

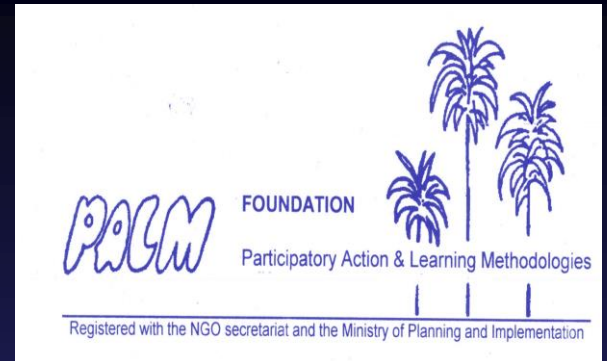
Fostering respect: the remarkable effects of Elders' Clubs in the tea estate sector in Sri Lanka

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and the

PALM Elders' project team:

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- Christina Christopher
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Sri Lanka

Population: about 20 million

Lower middle income country

Ethnic groups:

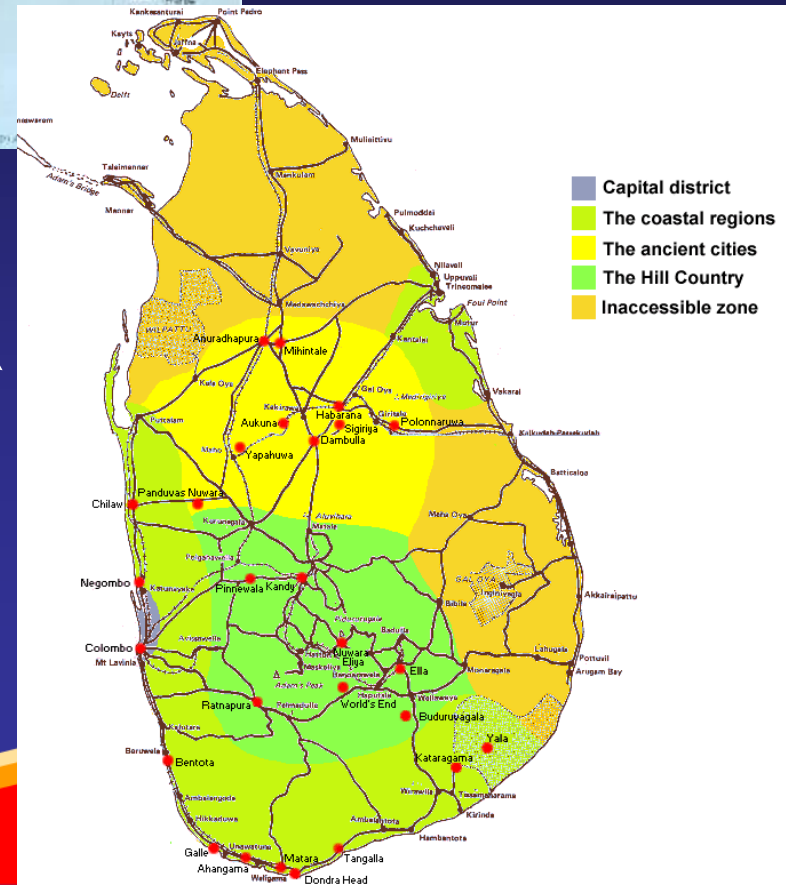
Singhalese 74%

Tamil 18%

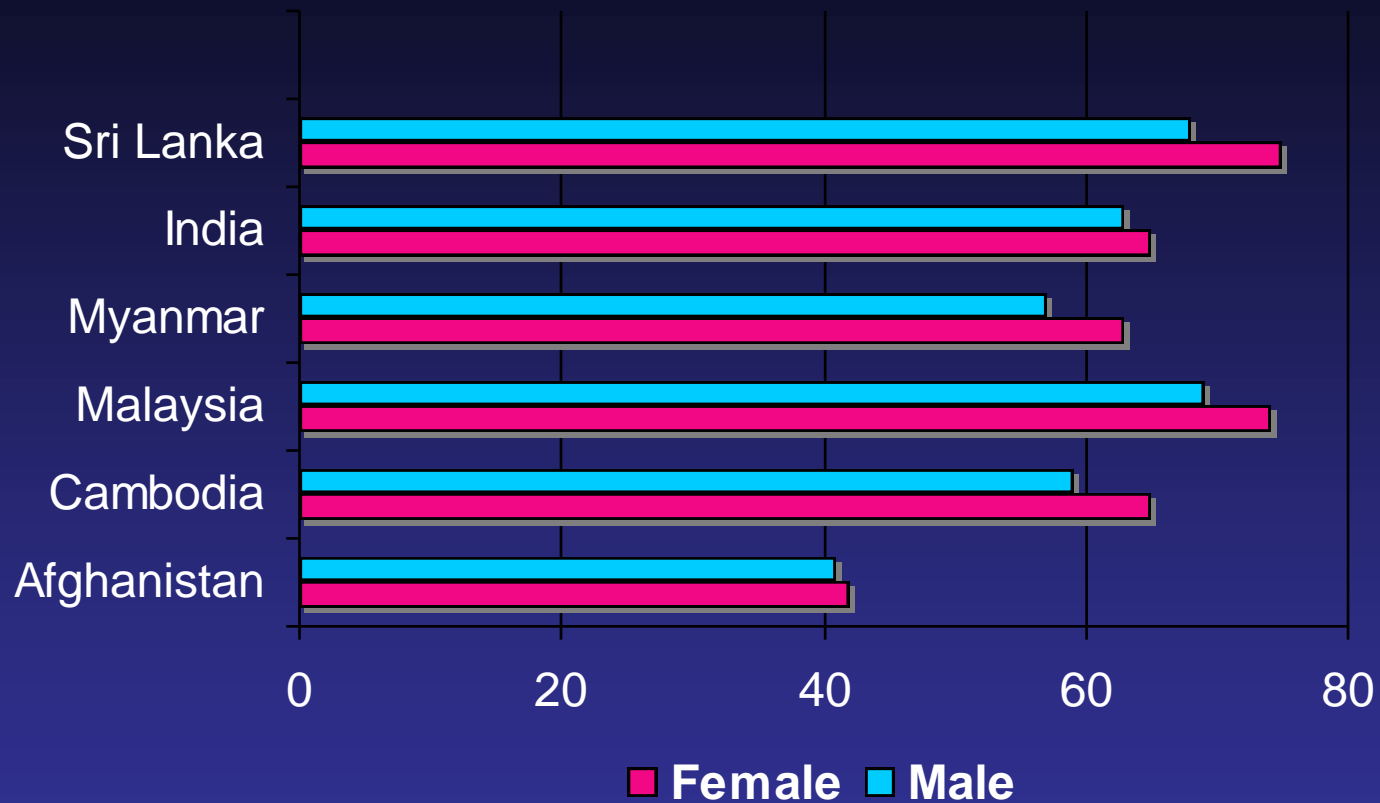
Muslim 7%

Other 1%

Gained independence from Britain in 1948

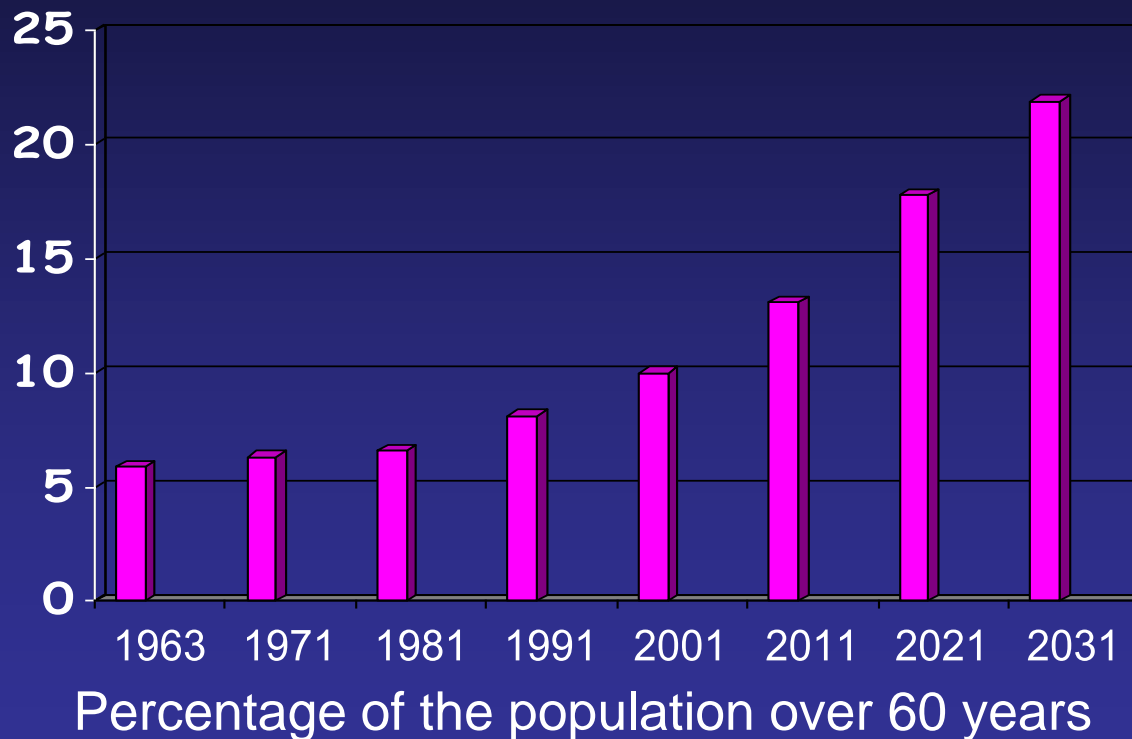


Life expectancy at birth (in years), 2007



Ageing in Sri Lanka

One of the most rapidly ageing countries in the world



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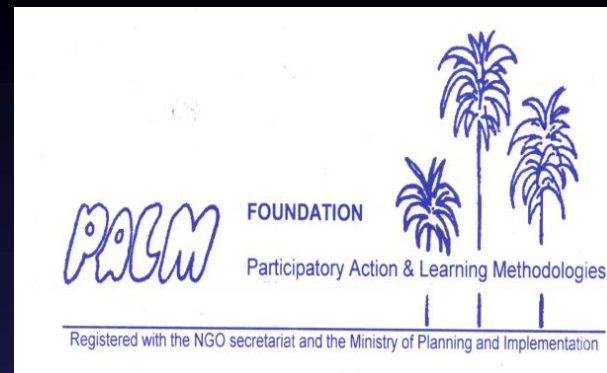
(Sources: Population Censuses and Demographic Surveys 1994 of Depr. of Census and Statistics, Sri Lanka Annual Health Bulletin -2001(2002) Department of Health, Sri Lanka)

Promoting health and well-being of elders in the plantation sector in Nuwara Eliya district

– a collaboration since 2004 between the PALM Foundation and the Burnet Institute, Melbourne, funded by AusAID



PALM Foundation



Based in Nuwara Eliya - founded in 1985

Aims to improve the situation of workers on the tea plantations



Serves about 50,000 people in 10,500 families.

About 4000 (8%) are over 60 years.

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Plantation sector

The tea and rubber plantations have about a million Tamil residents (about 5% of the SL population).

Almost all brought from South India in the 1800s by the British under the 'indenture' system

Some tea workers are from neighbouring Sinhala villages



Holmes

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The men get ready to spray pesticides

Plantation sector

When Sri Lanka achieved independence in 1948 'Upcountry Tamils' were disenfranchised - many able to vote only in the last decade.

The country made progress in social welfare - plantation residents left behind.



In the 1970s health, education, housing, water and sanitation improved.

Access to health care and education still limited.

Plantation sector

The hill-country is cold and wet.

~ 80% of workers still live in 'line rooms' - 10 x 10 feet with a small verandah; 10-20 rooms back-to-back and side-to-side.



Poorly maintained, over-crowded, damp and smoke-filled.

Goal

To promote the health and social well-being of elders and their families, and to foster traditional values of respect and care for the elderly



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Project Components

- 1: Participation and quality of life
- 2: Health, nutrition and health care services
- 3: Social welfare services and economic security
- 4: Living conditions
- 5: Preparation for healthy ageing
- 6: Project management



Cross-cutting strategies

- Information gathering
- Formation of and support for Elders' Clubs
- Integration with existing PALM Foundation programs
- Training
- Advocacy and capacity-building with government health and social services
- Support for those caring for elders



Significance of social participation for health

Prospective studies show that extent and quality of social relationships influence prevention and management of chronic conditions

-Seeman T. Health promoting effects of friends and family on health outcomes in older adults. Am J Health Promot 2000; 14:362–370

- INTERHEART study in 52 countries - presence of psychosocial stressors associated with increased risk of acute MI - as significant a risk factor as high BP (Rosengren et al, 2004)

- In a US study loneliness was prospectively associated with increased risk of incident coronary heart disease, controlling for multiple confounding factors. (Thurston et al. 2009)
- A study of Thai rural elders found that social support buffered the impact of disability and reduced risk of depression (Suttajit S. et al. 2010)
- Helping others was also found to help older people to adjust to their own decline in function and health. (Greenfield EA, 2009)



What are the mechanisms?

- Both physiological and psychological
- The brain communicates with the cardiovascular, autonomic and immune systems via the neural and hormonal mechanisms which underpin cognition and behaviour (McEwan et al. 2010)
- Friendships, helping others, and social participation increase self-esteem and well-being - elders are then more likely to be motivated to:
 - change risk behaviours, such as smoking and drinking, and maintain healthier behaviours
 - seek health care
 - have better self-care

Growing body of evidence...

- In a US study social integration found to modify physiologic pathways influenced by stress, such as blood pressure, reducing risk of cardiovascular disease. (Troxel WM, et al. 2010)
- Socially isolated men and women had slower recovery of systolic BP and greater cortisol output over the day. Socially isolated men also had a higher cholesterol response to stress. (Grant N et al. 2009)
- In a European study salivary cortisol responses to mental stress were associated with coronary artery calcification in healthy men and women (Hamer M et al, 2009)
- Social integration is associated with fibrinogen concentrations in elderly men. (Loucks EB, 2005)

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Steps in establishing the Elders' Clubs

1. We oriented existing PALM community mobilisers

- came from the community
- trained and experienced in community mobilisation
- employed and paid by PALM Foundation

2. Mobilisers collected basic demographic data about elders in their communities



Steps in establishing the Elders' Clubs...

3. Organised first meeting

- explained the idea to the elders
- elders encouraged to choose two leaders - one male, one female
- prepared an activity plan for monthly meetings
- elders chose a name for their club

They chose Indian heroes eg 'Ghandi', 'Nehru', Hindu goddesses eg 'Lakshmi', and one chose 'Resting waves'.

Steps in establishing the Elders' Clubs...

4. Conducted regular monthly meetings; a variety of activities encouraged engagement such as singing and dancing, and nutrition cooking demonstrations
5. Elders drew maps of their communities
 - households with elders
 - symbols for latrines; water supply; males/female; if bedridden, disabled, blind.
 - important sites such as temples and rivers



Early problems

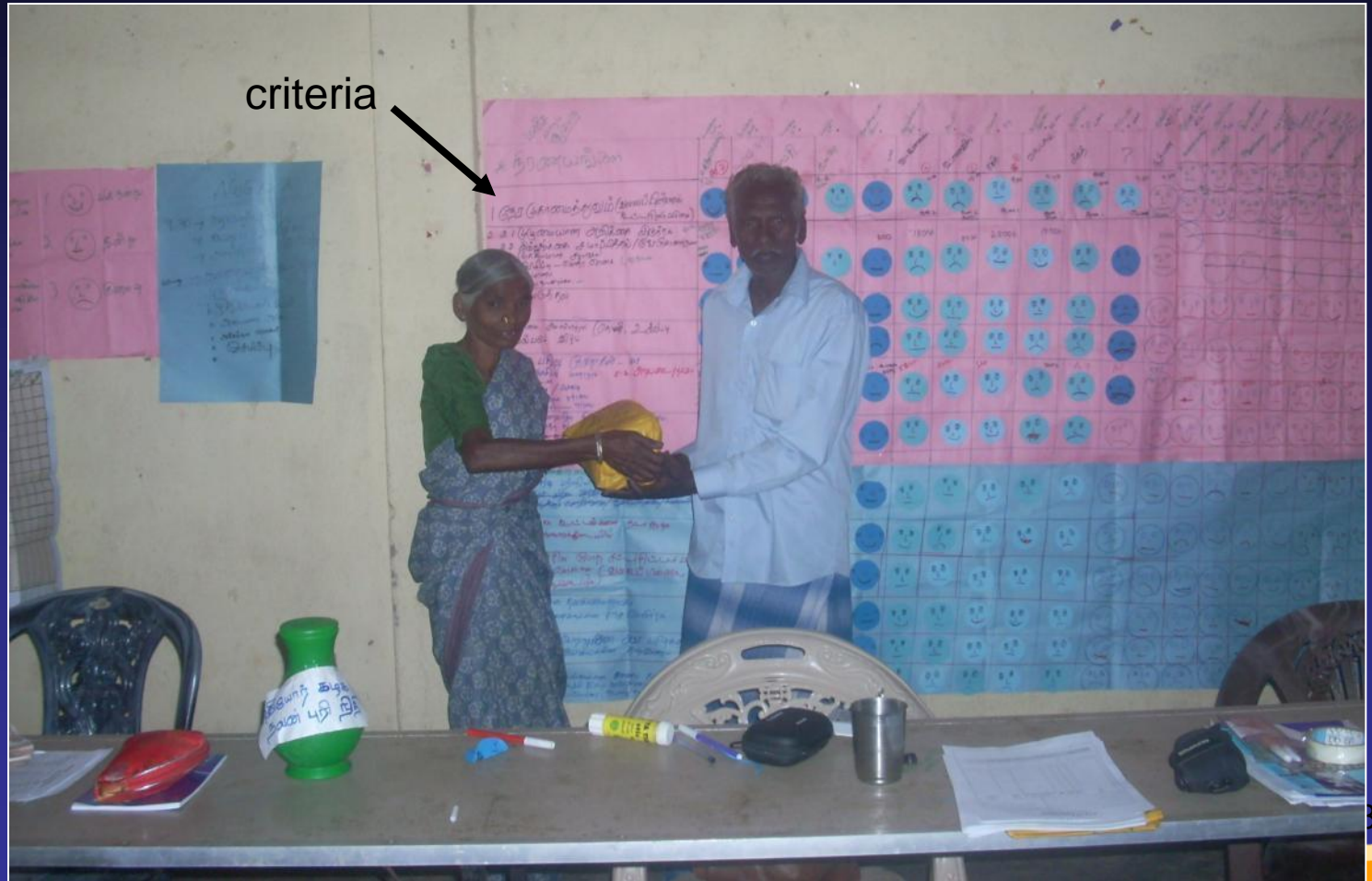
- Expectation of material donations - disappointment
- Lack of suitable venues for meetings
- Caste tensions
- Communicating with elders - mobilisers had to visit at home
- Difficult for some elders to get to meetings
- Presence of grandchildren



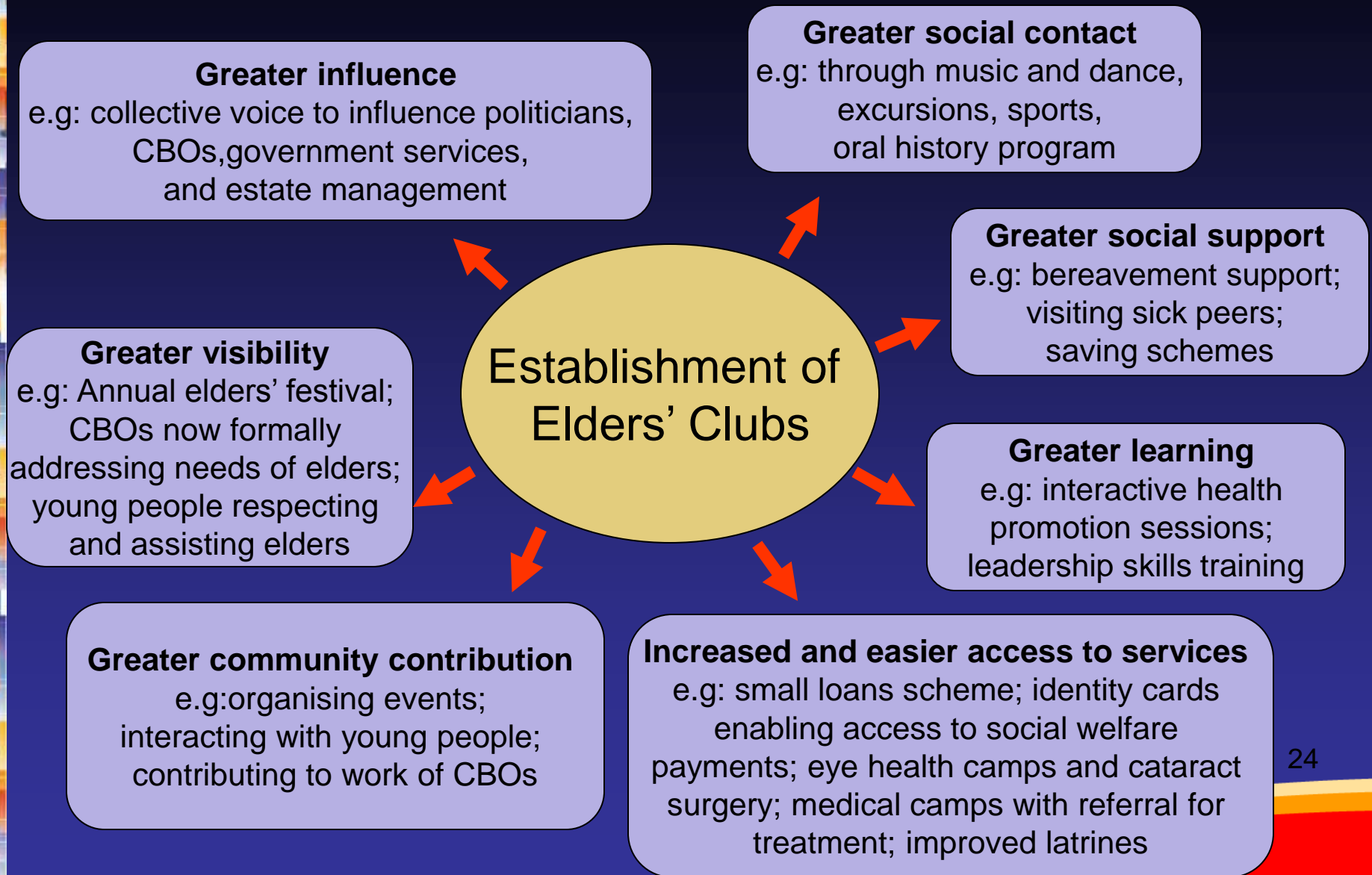
What happened next

- Elders took on increasing responsibility for planning and carrying out their own activities
- Weaker clubs visited the stronger clubs to learn from their experience
- Monthly network meetings for Elders' Club leaders
- Leadership skills training to strengthen women's leadership and secondary leadership
- Growth of activities with young people, children and CBOs
- Clubs initiated savings and small loan schemes
- Bank accounts
- Government registration

Participatory evaluation at monthly network meetings



Benefits from the Elders' Club strategy



Greater social contact

At sports days...



Greater social contact

Excursions



Greater social contact



Oral history program



Dance and music competitions

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Greater social support

Bereavement support

“In Thornfield division the Elders’ Club has decided to have a card with the picture of the deceased elder and his details as the club member and give this card to his/her family member in memory of the elder.”

Visiting the sick

“When I was sick last month, 5 members of our club visited me at home. I felt very happy and safe during that time. And also they offered a pooja at our kovil on behalf of me. I think that’s why I recovered soon”.

S. Govindasamy, 59, Glasgow lower division.



Greater learning



Interactive health promotion sessions

“In Ratnayakapura after every social gathering meeting elders get together and teach the illiterate elders to write their name. Within the last 3 months, 11 elders can write their names who could not do this earlier. Now they are signing in the attendance sheets too.”

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Increased and easier access to services



Vision screening



Health checks



Cataract surgery



Dental treatment



Greater community contribution



“They tell stories, they sing lullabies, they take us to temple festivals, they advise us not be involved in bad habits – if only they live better they will look after us” [young person]

Greater visibility

- through the annual elders' festival
- CBOs now formally addressing needs of elders
- young people respecting and assisting elders



Greater influence - collective voice

For example:

“Medawatha elders have written a letter to the local council member requesting for a common gathering hall for them.”

“Maha-Ouvah elders have written a letter to a Provincial Council member who was selected in the last provincial council elections, informing their activities and requests.”

Haputale bridge story

Conclusions

- The Elders' Club strategy has been effective, inexpensive, and sustainable
- The elders have developed a sense of ownership and belonging to their clubs
- There has been a wide range of benefits, including increased access to services and improved quality of life
- The Elders' Clubs have reduced social isolation - an important risk factor for chronic diseases

Next steps

- Dissemination -
video; articles; conference presentations; presentations to government; training of NGOs; online manual
- New project objectives -
establish IT centre
improve transport
management of medicines
- Establish network of NGOs in Sri Lanka that work with elders

Thank you

