

A Review of the Lifestyle Issues of the Khumi Community



Mst. Tahmina Sultana

Assistant Professor, Department of Sociology and Social Work, Gono Bishwabidyalay, Dhaka-1344, Bangladesh.

ABSTRACT: The Khumi community is primarily patriarchal and is a notable ethnic group in Bangladesh, India, and Myanmar. They reside in the western part of Myanmar, specifically in the Arakan hill region. Their settlements are found in the hilly areas adjacent to the India-Bangladesh border. The data analysis reveals the comprehensive insights into the socio-demographic, health-related, education-related, income, and livelihood characteristics of the Khumi community in remote hilly regions of Bangladesh. Most of the participants are male, farmers, and Christian. Health issues, such as their eye problems and ankle pain, vary between the genders, with a notable reliance on local pharmacies for their healthcare services. Education-wise, illiteracy is prevalent, and economic and teacher-related obstacles hinder their education accessibility. Monthly and yearly income distributions highlight their economic disparities, with a significant proportion earning between the ranges of 3,001 to 5,500 Taka monthly. Livelihood-related characteristics showcase a heavily reliance on solar power, diverse agricultural practices, and predominantly nuclear family structures. The various challenges in livelihood, including economic, cultural, healthcare, education, communication, and linguistic issues, are addressed through the community-driven solutions. There are various notable efforts focus on water drainage, transportation system improvement, electricity infrastructure enhancement, primary school education, and agricultural training. Therefore, the study concludes that the Khumi community faces various economic vulnerability, educational disparities, and cultural erosion while the recommendations include community-centric development programs, education enhancement, healthcare access improvement, agricultural support, infrastructure development, preservation of culture, social welfare programs, government-community collaboration, research and data collection, and awareness and advocacy efforts. Implementing these numerous recommendations can contribute to the overall development of the Khumi community with addressing their various unique challenges and fostering the sustainable progress.

KEYWORDS: Khumi community, lifestyle of the Khumi community, life journey of the Khumi community, cultural identity of the Khumi community.

I. INTRODUCTION

The emergence of Bangladesh in 1971 was a significant and transformative event in the post-colonial landscape of South Asia. The war of Liberation from Pakistan was fiercely fought, driven by the middle classes and fueled by the Bangladeshi people's desire for democracy, identity, and societal improvement. The establishment of Bangladesh as a sovereign secular republic substantially dismantled the 'two nation theory' that had served as the foundation for the formation of Pakistan in 1947, and illustrated that religion alone was inadequate in constructing a unified national identity (Bhardwaj and Tata, 2009). Bangladesh, a sovereign secular state, is home to a multitude of ethnic communities. Every ethnic group maintains its own distinct language, religion, and culture, thereby enriching our nation's cultural diversity. Indigenous ethnic communities comprise 1,650,159 individuals of Bangladesh's enormous population (Dhamai, 2014). These organisms are found in Barisal, Chittagong, Dhaka, Khulna, Mymensingh, Rajshahi, Rangpur, and Sylhet, among other places. The mountainous Chittagong Hill Tracts are home to the most densely populated indigenous communities, with a combined population of 990,860 individuals (World Bank, 2008). The Khumi community, which consists of 8,348 individuals in the Chittagong Hill Tracts, is one such tiny ethnic group. At the time of writing, the Khumi community in Bangladesh comprises a mere 3,780 individuals, or 0.23%, of the overall populace (Mohiuddin and Haque, 2015). The Khumi community, which is primarily found in the elevated regions of Bandarban, has managed to safeguard their distinct customs, heritage, and way of life for many generations. The group in question exhibits distinct characteristics such as a unique language, social connections, clan hierarchies, traditional values, customs, folklore, and attire. In their native tongue, the term 'Khumi' translates to 'people of the deep forest'. Instead of perceiving themselves as a limited community, the Khumi proudly adopt the name 'Khumi Jati' or the 'Khumi community.' The Khumi language assigns the meanings 'Khu' and 'Mi' as 'deep forest' and 'people,' respectively (Uddin, Chowdhury, and Uddin, 2023).

A Review of the Lifestyle Issues of the Khumi Community

The Khumi people are a prominent ethnic group inhabiting Bangladesh, India, and Myanmar. Their habitat is primarily in the western portions of Myanmar, specifically in the hilly area of Arakan (Uddin, 2008). The Khumi community predominantly inhabits the Bandarban district in Bangladesh, namely in the Thanchi, Ruma, Rowangchhari, and Bandarban Sadar upazilas, as well as the Bilaichhari upazila in the Rangamati district. The Khumi people utilise their indigenous language as a means of communication, employing a script that has been in active use for than a century within Myanmar. Since the acceptance of Christianity in 1970, the Khumi people in Bangladesh have been utilising the Bengali alphabet, according to estimates (Banglapedia). Only a small portion of the Khumi population has obtained formal education, and it is only this group that is able to speak the Bengali language. However, a few of their members possess the ability to converse in the regional Bengali dialect. The Khumi people are famous for their ability to speak multiple languages. Predominant construction materials for Khumis are bamboo and timber. As curtain materials, three national materials are utilised, including Shona. Structures are constructed atop one another, measuring 6-7 feet in height, using bamboo and wood materials. There are two verandas on each of the houses, one in the front and one in the rear. Fountain water is typically used by Khumis for domestic purposes. Khumi men maintain long hair, don a particular style of ornament, and adhere to traditional dress, which consists of a lungi and knee-length garment. Adult males and females adorn their temples with a white turban. Khumi women adorn their heads with white turbans, adorn their limbs with brass hair ornaments, adorn their ears with large silver earring sets, and drape a blanket over their waists. Khumi women enjoy donning handcrafted ornaments during celebrations. Adolescent females accessorise with oversized pendants and blankets (waistcloths) crafted from vividly coloured fabric. Khumi women are generally skilled in the construction of their own traditional garments. By woven bamboo segments, a 15- to 16-inch-long decorative piece with a variety of patterns is created and adorned on all sides with vibrant hues. The Khumi are self-sufficient in cottage industries, and each household produces its own garments using traditional handicrafts.

Historical records compiled by Ramesh Chandra Majumdar indicate that the Khumi community originated in Mongolia. They are distinguished by their tall stature, broad facial features, flat nose, and elongated eyes, as well as their dark skin complexion. A variety of faiths are practiced by the Khumi people, such as Animism, Buddhism, Christianity, and Krama. The influence of Buddhist practices has been observed among certain Khumi individuals in East India and Myanmar, where Buddhism has spread. Nevertheless, not every Khumi individual observes every Buddhist tradition. Although adhering to the Buddhist faith, they may not wholeheartedly adopt every rite and ritual associated with it. Hence, notwithstanding their affiliation with Buddhism, their religious observances are distinctive due to their adherence to animistic doctrines. The Khumi people, renowned for their unique cultural customs, pay homage to natural phenomena such as cascades, rivers, stones, and mountains. In addition, they honour Tamuih (the creator) via rituals.

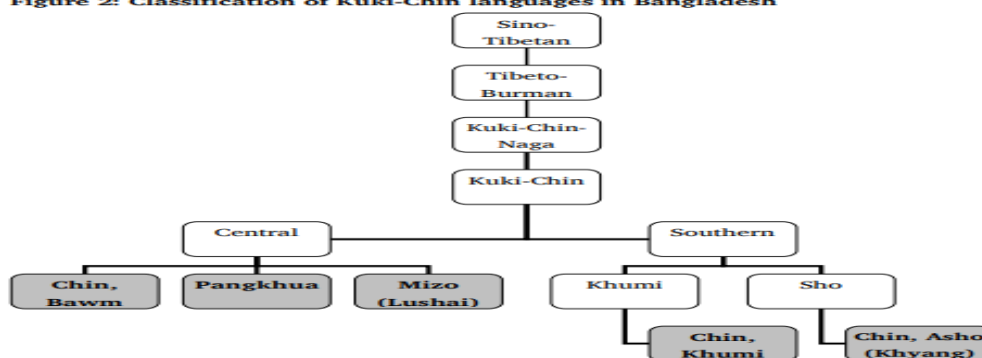
As a primary means of subsistence, the Khumi people practise shifting cultivation, or "Jhum" cultivation. This farming method encompasses the development of an assortment of commodities, including rice, chilli, turmeric, ginger, sesame, and numerous vegetables. Furthermore, in the present era, the Khumi people have expanded their agricultural endeavours to include the cultivation of fruits such as bananas, almonds, and mangoes, in addition to their traditional harvests.

II. LITERATURE REVIEW

The Bangladesh Indigenous Peoples Forum reports that out of Bangladesh's vastly diversified population, at least 45 distinct ethnic groups can be considered indigenous. At the same time, a UNESCO-published study on bilingual education by the Research and Development Collective indicated that, in addition to Bangla, 43 other languages are used in the classroom (ILO, 2017). The Khumi ethnic group in Bangladesh is characterized by its modest size. Scant literature exists regarding them. Based on information from governmental and non-governmental sources in 1992, the approximate number of Khumis was around 2000. They possess a distinct language, culture, and social norms that set them apart from other ethnic groupings (Guhathakurta, 2010). The Ruma, Rowangchori, and Thanchi thana people of Bandarban district in southern Bangladesh are part of the tiny indigenous Khumi people group. Their indigenous traditions and cultures have adapted them to life in deep hilly regions. Consequently, they adhere to a highly conventional lifestyle. Literacy is low among the Khumi people. Beyond a public elementary school, the research region lacks any kind of secondary or tertiary education institution. Jhum agriculture is their primary means of subsistence. Their monthly earnings are pitiful. The contemporary health care system is completely foreign to them. They know very little about the systems in place for maternity, infant, and child health care, basic care, contraception, and family planning (Mohiuddin and Haque, 2015). The majority of the Khumi population resides in remote forest settlements in the Ruma, Thanchi, and Rowangchhari subdistricts of the Bandarban district. Thanchi has the largest Khumi population of the three subdistricts. It is necessary to traverse difficult terrain in order to access the majority of the locations listed above. The Khyang people in Bandarban Sadar subdistrict's plains-based Ghungurumukh Para region are an exception to this rule (Kim, Roy and Sangma, 2011). One minor tribe in Bangladesh's Chittagong Hill Tracts is the Khumis, who live primarily in the Thanchi sub-district of Bandarban district. In order to chronicle the Sigibe clan's (Khumis people) use of medicinal herbs and formulations for the treatment of different ailments, an ethnomedicinal study was conducted among them at Hoitong Khumi Para (Sarker et al., 2012).

A Review of the Lifestyle Issues of the Khumi Community

Figure 2: Classification of Kuki-Chin languages in Bangladesh



Source: (Kim, Roy and Sangma, 2011).

Although the Khumi's "origin" is unclear, their existence in the Arakan hills of Burma (now Myanmar) and migration to the CHT region at the end of the seventeenth century are undisputed. They had to create a new ecological livelihood plan after arriving in. Once warlike, Khumis have lived peacefully in the CHT region since their displacement. The Khumi remained unaffected by regional conflict, political polarization, and power shifts from Mughal to British, British to Pakistan, and Pakistan to Bangladesh. The movement of rulers, even of their own home, the CHT, during political renovation and regional fragmentation of South Asia was unknown to them (Uddin, 2008). Bandarban is home to the hill people known as the Mro, Bawm, Khumi, and Lushai. These people tend to live in more isolated locations without good access to highways. It was determined early on that the project couldn't proceed in a few of the more distant unions. The smaller IP communities that were indicated reside in these exact places. To be more precise, we did not include: Union of Tindu and Remakree in Thanchi upazia—home to Mro, Khumi, and a few Bawm—and Remakree Prangsha and Galengya in Ruma upazila—home to Mro, Bawm, Lusai, and Khumi—among others (Asian Development Bank, 2020). The indigenous ethnic groups in the Chittagong Hill Tracts (CHT) of Bangladesh have unique mother tongues that distinguish each group from one another, with distinct features and cultural characteristics. Through the collection of ancestral scripts from Myanmar, the Khumi people have been working toward the development of their language's alphabet (Rahaman, 2021).

III. OBJECTIVE

The presentation of information about the Khumi community is often incomplete, leading to the invisibility of the Khumi ethnic group in many diverse areas. As a result, their lifestyle, education, health status, and social conditions require more accurate statistical representation. This research is planned to conduct surveys to gather information to understand the Khumi community. The aim of the study was to learn about the lifestyle of the Khumi community. To achieve the aim of the study there were some specific objectives of the study as follows:

- To understand the socio-economic conditions of the Khumi ethnic group.
- To gather information about their health and medical facilities.
- To know about the education system within the Khumi community.
- To identify the problems they are currently facing and solicit their opinions on problem-solving strategies.

IV. METHODOLOGY

Thanchi is a sub-district located in the Bandarban district of Bangladesh. Thanchi has a significant Khumi population, numbering 1,738 individuals in total. Thanchi sub-district consists of four unions, among which three are predominantly inhabited by the Khumi community. This research mainly focuses on five Khumi families using purposive sampling technique from the Pawo Para, Komsing Para, Reteng Karbari Para, and Koang Karbari Para within these unions, encompassing a total population of 779 and 125 families. The research, conducted through social survey and focused group discussions, aims to obtain the accurate information. Local Khumi representatives were consulted to select the research site. A structured questionnaire was used to gather information, ensuring careful verification before actual implementation. Two data collectors were selected, and information regarding each family's members, age, gender, education, occupation, income source, and land ownership was gathered. Data collection began on December 23, 2022, and concluded on January 22, 2023. Subsequently, the collected data was used as the input into a SPSS data analytical tool to make some inferences through various tables and graphs.

A Review of the Lifestyle Issues of the Khumi Community

V. FINDINGS AND ANALYSIS

Table 01: Socio-demographic characteristics

Characteristics	Sex of the participant		
	Male N (%)	Female N (%)	Total N (%)
Gender	41 (82%)	9 (18%)	50 (100%)
Village wise Gender			
Paow Para	13 (26%)	0 (0%)	13 (26%)
Retang karbari para	02 (4%)	4 (8%)	6 (12%)
Kamsing Para	20 (40%)	5 (10%)	25 (50%)
Koang Karbari Para	06 (12%)	0 (0%)	6 (12%)
Religion			
Christian	38 (76%)	9 (18%)	47 (94%)
Nature worshipper	03 (6%)	0 (0%)	3 (6%)
Marital status			
Married	41 (82%)	8 (16%)	49 (98%)
Widow	0 (0%)	1 (2%)	1 (2%)
Educational qualifications			
Illiterate	32 (64%)	08 (16%)	40(80%)
Primary	04 (8%)	01 (2%)	5 (10%)
Secondary	03 (6%)	0 (0%)	3 (6%)
Higher Secondary	01 (2%)	0 (0%)	01 (2%)
Graduate/Post Graduate	01 (2%)	0 (0%)	01 (2%)
Occupation			
Small business	02 (4%)	0 (0%)	02 (4%)
Farmer	35 (70%)	9 (18%)	44 (88%)
Government job	01 (2%)	0 (0%)	01 (2%)
Private job	01 (2%)	0 (0%)	01 (2%)
Carpenter	02 (4%)	0 (0%)	02 (4%)

The table 01 provides a comprehensive overview of the demographic characteristics of the participants based on various factors. The gender distribution indicates that 82% of the participants are male, while 18% are female, resulting in a total of 100%. When considering the distribution across different villages, the highest percentage of males is in Kamsing Para (40%), while Paow Para has a significant male presence as well (26%). In terms of religion, the majority of participants (76%) identify as Christian, with a smaller percentage (6%) following nature worship. The marital status of the participants reveals that 82% are married, while 16% are widowed. Educational qualifications vary, with the majority (64%) being illiterate, followed by those with primary education (8%). The occupational distribution indicates that a significant portion of the participants are farmers (70%), with smaller percentages engaged in small businesses, government jobs, private jobs, and carpentry. Overall, this table provides valuable insights into the diverse characteristics of the participants, offering a foundation for a more in-depth analysis of the study population.

Table 02: Health related characteristics

Characteristics	Sex of the participant		
	Male N (%)	Female N (%)	Total N (%)
Physical problems			
Eye problems	5 (10%)	0 (0%)	5 (10%)
Ankle pain	4 (8%)	1 (2%)	5 (10%)
Knee pain	3 (6%)	0 (0%)	3 (6%)
blood pressure	2 (4%)	1 (2%)	3 (6%)
Gastric ulcer	3 (6%)	0 (0%)	3 (6%)
Gonorrhoea	3 (6%)	0 (0%)	3 (6%)
Body ache	0 (0%)	1 (2%)	1 (2%)
Typhoid	1 (2%)	0 (0%)	1 (2%)

A Review of the Lifestyle Issues of the Khumi Community

No physical problems	26 (52%)	0 (0%)	26 (52%)
Total	47 (97%)	3 (6%)	50 (100%)
Type of healthcare services	Frequency (%)	Changes of treatment	Frequency (%)
Local pharmacy	26 (52%)	Changed	50 (100%)
Upazila (sub-district) hospital	20 (40%)	Unchanged	0 (0%)
At home	02 (4%)		
Vaidya	02 (4%)		

Table 02 presents health-related characteristics based on the sex of the participants. The table includes various physical problems reported by the participants, and the distribution is shown for both males and females. Among the health issues, eye problems were reported by 10% of males, while none of the females reported such issues. Ankle pain was reported by 8% of males and 2% of females. Knee pain, blood pressure issues, gastric ulcers, and gonorrhea were reported by varying percentages of males, while females had lower or no occurrences in these categories. Body ache was reported by 2% of females and no males. Typhoid was reported by 2% of males. Notably, 52% of males reported having no physical problems, while none of the females reported such issues. The table provides a comprehensive overview of the distribution of health-related characteristics among the participants based on their gender.

This table also illustrates the distribution of healthcare service utilization among the surveyed population, categorized by type and presented as percentages. The most frequently accessed healthcare service is the local pharmacy, constituting 52% of the respondents. This high percentage suggests a significant reliance on community pharmacies, possibly for over-the-counter medications, basic consultations, or prescription fulfillment. Following closely, the upazila (sub-district) hospital accounts for 40% of healthcare service utilization, indicating a substantial proportion seeking more comprehensive medical attention at a higher-tier facility. At-home healthcare services and Vaidya (traditional healer) options each represent a smaller but notable 4%, reflecting a preference for personalized care or traditional remedies among a minority of respondents. This breakdown provides valuable insights into the healthcare-seeking behavior within the community, highlighting the diverse range of services utilized and the varying degrees of reliance on different healthcare providers.

The data also indicates that a substantial proportion of treatments, precisely 50%, have undergone modifications, suggesting a dynamic and responsive approach to the medical interventions being considered. In contrast, there are no instances of unchanged treatments, reflecting a complete absence of static or unaltered therapeutic strategies within the observed context. The stark contrast between the 100% change rate and the absence of unchanged treatments underscores the fluid nature of the medical decision-making process, emphasizing the continuous adaptation and optimization of treatments in response to evolving circumstances or patient needs.

Table 03: Education related characteristics

Characteristics	Frequency	Percentage
Primary School Education		
Government Primary School	3	6%
Non-Government Primary School	47	94%
Primary school teachers		
Present	30	60%
Absent	20	40%
Receiving educational assistance		
Receiving assistance	12	24.0%
Not receiving assistance	38	76.0%
Obstacles to receiving education		
Economic obstacles	10	20.0%
Lack of an adequate number of teachers	40	80.0%
Reasons for students dropping out		
Economic reasons	25	50.0%
Students disinterested in education	16	32.0%
Lack of interest from parents	8	16.0%
Distance from school	1	2.0%

A Review of the Lifestyle Issues of the Khumi Community

Opportunities for girls and children in the education sector		
Opportunity	49	98.0%
Lack of opportunity	1	2.0%

Table 03 provides insights into various education-related characteristics. Among the surveyed individuals, 94% attended non-government primary schools, while only 6% attended government primary schools. Regarding primary school teachers, 60% were present, and 40% were absent. In terms of receiving educational assistance, 24% were receiving assistance, while 76% were not. Economic obstacles were reported by 20%, and 80% faced a lack of an adequate number of teachers as obstacles to receiving education. The reasons for students dropping out included economic factors (50%), student disinterest (32%), lack of parental interest (16%), and distance from school (2%). Fortunately, 98% of the respondents acknowledged opportunities for girls and children in the education sector, with only 2% citing a lack of opportunity.

Table 04: Monthly and Yearly Income

Monthly Income		Yearly income	
Amount	Frequency	Amount	Frequency
500/-3,000/-	34.0%	10,000/-30,000/-	28.0%
3,001/-5,500/-	48.0%	30,001/-50,000/-	36.0%
5,501/-8,000/-	12.0%	50,001/-70,000/-	26.0%
8,001/-10,500/-	6.0%	70,001/-90,000/-	10.0%

The table 04 provides a breakdown of the monthly and yearly income distribution among the surveyed population. In terms of monthly income, the majority (48.0%) falls within the range of 3,001 to 5,500 Bangladeshi Taka, followed by 34.0% earning between 500 to 3,000 Taka. The income distribution expands, with 12.0% earning in the range of 5,501 to 8,000 Taka and a smaller percentage of 6.0% falling into the category of 8,001 to 10,500 Taka. When considering yearly income, the highest frequency (36.0%) is observed in the range of 30,001 to 50,000 Taka annually, closely followed by 28.0% earning between 10,000 to 30,000 Taka. The distribution extends to 26.0% in the 50,001 to 70,000 Taka range and a smaller percentage of 10.0% in the category of 70,001 to 90,000 Taka. This breakdown offers insights into the income distribution pattern within the surveyed population, allowing for a comprehensive understanding of their financial circumstances.

Table No 05: Livelihood related characteristics

Characteristics	N	%	Characteristics	N	%
Family Types			Type of residence		
Nuclear	50	100%	Own house	49	98.0%
Joint	0	0%	Rented house	02	2.0%
Residence			Source of water		
House made of tin/wood	26	52.0%	Tube well	41	82.0%
House made of bamboo	24	48.0%	Supply	09	18.0%
Electricity Usage			Types of transportation		
Electricity	0	0.0%	On foot	38	76.0%
Solar power	50	100.0%	Boat	12	24.0%
Agricultural Land Ownership			Produced crops		
Cultivation on private land	48	96.0%	Family use	42	84.0%
Cultivation on others' land	02	4.0%	Market sale	08	16.0%
Toilet Types			Problems in marketing the produced crops		
Half Paka (partially constructed with bricks)	01	2.0%	Transportation issues	19	38.0%
Kaccha (temporary construction)	22	44.0%	Unjust price	16	32.0%
Open Space	27	54.0%	No market issues	15	30.0%
Occupation outside of the profession			Occupational change		
Tea seller	1	2.0%	Woodwork	03	6.0%

A Review of the Lifestyle Issues of the Khumi Community

Gardening	31	62.0%	Shop	01	2.0%
Livestock farming	5	10.0%	Garden	02	4.0%
Does not work outside of the profession	13	26.0%	Traditional occupation or farming on leased land	44	88.0%
Source of Entertainment			Dignity of women		
Organizing festivals	22	44.0%	Respected	49	99.0%
Storytelling or gossip	15	30.0%	Not respected	01	2.0%
Visiting relatives' houses	12	24.0%			
Watching television	01	2.0%			

Table No 05 presents various livelihood-related characteristics among the surveyed population. All the families in the study (100%) have a nuclear family structure, while none follow a joint family system. In terms of residence, 52.0% live in houses made of tin/wood, and 48.0% reside in bamboo structures. Notably, all households rely on solar power, with none using electricity. Agricultural land ownership is predominantly on private land (96.0%), and only a small percentage (4.0%) cultivates on others' land. Sanitation facilities vary, with 44.0% having half-pucca toilets, 44.0% using kaccha (temporary construction), and 54.0% relying on open spaces. Outside their primary professions, 62.0% are engaged in gardening, 10.0% in livestock farming, and 2.0% work as tea sellers. The most common sources of entertainment include organizing festivals (44.0%), storytelling or gossip (30.0%), visiting relatives' houses (24.0%), and watching television (2.0%). In terms of residence, a substantial majority (98.0%) own their houses, with only a minimal percentage (2.0%) residing in rented accommodation. Access to water sources reveals that 82.0% rely on wells, while 18.0% have access to a supply system. Transportation methods are diversified, with 76.0% traveling on foot and 24.0% using boats. Regarding crop production, a significant portion (84.0%) utilizes the produced crops for family consumption, while a smaller percentage (16.0%) engages in market sales. Challenges in marketing crops include transportation issues (38.0%), unjust pricing (32.0%), and a notable proportion facing no market-related problems (30.0%). Occupational diversity is observed, with woodwork (6.0%), shop-keeping (2.0%), gardening (4.0%), and a predominant engagement in traditional occupations or farming on leased land (88.0%). The table also highlights the noteworthy aspect of women's dignity, with a high percentage (99.0%) being respected within the community, while a minimal percentage (2.0%) faces disrespect.

Table 06: Ways of Living, Issues, and Problem Solving

Challenges in livelihood	N	%	Ways to Solve Problems	N	%
Economy	16	32.0%	Water drainage	09	18.0%
Culture	12	24.0%	Transportation system	13	26.0%
Healthcare	12	24.0%	Electricity infrastructure	06	12.0%
Education	04	8.0%	Primary school	17	34.0%
Communication	03	6.0%	Agricultural training	5	10.0%
Linguistic	03	6.0%			

Table 06 sheds light on the challenges in livelihood faced by the surveyed population and the corresponding ways they approach problem-solving. The primary challenges identified include economic concerns (32.0%), cultural issues (24.0%), healthcare (24.0%), education (8.0%), communication (6.0%), and linguistic factors (6.0%). To address economic challenges, the community focuses on water drainage (18.0%) and improving the transportation system (26.0%). Culture-related issues are tackled through initiatives such as enhancing electricity infrastructure (12.0%), while healthcare challenges prompt a focus on primary school education (34.0%). Communication challenges are met with efforts to provide agricultural training (10.0%). This table reflects the community's awareness of diverse challenges and its proactive approach to finding specific solutions tailored to each issue.

CONCLUSIONS

Bangladesh is still a growing country, and for it to make progress, everyone in the country needs to be involved. Out of the total population of 165.16 million people in Bangladesh, the majority are Bengalis, while roughly 1.8% belong to at least 54 different ethnic groups. They are conversing in a minimum of 35 distinct languages. The population of these ethnic groups is primarily concentrated in the northern and southeastern regions of the country, specifically in the Chittagong Hill Tracts (CHT). The ethnic communities of Bangladesh are a source of great pride. Their different culture and actions enhanced the country (Ananda, 2020). A nation truly advances when its vast population is educated and skilled. Considering this, it is evident that the Khumi community in the remote areas of the hilly regions in Bangladesh lags behind economically, socially, politically, and culturally. They face disparities in education, health, employment, and economic opportunities, leading to inequality in various rights within society

A Review of the Lifestyle Issues of the Khumi Community

(Uddin, 2008). Despite Bangladesh's overall progress in development, the pace of advancement among the Khumi people is notably slower. The prevalence of poverty is higher among them. Their everyday life reflects economic instability, lack of education, unawareness, and cultural erosion. In this research, we have explored various aspects of Khumi daily life, focusing on their necessities, opportunities, education, family, and social status. We have observed that the Khumi people are economically vulnerable, facing a lack of education, unconsciousness, and cultural erosion in their way of life. Communication issues and economic instability are significant obstacles for Khumi students. They face challenges in accessing general facilities available in the country. We believe that raising awareness and planning for a sustainable lifestyle will contribute to the overall development of the Khumi community. If educational development occurs within the Khumi community, it will lead to their economic security, social awareness, and safety. Various governmental and non-governmental organizations involved in development work in the country should actively engage with Khumi welfare to propel them forward.

RECOMMENDATIONS

Community-Centric Development Programs: Focus on implementing community-centric development programs tailored to the specific needs of the Khumi community. These initiatives should address lifestyle challenges and promote sustainable improvements in various aspects, including education, healthcare, and economic opportunities.

Education Enhancement: Prioritize education by increasing the number of schools in Khumi areas, ensuring a sufficient number of qualified teachers, and providing free education for underprivileged children. Special attention should be given to addressing challenges faced by Khumi children in accessing quality education.

Healthcare Access: Improve healthcare access by establishing community clinics and ensuring an adequate number of healthcare professionals. Targeted health programs should address prevalent health issues within the Khumi community and promote overall well-being.

Agricultural Support: Implement agricultural support programs, including financial assistance, access to modern farming techniques, and training. These initiatives aim to enhance agricultural productivity, a key component of the Khumi lifestyle.

Infrastructure Development: Invest in infrastructure development, including safe water facilities, sanitation, and electricity access. Upgrading transportation and communication infrastructure is crucial to connecting Khumi communities and facilitating economic growth.

Preservation of Culture: Support initiatives to preserve and promote Khumi culture. This includes the enforcement of cultural and familial laws, as well as measures to protect the fundamental rights and human rights of the Khumi community.

Social Welfare Programs: Implement social welfare programs to support vulnerable groups within the Khumi community, such as widows, orphans, and the elderly. These programs should provide necessary subsidies and assistance to improve their quality of life.

Government-Community Collaboration: Foster collaboration between the government and the Khumi community. Engage community leaders and members in decision-making processes to ensure that development initiatives align with the community's aspirations and priorities.

Research and Data Collection: Encourage further research and data collection to gain a deeper understanding of the Khumi community's lifestyle and issues. This ongoing research will help in refining and adapting development strategies based on evolving community needs.

Awareness and Advocacy: Increase awareness about the lifestyle and challenges faced by the Khumi community through advocacy programs. Promote understanding and appreciation for the unique cultural heritage of the Khumi people to garner support for sustainable development initiatives.

ACKNOWLEDGMENT

I extend my sincere gratitude to all the research participants in this study for sharing their valuable insights into the Khumi community's lifestyle. Their cordial cooperation and openness have been instrumental in enriching my understanding about the ethnic community. Finally, special thanks to those who facilitated the whole data collection process and making this research possible.

REFERENCES

- 1) Ananda, K. (2020). *A COMPARATIVE STUDY OF SOCIO-ECONOMIC STATUS BETWEEN ETHNIC (GARO) COMMUNITY AND MAINSTREAM PEOPLE OF BANGLADESH*. [online] Available at: <http://archive.saulibrary.edu.bd:8080/xmlui/bitstream/handle/123456789/4861/11-04623.pdf?sequence=1&isAllowed=y> [Accessed 23 Jan. 2024].
- 2) Asian Development Bank (2020). *Semi-annual Indigenous People Social Monitoring Report Second Chittagong Hill Tracts Rural Development Project (CHTRDP II)*. [online] Available at: https://www.adb.org/sites/default/files/project-documents/42248/42248-013-smr-en_12.pdf [Accessed 19 Jan. 2024].

A Review of the Lifestyle Issues of the Khumi Community

- 3) Bhardwaj, S. and Tata, R. (2009). *Contesting Identities in Bangladesh: A Study of Secular and Religious Frontiers*. [online] ASIA RESEARCH CENTRE. Available at: <https://eprints.lse.ac.uk/38640/1/ARCWP36-Bhardwaj.pdf>.
- 4) Dhamai, B. (2014). *An Overview of Indigenous Peoples in Bangladesh*. [online] www.academia.edu. Thailand: AIIP. Available at: https://www.academia.edu/37029382/An_Overview_of_Indigenous_Peoples_in_Bangladesh.
- 5) Guhathakurta, M. (2010). *Representing the Khumi of the Chittagong Hill Tracts: The Making of a Film*. [online] www.academia.edu. Indigenous Studies. Available at: https://www.academia.edu/6303248/Representing_the_Khumi_of_the_Chittagong_Hill_Tracts_The_Making_of_a_Film [Accessed 19 Jan. 2024].
- 6) ILO (2017). *Building capacities on indigenous and tribal peoples' issues in Bangladesh*. [online] Available at: https://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/---ilo-dhaka/documents/publication/wcms_563690.pdf.
- 7) Kim, A., Roy, P. and Sangma, M. (2011). *DigitalResources The Kuki-Chin Communities of Bangladesh: A sociolinguistic survey*. [online] Available at: https://www.sil.org/system/files/rapdata/58/50/96/58509691840745997779686538025027460842/silesr2011_025.pdf [Accessed 19 Jan. 2024].
- 8) Mohiuddin, M. and Haque, Md.T. (2015). Patterns and Consequences of Khumi Indigenous People: A study in CHT area in Bangladesh. *Journal of Social Development*. [online] Available at: https://www.academia.edu/17458107/Patterns_and_Consequences_of_Khumi_Indigenous_People_A_study_in_CHT_area_in_Bangladesh [Accessed 17 Jan. 2024].
- 9) Rahaman, A. (2021). Safeguarding linguistic and ethnic diversities in the Chittagong Hill Tracts, Bangladesh: A study on state policies and initiatives. *Journal of Social Sciences and Humanities Review*, 5(3), p.146. doi:<https://doi.org/10.4038/jsshr.v5i3.45>.
- 10) Sarker, B., Akther, F., Ayman, U., Sifa, R., Jahan, I., Sarker, M., Chakma, S., Podder, P.K., Khatun, Z. and Rahmatullah, M. (2012). Ethnomedicinal investigations among the Sigibe clan of the Khumi tribe of Thanchi sub-district in Bandarban district of Bangladesh. *American-Eurasian Journal of Sustainable Agriculture*, 6(4), pp.378–386.
- 11) Uddin, Md.S., Chowdhury, V. and Uddin, S.B. (2023). Ethnomedicinal study of the khumi indigenous community in Bandarban district, Bangladesh. *Drug Discovery*, 17(39), pp.1–11. doi:<https://doi.org/10.54905/disssi.v17i39.e3dd1004>.
- 12) Uddin, N. (2008). Living on the margin: the positioning of the 'Khumi' within the sociopolitical and ethnic history of the Chittagong Hill Tracts. *Asian Ethnicity*, 9(1), pp.33–53. doi:<https://doi.org/10.1080/14631360701803211>.
- 13) World Bank (2008). *Bangladesh: Indigenous/Tribal Population and Access to Secondary Schools (Draft)*. [online] Available at: <https://documents1.worldbank.org/curated/en/627571467997887013/pdf/IPP2800IPP0P101Draft0March026102008.pdf>.



There is an Open Access article, distributed under the term of the Creative Commons Attribution – Non Commercial 4.0 International (CC BY-NC 4.0) (<https://creativecommons.org/licenses/by-nc/4.0/>), which permits remixing, adapting and building upon the work for non-commercial use, provided the original work is properly cited.