

The Asset Capital-based Adaptation of the Marginalized People in the Northeast of Thailand Amid the Covid -19 Pandemic

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Abstract

This study aimed to investigate the capital assets- based adaptation of marginalized people in the Northeastern Thailand amid the Covid-19 pandemic. This study employed a qualitative research methodology to collect data through interview approaches. The results revealed that the majority of the marginalized people in northeastern Thailand adapted capital assets through the support of family members, especially children who have skills in communication technology to access health-related information and assistance from government and private agencies. Additionally, social capital was also used to help people in the community. This resulted in the communities with high-performance leaders being able to deal with the problem during the Covid- 19 pandemic effectively. Furthermore, the assistance of outsiders was another way for the adaptation since the marginalized people barely use financial and physical capital due to accessibility and capital limitations.

Keywords: *Capital Assets- Based Adaptation, Marginalized People, Northeastern Thailand, Covid-19 Pandemic.*

Introduction

The Covid-19 pandemic has severely affected people in various countries and as a result, there have been a large number of deaths. This pandemic is considered a huge tragedy and disaster and terrifying in the world's history. The most hazardous feature of the covid-19 is that the virus has spread rapidly and caused people to be afraid and suffer in order to survive to avoid infection. Since there was no methodical treatment or preventive measurement for this infection at the initial stage. The huge of deaths formed the panic and fear of the pandemic for the era of humanity, which affected the norm of living and challenged numerous problems, whether health, economy, education or society. These activities have had to stop because of the pandemic outbreak, which entails difficulties in living and surviving amid the pandemic.

Regarding the mentioned difficulties above, the most severe problem is the health problem because, in the early stages of the pandemic, there was no solid measurement or preventive procedure from the government as it was in the process of searching for a vaccine and methods of prevention of the virus. Resulted in this caused a large number of deaths in Thailand. Some people suffered from the infection and did not receive support. To request attention the assistance, they broadcast on social media, but still did not receive any assistance and eventually died. Besides, the people who watched through the media were terrified from the media of infected people having to lie in wait for death and queuing up to be tested for the disease appeared in the mass media. The medical staff have to work so hard to serve the patients who are infected with this virus. Even, the government has established a center to report the situation of the outbreak, providing information on infected people and deceased people with details and specific timelines of infected people. This can be seen that Thai society is frightened about the severe epidemic and encounters problems in all aspects of life, whether on livelihoods and occupations that failed or losses or have closed their businesses.

Yet, in times of difficulty, people need to adapt to the problems that arise. The people who have capital assets can support their families, but not for marginalized people in northeastern Thailand who are also

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affected by the pandemic and tend to be more severe than other groups. The main reason is that they do not have the ability to own capital and have difficult access to social resources but have to survive in their lives. This study presents the capital assets-based adaptation of marginal people amid the Covid - 19 pandemic situation.

Research Objective

To investigate the capital assets-based adaptation of the marginalized people in the Northeast of Thailand amid the Covid -19 pandemic

Literature Reviews

Adaptation requires livelihood resources, called capital assets, with the main idea that different households have different access to livelihood resources. The livelihood resources that poor people often negotiate and decide on are consisted of : *a) human capital*, such as health, nutrition, education, knowledge and skills, work ability, and adaptability ; *b) social capital*, such as networks and connections (patronage, neighborhood, kinship), relationships of trust and mutual understanding and support, formal and informal groups, shared values and behaviors, shared rules and sanctions, collective representation, mechanisms for participation in decision-making, leadership development; *c) natural capital*, such as land and produce, water and aquatic resources, trees and forest products, wildlife, wild foods and fibers, biodiversity, and environmental services; *d) physical capital*, such as infrastructure (transportation, roads, vehicles, safe shelter and buildings, water supply and sanitation, energy, communications), tools and technologies (production tools and equipment, seeds, fertilizers, pesticides, traditional technologies); and *f) financial capital*, such as savings, loans and debts (formal and informal), remittances , pensions , wages. (Serrat, O., & Serrat, O., 2017). Similarly, Phatthaphon Sripthrom (2009) explained that capital that households can access and possess can be divided into five categories: *1) physical capital*, in the form of houses that need to be extended to create stability at all times, ownership of land for farming or being able to make use of the land because of the most households think that If they have land to farm, they would be able to make a living, livestock farming, and being household assets, *2) financial capital*, in the form of savings, mutual funds, loans both in and out of the system from relatives and capitalists in the village. It means the accessibility to necessary household financial resources, *3) natural resource capital*, in the form of opportunities to utilize the natural resources available in the community, for example, forests, water sources, and wildlife, and so on, *4) human capital*, in the form of the main occupation of family members, various skills, education, immunity from illness , nutrition system, and access to medical treatment and serious events that occur in the household can be considered external conditions from which the household chooses to deal with the problems, including the shortage of food and drink, necessary clothing, security, inheritance transfer, and knowledge, *5) social capital*, in the form of relationships with the relatives, relationships with local communities and in nearby areas, relationships with the outside world, relationships with the government, reputation and honor, as well as positions in the community.

When considering the components of resources for living, called capital resources, as mentioned above, this study has divided the capital resources as were follow: *a) physical capital* has three main components: amount of land, housing and assets, *b) financial capital* has three main components: income diversity, sources of loans and savings, *3) human capital* has five main components: labor force, vocational skills, development of knowledge skills, health and illness, and serious incidents that occur in households where households choose to deal with the problems, *4) natural resource capital* has one main component: common natural resources (land, water, forest, wildlife), and *5) social and cultural capital* has three main components: position in the community, community relations and extra-community relations (Long, 1989 as cited in Buapan Phromphakphing, 2006; Phatthaphon Siphrom, 2009; Rakodi , 1999; Thulstrup, 2015; Horsley et al., 2015). Therefore, the researchers concluded that the capital asset-based adaptation for the livelihood of marginalized groups in Thailand requires the accessibility to the resources for achieving livelihood goals, so-called five categories of capital resources: *1) human capital*, *2) social capital*, *3) natural capital*, *4) physical capital*, and *5) financial capital*.

Research Methodology

This study employed a qualitative approach to investigate the capital asset- based adaptation of the marginalized people in the northeastern of Thailand, the research methodology was as follows:

Research Area and Key Informants

The research area is the urban area of the major provinces in the Northeast, i.e. Nakhon Ratchasima, Khon Kaen and Udon Thani, which are all fast-growing cities with the three highest provincial gross domestic product (GDP) in the Northeast and have a high level of spread of the Covid-19 pandemic.

Key informants in this research were marginalized people. To set up criteria for specific key informants, the study has set the criteria for selecting informants as were follows: a) being poor and live in the urban areas, 2) being one of informal workers, disabled people, and homeless people, as well as other vulnerable people, totaling thirty people, and then divided into ten people per province.

Data Collection

For the data collection method, this study employed an in-depth interview to collect data with interview guidelines. In addition, this study also conducted participatory observation and non-participatory observation along with in-depth interviews to examine the context of the phenomenon. Furthermore, to obtain the complete data, the researchers collected data from secondary data sources, including academic articles, research reports, theses, books, and documents from government agencies and NGOs, to study as guidelines for investigating the phenomenon along with the primary data from field study.

Data Analysis

In aspect of data analysis, the collected data were examined using the triangulation methodology to examine the accuracy through different locations, people, and time periods and. After that, the data were categorized according to the identified issues and analyzed through the content analysis methodology.

Ethical Considerations

The study was approved by the Center for Ethics in Human Research, Khon Kaen University and all participants were asked for consent before conducting data collection. The confidentiality and anonymity of the respondents were preserved throughout the research process and the participants were informed of their right to withdraw from the study without any consequences. This research strictly complied with a qualitative approach and followed rigorous data collection, analysis, and reliability procedures with the aim to explore an insights indication of the capital asset-based adaptation of marginalized people in the northeastern of Thailand amid the Covid- 19 pandemic.

Findings

The results from study of the asset capital-based adaptation of the marginalized people in the Northeast of Thailand amid the Covid -19 pandemic were as follows:

Adaptation Through Human Capital

Adapting to problems in life, the most important person is a human being because humans have spirits, thoughts, and the ability to deal with those problematic situations. Therefore, the adaptation of marginalized people in the northeastern region with human capital is a common answer for all communities. Since the best adaptation in the beginning is support together from the family level. For members who are able to use social media also play an important role in providing information to other members about vaccination, places of donation information, and measures to protect themselves. This first type of human capital can be called household-level human capital, which consists of the neighbors and community leaders who have

a close relationship with other members and provide good assistance, such as using news channels from community networks, and assistance from various projects, called community-level human capital. In addition, there is also assistance from outsiders, such as donations from donors and assistance from government agencies, such as various welfare programs, such as money for the elderly and the state welfare card, called external community human capital. The adaptation through human capital in the Covid -19 pandemic of the marginalized people are described as follows:

Ms. Songp (pseudonym), who relies on mutual support from family members, namely her aunt, younger sister, and the family of her younger sister's four sons . Then, also rely on the help of human capital within and outside the community, such as relying on news channels from the network of people in the community, relying on help from assistance projects, as mentioned details:

“I have family members, including my aunt, younger siblings, and my younger siblings’ family of four. I moved into this area because my husband passed away, so I came to work with relatives, helping to take care of my grandchildren and sell things. Whenever I needed things, I had my children and grandchildren get them for me. When people in the community knew about any new news, they would publicize it and tell each other. For those who were seriously ill would be taken to the hospital and for those who weren’t seriously ill would be taken care of at home and quarantined themselves, since it wasn’t a large gathering.” In addition, during the outbreak, there was a project by Mr. Kittti Singbapat from Channel 3 TV station, providing funds to sell products to people in the community at low prices to help each other in the community.”

Grandma Dam (pseudonym) also adapted by relying on her children’s help, relying on each other in the community and neighbors because during the Covid-19 outbreak, Grandma Dam did not have income from trading like before. In addition, she also had the burden of raising a grandchild who was studying in secondary school, as well as helping to take care of her neighbor, Grandma Bualai, in a mutually dependent manner, including taking care of herself from high blood pressure and blood pressure. However, she received help from outsiders who came to donate food from various welfare funds, which helped her to stock up on rice and food and save her cost, as mentioned details:

“The income is unpredictable or estimate, since sometimes it tends to get more money, but sometimes it is not. It is around 500 -600 baht (20USD) per day, but now it is not even close to 200-300 baht (10USD) per day. During the pandemic when there is no income, there will be agencies that come to help, bring things to distribute , but I not use it immediately because of there are many charity foods at the first year and many times a day, such as water, rice, and food, including brown rice, and I normally stocked it up for the leftover from usage.”

Grandma Bualai (pseudonym) works as a collector of old things to sell, tobacco, and banana leaf cutting. Grandma Bualai relies on the care and support of her neighbor, Grandma Dam, who helps her with everything from spending money, electricity, and food after her husband passed away from cancer during the Covid-19 pandemic. During her husband’s treatment until his death, she relied on elderly money, donations from donors, and monthly welfare payments from the government, along with income from collecting old things to sell, tobacco, and banana leaf cutting. Although her income decreased during the Covid-19 pandemic, she was able to adapt due to the above-mentioned income factors. From the case of Grandma Bualai, it shows that during the Covid-19 pandemic, whether it was while taking care of her seriously ill husband or after his death, she relied on human capital from her occupational skills and the care and support from her neighbor, Grandma Dam, donations, and financial capital from various welfare funds, such as the elderly allowance and the state welfare card. Similar to the family of Mrs. Thanom (pseudonym), who relied on help from various agencies and family members who helped earn income to support the family. From her story, it was found that during the outbreak of the coronavirus, Mrs. Thanom could not leave the house to work to support her family because of the lockdown measures. In addition, her income is not much because she is a general laborer, earning a daily living and has no savings, but she has received assistance from various agencies, for example, agencies from Khon Kaen or the 4-region slum network that came to provide care during the pandemic, such as rice and food, checking for illnesses and providing medical treatment, including helping to alleviate income for the other two family members who are the main persons of support for each other and helping to alleviate the burden of expenses for raising and supporting the family .

Mr. Thawat (pseudonym) relies on help from the government, care from his employer, and help and being with his uncle as a neighbor. Originally, Mr. Thawat had the following occupational skills such as repair cars, construct, and do picture framing work. In the Covid-19 pandemic, it's caused more competitive in picture framing work, only those who have responsibilities are selected to continue working and as result Mr. Thawat was laid off and did not have a regular job. In addition, Mr. Thawat also had a lung disease, and his legs were disabled from a train accident, which made him unable to work in other occupations. Therefore, he had to rely on 800 baht (25 USD) per month for disability benefits and 200 baht (6 USD) for assistance from his employer some weeks, or from uncertain income from general employment. Mr. Thawat did not have a house number or electricity, so he lived with his uncle who was a neighbor, so he had to use electricity from his neighbors. In addition, he relied on loans from the government, which he was deciding to plan to expand his occupation by using his old skills as a picture frame maker, along with the loans he had borrowed from the government.

For Mr. Kaset (pseudonym), he adapted by mainly using human capital within society, such as following news from various channels to receive assistance, and building networks with people in the community to help each other during the pandemic, as mentioned details:

“Before the outbreak, people in the community helped each other very well, for example, if there was a quarrels in the community, Ms. Jinda would take me to a meeting to negotiate the house rental and make it possible to stay in this house during the first wave of the outbreak, I and my daughter were infected and received medical benefits. My daughter was treated in a hotel while I was treated at Srinagarind Hospital. The agency sent a car to pick me up and there were doctors who asked about my symptoms continuously. When I recovered, it was during the lockdown. In the community, there was Mr. Boonsong who brought food to deliver from the municipality that the community leader contacted and brought to me. Then, the group of people in the community who were responsible for taking care of me hung the food and instant noodles in front of the house. The community leader also provided drinking water during the pandemic when there was no income, I tried to find other sources of income to support our families, both from donations from high-income donors approximately 100-200 baht (6 USD) at a time, but it was not certain. For the news update, I usually follow news from online channels about the distribution of consumer goods ... When I met rich people, they gave me 100-200 baht (6 USD), but it was uncertain. Then I looked at the page to see where they were distributing news. Which houses were distributing rice? At the train station, they were distributing rice every day, so I would go to the train station.”

Adaptation Through Financial Capital

Access to financial capital for the marginalized households in the northeastern city is very difficult since their living conditions are difficult. The number of families have no savings because of their income comes from low-income occupations due to their occupations do not provide for increased income, such as garbage collection, general labor, and grocery sales. Some families have to struggle to make a living. Some families have to borrow money from relatives or even borrow money from informal debts, so they live with limited financial capital. This causes marginalized people in the northeastern region to encounter financial problems due to lack of income from work and debts both in and out of the baking system. Therefore, there is very low ability to adjust with financial capital, as details.

Mr. Mongkol (pseudonym) works as a grilled egg seller. His income before Covid-19 was 350-500 baht (15 USD) per day. Now, after COVID, his income is only 200 baht (6 USD) per day. During the lockdown, he was unable to go out to sell things. The family had income from his wife's laundry service, which was 100-200 baht (6 USD) per day. However, some days there was no income at all. Therefore, it was necessary to borrow 10,000 baht (300 USD) from an informal lender, which totaled 20,000 baht (600 USD) including interest. However, he had to try to find money to pay the interest to the creditors, as mentioned details:

“...During Covid-19, people covered their faces and didn't buy or eat anything. I went to sell on my original route. Some days, I stopped selling because sometimes I was discouraged, but I had to fight. I couldn't borrow everything from my children because they have their own family. Even though we are family, my son-in-law is from another family, and he has to pay for his car installments and household expenses as well. So, everyone has expenses... If I don't have any, I have some income from my grandmother's daily wages, 100-200 baht (6 USD) but it's not certain. I borrowed money from an informal lender. At first,

I borrowed 10,000 baht (300 USD), then it increased to 20,000 baht (600 USD) to buy food during the quarantine period, if I couldn't find it in time, I would give him the money I borrowed. I'm old, so he doesn't want me to borrow money..."

Mr. Sombun (pseudonym), 56 years old, works as a jockey at Pichaporn Stables. He lives with his mother, younger sister and older sister. He earns 1,000 baht (30 USD) per week from horse breeding and 20% of the prize money from horse racing. However, due to the Covid -19 pandemic, many racetracks have had to close down or limit the number of employees because of when horse breeders are infected, they cannot breed horses. During the period when horses cannot compete in the field, their income clearly decreases. Mr. Sombun 's financial situation after the Covid -19 pandemic was in a critical state. He borrowed money from relatives and friends, coupled with his debts to informal and formal sources such as the Government Savings Bank or other informal creditors, made him unable to ask for help from his neighbors. Especially when the Pitchaphorn stable was about to close due to the impact of Covid -19 pandemic, Mr. Sombun had to move to work at another stable, which would double his living expenses, as mentioned details:

".. Money is an issue. I have to borrow money. But people who want to lend money think about whether it's a good idea to lend it or not. Because of our career, right now we have debts both in the system and outside the system. But outside the system, we can talk about it. We still don't have any income. Banks have debt negotiations, installment payments, Government Savings Bank, we can get by. As for informal debt, we don't have any problems because we can talk to each other due to most of us are close and know each other. We're not two-faces person, we also want to do extra work, but when the time comes, will we be able to do it? Will we be able to do it ? Maybe because we don't have the money to invest. If we do it, it will be more like hired work. Another thing is that we like to buy lottery tickets, but we haven't won yet. There is no TV to watch because I panned it during Covid -19"

Mr. Detduang (pseudonym), 54 years old, works as a horse trainer, earning 1,000 baht (30 USD) per week. If he takes his horse to practice at the racetrack, he will earn an additional 100 baht (3 USD) per time. In addition, if he takes his horse to compete, he will receive a percentage of the prize, along with being hired to fill oil or lift things onto the car for 3-4 hours at a time, which earns him 200 (6 USD) baht. Since he lives in a room at the stable, he does not have any accommodation expenses. However, he had debts in the system or the Government Savings Bank around the end of 2021 or the beginning of the outbreak of the coronavirus disease, in the amount of 10,000 baht (300 USD). In the beginning, he paid the bank 500 baht (15 USD), but later could not pay the bank interest, so he did not pay the bank interest at all. The reason for the loan was to borrow money to spend not invested and is sometimes used for gambling, such as horse racing or buying lottery tickets, as mentioned details:

"... I have a debt with the Government Savings Bank during the end of 2021 and Covid, I used the phone to contact the bank and sent 500 baht (15 USD) per month. But now I haven't sent it for several months, but they haven't come to follow up. I borrowed 10,000 baht (300 USD). and sent the debt to the bank for the first 3-4 months. After that, I haven't sent it again. When paying, it will be deducted from the banking system. The reason for borrowing is to spend, not to invest in anything. If I want to take a risk, I will play horse racing but not for the lottery since don't like to buy it ..."

Mr. Chatchai (pseudonym), 60 years old, works as a general laborer, such as extension work, laborer, weeding, and grass cutting. It is a short-term general labor job after Mr. Chatchai quit his job as a horse breeder in a stable 10 years ago. Before, Mr. Chatchai worked as a horse breeder. He still had some extra income from a percentage of the income from taking horses to race. Therefore, he had money to spend and raise his children. Mr. Chatchai said that apart from his horse breeding skills and various extensions, he could not do any other jobs except for general labor. Until the outbreak of the Covid-19, he had no income because the horse stables and racetracks were closed. Therefore, there was no income to pay for water, electricity, and necessary utilities. He had to borrow money from relatives, bosses, or seniors who used to work together because Mr. Chatchai and his wife are the main breadwinners of the family, which has 10 members in total. Among these members there were other patients, including his brother who had terminal cancer. Mr. Chatchai had to rely on the money he earned from short-term casual labor, which was not enough to cover his expenses. He had to use some of it to treat his sick brother, who died during the pandemic Although there were donor who donated rice and food during the outbreak, the help was not

widespread and sustainable, this caused Mr. Chatchai's family to struggle to make a living on their own, as mentioned details:

"I found the water and electricity bills. I looked at my younger siblings. Otherwise, I asked my boss or my old boss, who I used to work with. He lives in Bangkok. He helped me. He would send me a thousand or two thousand at a time when he had the money to help me, he helped me. During this time, I had to solve it myself. When Covid began, I thought that my boss also having a hard time since he didn't have any work to do. I didn't bother him. I just lived according to my means."

Adaptation Through Physical Capital

The marginalized people in the northeastern city have very low physical capital usage because their overall living conditions do not possess physical capital. Some families still have to rent other people's places to live. Although some families use physical capital, such as picking vegetables or catching fish in public places, there are only a few. This is because physical capital in the communities where marginalized people live is small and not conducive to use, including natural capital. Based on the study results, this can be seen from the case of only four marginalized households that use physical capital, as follows:

Mr. Rod (pseudonym) has made use of the natural resources of Nong Tao Lek pond. In the past, he used it as drinking water, but now he doesn't use it because there is tap water and a small amount of water. He also catches fish and other aquatic animals from Nong Tao Lek pond. Every 3 - 4 years, he usually announces for people in the community or nearby communities to come and catch fish, for which he will collect money. The community leaders and people in the community will use the money to develop the local area and Nong Tao Lek pond. Resulted in allowing the community to build networks and build good relationships with people in the community, as mentioned details:

"...In the past, we used to drink and eat the water here because it was clear and clean. But now that tap water has come in, we don't use it anymore. But we conserve the water and restore it so that the fish can live and grow. If there are a lot of them, we will publicize it so that people can come and put fish in it. We collect money and use the money we get to develop the pond. We rotate it every 3-4 years to put fish in it once. But nowadays, we can't put fish in it because there is not enough water. When we catch fish, the water gets polluted due to this place also use for the Loi Krathong festival by the municipality..."

Ms. Yen (pseudonym) does not have a permanent job, but she usually the collection of vegetables or wood scraps found in the community to sell to regular shops, at a price of 5 baht per bundle. For Mr. Chatchai (pseudonym) also relies on natural food sources such as fishing or gathering vegetables in the Bung Ta Lua pond area. However, he still not get enough money for a family of 10 people. Similar to Mrs. Phap Phlueng (pseudonym) who relies on Bung Ta Lua pond for consumption such as collecting shellfish to cook and for household use since tap water does not flow easily. Therefore, it is necessary to use water from Bung Ta Lua pond for bathing or other activities in the household, as mentioned details:

"Since this area, there's Bung Ta Lua pond that we go fishing, gathering vegetables, gathering grass, but they don't allow us to take a lot. We can boil shellfish, but we have to ask the military officer. But they don't allow us to take much as a fertilizer bag, they won't let us take it. They'll say we're going to sell it. So, we were allowed to eat, find shellfish, and play in the water. It's hot, but to put it simply, there's not much water these days. This time, I was here 1 time before I came here again. Sometimes, the little kids go to play in the water."

The marginalized families in the northeastern city have the least use of physical and natural capital due to the residential areas of the communities do not have physical and natural capital that is conducive to access because most of them are urban communities. Some communities are in crowded areas and some people in the communities were homeless. Some communities live in government agencies' premises, such as along the railway tracks. Therefore, these areas do not have physical and natural capital. On the other hand, in some areas, which contain more physical capital, the marginalized groups do not tend to live because it is owned by individuals or government agencies. Therefore, adaptation through the physical and natural capital of marginalized people in the northeastern cities are very low or almost impossible as mentioned above.

Conclusion

The adaptation of marginalized people in the northeastern cities amid the Covid-19 pandemic had consumed the most of human capital, whether for helping each other among household members or sending information, preventive measures, and places to help, neighbors in the community also help each other as well, such as bringing rice and water to the infected households and helping from people outside the community, such as donating food, consumer goods, and help from government agencies. The key point from adapting to human capital in this study is the strength of community leaders is a vital key factor to help people in the community in the pandemic. This can be seen that some communities have set up community funds, which can be used to alleviate the suffering of people in the community initially, such as setting up a central kitchen, and coordinating with external agencies to receive assistance with consumer goods and necessities. Relying on each other in the families of marginalized people is quite low when compared to helping each other among people in the community with strong community leaders. The financial capital adaptation of the marginalized people in the northeastern is quite difficult due to the loss of income from occupations affected by the outbreak. In the past, these people had to work hard to make a living and had a low income from their occupations. They had no way to find financial sources at all. Some households had outstanding debts and borrowing money from the banking system was difficult because each household could not enter the normal financial system. As a result, they had to borrow money outside the system, which was a burden that pressed on their already difficult lives with very high interest rates as there was no choice. Therefore, during the outbreak, the financial impact on the marginalized households in the northeastern region was severe since they were not able to access the financial capital. Since then, the marginalized families in the northeastern have the low accessibility to physical and natural capital due to the residential areas of the communities not having physical and natural capital for accessibility as most of them are crowded communities and some people in the communities were homeless. Even more some communities are located in government agencies' premises, such as along the railway tracks. Therefore, these areas do not have physical and natural capital. On the other hand, in some areas, which contain more physical capital, the marginalized groups do not tend to live because it is owned by individuals or government agencies. Therefore, adaptation through the physical and natural capital of marginalized people in the northeastern cities is very low or almost impossible.

Discussion

The capital assets-based adaptation of the marginalized people in the Northeast of Thailand amid the Covid-19 pandemic indicated that the adaptation through the capital assets of marginalized groups in the northeastern consumes the most human capital, the reasons may occur from all problems caused by human actions. The solution to the problem must begin with helping each other as the norm for members in society to rely on each other when they encounter problems. The adaptation through human capital has begun with helping each other among household members and then helping each other among people in the community. If a community has a strong leader, the member would be able to lead members of the community to deal with the pandemic better than the other community. In addition, helping other people outside the community by donating consumer goods and commodities was considered a human characteristic to help each other.

This adaptation is clearly considered the social capital adaptation, which is consistent with Robert Putnam (1993), who explained that social capital refers to the connections between individuals and networks of social groups, leading to norms of reciprocity and trustworthiness. Furthermore, the study is also consistent with the concept of social capital of the Office of Social Development and Quality of Life, the National Economic and Social Development Board (2003) stated that social capital consists of quality human capital with knowledge, intelligence and skills, which can be seen from family members who have skills in using communication tools to access information sources related to the epidemic, especially by joining groups and creating networks to create benefits for the public. These capitals as institutional capital typically start from the family, political institutions such as government agencies related to public health as well as organizations such as civil society organizations, the media, and so on. These would help and cooperate in preventing the spread of the pandemic and preserve cultural and regional capital, such as trust, public

consciousness, kinship systems, and cooperation networks. These can be realized from the mutual assistance of people in the community, outside the community, and government agencies.

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