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ELDERS CLUB STRATEGY: AN ALTERNATIVE SOCIAL WORK STRATEGY TO IMPROVE SOCIAL PARTICIPATION OF OLDER PEOPLE

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Abstract: Low- and middle-income countries are ageing at a much faster rate than richer countries, especially in Asia. This is happening at a time of globalization, migration, urbanization, and smaller families. Older people make significant contributions to their families and communities, but this is often undermined by chronic disease and preventable disability. Social participation can help to protect against morbidity and mortality. We argue that social participation deserves much greater attention as a protective factor, and that older people can play a useful role in the prevention and management of chronic

conditions. We present, as an example, a low-cost, sustainable strategy that has increased social participation among elders in Sri Lanka. The objective of the study to assess how elders' clubs improve the social participation of older people. The study was carried out as a randomized control trial in Nuwara eliya district. It was found that elders clubs immensely contribute in active social participation of older people and contribute to healthy ageing.

Key words: Elder club strategy, social participation, older people, social relations, randomized control

INTRODUCTION

Sri Lanka is a lower middle-income country with one of the fastest growing populations of older people in the world due to early gains in life expectancy and reduction in fertility rates. Currently those over 60 years make up about 12% of the population, and this is expected to increase to over 20% of the population by 2030. The Sri Lankan Ministry of Social Services, the National Council for Elders, and the Ministry of Health have been responding to this issue, and through a consultative process have developed a National Action Plan on Ageing. Older people are considered as a burden in a country since they are considered as dependents of a population. They are also a most vulnerable segment of a society because of the physical, mental and social economic vulnerable of the older people. The older people in plantation sector are more vulnerable than the general due to various reasons. The most common problems experienced by the elders in the estate sector were identified. The summary of the problems thus identified are given in the box below.

The problems of elders perceived by PLAM foundation.

- Lack of economic security
- Dependency on children
- Employment outside after retirement
- Threat of losing residence
- Lack of respect from youngsters
- Lack of easy access to water and sanitation
- Child care of children is considered an obligation
- Malnutrition
- Lack of access to health care
- Elderly women have double workload-household chores, care of children,
- Lack of entertainment
- Lack of rest
- Quality of life issues
- Blackmailing from children to get assets
- No elders' homes
- Not seen as 'senior citizens' considered as burdens
- Addiction to alcohol; physical problems from betel chewing
- Subject to verbal abuse and violence
- Depression and suicide
- Physical illnesses including respiratory diseases, asthma, cataract, eye defects, tuberculosis, dental problems, prolapsed womb and incontinence, menopausal problems/changes, hypertension, diabetes, arthritis and Musculo-skeletal problems.

(Project document, 2012)

In this study it was explored an alternative strategy who can played a vital role by social workers to improve the social participation of the older people in older to get rid of from their isolation. Social isolation is one of a most common problem faced by older people which creates lots of negative consequences among older people. There fore it is very important to improve the social participation of older people ensuring a healthy and active ageing. The PALM Foundation in Nuwara

Eliya implemented a project aiming of wellbeing of older people. There fore this study focusses on the impacts made by the elders' club strategy on the lives of elders specially to improve the social participation of elders.

Methodology

The methodology of the study was randomized control trial method. Under the project implemented by PALM Foundation, it was identified a control group and intervention group. At the beginning of the study researchers conducted a base line study was conducted using qualitative data collection methods such as interviews and FGDs. At the end of the project both groups were evaluated in the same methods and impacts were analyzed. Sample included 100 elders from control arm and 100 elders from intervention arm and a structured questionnaire was used to gather quantitative data. 5 FGDs were conducted in three villages and 2 estates. The study was conducted in Nuwara eliya district covering 10 GN divisions.

The elder club strategy

A key strategy of the program has been the establishment of sustainable Elders' Clubs. PALM community mobilisers first made a register of older people in their estate communities and consulted them about forming Elders' Clubs. At the first meetings the elders mapped households where elders lived, including those bedridden or disabled. The Elders' Clubs chose two leaders, a woman and a man, and a name for their Club. They arrange monthly meetings and a variety of activities. There are currently 55 Clubs with a total of 3,913 members. Participatory project evaluations, with focus group discussions with elders and interviews with officials, community mobilisers and the project team, have found that the strategy was successful at promoting social participation and has had wider benefits than anticipated. Activities such as playing music, dance competitions, sports, oral history and excursions to religious sites have provided greater social contact between elders. This has led to increased self-esteem, more friendships, and better relationships within families. Club members visit sick or bereaved peers, often giving pooled donations, and have organized their own saving and small loan schemes. There has also been improved access to services. Through Elders' Club meetings illiterate members were assisted to obtain identity cards which enable them to access welfare entitlements. Club meetings also facilitated the organization of eye and oral health screening (with help from HelpAge Sri Lanka) with referral for cataract surgery or dental treatment. The screening data has enabled advocacy with government services, for example, to treat the backlog of cataract blindness. Leadership skills training and inter-generational activities with young people have resulted in greater community participation and respect for elders. More youth and children are helping elders, for example, in repairing latrines, helping in watering vegetable gardens, and accompanying elders to the hospital for cataract surgery.

Club meetings provide opportunities for interactive health promotion sessions and have allowed the identification and training of peer educators who provide information and support about chronic conditions such as diabetes and hypertension, to all age groups as well as elders; those who have

Holmes W. Joseph J. Social participation and healthy ageing: a neglected, significant protective factor for chronic non communicable conditions. Globalization and Health 2011;7:43.

had cataract surgery have encouraged others to attend for surgery who were previously reluctant. This has improved knowledge and care seeking behaviour. The Clubs have grown in strength and independence and the elders soon took over managing their own clubs. The leaders have their own monthly regional meeting to support and learn from each other. Clubs are vulnerable to illness, death and migration of leaders and members. Some members have domestic commitments or jobs that limit their involvement. Club leaders helped to develop their own evaluation criteria to identify weak clubs, which are invited to visit and learn from stronger clubs, with good results. The clubs have made their own savings and opened bank accounts, allowing them to apply successfully for government registration, which then entitles them to certain benefits. The registration of the clubs has increased their status and their meetings and events are now often attended by the Grama Niladari (local administrative officer), and estate management. There has been steady progress towards sustainability, with many stories demonstrating increasing strength and independence. Elders now have greater visibility and a collective voice, for example, estate management, the estate community based organizations, and politicians are recognizing and responding to their needs. Our experience has shown the valuable role local NGOs can play in linking with different government sectors to provide more appropriate services and in assisting older people to access services. Older people often have more time than younger adults to participate in social activities, and often have the interest, skills and wisdom to contribute to the organisation and management of their clubs. The international non-government organization, Help Age International, has also had successful experiences of establishing Older People's Associations in varied settings across South and South East Asia, and has similarly found a range of beneficial health and social outcomes. In 2011 in Sri Lanka the Protection of the Rights of Elders Act of 2000 was amended to include: "establish an Elders Committee in every Grama Niladhari Division, Divisional Secretariat's Divisions, Administrative District and Provincial Council area." The Ministry of Social Services has since been supporting the establishment of Elders' Committees throughout Sri Lanka, providing a small grant of LKR 5,000 (US\$50) to each one.

Achieving improved participation of elders' clubs for elders Improved quality of Bettergeneral Lessons learned on how to improve health life and social health of elders participation promotion and health systems for healthy Elders contributing to Reduced burden of care on family and on health and well-being government services of children, youth and Improved development outcomes

Figure 1:2 Benefits of elders clubs

Source: Holmes and Josheph, 2011

Results of the elders clubs

The main activities undertaken to achieve this objective have been raising awareness of the rights, roles and needs of elders and the establishment of the Elders' Clubs and social activities as sociated with these. The activities have included visits to religious sites of significance, an oral history program, music and drama competitions, craft work, and active participation in festival celebrations.

Rights, roles and needs of elders

There is an increased awareness and knowledge of the rights and needs of elders and the role that families and the wider community play in meeting these needs. "Caring is important, the children have to look after the elders, they have to provide with facilities for day to day living, they have to provide bedding facilities and enough space to sleep" - Older man, Udapussellawa. In general elders did not respond clearly when asked about their rights. They expressed a desire that their rights be restored not necessarily because this is their human right but because they are frail and deserve sympathy.

When elders were asked "Can you tell us some of your rights? "The facilitators found if difficult to get direct answers. First there was silence. According to one of the facilitators this response took a long time and the facilitator had to try hard to keep the conversation on track. Most of their answers were based on their needs. The following answers are for this question:

"Easy transport facilities are necessary. Others should help elders to be hygienic" Older man, Udapussellawa

"Their children should look after the elders, day to day facilities should be provided by children, they should provide enough space to sleep; financial assistance should be provided by them" – Older man, Udapussellawa

"We would want to go to the temple; go on a journey, the children should respect this" – Older woman, Udapussellawa

Then in the Agarapatana area for the same question one group said:

"We were able to know each other well" - Older man, Agarapatana

"All should speak well" - Older man, Agarapatana,

"From the elders have obtained many benefits, now can be at peace" - Older woman, Agarapatana

"We conduct meetings" Older man, Agarapatana

"We have got the right to get together and talk" - Older man, Agarapatana

"We have the right to talk to officers" - Older woman, Agarapatana

When the question was asked from the Grama Niladaris, and Child Development Officers (CDO) one CDO said this:

"When rights and the importance of elders are spoken to them they look at the benefits as assistance given to them. They do not know that it is their right "- Female CDO, Udapussellawa.

Amongst youth and some government workers there is a greater knowledge and awareness of elders' human rights and a belief that these are also better understood by the elders themselves. "Now they are knowledgeable of their rights a lot" - Female CDO, Udapussellawa. "Elders have

rights, at times we have intervened to get their rights, e.g. when they wanted to get their EPF [retirement payment], and some medical assistance" – Young man, Agarapatana. While the Elders' Project has made substantial in-roads to addressing the lack of knowledge and taken action to maintain the human rights of elders, there is clearly more work to be done. "The elders' right of assets has been violated (since they are illiterate they are cheated)" – young man, Agarapatana. Some teaplantation managers are sympathetic to the needs of elders but others either are unaware or are not motivated. The plantation manager who was interviewed asked "Could PALM undertake advocacy and awareness raising at the senior management level (i.e. in Colombo) to create a better understanding of why caring for the elders is important?" - Tea plantation manager, Udapussellawa.

Elders' Clubs and social activities

In the first year of the Project, 128 Elders' Clubs were established — eight more than originally planned. Over the course of the Project some Elders' Clubs have flourished while others have had difficulty maintaining their membership. Based on this, the PALM team have categorised the clubs as strong, fair and weak and initiated a process where weaker clubs visit stronger clubs to observe what the other club does and what they might do better themselves.

For elders the opportunity to participate in the Elders' Clubs has had immense impact. Before the establishment of the clubs, elders were isolated and had no other opportunity to meet and socialise. Membership in the Elders' Clubs has increased their participation in their communities, their sense of belonging, the capacity to conduct meetings, and greater cooperation among elders.

"Before PALM's program the elders did not gather, they all led their separate lives, if we arrange an activity now, they come and participate and express their views independently, even elders come from neighboring estates and participate, and they improve their relationships among themselves" – young man, Agarapatana.

"We have improved by forming clubs, due to this we have reached benefits such as happiness, unity and meeting together" – Older man, Agarapatana.

"Many opportunities have reached the elders who are involved in PALM project. It has changed them psychologically - they have come out from their houses" - Male Grama Nildari, Udapussellawa.

"After PALM programs began, they guided the people and now we live in unit., Earlier when we go on the road we go as we don't recognise other elders, but now we are like brothers and sisters" – Older man, Udapussellawa.

"We tell the elders who don't come for meetings about the benefits of joining the elders' clubs. Therefore now all are coming than before" - Older woman, Udapussellawa.

When they were younger some of the elders had been members of the CBOs, trade union leaders or key people in the community but with ageing they had been replaced by younger people and no longer held positions of any prominence. The Elders' Clubs have created an opportunity to participate in a forum dedicated to elders and their needs. From what they expressed themselves and from what can be observed, elders appreciate and enjoy this new opportunity to lead, serve and feel recognized again. Some elders have taken the benefits of the Elders' Clubs one step further and together with information about good nutrition now prepare food in the homes of sick elders and feed them.

PALM's integrated holistic approach has played a complementary role in improving the participation of elders, and giving them social support and improving their living conditions. Some elders, who are now Elders' Club leaders, gained knowledge about how to manage a community body from being a CBO member. Some Elders' Clubs also function as an extended CBO. This has oriented them towards community service. On the other hand there are some CBOs which have faltered, but the Elders' Club is stronger and is strengthening the function of the CBO.

"Earlier the youth club helped a little, after PALM came in, we worked together 100%, though we did some activities and gave loans it was not this visible, only after PALM formed a CBO a huge change is seen" – Young man, Agarapatana.

"In the CBO they have discussed about registering our club under the government department" - Older man, Agarapatana.

Social activities, respect and support from others

One of the most striking achievements of the Elders' Project is the joy experienced by the elders. For many of the elders, social outings constitute the first time they have ventured from the tea plantations where they have lived all of their lives. PALM staff also gain from being part of a Project that brings such immediate benefit to elders.

"The elders are delighted to be taken in the trips. They enjoy visiting temples, attending poojas, and meditation. One mobiliser mentioned that the elders were obedient! Since she was taking them alone they were particular not to bother her much. Many elders mentioned that it was a life time opportunity and usually in their families they were ignored when going trips and other functions, saying that they won't dress neatly and won't behave properly". Quarterly report July - Oct 2005

Since the commencement of the Elders' Project respect for elders has improved among some community groups. "Elders are given priority and they are respected" - Older man, Agarapatana.

"For example even for the opening ceremony of the water project of PALM it is the elders who stood forward and did every thing" - Female CDO, Udapussellawa.

Now elders are given priority in important community development programs such as water projects. The CBO invites the elders to take part in it. They also take them on their exposure visits. This time the Elders' day was celebrated in Nuwara-Eliya for the first time since the project initiated and a sticker saying "Lend a helping hand" was issued on that day. The CBO members were involved in arranging and bringing the elders for the program. Another Elders' day was organised for the Badulla region as they could not come for the Nuwara-Eliya one and the Deputy Minister for Health had attended it. Our field staff reported that it was more successful than the Nuwara-Eliya one. The estate management provided transport for them in some estates. In the Badulla region, an awareness was created on PALM's work, among the government officers. This was the first time a Minister (Deputy Minister of Health) attend PALM's program. Qreport July-Sept. 2007

Though elders are willing to participate, socialise and spend time with other elders, in some families there is resistance and reluctance to allow elders time to join the Elders' Clubs or other activities. "Some families have prevented some elders in participating in this project" - Older man, Udapussellawa and "When we come for these activities if our family members don't know reason they will ask us why we are going, we explain them that these are the things that are discussed and

we can get these benefits as a result, If we explain they will understand" - Older man, Udapussellawa.

"Certainly, they cannot do the work given to them (in families), when they come for gatherings or common activities they may get late to go home (a delay of 10 minutes), therefore cooking would be a problem, if they don't cook on time their sons will scold them" – Young man, Agarapatana.

It was expected that the social activities have increased the elders' participation in an enjoyable way and have made them feel recognised as this has been observed from the beginning of the Project. What was unexpected was that the elders said that they feel youthful again. Elders from different regions used similar words to express this. "Our way of dressing, behavior etc, have totally changed from how it was in at the beginning, we feel like studying at schools we are not elders we feel like students" - Older man, Udapussellawa and "We are amazed at ourselves. We feel like youth" - Older man, Agarapatana.

The main activities undertaken to achieve this objective have been advocacy with provincial and district health authorities to raise awareness of elders' health needs and re-orientation of health services to address these needs. The project has specific activities to address specialist health needs (e.g. eye and mental health) and to either reduce dependency or ensure support for elders when it is needed.

Health

The project team has developed an excellent working relationship with Dr Weerasooriya, the Regional Health Director, who has been very supportive of all the project's health related activities. In September 18th 2007, PALM Foundation organized a meeting in collaboration with Dr Weerasooriya, for the Medical Officers of Health, the District Medical Officers, the Director of the General Hospital, the Medical Officer from the Planning Unit of the general hospital, plantation managers, and the Director of the PHDT. At this meeting awareness of the need to re-orientate primary health care services towards the needs of elders was raised and the findings of the questionnaire survey of the health and well-being of elders were presented.

Elders have become aware of diseases associated with old age and how to control them. "Coming forward to get treatment for their diseases has increased" — Female CDO, Udapussellawa. This increased awareness has resulted in behavioural changes such as greater attention to hygiene, improved health seeking behaviors such as attending medical clinics, and greater attention to nutrition. "Eye care treatment and, awareness was created on oral hygiene, hypertension, and other health problems, spectacles were given" - Older woman, Udapussellawa.

Nutrition

Myths and beliefs regarding food and water have also changed and elders now advise their grandchildren and family members in relation to healthy choices. "They have changed due to your awareness, regarding nutrition they are able to give advice, earlier they said that after delivering babies mothers should not eat leaves and after a surgery too it is not good, but now they don't say that, they accept that leaves are nutritious and it could be eaten in above conditions "-female CDO, Ragalla. The Project gave a demonstration on preparing nutritious meals. It was anticipated that elders would use these newskills when preparing meals for their own families. But they have gone a step further and some elders now prepare meals in the house of sick elders and serve them.

Eye clinics

In coordination with HelpAge² and the Ministry of Health [General Hospital], PALM has facilitated eye clinics for elders. In April 2007 a new Consultant Eye Surgeon, Dr Priyanga Iddawela, took up a post in the Nuwara Eliya General Hospital. The PALM Foundation team established a good working relationship with the General Hospital Eye Unit, Dr Iddawela, and other partners, developing a productive momentum. Since then huge progress has been made in reducing the backlog of cases of cataract-related impaired vision. By June 2008 209 older patients had had their cataracts removed by the dedicated Dr Iddawela. Donors and charity organisations such as Rotary and Lions Club and the John Keels Social Responsibility Foundation have donated intra-ocular lenses.

The most notable health changes that have occurred are those described by elders who have either had cataract surgery or received spectacles. "We have come from darkness to light" - Older man, Agarapatana. Improved eye sight has had an appreciable impact on the quality of life for elders. "When I was blind I felt like my hands and legs are not functional, now (after surgery) I can walk well and go anywhere, that is why I could come for this discussion too" - Older woman, Agarapatana and "One person in my division could not do any work at the fire place, after treatment to eyes she finishes cooking before 6am goes for work and in the evening returns with a bundle of fire wood" - Older man, Agarapatana and "A lot of people think that when this happens (cataract) to eyes it is the end of life, When you (PALM) take them for surgery they feel like they are given another life" — Young man, Agarapatana.

Elders' health record

The piloting of a new health record for elders commenced in 2008. The national Department of Youth, Elderly, Disabled and Displaced Persons of the Ministry of Health has developed a new national home based 'Elders' Health Record' (EHR). The EHR aims to stimulate assessment of the health and welfare of people over 60 years, to facilitate better management of chronic conditions, to support change to healthier behaviours, and to improve communication between health and social welfare services. Research indicates that the EHR would be well received by health officials, health care workers, carers of elders and in particular the elders. "It has the potential to raise the dignity and status of a person." - Health official, and "Considering our age it is good to have a document like this" - Elder.

The introduction of the EHR is considered to be timely both in terms of impact and environment of competing priorities. "The introduction of the EHR will assist the Health Department by reducing their workload" – Dr Nihal Weerasooriya, Regional Director of Health, Nuwara Eliya.

An Australian doctor of Sri Lankan origin, Dr Manisha Fernando, is undertaking an evaluation of the introduction of the Elders' Health Record as part of her placement with the Burnet Institute under the supervision of Wendy Holmes.

Other needs

Overall, the Elders' Project has made significant steps to increasing the awareness of elders to health problems. When asked, the elders identified other services that they could benefit from. These included:

² HelpAge is a NGO whose mission is to improve the quality of life of all senior citizens in Sri Lanka irrespective of their religion, caste or race.

- Counselling services: "Now as there are problems in the families they do not look after the elders, when they become 74 75 years they are psychologically affected" Male, Grama Niladari, Udapussellawa
- Exercise sessions to promote strength and mobility "Have exercise sessions for them"-Young man, Agarapatana
- Assistance or subsidies to support elders to buy drugs (the ones they have to buy e.g. medication for diabetes) closer to their homes. "When I go to the clinic I have to spend Rs. 3,000.003 for medicine, the government dispensary does not have some drugs, you have to buy it outside, therefore at least the poor should be helped in buying drugs" Male, Grama Niladari, Ragalla); "Getting drugs is very difficult" Older woman, Agarapatana
- Access to hospitals needs to be improved. "Since we cannot walk we some times don't even
 go to the hospital" Older woman, Agarapatana and "We don't get vehicle facilities for an
 emergency, there is transport problem" Young man, Agarapatana

The main activities undertaken to achieve the objective of improving access to services have been focused on working with relevant organizations to improve access and management of retirement entitlements; ensuring elders are informed about and receive their entitlements; and that there are greater opportunities for elders to generate income post retirement.

Awareness of entitlements

In many cases elders have not been aware of their entitlements or have not been able to navigate the system (due to the power differentials) without the assistance of a middle-man who reportedly over-charge for their service. The Elders' Project has undertaken education with elders to increase their awareness of their entitlements but more awareness is needed for elders to avoid stressful delays in obtaining obtain their retirement payments (Employees Provident Fund – EPF, Employees Trust Fund - ETF) in full. "In Nuwara-Eliya, PALM Foundation did an awareness program to explain about EPF and ETF. Our sons are working on the estates, but they don't know anything. In the estates they don't teach us these things" - Older man, Udapussellawa.

Access to entitlements

The various post retirement entitlements and understanding the respective roles of the players in how entitlements are accessed by elders is complex. During their working life tea plantation workers contribute a percentage of their monthly income (approx AUD\$ 50-60 per month) to the EPF and the ETF. Upon retirement elders can access lump sump payments from these Funds, based on being able to prove their identity; in the case of the EPF that they are aged 55 years for men and 50 years for women. What could be a reasonably simple process is complicated by incomplete record keeping in the Plantation offices, deception on the part of any number of office bearers and the difficulties for elders in proving who they are. Often more than one person share the same name and movement from one plantation to another (particularly women when they marry) means that records are often either duplicated or incomplete. "There are many short comings in obtaining EPF, ETF etc. Elders are facing many problems like mistake in names and their initials" — Male Grama Niladari, Udapussellawa. The Elders' Project has supported elders in accessing identity cards to facilitate payment of entitlements.

³ Approximately AUD \$30. Tea plantation workers earn approx. \$2 per day

The process of getting identity cards for elders has been expedited by a partnership between PALM and the Additional Government Agent (AGA) in Walapane. Identity cards have been issued to give elders priority in receiving services, ie he/ she can have priorities in the waiting lines of hospital clinics, and other services like banking, postal etc. Unfortunately the rest of the community and service providers are not aware that they should provide these facilities to elders. "After retiring we don't have the respect or power, if we go to the hospital we have to wait in the line, they don't even give us a seat" - Older woman, Udapussellawa.

There are also ongoing difficulties that arise from the Tea Plantation offices. Elders reported that there are discrepancies in records and delays in paying of funds and bribing of middle men. "The estate management should be made aware to avoid mistakes in names and age, that will help the elders to spend their elder hood better, some could not get it" - Male, Grama Niladari, Udapussellaw; "You have to create awareness to the management to make clear records of names" - Male, Grama Nildari, Udapussellawa; "If Rs. 300,000.00 is entitled for the worker then Rs. 50,000.00 is given as bribe" - Male, youth, Agarapatana.

There is no structured process for raising awareness of welfare services such as Samurdhi. Despite this, some elders are able to access the assistance they need.

"Now if you take the government, wheel chair and walking sticks have been given to those who cannot walk, awareness is given in organic agriculture, seeds have been given, preparing bio fertilizers have been taught; the private sector is also doing this" - Male Grama Nildari, Udapussellawa;

"The government has given equipments and coupons to elders (to get provisions)" - Male Grama Nildari, Udapussellawa;

"The estate infrastructure is also doing some help, on estates they have constructed roads and steps" - Male Grama Niladari, Udapussellawa;

"The elders are able to get a lot of hospital related help; the destitute elders should also get, at the government level too there are many elders homes; in 5 of the AGA division of Nuwara - Eliya there are elders' homes" - Male Grama Nildari, Udapussellawa

As stated above, services do not reach all those who need them. Misappropriation in handling subsidies; delays; and lethargy on the part of most of the officers related to ensuring elders receive payments all contribute the system continuing to fail meeting the needs of elders.

Income generation activities

The loans and income generation activities (IGA) have contributed to improving elders' income. "From the shop I earned Rs. 2,600.00 as profit, I used it for my own needs and medicinal needs" - Older woman, Agarapatana and "From the loan I earned Rs. 10,000.00 as profit, my living conditions have improved" - Older man, Agarapatana. Elders are motivated to be involved in income generation activities which enable them to be productive and reduce dependency. "We have obtained loans and they (PALM) have given us trainings on IGP activities" - Older man, Udapussellawa and "We did cultivation and paid the loan back and were given two more loans to others" - Older man, Agarapatana.

There are some difficulties with the loans and IGA activities. Principally these relate to the available funds for loans. Loans need to be of a sufficient size to establish a successful and sustainable IGA but

larger loans mean fewer can be given. "If you take the loans given in Maha-Uva, it will be difficult if we gave loans to every one, to get maximum benefit this loan amount is not enough, the recovery rate is slow, we cannot revolve it" - Older man, Udapussellawa. This means that not all elders have the same opportunity to undertake IGA. "Not all get these be nefits" - Male, youth, Agarapatana.

Savings

As a result of financial awareness education provided by the Elders' Project, elders have initiated savings individually and through Elders' Clubs. They are aware of the importance of individual and/or collective savings - but this too needs further awareness. "Through club savings, elders provide loans to their members; for instance if they have to go to the hospital this loan is given" - Fe male Creche attendant, Udapussellawa.

Infrastructure

Elders identified the need for common infrastructure buildings for social activities such as the Elders' Club meetings. "If we are to have a meeting for elders we have to beg from the temple committee for keys, therefore it would be good if we had a separate building for us" - Older woman, Agarapatana. Other facilities such as libraries were identified as improving the living conditions for elders. "Libraries could be built for them, then it will reduce their stress, at least one per region could be built, so they can come and read books and go" - Male, Grama Niladari, Udapussellawa.

The condition of roads and the access and availability of transport impact on Elders' living conditions. The roads into the plantations are improved by the government but more could be done to improve the road network and transport service to suit elders. "Some roads on the estates are done well" - Older man, Agarapatana; and "We need easy transport facilities" - Older man, Udapussellawa.

Financial security in retirement

Awareness conducted by PALM on preparing financially for old age has prompted some elders to utilise their lump sum effectively. "Now they are using their money effectively; Earlier they got their money and built houses, now they buy three wheelers for their sons, this too generates an income, mostly improvement, but some are not like that they waste their money and suffer later" - Male, Grama Nildari, Udapussellawa and "Now they are using their money effectively; Earlier they got their money and built houses, now they buy three wheelers for their sons, this too generates an income, mostly improvement, but some are not like that they waste their money and suffer later" - Male, Grama Nildari, Udapussellawa. (Repeated)

Elders still may choose to spend part of their lump sum on their children but there still remain examples where the families use the money for purposes other than caring for the elders. "Now it is not like old days, more people know how to save, but it is the children who use their parents' money" -Female, CDO, Ragalla and "After getting EPF and ETF they spent it on their children's weddings, bought cattle, saved in the bank, bought land, spent on medication, built houses, got electrification etc." - Older man, Agarapatana.

More financial planning and counselling is needed for elders and their families. The proposed leaflet on preparation for old age has not yet been developed but should be considered in the coming year. Elders and program staff alike identified that they need to know more about financial matters. "I have to tell you one thing, those who have joined your programs are now keeping all the necessary

documents ready, they know that they should be careful with their documents" - Male, Grama Niladari, Udapussellawa.

Planning for a healthy retirement

The elders were more aware of managing physical conditions of old age. Within at least one Elders' Clubs the health of the group members is talked about and monitored. "Regarding supervising elders' health, a monitoring group of youth has been established (in Thangakelle)" - Male, Youth, Agarapatana. Elders are providing support to each other as well. Elders who have had particular experiences in the health system share these experiences and the positive outcomes encourageing others to seek medical and surgical care. "The elders share their experience (e.g. sharing the experience of undergoing cataract surgery with others and encourageing them to go for surgery)" - Male, Youth, Agarapatana.

Elders report preparing for old age and have a greater awareness of managing chronic illness and the need for good nutrition "Generally after passing the 40th year they start to prepare beginning from control of food" - Male, Grama niladari, Udapussellawa. Elders identified that more could be done in preparing for old age, particularly in relation to raising awareness of preventative and health promoting messages. They talked about ways that they themselves could create some of these changes. "The parents should now themselves teach their children regarding looking after their parents at old age" - Male, Youth, Agarapatana. Other changes in attitude could be initiated by teachers and health service providers. "If you have to create a feeling of welfare in the families you have to create a change in the educational system, now it self the youth have to be educated. This should be included in the syllabus" - Male Grama Nildari, Udapussellawa. These included promoting a more caring approach to elders as they become more dependent and reducing the effects of excessive alcohol consumption and smoking. "Eradicating the use of alcohol" - Male youth, Agarapatana.

The Elders' club has contributed to the increased knowledge and steps taken to prepare for a healthy and financially secure old age. Of course, more could and certainly needs to be done, but there is a change in attitudes amongst elders and many of the youth who participated in the FGD.

Conclusion

Many low and lower middle-income countries, especially those in South and South-East Asia, have rapidly ageing populations. National governments are seeking guidance in promoting healthy and active ageing. There is much evidence that social isolation, lack of support and stress increase risk of morbidity and mortality from chronic conditions. Yet strategies to increase opportunities for social participation have not been emphasized in current international policy responses to the increase in chronic conditions. That the agendas of addressing NCDs and promoting healthy ageing overlap has not been sufficiently recognized, and attending to the health problems of older people has been relatively neglected. There are several useful examples of successful and sustainable initiatives of catalyzing the formation of elders' clubs or older people's associations. Benefits include greater social contact, social support, opportunities for learning, increased and easier access to health and social welfare services, better self-management of chronic conditions, greater participation in the community with inter-generational benefits, better relationships within families, greater visibility and increased influence. Policy advice should promote encouragement of links between government services and local non-government organizations that are well placed to facilitate social

organizations of older people. When in good health older people can be of great benefit to their families and communities.

References

HelpAge International. 1998. *Ageing: the forgotten development issue*. Ageing and development. [http://www.helpage.org/download/4d067106d9d75].

HelpAge International. 2016. Older people in community development: The role of older people's associations in enhancing local development.

Holt-Lunstad J, Smith T.B. Layton J.B., 2010. *Social relationships and mortality risk: A meta-analytic review*. PLoS Med, 7: e1000316.

Holmes Wendy and Joseph Jennifer. 2011. *Globalization and Health "Social participation and healthy ageing: a neglected, significant protective factor for chronic non-communicable conditions* http://www.globalizationandhealth.com/content/7/1/43

House J.S, Landis K.R. Umberson D., 1988. Social relationships and health. Science 241:540-545.

Ministry of Social Services. 2011. *National Council for Elders: National Action Plan on Ageing 2011-2015*: Colombo, Sri Lanka;

Patel. V, Prince. M., 2001. Ageing and mental health in a developing country: who cares? Qualitative studies from Goa. India. Psychol Med, 31(1):29-3.

Shrestha. L.B., 2000. Population ageing in developing countries. Health Affairs. 19(3):204-212.

WHO. 2011. Global status report on non-communicable diseases 2010. Geneva;

World Bank Human Development Unit. 2008. *South Asia Region: Report* No. 43396-LK Sri Lanka addressing the needs of an aging population.

[http://siteresources.worldbank.org/INTSRILANKA/.../LKAgingFullRep. pdf].