

Implication of social theories in covid-19: a succinct reflection on Bangladesh society

Abstract

SARS-CoV-2 or Covid-19, has emerged as the most serious public health threat of the contemporary age. More than 6.8 million individuals have died as a result of this infectious virus, which has infected about 673 million people. Coronavirus spread quickly across the world due to its infectious nature, resulting in a large number of deaths. In many ways, Covid-19 had an impact on nearly every nation in economic, social, cultural, political and other spheres. This paper is an attempt to identify major social determinants of Covid-19 worldwide with an extensive focus on Bangladesh society. The paper is primarily based on secondary sources like journal article, newspaper reports, research reports and validated website contents. The paper revealed that determinants of Covid-19 vary concerning the population, geographic location and other factors. In terms Bangladesh society, predominantly in urban areas, poverty is found to be a major determinant as well as impact of Covid-19. At the one hand, poor people tend to be more exposed to get infected by coronavirus; on another, Covid-19 induced lockdown in many ways crippled economic growth and triggered job loss and unemployment which contributed to increase poverty and marginality. Other social factors like social class, status, physical environment, health seeking behavior, and illiteracy are also found to be major determinants of Covid-19 infection.

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Arifur Rahaman, Tahsinul Haque, Mahfuzul Islam Rahat, Ontika Chowdhury

MSS, Department of Sociology, University of Dhaka

Correspondence: Arifur Rahaman, MSS, Department of Sociology, University of Dhaka, Tel 01816067181, Email arifdu6@gmail.com**Received:** February 06, 2023 | **Published:** March 24, 2023

Introduction

No other events in the last few decades have had half the devastating effect as the Covid-19 pandemic is having now. Coronavirus causes Covid-19 diseases included in the SARS-CoV-2 family and responsible for a respiratory illness that can be contaminated through direct contacting, coughing, or sneezing of a person carrying the virus as well as released droplets that can spread the virus around the infected person.¹ Corona, in a real sense, means crown-like spikes on the external surface of the infection and is henceforth named Coronavirus.² Until the outbreak of severe acute respiratory syndrome (SARS) (caused by SARS-CoV), which is also emerged in China, these viruses were assumed to be affecting animals only.³ In December 2019, it was first identified in Wuhan, China.⁴ On 8th March 2020 Institute of Epidemiology, Disease Control, and Research (IEDCR) ensured first Covid-19 cases in Bangladesh.⁵ As of February 2023, more than 29,000 people in Bangladesh had died from Covid-19, with an additional 2.3 million being affected. (DGHS, 2023) The pandemic of Covid-19 poses an enormous public health crisis, food systems, and the workforce. The social and economic impacts of the Covid-19 pandemic are devastating. Globally, more than 10 million people are on the verge of sliding into extreme poverty.⁶ Apart from that, Covid-19 brought about many changes in daily lives and lifestyles around the globe (e.g., work from home, home quarantine, home-schooling, etc.) and many new norms as preventive measures (e.g., wearing masks, sanitation, social distancing, and vaccination).

All these together formed a 'new normal' environment – coping up with the challenges of the Covid-19 pandemic conforming to preventive measures.⁷ Closures at all levels of education have weakened protective variables, such as everyday routine and social connections, which are important for maintaining mental health. Students from low-income families are disproportionately impacted when schools are shut down.⁸ Over 168 million children have had their schools shut down worldwide owing to COVID-19 lockdowns, some for as long as one year. Over 214 million students around the world, or about 1 in 7, have been absent from more than 75 percent of their classroom learning.⁹ Many countries employed distant

learning options to assure academic continuity, and much of the present argument focuses on how much children learned during school closures. While this possible learning loss may be transient, other factors that emerge in the absence of traditional schoolings, such as lower academic objectives or detachment from the educational system, will have “a long-standing effect on students’ performance”.¹⁰

This paper briefly reflected on the major sociological theories in relation to Covid-19 crisis. Secondly, it focused on social determinants of the Covid-19 crisis concerning Bangladesh. Later, the paper analyzed socioeconomic impacts of Covid-19 with an emphasis on Bangladesh.

Methodology

The paper is based on secondary resources and thus followed a literature review method. The researcher used Google Scholar to conduct keyword searches: Covid-19, social determinants of Covid-19, socio-economic impacts of Covid-19, and Covid-19 impacts in Bangladesh, among others. The paper includes journal articles, reports, policy briefs, and newspaper articles. The validity of the literature was confirmed before it was added. The paper employed an integrated review method, in which newspaper articles were used to validate theoretical aspects of Covid-19 that the author had presented.

Social impacts of covid-19: theoretical overview

Karl Marx: Inequality in healthcare and economy during covid-19 pandemic

No other theorist has been widely discussed in the sociology discipline (also in related disciplines) than Karl Marx. His writings were so vast that they are applicable understand many social spheres. Health and illness are no different, as Marx’s theory is now widely discussed to understand the inequality in healthcare services worldwide. Certain groups have been hit harder than others by the pandemic and its economic repercussions, shedding light on and exacerbating preexisting inequalities. In addition, the understanding impact of capitalism on healthcare services demands revisiting of

Marx and Engels eminent writings in the 19th century. Both used the materialist approach (known as *historical materialism*) to study society and economy. They came to the conclusion that the capitalist economic system [systematically] benefits the capitalist class at the expense of the working class.¹¹

While reflecting on Marx and Engels's theories in relation to health and healthcare, Collyer, et al.,¹¹ mentioned two aspects extracted from Marx's theories – capitalism and commodity. In their writings, Marx and Engels bring about the issues of ill-health, poverty, and disease while challenging the prevailing notion of ill health. Some of the conditions that contribute to the ill health of the working class were addressed by Marx and Engels, including drainage, waste collection, poor housing design, poor diet, and a lack of healthcare, amongst others.¹¹ In essence, they correlated disease with poverty and inequality while criticizing prevailing notions about poor people being 'weak.'

Also, Marx and Engels wrote on the healthcare industry being commoditized that profits elite and create inequality. During Covid-19 in May-June 2020, we witness that our health system almost collapsed in the face of many people being affected by coronavirus daily.¹² At that time, much better off or wealthy people were entitled to get medical care and emergency services where poor and working-class people could hardly access services like ICU. The number of intensive care unit beds was increased to 1169 in response to the crisis, but this is still not enough and is distributed unevenly.¹³ Even so, only the affluent can afford the intensive care unit bed even in such a dire need. Then again, it seems that not all members of the upper class enjoy such privileges. Even doctors in Bangladesh did not receive adequate equipment for personal protection, which resulted in the highest mortality of doctors in the world.¹⁴

The prevailing health inequalities Maswood,¹⁵ further influenced healthcare services during Covid-19 among the urban poor. Apart from that, Ward (2021) stated, the political economy of Covid-19 can be better understood in terms of the government's response to coronavirus. He focused on how a government deals with Health vs. Wealth during the corona outbreak – where the former is about managing healthcare issues later about managing the business, economy, investment, and employment (Ward 2021:728). We witnessed that Covid-19 resulted in the closure of many industries and offices. Nevertheless, despite the pandemic, RMG factories have remained open because of the vital role they play in the economy. As I mentioned elsewhere in the paper, the Bangladesh government announced a stimulus package for economic recovery in 2020. The evidence shows that larger enterprises (run by elites) got a giant share of the stimulus package, whereas micro and cottage industries got much lower; in addition, poor people received a small amount of money from this.^{16,17} In spite of this, the pandemic has resulted in the termination of millions of jobs in the apparel industry as a direct result of cancelled orders.

Durkheim: Suicidal behavior and solidarity during the pandemic

Durkheim's name is synonymous with the origin of sociology, as he was the first one who conducted a systematic sociological study, *Le Suicide*, in 1897. Some of the key concepts derived from his seminal works are solidarity, social order, sacred and profane, social fact, division of labor, and anomie. He went on to explain suicide in terms of two social forces: moral regulation and social integration¹ (Durkheim, [1897] 2005). The pandemic provided a real-world example of Durkheim's theory in action. Isolation, job loss, and

¹Based on these two forces, Durkheim categorized 4 types of suicide: altruistic, egoistic fatalistic, and anomic. Former two are related to high and low social integration while latter two related to high and low level of regulations.

financial insecurity are just a few of the many ripple effects of the epidemic that can contribute to people feeling disconnected from their communities. Those who are already weak or dealing with mental health disorders may be especially susceptible to an increase in their suicide risk due to these circumstances. Society requires a balanced level of regulation and integration to avoid suicide since social norms and customs regulate individuals. Any imbalance will result in the verge of suicide if individuals do not conform to prescribed social norms and regulations (Cleary, 2019). Corona pandemic resulted in the rise of suicidal behavior in many countries due to psychological stress and other factors.^{18,19,20} Durkheim's statement in *Suicide* ([1897] 2005) can be relevant here: "When the existing regulatory mechanism is disrupted, and the society is confronted with severe and stressful conditions, the impulse to commit suicide rises." A study by Khan, et al.,²¹ on suicidal behavior during the Covid-19 pandemic using Durkheim's theory found "a strong theoretical embodiment" with Durkheim's theory. Also, as stated earlier, the suicide rate spikes during an economic recession, natural disaster, or similar events, confirmed by their study.

Social Solidarity is another key concept of Durkheim which is much used in sociological analysis. Social solidarity is a prerequisite for a social order that is interdependence among people in a society in the form of cohesion (Durkheim, 1933). Solidarity during the corona pandemic was important to operationalize the preventive measures and create awareness among people. A study by Mishra and Rath (2020) on Indian society found that social solidarity was important to maintain practices like social distancing, wearing face masks, and not allowing anyone to enter the territory (in the village). Solidarity among people results from consistent behavior and practices among all, which was needed for corona prevention.¹ Durkheim's concept of social solidarity is the greatest way to comprehend the importance of community and interconnectedness in times of distress. People use soundbites, hashtags, and catchphrases such as "we're all in this together" and "stronger together" to express a sense of unity and a common struggle.²² It demonstrates that we may build stronger, more resilient civilizations that can withstand any storm if we recognize and value combined mechanical and organic unity. The world also expresses solidarity without gathering geographically by sharing identical thoughts; for instance, 'balcony singing' in Italy *The Guardian*,²³ to spread solidarity and 'Diya Jalao' in India. *The New Indian Express*,²⁴

Goffman: Stigma and labeling

The concept of 'stigma' has been widely used in a variety of ways. In sociological tradition, this concept is defined by Goffman,²⁵ as 'discrediting' defects in an individual in relation to their body, race or ethnicity, and character. Stigma is essentially a social phenomenon that develops through social relationships and is influenced by a society's social structure and culture.²⁶ Stigma is also closely connected to labeling; for instance, a person with Covid symptoms may pass a normal day (since the symptoms are minor fever, sneeze, and body pain) until someone labels him as a corona patient (like a physician after testing). After labeling, his interactions and movement will be limited since people will avoid him somehow. Once stigmatized, a person will be subjected to unequal treatment, discrimination, and prejudice.²⁷ As Covid-19 is highly infectious,²⁸ a patient might be blamed for going out or not complying with safety measures. In Bangladesh, a study by Mahmud and Islam (2020) found that people showed hatred towards corona patients repeatedly, even in some cases, forced them to dislocate, fearing the spread of coronavirus in their locality. There are a number of factors, including age, which contributes to the discrimination that people of a certain age face.

Mistry et al.,²⁹ founded that COVID-19-related stigma is particularly strong among Bangladesh's older population. Fear that they are more susceptible to Covid-19 has also led to the stigmatization and labeling of those with pre-existing diseases like asthma and diabetes.

Those who worked in healthcare on the front lines of the epidemic were likewise stigmatized and called names like 'infected' and "contaminated." As a result, some healthcare providers reported being shunned by their communities and even faced eviction.³⁰ In India, Mishra and Rath (2020) found that there was increasing discrimination against Northeast Indians since they look like Chinese people. Many people forced Northeast Indians to leave their apartments, hotel and in some cases, they were abused and blamed for bringing the virus. Whitehead (2020) reported the prevailing xenophobia in the US as many people repeatedly blame Chinese people there for coronavirus. Even Donald Trump, the ex-president of the USA, constantly called coronavirus a "Chinese virus."³¹

Bourdieu: Capital, class and covid-19

Pierre Bourdieu is a French sociologist who introduced some terms like capital (social, cultural and economic, habitus, field, and taste to examine the "bodily dimension of class experience").³¹ He was a great synthesizer who built upon the theories of many classical sociologists and philosophers and introduced new frameworks and methods to study social class, culture, and social structure. Before relating Bourdieu's theory to the present pandemic condition, we need to define some of his key concepts. Habitus, the central concept in Bourdieu's writing, denotes a person's history, environment, and practices that affect the environment (Ibid: 372). Bourdieu (1984) argued that, as individuals share a common history, environment, and practices, they become part of that social group. The habitus then defines differences among different groups and creates a sense of 'social identity to reinforce this difference. Economic, social, and cultural capitals are the three types of capital outlined by Bourdieu. Money and any assets that could be convertible to money, including formalized property ownership, make up economic capital. Social capital refers to [advantageous] social connections and networking that are important for the formation of social classes.³¹ Cultural capital refers to cultural knowledge and skills, for instance, education and self-improvement. In some conditions, this capital may be converted to each other, and when legitimized, it can turn into symbolic capital (Bourdieu, 1984). The most valuable capital is symbolic capital, which relates to status, honor, and recognition.

Rendering Bourdieu's theory, those who had more social capital during COVID-19 pandemic were more likely to have access to healthcare, be capable of working from home, and have access to PPE. Those who lacked social capital, like the poor and members of disadvantaged communities, were disproportionately hit hard by the pandemic. Begum,⁴⁶ writes that rich and privileged people are aware of coronavirus and take safety measures due to their access to various social networks. Also, people's perceptions of disease vary in relation to their class position and access to capital. We can also relate Bourdieu's capital in terms of the crisis in the present day. Since the arrival of the Delta variant (B.1.617.2) in Bangladesh in May 2021, many people have suffered from difficulties of berating, chest pain, and other complications needed in ICU and Oxygen to survive.ⁱⁱⁱ

ⁱMoynihan, D. & Porumbescu, G. (16 September, 2020). Trump's 'Chinese virus' slur makes some people blame Chinese Americans. But others blame Trump. The Washington Post. Retrieved 29 July 2021, from: <https://www.washingtonpost.com/politics/2020/09/16/trumps-chinese-virus-slur-makes-some-people-blame-chinese-americans-others-blame-trump/>

ⁱⁱⁱThe Daily Star. (18 June, 2021). Covid Infection in Dhaka: Delta variant

Many people could not manage the Intensive care unit (ICU) beds and Oxygen though they had money. People with better social connections and prestige were able to manage ICU in an emergency. Bourdieu also analyzed practices in relation to his concept of habitus, which is attributed to lifestyle. As we know, Covid-19 disease is related to lifestyle one leads (healthy or unhealthy), which is related to Bourdieu's theory.

Theory of planned behavior and covid-19 crisis

There are some theories from sub-disciplines of sociology (e.g., social psychology, environmental sociology, social anthropology, medical sociology) that are related to different aspects of the Covid-19 pandemic. For instance, we can relate the theory of planned behavior (TBA)^{iv} by Ajzen,^{32,33} in behavioral aspects concerning Covid-19 (i.e., washing hands, staying at home, physical distancing, and wearing masks while going out). Since coronavirus is very infectious in nature, the cooperation of people in Covid-19 preventive measures is obligatory. It needs people's evaluation and acceptance of such measures, as suggested by TBA. The Theory of Planned Behavior's central theme is that three components drive human behavior: "attitude, subjective norm, and perceived behavioral control".³² Attitude is a person's evaluation of performing or not performing an action based on the consequence of that. Subjective norms pertain to the societal pressure that impacts behavior, while perceived behavioral control refers to a person's perception of his/her abilities or restraints in performing an action. The behavior of people can be predicted in certain circumstances using this model. A study by Godbersen et al. (2020) on German university students evaluated people's perception of Covid-19 measures using TBA. The result shows that people accepted the government's measures like restriction on mobility, hygiene, social distancing, lockdown, etc., in the face of the threat of being infected by the coronavirus. A study on Pakistan by Irfan et al. (2021) on people's attitude towards wearing a mask found that the more familiar a person is to Covid-19, the higher tendency to wear a mask. They also found that people's social networking and closed connections have a greater influence on wearing masks. Alongside the risk perception of Covid-19 and the perceived benefit of wearing a mask, the most contributive factors were found, among others (Irfan et al. 2021).

Social learning and covid-19

Another theory close to TBA is Social Learning Theory (SLT), which later developed as Social Cognitive Theory (SCT) proposed by psychologist Albert Bandura and Richard H Walter,^{34,35} SCT is distinctive in that it emphasizes the importance of social influence and social reinforcement from both the outside and inside. SCT takes into account the many ways people acquire and retain actions, as well as the social environment in which they perform.³⁶ The idea takes into account a person's prior interactions in order to predict whether or not they would engage in the behavioral activity. These previous experiences shape reinforcements, perceptions, and expectations, all of which impact whether or not a person would engage in a certain behavior and why they do so. Many humanitarian and voluntary organizations took initiatives to promote preventive measures during the outbreak of the corona pandemic. However, such measures needed massive changes in people's behavior. Those who are promoting must be aware of the social environment the people are in and how people learn and maintain behavior. For instance, a study by BRAC,³⁷ on

in 68pc cases. Retrieved from: <https://www.thedailystar.net/frontpage/news/covid-infection-dhaka-delta-variant-68pc-cases-2113085>

^{iv}Previously known as Theory of Reasoned action (TRA) introduced by Fishbein and Ajzen (1975).

people’s perception of preventive measures show that their opinion varies significantly. One of the preventive measures is to *stay at home*. The concept of ‘home’ is different for different people. Affluent people usually have a large house with everything they need to spend days without going out. For a person living in a slum in a marginalized urban area, home is different. Because in a slum setting, a family of three to five must squeeze into a space no bigger than sixty to seventy square feet. Their residential territory is their home, not where they sleep. They have to go out to meet their daily needs. So, these preventive measures will not be the same for everyone. In May 2021, despite many restrictions imposed by the Indian government, millions of people attended Kumbh Mela – a Hindu festival – that resulted in ‘super-spread’ of Covid-19 all over India (*The Guardian*, 30 May 2021). Religious beliefs of these people superseded the fear of being infected by the coronavirus. Some of the people who attended the festival said that “they have come to bathe in the Ganga in the hope that Maa (mother) Ganga will protect them from the pandemic.” As Bandura mentioned in his theory, understanding the social environment of a particular group of people is necessary to predict whether or not they would engage in a particular behavior. The incident of Kumb Mela reflects this.

Social determinants of health and covid-19 crisis

Health is now more than a disease-free body; it encompasses a sound mind along with a sound body and a sound family too. This means the total wellbeing of human beings incorporates mind, body, environment, family, etc., matters.³⁸ Health is linked to various social factors that affect a person’s health and illness (Ferrer, 2018). Some factors, including employment status, residence or housing, and social organization, affect people’s health outcomes.³⁹

Goldsteen et al.,⁴⁰ defined some basic determinants of health and illness, these are following:

1. Physical Environment: This includes both natural environment and built environment. Natural environment consists of geography, climate, soil, water, animal life, and other such traits. Built environment includes: housing, economic condition, transportation, government, recreation, socio-cultural condition etc. features.
2. Social Environment: Social environment characterized by society or community, religion, social network, family and intimate relations, occupation, social prestige and other traits. Apart from that some other factors like government, religion, economic condition, and organizational structure also influence health.
3. Genetic factors: This is a growing perception toward the genetic factors influencing health and illness. We witness the disease like diabetes and cancer are inherited sometimes.
4. Health Behavior: It is now evident that disease like Alzheimer, cancer, influenza, stroke, pneumonia, chronic liver disease, and essential hypertension all results from a person’s behavior.
5. Health Services: Less availability of health services will result in poor health status of population.^v Identified a number of social determinants of health that contribute to health disparities. Figure 1 depicts some of the social determinants of health and illness based on his writing.

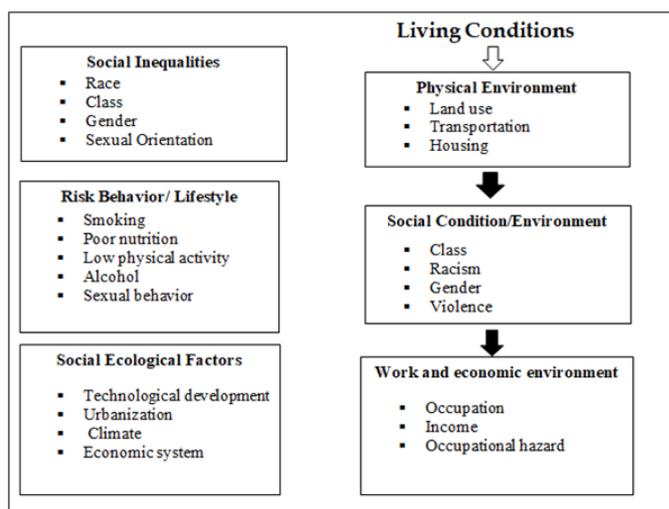


Figure 1 Social Determinants of health.

Adapted from Ferrer, 2018.

World Health Organization (WHO) mentioned some determinants of health. Those are the following: 1. the social and economic environment, 2. the physical environment, and 3. the person’s individual characteristics and behaviors.^{vi} Further, WHO included some other factors like income, social support, genetics, available medical services, education, and gender.

Social determinants of covid-19

Some factors like poverty, illiteracy, gender inequality, and unplanned urbanization are social determinants that make a country vulnerable to infectious disease.⁴¹ The risk of being infected by Covid-19 is linked to the living area’s environment, sanitation, immune system, density, and, broadly, livelihood. Crowded living conditions, lack of access to healthcare, and jobs in high-risk occupations all increase the likelihood that people from poorer socioeconomic backgrounds will catch Covid-19 and suffer severe consequences if they do get it. As a result, persons from various social classes are affected by this virus in a different manner. It is found that people who live in a natural setting and are exposed to fresh air and abundant sunshine tend to be more immune to coronavirus Halder,⁴² than those who live in a locked environment. Sunshine produces vitamin D, which strengthens our immune cells.^{vii} A study by Laird et al. (2020) found that death rates in Italy and Spain was greater among the people who had a low level of vitamin D which is also confirmed by Martineau and Forouhi.⁴³ Surprisingly, in Bangladesh, slum people are merely affected by Covid-19 despite living in a congested environment and not maintaining social distancing and other measures.⁴² Hasan et al.,⁴⁴ found that, those living in slums knew a lot about the illness and how to avoid getting it, but they knew less about the symptoms, the people who were at risk, and where to find information about COVID-19.

Covid-19 has brought some new norms that are part of preventive actions such as staying at home, washing hands frequently, maintaining social distancing, and avoiding *the crowd*. In the city’s slums, the idea of “home” is even more complex because a single corridor houses

^vFerrer, R. L. (2018). Social determinants of health. In *Chronic Illness Care* (pp. 435-449). Springer, Cham.

^{vi}World Health Organization. *Social determinants of health*. Retrieved 29 July 2021, from https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1

^{vii}Geddes, L. (2021). *How staying indoors affects your immune system*. BBC. Retrieved 29 July 2021, from <https://www.bbc.com/future/article/20200521-can-staying-inside-weaken-the-immune-system>.

eight to ten distinct families, each with its own kitchen and bathroom. Staying at home only refers to staying at one's residence in Dhaka for the middle class. The word "stay at home" appears to be interpreted differently in different regions by people from different socioeconomic backgrounds. And it's only logical that various perceptions will lead to different behaviors.¹² Many media channels have used the phrase "stay at home," such as a network name, hashtag, and even several Facebook Live events.

Social class is one of the determining factors of health, illness, and disease, which marks one of the core subject matters of medical sociology. We witness that Covid-19 also had class implications regarding infection and healthcare services. A study by Bajos et al.,⁴⁵ found that Covid-19 induced lockdown amplified social inequalities as the rate of infection among upper classes lowered during lockdown while infection rate increased among lower classes. We've seen inequality in Covid-19 treatment depending on the social status of the patient. The healthcare facilities were easier to get for the privileged class. The lower classes were largely apathetic in going to hospitals to undergo expensive corona testing. According to a study by Begum,⁴⁶ the perception of Covid-19 among people from different social tiers varied significantly and largely depends on a person's social and cultural capital. Some people use personalist explanations, while some prefer scientific one depending on their access to various capital.^{viii}

Bishwajit, et al.,⁴¹ study on infectious disease in South Asia used a sophisticated framework (Figure 2) to explain the determinants of infectious disease, which can be applied to the Corona pandemic.

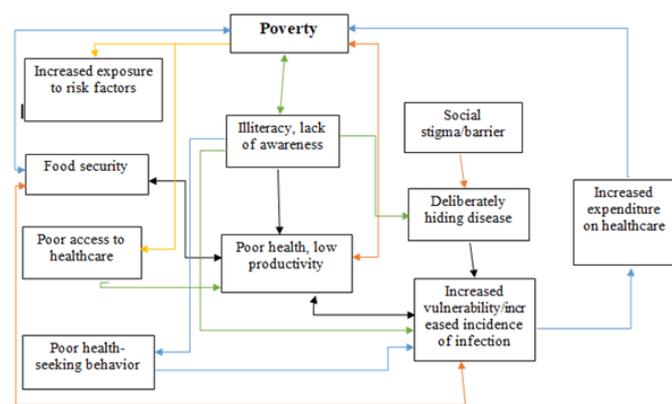


Figure 2 Social Determinants and Covid-19 Crisis.

Adapted from Bishwajit, et al.,⁴¹

At the center of the framework, Bishwajit, et al.,⁴¹ used poverty which is the most prevalent social determinant in South Asian countries, including Bangladesh.^{47,48} Poor people were more likely to contract the coronavirus because they are unaware of preventative measures such as physical distancing, washing hands, wearing masks, and following a balanced diet.¹² Then, food security was another issue for the government amid lockdown. Many poor lost their source of earning and thus spent days in misery during the lockdown.^{ix} A study

^{viii}Prof. Begum argued that, working class people who lack social and cultural capital like education tend to explain Covid-19 as Gajab (curse) from God. On the contrary, rich people, who have access to various capital and aware of the risk, tend to maintain safety measures regularly. In terms of variation in urban and rural areas, Prof Farhana Begum said, rural people define this coronarog as disease of urban area which will not affect rural areas.

^{ix}Needs Assessment Working Group. (2020). COVID-19: Bangladesh Multi-Sectoral Anticipatory Impact and Needs Analysis. Retrieved 26 July 2021, from: <https://reliefweb.int/report/bangladesh/covid-19-bangladesh-multi-sectoral-anticipatory-impact-and-needs-analysis>

by Ruszczyk et al.,⁴⁹ on two cities of Bangladesh showed that the consumption pattern of the people changed significantly due to after the pandemic hit. People lowered the quantity and quality of food they consumed as a result of a loss of income that led to economic hardship. Many people curtailed their food consumption and reduced expenditure on food. Also, there is a tendency among many people that they do not want to consult a physician despite having health issues or any disease. They deliberately hide their disease not to see a doctor. Sometimes, the fear of being stigmatized led people to hide their health issues. As we saw since the arrival of coronavirus in March 2020, many people were stigmatized and faced discrimination due to being infected by Corona.⁵⁰ Lack of education is associated with many factors like poor health-seeking behavior, poor health, lack of awareness, and poor health, which increase a person's health risk. Lastly, the increased healthcare expenditure (masks, hand sanitizer, soap, gloves, medicine, etc.) results in poverty, making people even vulnerable.

Riding the great odd: socioeconomic impact of covid-19 on Bangladesh

Because of the coronavirus outbreak, Bangladesh has been subjected to significant socioeconomic hardship. Bangladesh is a densely populated country with the world's seventh-largest population. The dread of coronavirus began even before the first case was discovered, owing to the dense population since the virus is very contagious in nature.^{16,51} In the United States, apart from heart disease and cancer, Covid-19 was the third major cause of death in 2020.⁵² In nations at the pinnacle of the ebb and flow wave of Covid-19, the infection can turn into the fundamental driver of death, outperforming malignancy and coronary disease. The United Nations has called the Covid-19 pandemic "global health crisis of our time and the greatest challenge we have faced since World War Two,"^x clarifying that it is a foundational emergency that is, as of now, influencing economies and social orders in remarkable manners. (UN, 2020)

It was evident that the country would confront significant economic difficulties before the arrival of the virus in March 2020. The pandemic hit Bangladesh just as the country was beginning to make advances in social and economic spheres. Bangladesh has made significant progress in terms of poverty reduction, gender equality, education, health, and other socioeconomic indicators and is set to graduate from least-developed countries (LDC) developing countries by 2026, said UN.⁵³ Besides, Bangladesh has achieved remarkable success in realizing Sustainable Development Goals,⁵⁴ lowering the number of people who live in poverty, malnourished children, maternal mortality while improving literacy, access to clean water, and sanitation.^{xi} In this situation of Bangladesh moving forward, Covid-19 emerged as a significant blockade. Over the years, the consistency of economic growth slowed down in the Fiscal year 2019-20.⁵⁵ For instance, Real GDP Growth was 8.15% in FY2018-19, which decreased by 5.24% in FY2019-20 (Ibid: 4).The World Bank estimated that the country's GDP would expand by 3.6% in 2020, which is slower than the average growth rate over the previous decade. Many people have lost their jobs and/or seen their wages decrease as a direct result of the pandemic, especially those who labor in the informal economy. In 2020, the World Bank predicted that the pandemic would have worsened poverty in Bangladesh by 1.5%.

^xUnited Nations Development Program. (2020). Humanity needs leadership and solidarity to defeat the coronavirus. Covid-19 pandemic. Retrieved 25 July 2021 from: <https://www.undp.org/coronavirus>

^{xi}Dhaka Tribune. (27 August 2020). Bangladesh makes progress in attaining SDGs. Retrieved from: <https://www.dhakatribune.com/business/2020/08/27/bangladesh-makes-progress-in-attaining-sdgs>

Once the dust settled from Covid-19, the RMG industry was on the upswing, but the conflict between Russia and Ukraine in late February of last year derailed their progress. The garment industry, which accounts for the lion's share of export revenues, had its annual growth rate hit 30.36% at the start of 2022. According to exporters, 2023 will be a pivotal and difficult year for the country's garment industry due to the potential for the war's effects to linger into the next year. Nonetheless, the industry earned \$45.7 billion in the year just ended (2022) from shipping clothes products, a 27.64% yearly increase over the \$35.41 billion earned in 2021. To reduce people's suffering, the government declared a policy stimulus package of 103,117 crores Taka.^{xii} Credit for export-oriented companies to pay wages to their employees, credit for small and medium enterprises, credit for jobless youth and migrant workers, and safety nets for the poor and lower-income people were included in this package. Yet, due to poor implementation strategy and management, the incidence of poverty increased, and suffering remains constant.¹⁶

The incidence of domestic violence increased terrifyingly amid the Corona pandemic. Global media reported a dramatic increase in the number of domestic violence all over the world.^{xiii xiv xv} According to the latest data published by UNICEF, Bangladesh has one of the highest rates of child marriage in the world, ranking fourth globally.⁵⁶ Long-term school closures caused by the epidemic have led to an estimated 13% increase in the number of child marriage across the country, however many of these marriages go unreported.⁵⁷ At least 13,886 girls in 21 districts were victims of child marriages during lockdown last year (April – October), according to Manusher Jonno Foundation (MJF).^{xvi} MJF conducted a survey on 57,704 women and children from 53 districts of Bangladesh to assess the extent of domestic violence during Covid-19. During the nationwide lockdown in May, 9693 women and 1764 children were victims of various types of domestic assault, according to the report.⁵⁸

Conclusion

The pandemic has exposed the fragile situation of the health sectors in Bangladesh. Also, it helped the people to realize the importance of public health. Many changes are taking place worldwide and in Bangladesh, ranging from health, economy, governance, politics, and cultural arena.^{55,59,17,5} World Bank,⁶⁰ stated that Covid-19 impacted Bangladesh profoundly in terms of health, economic growth, GDP, and poverty which will have long-term economic implications for Bangladesh. In addition, the pandemic is also harming the achievement of the Bangladesh government in terms of socioeconomic aspects.^{55,60-73}

^{xii}Kamal, A. H. M. M. (2020). Economic Transition and Pathway to Progress–Budget Speech 2020-21. *Dhaka: Ministry of Finance, Government of the People's Republic of Bangladesh*, 28.

^{xiii}*Sky News*. (24 April 2020). Coronavirus: 4,000 domestic abuse arrests in London in just six weeks, police say. Retrieved 26 July 2021, from: <https://news.sky.com/story/coronavirus-4-000-domestic-abuse-arrests-in-london-in-just-six-weeks-police-say-11978358>

^{xiv}*ALJAZEERA*. (18 April 2020). Locked down with abusers: India sees surge in domestic violence. Retrieved 26 July 2021, from: <https://www.aljazeera.com/news/2020/4/18/locked-down-with-abusers-india-sees-surge-in-domestic-violence>

^{xv}*Reuters*. (27 April 2020). 'Another pandemic': In Latin America, domestic abuse rises amid lockdown. Retrieved 26 July 2021, from: <https://www.reuters.com/article/us-health-coronavirus-latam-domesticviol-idUSKCN2291JS>

^{xvi}Manusher Jonno Foundation. (2021). 13,886 child marriages took place during lockdown last year. Retrieved 29 July 2021, from: http://www.manusherjonno.org/latest_stories/13886-child-marriages-took-place-during-lockdown-last-year/

The effects of the Covid-19 pandemic on several sectors of society have widened the scope of investigation for public health practitioners and other academics and experts. Many types of research are being carried out from various fields exploring different aspects of the corona pandemic, which reinforces the fact that health, disease, and illness are not only biomedical phenomena. In this paper, I tried to give a brief overview of Covid-19's socioeconomic impacts. In addition, I looked at how several social determinants of health are linked to the Covid-19 pandemic. Besides, the paper also addressed some sociological theories while relating them to various aspects of the Corona pandemic. I hope this paper would be able to provide an overview of socioeconomic impacts and social determinants of Covid-19. An empirical study would have provided a better understanding of the phenomena, a major limitation of this paper.

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Conflicts of interest

The authors declare that there is no conflict of interest.

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