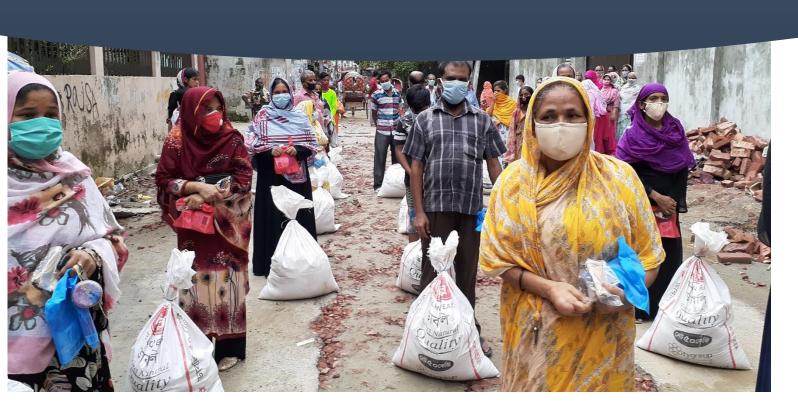
Research

on

The Impact of C-19 on Workers Livelihood, Government and Grassroots Initiatives Response to COVID-19 and Financing for Social Protection Floor in Bangladesh







The Impact of COVID-19 on Workers' Livelihoods, Government and Grassroots Initiatives in Response to COVID-19 and Financing for Social Protection Floor in Bangladesh

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Contents

Tables and Figures	03
Abbreviations	04
Executive Summary	05
Introduction	08
Study Objectives	10
Methodology	10
Study Area	11
Limitations	12
Study Findings	12
Findings from Key Informant Interviews	26
Learnings and Recommendations	28
Conclusions	28
References	30
Annex	31

TABLES

Table 1: Housing/location of the respondent	12
Table 2: Working sector of the respondent	13
Table 3: Age of the respondent	13
Table 4: Sex of the respondent	14
Table 5: Monthly income	16
FIGURES	
Figure 1: Map of the study area	11
Figure 2: Numbers of bread earners in family	15
Figure 3: Education status	15
Figure 4: Monthly income	16
Figure 5: Monthly family income	18
Figure 6: Status of COVID-19 among workers	20
Figure 7: Measures taken to cope with COVID-19	20
Figure 8: Cash support from government	21
Figure 9: Support from non-government organisations	22
Figure 10: Coverage of social security scheme of the government	23
Figure 11: Coverage of social security scheme of the government for	
respondents' family members	24
Figure 12: Social protection facilities at workplaces	25

ABBREVIATIONS

AMRC Asia Monitor Resource Centre

BDT Bangladesh Taka

BGMEA Bangladesh Garment Manufacturers and Exporters Association

BIDS Bangladesh Institute of Development Studies

BRAC Bangladesh Rural Advancement Committee

CBN Cost of Basic Needs

CUP Coalition for the Urban PoorFY 2020–2021 Fiscal Year 2020–2021

HIES Household Income and Expenditure Survey

GoB Government of Bangladesh

IEDCR Institute of Epidemiology Disease Control and Research

OSHE Bangladesh Occupational Safety, Health and Environment Foundation

PPE Personal Protective Equipment

RMG Ready-made Garment

Executive Summary

The 2019–2020 coronavirus pandemic has brought the world to a grinding halt. It is causing unprecedented disruption in all sectors of economic activities in the country and has adversely affected the lives and livelihoods of both formal and informal workers across the country. Apart from the health pandemic, the country is also facing economic challenges. Within days of lockdown, industries – big and small – have come to a standstill. In this scenario, it is, again, the most vulnerable people face the most economic uncertainty. Thriving economic growth over the past two decades has contributed to reducing the poverty in Bangladesh. Before the lockdown, 53 million people (31.5% of the population) were under the poverty line, which represents a considerable development challenge. But a recent survey conducted by South Asian Network on Economic Modeling (SANEM) revealed that 42% people are under the poverty line due to the impacts of the coronavirus. In this research, 88% percent of the workers and family members haven't had any symptoms of COVID-19coronavirus and only 3% percent of workers' relatives had died due to COVID-19.

Most of the survey respondents are from Dhaka city, followed by Savar. Among the respondents, 53% are from the formal sector and 47% from the informal sector. The highest number of respondents are from the home-based work sector and live in Dhaka and Savar. In the survey, a total of 100 formal and informal workers were interviewed, and the highest representation (32%) are between 31 and 40 years old. Sixty percent of respondents are female and 40% are male.

The study revealed that 53% of respondents have two bread earners in their family followed by 25% with only one family bread earner. Around 45% of the worker's monthly income is below BDT 10,000 (USD 117). Thirty-eight percent of the workers said that their monthly income is between BDT 5,000 and 10,000 (USD 59–117). Forty-one percent of respondents' family monthly income is between BDT 10,000 and 20,000 (USD 117–235). Continually, 24% of respondents

reported that their monthly family income is between BDT 20,000 and 30,000 (USD 235–353), while 23% said that their monthly family income is less than BDT 5,000 (USD 59).

For 19% of respondents, one family member is jobless during lockdown while 21% stated that two family members have no work during lockdown. Among the jobless people, most are home-based workers. Eighty-three percent of respondents said that they have been using masks at the workplace, while 56% said they have been using soap at workplaces. As well, 92% of respondents have been aware of COVID-19 and the preventive mechanisms against the virus.

The study shows that 23% of respondents have lost their income while 30% of respondents said that their income hasn't declined and 14% said that their income has been reduced to 50%.

To cope with the adverse impacts of COVID-19, 37% of workers borrowed money and 21% withdrew their savings. As well, workers have needed government cash and emergency food support, but the government has distributed relief and cash support for only 19% of the workers. Sixty-nine percent of respondents reported that although they were eligible to provide the cash or food support, they didn't get the support. Lack of proper documentation, social stigma and political nepotism are the root causes of not receiving the support. Though the government has failed to provide cash and emergency support to vulnerable workers, 74% of workers have been provided emergency food, PPE and other kinds of support from non-government organisations and individual initiatives. To overcome the vulnerability, some of the workers want to start an individual business, and some also want to start an online business.

The survey showed that only 8% of respondents benefitted from any government social security schemes, but nearly all respondents (92%) are not covered by any social security schemes by the government. Only 11% of the respondents' family members are under the coverage of social security by the government, while 89% of families are not under any social security schemes of the government. Old age benefits and widow's benefits are included in this coverage.

The study also showed that 28% of respondents are getting social security/health security from their employers while 72% are not getting any social security services or medical care from the employers. That is a big gap in terms of social security from employers.

Across the country, several other sources have reported increased instances of domestic violence during the lockdown period. For this study, the respondents felt shy and uncomfortable about reporting cases of family violence. Some respondents spoke openly about existing domestic violence and how they are dealing with it, while others shared either no response, denied that there was family violence occurring, or indicated no change in existing violence during lockdown. About 48% of respondents remain silent on domestic violence, while 30% of respondents said family violence and women oppression is increasing. Eleven percent, however, said that family violence has been decreasing during the pandemic.

Safety in public places is a big concern, especially for the women workers. The study shows that 41% of respondents stated that safety in public places and public transportation was higher before lockdown, whereas 39% of respondents stated that safety in public places has decreased since the pandemic began.

Sixty percent of respondents are involved in the trade union movement and among them, 65% did not receive any support or cash from their union and federation, as their union and federation was not financially capable of providing such kinds of support.

1. Introduction

The COVID-19 pandemic was confirmed to have spread to Bangladesh as of March 2020. The first three known cases were reported on 8 March 2020 by the Institute of Epidemiology Disease Control and Research (IEDCR). After this point, the virus has gradually spread across the country. Both formal and informal sectors of working communities are most affected by the pandemic. The Ready-made Garment (RMG), leather and other sectors have rapidly lost orders, millions of workers have lost their jobs and millions of other workers' jobs are at stake. According to the Bangladesh Garment Manufacturers and Exporters Association (BGMEA), as of 29 April 2020, \$3.17 billion worth of RMG orders were cancelled or suspended, affecting 2.27 million workers.

The Government of Bangladesh (GoB) announced lockdown but allowed the RMG sector to continue production ensuring health protection measures. BGMEA said it has decided to reopen its factories from 26 April 2020 in a bid to save the sector from economic collapse.¹ As per the plan, BGMEA has developed a set of guidelines for factory operations and distributed it among its members. The guidelines mentioned that as a prerequisite to open, factories should obtain necessary permission from local and national government agencies. However, factories located in coronavirus epicentres can only be opened in the second phase of operations.²

The COVID-19 pandemic has adversely affected the lives and livelihoods of formal and informal workers in not only Bangladesh but all over the world. Workers, especially women, are among the worst hit as they depend on work orders from firms and intermediaries up the chain. Due to the impact of the novel coronavirus, portions of the poor class, especially working-class communities in Bangladesh including extreme poor, poor and the lower-middle people, are facing a livelihood crisis with lack of treatment facilities. This crisis has been exacerbated by the inadequacy of the country's existing social security programs and the lack of allocation for the

¹ https://www.ecotextile.com/2020041625965/materials-production-news/bangladesh-to-reopen-garment-factories.html

² https://tbsnews.net/economy/rmg/garment-factories-opening-april-26-72238

people especially working-class communities. So, now is the right time to streamline these social security programs.

The Bangladesh Labour Force Survey 2016–17 revealed that 85.1% of total employment in the country is still engaged in the informal sector; this was 86.02% in the fiscal year (FY) 2015–16. The majority of these workers are dependent on daily and contact-based wages, and are now in a state of great economic crisis. They are living in extreme poverty and hunger.

The country's apparel industry is going through a critical moment. The garment industry is losing its ability to keep pace with competing countries in the international arena, and is also struggling to cope with continuing price declines, rising production costs and rising remediation costs. In the context of the ongoing COVID-19 pandemic, Bangladesh has been facing various economic crises in the fiscal year 2020–21, and a large section of the country's working communities has been excluded from social security. In view of the COVID-19 emergency, it is important for Bangladesh to be appropriately ready to take necessary preparations to deal with both immediate- and medium-term impacts of this outbreak as early as possible.

COVID-19 is going to have serious implications both for the health sector's preparedness and macroeconomic management of Bangladesh. This has important ramifications for reprioritisation, resource reallocation, fiscal—monetary policies and measures to be pursued by Bangladesh in near and medium terms. As Bangladesh prepares for the upcoming budget for FY 2020–21, it is important to understand the extent of resource requirement for healthcare and economic management. To this end, the Bangladesh Occupational Safety, Health and Environment Foundation (OSHE) has undertaken the current study.

The COVID-19 pandemic is shown to have serious health and economic implications. This is considered a global health and societal emergency that requires effective immediate action by governments, the private sector and individuals. The present paper looks into the impacts of COVID-19 on the Bangladesh economy. Focus was given to five critically important sectors of the

Bangladesh economy: (i) disruption of supply chains in major economic activities; (ii) healthcare; (iii) social protection; (iv) public finance; and (v) life and livelihood of the workers.

2. Study Objectives

The study was designed to understand the impacts of COVID-19 on formal and informal workers in Bangladesh to know the social and economic status, and to generate findings that could be used to upgrade their status and further action plans. The objectives of this study also delineate the present status of the workers due to COVID-19, based on secondary sources, government, donors, research organisations, etc., to help outline the overall impact on the workers.

The study also investigated whether there has been an increase in care and other household responsibilities due to the pandemic-cum-lockdown. The study touched upon the incidence of domestic violence to confirm its alleged increase without going into much detail.

The study's specific objectives are:

- Find out the impact of COVID-19 among formal and informal workers.
- Assess the implementation of health protection guidelines at factory level.
- Find out the level of awareness among the workers on COVID-19 preventive issues.
- Find out the level of knowledge, attitude and practice for minimising risks to COVID-19.
- Find out the state of gender-based violence among the workers due to COVID-19.
- Find out the income gap due to COVID-19.
- Assess the social security and relief status provided to workers in the context of COVID 19.

3. Methodology

The study was conducted using interviews with 100 formal and informal workers from RMG, leather supply chain, tea sector, home-based workers, construction sectors, ship-breaking sectors and domestic workers based on a set of questionnaires. The questionnaire is attached in Annex 1. There were also interviews with some Key Informants. Survey respondents were

determined using random sampling. Among the respondents 40% are male and 60% are female workers.

Two types of interviews were conducted:

- 1. In-person interviews
- 2. Telephone interviews

As physical movement and social gathering is restricted in the country due to COVID-19, some interviews were conducted over telephone and some were done in person, maintaining physical distance and employing other protective measures.

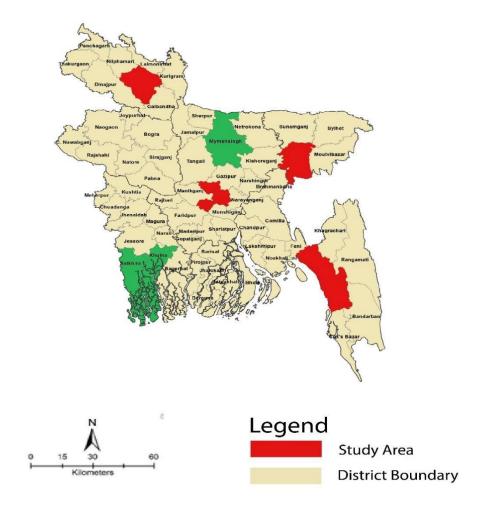
3.1 Sample

In total, 100 workers from formal and informal sectors were interviewed, distributed in suburban areas of Dhaka city, Savar, Habiganj, Chattogram and Rangpur.

4. Study Area

The study is conducted in the Dhaka city, Savar, Habiganj, Chattogram and Rangpur.

Figure 1: Map of the study area



5. Limitations

This study was conducted with very limited respondents and within a short period of time. During the survey period, countrywide government shutdown was also occurring. As a result, we had to conduct some of the interviews on the telephone rather than in-person.

6. Study Findings

6.1 Housing/location of respondents

The survey shows that 56% of respondents are living in Dhaka city and 19% in Savar. Continually, 15% of respondents are from Habiganj, 5% from Rangpur and 5% from Chattogram. Most of the workers are from Dhaka as Dhaka is the capital city and it is a workers-prone area.

Table 1: Housing/location of respondents

Area	Frequency	Percent (%)
Dhaka	56	56
Savar	19	19
Habiganj	15	15
Rangpur	5	5
Chattogram	5	5
Total	100	100

6.2 Working sector of respondents

The survey revealed that around 20% of workers are involved in Ready-made Garments, 14% are from the tea garden, 16% from the leather industry, 30% are home-based workers, 10% are domestic workers, 7% work in the construction sector, and 4% are from the ship-breaking sector. Among the respondents, 53% are from the formal sector and 47% from the informal sector. The highest numbers of respondents are from the home-based working sector and they live in Dhaka and Savar.

Table 2: Working sector of respondents

Sector	Frequency	Percent (%)
Ready-made Garments	20	20
Tea-garden	14	14
Leather	16	16
Home-based Workers	30	30
Domestic Workers	10	10
Construction Workers	07	07
Ship-breaking	03	03
Total	100	100

6.3 Age of respondents

The majority (32%) of the 100 formal and informal workers interviewed were between 31 and 40 years old. Continually, 27% were 26 to 30 years old, 20% were 18 to 25, 12% were 41 to 50, 6% were 51 to 60, and 3% of respondents were older than 60. Only 1 respondent was younger than 18.

Table 3: Age of respondents

Age	Frequency	Percent (%)
Younger than 18	01	01
18–25	20	20
26–30	27	27
31–40	31	31
41–50	12	12
51–60	06	06
Above 60	03	03
Total	100	100.0

6.4 Sex of respondents

In the survey, a total of 100 formal and informal workers were interviewed where 60% of respondents were female and 40% were male. The majority of informal workers were women, and they are involved in home-based work and domestic work.

Table 4: Sex of respondents

Sex	Frequency	Percent (%)
Female	60	60
Male	40	40
Total	100	100

6.5 Family member and living status

Approximately 52% of workers are living in a family with five or six members. Twenty percent of respondents had four members in their family, 15% of respondents had less than three members in their family and 13% reported having more than seven family members. Most respondents are the permanent residents of their locality. As shown in Figure 2, 53% of respondents have two bread earners in their family followed by 25% with only one family bread earner. Seventeen percent of respondents reported that they have three bread earners in their family. As well, only one family reported having five bread earners, two families reported having four bread earners, and in three families all the family members are bread earners.

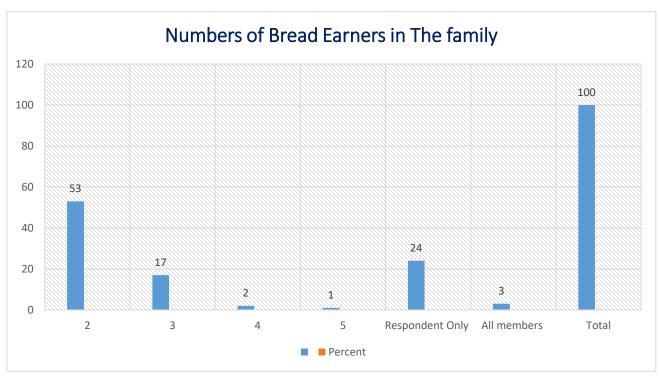


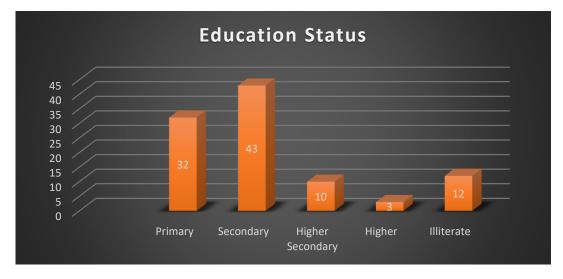
Figure 2: Numbers of bread earners in family

6.6 Education status of respondents

The survey revealed that 32% of the workers completed their primary education, 43% had secondary level education, 10% completed higher secondary education and only 3% had

completed higher level education. The literacy rate among the workers is poor due to their poverty and lack of education facilities, and 12% of the respondents were illiterate.

Figure 3: Education status



6.7 Respondent's monthly income

As shown in Table 5, 45% of the worker's monthly income is less than BDT 10,000 (USD 117). A total of 38% of the workers said that their monthly income is between BDT 5,000 and 10,000. Around 11% of respondents said that their monthly income is between BDT 10,000 and 20,000, and 6% of respondents said their monthly income is above BDT 20,000.

Table 5: Monthly income

Own Monthly Income (BDT)	Frequency	Percent (%)
Less than 5,000	45	45
5,000–10,000	38	38
10,000–20,000	11	11
More than 20,000	06	06
Total	100	100.0

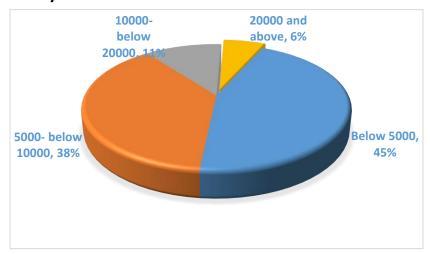


Figure 4: Monthly income

6.8 Respondent's monthly family income

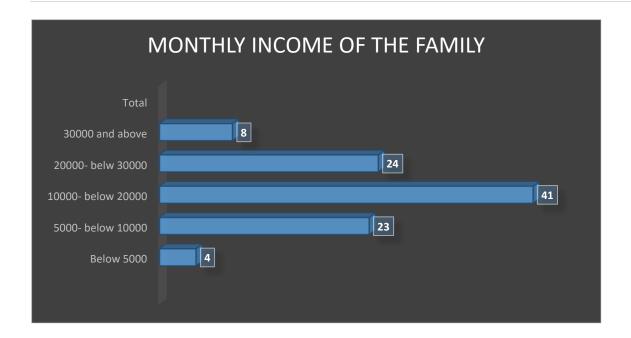
The survey indicates that 41% of the family's monthly income is between BDT 10,000 and 20,000. The second highest number of respondents (24%) said that their monthly family income is between BDT 20,000 and 30,000. Twenty-three percent of respondents reported that their monthly family income is between BDT 5,000 and 10,000, 8% indicated that their monthly family income is over BDT 30,000, and only 4% reported their monthly family income as less than BDT 5,000.

In Bangladesh, most of the workers are living with family and most of the families are dependent on the income of these workers. As well, some of the workers also depend on their family's income as their income is not sufficient to bear their own overall expenses. Therefore, reducing income of their families is also a burden for them.

Though the pandemic was reported in Bangladesh later than in other countries in the region, it severely impacted the economic activities from April to June. As per the estimation of the General Economic Division, the country's poverty rose to 29.5% as of June 2020, which was 20.5% in the last fiscal year. As of FY20, the total population of the country is 167.56 million, and 49.43 million people are now in poverty. Meanwhile, research from the Bangladesh Institute of Development Studies (BIDS) forecasts that under a post-lockdown optimistic scenario, the country's overall poverty would increase by 25.1%, where poverty in rural areas will be 24.2% and poverty in urban areas will be 27.5%. (2020)₃

Bangladesh Bureau of Statistics prepares various indicators to measure poverty and inequality based on data collected through the Household Income and Expenditure Survey (HIES). Bangladesh Bureau of Statistics has been using the Cost of Basic Needs (CBN) method to measure poverty since 1995–96. In this method, two poverty lines, namely lower poverty line and upper poverty line, are measured in three stages. To measure these poverty lines, at the first stages, food poverty line is determined by calculating the cost of a fixed bundle of foodstuff (11 items of foodstuff, viz.: rice, wheat, pulse, milk, edible oil, meat, sweet water fish, potato, vegetables, sugar, and fruits) which provides the minimum demand for the minimal nutritional requirements for a diet corresponding to 2,122 k. calories per person per day. At the second stage, two different income lines capable of meeting the minimum demand for non-food consumptions are computed. The first one is lower non-food allowance and the second one is upper non-food allowance. The median amount spent on non-food items by households whose total consumption is approximately to their food poverty line is known as lower non-food allowance. On the other hand, the amount spent on non-food items by households whose food consumption is approximately equal to their food poverty line is known as upper non-food allowance. At the final stage, the lower poverty line is estimated by adding food poverty line with lower non-food allowance while upper poverty line is estimated by adding food poverty line with upper non-food allowance.

Figure 5: Monthly family income



6.9 Family members jobless during pandemic

Nineteen percent of respondents reported that one family member was jobless during lockdown, 21% reported that two family members were jobless during lockdown, and 7% reported that three family members had no job during lockdown. On the other hand, 53% of respondents noted that none of their family members was jobless. Among the jobless people, most are home-based workers. And 46% of respondents said that they have lost their work or job during lockdown due to external government restrictions, shutdown of transportation and factory layoffs.

6.10 Provider and use of PPE

Eighty-three percent of respondents said that they use masks at the workplace while 56% said they use soap at workplaces. Continually, 30% use hand sanitiser, 10% gloves, 4% safety goggles and 5% use disinfectants and alcohol. Forty-two percent of respondents use PPE that they purchased, while 33% use PPE provided by their employer or contractor, and 26% use PPE from NGOs and charity organisations.

6.11 Information and awareness on COVID-19

Ninety-two percent of respondents have been informed or are aware of COVID-19 while 8% of the workers did not receive any information regarding COVID-19 awareness. Among the receivers, 67% received information through electronic media, 13% from print media, 48% from NGOs and civil society organisations and 12% received information from government bodies.

6.12 State of the workers' reduced income

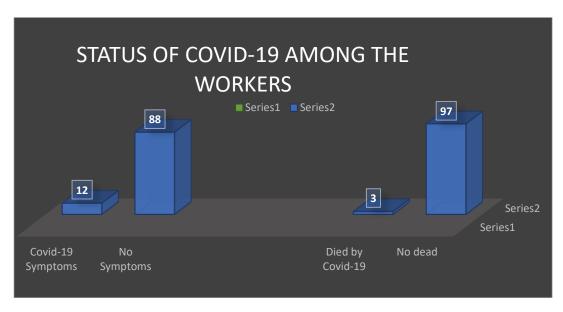
It is reported that 23% of respondents have lost their income while 30% of respondents said that their income did not reduce. Those who have lost 100% of their income are home-based workers because they have worked as subcontractors and there is no work for them during the lockdown. Fourteen percent of respondents reported that their income has been reduced to 50%, 25% for 10 workers, 75% for four workers and 40% for six workers. Conversely, 13% of respondents reported that their income has been increased. The income of the workers of the leather and footwear sector and some garments industries did not reduce. And tea garden workers continued to work during lockdown.

Thirty-five percent of workers reported that they have sometimes been hungry due to lack of food, 31% of workers said they never have suffered from hunger as they have food to consume. Continually, 15% of respondents reported that they have been facing a rare hunger problem and 19% of respondents said they have been suffering from hunger always.

6.13 Symptoms of COVID-19 among workers or family members

Figure 6 shows that 88% of respondents or their family members have not had any symptoms of COVID-19 while only 12% have experienced symptoms. Only 3% of respondents informed that their relatives had died due to COVID-19. As well, 75% of respondents did not receive healthcare facilities from the healthcare providers while 25% of respondents or their family members received healthcare facilities. Of the respondents who received healthcare, 45% were satisfied with the facilities they were provided. Those who had not received healthcare facilities reported it was due to poverty, absence of doctors, closing of hospitals or shutdown of transportation.

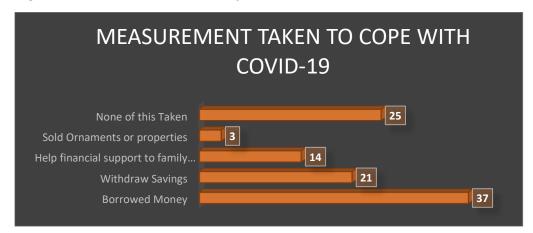
Figure 6: Status of COVID-19 among workers



6.14 Measures taken to cope with the adverse impacts of COVID-19

The data of the chart below shows that to cope with the adverse impacts of coronavirus, 37% of respondents borrowed money from others, 21% withdrew savings, 14% received financial support from family members or relatives, 3% sold ornaments or properties and 25% did not take any of the above-mentioned measures. See Figure 7.

Figure 7: Measures taken to cope with COVID-19

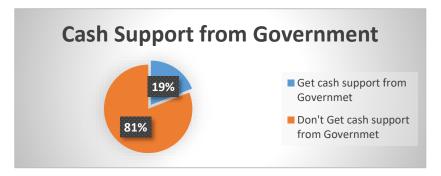


6.15 Cash support from government

Figure 8 shows that to protect the masses from the vulnerability of COVID-19, the government has distributed relief and cash support. However, only 19% of respondents have received cash support while 81% did not receive any. Continually, 22% of respondents received food support

while 78% did not receive this type of support. Sixty-nine percent of respondents said that, while they were eligible for the cash or food support, they did not receive it. As well, 21% said that they applied for the support but did not receive it. Some respondents reported that they did not receive support due to lack of proper documentation, social stigma, and political nepotism.

Figure 8: Cash support from government



6.16 Cash support/help from non-government organisations

Bangladesh is a small country with an overwhelming population and limited resources, meaning that the government has limitations to cover all its citizens. Because of this, non-government organisations, civil society organisations and individual parties have provided emergency foods and other support to vulnerable communities and workers. Around 74% of respondents said that they have been provided emergency food, PPE, and other kinds of support from non-government organisations such as OSHE foundation, Bangladesh Rural Advancement Committee (BRAC), Coalition for the Urban Poor (CUP), Bidyanondo Foundation and other NGOs and trade unions, while 26% of respondents said they did not receive any support from non-government organisations or civil society organisations.

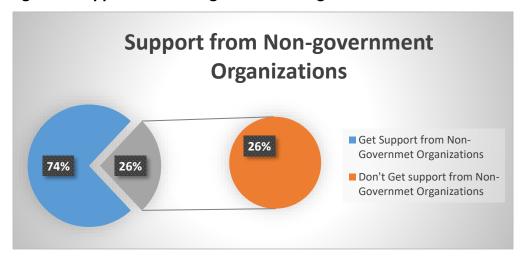


Figure 9: Support from non-government organisations

6.17 Negative impact for individual workers from COVID-19

COVID-19 has had a devastating impact on the work environment and working people all over the world. There is not a single field or institution that has not been adversely affected. The pandemic has put Bangladesh's government, economy and healthcare system in an unprecedented crisis. As a developing country, COVID-19 has impacted the country's economy.

COVID-19 has also created vulnerabilities among workers. According to respondents, impacts include financial crisis, food crisis, floods, family crisis, transportation crisis due to closures, and the closing of children's educational institutions since March 2020 has created mental problems among children. Some workers have been using microcredit loans for business and personal interests, but they have faced coping difficulties due to the closing of microcredit organisations. Some respondents said that they have not been able to join in their regular religious functions because of the lockdown and gathering restrictions.

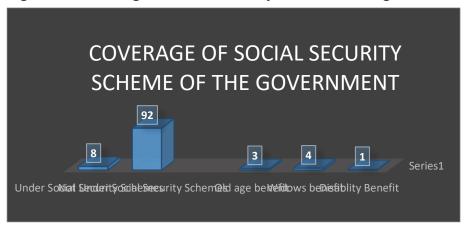
6.18 Future plan and alternative incomes

COVID-19 has had a devastating impact on the work environment and working people all over the country, and informal workers are affected most severely. The impact of the pandemic seems to have taken a turn for the worse, especially for the informal and women workers, who are one of the most vulnerable communities due to COVID-19. Because of this, some of them are considering alternative livelihoods. Among the respondents, 30% are home-based workers and are thinking of engaging in their previous job but some of them want to start individual businesses, including online businesses.

6.19 Coverage of social security scheme of the government

The survey showed that only 8% of respondents benefit from government social security schemes, and nearly all respondents (92%) are not covered by any government social security schemes. Of those who are under the coverage of the schemes, three workers are receiving old age benefit, four are receiving widow allowance and one is receiving disability allowance.

Figure 10: Coverage of social security scheme of the government



6.20 Coverage of social security scheme of the government for respondents' family members

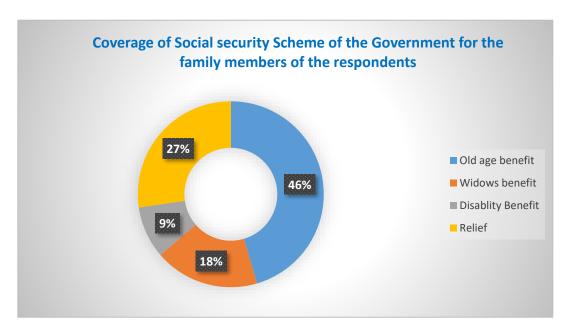


Figure 11: Coverage of social security scheme of the government for respondents' family members

The survey revealed that only 11% of respondents' family members are under the coverage of social security by the government, while 89% of families are not under any government social security schemes. Old age benefit and widow's benefit are included in this coverage. Of those who are under the coverage of the schemes, five are receiving old age benefits, two are receiving widow's benefits, one is receiving disability benefits and two are getting relief. Some families have aged citizens and widows but are not covered by the government schemes. Respondents claim that corruption, nepotism and various complexities are liable for not getting the benefits.

6.21 Social protection facilities at workplaces

The survey showed that 28% of respondents are getting social security/health security from their employers while 72% are not getting any social security services or medical care. On the other hand, of those who are getting social security by employers, 18 respondents are getting medicine services, three respondents are getting cash transfer and five are getting services of other kinds. Five respondents said that getting social protection from employers is not applicable to them as they are not covered by group insurance. Almost all of the workers ignore provident fund and group insurance, so they didn't provide accurate information in this regard.

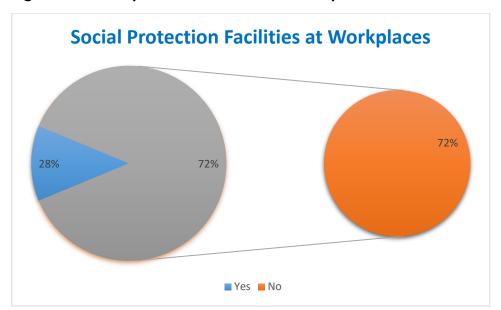


Figure 12: Social protection facilities at workplaces

6.22 State of family violence

Across the country, several other sources have reported increased instances of domestic violence during the lockdown period. For this study, respondents felt shy and uncomfortable about reporting cases of family violence. Some respondents spoke openly about existing domestic violence and how they are dealing with it, while others shared either no response, denied that there was family violence occurring, or indicated no change in existing violence during lockdown. About 48% of respondents remain silent on domestic violence, while 30% of respondents said family violence and women oppression is increasing. Eleven percent, however, said that family violence has been decreasing during the pandemic. Another 11% said that family violence is the same as before. Thirty-six percent of respondents said that the impact of the coronavirus varies from male to female, while 43% said there is not a different impact between males and females, and 21% remained silent on this topic.

6.23 Safety in public place and job security

Safety in public places is a big concern, especially for the women workers. The study shows that 41% of respondents stated that safety in public places and public transportation has increased before lockdown, while 39% of respondents stated that safety in public places has decreased since the pandemic began and 20% think the situation is the same as before. On the other hand, 34% of respondents said that there is discrimination between males and females to get a job or job security during the pandemic while 33% think there is no discrimination in this regard, and 33% think the situation is the same as before.

6.24 Support from trade union federation

Sixty percent of respondents are involved in the trade union movement and among them, 65% didn't get any support or cash from their union and federation. They reported that their union and federation was not financially capable to provide such support.

7. Findings from Key Informant Interviews

Key informant interviews were conducted to illustrate the scenario of the workers due to COVID-19 and to help find a positive way forward. They reiterated that in this era of a free market economy, the impact of the coronavirus in Bangladesh has been felt mainly in the export sector, remittances, domestic and business communication systems. The standard of living of the lower-class people has deteriorated and the amount and area of government expenditure has increased compared to the government income. Government has already announced a budget of a special package of 95,000 Tk to help cope from the impacts of the pandemic. They also stated that COVID-19 has devastatingly impacted workers' lives and livelihoods. They have been retrenched, terminated. Their wages have been reduced, and many workers are without wages due to loss of work.

The government has already taken a project in response to the COVID-19 crisis. The project will be implemented by the Department of Labour under the Ministry of Labour and Employment with the support of private industry owners. It will be funded by the development partners

including European Union (EU) and the German government. The government has taken the initiative to launch the social security program to provide emergency humanitarian support to distressed workers in the important export-oriented sectors.

A package of 1,135 Tk has been announced for destitute workers in export-oriented garments, leather goods and footwear industries. Every worker will be paid 3,000 Tk per month for a period of three months, and the government has planned to provide this assistance to 1 million workers.

Existing government social security systems for workers are being provided by the Bangladesh Labour Welfare Foundation and Central Fund. It is shown, however, that the Bangladesh Labour Welfare Foundation under government has not been able to stand by the workers of the country properly during the ongoing crisis. It is very disappointing that in this crucial period the foundation has not been able to help the workers, especially for those in the informal sector.

At present, the reserved amount of money of this institute is around half a thousand crore takas, which is increasing annually with new income and interests. However, they have not taken proper initiatives for the workers in this critical moment. As well, the process and methodology of the foundation's interventions are questionable. Some workers' rights activists have urged for immediate reform of the Bangladesh Labour Welfare Act.

Key informants have also stated that, according to media sources, the rate of violence against women has increased in Bangladesh during lockdown. In addition, violence against women is more common here. It is assumed that violence against women has increased as all family members including male counterparts are at home during the pandemic. However, no effective comparative study has been conducted in this regard.

The government wants to keep the standard of living of low-income people intact by reducing the tax rate in the face of food insecurity. In this case, the growth of revenue collection will be much less than the target. The number of unemployed is increasing in various institutional and non-institutional sectors including agriculture, industry, service, hotel, restaurant, transport

workers and day labourers. The problem of unemployment cannot be dealt with immediately, as creating employment is a long-term process.

8. Learnings and Recommendations

- 1. The workers of the formal and informal economy need support to come out of this global crisis.
- 2. The crisis has highlighted that the country's existing social security should be reformed and strengthened. Government should reduce the gap of coordination among different ministries and departments. Government should also take initiatives to ratify ILO Convention of Social Security (No-102). Universal social protection system should be implemented by the government. Large structural gaps in the existing social protection should be set-up.
- 3. Better social protection can mitigate citizens with enhanced resilience against disasters.
- 4. To effectively help workers during crises, a sustainable and well-planned method should be formulated.
- 5. Support informal workers such as home-based workers by creating alternative incomegenerating activities.
- 6. Government initiatives in response to COVID-19 should be more structured, systematic and transparent.

9. Conclusion

Bangladesh's RMG industry is considered the lifeline of the country's economy. The main strength of the RMG sector in Bangladesh is the garment workers. Health behaviour changes of RMG workers will be a critical issue to mitigate the impact of COVID-19 crisis. It is creating an impact on the day-to-day life of RMG workers in unprecedented ways. All sections of the RMG sector – including employers and employees – should play a role to protect themselves and each other and help prevent further spread of the disease.

Preparedness is the key to addressing any health crisis, and so far, Bangladesh, as a lower-middle-income country, has numerous limitations in restricting the spread of the virus. Above all, improvised and timely measures taken with proper coordination may help the country to fight the virus. The government will not be able to mitigate the situation alone; individual citizen efforts, direct involvement of the nation's public health experts, and international help are urgently needed.

The pandemic crisis has led to misery and destitution for marginalised informal workers on a large scale and has posed complex relief-related difficulties. Government should involve workers and their representatives to design and deliver social protection and ensure appropriate safety nets for workers. Still, many of the recommendations of this study are simply a confirmation of what has been said and suggested many times before by more diverse and seasoned proponents. A deeper dive into what mechanisms might work best in ensuring the effectiveness of the suggested recommendations is required.

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Annex 1: Questionnaire

Research on the Impact of COVID-19 on Workers' Livelihoods, Government and Grassroots Initiatives in Response to COVID-19 and Financing for Social Protection Floor

Bangladesh Occupational Health, Safety and Environment Foundation (OSHE)

Supported by Asia Monitor Resource Centre (AMRC)

1. Name	of the Respo	ondent:					
2. Respo	ndent's Cell	No.:					
3. Respondent's Sector:							
4. Respo	ndent's Fact	ory Name/Pos	sition:				
5. Respo	ndent's Add						
6. Age of		dent:					
7. Gende	r:						
	a) Female						
	b) Male						
	c) Other						
8. With w	whom do you a) My far b) I live b	•	y?				
9. What i	s your/your	family's main	occupat	tion?			
	a) Formal s	ector job	b) Day	laboure	er		c) Home-based work
	d) Domesti	c work	e) Con	structio	n secto	r work	f) Transport sector work
	g) Other (s	pecify):					
10. How		e, including yo		ive in yo		sehold	?
	a) 1	b) 2	c) 3		d) 4		e) 5
	f) 6	g) 7	h) 8+				
11. How	many memb a) All	pers of your fa b) 3	mily are	engage c) 2	ed in oc	=	on? ne (self)
12. What	is the total	monthly inco	me of yo	ur fami	ly (Taka	a)?	

	a) Above	e 10,000	b) Above 2	20,000	c) Above 30,000	
	d) Abov	e 40,000	e) Above 5	50,000	f) Other (specify):	
13. WI	nat is a tota a) Belov	-	ome of your ow b) Up to 1		c) Above 15,000	
	d) Abov	e 20.000	e) Other (s			
14 Ho					rself, did not work in the pandemic	or lost
	your job?	usenoia inen	ibers with jobs,	meraamig you	isen, ala not work in the panaemic	01 1030
	a) 1	b) 2	c) 3	d) 4	e) 5	
	f) 6	g) 7	h) 8+	i) 0		
15. Du from v		lune 2020, at	the period of I	ockdown res	rictions, were you terminated or	laid off
a)	Yes No					
16. Du	ring the loc	kdown perio	d, what were th	e reasons for	not being able to work?	
a) (Cannot sell	goods due to	marketplace clo	sure		
b)	Stay-at-hom	ne orders				
c) I	Raw materia	als or supplies	unavailable or	inaccessible		
d)	No public tr	ansport				
e)	Concerned a	about becomi	ng ill			
f) E	Became ill					
g) -	Terminated,	/laid off				
17. W	hich protec	tive gear or n	naterials are you	u using while	working?	
b) (c) (d) e) (f) [Hand sanitis Soap	tective glasse ser /rubbing alco				
18. If y	ou used an	y of the abov	e, who provide	d this equipm	ent?	

a) I bought them

b) My organisation/factory/contractor

19.	d) Government e) Charitable organisat Have you received into	tion formation on how the w	orkers can protec	ct themselves from	COVID-19?
	a) Yes b) No				
20.	. If yes, from where/wh	nom did you receive this	information?		
	a) Print mediab) Electronic mediac) Community leadersd) Governmente) NGO/charitable orgf) Other (specify):				
21.	. What is your plan in t	he next months?			
22. 19)	•	e last two months more	, less or the same	as in February 2020) (before COVID-
	a) More e) Same	b) Less 25% f) No Income	c) Less 50%	d) Less 75%	
	. Now or in the period o ough food?	f lockdown, has anyone	in your household	d gone hungry beca	use there wasn't
	a) Never	b) Seldom	c) Sometimes	c) Often	d) Always
	. Have any people livinger, sore throat or shor	ng in your household ha tness of breath)?	d COVID-19 or h	ad symptoms of Co	OVID-19 (cough,
	a) Yes	b) No			
25.	. Has any person in you	r household died of CO	/ID-19?		
	a) Yes	b) No			
	. Have you or anyone in nptoms?	your household sought	care from healtho	care providers for C	OVID-19-related
	a) Yes	b) No			
27.	. Did you get healthcar	e?			
	a) Yes, I did	b) No, I didn't			
28.	. If yes, are you satisfie	d?			

c) My contractor/employer

a) Yes, I am satisfied b) No, I am r	a) Yes, I am satisfied b) No, I am not					
29. If you didn't get healthcare, why not?						
a) Due to lack of money	b) Due to lack of further diagnosis facilities					
c) Due to lack of doctor	d) Due to fear of coronavirus	e) No transport				
f) Hospitals were closed	g) Lockdown impact					
e) Other (specify):						
30. Did you get medicine from a health cl	linic/government hospital?					
a) Yes b) No, I didn't						
31. Due to the impact of COVID-19 have COVID-19?	you had to take any of the following	g measures to cope with				
a) Borrow money						
b) Draw from savings						
c) Seek financial help from fam	ily or relatives					
d) Sell assets (i.e., jewelry, land	l, house, equipment, livestock)					
e) I have not taken any of these	e measures to cope with COVID-19					
32. Since the start of the COVID-19 crisis, support from the government in respons	-	ehold received any cash				
a) Yes b) No	c) Don't know					
33. If you did not receive MONEY, why no	ot?					
a) Registration too difficult and	I time consuming					
b) Lack of documentation						
c) Costs of applying (e.g., have	to pay middleman, transport, etc.)					
d) Fear of stigma and social rep	percussions					
e) Not eligible						
f) Eligible but not listed or cove	f) Eligible but not listed or covered					
g) Applied but did not receive relief/cash grant						
i) Political favouritism/corrupti	i) Political favouritism/corruption					
j) No cash transfers issued by g	overnment					
j) Other (specify):						

			 r), have you or a member of your household receive ations, or coupons from the government in response 	-
	a) Yes	b) No, did	d not receive FOOD	
35. W	hy not?			
	a) Not awar	e this was availab	able	
	b) Registrat	ion too difficult/ti	time-consuming/	
	c) Lack of d	ocumentation		
	d) Costs of a	applying (e.g., hav	ave to pay middleman, transport, etc.)	
	e) Citizensh	ip/migration statu	tus	
	f) Fear of st	igma and social re	repercussions	
	g) Not eligik	ole		
	h) Eligible b	ut not listed or co	covered	
	i) Applied b	ut did not receive	ve	
	j) Political fa	avouritism/corrup	ıption	
	k) No food s	support supplied l	I by government	
	l) Other (sp	ecify)	_	
36. Did չ	ou receive fo	od from any orga	anisation other than the government?	
	a) Yes	b) No	c) Don't know	
37. If yo	u received FO	OD, from whom?	?	
38. Wha	t is the single	most important i	impact of COVID-19 for you?	
	•		ies which we have not already discussed?	
40. How	v do you plan t	to look for and fin	ind work over the coming days?	

a) Trying to start an independent business

c) Planning to start an online business

b) Trying to get formal job

	d) Contracting mediator to get previous work back					
	e) Trying to switch m	ny job				
41. Ha	ave you got any social	security scheme from	the gov	vernment?		
	a) Widow benefit	b) Old age be	nefit	c) Disability allowance		
	d) Relief	e) Medical ca	re	f) Unemployment benefit		
	e) Haven't got any scheme					
	g) Other (specify):					
42. Ha	ave you got any social	security scheme or su	pport fi	rom your employer?		
	a) Gratuity	b) Group insurance c) Une		c) Unemployment insurance		
	d) Special support	e) Emergency food s	upport	f) Disaster support		
	g) Haven't got any support					
	h) Other (specify):					
43. Ar one(s)		nembers under any so	cial secu	rity scheme of the government? If yes, which		
	a) Widow benefit	b) Old age be	nefit	c) Disability allowance		
	d) Relief	e) Medical care		f) No		
	g) Other (specify):					
44. Ar	e you getting any hea	Ithcare or social secur	ity fron	n your employer?		
	a) Yes	b) No				
45. If	yes, what are the ben	efits?				
	a) Cash money	b) Medicine provide		c) Insurance/gratuity		
	d) Provident fund	e) Please spe	cify			
46. W	hat is the impact of ch	nildcare during the CO	VID-19	period?		
	a) Increased	b) Decreased	c) Sam	ne		
	d) Other (specify):					
47. W	hat is the impact of o	Id care during the CO\	/ID-19 p	eriod?		
	a) Increased	b) Decreased	c) Sam	ne		
	d) Other (specify):					
48. W	hat is the impact of fa	amily violence during t	he COV	ID-19 period?		
	a) Increased	b) Decreased	c) Sam	ne as previous		

d) No remarks	e) Other (specify	e) Other (specify):				
49. Have your husba stress?	nd or a male family men	nber tortured you for the impact of economic or mental				
a) Yes	b) No	c) No remarks				
50. Do you think the	crisis has impacted male	s and females differently?				
a) Yes	b) No	b) No				
51. What are your fe	elings in public space in t	terms of safety?				
a) More safe	b) Less safe	c) Same as before				
52. In terms of job s females?	security or getting a job,	, what are your feelings in comparison with males and				
a) More secur	rity b) Less security	c) Same as before				
53. If you are married	d/unmarried, what's the	difference in impact?				
organisation? a) Yes	mber of a trade union, b) No of support did you get?	did you get any financial or other support from your				
56. If not, why didn't						
	else that you want to sh	are about how this issue affects you?				
Name of interviewer:	:					
Signature:						
Date:						
Date.						