Vulnerability and coping strategies of older women in disaster: Study on A Coastal Upazila of Bangladesh

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Exam Roll-3458 (553)
Session: 2013-14

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University of Dhaka

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Finally, I acknowledge the writer whose publications help me to complete my research work though I could not get their prior permission.

Sincerely Yours,

Zinnat Jahan Panni
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Abstract

Introduction: Natural disaster is a common phenomenon in Bangladesh. Almost every year Bangladesh suffers highly by different kinds of disasters like flood, tropical cyclones, tornados, tidal surges, droughts and large scale river erosion etc. Bangladesh is a low lying delta with very gentle slopes. These special geographical features have significant impact on the weather system of Bangladesh.

Objectives: The present study focuses on the vulnerability and coping strategies of older women. To achieve general purpose this study also seeks to know their personal, family information, their disaster experiences, vulnerability and their coping strategies after disaster.

Methodology: The present study is qualitative in nature. Case study has been taken as research method using FGDs as research technique. Taltoli upazilla which is a part of Barguna district area have been selected which are badly affected by cyclone SIDR, AILA, riverbank erosion and other natural calamities in recent year.

Major Findings: This study includes ten case study and two focused group discussions .the sample of the study consists of almost 60 or above 60 years older women live in a coastal upazilla named Taltoli. The study shows that most of the participants belong to Muslim community and 2 others belong to Hindu and Rakhain community. Participants are the symbol of older people in our society who has horrible experiences with many disasters.

Two FGDs were conducted. One FGD consists of 11 members and others are 15 members. Most of the women are under Primary school certificate (PSC) and one participant is HSC passed. Most of them had no formal education. So, high literacy rate of the participants was not found in the study both in case study and FGDs. Most of the women had lugubrious experiences with many disasters. Mainly they were affected by cyclone occurred in 1991, Sidr in 2007, Aila in 2009 and Mahasen in 2013. Most of the women lost their property. Most of them lost their main source of income. Sidr was the most catastrophic disaster they had ever seen. Most of the women lost their husbands, children, grandchildren and patents. They also mentioned that they did not go to the cyclone shelter due to insufficient number of shelter and vehicles. After disaster, though they got some relief but it was not sufficient for their family. There is badly scarcity of food and cloths. They also suffer from many diseases after disasters. The collected data indicate that after disaster they face different kinds of economic and physical problem.

Conclusion: The respondents recommended that free medical treatment, reduce price of daily foods, rehabilitation program for older women, positive outlook towards the older women and empathetic behavior of the family members with the elderly are important. They also want that Government and NGOs should come forward for the wellbeing of older women in all respect. This
data indicate that the older women need more care and all the people should come forward to help them.
Acronyms

BAAIGM- Bangladesh Association for the Aged and Geriatric Medicine
BBS- Bangladesh Bureau of Statistic
CBA - Community-Based Approach
CDMP- Comprehensive Disaster Management Program
IDDR- International Day for Disaster Reduction
IPCC- Intergovernmental Panel on Climate Change
LGD- local government body
SOD - Standing Orders on Disaster
WB- World Bank
WHO- World Health Organization
Synonyms

AILA - 23 MAY, 2009

KAVIRAJ - Traditional Healer

MAHASEN - 2013

SIDR - 15 September 2007
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Chapter One

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1. Introduction

This year the focus of the International Day for Disaster Reduction (13 October) is on older people, including their needs and what they contribute to better planning and understanding of disaster risk in their communities. On 13 October 2014, the International Day for Disaster Reduction was celebrated which this year is titled “Resilience is for life” and will focus on the contributions of older persons to disaster risk reduction and resilience. As part of the activities leading to the International Day for Disaster Reduction celebrations in October, UNISDR and its partner Help Age International are inviting older persons and their caregivers to complete survey. Natural disaster is a common phenomenon in Bangladesh. Almost every year Bangladesh suffers highly by different kinds of disasters like flood, tropical cyclones, tornados, tidal surges, droughts and large scale river erosion etc. Bangladesh is a low lying delta with very gentle slopes. It is located at the lowest end of the Ganges, Brahmaputra and Meghna Basin (Roy, et.al. 2009). Bangladesh has special geographical feature. It has the Himalayan range to the north, the Bay of Bengal to the south with its funneling towards Meghna estuary and the vast stretch of Indian land to the west. These special geographical features have significant impact on the weather system of Bangladesh. Due to this weather system, Bangladesh is the worst victimized country of natural disasters which causes loss of lives and properties. A large number of the total population of our country lives in the coastal areas. Due to climate change, most of the coastal areas of the world are at risk from natural disasters and meteorological disturbances. The coastal areas of Bangladesh are not in different situation from it. These areas are ecologically sensitive and climatically vulnerable because a process of erosion and accretion is continued. The coastal areas of Bangladesh are facing the Bay of Bengal with an area of 472,201 sq. km where 19 districts are included (and that is the reason which has made the country one of the most disaster prone country (CPD, 2000). As the Bay of Bengal is a perfect breeding ground for tropical cyclones, the coastal areas have been facing one or two severe disaster every year. For example, cyclones, SIDR, AILA, NARGIS and MAHASEN can be mentioned. Disaster in Bangladesh is considered to be a great constraint for sustainable development. Cyclone, tidal surge, flood, river bank erosion are some of the worst types of disaster which is badly affecting the livelihood of our citizens especially in the coastal area like Barguna.
1.1 Statement of the Problem

The world is changing rapidly. Globalization offers endless economic opportunities, but also has costs. Unsustainable land use and biodiversity loss are happening at an unprecedented speed. Global warming has seen a rise in temperature of about 0.8°C in the past century (with about two-thirds of this increase occurring since 1980), leading to greater environmental and climatic risks. A report by the United Nations Intergovernmental Panel on Climate Change (IPCC) in 2014 warned that climate change has become a threat to life and livelihoods while also being a factor in the rise of mega-disasters. These changes are occurring alongside rapid population growth and population ageing. The world population has quadrupled to 7 billion people in just over 100 years. Today, people aged over 60 constitute 11 per cent of the global population. By 2050, this proportion will have doubled, to 22 per cent – that is, 2 billion older persons. Populations are ageing most rapidly in developing countries, which are currently home to 60 per cent of the world’s older persons, projected to rise to 80 per cent by 2050. This collision of increasing global disaster risk and increasing numbers of potentially exposed older persons must be addressed at every level of disaster management planning to ensure that the impact of disaster does not continue to grow along with these trends.

Bangladesh is one of the most vulnerable countries to natural disaster due to its geographic location and geo physical condition. Bangladesh experiences frequent cyclone and storm surges including salinity intrusion to landward. It is predicted that climate change will exacerbate these natural calamities. Due to its weather system, Bangladesh is the worst victimized country of natural disasters which causes loss of lives and properties (Nizamuddin:2001). A large number of the total population of our country lives in the coastal areas. According to the population census 2001, the whole coastal area of the country has about 46 million people. The average size of the household is 7, the density of population is 743 per sq. km. womenfolk are 49% of the coastal population, while 23% are urban dwellers, size of labor force (15 – 59) is 18.6 million which are about 53% of the coastal population (BBS,2006). Disaster in Bangladesh is considered to be a great constrain for sustainable development. Cyclone, tidal surge, floods; river bank erosion is some of the worst type of disaster which is badly affecting the livelihood of our citizens especially in the coastal zone (Alam, 2005)
1.2 Rationale of the Study:

The world is ageing. This year's day will highlight the need for a more inclusive approach for older people in disaster risk reduction and recognize the critical role they can play in resilience-building through their experience and knowledge.

So, ageing women are supposed to be the most vulnerable for many causes namely their vulnerability, mental attitude, physical structure and other social issues (Mitchell 2007). There exists a lot of problems and lacking in disaster management. Though the vulnerable women of the coastal areas are not getting proper support from the government and non-government authorities, their indigenous coping capacities are appreciable. Due to disasters, sometimes ageing women have to migrate from their residence to different metropolitan cities. We live in a society where women and children are the most vulnerable group. During disaster, this vulnerability increases. Though disasters do not discriminate, the socially constructed role of women makes them the vulnerable group during disaster. Because women have less access to resources, they are victims of the gendered division of labor, they are primarily responsible for domestic duties and they do not have the liberty of migrating to look for work following a disaster (World Bank, 2005). The differentiated impact of disasters on men and women is primarily caused by the existing gender inequalities manifested. A study conducted by London School of Economics shows, taken a sample of up to 141 countries over the period 1981 to 2002, natural disasters and their subsequent impact, on average kill ageing women.

Bangladesh is a least developed country where older sections getting increased with vulnerability that is comparatively terrific than those of developed countries (Haque, 2012). The situation of older people of Bangladesh basically the older women sections are worse than those of men in this country and it is noticed much in the flood affected areas in Bangladesh (Haque, 2012:93). Furthermore, the all-out situation of the older people and their demands necessary to lead a normal life must be got prioritized having taken different efficacious initiatives so that the older people would be able to get over their problems facing in all connection (Bhuiyan, 2009).

The present study is conducted to know the vulnerability of ageing women and their coping strategy so that it can be helpful for the people in all walks thinks about the older people and also can be helpful for further research on this issue.
1.3 Objectives of the Study
The main objective of the study is to identify the vulnerabilities and coping strategies of older women living in coastal areas during disaster. To achieve the general purpose, the specific objectives are:

1. To know the personal and family information of the disaster affected older women.
2. To reveal their disaster experiences.
3. To measure their challenges and vulnerabilities out of disaster.
4. To discover their coping strategies after disaster.

1.4 Methodology of the Study
1.4.1 Research Design
The present study is qualitative in nature. Case study has been taken as research method using FGDs as research technique. Taltoli upazilla which is a part of Barguna district area have been selected which are badly affected by cyclone SIDR, AILA, riverbank erosion and other natural calamities in recent year.

1.4.2 Study Location
The part of different unions of Taltoli Upazilla of Barguna districts will be selected as research area which is badly affected by different disasters and it has been chosen on the basis of purposive sampling so that it will be easier and comfortable to run the study on these areas.

1.4.3 Population of the Study
All the older women aged almost 60 and above will be considered as research population. Every woman will be prioritized as the unit of the study and they have to be permanent inhabitants of these areas.

1.4.4 Sample and Sampling
First of all, Taltoli Upazila under Barguna district was selected purposively because this area was most affected by many disasters. Besides these, ten cases were studied of older women and two focused group discussion were conducted purposively that would help providing more qualitative data.

1.4.5 Data collection techniques
10 respondents (60 to above years women) have been selected for data collection by applying random sampling technique that is affected in SIDR, AILA and other disaster. Each respondent irrespective of color, caste and religion is considered as a unit of analysis. Data of the study have been collected from both primary and secondary sources. Primary data have been collected from selected samples through interview using interview schedule and observation.

1.4.6 Sources of Data
Data of the study are collected from both primary and secondary sources. Primary data are collected from selected samples through interview schedule. Secondary data are gathered from published and unpublished research reports, journals, books as well as record and documents of relevant agencies.

1.4.7 Data processing and Analysis
Firstly the collected data from research area will be edited. Then it will be classified according to its characteristics. Proper statistical method (case study) will be used to analyze data. Processed data will be presented with MS word.

1.5 Definition of Terms
Vulnerability: Vulnerability is the condition determined by physical, social, economic and environmental factors or processes, which increase the susceptibility of a community to the impact of hazards (UN, 2009). Vulnerability is ‘insecurity, the reverse of security”; it reflects "the characteristics of a person or group in terms of their capacity to anticipate, cope with, resist, and recover from the impact of a natural hazard.” It has two components: i) an 'external' side of risks, shocks and stress to which a structure, individual, household, community or nation is subject; and ii) an 'internal' side of lack of resources to cope without damaging loss.

Coping Strategies: In disaster management, coping means the techniques where people gain their expected results by using their property. It is very much related with capacity. Strategies can be defined as a set of activities or mechanism by which people try to survive in disasters, recover their situation and develop their conditions after disaster.

Older Women:
Most developed world countries have accepted the chronological age of 65 years as a definition of 'elderly' or older person, but like many westernized concepts, this does not adapt well to the situation in Africa. While this definition is somewhat arbitrary, it is many times associated with
the age at which one can begin to receive pension benefits. At the moment, there is no United Nations standard numerical criterion, but the UN agreed cutoff is 60+ years to refer to the older women. (WHO)

**Barguna**: Barguna is a coastal district of Bangladesh. The place is situated beside the Bay of Bengal and many rivers of Bangladesh. The coastal areas of Bangladesh are facing the Bay of Bengal with an area of 47,201 sq. km. covering 19 districts. And Barguna is a coastal district of Bay of Bengal.

### 1.6 Ethical Considerations
The aim and purpose of the study were explained with the participants and then different questions were asked to them on the basis of that they expressed their response and comments. All the participants were given assurance of confidentiality before conducting interview. The interview was conducted with privacy as much as possible. Alongside these, the researcher also tries to level best to show respect to all the participants in the same manner and maintain local norms, values and believes in all respect. Their real name was used in case study with their consent.

### 1.7 Limitations of the study
The study could not overcome some limitation. Due to some problems this study could not satisfy all the sides. Yet the researcher believe that findings of the will be helpful to further researchers as well as the policy makers. The limitations of the study are described below:

- This study was conducted in disaster affected area that is very remote and toilsome to move one place to another.
- Most of the people living in disaster affected areas are poor and illiterate so they hold doubts in their mind that is why it was to face problems in respect of collecting data going beyond their doubts.
- While asking about the question about their family, the participants felt hesitation before the family members that is why, the interviewer had to make them understand the bare fact repeatedly.
- As the roads were violently destroyed during disaster, there were no facilities of proper vehicles except motor-bike whose cost was so high to bear.
- Most of the older women felt hesitation to answer their covert illness and the researcher had to create a suitable ambience to collect data in this regard.
Chapter Two

Literature Review
• **The problem of ageing in Bangladesh: A socio demographic study**

ASM Atiqur Rahman conducted a study entitled this study. Through this study investigated the overall situation of the older person in Bangladesh, its ultimate objectives was to articulate the problems of the country’s older person easily and readily understandable. The findings of the study support to the supposition that inter aila, lack of access to health services along with poverty is the greatest threat to the interest of older people. By and large the older people in urban areas faces greatly the problems of exclusion and loneliness, lack of employment and income opportunity and mental incongruity and social stress than their rural counterparts. On the contrary, the rural older person mostly suffers from physical illness, poverty and income insecurity. Also they have less access to medical care and health services. Although most of them are still passing their days amidst tender care and support generally provided by their extended families, the situation is in transition as the family pattern gradually shifting towards the nuclear type due to the change in values, migratory tendency of their offspring and poverty. (Rahman; 2002)

• **Disaster and its Impact on Elderly People in Bangladesh: An Overview” 2014**

This is an article based on secondary information. It is conducted by Dr. Md. Robiul Islam, Associate Professor of Institute of Social Welfare and Research, University of Dhaka.

The paper starts with different demographic information about Bangladesh. The Economic situations are also mentioned there. It has shown the Total Area and Total population of the country including the number and ratio of elderly people. Their vulnerabilities have also been highlighted in the paper.

Bangladesh is situated in the slope of three mighty rivers of the Ganges, Brahmaputra and the Meghna. Geographically Bangladesh is the most vulnerable to global climate change. These all are included in the paper including different vulnerable possibilities that may happen for global climate change.

Next portion of the paper has shown different forms of vulnerabilities. Actually Both Disaster and Aging are vulnerable conditions. And when these two combines together, greater impact happens. Reduced income and physical weakness make older people particularly vulnerable to disease, climate migration and decreasing livelihood options. Elderly people face most challenges coping with climate change.

Most of the elderly people are engaged in agricultural sector including cultivation of crops and fishing. It has a great impact on the economy. Moreover, after the disaster being over, it is hardly
possible to come back for the elderly people. Disaster appears to have a greater impact on the elderly than on the other age group as they are hardly productive to economy and for their chronic health problems. Disaster also results in greater social problems including homelessness, isolation etc for the elders. These affect the life of elderly people of the elderly people as well as the whole nation tremendously.

The study has ended with few recommendations by the content creator regarding the vulnerabilities and coping strategies of elderly in coastal zone. And this paper is found very much conducive to our research work. It helped us to know different situations of older people during disaster period in coastal area.

- “Vulnerability and Coping Strategies of Women in Disaster: A Study on Coastal Areas of Bangladesh”, (Islam; 2012)

This is a Ph.D. dissertation. It is conducted by Dr. Md. Robiul Islam, Associate Professor of Institute of Social Welfare and Research, University of Dhaka.

General Objective of the study was to identify the vulnerabilities and coping strategies of women in disaster in coastal area of Bangladesh. And specific objectives were: to analyze women’s situation in disaster and their needs and problems to survive throughout the disaster; to discover the harmful impacts of disaster over women’s physical and mental health; to know their own preparedness techniques and recovery strategies; to identify the drawback programs or activities taken by the government and other organizations for disaster affected women and to make some suggestions for remedy of the vulnerability and to improve their capacity to cope with disaster.

The study has used both qualitative and quantitative method to collect data. And the data were collected from both primary and secondary sources. Few areas, has been selected to collect data, more importantly all the areas are coastal areas namely parts of Khulna, Satkhira, Bagerhat, Barguna and Chandpur which were badly affected by cyclone SIDR, AILA, riverbank erosion and other natural calamities in 2009. 120 respondents (15-65 years women) have been selected for data collection by applying random sampling technique that is affected in SIDR or AILA. Each respondent irrespective of color, caste and religion is considered as a unit of analysis.

The study has shown different vulnerable situations of the women in coastal zone. The area was under lack of drinkable water in dry season. So, to drink or use water women have to collect water from remote place from abode. Vulnerability of women is seen at it’s worst level during natural disaster. Women remain frightened in fear of losing dignity and privacy. They even face additional physical insecurity and loss of dignity while collecting relief during or after a disaster.
They are also vulnerable to reproductive and sexual health problems. Due to their limited access to information, women are less able to minimize risks. They also face problems in settling their small business like rearing kettles.

The study has also shown different coping capacities by women in coastal area during natural disaster. This includes making the house most possible strong against disaster and keeping the people of their own house out of diseases and infections. They also take necessary ancient steps to keep household animal alive during natural disaster. They also take part in family’s small production process as like in small cultivation in household premises, rearing kettles and poultry to give support to the family. Few women in coastal area are recently involved in different microfinance programs under Government and Non-government initiative.

The study has ended with few recommendations by the content creator regarding the vulnerabilities and coping strategies of women in coastal zone.

This Research work is in quite a recent work done on coastal area. And this paper is found very much conducive to our research work. It helped us to know the overall situations of people during disaster period in coastal area.

- **Bangladesh Climate Change impacts and vulnerabilities: A synthesis**

This study conducted by AhsanUddin Ahmed, 2006 and it published by Climate Change Cell, Department of Environment, Comprehensive Disaster Management Program; Government of the People ’s Republic of Bangladesh.

With this document, the CCC made an effort to pull together the available knowledge on climate change impacts and vulnerability in Bangladesh, which is expected to help readers to understand the dynamics of the important concern. The task in hand was to review and synthesize the current knowledge base.

The main objective of this study was to understand the dynamics of climate change and define courses of action by various factors involved in the national development processes and to prepare a synthesis for the general readership on climate change issues for Bangladesh. In this perspective this study collects existing literature on climate change issues for Bangladesh, available both nationally and internationally.
This study shows climate change scenario in accordance with average temperature and increasing temperature (Ahmed and Alam: 1998), temperature change with rainfall change and sea level rise (Agrawala et al., 2003).

The impact of various natural disaster like flood, heavy pre monsoon rainfall, riverbank erosion, sedimentation, droughts, salinity ingress, cyclone and storm surge etc. on people as well as crop production, infrastructure, livestock, forest, etc are increased day by day. For this temperature and humidity changes human health especially elderly will be affected. This study suggests adaptation for people to reduce their loss in climate change and use their efforts to face various climate changes. In this case, adaptation represents needs of adjustments. This study gives importance to awareness building among people specially peoples of disaster affected area, to make necessary policy and to implement this policy so that disaster affected people are not deprived from their rights.

This study is a synthesis and it represents various research and articles on climate change. So this study is very much conductive with our research. For this study we can know various impact of disaster on people and we also know how people adapt with disaster.
Chapter Three

Older population: Bangladesh and global perspective

3.1 Older population in global perspective
3.2 Older populations in Bangladesh
   3.2.1 The trend of increasing number of Elderly in Bangladesh
   3.2.2 Socio-economic situation of the elderly in Bangladesh
   3.2.3 Health Situation of Elderly
3.3 Vulnerability of women during disaster in Bangladesh
3.1 Older Population in Global Perspective

Ageing of the population is one of the most important demographic facts that came to the foreground in the 21st century. With the increase in life expectancy of the world population ageing is now a global issue. It is common all over the world that elderly age range is increasing rapidly and on the other hand the number of children and youth population is decreasing.

Table-1: Population Aged 60 years or Older: World &Major Regions

<table>
<thead>
<tr>
<th>Country or Area</th>
<th>Population Aged 60 years or Old</th>
<th>2006 (millions)</th>
<th>2050 (millions)</th>
<th>2006</th>
<th>2050</th>
<th>Men</th>
<th>Women</th>
<th>60 and above population percentage in labor force</th>
<th>Percentage currently married</th>
<th>Percentage living alone</th>
<th>Sex ratio (Men per 100 women 2006)</th>
</tr>
</thead>
<tbody>
<tr>
<td>World</td>
<td></td>
<td>687</td>
<td>1968</td>
<td>11</td>
<td>22</td>
<td>8</td>
<td>19</td>
<td>40</td>
<td>16</td>
<td>80</td>
<td>48</td>
</tr>
<tr>
<td>More developed regions</td>
<td></td>
<td>247</td>
<td>400</td>
<td>20</td>
<td>32</td>
<td>13</td>
<td>32</td>
<td>22</td>
<td>11</td>
<td>79</td>
<td>48</td>
</tr>
<tr>
<td>Less developed Regions</td>
<td></td>
<td>440</td>
<td>1568</td>
<td>8</td>
<td>20</td>
<td>5</td>
<td>9</td>
<td>50</td>
<td>19</td>
<td>81</td>
<td>47</td>
</tr>
<tr>
<td>Least Developed Countries</td>
<td></td>
<td>39</td>
<td>171</td>
<td>5</td>
<td>10</td>
<td>4</td>
<td>8</td>
<td>71</td>
<td>37</td>
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<td>39</td>
</tr>
<tr>
<td>Africa</td>
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<td>10</td>
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<td>11</td>
<td>64</td>
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</tr>
<tr>
<td>Asia</td>
<td></td>
<td>34</td>
<td>1231</td>
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<td>24</td>
<td>5</td>
<td>9</td>
<td>48</td>
<td>18</td>
<td>81</td>
<td>50</td>
</tr>
</tbody>
</table>
Population ageing is increasingly recognized as a process of major significance for all society. Table 1 shows how rapidly the world population is increasing. The issue of living alone in old age is also considerable as in more developed regions, there are only 13 percent men living alone at old age in 2006 compared to 32 percent women.

In 1950, there were 205 million persons aged 60 or over throughout the world (figure 8). At that time, only 3 countries had more than 10 million people 60 or older: China (42 million), India (20 million), and the United States of America (20 million). Fifty years later, the number of persons aged 60 or over increased, about three times to 606 million. In 2000, the number of countries with more than 10 million people aged 60 or over increased to 12, including 5 with more than 20 million older people: China (129 million), India (77 million), the United States of America (46 million), Japan (30 million) and the Russian Federation (27 million). Over the first half of the current century, the global population 60 or over is projected to expand by more than three times to reach nearly 2 billion in 2050.

<table>
<thead>
<tr>
<th>Europe</th>
<th>151</th>
<th>225</th>
<th>21</th>
<th>34</th>
<th>13</th>
<th>35</th>
<th>15</th>
<th>7</th>
<th>80</th>
<th>47</th>
<th>69</th>
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</thead>
<tbody>
<tr>
<td>Latin America</td>
<td>50</td>
<td>188</td>
<td>9</td>
<td>24</td>
<td>7</td>
<td>10</td>
<td>46</td>
<td>16</td>
<td>75</td>
<td>42</td>
<td>82</td>
</tr>
<tr>
<td>and the Caribbean</td>
<td></td>
<td></td>
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</tbody>
</table>

By then, 33 countries are expected to have more than 10 million people 60 or over, including 5 countries with more than 50 million older people: China (437 million), India (324 million), the United States of America (107 million), Indonesia (70 million) and Brazil (58 million).

3.2 Older Populations in Bangladesh

Bangladesh, the seventh largest (152.51 millions in 2011) and one of the most densely populated countries (1015 persons per sq. km) in the world has started to experience another emerging issue of population ageing in its highly vulnerable population and development context (Population & Housing Census Report 2011).

In Bangladesh, the statistical data represent that from the year 1974-2001 the number of aged population has increased from 1.38 million to 6.05 million and 7.59 million of the total population are aged (BBS, 2003).

3.2.1 The Trend of Increasing Number of Elderly in Bangladesh

Table- 2

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<tr>
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<tbody>
<tr>
<td>1</td>
<td>55-59</td>
<td>1351885</td>
<td>1620374</td>
<td>1949721</td>
<td>2356440</td>
</tr>
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<td>2</td>
<td>60-64</td>
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<td>1948649</td>
<td>2270142</td>
<td>2828640</td>
</tr>
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<td>3</td>
<td>65-69</td>
<td>735255</td>
<td>901571</td>
<td>1092919</td>
<td>1443140</td>
</tr>
<tr>
<td>4</td>
<td>70+</td>
<td>1639056</td>
<td>2053133</td>
<td>2339704</td>
<td>3318560</td>
</tr>
</tbody>
</table>

Table-3: Number, Percentage of National & Elderly Populational, 1951-2008

<table>
<thead>
<tr>
<th>Year</th>
<th>National population</th>
<th>Elderly population</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number (in millions)</td>
<td>Growth Rate</td>
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<tr>
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</table>
Bangladesh is one of the most populous countries in the world and is projected to remain in the same position in 2050. The percentage increase of the elderly population has a slow but steady increase during 1951 – 2008 periods. Although the percentage increase is not that high (from 4.4 to 6.7) during 1951 – 2008 periods, the increase of the absolute number of the elderly people is absolutely alarming. The absolute number of the elderly population has increased from 1.94 million in 1951 to 9.69 million in 2008. The national population has about 3.27 fold increase whereas the elderly population has a 5-fold increase during 1951-2008 periods.

### 3.2.2 Socio-economic Situation of the Elderly in Bangladesh

Bangladesh is basically a rural country and 80% of its population lives in rural areas. Therefore, 80% of the elderly of the country live in the rural areas. In rural areas socio-economic problems are high and in urban and semi urban areas social problems also exist. Some micro-level surveys in urban and rural areas made by the Bangladesh Association for the Aged and Institute for Geriatric Medicine reveal a depressing situation of the elderly population particularly in respect to their health and economic situation. The survey also showed that most of the elderly live in joint/extended families and they had so far been mainly supported by their adult children. But due to deteriorating economic conditions this support does not last long. Besides now-a-days women are involving without side activities, therefore the elderly are not being cared properly by them (National Plan, 1997).

<table>
<thead>
<tr>
<th>Year</th>
<th>Percentage Increase</th>
<th>Married</th>
<th>Unmarried</th>
<th>Total</th>
<th>Country</th>
<th>Urban</th>
</tr>
</thead>
<tbody>
<tr>
<td>1951</td>
<td>44.17</td>
<td>0.50</td>
<td>1.94</td>
<td>......</td>
<td>......</td>
<td>4.4</td>
</tr>
<tr>
<td>1961</td>
<td>55.22</td>
<td>2.26</td>
<td>2.87</td>
<td>0.93</td>
<td>47.94</td>
<td>5.2</td>
</tr>
<tr>
<td>1971</td>
<td>76.40</td>
<td>2.48</td>
<td>4.35</td>
<td>1.48</td>
<td>51.57</td>
<td>5.7</td>
</tr>
<tr>
<td>1981</td>
<td>89.91</td>
<td>2.35</td>
<td>4.95</td>
<td>0.60</td>
<td>13.79</td>
<td>5.5</td>
</tr>
<tr>
<td>1991</td>
<td>111.46</td>
<td>2.17</td>
<td>6.02</td>
<td>1.07</td>
<td>21.62</td>
<td>5.4</td>
</tr>
<tr>
<td>2001</td>
<td>130.52</td>
<td>1.59</td>
<td>8.09</td>
<td>2.07</td>
<td>34.39</td>
<td>6.2</td>
</tr>
<tr>
<td>2008</td>
<td>144.66</td>
<td>1.40</td>
<td>9.69</td>
<td>1.60</td>
<td>19.77</td>
<td>6.7</td>
</tr>
</tbody>
</table>

In Bangladeshi families most of the elderly sometimes hold important role. So household decision making is indicative of older person’s status and authority. The 1998 ESCAP survey reports 49.6% of older males in rural areas play a dominant role in making major or most household decision.

It is universal that elderly are one of the victims of poverty and dependency. Although elderly man possess some property but elderly women are barely penniless. Their main problem is economic. They have no capability of earning. Generally elderly women in middle class family of Dhaka city depend on their sons or husband. As a middle class member they are not enough capable to fulfill the inherent high ambition. Economic situation of the elderly is very vulnerable.

3.2.3 Health Situation of Elderly

The health condition of elderly is not so good to be satisfied. They possess broken and ill health in absence of proper health care needs and facilities. The older or the people above 50 years have two kinds of diseases: (I) short term diseases (ii) long term diseases.

Short term diseases are cold, caught, fever, digestive disorder etc. which may be rendered with as usual medicines and going to doctor is not needed. Another is long term disease which is chronically and doctor’s suggestion and care are must. The diseases are such as, Heart disease, Diabetes, Dementia, Enlargement of prostrate etc (Mojlish, Romjan Ali Khan, 1992).

They also suffer from gerito urinary disease, mental disorder and malnutrition. Blood pressure, diabetes and cardiac disease area more common chronic health conditions among urban elderly whereas pain, rheumatism, anemia and respiratory problems are more common in rural elderly old odds 9age-70+) compared to young old, 9age, 60-70 years) females compared to males, rural elderly compared to urban elderly have great problems with functional activities like coughing, lifting, walk etc. (Begum, 2008).

Social and economic dependency also impact on health. Many young members reported that older people are very much fussy about their health, need and personal services, due to high cost. Many elder people delay seeking medical attention care and until they are extremely ill, thereby prolonging illness.

Old people aged above 65 years are having an increased threat for disease due to poor diet and inadequate physical activity. Here most of the elderly suffer from shortage of eyesight even
lose the eyesight; listen a little, ways of their walking becomes very short as they cannot walk more

3.3 Vulnerability of Women During Disaster in Bangladesh

We live in a society where women and children are the most vulnerable group. During disaster, this vulnerability increases. Though disasters do not discriminate, the socially constructed role of women makes them the vulnerable group during disaster. Because women have less access to resources, they are victims of the gendered division of labor, they are primarily responsible for domestic duties and they do not have the liberty of migrating to look for work following a disaster (World Bank 2005). The differentiated impact of disasters on men and women is primarily caused by the existing gender inequalities manifested. A study conducted by London School of Economics shows, taken a sample of up to 141 countries over the period 1981 to 2002, natural disasters and their subsequent impact, on average kill more women than men or kill women at earlier age than men related to women’s lower socio-economic status (Newmayer and Plumper 2007). Another thing is recognized worldwide that people’s vulnerability to risks depend to a large extent on the assets they have available. In Bangladesh, women tend to have more limited access to assets- physical, financial, human, social and natural capital such as land, credit, decision making bodies, agricultural inputs, technology, extension and training services which would all enhance their capacity to adopt. And in the coastal areas of Bangladesh, the situation is worst (Soussan and Anjan 2002). The total population affected in different coastal areas (Koira, Dacope and ShyamnagarUpazila) by cyclone AILA was 290327. Among them women of 18 to 60 years age group were 87377, whereas men were 80406. Boys of 5-18 years age group were 43766, but the number of affected girls of this age group was 47219 (Action Aid 2009).

Women are a more vulnerable group in disastrous situation and they need to be taken care of. Initiatives should be taken for this vulnerable group so that they can cope with disaster more effectively. Now-a-days not only the natural disasters but also many man-made disasters are occurring in our country such as water logging, road accidents, catastrophic fire etc. As women are half of the total population of our country, their risks in disastrous situation is not avoidable. A developing country like ours where women are not considered as equally important as men, have many problems to manage their risks in all these disasters. Women in Bangladesh still experience various types of violence physical, sexual, emotional and domestic (abusive language or exertion of physical force) that increases during and after a disaster (Ali 1999). The present
study is conducted to realize the vulnerability of women during disaster and their coping strategies to combat disaster.

Over the last decade, the disaster management sector in Bangladesh has experienced an influx of new concepts and approaches. The GOB has taken a number of significant steps during the last few years for building up institutional arrangements from national to the union levels for effective and systematic disaster management facilitating mitigation to the sufferings of disaster victims in Bangladesh. To maintain proper coordination amongst the concerned ministries, departments, line agencies, local government body (LGD) and community people, and also to ensure their proper functioning to mitigate sufferings of the people, the GoB has formulated a set of mechanisms for council and committees from national down to the grass-root levels. For the mechanisms to be best operative, the Standing Orders on Disaster (SOD) act as a guidebook (www.adrc.asia). Major approaches have switched from technology-based hazard control to community-based disaster risk management, which aims to reduce human vulnerability and build resilient communities (MoFDM 2009). For this purpose, disaster management committees are set up within each union. The committee prepares a disaster action plan and maps, showing hazard risks and available resources in the union. Members of the community take part in this process utilizing PRA methods (DMB 2008). It is the committee’s responsibility to disseminate warning signals, carry out evacuation, search and rescue, distribute relief and operate shelter centers, based on the disaster action plan. Community-Based Approach (CBA) which emphasizes the total participation of all people facing any hazard or disaster and makes sure to render all possible services to the community (www.adrc.asia). The existing system for disaster management in the country covers activities at normal times for important disaster management aspects like mitigation/prevention, preparedness, response and recovery (Shafie 2009).

Comprehensive Disaster Management Program has designed to adopt an umbrella program approach that encompasses all aspects of risk management and in so doing facilitates to move from a single agency response and relief strategy to a whole of government holistic strategy that addresses the issue of community vulnerability. It is a strategic institutional and programming framework that is meant to optimize the reduction of long-term risk and the operational capacities for responding to emergencies and disaster situations related to each of the major hazards or potential emergency situations and action to mitigate sufferings and improve recovery from these events. CDMP has the main focus on capacity building of the community, partnership development, community empowerment, research and information management and response
management (www.adrc.asia). Gender concerns are clearly addressed within the documentation of this new policy. But, often gender issues vanish from the discussion list at the community level. Even when they are discussed, some key issues are seldom mentioned while there are certain sets of women’s concerns that are easily recognized and included in the disaster action plan.
Chapter Four

Findings of the Study

4.1 Case Study
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   4.1.2 Case Study-Two
   4.1.3 Case Study-Three
   4.1.4 Case Study-Four
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4.1.1 Case # 01 La Chan

“Disaster is like a monster. This monster eats everything. My husband and elder daughter were eaten by SIDR.”

Lachan is a woman of local Rakhain community. She is 65 years old. She is a handloom worker. Her husband’s name is MongChol. She got married when she is only 12. She lives at Taltali Para in Taltaliupozilla. Her husband is not alive. Her husband died in 2007 during SIDR. She has two sons and one daughter. All of them got marriage.

She is an illiterate women and physically so weak. She lives with her sons. She belongs to no cultivable land; she gets some money from govt. as old age allowances. And her income is very low. So, she has to depend on her sons.

Lachan is uneducated poor women. She has no about basic needs. By basic human needs, she can understand daily foods, cloths and shelter etc. Most of the basic needs she cannot fulfill properly. So, she has to depend on her sons for fulfilling her basic needs. Usually she takes water rice with vegetables as her breakfast, rice with fish or vegetable, dal as her lunch and same food as dinner. She eats meet or egg once or twice in a month. Sometimes she eats seasonal fruits like banana; guava, mangoes, jack-fruits etc.

She lives in a little room which is called MACHA. She has only 4 dresses. Her dress is rank and dirty. Her hair is not clean because she has no one to care of. Though she is physically ill and suffers from many diseases, she is unable to visit doctors in the time of illness. If her condition deteriorates much, her sons take medicine from village doctors. She spends her leisure time by gossiping with her grandchildren and neighbors.

She has a lot of experiences with much horrible disaster. When it is asked about disasters she said, “Disaster is like a monster. This monster eats everything. My husband and elder daughter were eaten by SIDR.”
Actually she saw many disaster named SIDR, IILA, and the flood of 1991. She also said that 1991’s flood was the most devastating flood she had ever seen. It was 1991; the most devastating flood was occurred. Macha a part of their house was flooded.

SIDR was also a big disaster for her. She said that it 15 November of 2007. A Red Crescent worker named JoydebBabu gave the news of SIDR to them. But they didn’t even think the ferocious look of SIDR. When she got the signal, they started to pack some necessary goods and foods so that they can survive. Her daughter was sick because of pregnancy. Though this disaster was occurred at night, no one could help them. She, her sons, daughter in law went to the ‘Heed Bangladesh” office. The most pathetic event was happened that day. Though her daughter was pregnant, she could not move anywhere. She had to stay in “Macha” but SIDR was too strong to wash away the woman. Lachan did not want to go without her daughter and husband but her daughter insisted her to go. And unfortunately her pregnant daughter and her husband were died. She and her family could not identify even their dead body. When she told, she was crying. It was too pathetic to forget her.

Then, in 2009 Aila washed away her house, 2 cows, 4 ewes, and corns. It was the big losses of life. She had to live without food. She was affected not only economically but also mentally.

She told that they, (The Rakhain Community) use some indigenous technology after disasters. First of all, they made plan for that they could survive together. If there had some food, they collected foods from much family and made some food like “Khichuri” and divided foods equally with another. Sometimes when she had no foods to be eaten, she had to eat banana tree. She also catches fish from river.

She also told that though disaster has caused many loses of property and lives, after disaster field becomes more fertile. But they have no weapon to grow crops. If they get some necessary weapon, they will produce more crops. She also said that these are the main energy of their life. She also mentions that she got some help from govt. and NGOs.

Lachan has some suggestion for next disaster planning. She suggests that, more handloom factory should be formed as they are very good at hand loom work. Besides that more emphasize should be given in poultry firm. She also mentions that they need a cyclone shelter in their own “Para”. She also mentions the need of deep tube well as it is sea based area. She also suggests that govt. should give more emphasize on health care and medicine. The government should provide food for the older people.
It is also suggested that more emphasized should be given on Rakhain community. It is also suggested that offspring, relatives, neighbors should come closer with the elderly. The rich people and the government should spread their hand for the betterment of older women.

4.1.2

Case # 02 Purnima Rani

‘Still now I remember the flooded water. Only God knows how we are still alive’

The name of this case is Shrimati Purnima Rani. Her husband name is late Jiron Tagore. She is 62 years old. Her village name is Chandantala. She has one daughter. She is working as a maid. She is a member of Hindu community. Though she has no living place of her own, she has to live a ‘Abashan’ which was made by Bangladesh Nevy.

She also said that she is the poorer of the poor. Disaster has a great impact on her. She had observed many disasters such as flood of 1991, SIDR, IILA, Mahasen etc. she is a member of Hindu community. According to her, SIDE was the most devastating disaster to her. She has a lot of experiences with many disasters. She told that there is cyclone shelter in her village

‘Still now I remember the flooded water. Only God knows how we are still alive ’. When disaster occurred, she heard from man to man. When SIDR occurred, she heard but couldn’t believe. There are lots of trees besides her house. She had some livestock’s such as 5 cows. There was big tree beside her house. When her husband noticed that the storm was so strong, he send her and their daughter to neighbor house but he did not go. She and her only one daughter were safe but her husband was in danger. And unfortunately he was felt under the tree. It was so pathetic because she saw the panic death of her husband.

She had lost her husband and also lost her property. She had only 5 cows of her own and a house, but she lost all of the things. Her stored foods and paddy were washed away. So she became homeless, foodless and also lost the most secured place. She was mentally shocked and economically disabled. She has no own house. She lost everything during sidr.
She had a small cottage that was snatched away by the horrifying SIDR in 2007. Now she stays with her sons in their different houses. So, she has no right to live in the house. It depends on her son's decision. As she is an uneducated woman, she is unable to participate in appropriate education and training programs. She has no idea about social development policies that is related to their well-being. She has no achieved knowledge and experience to share with others. In the time of illness and other problems, her sons, daughters, neighbors and relatives help her. She has no good status and dignity due to illiteracy and poverty. So, most of the people in the society do not respect her. Because of old age, they ignore her instead of building up a friendly relationship with her. She has no opportunity to take decision and give opinion in developing her own development. Her role in educational, religious and socio-cultural activities is not important.

Because of old age and scarcity of fulfilling basic needs, she suffers from different types of physical problems such as fever, less eye-sight, reduced hearing power and heart disease etc. Most of the time, she cannot visit to doctor in the time of illness due to financial problems. The price hike of daily food is being increased day by day. So, her sons do not provide her requisite food. Because of all these reasons, her health is being deteriorated gradually. She is a member of a joint family. But all members of the family are busy with their business. This is why, she always feels loneliness.

She told that life is going its own way. Now she served as a maid because she has no resources of her own. She doesn’t get any govt. or NGOs help. She mentioned some names of NGOs like JAGO NARI, SANGGRAM, UTSO,Uttaron who provided medicines, clean water, muri, loaf etc during and after disaster. Though she is an elder woman, she has to work from door to door for living. She also told that though she lost everything, she started again from the zero for her children. She is a helpless and vulnerable woman but she is still struggling only for her daughter. Govt. should be given more emphasized on vulnerable elder women. Permanent work should be given for the elder people. Proper rehabilitation is also a big problem for the women like her.

4.1.3 Case study-Three

**Rina Begum**

“My father, mother and mother- in- law had died before my eyes. It was too painful. I will never forget that day. It was better if I was died and they were alive.”
Rina Begum is a representative of older women in our society who has to suffer a lot due to disasters. She is a 60 years older woman who lives in a village named Charpara. She is a Muslim woman. She is an illiterate woman and also is not conscious about basic needs. Her husband’s name is Anowar Hung. She is a housewife. Her husband is a marginal farmer. He has no land of his own. Rina Begum and her husband live in her father’s house. 

Her family is very poor. She mentions that food cloth, shelter, medical facilities and recreation and so on. She had no formal education but in her childhood she went to Maqtab, a religious educational institution for gaining religious knowledge. She got marriage when she was only 13. She has two sons and a daughter. When she was only 15, her first son was born. She had also one daughter but she lost her due to diarrhea. Her physical condition is not so good. But she has to take care of her husband. He is now about 80 years old. She lives with her first son. All of them are got married. Her 2nd son doesn’t take any news of her. So, she has to depend on her first son for her livelihood.

She is the poorer of the poor. She has only two dresses. She or her husband’s have no ability to buy new dress. She doesn’t get any government allowances. She usually eats PANTA VAT with vegetable and chira as her breakfast. She takes rice, vegetable, dal fish etc. as her lunch and dinner. She takes some seasonal fruits. But sometimes she has to strive. The house where she lives is a straw-shed. She has a small room but is not enough for her and her husband. Most of the time in a year, she feels physically sick and sometimes she faces some physical problems such as fever, weakness, diarrhea, back pain etc. She depends on village primary medicine and Kabiraj.

She also performs religious activities regularly. She has to depend on her sons for livelihood. So, sometimes she is mentally rebuked by her daughter-in-law. She is totally unconscious about social developing policy and planning relating to the welfare of the elderly. She cannot share her problems with anybody. She has no chance to take part in social service activities. She does not take part in socio-cultural and religious activities actively. She is too poor but she is not included in government old age allowances. She has a lot of experiences with many disasters. And also has to suffer a long. She mentions that she got 30000 taka after SIDR. Some NGO’s also helped her. She spends her leisure time with gossiping with her grand children and neighbor.

“My father, mother and mother-in-law had died before my eyes. It was too painful. I will never forget that day. It was better if I was died and they were alive.” After asking about the most devastating disaster she said that. When SIDR occurred in 2007, her father, mother and
mother-in-law had died. It was her first son’s marriage ceremony. All the member of her family was present. And they had not any news because it is a remote village from upazilla.

Not only SIDR, but also she has experienced much disaster such as AILA, MAHASEN and so on. It was the most ferocious disaster she had experienced ever. They were very afraid of SIDR. Actually, when SIDR occurred, she with her husband, sons and daughter climbed up a tree but her father, mother was not strong enough to climb up a tree. For that reason, they had to stay in the house and they washed away with water. It was the most painful day of her life. Not only SIDR, she has also experienced with AILA, MAHASEN and flood. After disaster, she has to live without food. Actually she was not aware of the signal of SIDR.

Disasters could bring much suffering for her. She is suffering not only economic loses but also she lost her family member. Her paddy field and trees were washed away. She also lost her livestock. All of the sources of foods and money were devastated. She and her family had to live without foods and house.

Actually life is not a bed of roses. And Rina Begum is still struggling. She told that she cannot manage her life properly. But she is living with some limited resources which are given from government and NGOs. Now her sons have a small boat and this is the main sources of their income. Her sons and daughter also help her financially. They are the core of all hopes to her. Her husband is not physically strong. She has to depend on her sons and daughter.

She has some suggestions for improving the post disaster situation. There is no cyclone shelter so that the elder women can survive. Not only is that, arriving news during disaster to them, also a suggestion from her. The people, who are living outside the barrage, should be given shelter. She also told that permanent work should be given by government of the young people who has older father and father. It is also recommended that rich people and government, non-government organizations should come ahead for the welfare of the elderly.

4.1.4 Case Study- Four

**Halima Begum**

‘We saw how devastating the cyclone is! My house was washed away. When I remembered that experiences, I felt scared.’
Halima Begum is the symbol of elderly people in our society. She is a 65 years old woman of a rural Muslim family. She lives at a small village named Charpara under Batiatali union at Taltali in Barguna district. She is an illiterate woman.

She lost her husband named Miraj Uddin twenty years ago. From then, she passed her life in a joint family with her sons. In childhood, she lived in another small village belongs to her father. Her family was poor. Her father was a day laborer. Her father worked hard for the livelihood of family members. She had no formal education. She went to 'Maqtab' a religious educational institution for gaining religious knowledge and reading holy Quran.

In her early stage, she got married with MD Ali. When she got married, she was twelve years girl and her husband was thirty five years old. Her husband's family was also poor. He studied up to class three. He was dropped out from the school due to poverty.

After getting married, she came with her husband's house. They had two sons and three daughters. They were passing with happiness their conjugal life but her husband died of diarrhea after fifteen eight years of gets married. Then she was very upset but she did not get another marriage.

She had lugubrious experiences with many disasters. She was affected by cyclone occurred in 1991, Sidr in 2007, Aila in 2009 and Mahasen in 2013.

“At the time of cyclone in 1991, I with my daughter in law and grandchildren was stayed outside the Barrage. We saw how devastating the cyclone is! My house was washed away. When I remember that experiences, I felt scared.” She also told that she had a great economic loss during that cyclone. She lost her house and became homeless.

Sidr was the most catastrophic disaster she had ever seen. She had a great economic loss and property loss. She also lost her grandchild. “My only grandchild named SUVA was washed away before my eyes. She was only 5 years old. We couldn’t do anything.” She also mentioned that during sidr they had to suffer a lot because her poultry, livestock, house everything was washed away. Though she got some relief but it was not sufficient for her family. After Sidr, she had to eat banana’s tree and sometimes had to strive because there was a lot scarcity of food.

She had four goats, two cows and some livestocks that were snatched away by Mahasen in 2013. She lost her Katcha house (made of muddy) caused by Aila.
Mrs. Halima’s physical condition is not well. She cannot do any kind of jobs but sometimes she has to do household work. So, she has no personal income. She lives in her son's house. She is now totally dependent on her son. Sometimes her daughter helps her. If she needs additional money for survival, she borrows money from relatives, neighbors and well-known persons in the society.

She has some basic needs for survival. She mentions that food, cloth, shelter, medical facilities and recreation etc. are basic human needs. She takes 'pantavat' with cili and salt as breakfast; rice with vegetable and dal as lunch and same food menu as dinner. She has rare chance to take meat or big fish in regular food menu. She takes improved diet in very few time of a year. She takes meat usually in the time of religious festival and social invitations.

She has two dresses which are not sufficient. She has to depend on others for new dresses. Sometimes, she gets warm clothes from the rich people of the society. Most of the time in a year, she feels physically sick and sometimes she faces some physical problems such as, fever, weakness and back pain etc. She depends on village pharmacy and Kabiraj in the time of illness. In that time her son and neighbors help her.

She passes leisure period gossiping with her grandchildren and neighbors. She also performs religious activities regularly. As she is not financially well, her neighbors do not give importance on any matter. Sometimes, she is mentally rebuked by them. She is totally illiterate about social development policy and planning relating to the welfare of the elderly.

She has no chance to take part in social service activities and social reform movement. She does not take part in socio-cultural and religious activities actively.

She cannot move frequently from one place to another for physical unfitness, but she makes friendship with her grandchildren and some neighbors. She is poor, but she is not included in government old age allowances.

She mentioned some names of NGOs like Sangram, JagoNari, Islamic Relief, Uthso who provided medicines, clean water, muri, loaf etc during and after disasters. She mentioned that Government gave 10000 taka per every affected family that she availed for rebuilding her house after Sidr. She did not contribute to the societal people after disasters due to gender diversity and old age.
Mrs. Halima gives some recommendations for the betterment of the elderly. She thinks that more cyclone shelter is needed for the people and transport facilities for going to cyclone shelter is very important. She also emphasizes that most of the women cannot able to go to the cyclone shelter because it is too far. She emphasizes on older friendly income generating activities, inclusion of all poor elderly women in government old age and widow allowances, giving importance on the elderly in all social festivals. It is also recommended that rich people and government and non-government organizations should come ahead for the welfare of the elderly.

4.1.5 Case Study-Five

Maleka Khatun

'I will never forget that terrible storm. We have no food to eat. It was really unforgettable.'

Maleka is about 60 years old. She is a rural muslim woman. She got married with NurulHaque in 1969. She lives in a joint family in Chandantala under charpara union at Taltalithana in Barguna district. Her husband is not alive. She has one son and four daughters. All of them got married. She lives with her sons. She is an illiterate woman and physically weak. She belongs to no cultivable land but she gets some money as government old age allowance.

But it is not sufficient to lead a normal life. So, she is to depend on her sons. Mrs. Maleka is an uneducated and poor woman. So, by basic human needs, she can understand daily food, cloth and shelter etc. Most of these basic needs she cannot fulfill properly. She is to depend on her sons for fulfilling minimum basic human needs. Usually she takes water-rice with vegetable as breakfast; rice with vegetable and fishes/ dal as lunch and same food menu as dinner. She takes fishes two times every week and takes meat one to two times in a few months. She lives in a little house with her grandchildren.

She has only three dresses. She is unable to buy new dresses. So, she is to depend on others for new dresses. She is unable to visit doctors in the time of illness. If her physical condition deteriorates much, her sons purchases medicines from village doctors. Otherwise, she takes 'Jharfuk' from 'village Kabiraj'. She spends leisure time by praying and gossiping with neighbors and grandchildren.

She has no own house. She lost everything during Sidr. She has to live with his family in ABASHAN built by Navy after Sidr. She had a small cottage and three ewe that were snatched
away by the horrifying Aila in 2009. She also told that cyclone occurred in 1991 was also horrifying.

“I could not survive during Sidr if my nephew would not take me to Bagibajar High school. My only source of income, grocery shop and house was washed away. I will never forget that terrible storm. We have no food to eat. It was really unforgettable.”

She also told that she couldn’t get any news about it. She could not go to any cyclone shelter because it was too far from their village. She also remember the cyclone occurred in 1991, Mahasen in 2013 which were also devastating to her. Economic loss is a great factor for this disaster to her.

As she is an uneducated woman, she is unable to participate in appropriate education and training programs. She has no idea about social development policies that is related to their well-being. She has no achieved knowledge and experience to share with others. In the time of illness and other problems, her sons, daughters, neighbors and relatives help her.

She has no good status and dignity due to illiteracy and poverty. So, most of the people in the society do not respect her. Because of old age, they ignore her instead of building up a friendly relationship with her. She has no opportunity to take decision and give opinion in developing her own development. Her role in educational, religious and socio-cultural activities is not important.

Because of old age and scarcity of fulfilling basic needs, Mrs. Maleka suffers from different types of physical problems such as fever, less eye-sight, reduced hearing power and heart disease etc. Most of the time, she cannot visit to doctor in the time of illness due to financial problems.

The price hike of daily food is being increased day by day. So, her sons do not provide her requisite food. Because of all these reasons, her health is being deteriorated gradually. She is a member of a joint family. But all members of the family are busy with their business. This is why, she always feels loneliness. Her hair color is gray and dirty because no one takes care of her. Her dress was also dirty.

She told that after disasters they have to suffer a lot due to many reason. She also mentioned that she got some financial help from local NGOs and Government so that she could survive. But it was not sufficient to her. She said with anger that members and chairmen couldn’t give them enough relief. She mentioned some names of NGOs like Shangkolpo, Suktara, JagoNari, who provided medicines, clean water, muri, loafetc during and after Sidr, Aila and Mahasan. She mentioned that Government gave 15000 taka per every affected family that she availed for
reshaping her house. She did not contribute to the societal people during disasters due to gender diversity and old age along with inability.

Mrs. Maleka suggests that government should take necessary steps to provide free medicine and treatment to the rural elderly for their physical fitness. The government also can provide food for the elderly. The high price level of daily food should be reduced by the government initiative. All poor people should be included in government old age allowances. The rich people and non-government organizations can distribute warm cloths among the elderly in winter season. It is also suggested that offspring, relatives and neighbors should come in close touch with the elderly. She also suggests that different rehabilitation programs for the older women after and during disasters should be taken. All the members of the society should come ahead for the well-being of the elderly.

4.1.6 Case Study-Six

Saira Banu

Saira is about 65 years old. She is a rural muslim woman. She got married with Abdul Haque in 1970. She lives in a joint family in Chandantala under charpara union at Taltalithana in Barguna district. Her husband is not alive. She has one son and four daughters. All of them got married. She lives with her sons. She is an illiterate woman and physically weak. She belongs to no cultivable land but she gets some money as government old age allowance.

But it is not sufficient to lead a normal life. So, she is to depend on her sons. Saira is an uneducated and poor woman. So, by basic human needs, she can understand daily food, cloth and shelter etc. Most of these basic needs she cannot fulfill properly. She is to depend on her sons for fulfilling minimum basic human needs. Usually she takes water-rice with vegetable as breakfast; rice with vegetable and fishes/ dal as lunch and same food menu as dinner. She takes fishes two times every week and takes meat one to two times in a few months. She lives in a little house with her grand children.

She has only two dresses. She is unable to buy new dresses. So, she is to depend on others for new dresses. She is unable to visit doctors in the time of illness. If her physical condition deteriorates much, her sons purchases medicines from village doctors. Otherwise, she takes
medicine from 'village Kabiraj'. She spends leisure time by praying and gossiping with neighbors and grandchildren.

She has no own house. She lost everything during Sidr. She has to live with his family in ABASHAN built by Navy after Sidr. She had a small cottage and three ewes that were snatched away by the horrifying Aila in 2009. She also told that cyclone occurred in 1991 was also horrifying.

“I could not survive during Sidr if my nephew would not take me to Bagibajar High school. My only source of income, grocery shop and house was washed away. I will never forget that terrible storm. We have no food to eat. It was really unforgettable.” She also told that she couldn’t get any news about it. She could not go to any cyclone shelter because it was too far from their village. She also remember the cyclone occurred in 1991, Mahasen in 2013 which were also devastating to her. Economic loss is a great factor for this disaster to her.

As she is an uneducated woman, she is unable to participate in appropriate education and training programs. She has no idea about social development policies that is related to their well-being. She has no achieved knowledge and experience to share with others. In the time of illness and other problems, her sons, daughters, neighbors and relatives help her.

She has no good status and dignity due to illiteracy and poverty. So, most of the people in the society do not respect her. Because of old age, they ignore her instead of building up a friendly relationship with her. She has no opportunity to take decision and give opinion in developing her own development. Her role in educational, religious and socio-cultural activities is not important.

Because of old age and scarcity of fulfilling basic needs, Mrs. Maleka suffers from different types of physical problems such as fever, less eye-sight, reduced hearing power and heart disease etc. Most of the time, she cannot visit to doctor in the time of illness due to financial problems.

The price hike of daily food is being increased day by day. So, her sons do not provide her requisite food. Because of all these reasons, her health is being deteriorated gradually. She is a member of a joint family. But all members of the family are busy with their business. This is why, she always feels loneliness. Her hair color is gray and dirty because no one takes care of her. Her dress was also dirty.

She told that after disasters they have to suffer a lot due to many reason. She also mentioned that she got some financial help from local NGOs and Government so that she could survive. But it was
not sufficient to her. She said with anger that members and chairmen couldn’t give them enough relief.

She mentioned some names of NGOs like Shangkolpo, Suktara, JagoNari, who provided medicines, clean water, muri, loaf etc during and after Sidr, Aila and Mahasan. She mentioned that Government gave 15000 taka per every affected family that she availed for reshaping her house. She did not contribute to the societal people during disasters due to gender diversity and old age along with inability.

Mrs. Maleka suggests that government should take necessary steps to provide free medicine and treatment to the rural elderly for their physical fitness. The government also can provide food for the elderly. The high price level of daily food should be reduced by the government initiative. All poor people should be included in government old age allowances.

The rich people and non-government organizations can distribute warm cloths among the elderly in winter season. It is also suggested that offspring, relatives and neighbors should come in close touch with the elderly. She also suggests that different rehabilitation programs for the older women after and during disasters should be taken. All the members should come forward for the betterment of the older women.

4.1.7 Case Study—Seven

**Jabeda Khatun**

“It was the day when I lost my husband. We were together with 46 years. But alas! He was passed away and I became alone.”

Jabeda Khatun was born in a rural muslim family. Now he is 70 years old. She is an illiterate person. He lives in Chandantala under parirkhal union at Taltolithana in Barguna dis. He got married with late Ali Ahmed Peada around fifty five years ago.

She lives in a joint family. She has four sons and four daughters. Her two sons got jobs and another two is involved in fishing activities. In the moment of crisis, they help him. So, though she does not have work, she is not to face economic problem because she gets Government allowances. Although she is 70 years old, all of his family members consider her as an important member of the family.
She is passed in class five. Her father was an honored person in their village. He had much cultivable land. She was the only daughter of her parents. After dying her parents, she got most of the portion of land. So, she knows that food, cloth, shelter. Sometimes, she feels scarcity of entertainment.

Her two sons stay away from him with their wives due to job location. Other two sons live in separate family with their wives and children. Almost every day he takes rice with vegetables as breakfast; rice with vegetables, fishes as lunch and rice with vegetable and fish/dal as dinner. Almost every day in a week, fish and vegetables are included as his favorite menu. She lives in a separate room with small space with her daughter who is a widow.

She has four dresses. Her sons buy new dresses two times in a year. If he becomes ill, he visits 'kabiraj' as primary treatment. If situation deteriorates, he visits village doctor. Her sons and relatives take care of him in the time of illness. She passes his leisure period gossiping with neighbors, doing prayer and gossiping with her daughter.

She has also terrible experiences with many disasters. Sidr was the most devastating storm she had ever seen. According to her, “it was the day when I lost my husband. We were together with 46 years. But alas! He was passed away and I became alone.”

It was the day when her husband was busy with his business. He had a fishing business. He was besides the sea beach. Though he knew the news of Sidr he couldn’t give more emphasize on it. So, he did not go to any cyclone shelter. At night, it became too strong and he couldn’t go anywhere because he was in his boat. He with his boat was washed away.

Jabeda Khatun also mentioned that there were a lot of sufferings after Sidr. Though she and her children was safe but they faced a great economic loses. And there were a lot of scarcity of food.

She also mentioned another devastating disaster named Aila and Mahasen. It causes great economic loses to her family.

After asking if she heard any news about disaster before it occurred, she told that volunteer of Red Crisent gave them news about disasters. And they went to nearby cyclone shelter.

When asking about the recovery pattern after disasters, she told that there is a lot of problem. Always they face property loses and loses of crops. But life is going on. She told that, they are struggling against disasters and want to set with new life.
She divided her land among the sons and so she is now only the owner of his house. She has no opportunity to participate in formulating and implementing the social development policy for her well-being. She does not have opportunity to share his knowledge and experiences with the people in the society.

While asking about her contribution during and after disasters, she answered that she did nothing for the disasters affected people during disaster even after disasters because of my shortcomings like busy with his own property along with her old age. In case of accident and other mishap, his sons, relatives and neighbors take care of her.

Because of old age, his eye-sight and listening power are reducing day by day. She is also suffering from weakness, cold and back pain etc. The price level of daily necessaries is being increased day by day so she cannot fully meet her demands. All of his sons live in their separate families. So, she feels loneliness.

She mentioned some names of NGOs like Sangram, Sangkolpo, Suktara Islamic Relief, who provided medicines, clean water, muri, loafetc during and after disasters. She mentioned that Government gave 20000 taka per every affected family from what she has been given only 15000 taka. She assisted people giving food, counselingetc during disasters.

To solve the physical problems of the elderly, she recommends that friendly behavior of family members and regular doctor's visit are important. She also thinks that government should take necessary measures to reduce the price level of daily necessaries. Government should increase old age allowances. The society should come ahead in showing respect and dignity towards the elderly like her.

4.1.8 Case Study-Eight

Mrs Rabeya akhter

“We never see such kind of big wave of the sea. Man, women, livestock’s, trees all are washed away by flood – tide.”

Mrs Rabeya Akhter is about 63 years old of a muslim respectable family. He was born and grew up in a village named Bagi under chotoBagi union at Taltali upazilla in Barguna district. She is well educated. In early life she started primary education in local government primary school.
She studied up to graduation. She started teaching profession in Local High school. He retired from his profession five years ago.

She got money after her retirement. This amount of money and another two laces which came from his son's death compensation benefit deposited in a bank. She earns 5600 BDT interest every month. She maintains her family with this money. Though she has no financial crisis, she always feels upset for his son's death.

As an educated and conscious older woman, by basic human needs, she can understand food, shelter, cloth, medical treatment and recreation are basic human needs. She takes biscuit with tea and fruits as breakfast; rice with vegetable and fish as lunch and also same as dinner. He usually takes same food menu and sometimes takes meat.

The house where she lives, it's a brick-built house. That is why Sidr did not make too harm to her. Though she had much economic loses. She told that she had a lot of experiences with many disasters. But she told that Sidr and the cyclone of 1991 were the most horrible to her. According to her “we never see such kind of big wave of the sea. Man, women, livestock’s, trees all are washed away by flood –tide.”

Though her family was safe but she had also a great economic loss. Her Gher was finished. Their crops and poultry ware badly affected.

She also faced financial lose during Aila. Though she is nota conscious woman, she usually goes to the cyclone shelter if gets any danger signals. For that reason she and her family become safe. But as her house is besides the river, she has to face many disasters.

She has a separate room for her own use and she gets enough space for living. She wears clean cloths and sometimes he buys new cloths for himself and family members.

Her physical condition is usually well but sometimes she faces some problems such as diarrhea, fever and high blood pressure etc. In that time, she has to visit village doctor, government hospital and private clinic in town. Her son and relatives help him in taking to the doctors in such cases. She can afford in purchasing medicines without other's help. She feels well most of the time in a year.

She passes leisure period gossiping with grandchildren and neighbors. Sometimes, she regularly reads newspaper. She performs religious activities regularly. She has a TV -with dish connection in the house for mental recreation. It helps her to know the world news.
As she is an educated person, she knows about social development policy and planning to take decision and give opinion in case of improving physical condition and standard of life. She is an older person but because of his position and activities, she does not face any discrimination. Still now, she has the authority on his son to give opinion about their family matters relating to elderly welfare.

She also takes part in any type of social service activities and social reform movement. Has influential role in village politics. She can share achieved knowledge and experiences with young generation. The youth society also comes to her for better suggestions.

She mentioned some names of NGOs like Suktara, Sanggram, Songkolpo, Islamic Relief who provided medicines, clean water, muri, loaf etc. during and after disaster. She mentioned that Government gave 20000 taka per every affected family but she did not accept that.

She had many contributions after disaster because she helped people getting food, cloth, and pure drinking water and so on from different humanitarian organizations like Islamic Relief, Islamic Aid, Suktara etc. under the authority in his area during disasters.

She gives some recommendations and suggestions for the betterment of rural elderly people. These are;

Helpful attitude towards elderly parents, regular medical checkup by government initiative, regular food supply for the elderly, inclusion of every poor rural elderly in government old age allowances, practice of social values, giving importance on elderly people in socio-cultural festivals etc.

Beside these, rich people of the society and government and non-government organizations should take necessary steps for the welfare of the elderly. The older people are the vital part of our society. They are experienced persons in the society. So they are valuable asset who can contribute to the society.

4.1.9 Case study-Nine

Srimoti Sima Rani

‘My only one daughter was snatched away before my eyes. She was trying to hold on a tree but she couldn’t. How I can forget that scene?’
Sima Rani is about 70 years old. She is a rural Hindu woman. She got married with Ananda Das in 1969. She lives in a joint family at Hindu Para under Bariatoli Union at Taltoliupazilla in Barguna district. Her husband is not alive. Her husband died of black fever in 1999. She has four sons only. All of them got married. She lives with her younger son. She is an illiterate woman and physically weak. She does not belong to any cultivable land; she gets some money as government old age allowance.

But it is not sufficient to lead a normal life. She told that “God kicked me in the hell a long time ago”. So, she is to depend on her sons. She is an uneducated and poor woman. So, by basic human needs, she can understand daily food, cloth and shelter etc. Most of these basic needs she cannot fulfill properly. She is to depend on her sons for fulfilling minimum basic human needs.

Usually she takes water-rice with onion and vegetables as breakfast; rice with vegetable and fishes dal as lunch and same food menu as dinner. She takes fishes two times every week and takes meat one to two times in a few years. She lives in a broken house with her grand children.

She has only two dresses. She is unable to buy new dresses. So, she is to depend on others for new dresses. She is unable to visit doctors in the time of illness. If her physical condition deteriorates much, her younger son purchases medicines from village doctors. She spends leisure time by gossiping with neighbors and grandchildren.

“My only one daughter was snatched away before my eyes. She was trying to hold on a tree but she couldn’t. How can I forget that scene?” When asking the question about her loses during disasters she told that and she was crying. Her only one daughter was died by 1991’s terrible strom. She also told that it was one of the most horrible disasters to her.

In the time of Sidr , she was in Chittagong with his sons. So, she heard that it was also a devastating disaster but she couldn’t see it.

She has no own house. She lost everything during Aila. She had a small cottage and five goats that were snatched away by the horrifying Aila in 2009.

Now she stays with her younger son. She is to depend on her son's decision. As she is an uneducated woman, she is unable to participate in appropriate education and training programs. She has no idea about social development policies that is related to their well-being. She has no achieved knowledge and experience to share with others.
In the time of illness and other problems, her sons, neighbors and relatives help her. She has no good status and dignity due to illiteracy and poverty. So, most of the people in the society do not respect her. Because of old age, they ignore her instead of building up a friendly relationship with her.

She has no opportunity to take decision and give opinion in developing her own development. Her role in educational, religious and socio-cultural activities is not important. Because of old age and scarcity of fulfilling basic needs, she suffers from different types of physical problems such as less eye-sight, heart disease etc. Most of the time, she cannot visit to doctor in the time of illness due to financial problems.

The price hike of daily food is getting increased day by day. So, her son does not provide her requisite necessaries. Because of all these reasons, her health is getting deteriorated gradually. All members of the family are busy with their business. This is why, she always feels loneliness.

She mentioned some names of NGOs like Red Cricent, Rupantor, Islamic Relief, who provided medicines, clean water, muri, loafetc during and after disasters. She mentioned that Government gave 20000 taka per every affected family that she availed for making her house. She did not contribute to the societal people during disasters due to gender diversity and old age.

Sima Rani suggests that government should take necessary steps to provide free medicine and treatment to the rural elderly for their physical fitness. The government also cans providefood for the elderly. The high price level of daily food should be reduced by the government initiative. All poor people should be included in government old age allowance.

The rich people and non-government organizations can distribute warm cloths among the elderly in winter season. It is also suggested that offspring, relatives and neighbors should come closer with the elderly. All the members of the society should spread their hands for the well-being of the elderly.
4.1.10 Case Study-Ten

Golapjan

Golapjan is the representative of older women who has a lot of experiences with different disasters. She was born in a rural muslim family. Now she is 59 years old. She lives in Dharmatola under parirkhal union at Taltolithana in Barguna district. She got married with late Nasu Mir many years ago.

She lives in a joint family. She has no son or daughter. He lives with his nephew’s family. In the moment of crisis, they help him. So, though she does not have work, she is not to face economic problem because she gets Government allowances.

She is passed in class five. Her father was an honored person in their village. He had much cultivable land. She was the only daughter of her parents. After dyeing her parents, she got most of the portion of land. Sometimes, she feels scarcity of entertainment.

Almost every day she takes rice with vegetables as breakfast; rice with vegetables, fishes as lunch and rice with vegetable and fish/ dalas dinner. Almost every day in a week, fish and vegetables are included as his favorite menu. She lives in a separate room.

She has four dresses. Her nephew buys new dresses two times in a year. If he becomes ill, he visits 'kabiraj’ as primary treatment. If situation deteriorates, he visits village doctor. Her relatives take care of him in the time of illness. She passes his leisure period gossiping with neighbors, doing prayer and gossiping with relatives. Sometimes she watches TV.
She has also terrible experiences with many disasters. Sidr was the most devastating storm she had ever seen. According to her, “it was the day when I lost my husband. We were together with many years. But alas! He was passed away and I became alone. I have no children. I am so lonely in this world.”

It was the day when her husband was busy with his work. He was a school teacher. It was far from their village and near to sea-beach. Her husband was stay with a family as a paying guest. He usually visits her once in a week. In the time of Sidr, her husband was died.

Golapjan also mentioned that there were a lot of sufferings after Sidr. Though she was safe but they faced a great economic loses. And there were a lot of scarcity of food during and after disaster she faces mental problem as well as physical problem. As she has no children and her husband was died, it was a matter of tension that who takes care of her.

She also mentioned another devastating disaster named Aila and Mahasen. It causes great economic loses to her family.

After asking if she heard any news about disaster before it occurred, she told that volunteer of Red Crisent gave them news about disasters. And they went to nearby cyclone shelter.

When asking about the recovery pattern after disasters, she told that there is a lot of problem. Always they face property loses and loses of crops. But life is going on. She told that, still now they are struggling against disasters and want to set with new life.

She has no opportunity to participate in formulating and implementing the social development policy for her well-being. She does not have opportunity to share his knowledge and experiences with the people in the society.

While asking about her contribution during and after disasters, she answered that she did nothing for the disasters affected people during disaster even after disasters because of my shortcomings like busy with his own property along with her old age. In case of accident and other mishap, her relatives and neighbors take care of her.

Because of old age, his eye-sight and listening power are reducing day by day. She is also suffering from weakness, cold and back pain etc. The price level of daily necessaries is being increased day by day so she cannot fully meet her demands. All of his sons live in their separate families. So, she feels loneliness.
She mentioned some names of NGOs like Sangram, Sangkolpo, Suktara Islamic Relief, who provided medicines, clean water, muri, loaf etc during and after disasters. She mentioned that Government gave 20000 taka per every affected family from what she has been given only 15000 taka. She assisted people giving food, counseling etc during disasters.

To solve the physical problems of the elderly, she recommends that friendly behavior of family members and regular doctor's visit are important. She also thinks that government should take necessary measures to reduce the price level of daily necessaries. Government should increase old age allowances. The society should come ahead in showing respect and dignity towards the elderly like her.

Chapter Five

Focus Group Discussion

5.1 FGD 1
5.2 FGD 2
5.1 With Older Women (FGD)

A focus group was conducted with the female older people in disaster affected area for collecting qualitative data about the survival pattern of female older. This group was consists of 11 members living at Taltali Upazilla in Barguna district. They are Golapjan-70 years, Fulbanu-65 years, Aysha Begum-68 years, Halima Begum- 60, Maleka-63 years, Tuja wingh-73, Tulsi Das-61, Rina Begum-64, Rabeya-67, Jobeda Khatun-65, Kallani rani- 61.

There were some issues which were raised to discuss such as their losses and problems during disasters, experiences with different disasters, coping mechanism, their situation in family after disaster, their contribution during disaster and after disaster, role performed by Govt. and NGOs for them after devastating disaster as well as recommendation in solving these problems of disaster affected older women.

All of the women of this group were 60 above years old. Highest was 73 years old and lowest was 60 years old. 9 participants were Muslim and 2 of them were Hindu. Most of them are illiterate and only 3 participants studied class five.

6 percipients live in a joint family but 2 live in relative house. Most of their husband is alive. Most of them live in joint family and one participant live in single family. Their main occupation is housekeeping and rearing their grandchildren’s. They are mainly dependent on their children as well as others.
Raising the issue of different disaster, most of them told that they have lugubrious experiences. They mentioned the name of many disasters like storm occurred in 1991, Sidr in 2007, Aila in 2009, mahasen and Nargis etc.

Most of the women mentioned that Sidr was the most devastating disaster they have ever seen. It caused a great loss of their property, economy and lives. 6 women lost their near and dear ones as their husband, parents, sons, daughter and grandchildren.

Most of the women lost their property. Almost everyone lost their house during Sidr. They also lost their crops, grocery shop and livestock’s. Actually Sidr did much harm to them. Most of them lost their main source of income.

After Sidr, they face many problems. Most of them mentioned the scarcity of food and shelter. They also face problem such as lack of security, medicine, pure drinking water, warm cloths etc. They also mentioned that their physical and mental condition was too bad. Losing their near and dear ones they were mentally so disturbed.

And raising issues about Aila, most of them mentioned that this disaster caused a great economic loss. When they were busy with repairing their loss occurred by Sidr in 2007, Aila was coming towards them. It caused a great economic, property loss and loss of many lives. Most of them lost their near and dear ones, their houses, paddy field, and livestock’s. It was also a devastating disaster to them.

They also mentioned the name of much disaster such as Nargis and Mahasen. During and after disaster they suffer a lot. They mentioned that there was scarcity of food, clothes, drinking water, medicine, sanitary latrines etc. Most of them mentioned that they suffer a lot due to insufficient shelter.

When raising the issues of hearing the news about disasters, most of them mentioned that they do not get news. But some of them told that she heard the news. They told that RED Cricent Society has a great role to aware of the people during disaster.

When the issue of their preparedness and coping strategies during and after disasters was raised they mentioned that almost all have no preparedness during disasters. But 4 women mentioned that they prepared her and their family to go to the cyclone shelter. Most of the women told with grief that there are very few number of cyclone shelters and there are no transport facilities to go. So most of the older women can’t go to the cyclone shelter during disaster.
After disasters they work together. They also participate in community participation like preparing Khichuri, take care of the injured people and look after the children. But most of them told that their physical and mental condition was too ill to participate in any work.

After raising the issue about getting Government allowance, most of them told that they cannot get any govt. allowance except three. They have no source of income source for survival. They do not have cultivable land of their own. Most of them cannot do any work due to old age along with inability.

Most of them are uneducated and poor. So, by basic human needs, majority of them mean daily foods, cloths, and Medicare. They have not taken any family planning method in their lifetime.

Then after the discussing about basic human needs one participant said that foods, cloths, shelter etc as basic needs. Most of these basic needs they cannot fulfill.

Most of them were wearing very dirty and old share. And most of them had no any footwear. Majority of the percipients are only two or three dresses. Their hair’s color was gray and dirty. They also mentioned that they have no one to take care. They have no choice to visit any doctors in the time of illness. Most of them are dependent on other’s treatment. Their medical treatment depends on the mercy of their sons and relatives as well as daughter in law. Primarily they visit to village Kabiraj(traditional heel)

Most of them mentioned that their daughter- in- laws torture them. Most of the women live with their son’s house. So, they have no right to live on their own style and wishes. As a part of social values, sons do not pressurize their parents to leave the house but often signalize them that they are countered as burden.

To know about their role during disaster, this issue was raised. They told that they did not perform any roles for the most affected people by disaster but they performed role for their family. During disaster had to live in their own house but sometimes they went to cyclone shelter. They also answered that though there are some cyclone shelter but its too far to go. During disaster collect their food in their own way.

It is also mentioned that they do not get any chance to participate in education and also decision making in family or community. It is also mentioned that they rarely get chance to exchange their view and ideas. Neighbors invite them in various social and religious occasions. During disaster all the members of their community help each other.
They also mentioned that these feelings with each other help them to overcome many problems. But it is a matter of sorrow that, they are dishonored in most cases by the society people even by their sons, daughters. They have no chance to give opinion relating to the welfare of them in respect of living in the society. Their roles in educational, religious and socio-economical activities are few. They also said that they have to suffer a lot during disaster due to scarcity of foods, water, medicine and shelter. They also told that most of the time they could not get any news of disaster.

If they get any news, they can survive more. When they were asked about the role of Go and NGOs, they replied that during disasters they got some financial and relief from GO and NGOs. They mentioned some NGOs named JAGO NARI, SONGGRAM, GRAMEEN BANK, UTSO etc. They also mentioned the help of Government, they also tell their dissatisfaction about the corruption of local representative of Government. They mentioned that most of the money and relief which are allotted for them are divided by the local government.

All of the participants told that have been suffering from various kinds of diseases during and after disaster. They also face many regular diseases due to age such as reduced hearing, eyesight, headache, waist pain, back pain. Most of the time they cannot visit any doctors. They also mentioned food problems. The houses they lived are not secured.

And they also mentioned that during disaster they cannot move anywhere due to unavailable transport facilities. They also have not sufficient cloths to wear. Most of them are tortured mentally or physically by their family environment. They recommended that good food, free health treatment, decreasing price of daily foods and allowances for the widow and the older women. They also recommended that GO and NGOs should come forward to solve their problem and the wellbeing of older women in all respect.

5.2 With Older Men and Women (FGD)

A focus group was conducted with older people in disaster affected area for collecting qualitative data about the survival pattern of the older. This group was consists of 15 members living at Taltoli Upazilla in Barguna district.

There were some issues which were raised to discuss such as their losses and problems during disasters, experiences with different disasters, coping mechanism, their situation in family after disaster, their contribution during disaster and after disaster, role performed by Govt. and NGOs
for them after devastating disaster as well as recommendation in solving these problems of disaster affected older women

Most of the participants of this group were 60 above years old. Highest was 80 years old and lowest was 55 years old. 11 participants were Muslim and 2 of them were Hindu and 2 were Rakhain. Most of them are illiterate and only 4 participants studied class five.

Most of the participants live in a joint family but 2 live in relative house. Most of their spouse is alive. Most of them live in joint family and two participants live in single family. Their main occupation of the male member is fishing and for women is rearing their grand children’s. They are mainly dependent on their children as well as others.

Raising the issue of different disaster, most of them told that they have horrible experiences. They mentioned the name of many disasters like storm occurred in 1991, Sidr in 2007, Aila in 2009, mahasen and Nargis etc.

Most of the participants remembered that the storm of 1991 was a horrible disaster to them. It had done a great loss of lives, economy, property, crops and livestock’s.

Most of them mentioned that Sidr was the most devastating disaster they have ever seen. It caused a great loss of their property, economy and lives. Most of them lost their near and dear ones as their husband, parents, sons, daughter and grandchildren.

Most of them lost their property. Almost everyone lost their house during Sidr. They also lost their crops, grocery shop and livestock’s. Actually Sidr did much harm to them. Most of them lost their main source of income.

Raising issues about Aila, most of them mentioned that this disaster caused a great economic loss. When they were busy with repairing their loss occurred by Sidr in 2007, Aila was coming towards them .it caused a great economic, property loss and loss of many lives. Most of them lost their near and dear ones, their houses, paddy field, and livestock’s. It was also a devastating disaster to them.

After Sidr, they face many problems. Most of them mentioned the scarcity of food and shelter. They also face problem such as lack of security, medicine, pure drinking water, warn cloths etc. They also mentioned that their physical and mental condition was too bad. Losing their near and dear ones they were mentally so disturbed.
They also mentioned the name of much disaster such as Nargis and Mahasen. During and after disaster they suffer a lot. They mentioned that there was scarcity of food, clothes, drinking water, medicine, sanitary latrines etc. Most of them mentioned that they suffer a lot due to insufficient shelter.

When raising the issues of hearing the news about disasters, most of them mentioned that they don’t get news. But some of them told that they heard the news. They told that RED Cricent Society has a great role to aware of the people during disaster.

When the issue of their preparedness and coping strategies during and after disasters was raised they mentioned that almost all have no preparedness during disasters. Most of them mentioned that they prepared her and their family to go to the cyclone shelter. Most of the women told with grief that there are very few number of cyclone shelters and there are no transport facilities to go. So, most of the older women can’t go to the cyclone shelter during disasters.

After disasters they work together. They also participate in community participation like building new house, preparing Khichuri, take care of the injured people and look after the children. But most of them told that their physical and mental condition was too ill to participate in any work.

After raising the issue about getting Government allowance, most of them told that they cannot get any govt. allowance except three. They have no source of income source for survival. They do not have cultivable land of their own. Most of them cannot do any work due to old age along with inability.

Most of them are uneducated and poor. So, by basic human needs, majority of them mean daily foods, cloths, and Medicare. They have not taken any family planning method in their lifetime.

Then after the discussing about basic human needs one participant said that foods, cloths, shelter etc as basic needs. Most of these basic needs they cannot fulfill.

After raising the issue of their lifestyle Most of them told that there have only two or three dresses. Most of them were wearing very dirty and old dress. And most of them had no any footwear. Majority of the percipients are only two or three dresses. Their hair’s color was gray and dirty. They also mentioned that they have no one to take care. They have no choice to visit any doctors in the time of illness. Most of them are dependent on other’s treatment. Their
medical treatment depends on the mercy of their sons and relatives as well as daughter in law. Primarily they visit to village KABIRAj

Most of the women mentioned that their daughter-in-law torture them. Most of the women live with their son’s house. So, they have no right to live on their own style and wishes. As a part of social values, sons do not pressurize their parents to leave the house but often signalize them that they are countered as burden.

To know about their role during disaster, this issue was raised. They told that they did not perform any roles for the most affected people by disaster but they performed role for their family. During disaster had to live in their own house but sometimes they went to cycloneshelter. They also answered that though there are some cyclone shelter but it’s too far to go. During disaster collect their food in their own way.

It is also mentioned that they do not get any chance to participate in education and also decision making in family or community. It is also mentioned that they rarely get chance to exchange their view and ideas. Neighbors invite them in various social and religious occasions. During disaster all the members of their community help each other.

They also mentioned that these feelings with each other help them to overcome many problems. But it is a matter of sorrow that, they are dishonored in most cases by the society people even by their sons, daughters. They have no chance to give opinion relating to the welfare of them in respect of living in the society. Their roles in educational, religious and socio-economic activities are few. They also said that they have to suffer a lot during disaster due to scarcity of foods, water, medicine and shelter. They also told that most of the time they could not get any news of disaster.

If they get any news, they can survive more. When they were asked about the role of Go and NGOs, they replied that during disasters they got some financial and relief from GO and NGOs. Most of them mentioned that they got 15000 to 20000 taka after disasters for repairing their house. They mentioned some NGOs named JAGO NARI, SONGGRAM, GRAMEEN BANK, UTSO etc. They also mentioned the help of Government. They also remembered that they got relief. They also told their dissatisfaction about the corruption of local representative of Government. They mentioned that most of the money and relief which were allotted for them were divided by the local government.
All of the participants told that have been suffering from various kinds of diseases during and after disaster. They also face many regular diseases due to age such as reduced hearing, eyesight, headache, waist pain, back pain. Most of the time, they cannot visit any doctors. They also mentioned food problems. The houses they lived are not secured.

And they also mentioned that during disaster they cannot move anywhere due to unavailable transport facilities. They also have not sufficient cloths to wear. Most of them are tortured mentally or physically by their family environment. They recommended that good food, free health treatment, decreasing price of daily foods and allowances for the widow and the older women. They also recommended that GO and NGOs should come forward to solve their problem and the wellbeing of older people in all respect.

Chapter Six

Review of the Findings
Review of the Findings

The study shows that most of the participants belong to Muslim community and 2 others belong to Hindu and Rakhain community. Participants are the symbol of older people in our society who has horrible experiences with many disasters. Most of them are almost 60 years old and some of them are above 60 years old. All the participants live at Taltali upazilla in Barguna districts. Most of the women are illiterate. Most of the women live in village. Most of them are busy with house kipping and only three participants do work for livelihood.

Two FGDs were conducted. One FGD consists of 11 members and others are 15 members. Ten cases were studied of older women. Though religious distribution of the people in the country is different from study statistics but the study area covers Muslim, Hindu and Rakhain community. The ratio of these groups was found in the above mentioned way. So, the mode of the participants is Muslim.

Most of the women are under Primary school certificate (PSC) AND one participant is HSC passed. Most of them had no formal education. They went to 'Maqtab' a religious educational institution for gaining religious knowledge and reading holy Quran. Most of the participant got early marriage. The school time of the participants was near about liberation war of Bangladesh happened in 1971. The literacy rate of Bangladesh was very poor at that time. So, high literacy rate of the participants was not found in the study both in case study and FGDs. It is also significant that the older are not aware of their education at all.

Most of the women had lugubrious experiences with many disasters. Mainly they were affected by cyclone occurred in 1991, Sidr in 2007, Aila in 2009 and Mahasen in 2013. Most of the women lost their property. Almost everyone lost their house during Sidr. They also lost their crops, grocery shop and livestock’s .Actually Sidr did much harm to them. Most of them lost their main source of income.

Sidr was the most catastrophic disaster they had ever seen. They had a great economic loss and property loss. Most of the women lost their husbands, children, grandchildren and patents. During disaster most of the women didn’t hear any danger signal. They also mentioned that they did not go to the cyclone shelter due to insufficient number of shelter and vehicles. It is very significant that women are the most vulnerable part during disaster. They can’t go to the cyclone shelter due to lack of number of shelter place. Though it was a very remote area there are shortage of vehicles, the conditions of barrage and road are very poor. The collected data
indicate that women are the most vulnerable part during disaster. Most of them lost their near and dear ones. When literature was reviewed, this problem was also found. (Islam:2012)

After disaster, though they got some relief but it was not sufficient for her family. After disaster, they had to eat banana’s tree and sometimes had to strive because there was a lot scarcity of food. For that reason her physical as well as mental condition became so bad. She also told that they had a great economic loss during that cyclone. They lost her house and became homeless. it is very common phenomenon that most of the older women had to strive during disaster. There are badly scarcity of food and cloths. They also suffer from many diseases after disasters. No one left to take care of the older women. The collected data indicate that after disaster they face different kinds of economic and physical problem.

Six partisans of case study and thirteen of the FGDs mentioned that they help each other during disaster such as cooking food together, making new house, nursing the affected people etc. The collected data indicate that social bonding and social norms, values are strong. Their social bonding was also found in literature.

Eight participants in case study are belonging to joint family and rest of them in nuclear family. In the FGDs 6 percipients live in a joint family but 2 live in relative house. Most of their husband is alive. Most of them live in joint family and one participant live in single family. Their main occupation is housekeeping and rearing their grandchildren’s. They are mainly dependent on their children as well as others. These data indicate that there is a strong familial bonding among the people and they are so helpful as well as sacrificing character.

Most of them lost her Katcha house (made of muddy) caused by Aila in 2009. most of the participants lost their earning members of the family. They also lost their little wealth and become helpless. Most of them didn’t hear any news before disaster and three of them mentioned that they hear from Red Crescent’s volunteer. So, it was very significant information that most of the women don’t get any news before disaster.

Their physical condition is not well. Though they are not so strong but they have to do work for living. Most of them borrow money from relatives, neighbors and well-known persons in the society when they become helpless. It shows the poor and the vulnerable situation of women. Actually older women are the most helpless portion of the society.

Participants have some basic needs for survival. Most of them mention that food, cloth, shelter, etc. are basic human needs. Most of the participants take 'pantavat' with chili and salt as
breakfast; rice with vegetable and dal as lunch and same food menu as dinner. They have rare chance to take meat or big fish in regular food menu. She takes improved diet in very few time of a year. It also shows that the older women can’t get proper nutritious food and they become physically ill.

Most of them have only two dresses which are not sufficient. They have to depend on others for new dresses. Sometimes, they get warm clothes from the rich people of the society. Most of the time in a year, they feel physically sick and sometimes she faces some physical problems such as, fever, weakness and back pain etc. She depends on village pharmacy and Kabiraj in the time of illness. These above condition show that their physical conditions are very poor and there is lack of proper treatment. When literature was reviewed, this poor situation of women’s medication was found.

Most of them pass their leisure period gossiping with their neighbors and grandchildren. They also perform religious activities regularly. As they are not financially well, her neighbors do not give importance on any matter. Sometimes, they are mentally rebuked by them. It indicates that the mental condition of older women is not so good. There is lack of system of entertainment and they also become mentally depressed due to loneliness.

They are totally illiterate about social development policy and planning relating to the welfare of the elderly. They have no chance to take part in social service activities and social reform movement. They do not take part in socio-cultural and religious activities actively. This above information indicates that there is no accessibility of older women in power structure and decision making.

Though they are poor, most of the older women are not included in government old age allowances. Their husband who is also a poor older man but he doesn’t get any allowances. So, it is very clear that most of the women are very poor and above 60 years old but they don’t get allowances.

Most of the participants mentioned that during disasters they got some financial and relief from GO and NGOs. They mentioned some NGOs named JAGO NARI, SONGGRAM, GRAMEEN BANK, UTSO etc. 15 participants got 15000 taka and seven participants got 20000 taka after disaster by Government .they also tell their dissatisfaction about the corruption of local representative of Government. They mentioned that most of the money and relief which are
allotted for them are divided by the local government. This data indicate that most of the money and relief are divided by local political leader and local NGOs have some effective role.

All of the participants responded that they have been suffering from different types of physical illness such as less eye-sight, reduced hearing, waist pain and cold due to old age. Most of the time, they cannot visit doctors due to financial problems. It is observed that most the older women are mentally rebuked by their daughter-in-law but they are not willing to focus family matters outside the family environment. The participants recommended that free medical treatment, reduce price of daily foods, rehabilitation program for older women, positive outlook towards the older women and empathetic behavior of the family members with the elderly are important. They also want that Government and NGOs should come forward for the well being of older women in all respect. This data indicate that the older women need more care and all the people should come forward to help them
Recommendation

Bangladesh is one of the most disaster prone countries in the world. Only an efficient disaster prevention and management system can reduce human sufferings here. The disabled, elderly people, women and children should get special attention during flood. But the provision of relief and rehabilitation services for them remains poor. Women and children are the worst sufferers during flood, river erosion, storm, cyclone/disaster, tornado, drought, earthquake, landslides etc. They have to face countless difficulties/problems, live inhumanly and struggle to survive even at the cost of one’s life! For example it is not acceptable for a girl of marriageable age to seek shelter in somebody’s house. Government and some NGOs/INGOs are trying to reduce the vulnerability of people of coastal areas. It is noticed that proper policy, planning and good governance can also reduce any sort of hazard and can increase the socio-economic situation through different micro credit schemes in collaboration of government, non-government and international agencies. In this regard, following recommendations can be made for mitigating and reducing sufferings of the coastal people:

- The older women should provide food, social security and shelter in disaster affected area.
- The ethnic community of disaster prone area should be provided more income generation programs like poultry and handloom.
- By increasing existing old age allowance.
- Women should be given priorities in all policies, planning and programs related to disaster management.
- Emergency response systems and supporting livelihood strategies should be taken based on local realities, especially for women and children.
- Construction of shelters should be well constructed with multi-purpose use and there should be separated facilities for women. Shelters should be constructed at a place where access of women will be direct and easy during the disaster. Transport networks should be developed to expedite movement and rescue people and other things during disaster.
- More cyclone shelter should be constructed.
- Facilities should be made to preserve sufficient amount of drinking water during and after disaster.
- Community-based awareness raising programs should be strengthened. Seminar, symposium and workshop will have to be arranged in coastal areas and ensure the
participation of women in these programs. Disaster mitigation strategies and disaster preparedness techniques should be included in school, college and university level curriculum. Besides, short course, diploma and training programs have to be introduced both in urban and rural areas.

- GO and NGOs should take infrastructure development and income generating activities for older women in the coastal belts.
- Local administration should take strong initiatives to avoid the events of theft, robbery, and hijacking, torturing women and other unexpected events during disasters.
- It must be ensured that women have access to education and training programs so that they can implement adaptation and coping strategies.
- To strengthen the status of the older family with normal empowerment; the older people should be recognized as senior citizen in the country.
- Older women are now the senior citizen of our country. So, proper honor should be given to them.
- More and more research should be conducted to find out the coping and mitigation strategy, appropriate housing structures and other relevant issues for coastal areas of Bangladesh.

In fine, we conclude that Bangladesh is the worst victim of climate change and global warming in the world. The climate is becoming more variable and creating additional risks. Women are becoming more vulnerable in this changing situation. Actually the social, economic, cultural and political contexts of Bangladesh’s women make them overall more vulnerable to climate change and global warming. Women have to face countless difficulties/problems, live inhumanly and struggle to survive even at the cost of one’s life! For example it is not acceptable for a girl of marriageable age to seek shelter in somebody’s house. It is also impossible for women to disregard their inhibitions and go to latrines, which are open to all.

Poor women suffer from lack of food, clothing and shelter. Many families/women become homeless. Unemployed men often sat idle or move elsewhere leaving their household members behind. Women, who are the household based workers, have to take responsibilities for protecting their houses, children, and other members of the family, livestock and belongings. Traditional gender specific work such as carrying water, cooking, caring for children and
animals become so difficult, lives at risk for women. Especially while traveling during floods the shari is like a death trap for women. Often there is no alternative because there are no men around to help and even if there are, they do not assist with women’s work because of the powerful ideas of gendered division of labor (Mahbuba Nasreen, 2000).

During the flood or disaster poor widow women and elderly people confine to their houses for many days and have to drink floodwater. Because they have neither the physical strength to reach tube wells, nor the economic means to hire a boat to collect clean water! Poor women with only one shari (clothe) are often obliged to remain in wet clothe for most of the day for the lack of private space to dry off. Domestic violence increases, husbands beat their wives and children when food-supply run out in flood-stricken households! So, emphasize should also be placed on nutrition/ nutritious food for children, pregnant women and lactating mothers. In case of difficulty to send pregnant women to the hospital, Safe Delivery Kit can be supplied to them. Local TBA (Traditional Birth Attendant), volunteers/ health workers can also help those women to reach the hospital/clinic or for a safe delivery.

In this study, the researcher has tried to find out the range of women’s vulnerability in coastal areas during and after disasters and tried to know their coping strategies. From these findings, it can be easily said that though their coping strategies have been recognized world. In the context of the above stated issues, it can be said that the authority and the implementing agency must ensure women’s participation in every planning and developmental programs.
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