

Paul Hamlyn Foundation

Iswar Sankalpa

Change Process:

How 'assisted' is assisted community living?

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Iswar Sankalpa is a service delivery organisation in West Bengal that aims to improve the wellbeing of people with mental health problems, particularly those experiencing homelessness. They provide care for homeless women at the Sarbari shelter in Kolkata.

This account explores a new model for supporting women who were ready to move on from the shelter, to regain independence in a safe and supportive environment.

A narrow, dirt road winds through the village of Kashipur. Untamed foliage, sunlight weaving its way through the leaves high above, feeding the growth on both sides of the road. The thick foliage cannot filter the laughter of young village girls and women sitting in their courtyards, in groups. Flocks of chickens move around aimlessly, harvested paddy evenly spread out seeking the sunlight to rid itself of moisture, while the road continues to wind ahead.

A little further up, you might stumble upon a gate. It is easy to miss, but if you happen to enter it, an expanse of greenery meets you, foregrounding a white building. At the entrance, Devi, the cow, might approach you if she’s in the mood, and the women staying there would definitely come to greet you.

Nayagram means a ‘new village’. Depending on the time of the day you go, the number of women you meet varies.

Some are in the fields, cultivating vegetables, a few others involved in the daily chores inside the house, some would be tending the goats at the other end of the house, and a lucky few might sit in the garden, enjoying the breeze.

Nayagram, born of the will of a few women who lived at Sarbari, is a commune of strong, resilient women. These women once lived on the streets of Kolkata, without any sense of self. They had lost all their relationships and were living in inhuman conditions. They lived through violence, survived it and came to stay at Sarbari.

Sarbari is a shelter for homeless women recovering from psychosocial disabilities. It is run by Iswar Sankalpa in Kolkata. There, a multidisciplinary team of professionals cares for the women. They understand the trauma these women have experienced and provide an environment conducive to recovery—mentally, physically and socially.

Many stayed at Sarbari beyond their recovery as they did not have a home to return to. Most of them came from the countryside, outside Kolkata city. They had wandered into Kolkata and found it hard to relate to the vocational activities in which they participated at Sarbari; these were too ‘urban’, perhaps. Often, they expressed a desire for a life outside Sarbari—independent, free, in a place where they could work in the fields. They would live together in a group, they said. They would work, cook, clean and look after each other.

In 2016, their journey began. Three women from Sarbari went to live in rented accommodation in Kashipur, a village nearly two hours away from Kolkata. There, the women would work, live in the

village and eventually move to a more permanent arrangement.

It was the first time Iswar Sankalpa had attempted such an arrangement for some residents of Sarbari. This was considered an experiment in independent living where the women would live primarily on their own, with minimal support from Sankalpa.

With the help of a previous board member of Iswar Sankalpa, an advocate was identified in the village. Headmaster of a local school in Kashipur, the person was well known and supported the idea of Nayagram. He offered to rent a room in his house where the three women could stay initially.

Three years since its inception in 2016, Nayagram has changed from an independent living programme to an assisted community living program. When the women had first moved to Kashipur, Sankalpa funded their rented accommodation and gave them essential material to set up their home. The social skills of the women improved significantly with their stay in Kashipur. They made friends in the local market, exchanged greetings with people and became accepted in the community. The landlord looked after their wellbeing.

The three women had collectively voiced their desire to live on their own - Sankalpa trusted and respected their decision and provided minimal support. But it became clear that the women were overwhelmed by the demands of the multiple tasks they had to perform. Cooking, cleaning the house, working in the fields and taking their medication. Their health deteriorated. Sankalpa realised that the women would need more support to manage the home and take care of themselves.

A staff member from Sankalpa started to visit the Nayagram twice a month. The

primary reasons were to monitor their medicine intake and to see if any help was needed. A cook was appointed to prepare three meals for the women. With this assistance, the women managed better. This minimal assistance worked well for some time—although the cook took advantage of the women and pilfered ration materials from the kitchen.

In some time, more women from Sarbari joined the original three. Sankalpa appointed a full-time caregiver to manage the household and support the growing community.

When the women went from Sarbari to Nayagram, they started living at a different pace. They needed assistance as they explored their personal growth paths in the new environment which was quieter, greener, with fewer people with acute mental health conditions that triggered relapse at Sarbari. But they had to take up all the responsibilities that came with independence - cooking, shopping and taking medication.

They managed, slowly and steadily but with the assistance of a caregiver. In 2017, nearly a year later, nine women and a full-time caregiver moved to a bigger rented property near a school where most of them worked. They quickly settled in the new place and worked well together.

The caregiver calculated the quantity of vegetables to be bought, while the women cooked. Together they made the shopping list. The caregiver accompanied the women to the market where they made their purchases. The money was handled by the caregiver at first, and in a few months, by some of the women. The caregiver looked after running the house, and the needs of the women as and when required.

Women arriving at Nayagram had to take care of their own personal hygiene and work. Some of the women, although recovered, still experienced mental health issues. Priyanka, for example, would not work in the fields; she liked visiting the market instead. The caregiver respected her choice. Her duty, therefore, was to go to the market and do the shopping. For the next fifteen months the arrangement worked just fine. Meanwhile five more women joined the nine at Nayagram.

After nearly another year, around October 2018, the women moved into a new building nearby, developed by Sankalpa. A programme coordinator came on board to manage the administrative aspects of agricultural work, animal husbandry, medical camps, budget and general upkeep of the set-up, while the full-time caregiver continued to assist the women in their daily activities. This arrangement helped the residents manage their life with limited assistance.

A day in the life at Nayagram

The women get up in the morning, clean their house and prepare tea. They tend to Devi, the cow, and their three little goats.



Pata and Sonal with the goats on their afternoon walk. Image courtesy Iswar Sankalpa.

They gather dry wood for cooking and when the sky gets cloudy, they collect dried palm leaves to cover the wood they have collected. They know exactly when

the goats need to come out and roam the fields. They wash their own clothes, do their dishes, clean their rooms, cook food for everyone and care for the pets they keep. They go to work in the fields nearby. The flowers in the garden are their pride, they tend to them every day.



Rina with the rose grown in her garden. Image courtesy Iswar Sankalpa.

They look out for each other, but also hold each other accountable for their share of duties. Together with the Coordinator, they prepare the daily menu and maintain cordial relationships with other community members of Kashipur. The women at Nayagram had built a home for themselves.

Nayagram taught Sankalpa that a programme that integrated mental healthcare services with a group living set-up required a team of care providers. At Nayagram, a caregiver and a project coordinator were full-time, while livelihood skills trainers came in part time. A team of mental health professionals that included a counsellor and a psychiatrist visited once a month, and a team of functional literacy trainers supported the women.

The women worked hard in the fields. They have cultivated several quintals of potatoes, brinjal, bananas, spinach, cabbage and other vegetables. Seeing them working in the fields, bent at the waist, you are struck by their resilience to make the journey from the street to the

field. The sight of them sitting together next to the flower bed and laughing makes you reflect on our innate need as humans to forge meaningful relationships.

However, one morning in August 2019 shook the foundations of the Nayagram community. Everyone, including the caregiver and the coordinator, woke up with severe bouts of vomiting and diarrhoea. By early evening, the local community health worker admitted six women to the local hospital. The next morning the emergency officer from Iswar Sankalpa took them to a bigger hospital in Kolkata. It was a clear case of food poisoning. That night the health of one of the residents, Sumi, deteriorated significantly. By the morning she passed away.

No one knows the cause of the food poisoning; it could have been the pesticides they used in the fields, or an insect that fell into the food. Hygiene in handling food would have to be strictly maintained. Thereafter, every time the women returned from the fields, they washed their hands thoroughly. A poster was put up next to the basin, showing steps in cleaning hands properly. Every corner of the kitchen was cleaned daily. The caregiver and the coordinator increased their involvement in maintaining hygiene and cleanliness in the house.

A cook was appointed to prepare light food for the women. This assistance would be reduced, albeit gradually, and the women themselves have become more alert to the serious implications of poor hygiene.

Learnings

In the last three years we learnt that no one lives completely independently. We all live as interdependent beings; dependent on a family, people who work with us, for us, the community, technology. All these help us function each day.

The women at Nayagram needed support, especially under stressful situations. They needed assistance to manage the multiple responsibilities of maintaining a house, working for a livelihood and handling one's emotions. Assistance is required to create a space and environment where the women feel safe and secure—have a sense of belonging.

In the last two months we have had to re-think the limits of psychosocial disability, the level of assistance required for the wellbeing of the residents and to what extent the residents shall take their own decisions. We must also consider the possibilities of human error.

Sometimes, life gets difficult and we need support to cope as we get back on our feet—this is the definition of love, care and support which Iswar Sankalpa strives to provide.

The question we ask ourselves after the shift in level of assistance is “How assisted is assisted community living?” One thing for sure is that the assistance is need-based; the primary objective of the programme is to provide women the space to realise themselves, to be able to live as independently as they can—this is their home.

Meanwhile the set-up itself is dynamic, we need to be able to shift the systems according to the needs of the women—their wellbeing is at the core of all decisions. Every response to an incident is a learning opportunity for Iswar Sankalpa.

For more information on their work, visit
www.isankalpa.org

About Change Process

The Change Process series shares learning from projects supported by Paul Hamlyn Foundation in India, to help others working in similar spaces to overcome obstacles they face in their work.

The accounts have been facilitated and developed by Dr Vikram Gupta working closely with the organisations we support.

The accounts are based on the lives of real people but in the interest of privacy their names have been changed.