

## Perceptions and impact of COVID-19 on residents in rural community in Bangladesh: A qualitative rapid assessment

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### Background

- Robust COVID-19, alike any global pandemic, is likely to impact negatively on the social, economical and other sectors in any country
- Bangladesh has taken multiple steps, to control COVID-19 spread, including restricting human movement which is anticipated to effect to access required public healthcare facilities
- Evidences need to be recorded to identify specific points to be addressed to improve strategies further, such as accessing healthcare facilities efficiently during such an emergency.

### Objective

- Explore perceptions of COVID-19, including transmission and prevention
- Understand the impact of pandemic response on food consumption, healthcare and livelihoods

### Methods

#### Study site

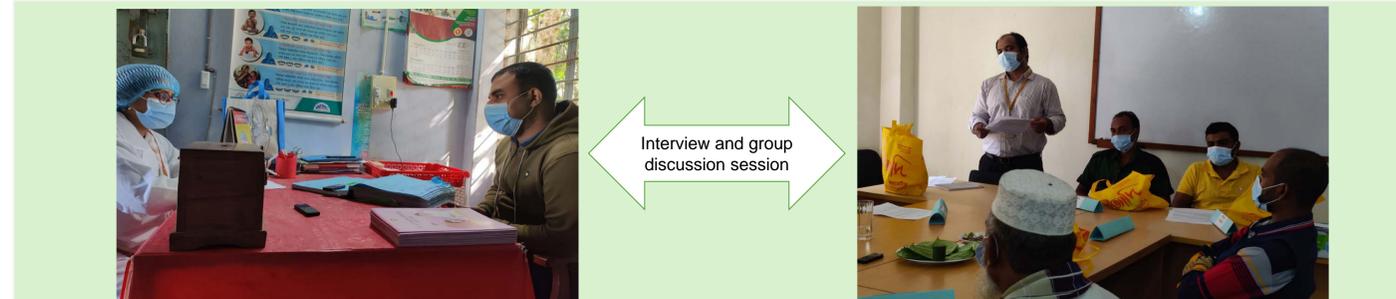
The study was conducted among the residents of Baliakandi, a rural sub-district in Bangladesh, where a multi-country study Child Health and Mortality Prevention Surveillance (CHAMPS) is ongoing

#### Data collection period

November to December 2020, after lifting the first phase of lockdown across the country

#### Data collection and data analysis

- 16 key informant interviews with a wide range of participants included residents previously diagnosed with COVID-19, parents of <5 children, religious leaders, the local administrators (govt. officials and local representatives) and healthcare providers
- Two focus group discussions (FGD) with local drug sellers and community volunteers of CHAMPS
- Framework analyses was carried out



### Results

#### Knowledge and perception of COVID-19 transmission

- Respondents perceived that international travelers introduced 'Corona' to the country and it then spread from cities to rural areas
- Local spread continued person to person through coughing and sneezing by social interactions and by touching contaminated environmental surfaces in public places including mosques, local markets and public transport.

#### Risk perception

- Different level community residents reported increasing their risk by dealing suspected patients (drug sellers) and close contact with customers in local grocery shops (shop keepers)
- Participants perceived no use of mask, reluctance to handwashing, uncovered coughing, and sneezing and sharing same bed with infected spouse/person put them on risk to get the disease
- Healthcare providers reported a low Personal Protective Equipment (PPE, such as coverall, gloves and mask) supply, noting that PPE reuse increased the risk of infection.

#### Prevention measures

- To prevent transmission, respondents washed hands, wore masks, drank hot water or herbal tea, disinfected household surfaces with bleaching powder or liquid Savlon, refrained from shaking hands and avoided crowds
- Local authority disseminate preventative measures by loud speaker announcement; shifted local market to the open space and set handwashing station; asked residents to inform local administration if any suspected (patient or returnee) found.

#### COVID-19 blame and stigma

- Neighbors isolated an infected family, blaming that they were responsible for spreading across the community
- Residents erected a fence to isolate households of those tested positive but also supplied food and daily necessities to the household residents; however, residents become more supportive to infected persons/families at the later stage of the pandemic.

### Effect of COVID-19 pandemic

#### Income and expenditure

- Food insecurity and financial hardship were widely noted
- Members of low-to-middle income groups lost their jobs as businesses were shut
- Some took out micro-credit loans or sold their land
- Due to this hardship, residents cut out high-protein foods (e.g. chicken, egg, milk) and stopped non-essential expenditures.

#### Accessing healthcare

- During lockdown, residents primarily sought healthcare (e.g. antenatal, pediatric care) from village doctors or drug shops due to fear of infection from health facilities
- Residents reported that the regular physician service at local health complex was intermittent
- Respondents believed that childbirth by unskilled birth attendants increased while movement was restricted
- One woman who recovered from COVID-19 and experienced a miscarriage reported that she had not been able to attend antenatal visits and blamed the lockdown for her miscarriage.

### Discussion and conclusions

- Our study explored perceptions of COVID-19, including transmission and prevention that could aid in further community engagement strategy in managing the pandemic
- The findings demonstrate the importance of ensuring access to essential food and healthcare, if movement restrictions are used, to avoid any adverse maternal and child health outcomes.

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#### See more data at

<https://champshealth.org/>

