

International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

Impact of COVID-19 on Mental Stress of Climate Migrant Older Women in Dhaka City Slum

Karisma Amjad

PhD Fellow, Institute of Social Welfare and Research, University of Dhaka. Bangladesh. Doi : <u>https://doi.org/10.55248/gengpi.5.0924.2402</u>

ABSTRACT

In Bangladesh, older people are one of the most vulnerable members of society to COVID-19. Despite the fact that mental health is an essential component of overall health and well-being, little is known regarding the impact of the COVID-19 epidemic on the mental health of vulnerable populations such as slum dwellers. This research explores the state of the impact of COVID-19 on the mental stress of climate migrant older women in the urban slums of Dhaka city. This Research conducted both qualitative and quantitative study to investigate the livelihood of older women slum dwellers after climate migration concerning the impact of COVID-19. All of the older women who participated in this study were over the age of 60. The study followed convenience sampling; 30 respondents were interviewed for in-depth interviews for qualitative information, and 60 respondents were selected for quantitative data by survey. The researcher used the Dhaka Stress Scale-Adult (DSS-A) to measure the status of climate migrant older women in Dhaka city slums. Physical well-being is linked to mental well-being. This study provides vital information for building better mental health care and prevention initiatives for older climate migrant women in the slums of Dhaka and elsewhere throughout the world.

Keywords: Covid-19, mental stress, climate migrant, older women, slum.

Introduction

A new coronavirus has spread globally since the first recorded human infections were noted in December 2019. The virus was identified as the coronavirus of severe acute respiratory syndrome 2 (SARS-CoV-2) (Wu & McGoogan, 2020). In early 2020, the coronavirus disease-19 (COVID-19) took on global proportions, and in March, the World Health Organization declared a state of a pandemic (Shahid, 2020). The mortality rate is around 2 to 3% for healthy adults. However, for the elderly, the propensity is three times higher (Banerjee, 2020). Studies suggest that the elderly population may be more severely affected by COVID-19 infections because the virus can worsen symptoms from pre-existing conditions/ diseases (Brown, 2020). In addition to the risks involving frequent co-morbidities in the elderly, such as diabetes and hypertension, psychiatric disorders can be precipitated and accentuated and can increase the severity of COVID-19 (Roberta et al., 2021).

Present situation of the elderly during COVID-19

The older population is now growing rapidly in Bangladesh. Of the country's population, 8.2 percent are aged 60 years and above, and 5.2 percent are 65+ years old (BBS, 2020). Bangladesh is now entering into the intermediate stage of population ageing. This is good in the sense that the population growth will be under control within this period, but at the same time, it is a matter of concern because the country will stop reaping its demographic dividend. In this context, the preparation to deal with such a large share of the older population is very crucial (The Daily Star, 2020). The main causes of vulnerability of the older population are medical, economic, emotional, and social issues, which are concerns not only for the individual or family but also for the community. The socio-economic changes, industrialisation, urbanisation, higher aspiration among youth and larger workforce participation among women are gradually breaking the traditional joint family structure. The scenario of support for the elderly within the family is thus changing with the change of the context (Flora, 2011). Especially in this pandemic situation, lack of knowledge regarding the symptoms, mode of transmission, and protective behaviors is prominent among older persons, who may have a profound impact on their overall health outcome in the present context (Rabbani et al., 2020). Besides, a rise in women's experience of emotional and physical violence since the lockdown in Bangladesh indicates a concern about the likelihood of violence against older women too in the present context (Hamadani et al., 2020).

Physical and Mental Health of Elderly Women

In the context of Bangladesh, the majority of older persons in Bangladesh are suffering from one or more chronic diseases such as cardiovascular and respiratory diseases, diabetes or other conditions (Kabir et al., 2013). Older persons are one of the most vulnerable groups to COVID-19 in Bangladesh

(WHO, 2020). The current situation may also hinder and delay regular visits for patients with mental disorders, cancer, stroke, and diabetes who need routine outpatient visits, and this in turn may intensify the severity of their diseases or lead to severe disabilities (Habib, 2020). The mental health status of older persons in Bangladesh is also being impacted during the COVID-19 period because of the uncertainty of the situation and associated issues such as social isolation (Rahman et al, 2020a). Older people with psychiatric disorders are in a more risk of difficulties in dealing with the COVID-19 situation (Rahman et al., 2020b).

Objectives of the study

The aim of the study is to explore the situation of the impact of COVID-19 on the mental stress of climate migrant older women in urban slum of Dhaka city. Following the aim the study specially addresses on the following objectives

- 1. Socio-demographic information of the respondents (gender, age, education, and occupation)
- 2. Psycho-social challenges associated with psychological distress (stress and level of stress) and
- 3. Livelihood impact (going outside for job, receiving relief and frequency, help from others, impacts on livelihood, and level of impact).

Methodology

This study was conducted across Bangladesh, targeting a lower-income group of people (mostly daily income earners) in Dhaka slum areas. The study was carried out from September to December 2021. General information has been collected from the Korail slums Mohakhali area of Dhaka, where people migrated for climate change and have been selected as the research area. The researcher figured out that Korail (Photo 01) was the biggest and densest slum in Dhaka city. The researcher has been reassured that Korail would be a good area to look for various types of climate migrants who had recently moved due to climate change and some of them who migrated a long time ago, especially those impacted by Cyclone Sidr and Cyclone Aila, Cyclone Mohashen, floods, riverbank erosion, sea level rise, drought and soil salinity. This was beneficial, and the researcher eventually conducted studies in the Korail slum.



Photo 01: Study area of the research: Korail slum. Source: Daily Star

This Research conducted both qualitative and quantitative study to investigate the livelihood of older women slum dwellers after climate migration concerning the impact of COVID-19. All of the older women who participated in this study were over the age of 60. The study followed convenience sampling; 30 respondents were interviewed for in-depth interviews for qualitative information, and 60 respondents were selected for quantitative data by survey. A pre-tested, modified, semi-structured interview schedule was designed based on the mental stress and the livelihoods of the climate migrant older women in Dhaka City. The researcher used the Dhaka Stress Scale-Adult (DSS-A) to measure the status of climate migrant older women in Dhaka city slums. Data were checked, cleaned and edited properly before entry and analysis.

Finding of the Study

Demographic and Socio-economic Conditions of Elderly

The elderly women of Bangladesh are generally taken care of by family and society. In Bangladesh adult offspring, sons are considered the main source of security and economic support to their parents in old age. However, rapid socio-economic and demographic transitions, mass poverty, changing social and religious values, frequent natural disasters, random migration, permanently leaving the place of origin, increased involvement of women in the job market, and other factors have broken down the traditional extended family and community care system.

Most of the climate migrant elderly women have a minimum education of primary level. Some of them have no institutional background. Few of them have educational qualifications from Motob.

Most of the climate migrant elderly women live with their children. Some live with their sons, daughters-in-law, and grandchildren. A few live with their spouses. However, only a few climate migrant older women live alone in rented room in the slum.

In this study, it has been found that most of the climate migrant older women need to depend on their own income to fulfill their basic human needs. All have been working as housewife not throughout their lives. Most of them have worked as housewife in their old age. However, few of them worked as housemaid, and few of them worked in garment sectors during their youthful stage of life. Except for five climate migrant elderly women, five climate migrant elderly women were involved in bagging, and, four of them worked as housemaids as professionals; three of them sold vegetables or daily necessary products, and one of them removed the levels of waste drinking bottles.

Moreover, the characteristics of lower-income people in Bangladesh are also evident from the respondents' occupation status. A large portion of them (unemployed and homemakers) had no income. About 21.66% of them were involved in daily work. Among the respondents, the greatest percentage, 75% of the respondents (unemployed), get help from families (children/grandchildren) for living. The rest (3.33%) get help from an old age allowance to enroll in living.

Impact of COVID-19 on Livelihoods

The government of Bangladesh imposed statewide general holidays and lockdowns from the middle of March 2020, which had a negative impact on the livelihoods of the general public, especially on lower-income people who usually have a hand-to-mouth existence. This study found that most of the respondents' livelihoods were affected by the COVID-19 outbreak. For most of the respondents, the level of livelihood impact was high to extreme. This level of impact indicates that lower-income people were getting more marginalized than before and were becoming members of the hardcore poor due to COVID-19.

There were some livelihood Impact Issues for the Respondents because of the COVID-19 outbreak. During this period, it was impossible to go outside for work during holidays, and they did not receive any relief from the government during general holidays/lockdowns. Some of the respondents did not get help from anyone else. Most of the respondents' livelihoods were affected by COVID-19. Most of the respondents feel stressed thinking about the outbreak of COVID-19 and think that their lives have become panicked due to COVID-19.

A 63-year-old beggar stated,

"I live in a slum. My husband died during river erosion in long before. Me and my son and daughter leave our homeland because of losing our homeland. My rickshaw-puller daughter's husband was jobless and I did not go outside for begging during lockdown period. I could earn 200-300 Taka and get some rice daily before the coronavirus outbreak, but I had no income due to the lockdown situation. We were not prepared for this situation at all. We have borrowed some money from others. We do not have any way to go back to our place of origin. We cannot think about our future and are worried about this so much. How can we survive? Our neighbors are also in the same condition; everyone is tense about their livelihood. Coronavirus made us poorer and destroyed all of our future."

As the country's lockdown had continued for about nearly 3 months, many poor people were worried about how they would manage their family expenses. A housemaid (60 years old) said,

"Me and my rickshaw-puller husband are jobless now. We have no income due to the lockdown situation, already took loan from an area samiti for survival. No way for as to go back our homeland. We cannot take much food in our family meals; we had no option but die from hunger if this condition had remain for a few more months."

Lockdown and Peoples' Livelihood

Although the government declared general holidays and lockdown asking the public to stay at home in order to control the spread of COVID-19, needy people could not follow this restriction. As Bangladesh is a poverty-stricken country, the life of the poor was vulnerable due to the lockdown situation. A few days after the general holidays/lockdown, the public started to move outside in search of a means of livelihood.

We found that 21.66% of respondents went outside every day for work, and another 6.33% went sometimes. They had no other options except going outside for their livelihood. The rest of the respondents reported staying at home due to health conditions or old age.

A daily earner (63 years old) mentioned,

"During Lockdown, I have no income. Like me, the daily earners and slum people are suffering the most because they have limited choices for their lives and livelihoods, and they are facing many difficulties nowadays. So, many people are compelled to go outside to earn a minimum income. An empty stomach does not listen to anything; the poor have to move outside as they do not have food in their houses."

Psychological Impact of COVID-19 Outbreak

The attributes of Stress and level of stress were estimated to understand the psychological impact of COVID-19 on lower-income people. According to the in-depth interview, the majority of the respondents (78.6%) said that they were feeling stressed due to the outbreak of COVID-19 and another 11.7% were not sure of COVID-19's stress.

Total Score of Level of Stress	Level of Stress	Frequency	Percentage
150 or less	Mild level of Stress	3	5%
151 to 300	Moderate level of Stress	11	18.33%
301 or more	Severe level of Stress	46	76.66%
Total		N=60	100%

Table: Frequency distribution of the respondents (Climate Migrant Elderly Women) according to the total score of level of Stress (through DSS-A)

Source: field survey, 2021

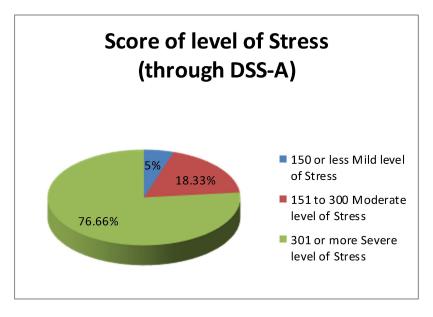


Figure: 1. Sore of the level of Stress (through DSS_A)

According to survey data (by using DSS-A) (Figure 1), 76.66% of the total score of respondents was more than 301 or more. It means they have severe levels of stress. Whereas only 18.33% of respondents have a moderate level of stress, and only 5% of them reported having a mild level of stress.

From qualitative interviews, we understood that many of them lost their jobs and income due to the lockdown, and the borrowed loans from relatives, friends, or others ultimately made them stressed.

The collected data were processed with the help of Excel, and the data were measured with numerical values against each item of the instrument by the Dhaka Stress Scale- Adult (DSS-A), which ranges from 58 variables.

In summary, the MODE results of the climate migrant married women analysis show that a major portion of the respondents collapsed with financial loss and had a large amount of debt. However, there are no specific MODE results for climate migrant elderly women.

In addition, during the study, it has been seen that Death of spouse, Death of a close family member, Extreme job dissatisfaction, Serious physical illness of family members, Financial loss, Having large amount of debt, Loss of any major organ or major surgery, Lack of family support, Discord with neighbor, Retirement, Change in personal habit (sleeping, eating etc.), Lack of recreation, Change in residence, Having only daughters (3 or more) having the frequent factor for climate migrant elderly women of increasing mental stress.

This means that the identified factors are highly important and significantly influence mental stress in climate migrant women of slum dwellers in Bangladesh. The researchers can see this from the value of the respondents' total scores.

Once worked in a garment, now out of profession (61 years old) expressed her feelings in the following way,

"We were suffering from different mental stresses as we had no cash in hand, did not know how we would face the future, and did not even sleep properly at night. It was better to die of coronavirus than hunger. Most people could not have a proper meal; they ate only once daily during the lockdown period. We were scared of our future; if the situation continued, we would not survive. Most poor (people) had been passing a horrible time as most of them borrowed money to manage their everyday meals. Debt is increasing. Only God knows what will happen." A beggar (65 years old climate migrant woman) mentioned,

"The poor people are the worst sufferers as they have become jobless. I am worried too much. There is no end to our sorrows. I used to earn daily before the coronavirus lockdown, but during the lockdown period, I did not have a regular income. As the disease has been spreading widely, will I be able to do my work in the coming days?"

Fear of COVID-19 infection and lack of jobs and income all had made respondents' lives mentally injured.

A slum dweller climate migrant older woman (62 years old) expressed her feelings,

"Corona is a curse from God. In the slum, poor people live in a small house; have no way to maintain social distancing, washing hands again and again, and using gloves. We will be the most infected person as we are poor. Only God can help us. We have very limited access to a doctor or hospital because of our financial constraints."

Discussion

This research looked at the impact of the COVID-19 outbreak on the livelihood and psychological stress of lower-income people in suburban Bangladesh.

This study found that many low-income people in the slums of Bangladesh lost their jobs and income sources due to COVID-19 outbreaks.

An overwhelming percentage of the respondents reported that, due to COVID-19's lockdown, it was hard for them to find a job that would allow them to maintain the daily family expenses.

The effects of the COVID-19 pandemic are not only limited to health but also have a major impact on the social and economic aspects.

It was reported that more than 10 million people would be further marginalized due to the loss of wages and jobs in Bangladesh (Ibrahim, 2020).

Limited economic opportunities, restricted movement, and less scope for meeting relatives, friends, and neighbors from whom they used to seek help in emergencies, fear of being infected by COVID-19, and lack of confirmed support from the government have all made lower-income people's lives vulnerable and stressful.

A large percentage of the respondents of this study were worried about their survival due to the absence of regular income.

The slum people's personal coping skills during the crisis help reduce suffering, ensure mental well-being and rebuild communities.

Recommendations

- Internal migration within Bangladesh also requires more attention, with many migrants facing challenges due to the lack of services, resources and employment opportunities.
- Supportive Adaptation measures to make planned migration of climate induce displacement.
- Underprivileged people in slum areas should be provided with essential government assistance during a particular period.
- Increase community awareness through effective social education, which helps to decrease climate migrant elderly mental stress.
- Sufferings of such people considering recent and future urban hazards need to be integrated during policy preparation.
- Proper honor should be given to older people. This helps to increase the psychological well-being of elderly women.

The physical and psychological well-being of elderly people is strongly associated with interaction, cohesiveness, solidarity and family bonding.

Conclusion

The study highlights the significant impact of the COVID-19 pandemic on the livelihoods and mental health of climate migrant elderly women living in the urban slums of Dhaka, Bangladesh. Loss of income, limited access to healthcare, and the fear of infection have exacerbated stress levels, with the majority experiencing severe mental distress. The breakdown of traditional family support systems due to socio-economic changes has further intensified the vulnerability of this population. To address these challenges, targeted interventions such as social support, mental health services, and economic assistance are essential. Addressing the needs of this marginalized group is crucial for ensuring their overall well-being and resilience in the face of future crises.

References

Banerjee, D. (2020). The COVID-19 outbreak: Crucial role the psychiatrists can play. Asian Journal of Psychiatric, 50, 102014. https://doi.org/10. 1016/j.ajp.2020.102014

Brown, E.E., Kumar, S., Rajji, T.K., Pollock, B.G., Mulsant, B.H. (2020a). Anticipating and mitigating the impact of the COVID-19 pandemic on Alzheimer's disease and related dementias. *American Journal of Geriatric Psychiatry*, 28(7), 12–721. https://doi.org/10.1016/j.jagp.2020.04.010

Bangladesh Bureau of Statistics (BBS). (2020). Report on Bangladesh Sample Vital Statistics 2019 and Monitoring the Situation of Vital Statistics of Bangladesh. Ministry of Planning, Government of Bangladesh.

Flora, M.S. (2011). Ageing: A growing challenge. Bangladesh Medical Journal, 40 (3). https://doi.org/10.3329/bmj.v40i3.18676

Ibrahim, A., Kabir, N., Khan, A.K., Manzur, S.N., Reaz, M.M. (2020). To open or not to open: lockdown exit strategies can help. Accessed May 6, 2020. https://tbsnews.net/analysis/open-or-not-openlockdown-exit-strategies-can-help-76351?fbclid

Kabir, R., Khan, H.T.A., Kabir, M., Rahman, M.T. (2013). Population ageing in Bangladesh and its implication on health care. *European Scientific Journal*, 9 (33), 34-47.

Grolli, R.E., Mingoti, M. E. D., Bertollo, A. G., Luzardo, A.R., Quevedo, J., Réus, G. Z., & Ignácio, Z. M. (2021). Impact of COVID-19 in the Mental Health in Elderly: Psychological and Biological Updates. *Molecular Neurobiology*, *58*, 1905-1916. https://doi.org/10.1007/s12035-020-02249-x

Habib, S.A., (2020). COVID-19 Pandemic and Older People in Bangladesh. Medical Journal, 2, 83-84. https://doi.org/10.2991/dsahmj.k.200630.001.

Hamadani, J.D., Hasan, M., I., Baldi, A.J., Hossain, S.J., Shiraji, S., Bhuiyan, M.S.A. (2020). Immediate impact of stay-at-home orders to control COVID-19 transmission on socioeconomic conditions, food insecurity, mental health, and intimate partner violence in Bangladeshi women and their families: an interrupted time series. *The Lancet Global Health*, *8* (11), E1380-E1389.

Rabbani, M. G., Akter, O., Hasan, M.Z., Samad, N., Mahmood, S.S., Joarder, T. (2020). Knowledge, Attitude and Practice towards COVID-19 among people in Bangladesh during the pandemic: a cross-sectional study. MedRxiv. https://doi.org/10.1101/2020.09.22.20198275

Rahman, M.S., Rahman, M.A., Ali, M., Rahman, M.S., Maniruzzaman, M., Yeasmin, M.A. (2020a). Determinants of depressive symptoms among older people in Bangladesh. *Journal of Affective Disorders, 264*, 157–62. DIO:10.1016/j.jad.2019.12.025

Rahman, M.S., Rahman, M.A., Afroze, L., Islam, S.M.S. (2020b). Unmet need for mental care services for older people in Bangladesh during COVID-19 Pandemic. *General Psychiatry*, 33(6): e100294. DIO: 10.1136/gpsych-2020-100294

Shahid, Z., Kalayanamitra, R., & McClafferty, B. (2020). COVID-19 and older adults: what we know. *Journal of the American Geriatrics, 68,* 926-929. https:// doi.org /10.1111/jgs.16472

The Daily Star. (2020). The increasing burden of the elderly in Bangladesh. https://www.thedailystar.net/opinion/news/the-increasing-burden-theelderly-bangladesh-1970349

WHO.(2020).COVID-19 Bangladesh Situation Reports. <u>https://www.who.int/bangladesh/emergencies/coronavirus-disease(covid-19)-update/coronavirus-disease(covid-2019)-bangladesh-situation-reports</u>

Wu Z, McGoogan J.M. (2020). Characteristics of and important lessons from the coronavirus disease 2019 (COVID-19) outbreak in China: summary of a report of 72 314 cases from the Chinese Center for Disease Control and Prevention. JAMA 323:1239-1242. https://doi.org/10.1001/jama.2020.2648