

Social Vulnerability of Women Living in the Jamuna River *Char* of Bangladesh: A Comparative Study Between CPL Programme Area and Non CLP Area

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KEYWORDS: Social vulnerability. Women. Jamuna river *char*. CPL area. Non CPL area.

ABSTRACT: *Char* (in Bengali means, a strip of sandy land rising out of the bed of a river above the water-level) dwellers are considered poorer than the mainland population. Floods and erosion disrupts the lives of the dwellers. Floods damage or destroy crops, homes, water and sanitation facilities and other assets, and hinder access to food, medical care, schools and work. The victims of erosion lose their settlements, agricultural land and employment, and are forced to move elsewhere, sometimes on a yearly basis. Loss of employment and house are also much more common in the *char* areas. These households often face difficulties for vital essentials including food, health care, education, safe drinking water, physical security, dignity, privacy and employment opportunity. In *char* area women are more socially vulnerable in terms of attaining medical facilities, education, malnutrition, lack of uncontaminated drinking water and lack of proper sanitation facilities. The government of Bangladesh made an attempt with the support of Department for International Development (DFID), UK Aid to address the issues of *char* dwellers. The first phase of the CLP (CLP-1) ran between 2004-2010, and worked on the *chars* of the Jamuna river in the districts of Kurigram, Gaibandha, Sirajgonj and Jamalpur. CLP-1 targeted 55,000 of the poorest households and is estimated to have benefited more than 900,000 people. The researcher has attempted to find the factors affecting on social vulnerability of women. The author has made a comparison between CLP project area and non CLP area for understanding the factors influencing on social vulnerability of women and to get insight about how the development intervention affect on reducing social vulnerability of the beneficiaries of CLP Project.

INTRODUCTION

Bangladesh has made impressive achievements in various aspects during the last three and half decades. But economic and social security has not been ensured so far. Over 60 million people are said to go hungry every day (BBS, 2006). Significant intrahousehold disparity also exists especially in northern domain of Bangladesh. These areas are

highly vulnerable to sudden and forceful flooding as well as erosion and loss of land, which makes living in the *chars* both hazardous and insecure.

Char dwellers struggle with their lives than elsewhere in the country. *Char* dwellers are considered poorer than the mainland population (National Surveillance Project, 2003). Floods and erosion disrupts the lives of the dwellers. Floods damage or destroy crops, homes, water and sanitation facilities and other assets, and hinder access to food, medical

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care, schools and work. The victims of erosion lose their settlements, agricultural land and employment, and are forced to move elsewhere, sometimes on a yearly basis.

Loss of employment and house are also much more common in the char area. These households often face difficulties for vital essentials including food, health care, education, safe drinking water, physical security, dignity and privacy and employment opportunity. Through continual efforts of the government and non-government sectors, over time, there had been a significant decline in certain manifestations of extreme poverty (BBS, 2013).

In char area women are more socially vulnerable in terms of attaining medical facilities, education, lack of uncontaminated drinking water and lack of proper sanitation facilities. Women suffer as sanitation systems are destroyed (Kelly and Chowdhury, 2002). Pregnant women, lactating mothers and differently disabled women suffered the most, as they found it difficult to move before and after natural calamities. Women's and men's responses to these crisis situations, as well as their abilities to cope with them to a very large extent reflect their status, roles and positions in society because of gender based inequalities, women are typically at higher risk than men.

The researcher attained to find the factors affecting on social vulnerability of women. The researcher's intention is to make a comparison between Chars Livelihood Project (CLP) area and Non CLP area for understanding the factors influencing on social vulnerability of women and to get insight about how the development intervention affect on reducing social vulnerability of women.

Rational of the study: The women in the char area are socially insecure essentially for lack of food, medical facilities, malnutrition and physical security, dignity and privacy. Seasonal disasters manifest itself in three of its dimensions: availability, access and utilization and stability of these dimensions. Thus lacks of food, poverty and insecurity among women in the regions have serious social consequences. Women in Bangladesh still experience various types of violence, physical, sexual and emotional violence increases during and after disaster which presumably continues in perpetuity (UNDP-HD Report of South Asia, 2002). The result of this research work will help

government, policy makers, practitioners, researcher, NGO's professionals to take accurate policy and programs for the betterment of women of the selected area as well as can make them conscious. It will also provide input for formulating effective policy and programs for them.

General objective of the study: The prime objective of the study was to assess the livelihood changes of the women of Hatsherpur Char under the intervention of Char Livelihood Programme. *Specific objectives:*

- i. To find out the factors influencing on social vulnerability of women in CLP programme area and Non CLP area;
- ii. To identify the potentials and opportunities of women in the char area to minimize their social vulnerability; and
- iii. To suggest mitigation measures based on the findings.

Limitations of the study

Collecting primary data from any remote and near to inaccessible char area in Bangladesh is not an easy task. Yet in order to make the study a success, many attempts were taken within the existing environment but suffered from some limitations.

- ❖ Limited time and resources have been allotted for the completion of this study. Hence two char areas, one is intervened char area and another one is controlled char area from one Upazila of South Eastern part of Bangladesh were chosen for convenience.
- ❖ Small sample size may be a concern. However, samples of different cross-sections of community people along with local political leader were studied. Though efforts were there to ensure a modest representation of target groups but the sample size might be more than that.
- ❖ Access to women has always been difficult in Bangladesh. Collecting data from the women, vast majority of which is uneducated, proved to be very difficult for the researcher. Many denied to give any interview and those who were not reluctant were found hesitant in their responses.

METHODOLOGY OF THE STUDY

The study was carried out to examine the livelihood of the people of Hatsherpur Char in Bogra District, located in North Western part of Bangladesh, under the intervention of Chars Livelihood Project by the Government of Bangladesh. The studies answered the question whether and to what extent the Chars Livelihood project bring any changes to the livelihood of the Hatsherpur char. In the study two areas have been studied, one area is under the intervention of the project (Hatsherpur Char as project intervention area) another is not under the project intervention (Batir Char as control area). Comparison was made between the beneficiaries group and the non-beneficiaries group (control area) to assess the impact of CLP on women. Both have been chosen basis on similar socio-economic characteristics and geographical location for addressing their problems and analytical comparison.

Assessing the livelihood of the people and analyze the changes of that of the people of char area, an integrated, comprehensive approach was essential for data collection, though intangible socio-cultural influential factors are beyond the border of this study. Therefore, a combination of quantitative and qualitative approach was used to collect primary data along with to perceive the phenomena of significant changes of livelihood parameters; a controlled area was chosen to compare with the proposed study area. Data was collected from both the primary and secondary sources.

Sampling Methods and Study Sites

The proposed study was conducted in Sariakandi Upazila of Bogra District. Random sampling technique was used to select the sample. The desired sample size was 100 households. Two unions of Sariakandi Upazila in Bogra district was selected as study area purposively. In the study chair households were treated as elementary units of the target population. Survey methods and participatory techniques were used for data collection. The field data was collected through face to face interviews. An interview schedule that suits the research objectives was constructed after pre-testing which was used to collect relevant data. The researcher herself or a group of trained research assistants was

approached the respondents, ask question and write down answers in front of them. The interview schedule was contained both close ended multiple choice and open ended questions. Field data was also collected through focus group discussion (FGD) method. Case study may also leave some of the relevant issues unattended which may be considered important in coping with the natural disaster. For this reason FGD was conducted with respondents who were selected for face to face interview. In addition, another FGD was conducted with the stakeholders which were included local journalists, village mentors, public representatives, UP chairman, members, secretary, School/Madrasah teachers, NGO workers, SAAO/ Agriculture Extension Officers and Imams of mosques.

Secondary data: Relevant and reliable scholarly literature was reviewed. In order to ensure systematic collection of secondary data, a list of available literature including recognized scholarly books, journals, study reports, authentic websites, documents of the government and non-government organizations, census and survey reports etc. was collected. After listing the available literature related to the proposed study, notes was taken in note cards accordingly which was used to support the primary data.

Tools of data collection: Questionnaire and Checklist – A number of standard approaches for data collection were used. Pre- tested semi structured questionnaire was used. It included review of relevant studies, char development programme, design and concept paper to get a better understanding of the Char. FGDS and Case Studies were followed by separately prepared checklist. A combination of Participatory Rural Appraisal (PRA) methods were used to gain an understanding of a specifics aspect of life on the Chars. The Study also draws on researcher own observation, work experience and involvement with the char people. SPSS statistical software was used to process and analysis the data.

AN OVERVIEW ON PROJECT PERSPECTIVE

The focus of CLP-1 was to address the extreme poverty experienced by char dwellers as described above. The main objectives were to:

- Reduce environmental vulnerability;
- Enhance economic opportunities;

- Improve social wellbeing and governance;
- Support livelihoods through services; and
- Foster learning and sharing through programme monitoring (a cross-cutting output delivered by the CLP Innovation, Monitoring and Learning Division – IML).

CLP-1 was based in the Rural Development Academy's (RDA) office in Bogra and its activities were implemented and monitored by local non-governmental organizations (Implementing Management Organisations or IMOs) and, to an extent, Union Parishads (UPs). IMOs were contracted by CLP-1 through a modified accountable grant mechanism, under which CLP "specifies the services and inputs to be offered, the size, scale and standard of the deliverables and agrees fixed prices with NGOs (Rural Development Academy, 2015).

At the core of CLP-1 activities was the Asset Transfer Programme (ATP), which involved an initial injection of capital into selected extreme poor households with no land, jobs or assets. We refer to these as Core Beneficiary households (CBHH). They were selected using three main criteria (having productive assets worth less than Tk. 5,000; having no land or access to it (i.e. leased or owned); and having no formal employment). The ATP was based on a similar mechanism to that implemented by BRAC's challenging the Frontiers of Poverty Reduction (CFPR) Programme. The initial injection of capital, used to buy an asset from a menu offered by the programme (e.g., a cow), was supplemented with a monthly stipend for the first six months (Tk. 400-600 per month) followed by a lower stipend (Tk. 300-350 per month) for the subsequent 12 months. The purpose of the initial stipend was for income support and maintaining the asset (e.g. to cover the costs of feed, de-worming etc – avoiding diverting household resources away from the family to the asset) until income could be generated. The latter stipend could be used by the household to support the family and its exact use was at the discretion of the household. Stipends were conditional on women core beneficiaries attending 50 weekly meetings as part of the CLP Social Development Programme. The objective of which was to maximize the benefits from the livelihoods supporting activities.

Under CLP-1, the Asset Transfer Programme targeted 50,000 core beneficiary households (but actually reached 55,000) over four annual phases: ATP 1 (2006), ATP 2 (2006-2007); ATP 3 (2007-2008); and ATP 4 (2008-2009). The programme delivered to all 55,000 households, with just under half of them being reached in the last phase, receiving 50% of the total value of assets.

An additional site of CLP-1 services was added to the Asset Transfer Programme during the redesign period, so that within a given community there could be up to the maximum CLP-1 sponsored activities one time. The complete package of services focused on:

- Protection of livelihoods (with public works and monthly stipends);
- Prevention of threats to livelihoods (with infrastructure development);
- Promotion of livelihoods (via asset transfers, enterprise development, veterinary services, health support and water and sanitation facilities); and
- Transformation of livelihoods (through social development interventions, village savings and loans associations and establishing local service providers).

THEORETICAL AND ANALYTICAL FRAMEWORK AND THE RESEARCH METHODOLOGY

Definitions: Vulnerability derives from the Latin word *vulnerare* (to be wounded) and describes the potential to be harmed physically and/or psychologically. Vulnerability is often understood as the counterpart of resilience, and is increasingly studied in linked social-ecological systems. The Yogyakarta Principles, one of the international human rights instruments use the term "vulnerability" as such potential to abuse or social exclusion (Social vulnerability definition; Wikipedia).

The concept of social vulnerability emerged most recently within the discourse on natural hazards and disasters. To date no one definition has been agreed upon. Similarly, multiple theories of social vulnerability exist (Weichselgartner, 2001). Most work conducted so far focuses on empirical

observation and conceptual models. Thus current social vulnerability research is a middle range theory and represents an attempt to understand the social conditions that transform a natural hazard (e.g. flood, earthquake, mass movements etc.) into a social disaster. The concept emphasizes two central themes:

- Both the causes and the phenomenon of disasters are defined by social processes and structures. Thus it is not only a geo- or biophysical hazard, but rather the social context that is taken into account to understand “natural” disasters (Hewitt, '83).
- Although different groups of a society may share a similar exposure to a natural hazard, the hazard has varying consequences for these groups, since they have diverging capacities and abilities to handle the impact of a hazard.

Models of Social Vulnerability

Two of the principal archetypal reduced-form models of social vulnerability are presented, that have informed vulnerability analysis: the *Risk-Hazard* (RH) model and the *Pressure and Release* (PAR) model.

Risk-Hazard (RH) Model: Initial RH models sought to understand the impact of a hazard as a function of exposure to the hazardous event and the sensitivity of the entity exposed (Turner et al., 2003). Applications of this model in environmental and climate impact assessments generally emphasised exposure and sensitivity to perturbations and stressors (Kates, '85; Burton et al., '78) and worked from the hazard to the impacts (Turner et al., 2003). However, several inadequacies became apparent. Principally, it does not treat the ways in which the systems in question amplify or attenuate the impacts of the hazard (Martine & Guzman, 2002). Neither does the model address the distinction among exposed subsystems and components that lead to significant variations in the consequences of the hazards, or the role of political economy in shaping differential exposure and consequences (Blaikie et al., '94; Hewitt, '97). This led to the development of the PAR model.

Pressure and Release (PAR) Model: Pressure and Release (PAR) model after Blaikie *et al.* ('94), showing the progression of vulnerability. It shown a disaster as the intersection between socio-economic

pressures on the left and physical exposures (natural hazards) on the right.

The PAR model understands a disaster as the intersection between socio-economic pressure and physical exposure. In this way, it directs attention to the conditions that make exposure unsafe, leading to vulnerability and to the causes creating these conditions. Used primarily to address social groups facing disaster events, the model emphasises distinctions in vulnerability by different exposure units such as social class and ethnicity. The model distinguishes between three components on the social side: root causes, dynamic pressures and unsafe conditions, and one component on the natural side, the natural hazards itself. Principal root causes include “economic, demographic and political processes”, which affect the allocation and distribution of resources between different groups of people. Dynamic Pressures translate economic and political processes in local circumstances (e.g., migration patterns). Unsafe conditions are the specific forms in which vulnerability is expressed in time and space, such as those induced by the physical environment, local economy or social relations (Blaikie *et al.*, '94).

In the study Pressure and Release (PAR) Model was followed in identifying and assessing the factors that are affecting social vulnerability of women in the char area of Bangladesh.

DATA ANALYSIS AND DISCUSSION

Early Marriage and Dowry Payments

Practices relating to underage marriage and dowry payments have remained largely unchanged. Women's awareness of the legal age of marriage for women was high and this knowledge has been widely shared with women with CLP 01. Despite this, households still feel pressure concerning underage marriage and dowry payments. Evidence from CLP-1 regarding payment of dowries illustrates that more dowries were made and received by core beneficiary households from ATP 1-3 than those from ATP 450. A trend was found suggesting that the relative improvement in the economic status of the core beneficiary households had an inflationary effect upon the 'price'. There were extreme cases of core beneficiary households having to sell their assets to

finance dowry payments that roughly equated to the value of the asset.

“They also know that they should not arrange marriage of their daughters until they are 18 and their sons are 21 but in reality they do not practice this. According to them, when a girl is 12 it is considered that she is old enough to get married and she should get married. Otherwise, the amount of dowry increases when the girl is more than 12 years old. They know that dowry practice is bad and it is illegal but they practice it and it is considered the tradition of the char.” From a Focus Group Interview with female core beneficiaries from CLP and Non CLP char in Sariakandi Upazila of Bogra District. In the study, it was found that 80% in the CLP project intervention area, 90% respondents’ marriage age of the non CLP area was before 18 years. Practices relating to underage marriage and dowry payments have remained largely unchanged.

“There is a law (to protect against) domestic violence towards women but (we) do not have the ability to take any such action because ultimately (we) have to live with our husbands”. From a Focus Group Interview with noncore respondents.”

Meals Timing

Before CLP, they usually ate two meals a day. They most of the time didn’t ate at noon. Common food in those days was pulses and vegetables. Now

they eat three times a day with a diet comprising rice, vegetables, pulses, fish (three or four times a month), egg two or three times a month, meat at Eid and papaya which is grown at her own house.

The social development training provided participants with a better understanding of the benefits of nutritious food. Views from focus group interviews and semi-structured interviews highlighted that beneficiaries were able to produce and consume a more varied diet which included vegetables, eggs and milk. The qualitative analysis revealed that there have been improvements in the quantity of food available for consumption and a fairer distribution of food amongst members of the household. However, it was mentioned a number of times that in difficult times there is a reversion to an inequitable distribution of food within the household.

In the research area it was found that, most of the respondents in the CLP and non CLP area eat meals three times in a day. But the number of ratio was high in the CLP area. In the CLP area 98% respondents replied they are used to take meals three times and in non CLP area is 85 % respondents. They replied that CLP Program helped a lot for improving their meals.

In the CLP area, it was found that most of the respondents (78%) are used to take rice, vegetable, fish, meat, egg etc. Whereas the ratio in non CLP was 66%. During , FGD it was assessed that in

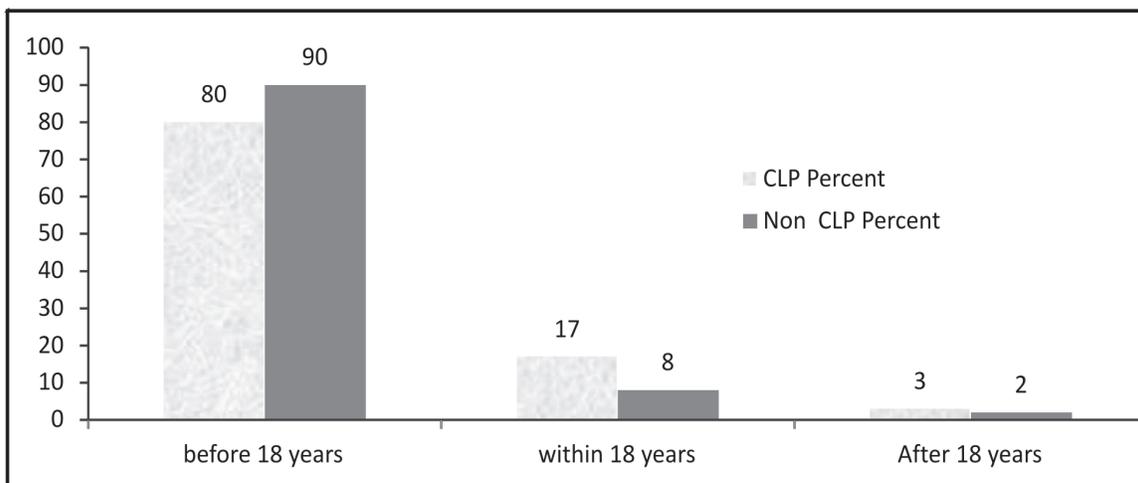


Figure 1: Age of marriage in CLP and Non CLP area

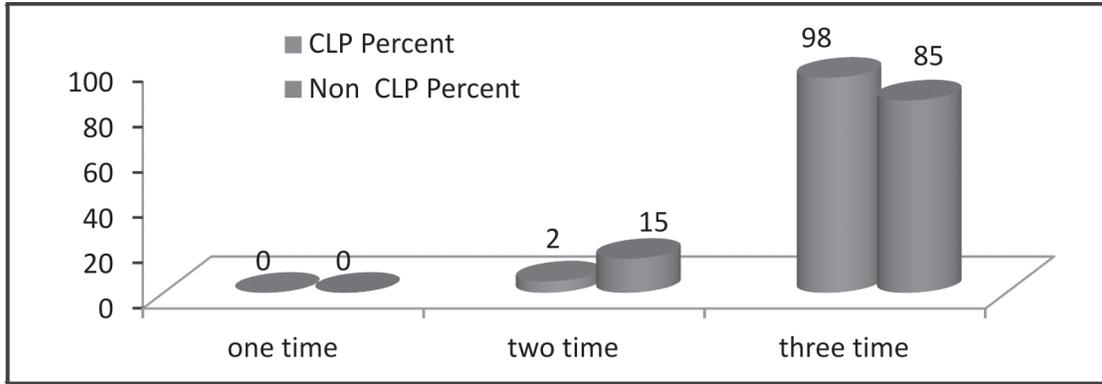


Figure 2: Meals timing in a day

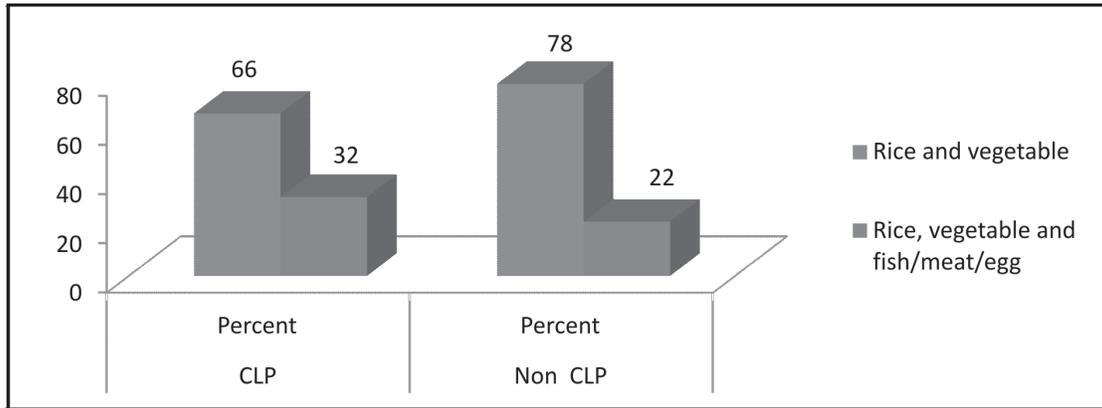


Figure 3: Compositions of meals

the CLP area more women were found more conscious about their health. The people in the non CLP area were not conscious about their health.

Sources and Access to Safe Drinking Water

During the research it was observed that all of the respondents’ sources of drinking water were hand tube well. But it was found that in the non CLP area the distance of collecting water was far compare to project area. The women in non CLP faced more problems for collecting water. They not only faced troubles to colleting water but also for safe drinking water. A key strength of the programme was in making significant improvements in access to water, coupled with a dedicated stream of support that bought about a commensurate increase in their use among all household members. The raising of 90,684

homesteads above flood levels using earth plinths has greatly reduced the vulnerability of very poor households. Plinths have enabled char dwellers to safeguard valuable economic assets and they offer greater safety in times of crisis when flood waters could previously have caused catastrophic damage and loss of homes and sources of drinking water.

Health Care Facilities

Periodic flood had significant impact on health condition especially on women and children. During the monsoon season average seasonal temperature, rainfall and humidity was favorable in increasing the incidences of water-borne and air-borne diseases. It was known that bacteria, parasites breed faster and survive longer in warm, humid conditions which were typical during the monsoon season in char. These were

at for the occurrence of diseases like fever, pneumonia, stomach ache, diarrhoea, measles, headache, small pox, cough and cold and others.

Treatment types were same in the both research area. The respondents in CLP and non CLP area used homeopathy and allopathic treatment and most of them were used to homeopathy treatment. A few of them used *kabirazi*, traditional healer, shaman (*ojha*) and sometimes on self-medication. The respondents whom sources of income were very limited, their trend to use *kabrazi* treatment were more. In case of pregnancy-related complications respondents depended on the mid-wives or relatives for conducting delivery. They relied more on and felt comfortable with mid-wives or relative for such complication than others. Char dwellers didn't prefer hospitals due to lack of proper transportation facilities, monetary problems, and inconveniences of living outside their homes.

Community Health Workers (Char Shasthya Karmi – CSK) introduced by CLP-1 established good relationships with women. This allowed women to take more control over their reproductive health and the health of their families.

The introduction of Community Health Workers has also proved to be an important pivot around certain aspects of the Social Development Programme. The IA found that CSKs engaged by CLP-1 played an integral role in the delivery of the Primary Health and Family Planning Project.

Latrine Types

Though some families have availability for sanitary latrine in the non CLP area, yet they were not aware about sanitary latrine and that's why mainly women and girls didn't have access to private lavatory facilities.

In the CLP area 90% respondents introduced sanitary or water-sealed latrine whereas it was only 38% in the non CLP area. So for lack of proper toilet facilities women are more sufferers in the non CLP program area. Using temporary toilet was less among the respondents in the CLP area. Most of them are getting private sanitation facilities that they did not in the past have. Open defecation was widely practiced in the non CLP area. Local NGOs and government offices with active collaboration with several aid agencies had their relevant projects of safe sanitation practice in the area. However, there remained much to be done. The situation become worse during the time of flood as most of the improved sanitary latrines provided by aid agencies went under water. Poor sanitation facilities during the time of flood as well as limited sanitation coverage in the flood-shelters, causes great suffering to the women and girls.

“Sanitation problem was a great one. (We) had to go far from the house to defecate. Especially women and girls were in trouble because they had to wait for a long (time) as they could only go in the early morning so that no-one would see them. Now they

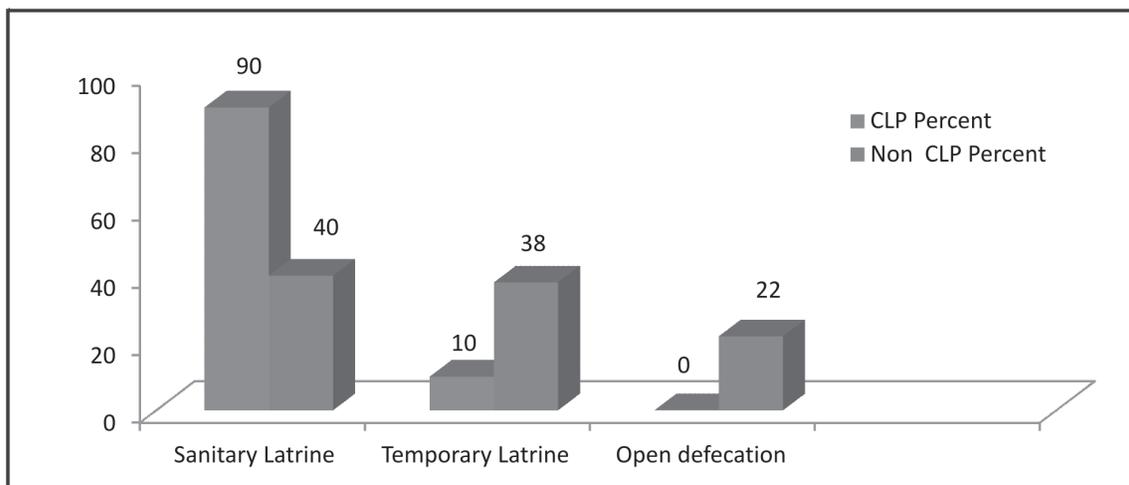


Figure 4: Facilities for sanitary latrines

have a latrine so they don't suffer from sanitation problems". From a Focus Group Interview, with women in the not CLP char working, Sariakand, Bogra.

ROADS AND COMMUNICATIONS

Roads and communications system have made more vulnerable women life in the *char* than the mainland. In the both char roads and communication system is not good. All of them use earthen roads or foot path for the movement. In the Fazilpur Char all the roads are footpath behind the field. Road communication was found a little bit better in the Hatsherpur Char for rising of homestead plinths. Some of them have mobile phone for their communication. But network problem was found there. Except grameen phone their entire network was not good. People were seen happy using mobile phone as a means of communication.

Time Allocation for Household Chores

Most of the women were found busy with their activities most of the day. Almost whole of the day do work. During day they don't get time for leisure. Most of the respondents get only two hours for rest. They not only do their household work but also do work as a day labour. In the CLP area it was seen, their husband pay respect their wife more than to non CLP area. For raising their social awareness, sometimes their husband depends on them.

TABLE 1
Time allocated for household chores in CLP and non CLP area

Time allocated for household chores	CLP area		Non CLP area	
	Frequency	Percent	Frequency	Percent
3.0	7	14.0	1	2.0
4.0	1	2.0	11	22.0
5.0	-	-	4	8.0
6.0	3	6.0	3	6.0
7.0	14	28.0	10	20.0
8.0	20	40.0	18	36.0
9.0	1	2.0	2	4.0
10.0	4	8.0	1	2.0
Total	50	100.0	50	100.0

In the Batir Char the respondents were more engaged in household chores, compared to CLP area. It happened because of for CLP activities there women were more engaged in income generating activities (IGA). It implies a good sign of women development. Though their educational levels were almost same yet in the CLP project area women were found more aware on their rights and duties.

Geographical Isolation

All of the respondents 100% respondents (both CLP and non CLP) replied they are extremely geographically isolated. They have troubles in roads and communication, access to health care service, access to school: primary, in access to school: secondary, difficulty in moving emergency situation. The research observation and after FGD it was found the Non CLP community is more vulnerable than to CLP char dwellers. These types of problems made the women's life in both chars more risky.

Status of Women

Targeting the women of the household has had a positive impact on their status. Women from core beneficiary households explained that attending weekly social development meetings has helped to develop their confidence to move around the community and visit others. These meetings, combined with other CLP-1 interventions, also contributed to a significant increase in the percentage of households who registered the births of their children. There is evidence to suggest greater levels of respect for women in the community and improved intra-household relationships.

"There is change in their family. They said that now they can decide what they should do to have a better life. Before getting this asset from CLP they didn't say anything to their family. Only men made decisions. Now the men also want to know their opinions". From a Focus Group Interview, with core beneficiaries in the study.

Women's interactions with other community members increased as a result of participating in CLP-1 activities. Similar to the project completion report findings, 90% of ATP 4 respondents in the 2011, Knowledge, Attitude and Practice (KAP) survey felt more respected by others in the community, compared

to 64% before entry into CLP-1. When asked why, most stated that it was because their behaviour had changed and their mobility within their villages had improved. The findings from focus group and semi-structured interviews underpin the KAP results: women often had to walk across their villages to attend social development training, providing them with opportunities to interact with community members that they had not dealt with in the past and exchange advice, cash or food on an informal basis. The findings also show improvements in interactions between different households and community events among core beneficiary households. Most striking is the increase in invitations to visit beneficiaries' peers and to community events.

The researcher found mixed results when looking at impact on intra-household relationships and decision-making. It was found women felt that they were consulted more on decisions relating to how money is spent. However, there was virtually no change in the degree to which women make decisions on expenditure and loans. On the other hand, findings from the semi-structured interviews and focus group interviews paint a far more positive picture of decision-making. There was an increased level of decision-making by women around issues of family planning and health, but little impact on expenditure and loans, where decisions remain dominated by men.

Freedom for Social Work

Freedom is much related to economic dependency. In the CPL project area many of the beneficiaries were engaged in various economic activities. During FGD they opined, after being in income related functions their mobility in the family and society has increased a lot. For raising their mobility in the society, their freedom for social work gets importance. The women also understand that they should move in emergency of others women of their community. The CLP's motivational activates inspired them to be aware on social work. In the study, 24% respondents in the project area were neutral. Among the beneficiaries 10% of them opined that they have freedom for social work, beside 4% respondents have freedom in the non CLP area. Though the percentage, of the respondents is not noticeable. Yet it indicates it reduced their social vulnerability in the society.

The table shows, that the respondents in the CLP area have more opportunity to move out of the village. It makes clear that in the project part women enjoy more freedom to non CLP area. Women's interactions with other community members increased as a result of participating in CLP-1 activities.

RECOMMENDATIONS

The *char* areas and *char* people remained neglected still now. More focus and attention is needed

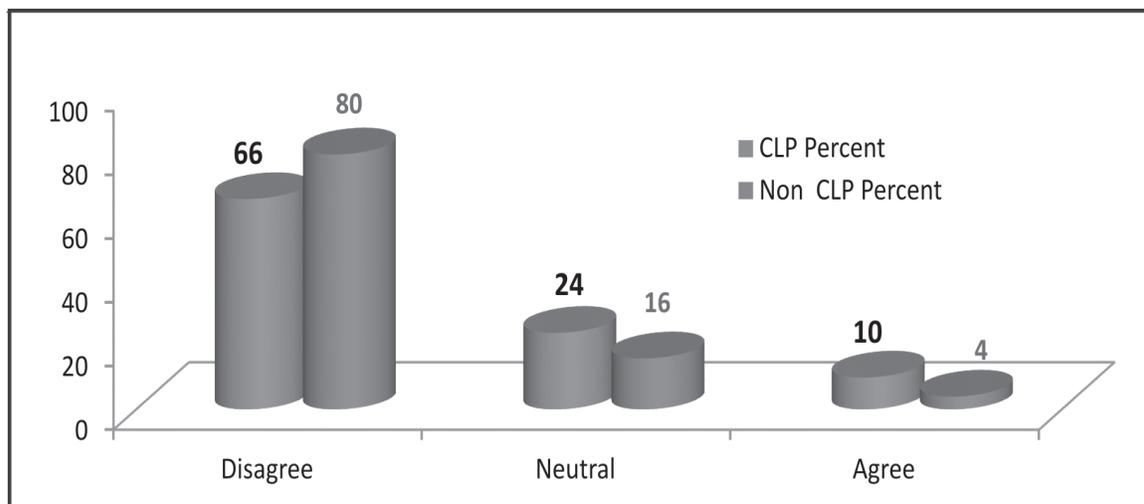


Figure 5: Freedom for social work

from different services and providing departments of the government for the well-being of the *char* people. Yet, some developments were found in the CPL area which reduced women social vulnerability. Some strategies should apply for bring a positive change in the non CLP area.

- They should provide adequate support including electricity supply, irrigation facilities, transport, health, education as well as different training for Income Generating Activities (IGA) to the poor and marginal *char* people.
- Overall there is a need to monitor both planned and potential unintended consequences at different levels (in this case at the community level and at the intra-household level);
- Develop a more balanced approach to monitoring and understanding change.
- Instead of giving training on vegetable production to each and every woman in the *chars*, it is better to provide training on seed to those persons who have sufficient space in their homestead and also willingness to practice the skills.
- The Village Savings and Loan Association (VSLA) activities were closed due to lack of monitoring and supervision and justified modification like incentive and management as the CLP's activities were closed. Their activities should be continued along with proper monitoring and supervision. Moreover, a linkage between the Department of Cooperatives of the GOB or RDA and VSLA's group activities should be established. For safety and security of the group's savings branches of different banks in the appropriate places of *chars* should be established.
- The distribution of cattle among the beneficiaries under Asset Transfer Programme was found to have made satisfactory changes in the livelihoods of the people, therefore, similar programme may be launched in other areas of the country. The concerned paravets should be trained on artificial insemination.
- The goats and sheep were found highly prolific and profitable, but high death rates of these animals were very much disappointing. Such death rate could be minimized though employment of trained paravets. In this connection, the rural unemployed youths could be given short and medium training on small livestock management and treatment issues. Moreover, the availability of vaccines in the *chars* should be ensured.
- There should be a regular paramedic practitioner in each and every community clinic / health care centre to be established in the permanent *chars* for ensuring the health service of the *char*'s dwellers.
- During monsoon the women do not have any major work at hand, therefore, they can be engaged with handicraft type of job like bamboo and cane work, sewing *Nokshi katha* etc.
- There should be established a good marketing channel for different products of *chars* with mainland market.
- The education activities in the *chars* should be regularly monitored by the government offices like respective upazila education office and extend the activities in different corners of *chars*.

CONCLUSION

The respondents responses regarding access to health facilities, safe drinking water, food security, income and asset and susceptibility to vulnerability, these elements of livelihood with different indicators of the people of the two *char* areas, one intervention *char* area (Hatshepur *Char*) and another control *char* area (Batir *Char*) both have shown serious matters of concern though the values of measured indicators showed moderate change in livelihood in the intervention area than the control area. Finally, it can be concluded for the project intervention area, indicators like legal entitlement of land, accessibility of pure drinking water system had shown improvement to a greater extent where food contents, interval of protein intake, access to credit during crisis

period, monthly expenditure, measures taken against diseases had given the indication of slight change in comparison with the control areas. There is no other way in improving the overall scenario of the people of *chars* so; the government and the development organizations should take more pragmatic and fruitful initiatives for the betterment of the *char*'s people like the main land.

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