

## 2.45 crore new poor created by pandemic

Long-term, holistic plans needed for strong economic recovery

WE are deeply concerned by the findings of a survey conducted by the Power and Participation Research Centre (PPRC) and the Brac Institute of Governance and Development (BIGD), which suggests that the economic shock induced by the pandemic has pushed a whopping 14.75 percent of the country's population into poverty in one year. Over the past year, we have heard the term "new poor" being used to describe the households whose incomes were severely hit by the pandemic. The survey confirms that a large portion of the population who went below the poverty line during the pandemic have, one year down the line, not received the support they required to recover from it—out of 3.7 crore "new poor" identified in April last year, 2.45 crore are still struggling with rising living expenses, dwindling savings and mounting debt.

The urban poor seem to have been hit the hardest, with urban households being forced to cut food expenditure by 17 percent during the pandemic, and with informal loans of urban households increasing by 86 percent. What is even more concerning is that these same people are now facing the same hardships in the current lockdown as a result of the second wave of the pandemic, without having fully recovered from the first. In this situation, the decision to allocate Tk 10.5 crore from the Prime Minister's Relief and Welfare Fund to provide assistance to the poor and insolvent populations—who have been affected due to the ongoing lockdown—is a welcome one. In total, the government is expected to spend a total of Tk 930 crore, where Tk 880 crore will be given as cash assistance to 36 lakh low-income families, and the rest will be for one lakh disaster-affected farmers.

As welcome as the cash assistance is, effective targeting and disbursement are crucial here. Last year, the government faced a great deal of criticism for the anomalies found in the list of beneficiaries who were meant to receive cash assistance—this must be avoided this time. The authorities should also listen to the experts in order to come up with more long-term and coordinated policies to help the disadvantaged population to climb out from under the poverty line. Alongside existing social safety nets, specific new and significant programmes for the poor have been recommended, as well as an urgent national Cottage Micro Small and Medium Enterprises (CMSME) recovery action plan to help small enterprises make an economic recovery and provide employment to those who need it the most. Going forward, our policies must aim to protect the livelihoods of the most vulnerable while ensuring that health protocols are being maintained.

## Ensure vaccination for all globally

Nobody is safe until everybody is safe

WE wholeheartedly agree with Prime Minister Sheikh Hasina's call for Covid 19 vaccines to be declared as a global public good that needs to be reached to all countries of the world. The PM relayed this message during a recorded speech aired in the plenary session of a conference of the Boao Forum for Asia (BFA). She also said that nations must work together to help organisations such as the UN to be effective in fulfilling global medical and vaccine requirements.

In this regard, we also commend the government's vigilance in terms of finding alternative vaccine supplies in the face of India blocking its export of vaccines from the Serum Institute of India (SII) to meet domestic requirements. A five-member committee led by the director general of the Drug Administration was formed on Monday for this purpose, and they are supposed to submit a report to the PM by April 26. It is encouraging to know about the Sinopharm's offer of providing the country with 60 lakh doses and Bangladesh's tentative agreement with Russia to produce the Sputnik V vaccine locally.

These are all very welcome initiatives in this uncertain time of the global Covid-19 vaccine supply shortage, especially for countries such as Bangladesh. With some vaccine-producing countries limiting or even banning the export of their vaccines so that their own population is inoculated first, people in countries that cannot produce the vaccine have become much more vulnerable to increasing infection and death rates. There are, for instance, concerns about the supply of the second dose of AstraZeneca vaccine in Bangladesh. The government must ensure that those who are scheduled for the second dose of this particular vaccine can access it on time to ensure its efficacy.

If countries that are capable of producing the vaccines continue to only look after their own, instead of also helping other more vulnerable countries become vaccinated, then there is no way that the virus can be fully eliminated. This is a global health crisis and requires cooperation of all countries of the world.

We believe that now is the time to prioritise equitable distribution of the vaccines for the global population over all else, including removing the barriers of intellectual property rights on the vaccines. As the PM said in her speech, global and regional partnerships need to be strengthened in a coordinated manner so that these challenges can be addressed effectively. We strongly believe that the Covid-19 vaccines should be declared as public goods. Each person must receive their due doses of the vaccine, regardless of the economic or political state of their home country.

# The pandemic has exposed our existing vulnerabilities

And they are making recovery much more difficult



THE OVERTON WINDOW  
ERESH OMAR  
JAMAL

THE ongoing pandemic has caused huge economic losses for the world. In 2020, growth in South Asia contracted by 5.4 percent, which does not capture the whole story of how terribly its people have

actually suffered—but it is an indicator of how the region has struggled over the last year.

In late last March, the World Bank said in a report that South Asia is expected to grow by 7.2 percent this year and that the expansion will be driven mainly by Bangladesh and India. This expectation was predicated on the "success of South Asian nations in containing" the virus. Less than a month after the WB's bold prediction, both India and Bangladesh are now again struggling to contain the spread of the virus, making the WB's prediction look premature and optimistic at present.

Despite that, the report does include some useful information. For example, according to it, the pandemic has caused some 5.5 million children in the region to drop out of school, which could translate into more than USD 1 trillion in lost earnings. South Asian countries already score low when it comes to Human Capital Index—an index measuring which countries are best in realising the economic and professional potential of its citizens and how much capital each country loses through lack of education and health. Therefore, according to the WB, this index could decline for South Asian countries, even if GDP growth bounces back. South Asia, which grapples with high stunting rates among children and accounts for more than half of the world's student dropouts due to Covid-19, needs to bump up investments in human capital to help new generations grow up healthy and become productive citizens.

Another key vulnerability highlighted in the report is the fact that the pandemic likely resulted in a sharp fall in incomes of informal workers, who account for over 85 percent of South Asia's workers.

And this has already been proven to be the case in Bangladesh, where out of the 61 million people who are employed, 52 million are in the informal sector, which contributes more than 40 percent to GDP. According to a previous WB report, cleaning workers or housemaids (who make up a significant portion of the informal economy) received the biggest blow last year, as 54 percent of job losses were reported in these fields. In order to provide support to this large group of people and also mitigate any

have developed as a consequence of the pandemic—even though they have been amplified by it—but these were existing problems that have made recovery from the pandemic much more difficult.

Despite the rise in the number of children going to school in recent decades, the quality of education for the majority has consistently remained poor, posing a major challenge to the expansion of a skilled workforce. It has been obvious for quite some time that not everyone has benefited satisfactorily from Bangladesh's

pandemic. According to a recent survey by the Power and Participation Research Centre (PPRC) and the Brac Institute of Governance and Development, economic shock induced by the pandemic has pushed 2.45 crore people—or 14.75 percent of the country's population—into poverty in one year. And remember, this is on top of the previous 20.5 percent of the population who had already been poor, which makes this spike more significant.

Even though the pandemic itself could not have been foreseen, black swan events like this are expected to occur every once in a while. History is filled with examples that confirm this. That is why the fundamentals of the economy must always be reinforced and made strong—something we had failed to do. While laying bare South Asia's deep-seated inequalities and vulnerabilities, the pandemic has also provided an opportunity to stop us from repeating this mistake.

In that regard, we must learn to invest our scarce resources more wisely in order to "set a foundation for a more inclusive and resilient future", as recommended by the WB. Chart a path towards a more equitable and robust recovery, instead of the present K-shaped recovery trajectory.

For the long run, the government must recognise that the current spending on healthcare and education—the two sectors that are so vital for developing a healthy and dynamic workforce—is simply not good enough. And so experts recommend increasing them substantially.

In the short run, the government should provide direct cash transfers to the poor and vulnerable sections of society, and must reduce the amount of corruption and misappropriation that is often associated with aid meant for them. It should also set up soup kitchens for cooked food distribution in various points of major cities, as the urban poor are struggling particularly badly at present due to the ongoing lockdown. To avoid future difficulties in providing aid, a proper national database of the country's ultra-poor should urgently be established—for this, the government should reach out to the NGOs in the country for help.

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A road in the capital's Karwan Bazar area is crammed with sellers and buyers as they flout health safety rules, on April 20, 2021. Violation of lockdown restrictions continues in the city as the poor struggle to make ends meet. PHOTO: ANISUR RAHMAN

further damage, the report recommends that governments develop universal social insurance to protect informal workers, increase regional cooperation and lift customs restrictions on key staples to prevent sudden increases in food prices.

What is interesting is that the report says that returning to high growth, which is already proving difficult enough, will be the easy part for South Asian economies, as the region is facing much harder challenges in the form of increased inequalities and reduced access to education as a result of the pandemic. In the case of Bangladesh, however, it can be argued that these aren't problems that

impressive growth. As noted economist Rehman Sobhan explained to *Deutsche Welle*, "Per capita income has increased in Bangladesh. But income and wealth distribution could not be made equal and fair." As a result, "the income disparity between the top 5 percent and the bottom 40 percent" has been "increasing day by day." The pandemic has made it more extreme. But the fact that this was a major problem from before has simply made things worse.

Because so many people were already struggling economically, the number of people who have been pushed into poverty has exploded during the

# The silent pandemic: Social isolation and loneliness



ZAHA CHOWDHURY

OVER 700,000 Covid cases and 10,500 deaths and one year later, we are about to see another prolonged lockdown in Bangladesh. This means further social isolation associated

with quarantine measures and added uncertainty at an already precarious moment in our lives. That being said, there seems to be little or no discussion about the mental health pandemic that is hitting young people at an all-time high. As Prothom Alo reported earlier this year, Bangladesh had recorded 70 percent more deaths from suicide than from the pandemic in the first year of the coronavirus outbreak. Almost half of the deceased were aged 20-35 years old, while 35 percent were aged 5-19, and 16 percent were aged 36-80.

Researchers are yet to claim that the restrictive measures taken as a safety precaution and the rate at which mental health problems are increasing are directly related. However, according to the Directorate General of Health Services (DGHS), 8,462 people died from Covid-19 in the 365 days after the first coronavirus cases were detected in Bangladesh on March 8, 2020, while data collected by Aanchal Foundation found that 14,436 people committed suicide over the same period. Hence, this much should be acknowledged that the deterioration of mental health among younger individuals and social isolation due to lockdown measures may at least fall on the same spectrum.

In a recent survey conducted by the United States Centers for Disease Control and Prevention, 63 percent of 18 to 24-year-olds reported symptoms of anxiety or depression, with 25 percent reporting increased substance use to deal with that stress and 25 percent saying they would seriously consider suicide. In a report published by Mental Health America, researchers found that between April and September of last year, 70 percent of people reported that loneliness or isolation was the top contributing factor to these mental health issues. This means that the coronavirus pandemic has caused another kind of pervasive affliction—loneliness. The World Health Organization further reported that poor social relationship (characterised by social isolation or loneliness) was associated with a 29 percent increase in the risk of

heart disease and a 32 percent increase in the risk of stroke. Given its association with reduced lifespan and greater risk of both mental and physical illnesses, the widespread experience of loneliness became a public health concern even before the pandemic.

To make matters worse, many young people are constantly suffering from a gnawing feeling that they are wasting valuable time in their peak years as a result of a restricted social life. "For the people between the ages of 21 and 25,

approximate to in-person connectedness. It appears plausible that these options can reduce feelings of social isolation or loneliness (e.g. when seeing their grandparents on the monitor of their devices). However, although interactive meetings and family calls have proven to be a blessing for many during this pandemic, Waldinger is worried that it will become the old scenario of "the rich becoming richer," with some who are better off and more comfortable with technology thriving, while others struggle

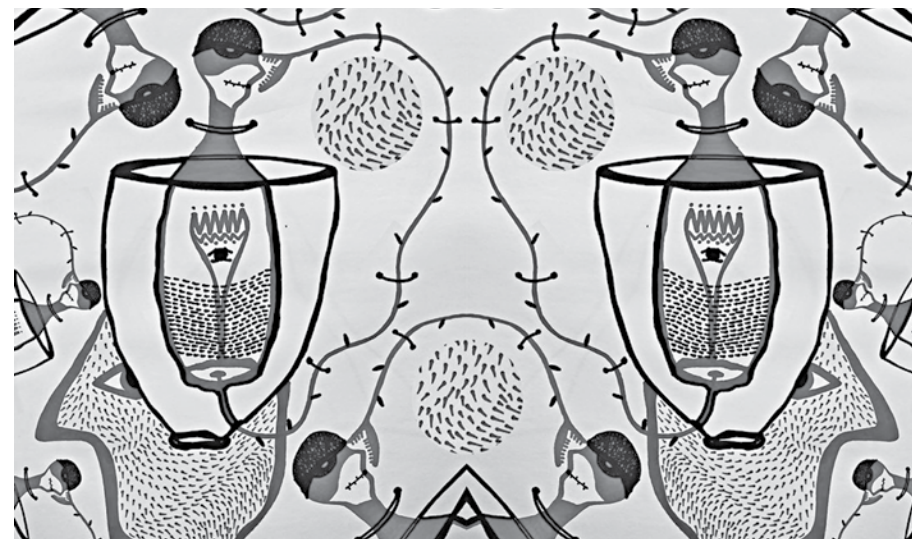


ILLUSTRATION: KAZI TAHSIN AGAZ APURBO

this is a time of expansion in their life," Dr. Sarah Lipson, an assistant professor at the Boston University School of Public Health, told ABC News. "I think this is a hard time for parts of life to stand still when there is normally just this fast-paced developmental time where so much is happening socially and professionally."

In Bangladesh, it is difficult to measure the impact of the mental health pandemic as there still remains a stigma surrounding mental health. Hence, the increase in anxiety, depression, sleep disruptions, thoughts of suicide and substance use is, in part, due to the shortage of mental health professionals and community-level intervention and prevention efforts.

So what can we do to combat loneliness? Unlike in past pandemics, many of those now social-distancing at home have the benefit of technology to stay connected. Though physical presence can't be entirely replicated, Robert Waldinger, a professor of psychiatry at Harvard Medical School and Massachusetts General Hospital, said that videoconferencing platforms such as Zoom provide ways to stay in touch and

in silence.

It is also probable that limited access to digital modes of social contact and networking—a common problem in developing countries like Bangladesh—may have contributed to increasing loneliness among some young adults. Alternatively, heavy reliance on digital technology for social contact could have, paradoxically, amplified the sense of social disconnection, thereby aggravating loneliness.

Moreover, losing a loved one can be particularly difficult now, as the normal comfort of family coming together to grieve and support each other may be postponed or foregone entirely due to social distancing concerns. The impact of grief compounded by isolation may be particularly hard on young people, and that lack of social support can make it hard to move forward. Under such circumstances, mental health professionals can be critical in helping move on from grief, rather than get stuck in it. As the work of psychologist Dr James Pennebaker at the University of Texas has shown, writing about emotional upheavals and expanded use of telehealth

can improve both physical and mental health (Perspectives on Psychological Science, Vol. 13, No. 2, 2018).

So, whilst we do all we can to alleviate the effects of isolation and re-establish social ties, we must still brace for a rise in mental health issues that might be triggered when resuming social interactions. There are several levels at which we can prepare for this: 1) Recognise those who are experiencing loneliness as early as possible to have tailored approaches to assist them in overcoming their difficulties. This may be accomplished by providing additional assistance in school/workplaces, assisting them in overcoming their fears of returning to school/work, or assisting them in socially reconnecting with their peers; and 2) At routine physicals, doctors should talk about depression and connect patients who are struggling with social support and Covid fatalities among their friends and family; and businesses should check in with workers and see if they are depressed and have opportunities to help them connect. To further reduce the stigma associated with loneliness, it's imperative to create national and local campaigns that reassure those suffering that it's OK to seek help.

Social isolation associated with quarantine can be the catalyst for many mental health sequelae, even in people who were previously well. Throughout this global pandemic, it is important to continue to advocate for those who are vulnerable, especially the younger population. If there is a benefit to these quarantined days, said Jeremy Nobel of the Center for Primary Care at Harvard Medical School, it is that with everyone physically isolated, the stigma of admitting to loneliness has decreased, which may make it easier to reach out. Hence, while governments have appropriately concentrated on reducing infection transmission rates, there is also an imperative to address the wider social impact of Covid-19.

We need to know what kind of support is needed right now in Bangladesh, as well as what kind of support organisations, programmes, and communities should offer in order to prepare beyond this point of the pandemic. Governments across the world will increasingly need to focus on both the short-term and long-term implications of loneliness and social isolation as public health priorities, and recognise that these are not just issues facing individuals but also society as a whole.

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