Building Resilience among Senior Citizens in Mumbai

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Introduction

Sustainability is often defined as "meeting the needs of today without compromising the ability of future generations to meet their own needs" (The Brundtland Commission, 1987). Current discussions of sustainability also include items such as a clean environment; meaningful and rewarding work and full participation in a just and equitable society. Goodland (1995) argues that sustainability is based on the interactions of three key realms: economic, social, and environmental. Economic Sustainability occurs when development moves towards social and environmental sustainability and is financially feasible. Social Sustainability refers to practices that ensure the cohesion of society and its ability to work towards common goals. Environmental Sustainability ensures that the natural resource capital remains intact (Gilbert et all 1996).

Social sustainability occurs when the systems and relationships actively support the capacity of current and future generations to create healthy and livable communities. Socially sustainable communities are equitable, diverse, connected, and democratic and provide a good quality of life (Stephen 2004). Resilience is key to social sustainability. The backbone of a resilient community is resilient individuals with the knowledge and ability to prepare for, respond to, and recover from adversity, trauma, tragedy, threats, or significant sources of stress. Links between these individuals' social workers and organizations / social projects form the connective tissue of a resilient community. Strong organizational

relationships help to weave these connections together (Chandra, Acosta, et al., 2011).

According to Miller et all (2017), the six foundations of resilience building are as follows:

- People: The power to envision the future of the community and build its resilience resides with community members.
- Systems thinking: Systems thinking is essential for understanding the complex, interrelated crises now unfolding and what they mean for our similarly complex communities.
- Adaptability: A community that adapts to change is resilient. But because communities and the challenges we face are dynamic, adaptation is an ongoing process.
- Transformability: Some challenges are so big that it's not possible for the community to simply adapt; fundamental, transformative changes may be necessary.
- Sustainability: Community resilience is not sustainable if it serves only us, and only now; it needs to work for other communities, future generations, and the ecosystems on which we all depend.
- Courage: As individuals and as a community, we need the courage to confront challenging issues and take responsibility for our collective future.

The elderly population worldwide is rapidly increasing due to the aging of the population and a constant increase in life expectancy. Projections for the next 40 years foresee an increase in the older population which is greater than in any younger age group. Some of the prominent psychosocial theories of aging are—activity theory, disengagement theory, and continuity theory.

In recent times, the aging in place theory has come to the fore. According to the aging in place theory, older adults want to age in place, live with family and friends, and remain independent and autonomous; they also expect to have more opportunities to participate in the social community activities that can help them form strong senses of security and belongingness to community (Jessica et al 2021).

According to Acosta et al (2018), it's imperative to bring together those involved in aging-in-place support and those involved in disaster resilience efforts to improve the ability of older adults to withstand and rebound from the effects of natural and human-caused disasters (Al-Rousan, Rubenstein and Wallace, 2014). A 2017 qualitative study, using a literature review and 17 focus groups with at-risk individuals, found that older adults contribute their experience, resources, and relationship-building capacity to prepare themselves and support others during an emergency (Howard, Blakemore, and Bevis, 2017). Specifically, older adults both generate and mobilize social capital at a local level during a disaster. A 2014 survey of older adults found that two-thirds of the sample had no emergency plan, had never participated in any disaster preparedness educational program, and were not aware of the availability of relevant resources. More than one-third of the respondents did not have a basic supply of food, water, or medical supplies in case an emergency were to arise (Al-Rousan, Rubenstein, and Wallace, 2014).

The National Policy for the Elderly 1999 clearly articulates the different needs of the Elderly and proposes ways of addressing them. The policy focuses on three aspects, namely: Older persons and Development; Advancing Health and Well-Being into Old Age; and Ensuring Enabling and Supportive Environments, as recommended by the Madrid International Plan of Action on Ageing, 2002. The Ministry of Social Justice and Empowerment (nodal agency for the Elderly) have worked on guidelines for intervention based on the policy.

The Census of India 2001 enumerated 76.6 million persons aged 60 years and above, constituting approximately eight percent of the population of the country. As expected, the female population aged 60 and above outnumbered the males by one million. According to projections, the population of 60 and above in 2026 is estimated to reach 173 million, which would constitute more than 12 percent of the total population. The old dependency ratio, which is the number of people aged 60 and above per 100 persons in the working ages (15–59), will be 19 percent in 2026, resulting in an increase in median age from 22.5 years to 31.4 years between 2001 and 2026 (ORGI, 2006). In recent times, society is witnessing a gradual but definite decline in the joint family system, as a result of which a large number of parents are being neglected by their families exposing them to a lack of emotional, physical, and financial support. These older persons are facing

a lot of problems in the absence of adequate social security. Incidentally, the share of those over 60 in Maharashtra is high. In India, while those over the age of 60 constitute 8.6 percent of the population, in Maharashtra, it is 9.9 percent. Moreover, Maharashtra's age dependency ratio — a ratio of older dependents (people older than 64) to the working-age population (between 15 to 64)—is on the rise.

Mumbai has around 1.5 million senior citizens. This reveals that aging has become a major social challenge and there is a need to provide for the economic and health needs of the elderly and to create a social milieu, which is conducive and sensitive to the emotional needs of the elderly. COVID-19 has tragically demonstrated the serious threat that pandemics and other disasters pose to older adults' health, safety, and well-being. Older adults face a greater risk of dying in disasters than other age groups. Disasters also negatively impact older adults' health by exacerbating chronic health conditions, creating psychological strain, and disrupting access to care and social services (Pendergrast 2020).

Methodology

Social intervention is an action that involves the deliberate attempt to change society in some way. It is done through the selection of intervention methods informed by psycho-social theories and social work assessments. Ethics of social intervention mandate social workers to take professional decisions informed by evidence of both the potential benefits and harms of alternative interventions. Consequently, decisions on future service provisions are made.

The objective of this study was to document a successful aging-in-place, resilience-building social intervention. In this context, Pravaas (a field action project of Nirmala Niketan College of Social Work, Mumbai working with elderly) was selected as a single case for documentation. Single case design (SCD) is a method that can be used to document intervention or treatment on a particular case (elderly community) and to also provide evidence about the general effectiveness of an intervention using a relatively small sample size. The respondents of the study were the social workers who facilitated the senior

citizens' neighborhood groups [SCNGs]. They had rich experience in managing the process of resilience building. Hence their interviews were taken to evolve with the findings.

Findings

Nirmala Niketan College of Social Work has initiated more than 40 field action projects in the past 65 years. Our innovative field action projects include Prerana, Vatsalya, Vasundhara, Sakhya, Setu, Pratham, Nirman, Salokha, Ankur and Anubhav Mumbai, etc. Some of these projects have moved on to become independent NGOs and continue to contribute to the development of these groups today.

Pravaas is one of the field action projects of the College. It provides social intervention with Senior Citizens. Pravaas is committed to evolve and utilize integrated social intervention through systematically working with the client system, i.e older adults, and addressing target/ change agent systems namely families, communities, and policy environments to tackle aging-related social exclusion. At present, the Pravaas team works in three slums, namely Bhagat Singh Nagar, Chatrapati Vasahat, and Indira Nagar in Goregaon West (Mumbai).

The aging-in-place, resilience building program was carried out as a pilot project during 2021-2022. The intervention designed by Pravaas was adapted based on the International Federation of Red Cross and Red Crescent Societies (2016) process to develop community resilience.

- Stage 1: Engaging and connecting with senior citizens: In this phase, the social workers visited the Bhagat Singh Nagar Chatrapati Vasahat, and Indira Nagar in Goregaon West and discussed about the possibility to undertake an aging-in-place social intervention with respect to disaster situations.
- Stage 2: Understanding risk: In the next phase, the risks of the elderly during the disasters were systematically identified. Many elderly felt that they may experience food deprivation, abuse, and mobility challenges.

- Stage 3: Forming action system for resilience: The action system was forming senior citizens' neighborhood groups [SCNGs]. Each SCNG can have up to 15 members. Each SCNG is facilitated by a Para Social Worker. A group of 5 or more SCNGs forms clusters.
- Stage 4: Facilitation of the action system for resilience: Social workers of the Pravaas Project not only formed SCNGs, but they also facilitated sessions as per the activities planned; conducted literacy and health sessions; provide c to seniors and families encompassing loss and bereavement, carried out a risk assessment with clients facing domestic violence, financial/ emotional abuse, neglect and self-neglect through home visits; provided clients and families information on a range of topics including entitlements; and most importantly listened to clients and motivated them to be actively engaged in social life. Through all these efforts, Pravaas project staff were able to build resilience among senior citizens.

Conclusion

Pravaas could only work with a limited number of senior citizen groups. However, to prioritize effective and feasible activities to build older adults' disaster resilience, the government should support and incentivize senior citizens' organisations to conduct disaster preparedness activities. Older adults can also contribute important assets to disaster response through their experience, resources, and relationship-building skills.

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