

Quality of Life of Resettled Families in Urban Areas- An Empirical Study

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Abstract

Quality of life is included in sustainable development, which refers to strategies aimed at ensuring growth in a way that both meets people's needs today and does not degrade them in the future. . This paper aims at studying the quality of life of the people who were relocated from the Chennai slums phase by phase after the Chennai floods in 2015. This resettlement which commenced after the floods in 2015 in Chennai, has led to mass resettlement of thousands of families from their original habitats to Perumbakkam, nearly 20 kms away from their previous location. The WHOQOL-BREF a 26-item instrument consisting of four domains: physical health (7 items), psychological health (6 items), social relationships (3 items), and environmental health (8 items); it also contains QOL and general health items was used to collect primary data. The analysis shows variations in the level of different domains of quality of life of the respondents.

Keywords: Quality of life, Urban Development, Resettled Families, Psychological, Social.

Background

The phenomenon of resettlement and relocation of people due to man-made or natural disasters and also due to development projects such as the construction of roads, canals and flyovers in urban areas eventually occurs all over the world. The aim of the resettlement and rehabilitation process is to enable people to live in dignity with basic needs and livelihood. However, measuring quality of life before and after resettlement, especially in urban areas, has not gained importance at the policy level. Quality of life is emphasized by the World Health Organization (WHO). The World Health Organization defines quality of life as an individual's perception of their position in life in the context of the

culture and value systems in which they live and in relation to their goals, expectations, standards, and concerns (WHO, 2012). Quality of life is part of sustainable development, which refers to strategies aimed at managing growth in a way that meets people's needs today and does not compromise them in the future. This concept aims to alleviate poverty, create meaningful standards of living (quality of life), meet basic human needs, promote political and economic progress, and protect natural resources. (Ruevius, 2012; Akranaviit & Rueviius, 2007). The quality of life of people belonging to different population groups has been studied worldwide.). Urban quality of life can be defined as the overall well-being of people and societies living in cities and the quality of the environment in which they live (Slavuj, 2011; Al-Qawasmi, 2020). This theoretical perspective on Urban quality of life focuses on both objective attributes (external environmental and place attributes) and subjective attributes (individual insights and perceptions of material and non-material conditions). This paper aims to examine the quality of life of people resettled due to a development-related project in Perumbakkam, Chennai.

Need for the Study

Quality of life refers to the way of living with happiness and satisfaction through the fulfilment of basic needs and other social, cultural and psychological needs. Or the lifestyle full of happiness and satisfaction that fulfils the socio-cultural, psychological and emotional needs including survival needs. This paper aims to examine the quality of life of people who were gradually resettled from the slums of Chennai after the Chennai floods in 2015. This resettlement, which began after the 2015 Chennai floods, resulted in the mass relocation of thousands of families from their original homes to Perumbakkam, nearly 20 km from their previous location. As mentioned earlier, this type of resettlement has faced problems around the world related to the livelihood or capital of the families affected by the project. In particular, families resettled in CRRT need an assessment of the impact of development-related resettlement in terms of quality of life before and after resettlement. While there are studies on the socioeconomic impacts of these PFAs, there is a dearth of research regarding livelihoods and quality of life. It is critical to study livelihoods for a better quality of life.

Area of Study

Chennai is located on the southeast coast of India in the northeastern part of Tamil Nadu in a flat coastal plain known as the Eastern Coastal Plains. Chennai is located at 13.04° north latitude and 80.17° east longitude. The city has an average elevation of 6 m, with the highest point at 60 m. Chennai is a low-lying area and the land surface is almost flat. Perumbakkam is a very large resettlement area in Perumbakkam village in Kanchipuram district

Methodology

To study the Resettled and Rehabilitated families of Cooum River Restoration Project carried out by TNSCB in Chennai metropolitan city; sample population was selected from 6367PAFs who are resettled in Perumbakkam. The researcher used Systematic Random sampling to select samples from the universe.

Tool for Data Collection- Quality of Life of the Respondents

The WHOQOL-BREF consists of 26-items pertaining to four domains of life. They are four domains: physical health (7 items), psychological health (6 items), social relationships (3 items), and environmental health (8 items); it also contains QOL and general health items.

Questions regarding Mobility, daily activities, functional capacity, energy, pain, and sleep are included in the Physical domain.

The psychological domain measures self-image, negative thoughts, positive attitudes, self-esteem, mentality, learning ability, memory concentration, religion, and mental status. The social relations domain includes questions on personal relationships, social support, and sex life.

The environment and health domain includes questions about financial resources, safety, health and social services, the physical living environment, opportunities to acquire new skills and knowledge, leisure, general environment (noise, air pollution, etc.), and transportation. The primary data collected were analysed using the scoring scheme provided by WHO.

Table 1. Domains of Quality of Life as indicated by the World health Organization

Domain	Facets incorporated with domains
Physical Health	Activities of daily living Dependence on Medical substances and medical Aids Energy and Fatigue, Mobility, pain and discomfort
Psychological	Bodily image and appearance, Negative feelings, Positive Feelings, self-Esteem, Spirituality/Religion/Personal beliefs, Thinking, Learning, Memory and Concentration
Social Relationships	Personal relationships, Social Support, Sexual Activity
Environment	Financial resources, Freedom, physical safety and security, Health Social care, Accessibility and Quality, Home Environment, opportunities for acquiring new information and skills , Participation in and opportunities for recreation/leisure activities, Physical environment(Pollution/noise/traffic/climate/transport)

Findings and Discussion

All the four domains of Quality of life among the respondents were analysed using the scoring pattern as prescribed by the WHOQoLBref tool. Based on the analysis the following were found. .

Domains	Mean Value	Std.Deviation
Physical	12.6594	1.93855
Psychological	11.4870	2.13739
Social Relationships	12.9196	2.92682
Environmental	10.7635	1.70715

In this study, among the four domains of WHOQOL-BREF, the highest mean satisfaction score was found for DOM1 (physical health, mean = 12.65), which means good activities of daily living, less dependence on medications and medical aids, sufficient energy and mobility, less pain and discomfort, sufficient sleep and rest, and good ability to work. The lowest mean score was reported for DOM4 (support from the environment, mean = 10.76), indicating not very good financial resources, opportunities to acquire new information and skills, and leisure activities. The most SD from the mean (SD = 2.92) was observed in DOM3 (Social relations). The mean value of satisfaction with mental health (Dom-2) is 11.48. An average QoL index is not significantly different across different levels of satisfaction about the housing facility provided in the resettlement location. $F=.120$, $p=.975$ and hence it is observed that the satisfaction level about new housing among the respondents does not change their Quality of Life.

The correlation value between Income after Shifting and satisfaction of performance of daily activities. -0.265 is negative which explains there is a negative correlation between Income after Shifting and satisfaction of performance of daily activities.

McCrea et al. examined different geographic levels of subjective urban quality of life. Regional satisfaction was best predicted by evaluations of regional services (e.g., health and education) and cost of living, while evaluations of environmental and urban growth issues were significant predictors of regional satisfaction among younger individuals. Neighbourhood satisfaction was best predicted by ratings of social interactions, neighbourhood crime, and public amenities (parks, libraries), while housing satisfaction was best predicted by age of residence and home ownership.

According to the main theoretical approaches to urban design and planning, urban community quality, and urban quality of life, there are several different aspects that occur at different scales (e.g., regional, metropolitan, sub metropolitan, neighbourhood) and should be considered by urban planners to design a city:

1. Physical characteristics such as size and location of neighbourhoods, buildings, streets, pedestrian routes, open spaces, vegetation, and characteristic areas are included.
2. Accessibility, understood as convenient access to retail stores, parking, schools, sports facilities, cultural amenities, and the job market.
3. Quality of life in the sense of survival, i.e., in terms of access to health care, personal health, and environmental health, and safety in the sense of the absence of hazards and the feeling of security.
4. Communication includes telecommunications technologies and transportation.
5. Character, reflected in sense of place and time, stability, warmth, and aesthetics.
6. Personal freedom includes freedom of expression, privacy, and affordability, as well as the ability to control (Clifton et al., 2008, Smith et al., 1997).

Since affordability, health, safety, and sustainability are essential to a better quality of life, according to the findings and discussions, quality of life for sustainable living requires the following.

Accessibility to jobs and educational facilities was a major problem for the respondents as they were relocated from the city centre to a semi-urban area. Although housing and other infrastructure for their daily lives were satisfactory according to respondents, they expressed dissatisfaction with access to jobs and educational facilities as well as health care. This has a significant impact on the quality of life of the respondents. The primary focus of resettlement projects is on the physical living environment, providing good housing with basic amenities. However, less importance is given to sustainable living requirements such as affordable and accessible health, safety, education, and employment, which are indispensable factors for quality of life.

Conclusion

Urban quality of life is a Multidimensional concept and it is subjective to various factors of daily life. This paper has analyzed the quality of life of people who were resettled in a urban development project. In spite of good physical infrastructure like housing, water etc, the mean value pertaining to environment i.e) Financial resources, Freedom, physical safety and security, Health Social care, Accessibility and Quality, Home Environment, opportunities for acquiring new information and skills, Participation in and opportunities for recreation/leisure activities, Physical environment (Pollution/noise/traffic/climate/transport) is at the lowest when compared to other domains. The Physical and social domain scored a comparatively better mean value. It is vital to provide due

importance to all the four domains for a healthy and sustainable urban development.

Bibliography

1. Akranaviit, D., & Ruzevius, J. (2007). Quality of life and its components' measurement. *Engineering Economics*, 52(2), 44-49. Retrieved October 14, 2007, from EBSCOhost database.
2. Al-Qawasmi, 2020, Measuring Quality of life in Urban areas: Toward an integrated Approach, *Journal of Environmental Science and natural Resources* 25(2);67-74
3. Banai, M.a. Rapino, Urban theory since a theory of good city form (1981) – A progress review, *Journal of Urbanism: International Research on Placemaking and Urban Sustainability*, 2 (3) (2009), pp. 259-276
4. Clifton 2008, Quantitative analysis of urban Form: a Multidisciplinary review, March 2008, *Journal of Urbanism International research on place making and Urban sustainability* 1(1):17-45
5. K. Lynch, L. Rodwin, A theory of urban form, *Journal of the American Institute of Planners*, 24 (4) (1958), pp. 201-214.
6. M. Joseph Sirgy, A Quality-of-Life Theory Derived from Maslow's Developmental Perspective: 'Quality' Is Related to Progressive Satisfaction of a Hierarchy of Needs, Lower Order and Higher, *The American Journal of Economics and Sociology*, Vol. 45, No. 3 (Jul., 1986), pp. 329-342 (14 pages), Published By: American Journal of Economics and Sociology.
7. Mehta, B.H. "Community Organisation in Urban Areas" in *Social Welfare in India*, The Planning Commission Govt. India : New Delhi 1995 pg. 205, 208, 210, 212 & 217.
8. Smithet, al., Distinguishing between quality of life and health status in Quality of life Research: A meta analysis, August 1999, *quality of life Research* 8, 447-459 Springer link.
9. World Health Organization. (2004). The World Health Organization quality of life (WHOQOL)-BREF, 2012 revision. . <https://apps.who.int/iris/handle/10665/77773>.