

COVID-19 Impacts on Human Security in Bangladesh

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ABSTRACT

COVID-19 has been a challenge for the human being in this century. It has created serious human security threats in this world. Due to lack of medical infrastructure thousands of people lose their lives in Bangladesh. Though government of Bangladesh has been taking lots of initiative to minimize this COVID-19 impacts in Bangladesh but due to density of population, lack of medical infrastructure, lack of sufficient doctor, lock down and suspended all economic activities, people become unemployed, decrease income, increase poverty and seriously impacted human security in Bangladesh. Main objectives of the study to identify impact of COVID-19 on human security in Bangladesh and formulate a strategy for minimize COVID-19 impact on human security in Bangladesh. This study helps to understand the COVID-19 impacts on human security in Bangladesh of the political science students, researchers and policy makers. Researcher uses primary and secondary sources of this article.

INTRODUCTION

Bangladesh is an emergent and overpopulated country accompanied by172 million people. The greater number of the 60.83 million active workers in the country is on the job in the unofficial sector. COVID-19 is an infectious disease rooted along a corona virus. It is a species of ordinary virus which sources in our nose, sinuses either neck. This virus may bring on pneumonia, respiratory failure, heart problems, liver problems, septic shock, and death. COVID-19 was earliest point out in December 2019 in Wuhan, China. On March 11, 2020 World health Organization (WHO) announced the COVID-19 epidemic a global pandemic disease. It was justify having extended to Bangladesh in March 2020. On 18 March 2020 notified first COVID-19 death in Bangladesh. The economy of Bangladesh is seriously affected by the COVID-19 pandemic that has to decreasing in internal and international need for manufactured goods, especially in the apparel industry. This raised joblessness and increased poverty. Over 20 million people are inhabitant of capital city, Dhaka. In the majority poor people are rely on unofficial jobs like temporary laborers, small-scale production. Forced lockdown of the country without ensuring the fundamental human needs, weak governance, communication, infrastructure, and health care facilities, overall, socioeconomic conditions of the mass people in Bangladesh, created public anxiety and disturbance in life. The mental stability and welfare of whole communities have critically been impacted at this COVID-19 and lots of people were upset because of the health effects of the pandemic and the reaction of physical loneliness, scare of fail to keep loved ones, and scare of death for lack of food.

The government of Bangladesh announced first lockdown all over the country since 23 March to 30 May 2020 and for safety the people of the country, as well took little measure to increase consciousness on the



COVID-19. The government created a lot of isolation centers and quarantine centers in most hospital and gave necessary services for the patients those were contaminated by COVID-19. Government of Bangladesh increased lock down many times and requested people to exercise social distancing and stay at home. Public transport was restricted and gave suggestion to keep away from public transport, postpone national and international flights. All shops, supermarkets and industries closed. After, on June 16, 2020, the country pushed to ease lock down.

In addition, lockdown seriously affected low- and middle-income people who have become unemployed and decreased sources of income which increased in psychological worry, strain, and scare of death for lack of food. So, we see the COVID-19not only impacted health security in Bangladesh but also seriously impacted human security in Bangladesh. Not a single study covers the COVID-19 impacts on human security in Bangladesh.

Objectives of the Study

- 1. To identify impact of COVID-19 on human security in Bangladesh
- 2. To formulate a strategy for minimize COVID-19 impact on human security in Bangladesh

METHODOLOGY

This study used social survey method. The data collection technique of this study covered both qualitative and quantitative technique. Based on the objectives, the study is analytical in the sense that the study tried to build relationship between COVID-19 impacts and human security in the study area. On the other hand, the study is descriptive in that sense, the dimensions and extent of the effect of COVID-19 has detected. Primary data from respondents has been collected using semi-structured questionnaire face to face interviewed. Besides, Focus Group Discussion (FGD) and cross-check interviews with key informants followed. Quantitative data processed and entered into computer using MS Excel (Microsoft Excel) and SPSS programming and analyzed as per objectives by tabular and graphical method.

The secondary data and information collected from pertinent various textbooks and published research reports, various works related to COVID-19 impacts. Methodological filtering applied to confine the literature through segregation criteria of the systematic review of secondary data and information. Due to its geographical location Dhaka South City Corporation people mostly depend on unofficial jobs. Researcher study for that reason selected four South City Corporation words like- Word no.4, Word no.6, Word no.14, Word no.15 areas to understand the impacts of COVID-19 on human security in Bangladesh.

COVID-19

COVID- 2019is describe like sickness due to a novel corona virus named critical tense respiratory sickness corona virus 2 (SARS-CoV-2; formally explain 2019-nCoV), a soft to acute chesty sickness which is attributable to a corona virus (Serious critical lung sickness corona virus 2 of the genus Beta corona virus), is transfer mainly at get in touch (like breathing spray), and is identified mainly by agitation, cold, and anxiety of respiration and can gain to lung-fever and breaths collapse.

COVID-19 and Human Security

COVID-19 and human security are directly related, because COVID-19 can lead to insecurity on human



being in Bangladesh. In 1994, Mahbub ul Haq first introduced the concept of human security. As stated by Mahbub ul Haq, human security is people concentrated, it is worried about people individual security not discussed by states. He stated, "Human security concentrated about everybody security and welfare of every people all around-in their location and situation-in homes, in jobs and communities" (Mahbub ul Haq 1994).

Human security is a concept of security which encircled the entire of community and all man. The COVID-19 pandemic not only created health and economic security trouble, but also human security challengesdivest our liberty from fear, liberty from want and liberty to live with self- respect. COVID-19 has been affecting human security many sectors in Bangladesh, including economic security, health security, food security, and physical security. In particular, human security concept is a useful framework for understanding the COVID-19 impacts on human security in Bangladesh for policymakers, and researchers.

From late 2019, all human beings in the world have been threatened by the COVID-19 pandemic and the policies for its prevention. In term of human security, the COVID-19 itself threatens the idea of '*freedom from fear*' in new sense, it was more than disaster and other threats, but the pandemic impact mad people afraid of other people, including their family and friends. At the same time, the socio-economic impact that has resulted from strict prevention measures like lockdown and social distancing also intensifies the poverty, or '*want*' of the people. Since the COVID-19 outbreak, it has become a direct threat for the human security in Bangladesh.

COVID-19created a lot of unpredictability, blockade path of recuperation from the COVID-19's huge impacts. Like economic troubled created it problematic for people to bear better health management utilities and on the contrary, health troubled crucially impacted the capacity of people to involve in economic works like the manufacturing of commodities and utilities for the achievements of people requirement and demand. Health and economic insecurity that caused epidemics like COVID-19 threaten another area of human security like food, personal, community, and political security. The COVID-19 epidemic had negative impacts on every aspect of human security in Bangladesh. The COVID-19 has an impact on economic security of Bangladesh. Due to lock down of the country most of the export industry, supermarket has become close. Fall down of business and financial works created at the COVID-19, has increasing an economic security challenge in Bangladesh. In city areas of Bangladesh about 10 million people reside in slums. They had a big challenge for loss of their earning, and they live in on the breadline. The maximum earning in the slums of Bangladeshi town and amid the village poor has plop through over than 80% since the COVID-19 and 63% of slum people has become economically unoccupied, and income per person in the slums plop at 82% from 108 BDT (\$1.30) to 27 BDT (\$0.32) (Garda World. April 11, 2020). Unemployment rates have been increasing. Around 36 million people have lost their jobs, 16 million people become poor and 95% of less fortunate people of the country have been facing a serious income drop since the COVID-19 detected in Bangladesh.

COVID-19 has created health security challenges in Bangladesh. It is a place of residence about one hundred sixty-four million people and the population thickness of Bangladesh is 1265.19 km2 (*World Population Review* 2020). Infectious disease COVID-19 can get transmissible smoothly in Bangladesh because of the closeness of the population. Physical isolation is not possible in the crowded slum zone of Bangladesh. So the COVID-19 has been created health security challenges in the country. Moreover, most of the people have no ability to examination of COVID-19 contamination and to isolation and treatment of COVID-19 positive for weak government health foundation in Bangladesh. In addition due to poverty, many people have no ability to get admission in private hospitals for treatment because of high expenses.



COVID-19 Impacts on Human Security in Bangladesh: Field data Presentation and Analysis

First of all, the study summarized the study variables using several descriptive statistics.

1.1 Socio-economic characteristics of general respondents

1.1.1 Gender of the respondents:

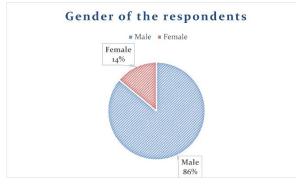


Figure 1.1.1: Gender of the respondents.

Figure 1.1.1 shows the gender of the study participants. Among 143 respondents of the field survey, 86% were male and the rest of them were female. It indicates that the percentage of male is comparatively high.

1.1.2 Age of the respondents:

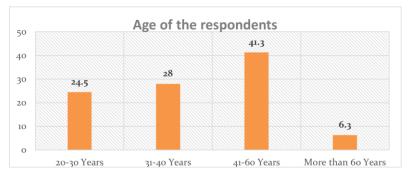


Figure 1.1.2: Age of the respondents.

Figure 1.1.2 illustrates the age distribution of the 143 respondents of the study. About 42% of the total respondents were aged between 41 to 60 years whereas almost 53% of the total respondents were under 40 years old and the rest of them were 60 years or more.

1.1.3 Educational status of the respondents:

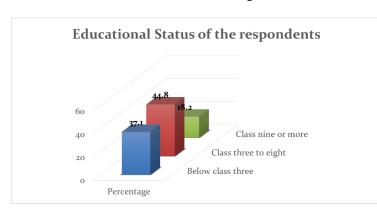
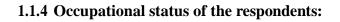


Figure 1.1.3: Educational status of the respondents.



Figure 1.1.3 displays the educational status of the study participants. The study revealed that more than onethird of the total respondents had below class three level educations. Almost 45% of respondents had class three to eight level education and below 20% of respondents had more than or equal secondary level education.



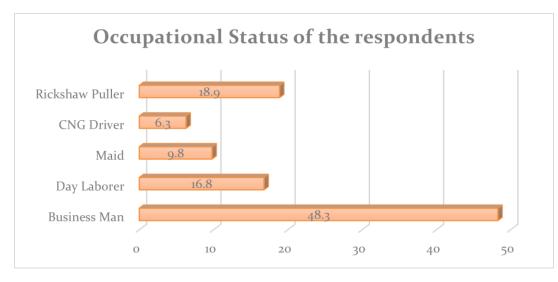


Figure 1.1.4: Occupational status of the respondents.

Figure 1.1.4 exhibits the occupational status of the respondents. The study results show that almost half (48.3%) of the study participants were businessmen, almost 19% were rickshaw pullers, and 16.8% were day laborers. The study findings also revealed that 6.3% and 9.8% of the total respondents were CNG drivers and maids respectively.

1.1.5 Marital status of the respondents:

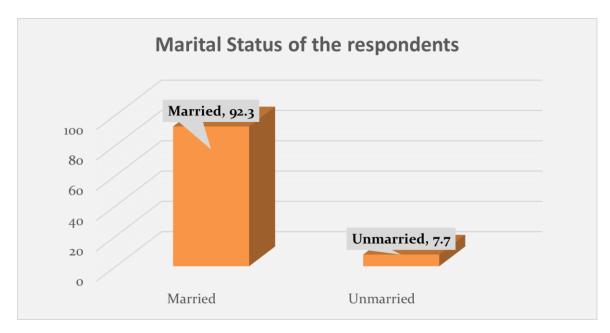
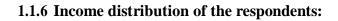


Figure 1.1.5: Marital status of the respondents.

Figure 1.1.5 shows the marital status of the study participants. The study findings tell that more than nine



out of ten of the total respondents were married and the rest of them were unmarried.



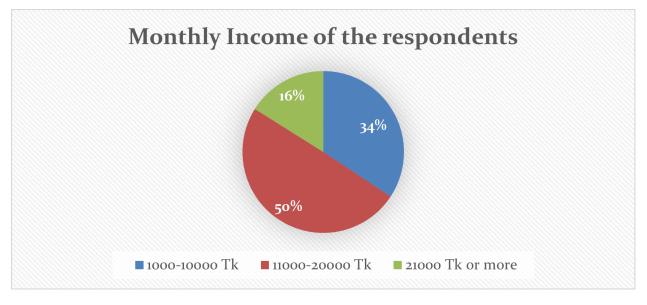


Figure 1.1.6: Income distribution of the respondents.

Figure.1.1.6illustrates the income distribution of the study respondents. The study results revealed that half of the total respondents had monthly income between 11,000 to 20,000 Tk. Almost one in six of the respondents had income below 10,000 Tk. monthly whereas one in three of the respondents had income of more than 20,000 Tk. monthly.

1.1.7 Expenditure pattern of the respondents

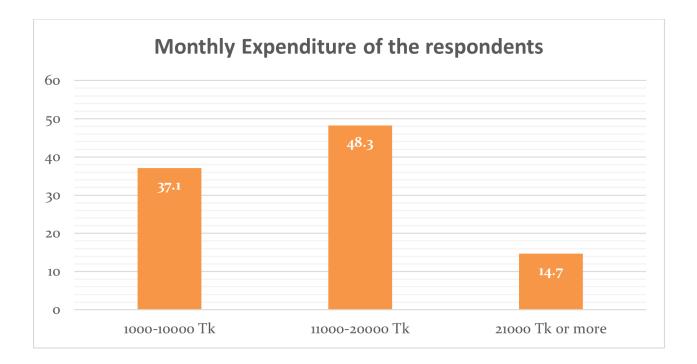


Figure-1.1.7: Expenditure pattern of the respondents.



Figure 1.1.7 displays the monthly expenditure pattern of the study partaker. It was evident that 48.3% of the total respondents had monthly expenditures between 11,000 to 20,000 Tk. About 37% of the respondents had below10,000Tk. monthly expenditure and the rest (14.7%) of the respondents had more than 20,000 Tk.

1.2 Economic Security

1.2.1 Impact of COVID-19 on family income:

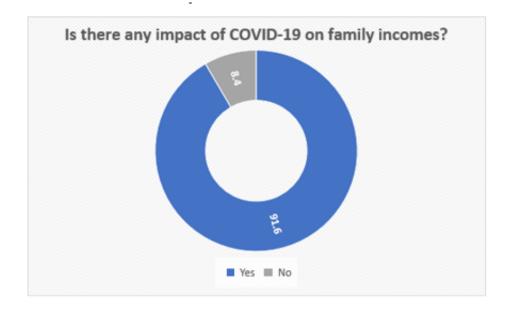


Figure-1.2.1: Impact of COVID-19 on family income.

Figure 1.2.1 is a pictorial representation of impact of COVID-19 on family income. The study found that more than nine-in-ten people agreed that COVID-19 had an impact on their respective family income.

1.2.2 Drop in your income due to COVID-19:

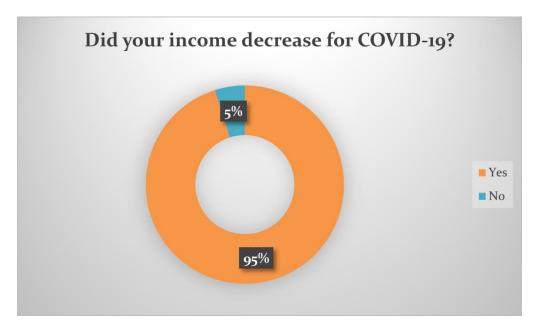


Figure-1.2.2: Percentage of drop in income due to COVID-19



Figure 1.2.2 illustrates the percentage decreasing in income due to COVID-19 of the respondents. About 95% of the study participants claimed that their income decreased due to corona virus pandemic. On the other hand, only 5% told that their income was not decreased during pandemic.

1.2.3 Losing job due to COVID-19:

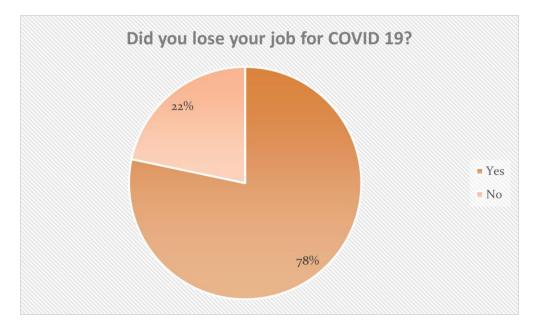


Figure-1.2.3: Percentage of losing job due to COVID-19.

Figure 1.2.3 displays the percentage of study respondents who had lost their job due to corona virus pandemic. The study found that about 80% people lose their job due to COVID-19 pandemic.

1.3 Health Security

1.3.1 Percentage of COVID-19 affected people:

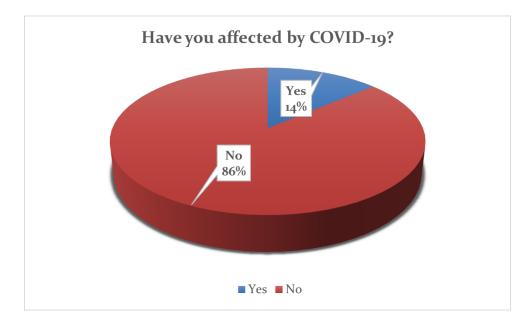






Figure 1.3.1 is showing the percentage of study participants of affected people by corona virus. Only 14% of the respondent was affected by covid-19.

Table 1.3.1: '	The causes	of health	security	for	COVID	19
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Causes	Percentage of causes
Population thickness and people crowded in Dhaka	72.5
Lack of Isolation Center	52.8
Lack of COVID 19 Hospital	50.0
Lack of ICU and Logistic Support	40.8
Lack of Doctor and Medicine	52.1
Lack of Vaccination	35.2
Lack of Consciousness	68.3
All of the above	26.1

Sources: Field Survey 2020-21

Table 1.3.1 represents the causes of heath security for COVID-19 as well as the opinion of study participants. Among the total of 143 respondents, the 72.5% of the total respondents claimed that "Population thickness and people crowded in Dhaka" is a reason of health security for COVID-19. Almost 70% of the study participants thought that "Lack of Consciousness" was responsible for health security. The study findings indicate that 52.8%, 52.1% and 50.0% of the study partaker people agreed that "Lack of Isolation Center", "Lack of Doctor and Medicine" and "Lack of COVID 19 Hospital" were responsible for health security respectively. Also 40.8% studied people found "Lack of ICU and Logistic Support" as a reason of health security. "Lack of Vaccination" and "All of the above" was also in the causes list in about 35.2% and 26.1% of the total respondents respectively.

Table 1.3.2: Types of mental effects by the forced lockdown for COVID 19

Causes	Percentage of causes
Recent health effects of the pandemic	79.0
The reaction of physical loneliness	49.7
Scare of fail to keep loved ones	30.1
Scare of death for lack of food	51.7
All of the above	5.6

Sources: Field Survey 2020-21

Table 1.3.2 shows the impact of forced lockdown for COVID-19 on mental health, with many people experienced recent health effects, physical loneliness, fear of losing loved ones, fear of not having enough food, and all of the causes. The percentage of people experienced each cause varies, with 79.0% of people experienced recent health effects, 49.7% experienced physical loneliness, 30.1% experienced fear of losing



loved ones, 51.7% experienced fear of not having enough food, and 5.6% experienced all of the above.

Table-1.3.3 Types of health security threats face during the lockdown period for COVID-19 physical isolation and economic tension

Causes	Percentage of causes
Psychological	93.7
Neurological	21.0
Others	7.0

Sources: Filed Survey 2020-21

Table 1.3.3 shows how individuals faced various health security threats due to physical isolation and economic tension during the lockdown period for COVID-19. According to the study findings, psychological threats were the most significant, with 93.7% of people faced them. Neurological threats were also present, with 21.0% of people experienced them. Almost 7.0% of people had faced other types of health security threats.

1.4 Food Security

1.4.1 Food crisis due to COVID-19:

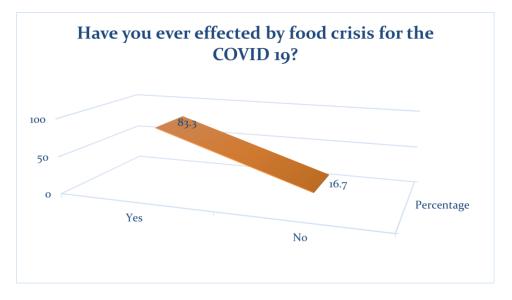


Figure-1.4.1: Food crisis due to COVID-19.

Figure 1.4.1 is a pictorial representation of the percentage of study partaker who had faced food crisis during COVID-19 pandemic. The study findings revealed that 83.3% of the total respondent had faced food crisis during pandemic.

 Table 1.4.2the causes of food insecurity during lockdown by COVID 19

Causes	Percentage of causes
Lack of supply of food is affecting directly to the vulnerable people	62.9



Decreasing in purchasing power	86.0
Reducing the capacity to produce and distribute food	52.4
Restaurants closing	30.8
Restrictions of movements	65.0
Lower sales, lower incomes and increase in price	86.7
Due to lockdown plan of action handling the matter of food security	14.0

Sources: Field Survey 2020-21

Table 1.4.2 represents the causes of food insecurity during the lockdown by COVID-19. The study findings revealed that almost 63% study participants agreed that one of the major causes of food was lack of supply of food, which was directly affecting vulnerable people. Another major cause of food insecurity was the decrease in purchasing power and about 86.0% of the total respondents agreed that. The findings also indicate that about 52.4% of the studied people addressed "reducing the capacity to produce and distribute food" and almost 65.0% people addressed "Restrictions of movements", as the causes of food insecurity. Again, the closing of restaurants was the reason of food insecurity in the eyes of almost 31% of the total study partaker. Furthermore, nearly 87% of all study participants cited that Lower sales, lower incomes, and increase in price was the reason behind the food insecurity. Lastly, 14% of all study respondents marked "Due to lockdown plan of action handling the matter of food security" as a reason of food insecurity.

1.5 Personal Security

1.5.1 Leaving Dhaka or change house due to COVID-19:

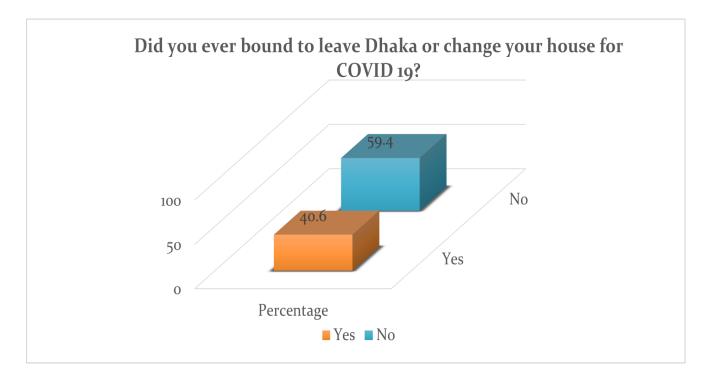


Figure-1.5.1: Percentage of leaving Dhaka or change house due to COVID-19.



Figure 1.5.1 shows the percentage of the study respondents who had leave Dhaka or change house due to COVID-19. More than 40% people had bound to leave Dhaka or to change their house because of COVID-19.

2.1 Impact of COVID-19 on human security

Table 2.1. The causes of COVID-19 impact on human security in Bangladesh

Causes	Types of human security	Percentage
Decrease household Income	Economic security	97.2
Lack of uninterrupted food supply	Food security	77.6
Lack of enough medical infrastructure and logistic support	Health security	48.3
Increase family violence		49.7
Forced lockdown	Personal security	91.6
Long time isolation		60.1

Sources: Field Survey 2020-21

Table 2.1 shows the percentage of causes which were responsible for the impact of COVID-19 on human security in Bangladesh. The study findings are expressed in four broad categories of human security *viz.*, economic security, food security, health security and personal security. The study has found that almost 98% of the total respondents claimed that decreasing family income was the cause of declining economic security during COVID-19. The study has also found that more than 77% of the total respondents agreed that uninterrupted food supply during COVID-19 was the cause of food insecurity. Almost half (48.3%) of the total respondents agreed that there were lacking of enough medical infrastructure and logistic support that are the cause of declining health security during COVID-19 epidemic. The study findings revealed that almost 50% of the respondents stated that family violence was the reason behind the impact of COVID-19 on personal security. The study findings also revealed that 91.6% and 60.1% of the total study partaker marked forces lockdown and longtime isolation respectively as the cause of personal insecurity during COVID-19 in Bangladesh.

2.1 Minimizing the impact of COVID-19

2.1.1 Vaccination status:

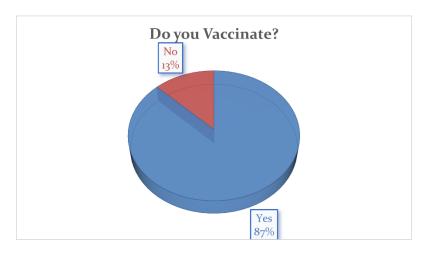


Figure-2.1.1: Vaccination status of the respondents.



Figure 2.1.1 is showing the vaccination status of the study participants. The results indicated that almost nine-in-ten people were vaccinated against COVID-19.



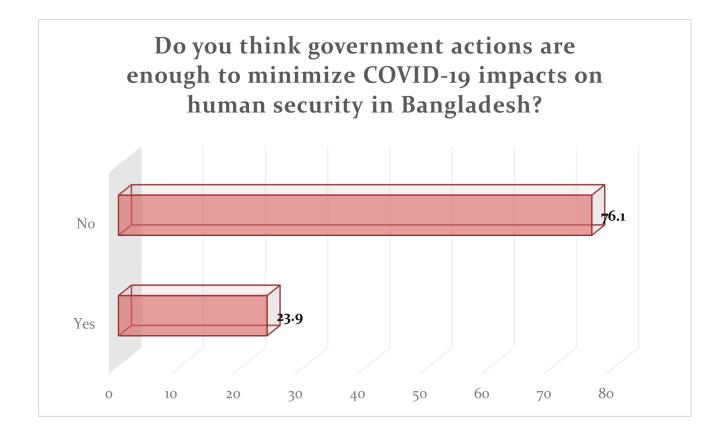


Figure 2.1.2: People's opinion about the government actions to minimize the impact of COVID-19.

Figure-2.1.2 illustrates the study respondent's opinion whether the government actions were enough to minimize the impact of COVID-19 on human security in Bangladesh. The study finding shows that more two-in-three people thought that government actions were not enough to reduce the impact of COVID-19 on human security in Bangladesh.

Table 3.1.1. People	's nercentions to	o minimize the im	inacts of COVID-19) in Rangladesh
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Causes	Percentage of causes
Providing cash money and food	83.9
Increase health infrastructure	58.0
Increase business loan low interest rate	67.1
Create jobs	64.3
Others ways	6.3



Sources: Field Survey 2020-21

Table 3.1.1 shows the opinion of the study participants to minimize the impact of COVID-19. The study findings suggest that there were a number of ways to minimize the impacts of COVID-19 in Bangladesh. According to the survey, providing cash and food is one of the most effective methods, with 83.9% of respondents endorsing this technique. 58.0% of respondents support increasing the health infrastructure in Bangladesh as a significant strategy for mitigating the effects of COVID-19. Increasing business loan in low interest rate is also crucial way to minimizing the effects of COVID-19 in Bangladesh, as supported by 67.1% of respondents. Creating jobs is a crucial measure to mitigate the effects of COVID-19 in Bangladesh, as supported by 64.3% of respondents. Lastly, 6.3% of respondents proposed other ways to mitigate the effects of COVID-19 in Bangladesh.

Table-4: At a glance of COVID-19 Impact on Human Security in Bangladesh

Questions		Percentage of responses	
	Yes	No	
Have you effected by COVID-19?	13.7	86.3	
Is there any impact of COVID-19 on family incomes?	91.6	8.4	
Did your income decrease for COVID-19?	95.1	4.9	
Did you lose your job for COVID 19?	78.3	21.7	
Did you ever bound to leave Dhaka or change your house for COVID 19?	40.6	59.4	
Have you ever effected by food crisis for the COVID 19?	83.3	16.7	
Do you vaccinate?	87.4	12.6	
Do you think government actions are enough to minimize COVID-19 impacts on human security in Bangladesh?	23.9	76.1	

Sources: Field Survey 2020-21

If we analyses the table-4 in this study we see 13.7 percent respondent were affected by the COVID-19 in Bangladesh. 91.6 percent respondent stated COVID-19 impacted their family income; 95.1 responded stated this pandemic decreases their income and 78.3 percent respondent stated they lose their jobs. For economic crisis 40.6 percent respondent bound to leave Dhaka or change their house due to decreasing income and loosed their jobs for COVID-19. Moreover, 83.3 percent respondent stated during COVID-19 time they were criticallyaffected by food crisis. In addition, 76.1 percent respondents think that government actions were not enough to minimize COVID-19 impacts on human security in Bangladesh. So we see during COVID-19 time human security of Bangladesh critically impacted.

Now we are discussing the main findings of the study:

COVID-19 directly impacted human security in Bangladesh.13.7 percent respondent was affected by the COVID-19 in the study area. 91.6 percent respondent stated COVID-19 impacted their family income; and 78.3 percent respondent stated they lose their jobs.

For economic crisis 40.6 percent respondent bound to leave Dhaka or change their house due to decreasing income and loosed their jobs for COVID-19.Moreover, 83.3 percent respondent stated during COVID-19 time they were critically affected by food crisis.

The study has found that almost 98% of the total respondents affirmed that decreasing their family income



was the cause of declining economic security during COVID-19. The study has also found that more than 77% of the total respondents agreed that interrupted food supply during COVID-19 was the cause of food insecurity.

Almost half (48.3%) of the total respondents stated that there were lacking of enough medical infrastructure and logistic support that were the cause of declining health security during COVID-19 epidemic.

The study findings revealed that almost 50% of the respondents stated that family violence was the reason behind the impact of COVID-19 on personal security. The study findings also revealed that 91.6% and 60.1% of the total study partaker marked forces lockdown and longtime isolation respectively as the cause of personal insecurity during COVID-19 in Bangladesh.

In addition, 76.1 percent respondents believe that government actions were not enough to minimize COVID-19 impacts on human security in Bangladesh.

Among the total of 143 respondents, the 72.5% of the total respondents stated that population thickness and people crowded in Dhaka was a reason of health security for COVID-19.Almost 70% of the study participants thought that lack of consciousness was responsible for health security in Bangladesh.The study findings indicate that 52.8%, 52.1% and 50.0% of the study partaker people agreed that lack of Isolation Center, lack of Doctor and Medicine and lack of COVID-19 dedicated Hospital were responsible for health insecurity respectively. Also 40.8% studied people found lack of ICU and logistic support as a reason of health security. Lack of Vaccination and all of the above were also in the causes list in about 35.2% and 26.1% of the total respondents respectively.

The study findings revealed that almost 63% study participants agreed that one of the major causes of food was lack of supply of food, which was directly affecting vulnerable people. Another major cause of food insecurity was the decrease in purchasing power and about 86.0% of the total respondents agreed that. The findings also indicate that about 52.4% of the studied people addressed reducing the capacity to produce and distribute food and almost 65% people addressed restrictions of movements, as the causes of food insecurity.

Again, the closing of restaurants was the reason of food insecurity in the eyes of almost 31% of the total study partaker. Furthermore, nearly 87% of all study participants cited that lower sales, lower incomes, and increase in price was the reason behind the food insecurity. Lastly, 14% of all study respondents marked due to lockdown plan of action handling the matter of food security as a reason of food insecurity.

The study findings suggest that there were a number of ways to minimize the impacts of COVID-19 in Bangladesh.

According to the survey, providing cash and food is one of the most effective methods, with 83.9% of respondents endorsing this technique. 58% of respondents support increasing the health infrastructure in Bangladesh as a significant strategy for mitigating the effects of COVID-19.Increasing business loan in low interest rate is also crucial way to minimizing the effects of COVID-19 in Bangladesh, as supported by 67.1% of respondents.Creating jobs is a crucial measure to mitigate the effects of COVID-19 in Bangladesh, as supported by 64.3% of respondents.Lastly, 6.3% of respondents proposed other ways to mitigate the effects of COVID-19 in Bangladesh.

Local Word Councilors and Officials Response

A general meeting with the local four word councilors and officials of the Dhaka South City corporationword no.4, word no.6, word no.14 and word no. 15 councilors and staffs. They stated main cause of the COVID-19 challenges on the human security in South City corporation were:



- 1. Thickness of the people of Dhaka South City Corporation and lot of slums
- 2. Lot of informal workers live in this city
- 3. Most of the people live in below the poverty line in the slums area.
- 4. Without proper ensuring of food security and other financial support, government announced lock down in Bangladesh.
- 5. Lack of medical infrastructure
- 6. Lack of sufficient isolation center
- 7. Lack of toilet and sanitation in slums area in the South city corporation
- 8. Due to lock down people lose their jobs and increase poverty
- 9. Lack of government enough food and financial support.

They stated for minimizing the COVID-19 impacts word councilors took following steps during COVID-19 time.

- 1. Provided cook food in the slums area and poor people by their personal found
- 2. Provided cash money and cloths
- 3. Provided hand sanitation, face mask, hand gloves and necessary safety equipment's
- 4. Established isolation center for COVID-19 affected people

For minimizing COVID-19 impacts on human security they suggested:

- 1. Government should provide food and cash money and ensure proper distribution
- 2. Government and NGOs should organize proper training, creating new jobs for unemployed people
- 3. Government should provide capital for the small businessman without interest in a limited time for reorganize their business.
- 4. For middle class and lower class people, government should announced special incentive for their utility bills.

POLICY RECOMMENDATION

In order to minimize the impacts of COVID-19 on human security in Bangladesh, the government social, health and economic policies should beimprove and taking effective steps. Following recommendations should take in that context:

1. It is important to initiate a schedule wise plan and execute regulation policies in the county that might support to minimize the COVID-19 impact and promote people mental balance to tackle COVID-19 relevant mental threats.

2. Health care facilities like preserving medical facilities for COVID-19 in COVID-19 dedicated hospitals must be improved and distributed over less concentrated areas to save social strain.

3. Increased district-based food cost unpredictability inspection. Unified security rules of conduct among agricultural product chains of supply.

4. Increase Boro period rice purchasing. Bangladesh government should increase her boro purchasing goal, even as a safety procedure and to storage accommodation. Extended purchases supply more rice cultivator



help in this future of requirement and provide more grantee to the continuation of government food transportation plan.

5. Arrange public-private participation to expend food distributionthrough dealers and set up Cold storagechains everywhere in districts.

6. Must be established good collaborationamong decision makers and local health professionals.

7. Economic restoration plan of the government of Bangladesh for the poverty-stricken and less earning people must be getting substantial preferences in fulfillment.

8. The government should be given more preferences in fulfillment of economic rehabilitation programs scheme for the poor and lower income people.

9. Government and Non-Governmental organizations should take necessary actions for safety of women those are facing violence and abuse during COVID-19.

10. Government should established a strong monitoring body for supervise and fruitful monitoring the various organs for minimize spread of propaganda through social and electronic media during the pandemic.

11. To safeguard mental health from COVID-19, we should assure a comfortable family environment and society.

12. The school, college and university authority should take essential measure to save the psychological health matter of their pupils and give them with essential aid. Bosom friends and household must help everyone for improvement of psychological health as they are the prime sympathizer.

13. Government must be contribute, comprehensive funding for the poverty-stricken groups. Government should give highest priority the economic stimulus, provided to very poor underprivileged peoples and small business men, in addition insurance for primary health care provider at the forefronts, emergency response workers, and caretaker helpful for crisis management.

14. Impacts of COVID-19 minimizing initiative relating the psychosocial, socio-economic, and environmental of the people are essential to minimizing universal epidemic. Thus, terrific development in the rate and capacity of science, global cooperation are necessary to share knowledge on the epidemic and virus rehabilitation. Cross-sectorial engagement and genuine assistance provision for disadvantage people should be secured.

15. Women and other unofficial workers those were lose their jobs and displaced by COVID-19, government and Non-Governmental Organizations (NGOs)must be provided training for better jobs and increase their income.

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