Handout 2.2 - Scenario case studies

Module 2

Slide reference- 14-15

For- Sharing with participants during the session in groups

Scenario case studies

In 4 Groups the task is to fill in the table of types of risks mentioned in the case studies.

You will be given one case study only and sharing the others for background

You have 15 mins and feedback in plenary using the chart in 3 mins.

In building a picture of the different risks faced by older persons, including older men and women with different diversities, read a case study and focus on their different types of risk and threats to abuse, safety, discrimination and participation.

Suggest reading the case studies first and then complete the following lines with extracts of the case study:

- O Risks and threats related to abuse:
- Risks and threats related to safety:
- O Risks and threats related to discrimination:
- Risks and threats related to participation:
- Other risks and threats you have identified:

Group can use the table at the end of the handout

Case 1

A 62 years old women name Betty, living in Colombia was telling why she left her place of residence in another part of Colombia, "People have left their places of residence, both inside and outside the country. One reason is violence, insecurity that affect us due to threatens from security forces, conflicts between police, gangs and illegal armed groups, and robbery. As a result, many families have been displaced from rural and urban areas due to threats, intimi-

dation, extortion and kidnapping. The reason why I left the home is same as why many have left. In addition to being threatened, I had no work as such; I had no way to feed my daughter and my father, because a fortnight's work would only buy you enough to eat for one day, and it was not easy for me to feed my daughter and my father. He died last year". (Woman carer and family member, Colombia, 2020).

She continues, "Life is still not easy for me and my daughter. Being alone with my daughter we are always afraid of living in this rented shabby room. We get some work sometime on whatever we can do, and an NGO provides us sometimes with some food. However, the location is far from where we live and it is scary to bring food walking. I have been looted once. My daughter was harassed by a group of youngsters, and now we both go together. At least we are together when someone tries to loot or harass us. Can you imagine, NGO provides some people with lot more food than us. I don't know how should I convince them that I also need more food. What we get is not enough. Can you please help?"

Case 2

We ran out of our ancestral place as combatants wanted us to join them. We were living peacefully before and were forced to leave. I am 70 years old and live with my wife and one son who is married and has one 3 years old daughter. We walked for four days before arriving to town and left everything we had behind. We found temporary shelter in a public school for the first month, when we were asked to leave to make room for others. We found a spot outside town where other migrants live and built the place where we live now. It is made of wood and zinc some people gave us. It is not a proper house to live but I believe it is just a informal settlement. I can barely walk in the house where we live because I have problems with my knees. My wife has cataract, and her sight is blurring.

We were struggling with unavailability of a clean and safe toilet for both males and females. We did not have one. Thanks to the WASH program, an NGO ABC constructed four toilets close to where we live. The facility has well-constructed 5 stairs to walk into it. The toilets have doors but no separate toilets for women and men. ABC established a committee and provided the community with cleaning materials to keep the facilities hygienic. It is not easy, as many people don't know how to read, so were yet to understand instructions on using the cleaning material. Like other women, my wife also doesn't use the toilets. My wife doesn't go because she cannot walk alone, and also, she is not tall enough to close the latch of the door from inside. Other women as they fear that fully closed doors don't provide safety from snakes and required a space for them to evacuate if needed. I can't use these toilets either, as I have difficulty in climbing stairs. We are trying to communicate our problem to the NGO, but we don't know how to do it.

Case 3

An NGO wants to initiate a cash for work programme. The program is proposed to provide work for one person per family for 2 months only. However, there is an age limit for selection and only men within ages 18-40 are allowed to work. Women, older persons and persons with disabilities are not considered under this programme. The programme is based on a needs assessment conducted, but no consultation with stakeholders and community conducting while designing the programme.

Situation:

Single women, or women headed households are left out

11% older persons are living alone and are not considered

60% persons are irregular migrants, do not have passports and cannot ask for work permits. Therefore, they cannot be considered for work.

There is a lot of concern that many families are being excluded from this Cash for work activity and it is creating tension in the community between families. This is increasing the safety

concerns in the community and many persons are becoming violent against the men who have work.

Case 4

A health NGO is providing health services. All the health services are being provided out of a permanent structure (Casa de acogida) to the west that also provided adequate shelter and easy vehicle access. After 6 months of work, feedback sought from IDP leaders, the NGO realised that

- Older persons are not able to access services as they cannot walk to the facility and there are not any available transportation alternatives for them.
- Even few Older persons coming to the facility feel that the queues are long, and it is difficult for them to wait standing for so long. Young person in the family are busy and do not bring them to the site. Also, most older persons have responsibility of taking care of their grand children at home and cannot come during day times; they have to remain at home.
- Women are also attending only in case of emergency as it is difficult to walk through the other communities dominated sections, and they feel insecure.
- There are no specialized services for people with disabilities and it takes about an hour for them to reach the location when they can find help for that.
- Many older persons require physiotherapy and there is no physiotherapy centre close by.
- Medicines are provided for general ailments and older persons are suffering from single or multiple chronic ailments like BP, diabetes, arthritis, and epilepsy. Medicines are too expensive for older persons to buy.
- Many older persons are not able to use any public service as they have disabilities, being the most important ones that they have lost a great percentage of vision or cannot walk easily, conditions that could be managed by provision of age-assistive products.

Group can use this table to feedback on

Case Studies	Risks and threats related to abuse	Risks and threats related to safety	Risks and threats related to discrimination	Risks and threats related to participation	Other risks and threats you have identified
Case Number					

