Impact Study Report

Building preparedness of vulnerable communities through inclusive disaster risk reduction initiatives

Prepared for

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Disclaimer
The report was commissioned by HelpAge Bangladesh. The opinions expressed in the document do not necessarily represent the official view of HelpAge Bangladesh.

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SHORTENING

BITA  Bangladesh Institute of Theater Arts
CBO   Community Based Organization
CDMC  Community Disaster Management Committee
FGD   Focus Group Discussion
GO    Government Organization
KII   Key Informant Interview
NGO   Non-Government Organization
ToT   Training of Trainers
UP    Union Parishad
VGD   Vulnerable Group Development
VGF   Vulnerable Group Feeding
UDMC  Union Disaster Management Committee
UzDMC Upazila Disaster Management Committee
WHO   World Health Organization
EXECUTIVE SUMMARY

Project Background

<table>
<thead>
<tr>
<th>Project name</th>
<th>Building preparedness of vulnerable communities through inclusive disaster risk reduction initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project goal</td>
<td>The goal of the project is to contribute to preparing communities to better withstand reoccurring natural disasters. The project will build on learning from the existing project to focus on basic disaster preparedness techniques as well as encouraging community structures and livelihoods which contribute to building disaster ready communities. In doing so communities will be able to better anticipate, respond to and recover from the negative impact of recurrent natural hazards.</td>
</tr>
<tr>
<td>Outcome</td>
<td>The capacity of target communities including older women and men and people with disabilities have been strengthened to reduce the negative impact of disasters caused by natural hazards ensuring their capacities and needs are reflected and addressed in disaster prepared livelihoods, inclusive disaster risk reduction plans, and disaster response actions.</td>
</tr>
<tr>
<td>Locations</td>
<td>Humanitarian actors including local, national and international NGOs, UN agencies, government and donors have knowledge, capacity and appropriate tools and plans to ensure age inclusive humanitarian responses.</td>
</tr>
<tr>
<td></td>
<td>Disaster affected older women and men meet their age inclusive crucial needs, and also reduce lives lost by lower profile South Asian natural disasters.</td>
</tr>
<tr>
<td></td>
<td>Knowledge management and systematic learning and sharing of age and gender Inclusive CBDRR has been improved for ensuring better quality of CBDRR programming within HelpAge and its network.</td>
</tr>
<tr>
<td>Locations</td>
<td>3 Union Parishad of Ramgati Upazila, Lakshmipur</td>
</tr>
<tr>
<td>Target group</td>
<td>Families headed by older people</td>
</tr>
<tr>
<td>Total CDMC</td>
<td>30</td>
</tr>
<tr>
<td>Number of staff</td>
<td>4</td>
</tr>
<tr>
<td>Duration of the project</td>
<td>July 1, 2017 to March 30, 2020</td>
</tr>
</tbody>
</table>

Study Objective:
To assess the effectiveness of project interventions, community participation and explore exit strategies for better sustaining of the interventions.
Summary:
Total 6 CDMC were visited and discuss with CDMC members. Key findings of the study

- It was revealed that most of the CDMCs are working, but no one takes registration from any government authority.
- Older people of the community now more cooperative, friendly and supportive.
- Most of the CDMCs are increased by their seed capital and that’s the way to sustain beyond project period.
- CDMC does not have any business plan but members have a dream.
- Humanitarian supports like umbrella, stick, wheel chair are very helpful and purposive.
- Small scale mitigations are very useful, government, local government and community people have ownership on those projects.
- Most of the care giver training receivers are working at family level, in some extend at community level, nearby households.
- Networking with the government like Upazila Administration, Department of Youth Development, and Department of Social welfare Services, Upazila Disaster Management Committee is very good. They all well informed, acknowledge and appreciate BITAs activity.
- Joint demonstration program with Fire Service civil Defense is very appreciated by all concern, UPs and community people.

Considering the above findings, following issues may address for way forward:

- Permanent source of income for the CDMCs may introduce, such as grocery shop or any business.
- The project assists to the CDMCs to register and also to formulate sustainability plan.
- Some furniture and other fixed assists like Almirah, chair, table, ceiling fan may provide to CDMCs.
- A care giver data base could be prepare and handed over Upazila and District administration as resource pool
- To maintain regular interaction with CDMC, some regular/ scheduled activity may introduced, such as weekly meeting on different issues, weekly health checkup etc.
- Regular medical support may introduce for the community people focusing on older people. In such case, referral mechanism may introduce.
- An orientation session may arrange by the care giver as peer educator to educate in their community.
- Sanitation facility must be increased under small scale project.
- CDMCs operation manual may develop and provide training on the manual.
After completion of each small scale project a project profile may drop at respective department as well as upazila administration and district administration.

**ABSTRACT**

In Bangladesh due to improved quality of life the number of people over 60 years is increasing rapidly. This should be seen as an emerging challenge as the elderly will have special needs and require different care-giving services. Since Bangladesh does not have a sufficient social welfare system there has been competition for inadequate resources especially logistic, and care giving services. It is envisaged that due to more elderly population the demographic structure will undergo as low change from the present pyramid structure. The growing trend towards nuclear family or where children live abroad will put the elderly parents in a dilemma-the financial and social support that is essential for them has not yet emerged. The nutrition and health status of elderly people depend on adequate food safe water, proper sanitation facilities and maintaining hygienic standard/reds. To provide special medical care for the older people there is a need to establish WHO recommended Age-Friendly Primary Health Care centers and separate wards /units are to be setup in the hospitals. To reduce vulnerability of older women there is a need to distribute assets and properties according to the law. Our new generation has to be responsive, informed and attentive about their duties and responsibilities towards the elderly people. Taking proper care of the elderly is our ethical duty and responsibility.

Data were collected on primary and secondary sources. The Primary data was collected from the field level through intrinsic study and secondary data were collected from various sources vz. Bangladesh Water Development Board, Statistical Bureau, Agricultural office, published journals etc. The KII and FGD guidelines were conducted on the older people in order to reveal their perception regarding effectiveness of CDMC management and sustainability strategies. The study revealed that natural disaster has long-term negative implications on socio-economic status and also break through the normal family norms. Due to change of socio-economic status, priority has also been changed. As a result, family member consider older as burden. They never pay any attention to the advice, orders or opinions of older person in family matters. For describing life pattern of elderly people showed that neither the older persons themselves nor their families were ready to accept the old age status. The older persons consider their old age curse specially the female. Sometimes they suffer from different kinds of neglect and abuse. Most of the older persons suffer from backache, generalized body ache, progressive memory loss, hearing loss and feeling week during work. They can’t take healthy diet and suffer malnutrition and under nutrition. They are far away from all modern medical facilities and not aware of the ageing process or effect of ageing. Regarding prevailing rights and security of unclassified older women living non-comfortable or
very non-comfortable house creating barriers against rights and security. Food management, clothing management, medical facilities and Socioeconomic Security were in average found better in the urban than in the rural areas on establishing of rights and security of older in Bangladesh.

**Elderly people: context Bangladesh and response:**

**GO and NGO initiatives:** Aged people are increasing in alarming rate day by day. If we don’t take initiatives, it would be more complicated and fatalistic. According to UN, the world is experiencing an age quake. Every month, one million people turn 60. By 2030, several industrial countries will have one third of their population over 60 (UN, 1999). In Bangladesh, Eighty thousand new elderly people added to the over 60 age group each year. Today, People over 60 years make up 6% of the total population of Bangladesh. While this percentage is small relative to developed countries due to the large size of the population, it represents approximately 7.3 million people (Samad and Abedin, 1998). Furthermore, projection indicates that the number of elder people in Bangladesh by 2025 will reach in 8.5 million and 10.1% of the total population.

Perceiving this dreadful situation of aging in Bangladesh, a number of Government and Non-Government organizations have taken some programs associated by different international organization. After the independence, Bangladesh Government initiated some programs like pension, gratuity, welfare fund, group insurance and provident fund for retired Government officials and employees. Since 83% of the population in Bangladesh lives in rural areas only a negligible fraction of the total elderly are covered by formal pensions.

**State response:** In Bangladesh, a person aged 60 years and above is considered the elderly. In fact, many people in this country become older well before 60, because of poverty, hardworking and inability and illness due to malnutrition as well as for geographical condition and for rapid urbanization and industrial growth. The process of ageing in Bangladesh is taking place at a time when the pattern of life is changing, kinship bonds are weakening and family composition is undergoing a rapid transformation. With rapid increase in the number of elderly population and under the condition of socio-economic transformation, the elderly population is experiencing a difficult time. Apart from various inevitable medical problems related with old age, there are associated psycho-social problems too. Physical weakness, social isolation, lack of care from children, and dependence on hired domestic help has made them more vulnerable to violent crimes for their material possessions. They are feeling unwanted to the family, society and state as well.

Government of Bangladesh has taken few initiates to address vulnerability of elderly people including the following but not limited to:

**Old Age Allowance Program:** Old Age Allowance is one of the most innovative policies for wellbeing of the elderly in Bangladesh which was taken in the Fifth Five Year Plan. The goal of this policy is to alleviate poverty and to improve health,
nutrition and family welfare status of the elderly people. Elderly poor man and women sanctioned a monthly allowance of taka 800 each. On an average 300 older people get this allowance in a Union. The coverage and amount of money were increased in the different fiscal policies. At present 3.725 million poor elderly people consume this benefit.

**Social Safety Net Program:** The Government of Bangladesh has introduced some social safety net programs. The elderly people are not direct beneficiary of this program. More or less the elderly are benefited from these programs such as Vulnerable Group Feeding (VGF), Gratuitous Relief Fund, and Emergency Fund for Risk Mitigation during Natural Disaster, Vulnerable Group Development (VGD), Fund for Housing of Disaster and Widow and Distressed Women Allowance. Besides, Government has introduced Freedom Fighter Honorarium for every Freedom Fighter which is directly related to the wellbeing of the elderly person.

**Elderly in traditional situation:** Traditionally, the son is to take responsibility to provide food and shelter to their parents as well as take care of the other elderly members of their family. Due to their economic condition they are not able to meet the basic needs. Sometimes older people get involved in begging to meet their needs as well family needs

In Bangladesh customarily gender roles are clearly defined and accepted. It is usually the men who are the main source of income while women maintain the household. In this male dominated society it is often the older men are still involved in economic activities. Apart from this economic situation, older people hold some social position in the society. Still in Bangladesh older persons are respected and valued in the society. They have a special position in the family, often asked for advice especially during major events, like marriage, name giving ceremonies etc. In many joint families and households, they not only continue receiving care and support from the family members but also provide care to the family members such as financial help and love and care to grandchildren. No in this day in rural and urban area especially urban area both male and female are employed. In those families where parents are employed, grandparents are taking care of the family. In Bangladesh older people are treated as an important advisor in the family as well as community. The older people resolve the family as well as community level problems. But this situation is changing for family setup and social change.

Elderly suffer from multiple health problems. Such as, weakness, tooth problem, hearing problem, vision problem, body ache, back pain, rheumatic pain and stiffness in joint, dementia, prolonged cough, breathing difficulty, asthma, palpitation, high blood pressure and malnutrition incompetence, which may demand long term psychosocial treatment, nursing-care and hospitalization.

Besides the individual problem, older people also facing some environmental and economic problem, According to study older people are mostly affected by agriculture followed by health, diseases as Diarrhea occurred at alarming levels, crop
damage and house damage and roads communications were also highly affected by flood and other natural disaster. The study obtained the difference-in-difference estimates the magnitude of impact of natural disaster on older people and effecteness of CDMC.

**VULNERABILITY DIAGRAM**

**Main Problem**

**Vulnerable elderly people**

**Intermediate Cause**

**Economic**
- Retirement
- No income source
- No fixed income

**Physical**
- Age
- Decrease body resistance
- Chronic disease

**Emotional**
- No attachment with family members
- Loneliness

**Family burden**
- Unemployment
- Unfit for work
- No income source

**Immediate Cause**

- Physically unfit for work
- Less education
- Don’t get support from descendants
- No son
- Have to pay loan

- Treatment cost is high
- Economic insolvency
- Lack of income source
- Lack of proper care

- Death of spouse
- Family isolation

**Underlying Cause**

- Absence of strong social safety net
- Less employment opportunity

- Absence of adequate health facilities for elderly
- No proper regulation for elderly people.

- Absence of elder friendly environments in the society

- Lack and less implementation of the laws.
Ramgati is a coastal upazila of Bangladesh. Most of the populations are involved with fishing and fish trading followed by soybean production. It has 8 union parishads namely –

Char Algi Union, Ramgati Upazila, Lakshmipur
Char gazi Union, Ramgati Upazila, Lakshmipur
Barakheri Union, Ramgati Upazila, Lakshmipur
Impact Study Report: Building preparedness of vulnerable communities through inclusive disaster risk reduction initiatives

- Char Poragacha Union
- Char Badam Union
- Char Abdullah Union
- Alxendar Union
- Char Algi Union
- Char Ramiz Union
- Borokheri Union
- Char Gazi Union

The Upazila is about 347 square kilometers and total population is about 261002 among them 124449 men and 132553 are women. Education rate is poor and about 29.5%. Basically the Ramgati upazila is a char land of Meghna and Bhuludia River. Most of the populations are below poverty line.

**METHODOLOGY**

The assessment was participatory in nature. Older persons of CDMC were consulted to better understand the effectiveness of the project interventions. Factors affecting livelihoods, coping strategies and suitability mechanism undertaken by older people.

In this regard, FGD has been conducted among the CDMC members and KII with government officials and duty bearers, representative union parishad, upazila government officials, FGD with Fire Service Civil Defense has been conducted. Specific vulnerabilities of households to economic, social and other shocks were explored in as much detail as possible within the short research time frame. Emergency preparedness was considered through the lens of economic shock preparation.

The qualitative data were collected by using a focus group discussion (FGD) and key informant interview from the following two groups and individuals of respondents.

<table>
<thead>
<tr>
<th>Location/ person</th>
<th>FGD</th>
<th>KII</th>
</tr>
</thead>
<tbody>
<tr>
<td>Char Sekendar CDMC</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Paschim Raghunathpur CDMC</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Azad Market CDMC</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Mir bazzar CDMC</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Purba Char Neyamat CDMC</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Fire Service Civil Defense, Ramgati</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Discussion with UP Chairman: Char Algi</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>Discussion with Upazila Youth Development Officer</td>
<td>-</td>
<td>1</td>
</tr>
</tbody>
</table>
Field visit methodology included use of focus group discussions (FGDs) with older persons. FGDs followed a consistent format and took between one and two hours. All participants were asked demographic questions on: sex, age, marital status, household composition, livelihood, and land/animal ownership. Where applicable, FGD participants were questioned on their understanding of the role, added value and sustainability of the older person specific livelihoods initiatives being carried out by partner agencies. FGDs concluded with an opportunity for participants to ask the interviewers and representative NGO staff questions.

*it is very unfortunate that the level of education in the area is not satisfactory as the education rate is very low here. Most of the parents do not send their children to the school due to poverty. Their only choice is to send children to work in order to make living.*

- Charman, Char Algi Union Parishad

**FINDINGS**

**CDMC: platforms for dialogue of older people.**

Among 30 CDMC, under the study 6 CDMC were consulted and the status of those CDMC as follows:

<table>
<thead>
<tr>
<th>Name of CDMC</th>
<th>Year of Established</th>
<th>Number EC member</th>
<th>Loanee member</th>
<th>Project support</th>
<th>Current outstanding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paschim Ragunathpur CDMC</td>
<td>1 October 2016</td>
<td>13</td>
<td>19</td>
<td>40,000</td>
<td>2,48,830</td>
</tr>
<tr>
<td>Azad Market CDMC</td>
<td>March 2018</td>
<td>13</td>
<td>25</td>
<td>30,000</td>
<td>150,000</td>
</tr>
<tr>
<td>Mir Bazar CDMC</td>
<td>February 2018</td>
<td>13</td>
<td>10</td>
<td>30,000</td>
<td>80,000</td>
</tr>
<tr>
<td>Purba Char Neamot CDMC</td>
<td>October 2016</td>
<td>11</td>
<td>12</td>
<td>40,000</td>
<td>1,04000</td>
</tr>
<tr>
<td>Char Sekandor CDMC</td>
<td>1 October 2016</td>
<td>11</td>
<td>10</td>
<td>40,000</td>
<td>85,000</td>
</tr>
</tbody>
</table>

The research explored the older persons’ knowledge of and access to different services specific vulnerabilities of households to economic, social and other shocks
were explored in as much detail as possible within the short study time frame. Emergency preparedness was considered through the lens of economic shock preparation. FGD and KII were held in each study location with hosting by BITA. A desk review of relevant documents was undertaken before field visit and relevant livelihoods publications examined to explore ways in which prevailing livelihoods and vulnerability frameworks include and consider older persons. EC member of CDMC is gender balanced and sensitive. Almost equal participant in each CDMC.

**Community involvement**
Most of the CDMC are directly involve with the community. It was revealed during data study that community people are closely linked with CDMC and CDMCs are place of platforms for dialogue. CDMCs are not limited to work as a CBO but beyond that. Such as its discussion platforms for social issues like marriage, divorce, any kind of violence etc.

**Leadership and management**
Most of the CDMC members are trained on disaster management, CDMC management. They are now capable enough to handle the CDMC smoothly, Monthly meeting has organized regularly. It was revealed during conduct the study that CDMC are managed by Chairman, Member Secretary and treasurer. Other members are not fully aware about activities, loan disbarment etc. Mostly the chairman, member secretary have the leadership quality. They have a voice over relevant community and also acceptance in the community.

**Necessity and accessibility of CDMC**
Common platforms for the elderly people are essential for their recreation, mental support, accompany, sharing- caring. Besides, they are getting many kind of support from the CDMC. CDMC has multi dimensional role on the community. They have role to select VGD and VGF beneficiaries, its common bargaining authority to bargain with Union Parishad as well as other duty bearers. CDMC also conducting some voluntary work such as distribution of blanket among poor older people, distribution of festival commodities, provide treatment support to ultra-poor older people etc. It was observed that, people of adjacent community have dependency on CDMCs.

**Suitability of the CDMC**
It was revealed that most of CDMCs are interested to register as CBO from Department of Social Welfare or from Somobay Adhidaptor. Most of CDMC members are asking assistance from BITA to get the registration. They have very good understanding that, without registration it will be difficult to sustain the CDMC.

**Resource mobilization**
On an average BDT 30000 to 40000 received from project as seed capital. They all have revolved the capital among its members and it was revealed during study that, most of them increased the capital 4 to 5 times. The seed capital use as loan to business development, poultry and livestock development, goat rearing, soya bean production, boat making, fisheries etc. and also some social issues like house construction, marriage etc. Some community people expecting education and migration loan from CDMC.

Humanitarian support

Most of the CDMC member received many materialistic supports from the project. These includes but not limited to-

- Stick for the weak older people
- Umbrella.
- Blanket
- Wheel chair
- Flux and mug etc.

Success story: Dreams of older Abdul Awal came true

Name: Md Abdul Awal, Age – 80 years
Father: Late Abdul Jalil
Mother: Late Jobeda Khatun
Address: Vill – Uttar Paschim Borokheri, Ward no _ 6, Post office : Borokheri, Union: Borokheri, Upazila : Ramgati
Md Abdul Awal is the lone son of late Abdul Jalil at 6 no ward and Uttar Paschim Barokheri village in Barokheri union under Ramgoti upazila. In childhood he spent days with much care and affection from parents. His father somehow maintained family expenses by daily labor. Wants and wounds were their companions. Father couldn’t fulfill the needs of dear son. Even he was unable to educate the son. Awal grew younger through hard days. He used to go work with father in need of food. Abdul Awal got married in these days and started new life. He has been continued life struggle and fortune remained unchanged. He has got 6 children. Like father he couldn’t manage education for children. So they remained as illiterate. After marriage, the sons settled separately pushing Awal more vulnerable. Both Awal and his wife became burden to all. None took responsibility to bear their maintenance. Sometimes they ask for food to children, and also to relatives. In consequence older Awal passes days with wife with pangs and miseries. He search for ways to get rid of difficulties but finds no way. In the depth of mind, he cherishes the desire to get capital from someone that will enable him to set up a shop in front of homestead.

In passage of time, Abdul Awal selected as one of the beneficiaries of Uttar-Paschim CDMC under IDR project. The veteran man remained present in CDMC’s monthly meetings often and expressed his tale of sorrows and hope to the members. At one stage the CDMC received BDT 40000 rotational seed money in order to support livelihoods of extreme poor older people and decided to disburse loan using seed money to support income generating activities of 8 older people with soft terms for 1 year duration. Naturally Abdul Awal selected as a beneficiary and accordingly he received 5000 taka in compliance with terms of CDMC. This small capital is like exploration of fulfilling long-cherished dream. He built a small shop in front of home with furnishing things like chips, biscuits, chocolates for children and tea-snacks for adults. Tenderly children move to grandfather Awal shop and adults to get tea with
chat. Awal’s mind filled with joys. Every day he sells goods of around 400 – 500 taka. Bright smile flourishes in his face. Now he isn’t help-seeker and burden on children and their spouses or neighbors. Furthermore, he fulfills wants of grandchildren. He is respected to children and daughter-in-laws. Abdul Awal happily said, “In the will of Allah, now I am very fine. Sons and daughter-in-laws treat me closely and warmly.”

Utilization of caregiver training
Community volunteers are this project’s front line representatives. With the main objective of developing their skills and knowledge on DRR, and ageing and disaster management, the project facilitate training of trainer (TOT) sessions among new communities. About 300 female got caregiver training. Most of them are working at family level for the senior member of their family member. Among the caregiver very few are taking care of neighbors.
It was revealed during studies that, care giver are working as catalyst and peer educator. They have given training, techniques and some technical aspects of care giving of elderly people. It was discussed during discussion with care giver, that it’s an opportunity to work as commercial care giver but approach is not practicing yet.

Intergenerational bondage:
Since the family members received Caregivers Training, they are now able to realize the emotional outbreak of older people due to family negligence. It also created a positive impact in dealing with older people in family as well as community. Young generation was observed more sensible about older people’s health and social inclusion issues than ever.
Now strong bondage has established with the elder person and the family members. Due to increase of social value of elder person, they are now mostly respected. Now Elderly people more actively participate and guide the other family members for their wellbeing. They are also involved with income generation activities as well. Moreover, involvement with CDMC is found one of the major reasons behind to increase intergeneration bondage. The young people’s positive attitude towards older people could be seen an important outcome of the project.

Small scale projects
The project will undertake various small scale mitigation activities which are older people inclusive. Small scale project are replicable and used as a model for various stakeholders to scale up. These include repairing low lying and flood prone roads, repairing and constructing CDMC premises, repairing/constructing houses, constructing latrines and tube-wells to reduce communicable diseases during disasters, and providing assistive devices. Small scale projects are mostly repair and newly construction of tube well. Small scale projects are very useful for community as well as for older people. CDMC are responsible to management and maintenance of the small scale projects. Government officials appreciated about the small scale project but they also claimed that government should inform in a proper way.

After completion of each small scale project, BITA along with Government counterpart especially the Union Parisad is taking care the maintenance of the small projects. In some extant, Upazila relevant government department participated and contribute to further development of the projects, such as extension of the road constructed under small scale project etc. As a ready reference, in Chargazi Union, a road have been construed by the Mir Bazar CDMC, its about 700 feet long road, is now going to connect with Subarno Char of Noakhali district by the Upazila Administration.

**CDMC initiatives**

CDMC are taking beyond the project initiatives for the community, older poor people and so on. In mostly CDMC provide support to the Union Parishad to select VGD and VGF beneficiaries, distribution of commodities, arrange social mediation, directed communities during disaster and post disaster, assist and arrange health support to the poor agedly people, distribution of blanket, vermicelli, sugar, milk before Muslim festival to the poor families etc.
**Effectiveness of mock drill & cultural approach**

Most of respondents claimed that, mock drill, cultural program and also demonstration wit Fire Service Civil Defense was very effective. Government officials including Upazila Youth Development Officer, Upazila Rural Development Officer and others are well informed about Mock drill and cultural events of BITA. They appreciated and acknowledge the way BITA disseminating message on disaster preparedness. Total 5 mock drill events have been arranged (2 in Char Gazi, 2 in Barakheri and 1 in Char Algi). Average audience was about 700-800 person. To organize those events Upazila DMC, Union DMCs, Union Parishad, School Management Committee have active participant and assist to arrange the events. Mock drill approach is a very useful and meaningful for intergeneration gap management. The events reduce the generation gap, as people of all ages are worked jointly to arrange the event and jointly work practice is break-through of intergeneration gap.

**Socioeconomic Status**

Natural disasters like cyclones, storms, and flooding frequency have increased in the area a lot more than previous times. The respondents of the study pointed out that two consecutive cyclones, “Sidr” and “Aila,” brought noteworthy changes in their living pattern. People are struggling to go back to their previous quality of life prior to Sidr and Aila. After the cyclones in both the villages, dams were damaged and sea saline water came to the agricultural lands easily. Salinity in the water has increased which has affected the production of crops and agricultural lands are not suitable for growing crops anymore. Most of the residents (in both villages) earn their living by fishing and farming agricultural lands. Production of agricultural products in these lands reduced remarkably after the disaster hit the area and now these farmers are suffering financially. One of the respondents from stated that

*Before Aila hit the area, they used to produce a lot of different agricultural goods including fresh vegetables and fruits. By selling them in the mainstream market they could have earned the money that was sufficient for them to live a year on without any further production, but today this is not possible and also nature is not supporting them.*

The respondents experienced that salinity in the coastal area has become severe and saline water mixed with cultivated lands. As a result, cultivated lands are becoming abandoned. Due to high salinity, cattle were not getting enough food. This led to farmers finding it extremely hard to use them for cultivate the farming lands. Poor people who used to grow crops and graze their cattle on the open space of shoals said frequent disasters are taking their toll on the agriculture sector forcing them to change their cultivation pattern. Many sweet water fish died due to the influx of saline water while water hyacinth and crops were rotten.
Participants believed that the climate is changing and these changes are not bringing anything beneficial for them. They have been living in these areas for many years and in the last 10 years or more they have witnessed a significant difference in current climatic conditions. Since they are living close to the coast, the changes they have observed are a sea level rise, frequent occurrence of natural disasters like storms, cyclones and floods, soil erosion, influx of saline water in the agricultural land, excessive temperature rises during summer time, and irregular patterns of rainfall. All these changes are making a substantial impact on their living pattern and health.

Most of the households have poor housing conditions that are highly vulnerable to natural disasters. Prior to Sidr and Aila, the financial situation of the community in the affected villages was not also very good; however, after Sidr and Aila, it deteriorated even further. Their living conditions are now poor; however, many NGOs are working to bring back normalcy. There are not enough job opportunities in the local areas and those who were farmers and fishermen are also trying to switch their jobs in order to increase their finances. One of the respondents from the CDMC Chairman reported:

"Post Aila, every household is going through mental pressure and anxiety. They are devastated and discarded by losing their agricultural land, households, livestock’s, fishing ponds and so on. People of these areas are still working hard to get back to their normal lives. Some of the families started a new life by taking loans from local non-government organizations, but some failed to pay the repayments because frequent disasters made it difficult for them to grow crops. This put them under immense mental pressure."

Another important aspect of poor economic condition here is geographic location. In the Char areas of Coastal belt there is always limited scope of diversified work opportunities. It often seen that the young male members of families move to big cities in search of work. Later they don’t look back to their families. Eventually their families become more vulnerable and poverty becomes prevailing in the char areas. Many People who don’t leave home are also leading a very miserable life as their income from agriculture and fishing, their only means of livelihoods, is just insufficient. Sometimes it is seen that begging is the only option for the older people who gets isolated from their family. This resembles a larger picture of Bangladesh where climate change has threatened the lives and livelihoods of millions of people.

Here the project intervention has played a role in changing the scenario for many older people.

**Health Status**

The FGD explored information about recent environmental changes due to climate change and the disaster impact on the health of the coastal population. Specifically, the main aim was to get information from the participants about the impact on
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health (such as general health situation, mental health, and wounds). In order to understand the magnitude of the problem, information on the health condition of people in the community before the natural disaster was also gathered. Changes observed and experienced by people in relation to climate change were also expressed by respondents. The prevalence of diarrhea, skin diseases, typhoid fever, and jaundice rapidly increased. Local health services lack the manpower and resources to deal with the variety of health problems. During emergency situations, this is even more evident. Many of the poorer people have travelled to the nearest town to get better treatment. To tackle the health problems, some initiatives taken by government, by introducing new deep tube well for safe drinking water, constructed hygienic toilets, and distributed water-purifying tablets; bleaching powder and awareness building programmes were undertaken by different agencies. They also distributed general medicines to the people in the community.

Case Study: Sorboternesa’s struggle to feed her family

Sorboternesa, 82 year old childless women of Char Neamot village, Char Algi, Ramgoti, Laksmipur lives a simple life with her spouse, Mr.Habez Ahmed. She was married at the age of 14. Both the families were from poverty ridden families. They began a life of struggle. Few months later, her father died and she & her husband moved back home to care for her younger brothers & sisters. Her husband earned a meager amount, as a day labour, for the family of six. Being a childless woman, Sorboternesa was happy with her sibling.

Her sisters and brothers have separate families and do not support them in any way. As Day passed by, her husband aged and his physical condition worsened and he was incapacitated to work. Few years back, she started knitting handicrafts (HoglaPati,)
the Vendor provided raw materials, collected and sold the product. She received 50% (not more 80 BDT per day) profit amount. Due to her age, she was could not avail (formal & informal) loan, for purchase of raw materials. She shared about her dire situation to the Char Neamot community disaster management committee, formed under IDR project implemented by BITA and supported by HAIBD.

In September 2016, the CDMC received BDT 40,000 to provide as seed grant among the older people to restore their livelihood. Sorboternesa was provided BDT 8000, for purchase of raw materials and domestic animal. Now, she is knitting the patis regularly, her monthly income increased and her spouse need not work as a day labour and they lead a happy & dignified life.

"Now, I have a regular income; I also have a savings that will help me to return to the community for other older people and in case of any disaster, pay for my expenses. Within this period, I invested in some poultry. These poultry & livestock is now a fixed asset that will help me in case of any emergency, even in my funeral"

She also said, "I am happy with my life, thanks to HAIBD for their motivation and support our community, for helping older people. This is the very first time that, any organization, specifically helped older people".

Vulnerability Status

When the discussion moved on to the vulnerable population in relation to the natural disaster, the respondents described the elderly, infants, and women as the most affected by the disasters. They endured a difficult time at the shelter centre during disaster. Children experienced malnutrition due to a lack of food, which subsequently affected their physical and mental growth. School children could not complete their education on time. Many children also suffered from diarrhea, dysentery, and skin diseases. Elderly people were found with cuts and bruises on hands and legs, broken hands and legs, bruises on their head, and injuries to different parts of the body.

Many elderly people also died due to lack of protection capacity and unable to move. In some cases, elderly people were found under traps while trying to save the lives of others. Both usually were found dead at the same place. Those that survived the adverse conditions now find that their health is deteriorating each day; however, no
exact figure of the number of children and elderly people affected was given. Some households did not take any shelter because they were physically unable to reach the shelter because of the adverse condition or because offar off location. Some of them did not understand the significance of the warning or could not hear the warning. They decided to stay at home because they were fearful that the house would be looted. Many people thought that the shelter centres would be unsafe and unpleasant.

**CHANGES MADE**

The IDR project is focused on older people and their families with over all socio cultural and economic condition. Some remarkable changing has been made throughout the journey. Some changes are furnished below:

- Increased social respect of the elderly person
- Developed mutual understanding and bonding among youth and elderly person
- Identified require assistance of elderly people
- Identified community resources
- Increase value of elderly people at family and society level
- Create involvement and movement opportunity at different level for the elderly people.
- Elderly people are now taking part in the making decision at family and community level.
- Some elderly people involve with income related activity like grocery shop, tea stall, trading etc.
- Elderly people are now getting support by the care giver
- Older people can move due to caring support (stick, umbrella, medical support), which is very essential for community level engagement.
- Most of the CDMC EC committee consist elderly people and they have collective voice
- Due to movement, involvement with CDMC, community engagement etc., elderly people have motivational and bargain capacity now.
- Elderly people become financially sound.
- Physically comfortable due to proper care by care giver and medical support
- Easier to get elderly allowance

SUGGESTIONS AND WAY FORWARD

General suggestions

Elder people should have a right to social security

Economic empowerment is a basic to the enjoyment of all rights. Elder people often do not have financial protection such as pensions and other forms of social security. In fact the most important challenge to the welfare of elder persons is poverty, and often poverty and ageing go together. Therefore, a non-contributory, state-funded
pension for all elder people irrespective of economic status is very important to come out of this problem.

_Elder people shall have a right to have adequate health care_

Elder persons have the right of highest standard of physical and mental health care, including preventive, protective, and curative and rehabilitative and palliative care. Provision of health care for older persons at various sites such as hospitals, nursing homes, old age homes and other places of shelter should be within the umbrella of legislative protection of human right.

_Elder people shall have a right to employment_

Elder persons are being deemed unemployable ‘because of their age and forced to stop working because of mandatory retirement ages. Elderly people like others shall have the right to free choice of employment. The right to work is important because it not only provides financial security but also enhances the physical, mental and social capacity and capabilities of human being. In some countries, including Bangladesh, the retirement age in the public sector is 59 years, which is not appropriate considering the longevity of the people in general. Retirement age should not be less than 65 years to create opportunities for older people, so that they can utilize their productive years for the benefit of the society and can establish their positive image in the country.

_Elder people have a right to property and inheritance rights_

Elder people, in many parts of the world suffer in matters related to inheritance laws, both statutory and customary. Unfortunately, women of all ages are denied the right to have an equal share of the family property and also to inherit the property of their father or of their deceased husbands.

_Increase the participation of qualified caregiver_

The rapidly changing family structure has popularized the nuclear family system which increased the need for paid caregivers including in-home, community—based and residential settings. So, it is necessary to establish institutions for professionally trained caregivers and qualified trainers to ensure better care for the weak old person.

_Role of civil society/ NGOs/CBOs should be stronger_
Civil society/ NGOs/ CBOs has a long standing history arguing in favor of the rights of elder people. They are closely and fully involved in dialogue and programmes endeavors to protect the rights of elderly. Governments, NGOs and civil society can contribute positively to improve the life of older people using international human rights standards.

**Establishment of Infrastructures**

To provide services, necessary to protect the rights of older people, appropriate structures need to be established and supported by States. States should make provision, including statutory mechanisms, to monitor and evaluate different programmes and to mobilize funds to meet the basic need programmes in ageing.

**Data base center on ageing needs to be established**

A data base center on Ageing needs to be established as a multidisciplinary agency providing multi-level services. Since, scientific data on ageing, especially sex-disaggregated data, is not available to plan and implement appropriate programmes for elder people, center on ageing are an essential element and partial solution.

**UN should be more responsive**

The United Nations DESA and the Office of the High Commissioner on Human Rights (OHCHR) have a responsibility to informing the debate from a substantive human rights perspective by addressing urgent and relevant gaps for protection and fulfillment of human rights of elder persons.

**Linkages with Regional Human Rights Institutions should be established**

Regional Human Rights Institutions shall have a special unit to monitor the progress in the implementation of the convention on the rights of elder people in their region and will also develop a specific mechanism that will measure the degree to which the rights of elder people are protected.

**Role of media should be active and effective**

Apart from the legislative measures government and NGOs should encourage the media to avoid negative publicity of older women as dependent, fragile and useless and focus on the positive contributions made by older women towards family and
society? NGOs should initiate research and prevention programmes, advocacy and information for older women about their rights and ways to access services.

**Tailor-made recommendations**

- Some furniture and other fixed assists like Almirah, chair, table, ceiling fan may provide to CDMCs.
- Linkages with MFIs could be a sustainable strategy for the CDMCs. CDMC may take low cost loan from Microfinance Institute (MFIs) for further loan utilization. Or CDMC make a linkage with potential lone receiver and with MFIs.
- Permanent source of income for the CDMCs may introduce, such as grocery shop or any other business.
- Assist CBOs to formulate sustainability plan
- Most of CDMCs has plan to register as CBO, project may provide necessary support and guideline them to form as a registered CBO
- A care giver data base could be prepare and handed over to UDMC, Fire Service Civil Defense, Upazila and District Administration as resource pool.
- A refreshers training could be arranged for care giver. So that they will be energize and regain their knowledge.
- Some regular and schedule intervention may introduced with project team and CDMC, such as weekly meeting on different issues
- Regular medical support may introduce for the community people focusing on orderly people. In such case, referral mechanism may introduce.
- An orientation session may arrange by the care giver as peer educator to educate in their community.
- Sanitation facility must be increased under small scale project.
- CDMCs operation manual may develop and provide training on the manual.
- After completion of each small scale project a project profile may drop at respective department as well as upazila administration and district administration.
- Capacity development on alternative IGA, such as nakshi Tupi, nakshi katha, provide supply chain and value chain and marketing support.
- Mock drill at every ward-level may organize to aware the target group.

**Conclusion**

The project interventions have been turned a success considering the achievements earned in the project period. The older people’s leadership could visible in CDMCs and this CDMC may enhance their capacity to lead from informal institutions to formal institutions for their financial security. Furthermore, the intergenerational linkages that have been built through the project intervention will exist beyond the project. And the young population of the community more sensible and understands their role in protecting the older people from being more vulnerable.

As most of the Char and Coastal areas of Bangladesh having same geographic and socio economic condition, so the project’s learning could be used to other parts of the country. This model has a greater scope to replicate for the poor and excluded older people’s wellbeing.