

QUALITATIVE MONITORING OF SHIREE INTERVENTIONS: CMS5 INTERVENTION  
TRACKING- CMS5 End-line

REFLECTIONS ON THE INTERVENTION (3) FOR BIDHAN CHANDRA SHAHA

Shiree Q2 Research on Extreme Poverty in Bangladesh				
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<b>CMS 1 Reference</b>	326-9898-90157 (Household ID from CMS1)			
<b>Interviewee name</b>	<b>Name:</b> Bidhan	<b>Sex:</b> Male	<b>Age:</b> 41 (Y)	<b>Ethnicity/Religion:</b> Hindu
<b>Union, Upazila and Zila</b>	<b>Current Address:</b> Shahjadpur, Dhaka		<b>Permanent Address:</b>	
<b>Date of Interview</b>	April 11, 2015			
<b>Well-being Status</b>	<b>April 2012</b> (Just before the intervention)	<b>April 2013</b> (after 12 months of intervention)  Working Extreme Poor (2)	<b>April 2015</b> (after 36 months of intervention)	
	Working Extreme Poor (2)		Moderate Poor (3)	
<b>Livelihoods before and after the intervention</b>	<b>1. Bidhan (38 Y)</b> 1. Dependent on begging/charity 2. Dependent on brother, sister (housemaid) and brother in law (brother) 3. Aged mother managed a portion of living cost through begging.	<b>1. Bidhan (39 Y)</b>  Wan a barber shop (100-150 tk daily) <b>2. Sister (38 Y)</b>  No longer working as a housemaid <b>3. Brother in low (45 Y)</b>  Working in the barber shop won by Bidhan <b>4. Mother</b>  No longer live in Dhaka, moved to village	<b>1. Bidhan (41 Y)</b>  Wan a barber shop (200-250 tk daily) <b>2. Sister (39 Y)</b>  No longer working as a housemaid <b>3. Brother in low (46 Y)</b>  Working in the barber shop won by Bidhan <b>4. Mother</b>  No longer live in Dhaka, moved to village	

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		<b>5. Brother (40 Y)</b> Brother also moved to village to get settled with family	<b>5. Brother (42 Y)</b> Brother also moved to village to get settled with family
<b>Productive asset of IGA owned working capital</b>	None	Barber shop (working capital, 140000; borrowed 20000 BDT from cousin)	Barber shop (working capital, 35000)
<b>Keywords</b>	Disability, Income generation activities, Guillain–Barré Syndrome		

### **INTRODUCTION:**

Bidhan Chandra Shaha was born in a poor Hindu family in Bhola, a coastal district in Bangladesh, in 1973. His father worked in a private barbershop as a hairdresser. There were members seven in the family and his father was inherited little family property – only a few decimal lands. During his childhood days, he began to work with his father in salon as it was his ancestral occupation. He could not complete his primary schooling due to poverty. In 1988, they encountered a big natural hazard while their little property (home) was severely damaged by flood and river erosion; and therefore, they were forced to move Dhaka – the capital city of Bangladesh for their survival. In 1992, he started to working in a salon and was contributing to his family along with his father and elder brother. That time the family earned tk. 1500- 3500 monthly on an average. However, in 1997 while he was 21 years old, he was diagnosed with **Guillain–Barré Syndrome (GBS)** virus – disorder in which the body's immune system attacks part of the peripheral nervous system. In the meantime, his physical condition worsened and he became unable to work. Thus, his family income declined. His father went back to their village home and started working as a barber. His elder brother got married and moved to another residence. The health condition of Bithan got worst as the lower part of his body became paralyzed and he became fully dependent with others to move. Even, he cannot move his legs and hands. He cannot move his wheel chair. In this context, in 2009, Bidhan was selected as a shire-project beneficiary under ADD interventions and was provided financial support. He was provided financial support of

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BDT 19000 for operating a business. He invested that money in salon shop with his sister-in-law. Under this mutuality, he is being given BDT 500 to Deposit Premium Scheme account (DPS) in each month. Besides, he has been being looking after by his sister family under the condition.

### WELL-BEING STATUS OF THE FAMILY AT THE ENDLINE:

The report from last ROI in 2012, we found that the family was enjoying “working extreme” status as a consequence of his prolongs illness. His mother started begging to make their survival. Their family income dropped notably. Even, he attempted to commit suicide to finish his lifelong miseries forever but he failed. He did not have any ability to work. The regular diets were also poor in quality. Presently, their family well-being has been improved a bit. Now they belong to “moderately poor status category (3)” as the family has improved the regular diet with income. According to him **“we have improved our living a little, beforehand we used to live in slum. Now, we are living in building although it is tiny. Beside we have improved our diet. We don’t skip meal or don’t letting ourselves undergo hunger”** In below we provided a chart describing the family well-being based on three elements – diet, household assets and employment.

Rank	Status
Diet	Took 3 meals per day comprising rice, vegetable, fish, egg, and meat. The most common food items are rice and vegetable. They took fish twice in a week and meat/chicken once in a month.
Employment	He is physically disabled; therefore, are not able to work. He owns a barber shop. He gets a regular income from that shop.
Household assets	They have some household assets (furniture, electronic devices). A DPS with Bangladesh Agriculture Bank. They have some household utensils.

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### IDENTIFICATION OF VULNERABILITY SOURCES AND LEVEL OF EXPOSURE TO/PREPAREDNESS FOR HAZARD:

**Recent turning points:** Recently, Bidhan family has faced some hazardous events as a consequence of political turmoil in Bangladesh in since January 2015. As we mentioned already, his parents are living in their village home in Bhola, that political climate affected badly on them (parents). In March 2015, some unidentified political activists set fire at their home following the clashes between two political parties in that area. They usually become vulnerable to political clash as a minority (Hindu). During the recent political turmoil in Bangladesh, a group of political activists attacked Hindu community across that region according to him. Some of the political activists attacked their homes along with their neighbor at night. They set fire to their house and destroyed valuable belongings including hut, household's assets etc. Although Bidhan don't live with his parents in Bhola, such events produced intangible pains, damaged household assets and increased tension. Now, his parents are living under open sky. The local political leaders and government officials are committing to helping although it remains far. According to him ***"My parents are most vulnerable now. They do not have any income, shelter and food. They are moving people to people to seek some helps to overcome their vulnerabilities."*** However, he doesn't believe that political leaders and government agencies will able to do something better to improve the situation. He anticipates that the allocation from government's end will be digesting by both political leader and civil bureaucrats. Only little portion of that allocation might be offered to them.

**Vulnerabilities:** According to the beneficiary (Bidhan), his health pushes him in a lifelong vulnerable situation. As the doctor mentioned he has been suffering from a rare disease, the likelihood of curing from this is low, he believes. As the consequence, his physical condition will be getting deteriorating if proper treatments are not sought. As it is rare diseased, the treatment cost goes high that remains beyond his capacity. He has been suffering from this problem over the past years. He could not adhere to doctor's

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prescription or even could not comply with referral order by the doctor due to the financial inabilities. He stated **“I am poor a person. I could not always visit doctor. Sometimes I managed medicine that were prescribed and sometimes not”** Besides, the recent arson attack to his parents' house in his village home exacerbated vulnerability although he is not living with his parents. This will cost lot according to him to restore the condition and family wellbeing. Additionally, he is a bit worried about his future days in case his sister will be aged more and his nephew will leave him.

***Awareness of the household members to gauge the vulnerabilities:*** According to his statement he is aware about the worst consequences of his poor health. However, very little scope remains in his hands to overcome this situation as his health condition will be deteriorating by coming days. He can see no hope to improve this condition.

### **PROGNOSIS FOR FUTURE RESILIENCE:**

Although the economic capacity of Bidhan has improved over the last 2 years, the health got worst. In future, the condition might be deteriorated if quick initiatives are not taken. However, according the conversation, the doctor informed that it will require a huge amount of money for high lever quality care. Even, this type care is not available in all health facilities. In this context, he has very little chances to avail this care and there little scope of recovering from his illness. The vulnerabilities might be broaden in coming days as his will be losing all most all physical strength/capacity and even will unable to move his hand without others' assistance. His nephew takes care of him in greater part of the day. He is going to take admission into a college this year. If so, he (nephew) will have little scope of taking care for him, he informed. In that kind of instance, he will be more vulnerable and will have little ability of thriving competence to face the adversity circumstances. Overall, the likelihood of future resilience seems to be very low due to his prolong illness. Considering all context, we have developed a table to describe the future resilience and possible coping up mechanism.

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**Resilience and coping up mechanism:**

<b>Name: Bidhan Chandra Shaha</b>				
<b>SI</b>	<b>Type of hazard</b>	<b>Likelihoods /Frequency</b>	<b>Impacts</b>	<b>Coping strategies</b>
01	Physical disability	High	High	<ul style="list-style-type: none"> <li>▪ Try to maintain good relation with sister and sister-in-law so that they look after him.</li> <li>▪ However, believe that his health condition will be getting worsen according to doctor's opinion.</li> <li>▪ Simultaneously believe that God will recover her</li> </ul>
02	Village houses were burn out by the political activists in March 2015 while political unrest underway	High	High	<ul style="list-style-type: none"> <li>▪ Seeking help from local elites.</li> <li>▪ Communicate with government agencies to get compensations.</li> </ul>
03	Hortal/ Blockade (Anticipate that political program (possession, meeting, etc.) may affect their livelihood as his salon were attacked in 2013 while to political groups get into clash)	Moderate	Moderate	<ul style="list-style-type: none"> <li>▪ Try to maintain good relation with local political leaders/activist</li> <li>▪ Be cautious while political unrest is underway. Try to shut up the salon while unrest going on.</li> </ul>
04	Family members (sister, nephew) may leave him.	moderate	moderate	<ul style="list-style-type: none"> <li>▪ Try to maintain business relation with them so that they can value him.</li> </ul>

**ANALYSIS:**

Bithan's well-being is highly determined by his health. He has developed a rare disease which requires long term high quality care. However, he cannot afford that care due

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the financial constraint. Although he has very good social network; therefore, he can manage some earning i.e. kind or cash to survive, it is inadequate for his treatment. The family income has increased notably over the past years as they have been provided program support (they invest that money in their saloon) but the health condition has deteriorated. If we assess the household well-being on the basis of dietary intake, employment/earning and household/financial assets; we see his well-being went up. However, he is getting closed to greater vulnerability even death. In future the vulnerability will increase as his health is getting worst. Overall, he has very little resilience to face those vulnerabilities. We have presented an analysis taking into account of the factors under which he is living.

**SWOT Analysis**

<b>Name: Bidhan Chandra Shaha</b>				
<b>SI</b>	<b>Strengths</b>	<b>Weakness</b>	<b>Opportunities</b>	<b>Threats</b>
01	Optimistic to life	Life long illness/disability	Social, people love him and sometimes help financially	His health condition is deteriorated day by day
02	Intelligent (though physically inactive, he can understand business well)	Highly dependent with others (family members)	Till now, his sister and nephew help lot to let him survive	Nephew will be grown up and will be engaged in his own business. Then he (nephew) unlikely manage to look after him

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INTERVENTION MAP FOR BIDHAN (41) FROM DATE OF INTERVENTION

