান্তিক বর্ণাচাষীদের সুরক্ষায় ৭ দফা প্রস্তাব

শ্রমিক পরিষদের প্রস্তাবিত ৭ দফা প্রস্তাব। প্রান্তিক বর্ণাচাষীদের সুরক্ষায় সরকারি বাজেটের অর্থ ব্যয় করা হবে।

সমকাল

সামাজিক সুরক্ষায় জিডিপি ৬ শতাংশ বরাদ্দের দাবি

জিডিপির ৬ শতাংশ বরাদ্দ দিতে হবে সামাজিক সুরক্ষায়। সরকারি বাজেটের অর্থ ব্যয় করা হবে।

সংবাদ

৯৮.৬pc poor severely affected

৯৮.৬ শতাংশ গরিবের জীবননাশ করছে করোনা

NEWAGE

EDITORIAL

Govt must widen food, cash aid plans to stave off disaster

সরকারি বাজেটের অর্থ ব্যয় করা হবে। দরিদ্র মানুষের উপেক্ষা করা হচ্ছে।

আমাদের সমস্যা

দেশের ৮৭ শতাংশ গরিব মানুষ খাদ্য-পুষ্টির সংকটে

দেশের ৮৭ শতাংশ গরিব মানুষ খাদ্য-পুষ্টির সংকটে। সরকারি বাজেটের অর্থ ব্যয় করা হবে।

edaily sun

Budget needed soon for social security

সামাজিক সুরক্ষায় জিডিপি ৬ শতাংশ বরাদ্দ দিতে হবে

যায়যায়দিন

খাদ্য-পুষ্টি সংকট কার্যকর পদক্ষেপ নিন

খাদ্য-পুষ্টি সংকট কার্যকর পদক্ষেপ নিন। সরকারি বাজেটের অর্থ ব্যয় করা হবে।

দৈনিক ইত্তেফাক

করোনায় খাদ্য-পুষ্টির সংকটে ৮৭ ভাগ দরিদ্র মানুষ

করোনায় খাদ্য-পুষ্টির সংকটে ৮৭ ভাগ দরিদ্র মানুষ। সরকারি বাজেটের অর্থ ব্যয় করা হবে।

দেশ রূপান্তর

পর্যাপ্ত খাদ্যপ্রাপ্তির সমস্যায় ৮৭ শতাংশ দরিদ্র মানুষ

পর্যাপ্ত খাদ্যপ্রাপ্তির সমস্যায় ৮৭ শতাংশ দরিদ্র মানুষ। সরকারি বাজেটের অর্থ ব্যয় করা হবে।

কালের কণ্ঠ

সামাজিক সুরক্ষায় জিডিপি ৬ শতাংশ বরাদ্দ দিতে হবে

সামাজিক সুরক্ষায় জিডিপি ৬ শতাংশ বরাদ্দ দিতে হবে। সরকারি বাজেটের অর্থ ব্যয় করা হবে।