



FACTORS CONTROLLING COPING STRATEGIES OF SLUM DWELLERS OF MIDNAPORE MUNICIPALITY, WESTBENGAL

Social Science

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ABSTRACT

Coping strategy is the approaches that people use in order to deal with stresses, pain and natural changes that experiences every day in their life. It is conscious or instinctively choice of adaptation to phenomenon stresses that that enhances control over behaviour or gives psychological comfort. It leads to either cohesion in the community/society or can also be misery and/or crucial life that include migration, begging, child labour, violence, prostitution, even selling organs etc. Most of the cases poor neighbourhoods in each urban area are having overcrowding and congestion, extremely poor sanitation, lack of civic amenities and deviant behaviour, overcrowding, poor housing, choked drains, lack of garbage disposal facilities, poor personal hygiene, and hygienic conditions that are specially hall marks of urban slums in India. Likewise, slum dwellers are comprises diverse group of people with different interests, means and background. Slum dwellers in every urban area willingly or unwillingly try to solve or cope with the existing problems or adopt some strategies that could effective or harmful.

The study is an initiative to measure the degree of coping strategy and its relation with major factors that controlling the strategies which adapting the inhabitants over different slums in Midnapore Municipal Area, West Bengal by using simple composite index, cross tabulation & correlation. In order to do the same, all slum neighbourhoods have been identified through in depth field survey with the help of earlier collected slum related information from municipality of Midnapore town. Relevant questionnaires used to collect the related information from households using appropriate sampling techniques.

KEYWORDS:

Coping mechanism, Slum, Survival skills, Standard of living, Composite index

Introduction:

The strategies adopting during stress, pain or critical situations which we experiences in our daily life or span of life is known to be coping strategy. It is conscious or instinctively choice of adaptation to the natural changes of the people which controlled our behaviour or provide some strength by which we overcome some critical situation, stresses and pain and/or also gives psychological comforts. Coping Strategy is two types-Positive coping strategy leads to positive changes in the society i.e. cohesion in the community/society, intention of development of economic status etc. and negative coping strategy can be misery and/or crucial life that include migration, begging, child labour, violence, prostitution, even selling organs, crime etc.

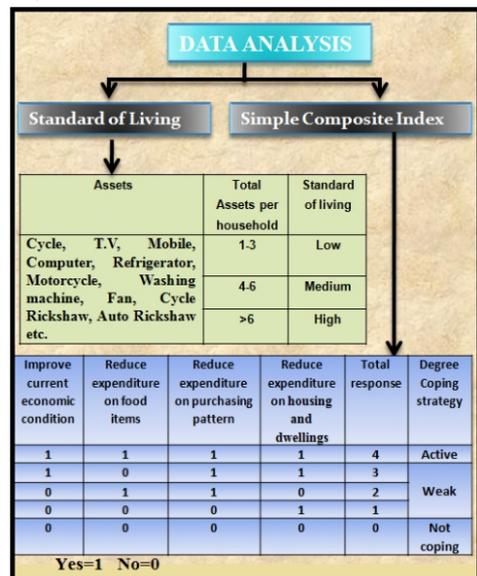
A rural or urban household settlement has a significant influence on the choice of coping strategy. **Lokshin and Yemtsov (2004)** find that urban households are less likely to adopt active coping strategy than those in the rural areas. The urban slum chronically poor are characterised by food insecurity every year, poor children's school attendance and low level of assets. It has been observed however, that chronic poverty is mostly considered as an outcome of shocks or stresses such as climatic, economic, Political/social/legal, Crime ,Health shocks (e.g. death and illness) and miscellaneous shocks (e.g. conflicts and disputes with other family members, neighbours or other residents regarding access to land or other assets) etc. (**Dercon et al., 2005**). However, different sufferers of shock/ stresses adopt different strategies in coping with the crises. When households suffer shock/stresses, they do not stay on inactive but adopted different coping strategies. These coping strategies are substitute mechanisms for when habitual / daily needs are interrupted. In this situation, the first attempt households do is that to minimize risks and administer losses to ensure some minimal level of sustenance. The second things households do in distress is the gradual disposal of assets. As a result most of the households adopted cutting expenditure, turned to government agencies for assistance, reduced their expenditure on food, sold their belongings, changed their place of residence, sought help from relatives, turned to friends for assistance to cope with the existing critical fate of life as a part of coping strategy (**Frankenberger, 1992**). Nevertheless, coping strategies differ on the basis of gender, assets, income of head of households, education, family types etc (**Lokshin and Yemtsov, 2004**). It also appears that most people use coping strategies that are not effective. Hence, there are some factors that have been affecting the coping strategies of the households.

Objectives:

- To measure the degree of coping strategy of the slum dwellers.
- Bring out the factors that controlling coping strategies of the slum dwellers.

Methodology:

Data Analysis:



Design of the Study:

Key questions	Data
1. Standard of living	Total number of assets per household.
2. Degree of coping strategy	Improve current economic condition, Reduce expenditure on food items, purchasing pattern, housing and dwellings.

Sampling Techniques:

The study is being mostly both subjective and analytical. Therefore for this purpose, 20 slums were randomly selected. From each selected slum, 10 households (Hindu & Muslim) were again randomly selected. Purposive sampling was adapted to some degree in choosing the opinion of those households together who are participated in group discussion personally.

Data Collection:

Division	Data	Procedure of data collection
Standard of living	Total number of assets per household, Income, Expenditure, Housing.	Household survey through structured Questionnaire

Degree of coping strategy	Improve your current economic condition, Reduce expenditure on food items, purchasing pattern, housing and dwellings.	Household survey through structured Questionnaire & Focus group discussion.
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Result & Discussion:

1.0 Factors affecting coping Strategy:

There are some factors which are correlated with the choice of coping strategies. Occasionally these factors are affecting the coping strategies effectively or sometimes partially. Thus, now we have to look into the factors that have been affecting the coping strategies as given below:

1.1 Age of Head of a Household:

Age of a household head has a significant impact on the choice of a given coping strategy. The findings indicate that households with younger heads (<35 years) are significantly more likely to choose active coping strategies (90%) than those with older (>35 years) household heads (nearly 86%). This is perhaps due to the fact that participation in some economic activities requires enormous energy.

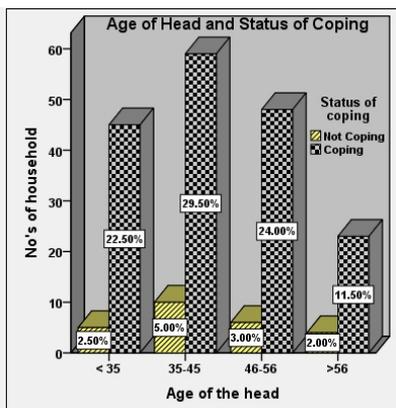


Fig-1: Age of head of households and status of coping

1.2 Duration of living & Place of migration:

Years of living on current place of residence is a factor that controlling whether household takes coping strategy or not. In the study area those household living less than 3years but at least one year's taking 100% coping strategy nearly 0.5% households and less than 5 years but at least 3 years intriguing 66.7% about 1% households. It is also found that at least 5-years and above living household taking 86% coping strategy nearly 86% households. The higher percentage of coping strategy adopted by household living more than 5-years due to long standing dwelling and consequently adopted strategies gradually for improving their

Years of living on current place of residence	Not Coping	Coping
< 3yrs but at least 1yrs	0.0	100.0
< 5yrs but at least 3yrs	33.3	66.7
At least 5yrs	12.2	87.8

standard of living and less than 3-years living households adopted 100% coping strategy due to volatility in income and place of residence.

Place of migration	Not Coping	Coping
No migrated	12.7	87.3
Town	6.9	93.1
Village	17.2	82.8

To the extent that within the town migrated household taking coping strategy (93.1%) than household coming from villages and those are living since birth they also adopted coping strategy nearly 87.3%.

1.3 Education:

Educational Status	Not Coping	Coping
Illiterate	9.6	90.4
Primary	9.6	90.4
Upper Primary	17.5	82.5
Madhyamik	15.0	85.0
Above Madhyamik	20.0	80.0

Educational level of the household members has been considered as one of the factors that influence the adoption of a given coping strategy. Households with higher levels of education are significantly more likely to adopt active coping strategies than others. Education ensures that people gain skills and knowledge, and ensures that they use their skills and knowledge productively leading to a choice of better coping strategies. There is preponderance of a strong association between education and chronic poverty. But in the study area, the households with illiterate and/or completed only primary education adopted active coping strategies (90.4%) than the higher educated households (80%). Low education households associate with low wages activity. Due to lack of knowledge and skills they have a least chances of getting higher wages works consequently have a low income level and for their sustenance they bound to take on coping strategies.

1.4 Occupation:

Occupational status	Not Coping	Coping
Industrial workers	25.0	75.0
Rickshaw puller	15.4	84.6
Small business	8.0	92.0
Wage labour	13.0	87.0
Jobless	5.9	94.1
Others	15.6	84.4

Employment status after the occurrence of a shock is another factor that influences the choice of a coping strategy. The finding indicates that household with an unemployed head are significantly more likely to adopt active coping strategies (94.1%) and those are industrial workers less likely to take on coping strategies (75%) due to slight lofty income and can easily handle forthcoming shocks. So, lower wages income level has a low standard of living and they take on some strategies to keep their minimum level of day to day livelihood. Beyond this they can't think further shocks. Therefore, there is a close relationship between low wages occupation and active coping strategies.

1.5 Earning members & Monthly income:

Total Earning Members	Not Coping	Coping
1	13.9	86.1
2-3	9.6	90.4
>3	23.5	76.5

Households with more earning members have a higher income level and vice-versa. Headship of a household by a single earning member is another factor that may affect the choice of a coping strategy. The findings specify that single earning member households are more likely to adopt active coping strategies (86.1%) than other households. It is also found that more than 3-earning member's households (76.5%) adopt weak coping strategies due to economic stability.

As far as income of head and family concern, less than Rs. 5000-6000 per month households are taken energetic strategies to cope with poverty than the elevated income level of the households. The reversibility between income and earning members in order to coping strategy owing to single members family employed with Govt. service, have a self business or earn more money or households headed by pensioners than the others poor households.

Income Category	Not Coping	Coping	
Head of households (Rs.)	< 6000	9.0	91.0
	6001-11000	24.2	75.8
	>11000	25.0	75.0
Total Family Income (Rs./)	<5000	4.8	95.2
	5001-8000	19.7	80.3
	8001-11000	13.3	86.7
	>11000	10.8	89.2

1.6 Type of house & Sources of lighting:

Type of house	Not Coping	Coping
Kuchha	10.0	90.0
Semi-pucca	13.7	86.3
Pucca	11.6	88.4

Every household have a dream to better housing with enlightenment that reflects their standard of living. But this dream slows down when

they live in earthen house with no lighting facility sustain by them. Then they bound to take some strategies to reach their dream. Therefore, type of house and sources of lighting is correlated with coping strategies. The study reveals that 90% households have taken coping strategies living with kuchha house and 88% with electricity. But beyond that with semi-pucca or pucca house and light by kerosene oil least efforts are taken to a large extent. However, some household (88.4%) with pucca house adopted coping strategies than those with semi-pucca households.

1.7 Marital Status and Age at marriage:

Marital Status	Not Coping	Coping
Married	13.2	86.8
Unmarried	12.5	87.5
Widow	10.5	89.5
Divorced	0.0	100.0

Most of the studies investigate the influence of some household characteristics on household welfare and finds that the marital status, age at household head marriage tend to have statistically significant positive consequence on household welfare. Marriage tends to lot of responsibility along with expenses where income level is constant consequently adopted coping strategy. The study found that widow and divorced head of household adopted active coping strategies (89.5 and 100%) than the currently married (86.8%) and unmarried head of households (87.5%). So there is positive correlation between marital status and coping strategy.

Age Group	Not Coping	Coping
<15	0.0	100.0
15-19	9.7	90.3
20-24	16.3	83.7
25-29	6.7	93.3
>29	22.2	77.8

1.8 Family size:

Family Size	Not Coping	Coping
<4	13.2	86.8
5-8	12.1	87.9
>8	11.8	88.2

Another factor that has significant effects on the adoption of a given coping strategy is household size and choice of active coping strategies. However, most of the studies observed that household size tends to have a statistically significant negative consequence on household welfare. If there is large family size, expenditure of the family will be high and as maintain the feeding of family, no's of earning members and/or income level should have to a standard level. The study of slums of Midnapore town reveals that there is positive correlation (+0.115) between family size and coping strategy. It is found that adaptation of coping strategies (88.2%) increases with increasing family size (>8) and poorer (86.8%) tends to least family size (<4). Therefore, size of family has strapping influence on the choice of coping strategy in the slums of Midnapore town.

1.9 Types of family:

Family Type	Not Coping	Coping
Separate family	8.8	91.2
Extended family	18.2	81.8
Joint family	22.2	77.8
Female headed family	4.8	95.2

Type of family and headship of a household is considered to have a serious influence on choice of a given coping strategy. In addition, headship of a household by a single parent is another factor that may affect the choice of a coping strategy. In general, separated or female headed families headed by single parent consequently no's of earning members and income level is less amount. But in case of extended or joint family this situation is reversed direction. It is observed that separate and female headed family headed by single parent are more likely to adopt active coping strategies (about 93%) than joint or extended families (77.8%).

2.0 Religion & Caste:

Religion	Not Coping	Coping
Hindu	15.3	84.7
Muslim	5.7	94.3
Christian	33.3	66.7

Caste	Not Coping	Coping
General	10.9	89.1
OBC	7.1	92.9
SC	11.6	88.4
ST	50.0	50.0

Every household has a custom, norms, values or culture fully controlled by their religion and/or caste. Also religion and/or caste are an identity of a household in the society. Therefore coping strategy may be varying as they are belongs to the distinctive religion and caste. The study reported that the households be a member of Muslim religion and/ OBC caste more likely to take on coping strategies (94.3% and 92.9%) than those households are belongs to others religion and/or caste. Therefore, size of family has sturdy influence on the choice of coping strategy in the slums of Midnapore town.

Conclusion & Policy Implications:

Slums are crowded and families in slums are struggling to overcome poverty. On the basis of descriptive results, 87.5% of the households in the slums of Midnapore town adopted strategies in coping with major problem in their daily life in which only 21% households adopted active and 66.5% households adopted weak coping strategies, still 12.5% of the household have not yet been adopted any strategies. As regards the influence of household characteristics on coping strategy, the results indicate that household with kuchcha to semi-pucca house, single earning members, large family size, low level of education, less amount of assets, family income, illness, female headed and less than 18-years marriage etc have moderate influences on coping strategies. However, the results also find that monthly family expenditure, family planning, child education and marriage, child labour, family aspects etc. of a household head does not have any significant influence on the ability of a household to adopt active coping strategies. But surprisingly, drug and alcohol intake, skill and strength of work, unconsciousness about job opportunity, expanding money on social ceremonies, political work and biasness, women violence, quarrelling, social unrest and crime increasing day to day rather than taking any strategy to cope with poverty. Therefore, the possibilities for improving the environment through individual action are very limited. However the study observed that the Government has formulated various policies to address poverty vulnerability. Nevertheless, there is still inadequate institutional mechanism and capacity at the grassroots to ensure implementation of the formulated policies and strategies, and in most cases, people at the community level are not aware of the presence of these policies. Therefore, there is an urgent need for policy makers, researchers, faculties, NGO's, organized groups, Politician and communities to formulate and pursue policies in the slums that will provide better job opportunities, reduce economic hardship, increase awareness and to improve the environment in which people live and, in general, to raise their standard of living.

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