

"Anxiety, coping and oscillation among *Garo* Ethnicity" Impact of COVID-19 on Urban *Garo* in Dhaka City

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Abstract: COVID-19 has a significant implication on livelihoods of urban community in Bangladesh. Day labourers, domestic workers/homemakers, small business holders, street vendors, teachers and other professions are largely devastated by this COVID-19 as they have rapidly lost their means to earn an income. Thousands of indigenous workers including women working in parlours and schools have lost their jobs with no hope for reinstatement in the near future. Less paid workers such as maids and drivers are facing a similar fate. The majority of these Garos rely upon their daily wages and the rest get by with monthly salaries, with little to no fall back. This article largely focuses on the impact of covid-19 in the lifestyle of these urban Garos and coping mechanism during this pandemic situation. This study also gives a knowledge of capturing the validation of any distinctions in adapting and support based and also to explore food expenses and negotiating the quantity of meals taken by Garos during the time of pandemic. In-depth Interviews along with KII is steered via mobile devices focusing on gaining insights about the mobility patterns, anxiety level, adjustment with livelihood, survival strategies and assessing the specific requirements of this urban Garos. To conclude, Covid-19 pandemic brings such a catastrophic current and future health and financial consequences that it calls for our consideration and commitment to work together to defeat it.

Introduction

COVID-19 has been distinguished one of the biggest danger and public health crisis of global concern. This virus originating from China has rapidly crossed outskirts, infecting people all through the entire world and has prompted an enormous public response. World Health Organization announced the official name as coronavirus disease (COVID-19) (Adhikari et al., 2020). Not long after the cases were identified in the month of March about 36 million people, mostly from the informal sector, have lost their jobs (Islam, 2020). Bangladesh, having 168 million inhabitants, is one of the most overcrowded countries in the world. The word indigenous originated from the Latin word Indigena meaning “a native” (Bhuiyan, 2011). According to the census done in 2011, total indigenous populations are distributed 2 million which represent 1.8% of total population (Tabassum, 2016).

About 15 to 20 thousand Urban Garo resides in the northern part of which 8 To 10 thousand belongs to Norda and Kalachadpur area. They live in northeastward part of Bangladesh, covering a major part under Dhaka North city corporation. Earlier on 26 March, government urged a shutdown to control transmission of COVID-19

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infection. All industries and markets were shut down, all types of transportation confined. Only fundamental services kept on working. Numerous workers who were working in the restaurants or beauty parlors are either terminated or sent home with unpaid leave. Keeping in mind the population growth, healthcare adequacy, limited assets and cultural norms, the impact of covid-19 stroked the urban Garo fast and exacerbated a complex fear among the Garos residing in Kalachadpur. Lockdown have brought about expanded load of unpaid consideration at work and difficulties in their livelihood. Indigenous populaces are at more threat brought about by this pandemic of hazardous environmental exposures, unavailability of real time data and convenient healthcare benefits, and endless demographic and psychosocial conditions that obtrude sufferings upon them (Mesa, Franco, Gómez, & Abel, 2020). In this study, we tried to explore the effect of COVID-19 and its challenges to the indigenous urban Garos.

Literature review

COVID-19 is the emerging global health crisis which has seriously influenced people from all parts of life. As a developing country Bangladesh has been recognized as one of the 25th most at risk and 7th most overcrowded country in the world expected to be influenced by this fast spreading virus (A. K. Mohiuddin, 2020). It is 10th on the rundown of nations that have been most exceedingly awful influenced by Coronavirus internationally, and the high number of new cases especially in and around Dhaka – implies that the absolute number of cases could continue climbing. The pandemic circumstance demands a specific method of to lessen the spread of the infection securing the general public and protect oneself. The fast spread of the COVID-19 and its results around the world has pernicious impacts on people and society driving to fear, freeze, concern, and uneasiness (Ahorsu et al., 2020). Almost 80 percent cases been disclosed in Dhaka city and almost nearly 60% of the cases reported in the capital, Dhaka moreover, the fear of not having the normal life back, lack of awareness leads individuals to depression and increased the household chores (Shammi, Bodrud-Doza, Islam, & Rahman, 2020). According to IEDCR based on a recent study it was suggested that middle aged people suffered by this infection mostly and the rate is 24% (Mohiuddin & Research, 2020).

The Ministry of Education shut every educational institutions and both the Higher Secondary School Certificate (HSC) and comparable assessments were delayed inconclusively. Closing of schools during the lockdown further added to the load of unpaid care work on women who assimilate most of the extra work of caring for kids (Corburn et al., 2020). Students cognitive behaviors and performance is always related to physical health. One study disclosed that some actual health problems started in the pandemic due to remaining at home which comprises changes in the sleep cycle, loss of desire, actual dormancy, weight gain, weakness which quickens their enthusiasm for pedagogy (Sakamoto, Begum, & Ahmed, 2020). As per the latest declarations, all educational organizations will stay shut until further declaration. Although, from 1st June the lockdown has been somewhat lifted and public vehicle, public and private workplaces and business have been restored, permitting on a restricted measure (Corburn et al., 2020).

Country's health system is dominated by women, where more than 90% of community health workers are female. It is assumed that this crisis and its contagion effect in society

and communities will continue; this suggests that a huge number of female health care providers will need support to balance the huge workload and family responsibilities e.g. child support, safety issues, mental health support (T. Haque et al., 2020). Since individuals are isolated and they remain inside more often than not, the abatement in junk food consumption may likewise be a consequence of wellbeing perception since their regular physical activities have diminished which are credited to increased incidences of different cardiovascular issues and other illness (Booth, Roberts, & Laye, 2011). An ongoing review was directed covering both urban slum and provincial zone in the long stretch of April by Power and Participation Research Center (PPRC) and BRAC Institute of Governance and Development (BIGD) expressed that 77.2% of at risk non-poor really fell underneath the poverty line because of economic emergency by Coronavirus and past the 20.5% of the populace at last perceived as poor, likewise expressed a gathering of 'new poor' speaking to an extra 22.9% of the populace that should have been brought inside the discussion on destitution (Ovi, 2020). During this pandemic most of the people favored reaching health care specialists over phone for treatment purpose, which might be on the grounds understanding the relationship between health care specialists and patient. Because of fear of getting the virus more individuals reached the health specialist virtually since individuals are worried being contaminated by the infection in bodily contact (Shadmi et al., 2020). WHO has recommended some guidelines for mental health and psychosocial considerations as Covid-19 is creating stress and anxiety among the general concern and imposing a negative impact on the mind (Shadmi et al., 2020). General wellbeing approaches must be executed with consciousness of how this pandemic has influenced health care circumstances and general wellbeing practices for Indigenous peoples (Richardson & Crawford, 2020).

Urban areas are the central hitting point for Covid-19 where 90 percent of total cases been reported. A report shared by the United Nations Policy Brief on the impact of COVID-19 on the urban setup stated that work of urban people badly affected by this virus which resulted in other demarcation for acquiring safe water, as well as estimation of space they have to maintain for social distancing (K. J. S. S. Power, Practice & Policy, 2020). Due to global housing crisis nearly, one billion people, have been pushed to live in slums or informal arrangements and are increased risk of rapid transmission of this virus due to overcrowding in low-quality housing in urban setup (Sadeque, 2020). This pandemic is more challenging to the urban setup for over population, weaker health systems, and limited resources (A. J. E. J. o. S. D. R. Mohiuddin, 2020).

There are more than 50 indigenous communities residing in the plain areas of the country generally in the southeast part of the country known as Chittagong Hill Tracts (CHT). As an underestimated populace, the indigenous peoples have for quite some time been cut off from the advantages of standard as they do not live in enormous urban setup, and have restricted access to medical facilities. Their discernment, way of life, food habit during any pandemic also changes from majority of the populaces living in the comparing setup. Response to a pandemic may therefore be worsened and even life-threatening among such indigenous population (Mesa Vieira, Franco, Gómez Restrepo, & Abel, 2020). Indigenous groups conventional ways of life are a source of their adaptability, forcing a danger at this time in restricting the spread of the infection. As Covid-19 infection is spreading worldwide, just as the high death rates among certain risk groups with fundamental health issues, information on the pace of disease in

indigenous peoples are not accessible. Important details about this infection and preventive measures is likewise not accessible in ethnic dialects (T. Power et al., 2020).

Garos are one of well-known ethnic communities of the Indian subcontinent, most of them are residing in Northeastern India primarily in Garo hills, bordering Mymensing division of Bangladesh. Garo populace is one of the greatest indigenous communities in Bangladesh, comprising of around 0.1 to 0.13 million people among the indigenous populace. In Bangladesh more than 90% of them living in the Gazipur, Mymensing, Netrokona, Tangail, Sherpur, Jamalpur and Sylhet locale (Drong, 2004).

Indigenous peoples from various corners of Bangladesh are experiencing extreme starvation due to Covid-19. Involved with minimal pay occupations and working at family houses, as watchman or drivers, most have misplaced their employments. Also, public and non- legislative development programmes have been restricted and various regions are not accepting any funds (Moin, Sakib, Araf, Sarkar, & Ullah, 2020). In spite of known susceptibility and high death rates, little data identified with the rapidity of COVID-19 in Indigenous peoples is assembled up until this point (T. Power et al., 2020). This article will highlight the issues of urban Garos, the challenges they are facing in this pandemic.

Methodology

This research was qualitative research. To understand tension, oscillation and strategy during COVID-19 this study has selected Kalachandpur area close to Norda where Garo community reside, Gulshan-2 in Dhaka District as field. It was quite difficult to collect fieldwork data at the time of COVID-19. But information is collected through maintaining certain hygiene rules. We also conducted the interviews over phone because of COVID-19. For data collection, we used two qualitative data collection methods named Key Informant Interviews (KII) and In-depth Interviews (IDI). A total of 12 (5 female & 7 male) IDIs and 5 KIIs were conducted for this research. Interviews were conducted in Bangla. Although Garo community has own language and scripts, they are also fluent in Bangla. Therefore, no language interpreter was used in this study. During data collection we tried to explore focusing on gaining perception about the mobility patterns, the experience of daily survival, methods for dealing with stress and evaluating the particular necessities of Garos in urban setup. Data was collected using an unstructured interview guideline. Prior to interview verbal consent was taken from all the study participants. For data analysis, details notes were taken from all interviews. Thematic analysis was implemented for drawing results. We manually placed code themes as per our research objective and summed up important data in English directly under each code.

Impact of COVID-19 on Garo Community in Urban Dhaka

Since the lock down explicit many organizations conducted small survey indicating the challenges faced by the low income people. A recent survey conducted in the month of June by Sajeda foundation on urban low income people stated that about 94.3% of respondents were distressed about unemployment and limited income (Dr Shoshannah Kate Williams, 2020). Garo residing in Kalachadpur area are middle to low income people. On average most of them run their own small business stores inside the area.

Some are shopkeepers, some works in nearby beauty parlor, some are school teachers and some others doing volunteer work in their community. There are several shops in that area including clothes shops, tailors fast food stores which were completely shut during first two months of the lockdown period. One of the female respondent (Taira Chisam,38) from a small local shop said, *"I have not earned anything due to the lockdown," she said noting that her daily income was around 600 Bangladeshi takas before the lockdown"*.

Many of the families are struggling there with compromising their daily expenditure less than Tk. 100 per day he mentioned. Some of them are in most vulnerable state because their average income was below ten thousand in the lock down period. These people used to be ubar drivers, pathao riders and private drivers who were unable to continue their daily jobs and was unpaid for two to three months. It was very difficult for them to give the house rent, managing food stuffs for families and continue their daily life. Despite the fact that individuals were encouraged to remain at home, some cart pullers ,motorist kept working in the roads, consequently violating the stay order (Sakamoto et al., 2020).

Covid-19 and losing of livelihood: Living in nightmare

Without any means to earn an income during lockdowns, many urban Garos who are low paid employees are unable to feed themselves and their families. Throughout the shutdown, when all work was halted, restricted number of individual were moving, and only on an emergency basis. Cafes, Tea stalls, Road side restaurants, had to close, public vehicles were not permitted in the city, and no family had maidservants. Along these lines, the individuals who lived in slums totally lost their earning at this time of emergency. The average earnings in the slums of Bangladeshi cities and among the rural poor has dropped by over 80% since the episode. An amount of 63% of slum occupants turned out to be financially idle during this time, and per capita pay in the slum dropped by 82% from 108 BDT (\$1.30) to 27 BDT (\$0.32) (A. K. Mohiuddin, 2020). Almost 35 to 40 families living in Kalachadpur undergoing severe hardship. These people are still finding it difficult to put food on the plate amid the prolonged shutdown. Other ethnic communities living in different areas of the country are also in a somewhat similar situation. Mostly day-labourers who are working in different parlous– are barred from going to work because of closure of their work place now. Almost half the female Garo used to work in various beauty parlor in Dhaka but since the lock down started they have lost their jobs and are now facing difficulties in livelihood. One female respondent (Jemichisim, 35), said, *"The famous Persona beauty salon chain employs 2,500 Garo women who are currently jobless now"*. She mentioned *"I used to work at a well-known beauty parlor in Dhaka, but since march my parlor is closed. I got the payment for the month of march only. Rest of the months were quite difficult for survival as I was passing each day with all my savings. She mentioned she had to borrow money to pay the house rent and now tensed how to return back the money as she has no income source now."* She also said previously *"I used to send half of my money to my parents living in the village. Now in this situation where I am jobless it has become very difficult for me to send money for family and this is making me very frustrated and upset"*.

One male respondent (Hestingrama, 42), used to be a school teacher in Kalachadpur for last 6 years. He lives with his wife and two kids. Part-time he used to run his tailor

business. Since the pandemic has emerged and government closed all the school he is running out of school teaching. His salary also stopped since march and tailor business is also shut down since march. Finding no other option, he now switched his profession into pathao rider. For him it is very challenging to become a pathao rider from a renewed school teacher. Seeing no other option and to run the family he has to take this major step for changing profession.

Another female school teacher (Benichisim, 47) she used to work in a kindergarten school. Since the pandemic has emerged after closing of all the school in that area she is currently unemployed and now she is selling some handmade stuffs and seasonal fruits in her locality for earning livelihood. She is living with her husband and two kids. Her husband is paralyzed and she is taking care of the whole family but now it is getting very difficult for her to run the family with this little income. She also mentioned *"Since a long time I didn't get paid from the institution as its closed now it has become very difficult for me now to adjust with my savings which are almost finishing now. So I decided to start some tuition even at this pandemic crisis with no other choice left."*

Many survival strategies have included by Urban Garos from changing jobs to breaking lockdown rules, going out as riders as opposed to pulling out in fear of being contaminated by the infection.

Contradiction with livelihood: Urban to rural migration tendency of urban Garo

Around 22 schools are there in Kalachandpur area with a number of 700 students. At least 20 Garo teachers are directly involved in teaching professions. There are severe tensions in the families along with the teachers which was their only income source. As all the schools are now closed till further order from the government many of the school teachers had no other choices left the area and returned back to village. One of the respondent mentioned (Sabitri Chiran55), *"I had no choice other than going back to my village and now doing day laborer work at 200 takas per day. I never dreamt of living this life"*. She lives with her two kids. She used to be a house worker and during this pandemic her owner said not to come to work and she been unemployed for several months. It was getting very hard for her to manage the expenses for her daily household and bearing the expenses of her kids who school going. Finding no other option, she has to return back to her village and did the daily labor.

One respondent who used to run a small shop in that locality (Sangma, 43) mentioned, *"how long we are going to live like this? I have to feed my family so I had to open my shop but it seems like we will never have our previous livelihood back as there are no selling nowadays. In that case we all need to shift to village soon"*.

Missionary Church is completely off after the lockdown has started. One of the respondent who used to work in that church (Richon, 50) said, *"I am worried by unemployment in the Garo community. To survive, many have to return home to their village, in addition to supporting their family in Dhaka, they used to send money to the village, but are now out of work. Many of them are returning to the village because they cannot bear the costs of living in Dhaka and do not have any savings left so they are sending their family members back to village and passing day alone with unemployment"*.

During the pandemic due to negative coping strategies, such as migration to rural areas put these Urban Garos in more health risk including hazards in their transport, working and standards of living and battle to get to help estimates set up by governments.

"I have no idea how he will finish his study now"-impact on education of urban Garo children:

COVID-19 has spread its impacts on the learning process of primary, auxiliary and tertiary levels in Bangladesh. Different unequalled social spacing measures taken by the government to avert the transmission of the infection, including the shutdown of educational institutions and shifting to virtual schooling, imposed a great change not only to the education system also to the students life (Dutta & Smita, 2020). The prolong home isolation period caused exacerbation and deterioration in the study routine and execution of work, which in the end brought about the development of stress and futile learning behaviors. All educational organizations in Bangladesh have remained close since March 17, 2020 to the time of composing this article. So the students from primary to tertiary level are being constrained to remain at home as opposed to going to classes to keep up social spacing. Shutting down of educational institution for many youngsters can lead significant school dropout. As these people are not that much technologically upward since last four-month total education system is stopped there. Parents are very much concerned.

One respondent (Archana morong, 40,) said, *"suddenly the university, all the classes are without any indication before. My son used to study regularly according to what the teachers teach in the class; following lectures; doing assignments and presentations. Now the class is not happening, so the study has stopped. Though I understand the present situation of crisis, I am afraid that it would put my son into a long session jam who is currently studying on 10 th standard. I have no idea how he will finish his study now."*

Many kids do not feel any inspiration in virtual learning. As there is no compelling reason to follow any daily schedule for study and setting off to the college. So most of the time children kept themselves engaged in coloring, and gaming. They were additionally occupied with different extra-curriculum activities: cooking, watching cinemas, TV, recordings on YouTube, reading spiritual books, accomplishing social work, wasting energy in Facebook, Instagram and so forth. One participant mentioned (Janika, 18 years), *"I have been home for a few months. After a long time, I am spending a lot of time together with my family. After finishing household works, I find no more time and energy left for my study. So I feel like quitting from taking home studies and feeling bored now"*

Because of COVID-19, a large portion of the respondents talked about the financial hardship, which affected on their kids contemplates. They portrayed the circumstance that a considerable lot of them lived off certain educational costs or low maintenance works for bearing their family expenses. In this season of the pandemic, all ordinary activities halted. Indeed, even their family earnings essentially decreased as COVID-19 previously hit hard the economy of the world just as Bangladesh. As the members needed to rely upon their families for every day needs, it was a load for them to oversee additional cash for purchasing web packages with the significant expense to organize online classes for their children.

'Life in a kittle' - mental health among urban Garo

The World Health Organization (WHO) defines social determinants of health as “the conditions in which people are born, grow, live, work and age.” These are identified with the “conveyance of money, power and assets,” which is guided by policy implementations. The antagonistic ailments of ethnic individuals in developed country are connected to social determinants, yet in addition to fundamental biasness in the public arena and the well-being framework, which brings about obstructions to getting to mind which doesn't meet anticipated degree of characteristics (Allan & Smylie, 2015). An improvement in the family relations of numerous respondents since the lockdown began. Family understanding improved to a certain level under a similar rooftop. This could be because of the closeness impact, as per which there tends to be an increase in mutual bonding with more physical and mental closeness with each other (Narayanan et al., 2020).

During the time of lockdown, one respondent (Jemichisim, 35) mentioned that *“I have to take care of the cooking and all the household chores and my kids were engaged in watching tv or mobile game. Sometimes it was boring as for a long time they did not went outside for any activities.”*

Both the repression and disengagement builds the danger of relational clash in families, which thus puts kids and women at higher danger of abusive behavior at home however long the stay-at-home estimates last (Mesa Vieira et al., 2020). The closure of faculties and therefore the entire family staying together has further exacerbated the burden of unpaid care work on women, who now must absorb the extra work of constant family care duties. One respondent (Mouhua morong, 21) told that she lives with her mom. She has some physical illness and previously used to walking for 30 minutes and used to go to her university by walking. Now that she needs to stay all day at home she became fatty and also her daily routine has changed. In this situation, she is not able to concentrate on her studies as well. That is why she is depressed and upset about this pandemic situation. Changes in the pattern of sleep, eating habits, digital media usage, working habit and anxiety are seen mostly in domicile environment (Narayanan et al., 2020). Perhaps the reason behind this depression in young children as because the lockdown was strictly observed in urban areas where children were forced to stay home in any means. Conversely, children in rural areas do not have any restrictions and can play freely in outdoor with their relatives/friends anytime (Yeasmin et al., 2020).

Mutual understanding and distribution of social liability among urban Garo

Because of the pandemic, numerous indigenous pioneers have assumed control over assurance, which can prompt slander of the infection and unsettle social union, causing social disengagement of populace gatherings. One respondent (Hestingrama, 42,) mentioned *“last month one of their previous Nokma (local chairman, age 60 years) got affected with covid-19 and was admits to hospital. Few days later he died. Then their recent Nokma with the help of social volunteer workers managed to collect fund for releasing the body from hospital. As the hospital authority was not releasing the body due to the bill due 1 lakh. Nokma raised a fund and collected 70 thousand and finally we brought the dead body for funeral. They gave the family some food stuffs as they were kept in isolation”*.

During the end of May one incident happened in the area of Kalachadpur. One family was brutally injured by the household owner due to unable to pay the house rent. Then by the help of community leader and volunteer's workers in that area local people raised voice against this incident. This may be because of components, for example biological impacts, alterable elements, increased anxiety and trauma, intellectual practices, mindfulness, and ecological elements during a pandemic (Bahrami, Yousefi, & sciences, 2011).

Garos have shown incredible consideration and support to their neighbors, friends and loved ones during lockdown: sharing food, distributing essential goods, and lending money to pay the house rent. With no real social safeguard, these spontaneous and organized acts of mutual aid have been a lifesaver for these hit hardest Garos residing in kalachadpur area.

Impact on health issues

Health is the best component of union for embedding advancement and progress proposals in indigenous communities, given the vulnerability to which they are uncovered despite the COVID-19 pandemic. A high extent of vulnerable group has chronic illness. These people can be considerably more disregarded once healthcare services are dispensed solely to battling the COVID-19 pandemic. Identification of cases and counteraction of infection in a transient populace are more troublesome (Mesa Vieira et al., 2020). Issues of social disgrace, lack of awareness, dread of detachment or dread because of absence of medical care, some urban Garos in spite of having symptoms might be reluctant to approach and step through tests. Many of them due to lack of money are unable to seek medical help if they fall sick rather taking home remedies. Some due to fear of social stigma are hiding their symptoms. One respondent (HorishRondi, 44 years) mentioned *"one day I was going to buy some stuffs for my family and I meet a person on the road. He was walking without wearing a mask and gloves in hand. Next day I got to know one of his family member died as a suspected case of Covid-19 and he hide the news due to social stigma and fear of isolation and in spite being on isolation he is now walking randomly on the street"*.

Addressing the health impact of Urban Garo is challenging because of their lack of awareness. The invisibility of awareness is related to the inequities themselves: under-reporting or hiding the symptoms. Thus, Garos residing in Kalachadpur are likely to be left behind from health facilities.

Negotiating with food habit of urban Garo during the time of pandemic

Respondents were asked where there any changes in their daily food habit and what challenges they faced during the time of lockdown and how they tried to managed the situation. Also how they are meeting their food needs. Food habit of urban Garo is mostly carbohydrate based and rice dominated their food basket. Their traditional food item is commonly known as Khari (pork /vegetables cooked with baking soda) (M. M. J. E. N. Haque, 2015). One study done on India during this pandemic revel significant change in the eating habit of the respondent and dropping of fast-food with 60% and 34% and indicating a less chances of developing cardiac diseases (Narayanan et al., 2020). During the time of lockdown, they often visited the bazar at late noon cause at that time no fresh

fish or food stuffs were available and they can buy the fish at a cheaper price. According to shutdown regulations, the bazars are now open from 6am to 2pm but as many of the stuffs are not available locally they have to go to distant bazar and buy stuffs at double price. One respondent (HorishRondi, 44 years) said that *"we eat rice with lentil once a day and rest of the day we took puffed rice with tea. Our children also adjusted with biscuits and tea in the evening and puffed rice at night with some plain lentil. We often visited the bazar to buy fish at noon so that we can get it at a cheaper price and the fish was not fresh also. Now we had to buy all the food stuff at a double price and most of the time baking soda was not available in the local area so we had to go to kauranbazar to buy our necessary stuffs at a double price."*

Since the lockdown started some of the families residing in that area has previously stocked all the necessary stuffs for the rest of the month. One of the respondents (Hesting Rama, 42) also mentioned that *"I live with my wife and two sons. Both of my son are school going. Previously they used to take fast-food in the evening from local shop. In the morning before going to school they used to take noodles and me and my wife used to take nakkam(sutki) and rice. At night we used to take fish or chicken prepared as khari and rice. But since the pandemic has emerged our food habit has grossly changed. When we first heard about the lockdown me and my wife went to kauranbazar and purchased some stuffs like puffed rice, nakkham for the rest of the month. Now fast food has been replaced with puffed rice and biscuits at home. Both our children are now adjusting with this new food habit"*.

During the pandemic urban Garos have for quite some time been acclimated with adjusting to temporary food and insufficient salary by adjusting with food, eating less but with huge ramifications for health and nourishment, particularly while adjusting for quite a while. During the lockdown, urban Garos have reduced their eating habit to as minimal as one supper every day, and undermined protein-rich foods like chicken, fish, with less expensive staples, for example, lentils, potatoes and puffed rice and dried fish. For the coping mechanism for adjustment to food, they have needed to obtain, or draw from what resources they may have.

Conclusion

The COVID-19 pandemic is hampering normal life of urban Garos. In this article we have shown the coping and oscillation among urban Garo during the time of pandemic and also how their livelihood has been drastically changed. For example, when an established earning person can turn a fruit seller to earn livelihood in these testing times, scores of others meeting a similar fate cannot be ruled out due to Covid-induced economic crisis. This pandemic poses particular challenges and increased the level of anxiety for urban Garos. No wonders how the Garos in this pandemic after losing their jobs would make ends meet and how they will manage their families. Having a facemask and maintaining social distance becoming norms these days, with a hope people's lifestyles, livelihood and food habits would change. Due to stigmatization and inequalities, a large number of Garos residing in Kalachadpur are not appearing or expressing their sufferings while they are in intense needs of humanitarian supports right now. Upgrading general well-being during this pandemic requires not just information from the clinical background, yet additionally of every single human perspective.

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