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Rajiv Gandhi University

# BATS303 ISSUES RELATING TO TRIBES IN INDIA



**BA (TRIBAL  
STUDIES)**  
**5<sup>TH</sup> SEMESTER**

**Rajiv Gandhi University**  
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## About the University

Rajiv Gandhi University (formerly Arunachal University) is a premier institution for higher education in the state of Arunachal Pradesh and has completed twenty-five years of its existence. Late Smt. Indira Gandhi, the then Prime Minister of India, laid the foundation stone of the university on 4th February, 1984 at Rono Hills, where the present campus is located.

Ever since its inception, the university has been trying to achieve excellence and fulfill the objectives as envisaged in the University Act. The university received academic recognition under Section 2(f) from the University Grants Commission on 28th March, 1985 and started functioning from 1st April, 1985. It got financial recognition under section 12-B of the UGC on 25th March, 1994. Since then Rajiv Gandhi University, (then Arunachal University) has carved a niche for itself in the educational scenario of the country following its selection as a University with potential for excellence by a high-level expert committee of the University Grants Commission from among universities in India.

The University was converted into a Central University with effect from 9th April, 2007 as per notification of the Ministry of Human Resource Development, Government of India.

The University is located atop Rono Hills on a picturesque tableland of 302 acres overlooking the river Dikrong. It is 6.5 km from the National Highway 52-A and 25 km from Itanagar, the State capital. The campus is linked with the National Highway by the Dikrong bridge.

The teaching and research programmes of the University are designed with a view to play a positive role in the socio-economic and cultural development of the State. The University offers Undergraduate, Post-graduate, M.Phil and Ph.D. programmes. The Department of Education also offers the B.Ed. programme.

There are fifteen colleges affiliated to the University. The University has been extending educational facilities to students from the neighbouring states, particularly Assam. The strength of students in different departments of the University and in affiliated colleges has been steadily increasing.

The faculty members have been actively engaged in research activities with financial support from UGC and other funding agencies. Since inception, a number of proposals on research projects have been sanctioned by various funding agencies to the University. Various departments have organized numerous seminars, workshops and conferences. Many faculty members have participated in national and international conferences and seminars held within the country and abroad. Eminent scholars and distinguished personalities have visited the University and delivered lectures on various disciplines.

The academic year 2000-2001 was a year of consolidation for the University. The switch over from the annual to the semester system took off smoothly and the performance of the students registered a marked improvement. Various syllabi designed by Boards of Post-graduate Studies (BPGS) have been implemented. VSAT facility installed by the ERNET India, New Delhi under the UGC-Infonet program, provides Internet access.

In spite of infrastructural constraints, the University has been maintaining its academic excellence. The University has strictly adhered to the academic calendar, conducted the examinations and declared the results on time. The students from the University have found placements not only in State and Central Government Services, but also in various institutions, industries and organizations. Many students have emerged successful in the National Eligibility Test (NET).

Since inception, the University has made significant progress in teaching, research, innovations in curriculum development and developing infrastructure.

# SYLLABUS

## Issues relating to Tribes in India

### **Unit-I Economic Issues I**

- (a) Poverty, Indebtedness and Land alienation,
- (b) Unemployment, migration

### **Unit-II Economic Issues II**

- (a) Industrialisation & urbanisation
- (b) Displacement and rehabilitation
- (c) Globalisation

### **Unit-III Emerging Social Problems**

- (a) Illiteracy
- (b) Alcoholism and drug abuses
- (c) Gender inequality

### **Unit-VI Emerging Social Problems with special reference to health**

- (a) Issues related to health and education.
- (b) Malnutrition
- (c) HIV/AIDS
- (d) Reproductive Health

# CONTENTS

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<b>Unit</b>		<b>Page No.</b>
<b>Unit-I</b>	<b>Economic Issues I</b>	<b>6-38</b>
<b>Unit-II</b>	<b>Economic Issues II</b>	<b>39-62</b>
<b>Unit-III</b>	<b>Emerging Social Problems</b>	<b>63-82</b>
<b>Unit-VI</b>	<b>Emerging Social Problems with special reference to health</b>	<b>83-118</b>

# Unit I

## Economic Issues

### Unit Structure

- 1.1 Learning Objectives**
- 1.2 Introduction**
- 1.3 Poverty, Indebtedness and Land Alienation**
  - 1.3.1 Poverty**
  - 1.3.2 Indebtedness**
  - 1.3.3 Land Alienation**
- 1.4 Unemployment and Migration**
  - 1.4.1 Unemployment**
  - 1.4.2 Migration**
- 1.5 Let us sum up**
- 1.6 Keywords**
- 1.7 Probable Questions**
- 1.8 Answers to Check Your Progress**
- 1.9 Further Reading**

### 1.1 Learning Objectives

After reading this unit you will be able to

- gather knowledge on economic related tribal problems in the country;
- list some important economic problems of the tribes;
- explain the nature of poverty, indebtedness, land alienation, unemployment and migration;
- identify the causes and discuss the consequences of economic problems;
- describe the participation of tribes in the process of industrialisation and urbanisation;
- explain consequences of tribal participation in the process of industrialisation and urbanisation;
- examine the nature and extent of tribal displacement in the process;
- explain rehabilitation policy for displaced people and its implementation;
- understand the meaning of globalisation and its implication for tribal development and displacement; and
- suggest remedial measures to address economic problems of tribal communities.

### 1.2 Introduction

As you know traditional tribal economy was subsistence in nature; production was primarily meant for consumption without marketable surplus. The notion of economy was not a distinct domain of human activity; rather it was embedded in culture. Perceptually, all aspects of life,

to a tribal person, were an integrated cultural whole. Therefore, non-tribal persons including academics could not conceptualise culturally embedded economic pursuits following economic principles and concepts of non-traditional and non-tribal economic system. Methodologically, traditional tribal economy did not fit in the premise of non-traditional and non-tribal economic studies. You will not find in conventional economic texts dealing with traditional tribal economy.

So you just learnt two types of economic system; one traditional tribal economy and the other non-traditional and non-tribal economy or 'modern economy'. Economic anthropologists have made a distinction between the two, the former as substantive economy and the latter as formal economy. By definition, the formal economy is not embedded in culture; it is a separate domain of activities and is distinct from other domains activities like political, religious and so on.

You also know that contemporary tribes no more pursue traditional livelihoods exclusively. They have been integrated to formal economic system in different degrees through colonial mechanism of exploitation and development interventions of national government. You should know that formal economy is a dominant ideology based on specialisation, market principles, money, accumulation and individualistic attitude. It also has a hierarchical power base at the stages of policy making, execution and implementation of policies and beneficiaries of policies. The power hierarchy also expresses through command over and access to state resources and privileges-finance, legal, political, service, etc.

In contrast, substantive tribal economy is characterised by embeddedness, barter exchange, sharing and community mode of ownership and production. Power relations vary between power structures of village council and chieftainship. But as far as mode of production, ownership and accessing to resources are concerned power hierarchy is culturally embedded and hence not functionally specialised as in a formal economy. So the topic of integration of tribes with national development process apparently shows two different, to some extent opposite systems, coming together. It is not the formal economy which also integrates with some principles of substantive economy, but it is the other way round, a one directional process. The tribal substantive economy is a subordinate economy as it only integrated with formal economy. In other words, the formal economy is considered to be the dominant economy. You should also know that it is not tribal community which wanted integration; rather it is the dominant economy, under the obligation of its welfare commitment, articulated and initiated the process of integration through development agenda.

In the process of integration, it is but natural to think that the dominant economy approached the tribals with a parental outlook. Neither the tribes were consulted nor were their needs appreciated. As a result the tribes did not accept everything of what the national economy provided and the national economy did not provide everything that the tribes really needed. During our present time, despite ideology of globalisation, participatory development and rights based strategy of equitable development the dominant and subordinate relations translate through tribal marginalisation, exclusion, subsequent protest against the State and

so on. Even industrialisation and urbanisation which are considered to be indicators of development have caused displacement of tribals from their land. What follows is that tribal integration with formal economy whether during colonial period or post colonial India, the tribals get exploited. You can understand it better with reference to the following explanation.

Let us discuss the notion of exploitation perceived as a stereotype. Exploitation of tribals has always been attributed to the handiwork of non-tribals like traders, government officials working in tribal areas, and so on. This is, however, one aspect of the whole issue of exploitation. There are tribal states in Northeast India like Arunachal Pradesh where non-tribals like the traders are not even allowed to hold business license. The tribal elites as bureaucrats, politicians, etc. do corner the benefits which otherwise would have accrued to the general public and as a result of which inter- and intra-tribal inequality has been visible even to a casual observer.

A little reflection, however, would reason out differently. The tribal or non-tribal dimension of exploitation is but an integral part of the commercial ethics of accumulation of wealth in place of the traditional tribal value of sharing. The exploitation due to interaction between non-tribal traders and tribals is direct and is of specific nature. But this specificity is the reflection of a general principle. The advantageous, strong and powerful have the potentiality of exploiting the disadvantageous and the weak. The former put it into practice with every opportunity available and the latter are subjected to exploitation. It is not a surprise that we often hear the rich nations exploiting the poor ones; the industrialists the workers, and so on. Tribal exploitation, therefore, can be viewed directly and indirectly having both general and specific contexts. So, problems of the tribes are linked with power differences between them and the State forces.

In this unit you will learn problems of tribal people in the process their integration with national development process. As you know, tribes were exploited during colonial rule. They faced a lot of economic problems. Most of these problems continue and intensify even in the welfare model of national government.

### **1.3 Poverty, Indebtedness and Land Alienation**

Tribal people are economically backward. Poverty is wide spread; land alienation has become a characteristic of their life; and indebtedness never leaves them once they are into it. One problem is the cause of the other and reinforcing. Poverty, for example leads to land alienation which in turn accentuates poverty. We shall discuss some aspects of these problems in the following sub-sections.

#### **1.3.1 Poverty**

Poverty is a situation of deprivation of entitlements to minimum means necessary to meet basic needs such as food, clothing and shelter. In a traditional economy nature provided all these things- fruits and leaves, animals for food; bark and leaves for clothes or fibres to weave clothes; and materials collected from the nature to build shelters. There was not a



sense of deprivation and thus the concept of poverty was not in subsistence tribal economy. No doubt, Marshall Sahlins has termed natural resource dependent hunter-gatherer tribal societies as ‘original affluent society’.

It is only after introduction of Zamindari system, forest policies, during colonial period, integration of tribal economy with modern economy, land tenure and land reforms adopted after independence that the tribes were deprived of their resource base and livelihood options. This situation of deprivation expressed in monetary terms is called ‘poverty’. So, it must have been clear to you that ‘poverty’ is a situation conceptualised in formal economy.

The World Bank defines poverty in absolute terms. It defines extreme poverty as living on less than US\$ 1.90 per day and moderate poverty as less than \$3.10 a day. Poverty is also expressed in terms of per capita annual income. In other words, definition of poverty is income based and consumption based. Expression of poverty in terms of annual income or per day is income based and in terms of consumption or spending per individual in a period of time is consumption based. The World Bank’s definition is income based.

Poverty can be absolute/extreme or relative. *Absolute poverty* refers to the state of deprivation in which an individual cannot afford to a basic subsistence needs like food, clothing and shelter. *Relative poverty* is relative deprivation and refers to the situation of deprivation of an individual or group when compared with other individual (s) or group (s).

In India we also follow consumption based definition of poverty. However, different methods are used to estimate income and poverty in India. Suresh Tendulkar defines extreme poverty in terms of expenditure of less than Rs 26 in rural area and less than Rs 32 in urban area per day. In 1971 V. M. Dandekar and Nilakantha Rath defined poverty in terms of calorie intake fixing it at 2400 calories for rural area and 2100 for urban area. In recent years Multi-dimensional Poverty Index (MPI) is also used to understand the nature and extent of poverty. In such index education and number of years spent in school are also considered. However, we will discuss the incidence of tribal poverty using data available with the Ministry of Tribal Affairs, GOI, 2014 and supplementing with interpretations available in other reports.

Poverty is wide spread in tribal areas. Data available are scanty and based on quantitative figures estimated on the basis of sample survey by NSSO, Government of India. Poverty in tribal area has both quantitative and qualitative dimensions. Quantification of tribal economic life is not so easy, as tribes have neither records nor the attitude for it. Obviously, sample data in quantitative terms would be often misleading. Nevertheless, a rough idea on tribal poverty is presented in tables 1.1 and 1.2.

**Table 1.1: Poverty among STs – Rural & Urban India (1983-84, 1993-94, 1999-2000, 2004-05 & 2009-10) (%)**

Year	ST		All India	
	Rural	Urban	Rural	Urban
1983-84	63.8	54.2	45.6	42.2
1993-94	52.2	42.4	37.1	33.7
1999-2000	45.9	34.8	27.1	23.7
2004-05 (Revised Est.)	61.9	35.0	41.8	25.7
2009-10	47.1	28.8	33.8	20.9

Source: *Statistical Profile of Scheduled Tribes in India 2013*, Ministry of Tribal Affairs, Statistics Division, Government of India, [www.tribal.nic.in](http://www.tribal.nic.in)

Statistics in table 1.1 shows a declining trend of tribal poverty both in rural and urban areas. However, the same trend holds for the nation as whole. The striking point is that the rural urban gap of tribal poverty is 18.3 percentage point as compared to this gap (12.9 % point) between all India rural and urban population. In other words, rural STs are yet to come at par with urban STs. Table 1.2 shows large percentage of ST population below poverty line. Tribes in different states show different incidences of poverty. In Odisha it is highest for rural STs, while in Uttarakhand ST urban poor records the highest. At all India level the rural urban gap is 14.0% point. This indicates the extent of urban tribal poverty.

There is a decline in rural and urban poverty percentage of the STs. This trend is noticed for all social categories in India. The decline however is slower as compared to national data.

**Table 1.2: Percentage of Poor STs in state more than National Average (2004-05)**

State/ India	Rural	Urban
Uttarakhand	Less than national average	64.4
Orissa	75.6	61.8
Karnataka	Less than national average	58.3
Uttar Pradesh	Less than national average	37.4
Andhra Pradesh	Less than national average	50.0
Madhya Pradesh	58.6	44.7
Maharashtra	56.6	40.4
Chhattisgarh	54.7	41.0
Jharkhand	54.2	45.1

Bihar	53.3	57.2
All India	47.3	33.3

Source: *Same as table 1.1.*

As you see in some states percentage of ST poor is above national average for all social categories. But this does not mean that tribes are as or more better off as other groups in the country. This is a statistical paradox. The gap between ST and all social groups is not a comparison between ST and non-ST categories. In All Social Groups STs are included. So in case of no difference between the two there is still a difference showing backwardness of the tribes. All social categories include both STs and others. So low income of *STs* added to higher income of *other social groups* makes the average of *all social groups* less than the average of only *other social groups*.

Statistical paradox can be well perceived in table-1.3.

Table 1.3: Trends in Poverty Incidence in States with a High Proportion of Adivasis (%)

State	1983		1993-94		2004-05	
	STs	All	STs	All	STs	All
Assam	48.5	41.5	40.9	41.4	12.3	20.5
Gujarat	58.5	33.0	30.9	24.1	33.1	17.0
Madhya Pradesh	71.6	50.4	60.4	41.7	57.5	38.2
Maharashtra	63.1	44.3	53.1	36.8	54.2	30.6
Odisha	86.2	66.3	70.9	48.7	75.2	46.6
Rajasthan	63.0	38.6	44.5	27.5	32.2	21.4
Jharkhand	73.5	59.6	67.7	55.4	53.4	42.1
Chhattisgarh	58.7	50.5	53.1	44.4	53.8	41.0
All India	63.3	45.6	49.6	35.8	43.8	27.5

Source World Bank,2011

The World Bank study, 2011 informs you those in states with significant tribal populations (about 10 percent or more of the state's total population), ST households have exhibited poverty rates that were higher than the rates of the nation as a whole in 2004–05. Assam is an exception; it could be argued that income of some of non-ST social categories including refugees is less than the STs who are better exposed to government schemes. The study also shows highest poverty rates for tribal groups in Odisha. Tribal population have registered a poverty rate of 75 per cent in 2004–05. It shows an increase of about 6 percent over 1993–94 levels. Tribals in rural areas in Odisha were particularly affected; among this group, poverty levels declined by only 13 percent compared with a decline of 44 per cent among other groups (non-SCs/STs) in 1983– 2005. Tribals in rural areas in Chhattisgarh, Jharkhand,

Madhya Pradesh, Maharashtra, and Rajasthan, too, recorded far lower declines in poverty relative to other groups.

**Table 1.4 Access to Bank Accounts and Durable Assets**

Social groups	Households possessing Bank Account and a few durable assets in %									
	Bank account	TV	Bi-cycle	Computer/ Laptop	Mobile only	Both (land line & mobile)	Two wheel er	Four wheel er	TV, Computer / Telephone/ mobile phone & Scooter/ Car	Do'n t have any
All Social groups	58.7	47.2	44.8	6.3	53.2	6.0	21.0	4.7	4.6	17.8
ST	44.98	21.9	36.4	4.4	31.1	1.8	9.0	1.6	1.3	37.3

*Source: Report no. 543 of NSS 66th round.*

Poverty can also be appreciated in terms of credit and assets owned. Table 1.4 shows that less ST households possess bank accounts. The same trend is noticed in terms of possession of durable assets like bi-cycle, computer, etc. It is to be mentioned that bank account is a prerequisite to avail of some government schemes. So possession of bank account does not show the credit position of the tribes as compared to other groups. Similarly, bicycles and computers are distributed to STs under various schemes. Obviously, possession figure does not indicate the *real purchasing* power of the tribe persons to understand how far they are outside of *below poverty line bracket*. Moreover, the migrant youths on return to villages also purchase some assets (GOI, 2014 204:109) as a matter of demonstration effect. The asset inequality between STs and other groups is reported in Xaxa Committee Report (2014:117-1180).

Quantitative data gives an idea of tribal poverty in comparison with other communities or national level incidence. It indicates a trend. Being an average estimate, quantitative data do not present real incidences of poverty that exist between tribes and within a tribe. The situation in the Northeast is different from other states. Here the development programmes are general in nature and tribes participate in development process. A large percentage of tribal population are working in government, private and unorganised sectors. There are also tribes like Puroiks who still follow traditional pursuits to a greater extent. The Onge and Jarwa are PVTGs and still follow non-monetised economy. So is also the case in remote tribal villages. In contrast as the World Bank,2011 study states that the Meena tribe holds a large share of these higher-level public sector jobs in Rajasthan, where many of them live, but also at the all-India level. The Hindu (13 january, 2018) reports a conflict between the

Adivasis and the Lambadas (also known as Lambadis or Banjaras) primarily over share of government benefits.

So quantification of the incidence of poverty does not give a real picture of the situation. The increasing trend is misleading to the real poverty that exists among those who are still following traditional livelihood options and in a tribe or a section of it who do not have representative share in government resources.

### 1.3.2 Indebtedness

Indebtedness among the tribals is a serious problem. It often leads to land alienation and situations of bonded labour. It has been, and still is, probably the most difficult problem facing almost the entire tribal population of India with exception in Northeast Indian states like Arunachal Pradesh, Nagaland, Mizoram etc. in North-eastern states. This is because these regions of the Northeast were closed to the middlemen and contractors during British rule. Otherwise indebtedness is quite widespread and an all India phenomenon. In central India and other parts of the country including Rajasthan, states in South India, Punjab, Haryana, Uttarakhand, etc. the problem is the root of many other problems.

There is no doubt that tribal indebtedness resulting from traditional system of money lending is one of the worst forms of tribal exploitation. Its severity is well recognised by the government as a result of which various acts have tried to eradicate or control this practice. Even Panchayats (Extension to the Scheduled Areas) Act, 1996 empowers the Gram Sabha to control money lending practice. Section 4, clause M and sub-clause v reads;

‘(m) while endowing Panchayats in the Scheduled Areas with such powers and authority as may be necessary to enable them to function as institutions of self-government, a State Legislature shall ensure that the Panchayats at the appropriate level and the Gram Sabha are endowed specifically with-

...

(v) the power to exercise control over money lending to the Scheduled Tribes’.

The amount of debt incurred by STs may be of small amount as compared to loans of other sections of the society, but its implication has far reaching consequence of tribal backwardness.

The Government of India Report (2014) makes a comparison of debt between rural and urban STs and between STs and all social groups. In rural area the Report makes a comparison of tribal households and share of debt. It reports that the share of total debt in relation to their share of households is relatively small among Scheduled Tribes. It also reports that average debt of Scheduled Tribes (Rs. 3205) is lower than that of all social groups (Rs. 7539). Therefore, debt-asset ratio among Scheduled Tribes (2.3) is lower than the aggregate (2.8) in rural areas. As regards the incidence of indebtedness (IOI), Scheduled Tribes have the least share (17.9 %) as compared with all social groups (26.5 %).

However, in urban areas the percentage distribution of households among Scheduled Tribes is 3.0 the percentage share of debt is 2. Moreover, average debt for Scheduled Tribes (Rs.9233) is lower than that of all social groups (Rs. 11771). The debt-asset ratio among the STs is 3.8 per cent as compared to all social groups (2.8 %). As in rural areas, the IOI is the least among Scheduled Tribes (12.2 %).

According to a survey, as quoted by Nazer (nd), indebtedness among the tribals was 34.42 per cent in the year 2000-01. Average loan on each family was Rs.2000 to 3000 in the year 2000-2001. Quoting a source Jagannath Rath (2010) informs us that about 85 per cent of tribal families are affected by indebtedness. Out of it approximately 72 per cent of the tribals are indebted to private money lenders and remaining to shopkeepers, friends and other sources.

### **An overview of indebtedness among STs**

Normally, the people depending either partially or fully on foraging of natural resources did not need any borrowing at the time of food shortage. They were living in self-sufficient economic conditions as the forest wealth was at their disposal to sustain themselves during the shortage. Moreover, the clan solidarity used to come to the rescue of a family on reciprocity at the time of need. But when clan solidarity declined, and an alternative in the form of borrowing was easily accessible, then people started going to borrow. It is to be mentioned that the origin of the problem was mainly due to the introduction of money economy in the tribal areas. Earlier tribal economy was mostly based on barter system. During British period the Government demanded revenue in cash. Non-tribal money-lenders came forward to lend cash to tribals to meet revenue requirements. The outsiders purchased forest products from the tribals often with money. The newly acquired consumption habit of the tribals required money for the goods available in the market. Money economy gradually substituted barter system. The simple tribals could not fathom the evil designs of the money lender when they came forward to lend at the time of the former's need.

The *Sahukars* and money lenders used to give tribals loan on easy terms for their drinks, marriages, festivals, and agricultural operations. Taking advantage of the illiteracy, ignorance, gullibility and simplicity of the tribals, the *Sahukars* and money lenders used to dictate terms, calculated interest at very high rate and manipulated the accounts in such a way that it became impossible to escape from the debt trap. With the passage of time the burden of indebtedness continued; their plight also grew from bad to worse, and they have been reduced to the situation in which we find them at present.

Working of the system of borrowing and repaying: The agricultural tribal people borrow both in cash and in kind. They usually borrow seeds before sowing/preparing nursery bed and grains during lean season. This practice is recorded in Maharashtra, Odisha and Tripura. In Maharashtra, this system is known as *Palemud*. Under this system the needy tribals take seed on loans at the time of sowing and return thrice or even four times of the original quantity at the time of harvest. The same practice is noticed in tribal areas of Koraput district in Odisha.

There is a traditional saying: the creditor gives Rs.10 (either in cash or goods worth of Rs.10), the debtor receives Rs.10 and the interest to be paid is Rs.10. In total the tribal borrower is made to understand that he owes Rs. 30 which he is to repay at the time of harvest. The tribal people also borrow grains for consumption during lean period or any time during the year which is also returned at this rate. Usually, the creditors prefer to be repaid in kind to cash and the rate at which they purchase is much below the market rate. For example, for Rs 100 they may get crops worth of Rs 200 or more. The tribal once borrowed thus becomes a victim to exploitation at multiple stages in between borrowing and repaying and enters into a perpetual debt trap. In this regard the Planning Commission's Report of the Study Team on Tribal Development Programmes, 1969 is worth mentioning. It reads,

No programme of economic development is likely to have any impact on the tribal economy unless vigorous measures are taken to rescue the tribal from the clutches of the moneylender.

**Causes of Indebtedness:** It is difficult to distinguish causes of indebtedness from the consequences of it. Indebtedness is the result of poverty, but at the same time it is indebtedness that is the main cause of poverty. The system of bonded labour results from indebtedness, but it perpetuates indebtedness and the system of bonded labour. Land alienation may be the cause of indebtedness but indebtedness also causes land alienation. The problems of exploitation in tribal India is a vicious circle. It is worth mentioning the findings of World Bank Report, 2011 in this context. The report informs

'how tribal people borrow at usurious rates from moneylenders to finance consumption. However, to service their high-interest debt, several of the borrowers borrow again from government banks. The cycle of indebtedness eventually ends in tribal borrowers seeking permission to transfer their land to the government to repay the government loan. Some tribals who are unable to pay their debts join the ranks of bonded labor... A major reason for borrowing from private sources is the poor network of government banks in remote tribal areas. According to the India Human Development Survey, only 10 percent of Adivasi women had individual or joint bank accounts in 2005, only about one-third the proportion among non-SC/ST/OBC women'.

In view of this and drawing on field observations the causes of STs indebtedness can be one or more of the following issue:

1. Land alienation and loss of tribal rights over land and forests;
2. Illiteracy and ignorance which lead to weak bargaining power for their agricultural and forest products in the market;
3. Increase in population and decline in traditional resource base as a source of livelihood leading to poverty;
4. Traditional method of subsistent resource use like cultivation, but spending to satisfy acquired non-traditional habits through market;

5. Lack of loan from Banks for unproductive purposes which tribals are accustomed to;
6. Expensive customs and extravagancy at the time of marriages, deaths, fairs and festivals;
7. Easy availability of loan in the house of the moneylenders and subsequent manipulation and exploitation by money lenders;
8. Increasing health problem, no immunity to new diseases in traditional curative system; and
9. Adherence to village council decisions regarding fines and fear of excommunication

**Consequences:** Indebtedness leads to social and economic maladies. Empirical studies testify that the system of bonded labour in the locality and mostly with the money lender is the outcome of indebtedness. It causes poverty, subsequent migration and the status of bondage beyond the locality of the tribal borrower. It also leads to land alienation due to mortgage where this system has emerged. The most important consequence is the exploitation and oppression of the debtor and his family. The exploitation may continue from generation to generation. The Koltas of Jaunsar-Bawar are the classical example of the worst sufferers of indebtedness and these unfortunate people are carrying the burden from generation to generation. Some of other important consequences, direct and indirect, are as follows:

1. loss of freedom and human dignity, the consequent utilization of their labour power by the creditor;
2. existence of the system of child bonded labour;
3. migration;
4. psychological frustrations;
5. crime;
6. sale of girls and prostitution;
7. physical and mental torture; and
8. alienation of land and its acquisition by the creditor.

**Remedial measures:** Article 46 of the Constitution clearly lays down the responsibility on the State to protect the Scheduled Tribes from Social Injustice and all forms of exploitation. But the Fifth Schedule of the Constitution empowers the Governor of a state to regulate the business of moneylenders in Scheduled areas. In pursuance of this provision various state governments have promulgated and enacted various Laws and Acts. Some of these laws to control money lending, debt redemption and abolition of debt bondage in different states are as follows:

1. The Andhra Pradesh Scheduled Areas Moneylenders Regulation, 1963.
2. The Agency Debt Bondage Abolition, 1964.
3. The Assam Moneylenders Regulation, 1968.
4. The Bihar Moneylenders (Regulation of Transaction) Act, 1939.
5. The Bombay Agricultural Debtors Relief Act, 1947.



6. The Kerala Moneylending Act, 1958.
7. The M.P. Anusuchit Jan Jati Rini Sahayata Act, 1966.
8. The Madras Indebted Agriculturists (Repayment of Debt) Act, 1955.
9. The Mysore Pawn Brokers Act, 1961.
10. The Orissa Moneylenders (Application of Certain Provisions) Regulation, 1950.
11. The Rajasthan *Sagri* System Abolition Act, 1961.

A series of Acts have been enacted in Madras Presidency and subsequently in Tamil Nadu to check exploitation of the money lenders. Some of the Acts are as follows:

1. Madras Money-lenders Act of 1937
2. The Madras Pawn Brokers Act of 1943
3. The Madras Debt Conciliation Act of 1936
4. The Madras Indebted Agriculturists (Repayment of Debts) Act of 1955
5. Tamil Nadu Debt Relief Act of 1976
6. Tamil Nadu Debt Relief Act of 1980
7. Tamil Nadu Debt Relief Act of 1982 .

With the enactment of several of anti-money lending Acts and their implementation in tribal areas, money lending activities by private money lenders have been checked to some extent. Co-operative institutions, Regional Rural Banks and SHG groups have started providing loans in tribal areas. But the tribals have not yet mentally tuned up to take loans from these financial institutions. The money lenders often manipulate the laws to their advantage. The tribal people do not find a personal relation in the banks which they find with money lender who is more familiar and nearer to them. They need not have to go through all the formalities which are required at the time of obtaining loan from banks. Moreover, they do not understand these procedural formalities, but on the other hand they know what they have to do if a loan from money lender is not repaid. They also know that by putting thumb impression in a blank sheet or in a court paper they can get a loan at any time. The money lender does not need a security like the banks either. To the village money lender, the words of the tribal borrower are the security as he understands that the primary occupation of a tribal mind is to repay the loan. This world view of a tribe makes him victim to moneylender's exploitation. In this regard the concern of the Central Government on the issue of indebtedness, as is reflected in the *Draft National Tribal Policy, 2006* is worth mentioning. It reads:

Despite the existence of legal and protective measures to curb money-lending in scheduled areas and provisions for debt-relief, enforcement has been weak and ineffective. The non-recognition of the consumption needs of tribals and the non-availability of institutional consumption credit makes the tribal people fall easy victim to moneylenders. This leads to dependence of the tribal on moneylenders, and the enormous rates of interest keep the tribal in perpetual debt, resulting in the mortgage and ultimate loss of his/ her land and property. Positive measures to improve the flow of institutional credit for consumption

through self-help groups will be taken. The Andhra Pradesh model for food security and consumption credit would be worth emulating in other States.

So education and awareness will come a big way to help the tribals and free them from the clutches of money lenders. It will help them to borrow from banks without any hesitation.

### **Check Your Progress –I**

#### **Write True or False**

1. Exploitation is at the core of tribal problem. True/False
2. Most of the tribal problems have a direct link with their declining resource base. True/False
3. Tribals are exploited only by the non-tribals. True/False
4. The term 'poverty' is value loaded to explain economic conditions of tribal people. True/False
5. Land alienation is an outcome of exploitative relations inherent in development process. Partially true/False
6. Tribal land alienation is a post-colonial phenomenon. True/False
7. Indebtedness also results from some of the cultural practices of the tribal people. True/False
8. Urbanisation has alienated non-tribal people from their lands more than the tribal people. True/False
9. Migration is often the result of unemployment and poor economic condition. True/False

Tribal land alienation in India has been a major cause of tribal miseries. The incidence of land alienation had its origin in colonial period. As you know the system of colonial governance was quite opposite to village system of tribal governance. Tribal system of governance ensured tribe persons autonomy over lands and forests which they used for their livelihoods. This relationship between tribes and lands was redefined by the colonial rulers through legal provisions. As a result a new relationship emerged where tribes, non-tribes and the State became stakeholders of lands and forests. One-to one relationship between tribes and land broke down and a triangular relationship evolved in which the tribes lost their autonomy and their customary rights over land reduced. Rights over land and forests gradually shifted to the State through legislations.

What is important to say is that tribes surrendered their absolute customary rights over land and forests to the State in course of interaction between the two. This interaction also exposed the tribals to non-tribal people who appeared as money lenders, traders, etc. These non-tribal people also became agents of tribal exploitation. It is not a surprise to know that

the Santals coined the term *diku* to designate non-tribals as a class of dishonest people and exploiters.

The beginning of land alienation during colonial period had its origin in the alien institution of private property introduced through the Permanent Settlement Act of 1793. This act established Zamindari system and conferred on the Zamindars rights to control over large territories including those of the tribals for the purpose of revenue collection and administration. Due to this system the non-tribals entered into tribal areas. The *Zamindars* employed their men for the collection of levies and taxes. These officials were gifted with the best land of tribal villages as *Jagir*. *Zamindars* also invited a number of non-tribals in the tribal areas for doing agriculture. Further during British period land was used for the establishment of railways, roads, government offices, hill stations, schools, hospitals, colleges, administrative towns, residence of administrators and other officers, etc. These new establishments attracted non-tribal people to tribal areas for jobs and business. They also purchased the lands of tribals and became resident of the tribal areas. As they inhabited the tribal areas they also in course of time purchased more land.

Subsequently, several acts were enacted to facilitate land occupation by the State. Land Acquisition Act 1894 is one of such Acts that empowered the State to occupy land for public interest. Under the provisions of this Act tribes also lost their land. GoI, 2014 reports,

‘ State has succeeded in acquiring vast tracts of land and diverting common property resources for construction of dams, infrastructure development, mining and industry, Special Economic Zone (SEZ), etc. Private land has been acquired under provisions of the Land Acquisition Act 1894, under the concept of ‘eminent domain’ based on the principle that the interest and claim of the whole community is always superior to an interest of the individual’.

The Land Acquisition Act of 1894 is also anti tribal. Quoting Pradeep Prabhu (1998) Hussain (2008) writes,

The Colonial Land Acquisition Act, 1894 freely permits the state to alienate tribal land for public purpose. It is not simply that the state enjoys a superior right but it can conveniently convert it into an absolute right while alienating tribal lands.

In addition, the colonial ruler enacted forest laws which also reduced tribal rights over forests. Formally beginning with the Forest Act, 1865 the British Government laid down provisions in Indian Forest Acts, 1927 which drastically reduced tribal rights. The Forest Policy of 1952, the Wildlife Protection Act of 1972, the Recommendation of National Commission on Agriculture of 1976 and Forest Conservation Act of 1980 further put restrictions on tribal rights.

These and several other regulations curtailed customary tribal rights over land and forests. Tribal land alienation remained integral in the process of tribal interaction with the State and other communities beginning with colonial rule. However, the situation was somewhat different in the Northeast India. The British had separate provisions for them. Even in Independent India several regulations recognised their customary rights over land and forests. Nevertheless, tribes of the Northeast did not remain untouched with regard to land alienation. Development projects and urbanisation alienated them from their land. You will come to know about it in following paragraphs.

Even during British period and after a few decades of introduction of the Permanent settlement the severity of land alienation was noticed. As a result the tribals revolted against them several times leading to a major armed struggle in 1832. Minor reforms after the rebellion did not change the situation to any significant measure. So the tribals revolted in a big way in 1858. At the turn of the century another tribal uprising led by Birsa Munda took place. Though some of the movements looked apparently social reform efforts, at the core was the sense of alienation from land and resources.

In view of the seriousness of land alienation problem several laws have been passed and enacted to prevent the incidence of land alienation and restore the land already encroached. Amongst them significant ones are

- Chotanagpur Tenancy Act,1908;
- Santal Pragana Tenancy (Supplementary Provisions) Act 1949;
- The Orissa Scheduled Area Transfer of Immovable Property (by Scheduled Tribe) Regulation, 1956;
- The Andhra Pradesh Scheduled Areas Land transfer Regulation,1959;
- Bihar Scheduled Regulations,1969; and
- The Kerala Scheduled Tribes (Restriction of Transfer of Land and Restoration of Alienated lands) Act, 1978.

There are Constitutional provisions to safeguard tribal rights over land and forests. You will read about it in details in units I, IV and IV of the paper (code BTS-304) entitled ***Constitutional Provisions and Tribal Development Programmes in India***. However, brief information is outlined so that you can understand the issue of land alienation despite constitutional safeguards.

Article 46 under Directive Principles of the State Policy of the Constitution clearly lays down the responsibility on the State to protect the Scheduled Tribes from Social Injustice and all forms of exploitation. The Tribal sub-plans, accordingly, envisage various measures for eliminating exploitation of tribal people. Schedule V of the Constitution lays down various provisions for protection of land, and welfare and advancement of Scheduled Tribes. It provides legal protection under which laws are to be framed by State Governments to ‘prohibit or restrict the transfer of land by or among members of the Scheduled Tribes’ in Scheduled Areas. State

Governments as you have seen enacted legislations, but there were some loopholes in the acts for which acts were not effective.

The Sixth Schedule of the Constitution also lays down provisions as to the administration of tribal areas in the States of Assam, Meghalaya, Tripura and Mizoram. Under these provisions Autonomous Districts and Autonomous Regions have powers to make laws relating to land, for the management of any forest not being a reserved forest, the inheritance of property, use of water course and canal for purpose of agriculture, etc. But there is a proviso to 3 (a) of the Sixth Schedule which reads as follows:

‘Provided that nothing in such laws shall prevent the compulsory acquisition of any land, whether occupied or unoccupied, for public purposes in accordance with the law for the time being in force authorizing such acquisition’.

GoI, 2014 reports that

‘On the basis of this provision, land and Common Property Resources (CPR) have been acquired and tribal people have been displaced. Moreover, land is one of the reasons for conflicts in some parts of the Northeast and this has caused displacement of people’.

‘Customary laws and the special provisions of Fifth and Sixth Schedules for protection of tribal land escape notice when judgments such as the Supreme Court order of 2004, regarding dispute over source of water in Nagaland, are passed stating ‘So far as natural resources like land and water are concerned, dispute of ownership is not very relevant because undoubtedly the State is the sovereign dominant owner.’

In National Forest Policy 1988 space was provided for protections of tribal rights. In two subsequent policy documents tribal rights and governance were the core issues. These acts are Panchayats (Extension to the Scheduled Areas) Act, 1996 (PESA,1996) and the Tribes and Other Traditional Forest Dwellers (Recognition of Forest Rights) Act,2006 (FRA,2006). The PESA 1996 empowers the Gram Sabha to exercise control over land alienation. Section 4, clause M and sub-clause iii reads that the Panchayats at the appropriate level and the Gram Sabha are endowed specifically with-

...

‘the power to prevent alienation of land in the Scheduled Areas and to take appropriate action to restore any unlawfully alienated land of a Scheduled Tribe’.

Chapter II, 3. (1) of FRA,2006 states, ‘For the purposes of this Act, the following rights, which secure individual or community tenure or both, shall be the forest rights of forest dwelling Scheduled Tribes and other traditional forest dwellers on all forest lands, namely:-

(a) right to hold and live in the forest land under the individual or common occupation for habitation or for self-cultivation for livelihood by a member or

members of a forest dwelling Scheduled Tribes or other traditional forest dwellers...

Chapter III, section 4 (6) provides for four hectares of land so that no tribal household remains landless.

Despite these legal provisions neither the restoration of land has not been completely successful nor the incidence of alienation stopped. Though the problem is serious, no concerted efforts have been initiated from the government side to record the extent of alienation of the tribal land. However, some reports, micro study of individuals indicate the nature and extent of this problem in tribal areas.

Nirmalya Banerjee (2011) in a write up in *Refugee Watch*,<sup>37</sup> informs us that in Assam 90 per cent of tribal people depend on agriculture and about 70 per cent of tribal families have been practically rendered landless. The Annual Report of Ministry of Rural Development of the Government of India, 2004-2005 has registered 86,291 cases of land alienation involving 10,48,93 acres of land in undivided Bihar (including Jharkhand), which topped the list of tribal land alienation in India. In Jharkhand alone a total of 2,608 cases of alienation of tribal land were registered under the Special Area Regulation Court in 2003-2004, 2,657 cases in 2004-2005 and 3,230 cases in 2005-2006.

While refereeing to a sample survey conducted by the Department of Rural Development in 1988, Government of India, Jagannath Rath (2010) in his Ph.D thesis entitled *Poverty and Trends of Exploitation among the Tribals: A Case Study of Kandhs in Koraput District of Orissa* informs us that about 30 to 55 per cent of tribal households had been affected by land alienation. It also showed that about 80 per cent of land was alienated to the non-tribals.

M.Nazer in a Government of India (Planning Commission, New Delhi) financed project entitled *A Study of Land Alienation and Indebtedness among Tribals in Tamil Nadu*, has presented the extent of land alienation, its causes and impacts on tribals. There are also references to such problems in Kerala and Karnataka. His findings in the state of Tamil Nadu are worth mentioning. He writes,

Out of 1031 tribal households, 353 households constituting 34 per cent have alienated their lands to the tune of 1186.72 acres, forming 31 per cent of their total holdings in Tamil Nadu. The average area alienated comes to 1.15 acres for a tribal household in general and 3.36 acres for the alienated household. It is important to note that 52 tribal households have completely alienated their lands to the extent of 259.66 acres and joined the ranks of landless tribal people. The households that lost lands and became landless constitute 25 per cent of the total landless tribal households in the state. In terms of households, 41 per cent and 37 per cent of marginal and small farmer categories, respectively, as against 50 per cent each of medium and large farmer categories have alienated their lands.

Tribal land alienation is loosely conceived as a process through which the tribals lose/sell their land to non-tribals. The government of India also subscribes to this oversimplified view and considers sale and mortgage of tribal lands to non-tribal people as alienation of lands. Land mortgaged against a debt is considered alienation as it is presumed that tribals are unable to redeem their debts and get back their lands. But land is also alienated due to governmental and non-governmental activities. Tribal lands are also lost to government departments including the forest department, private institutions and voluntary organisations. Broadly, land alienation takes place due to the entry of non-tribals, commoditisation of land that facilitates its sale, institutional requirements, and development projects. We have adopted a development process that fosters exploitative relations. Land alienation is therefore a logical outcome of such relations.

The non-tribal encroachment to tribal areas after Independence has also resulted in much tribal unrest particularly in Northeast India. Nirmalya Banerjee (2011) finds the fight over land at the root of many of the ethnic clashes that have rocked the north bank of Assam frequently in a write up in *Refugee Watch*, 37. U.A. Shimray (2006) also voices the same concern over the ethnic clashes between Naga-Kuki, Meiteis-Pangal and Paite-Kuki. The apparent integration politics in Northeast India, as Shimray informs us, could be understood as an effort to control land and resources. S.K.Acharya (1990, quoted in Nityananda Pattnayak), in a paper entitled 'Ethnic Process in North-Eastern India', also writes, people resort to "conflicts around land as defence of their culture, identity and livelihood". Nityananda Pattnayak (in Basar, et al.2012,) in his paper entitled 'Globalisation, Ethnic Identity and Karbi People', also finds difference in power relations between Karbi and non-Karbi people around land occupation and use at the root of ethnic conflicts in Karbi-Anglong district.

It is to be mentioned that after Independence the tribals are alienated from their land due to government establishments, industrialization and urbanization, exploitation of mineral resources and hydel power, making dams and reservoirs, and developmental projects in general. Jagannath Rath (2010) has informed us that acquisition of tribal lands in Koraput district of Odisha is mostly due to development projects like Balimela Dam, Machkund Dam, HAL Project, NALCO, etc. and a number irrigation projects.

Thousands and thousands of the hectares of tribal land are acquired for setting industrial complex, residential flats, schools, hospitals, water supply, electricity supply, road construction, market complex, etc. Tribal lands are snatched by State Forest Departments on the pretext that it belonged to the government. Army firing ranges also create problems for the tribals. It is not a surprise to notice that on 22 August 2006, thousands of people, especially tribals demonstrated before the District Secretariat demanding the closure of the army firing range in Netarhat town of Latehar district, Jharkhand. The range covers 1471 sq km spread over 245 villages of Latehar and Gumla districts. The legal structure also supports the government's action of land accusation for public interest. This public interest is often misused to promote private commercial interest. It is reported in media that several tribal lands were given to various housing cooperatives under the Chhotanagpur Tenancy Act,

1908. The Act allows tribal lands to be given for public use with permission from the Deputy Commissioner. However, a survey revealed that most of these housing cooperatives have diverted these tribal lands for construction of shopping malls, markets and other commercial purposes.

The elite among tribals tend to take away all the benefits and backward sections among tribes have been denied the benefits of plan programmes ... the administrative structure in tribal areas has continued to lack simplicity. *LP Vidyarthi*, *Chairman, Task Force on Tribal Areas*

It becomes easy to remove tribals from their lands as they do not have *pattas* (land deeds) to claim their ownership. Their ownership is governed by traditions and customs which the government legal frame does not recognise.

M.Nazer's findings in his report, as mentioned earlier, on the factors of land alienation are worth mentioning. He reports,

Sale of lands is the most common form of alienation of tribal lands and it accounts for 69 per cent of total lands alienated by tribals to non-tribals. Mortgage of lands accounts for 15 per cent of total alienated lands. Land on lease accounts for 6 per cent of total land alienated. This form of alienation is more common among the large farmers (compared to others) where 29 per cent of total alienated lands are reported to have been leased out. Forceful encroachments of tribal lands by non-tribal people and to some extent by government departments and private organisations and estates, is the worst form of exploitation found in tribal settlements. Encroachments account for 11 per cent of total land lost by tribal people. The weaker sections among the tribal are more affected by encroachments. Tribal lands are alienated to non-tribal people and private institutions and government departments. The non-tribals share in the alienation of tribal lands comes to 95 per cent as against 2.38 per cent to government departments and 2.72 per cent to private institutions like Christian missionaries.

An important point that emerges from this survey is that a large portion of alienated lands to non-tribals has gone to non-tribals who are not living in the area. Agriculture in tribal areas has become a promising area of investment for non-tribals living in the nearby villages and towns. This problem is found common in the tribal areas of Salem, Villupuram and Erode districts. Alienation of lands to meet consumption expenditure and repayment of debts accounts for 57 per cent and 20 per cent of the total cases, respectively.

Social and religious functions, "other cases" and medical expenses account for 8 per cent, 12 per cent and 3 per cent respectively, of total reasons for alienation of lands. Alcohols as stated earlier occupy the second place in the expenditure



pattern and interestingly it accounts for at least 1 per cent of the cases of land alienation; this is particularly the case with the weaker sections among tribals.

Hussain (2008) gives an estimate of acquisition huge tracts of tribal land that is approximately 7015.60 acres by the government of Assam for commissioning of Kopili Hydroelectric Project. The expansion of Guwahati city due to shift of capital from Shillong in 1973 alienated tribal people, mostly the Bodos of Kamrup tribal belt about 43,000 acres of land.

You have understood by now that the tribal lands are easy to occupy and so the government and private sectors occupy these lands for different purposes such as commissioning development projects like mega dams, industries, mining, and establishment of urban centres. The tribal people do not have land records and so their ownership is easily manipulated. The tribals were never legally recognized as owners of the lands which they cultivated. Needless to say, the unsatisfactory state of land records contributed a lot to the problem of land alienation.

There is another mechanism, the *benami* transfers, which contribute to alienation of tribal lands. According to a report of the Study Team of the Union Home Ministry (May 1975) large scale transfers of ownership of the Adivasis' lands were allowed to go out of hands through illegal and *benami* transactions, collusive civil proceedings etc. In such transfers land remains to be in the names of the original owners but they are reduced to the level of share croppers. The tribal people mortgage lands to local money lenders to meet socio-cultural obligations. These lands are like sold lands as the tribal debtor never earns enough to get back it. There are instances in the field where new entrants encroach upon the tribal lands without proper land records by bribing the local officer.

Obviously, the land alienation of the tribals takes place in different ways. There is no single cause like the exploitation by the moneylender, traders, land lords, etc. These exploiters are a part of the whole mechanism that goes against the tribal interest. The unsystematic land records of the pre-colonial and colonial periods which are followed by the present State add to the problem. The prevalent of corruption at various levels facilitate the process through manipulation of laws. You will understand the ways by which tribal lands are alienated from the report of GOI,2014. It states,

‘Alienation of land of tribal communities and loss of rights to Common Property Resources, mainly forests and large scale displacement and enforced migration takes place in following ways:

- Development-induced displacement by acquisition of land by the State based on principle of ‘eminent domain’ for ‘public purpose’ without a ‘land for land’ provision for rehabilitation. Acquisition by the State for development projects also leads to alienation of land and displacement due to environmental pollution and damage to land in the area near projects but tribal people so displaced are not entitled to any compensation.

- Illegal land alienation takes place due to participation of revenue functionaries and officials, and incorrect interpretation of laws, manipulation of records and permission accorded to alienate land. State Laws are amended to include provisions that facilitate land alienation of tribal communities.
- Community land of tribal communities is recorded as Government land in survey and settlement operations and most State tenancy laws recognize only individually owned registered land. Such lands have not been fully surveyed and there is no record of user practices, which would be shown as Government land.
- State action of acquiring tribal lands for settling refugees has resulted in land alienation and displacement. There is also encroachment of tribal land by immigrants.
- Creation of National Parks have resulted in alienation of rights and consequent displacement and forced migration of tribal people.
- Conflicts in the Northeast have resulted in tribal people losing everything and being displaced from their home ground?.

The class relations perhaps would explain the issue of tribal land alienation in a better way. The history of land alienation is not an accidental one. It has emerged because of the interaction between antagonistic class interests that are operating in the tribal areas. It is too simplified a statement to say that it is the result of just migration of the non-tribals into tribal areas. Rather there is a history class interest behind this migration which is often encouraged by the State. The State has supported the migrant non-tribals to settle down in the tribal lands. The land lease to MNCs is a burning example in recent time.

The Draft National Tribal Policy, 2006 also recognises the seriousness of alienation of tribal land and the ineffectiveness of laws enacted by various states, because people circumvent these laws in various ways. It remarks,

Alienation of tribal land is the single most important cause of pauperization of tribals, rendering their vulnerable economic situation more precarious. Of even greater concern is the fact that the lands lost are usually the most productive, leaving the tribals to cultivate poor quality land that is extremely vulnerable to the vagaries of weather and rainfall. The total effect of land transfers has been devastating to the fragile tribal economy. The massive inward migration of non-tribals has also changed the ownership of land in the Scheduled Areas to the disadvantage of STs.

The Draft Policy also makes, inter alia, the following important suggestions:

- a) scrutiny and amendments to the State anti-alienation land laws in order to bring them in conformity with the PESA Act;
- b) a study of shortcomings in various State laws by the nodal Ministry and enactment of legislation for restoration of alienated lands, and checking further transfer;
- c) amendment of the central Indian Registration Act to include an affidavit of the transferee indicating whether or not the transferee is a member of a Scheduled Tribe, or a registered society composed solely of members of Scheduled Tribes;
- d) monitoring of the progress of restoration of lands under the supervision of a high level empowered committee at the level of Chief Secretary in the States;
- e) establishment of special fast-track courts in the Scheduled Areas to deal with cases of tribal land alienation; and
- f) computerization and update of land records in the Scheduled Areas; and
- g) provision of keeping records of land distributed in the joint names of both the spouses, or in the name of the woman alone.

## **1.4 Unemployment and migration**

Unemployment of tribes (STs) is a consequence of their integration with the forces of formal economy. It is one of the major causes of tribal migration to urban centres and other places in search employment. In this section you will study nature, extent and causes of unemployment and migration of tribal people in India. You will also study impact of migration on tribes.

### **1.4.1 Unemployment**

By now you must have understood that unemployment and migration are two concepts of formal economic system like poverty. In a traditional tribal economy until and unless incapacitated by age, disease or infirmity every tribe person works. Even a child when comes of age does babysitting. The concept of child labour was absent in traditional tribal workforce. The population did not include a student category. Those who could work constituted the workforce. Unemployment in such a community is not a situation lacking in opportunity to work, but rather a situation of individual incapacity due to age, disease or infirmity. Each and every one in tribal workforce was engaged round the year in cultivation and other activities like hunting, food gathering, picking up minor forest produces, collection of material for house construction, construction of house, settlement of disputes, etc.

The phenomenon of unemployment became a crucial issue when the tribal persons were alienated from their traditional resource base and livelihood options. Land alienation and restrictions to forests marked the beginning of the alien situation of unemployment. As you know land alienation started from 1793 with the introduction of Permanent Settlement Act. Subsequently forest laws also largely alienated them from their traditional livelihood sources. Due to transfer of land in the hands of outsiders and also due to acquiring of land by the government for various development processes, the incidence of landlessness or near

landlessness emerged in tribal areas. Tribal agriculture has become seasonal in nature as they pursue mono-cropping due to adoption of permanent cultivation, lack of irrigation facility and shift from traditional slash and burn method.

After land, forest is used to provide gainful employment to the tribal round the year. In each season, minor forest produce was available and tribals remained engaged in the collection of those minor forest produce. The government administration and new forest policies snatched away the traditional rights of the tribal over the forest. With commercialization of forests and forest being treated as a source of State Revenue, tribals' rights in forest were restricted and they remained workless. Carrying out cultivation in the forest, collection of non-timber forest products and hunting were restricted. There was wide scale land alienation. They became virtually landless.

However, commercialisation of forests provided some employment. They are employed by the government agencies or private contractors for the collection of national forest produce. So, they became wage labour in place of earlier self-employed worker. As forest labour, they do not get work round the year. In remote areas, tribals do not get work as coolie because there is no construction work like urban areas where tribal men and women work of coolie. In North-eastern states of India, tribal persons do not prefer to work as coolies. However, the problem of unemployment due to land alienation or restriction to forest resources is not critical. These communities enjoyed special privilege till they participated in the process of national development agenda. Their problem of unemployment is associated with market imperfection and the development process itself. They face the problems of unemployment as in other places of the country due to illiteracy and low skill endowment. It is not a surprise to find unemployed tribal youths in mining areas of Jharkhand, Odisha because the mine and industry owners bring non-tribal labour from other areas who perform work more efficiently.

But the educated tribal youths face the problem of unemployment due to politics of the government towards the job and due to limited choices available to them. Even the government sector and private sector expand job opportunities in lesser proportion as compared with available workforce.

As you know unemployment is a phenomenon in formal economy It is defined as a situation where someone in working age is able to work and willing to work full time but does not get paid job. In this sense of unemployment various reports and individual studies present ST unemployment situation. GoI, 2014 presents in two tables, namely Table 5.15 and table 5.17 unemployment situation of the STs across male-female and rural urban divide as compared with overall situation of the country. We have presented the same in table 1.5 and table 1.6.

**Table 1.5: Unemployment Rate (UR) and Proportion of Unemployed Persons (PU) in 1983 and 2009-10**

Category	No. of the Unemployed per 1000 Labour Force				No. of the Unemployed per 1000 Persons			
	1983		2009-10		1983		2009-10	
	ST	All	ST	All	ST	All	ST	All
Rural Male	5	14	17	16	3	8	10	9
Rural Female	1	7	9	16	1	2	3	4
Urban Male	43	51	44	28	24	28	24	16
Urban Female	15	49	43	57	4	8	9	8

Computed from Table 5.16, GoI,2014

It is clear from above table that unemployment rates of Scheduled Tribes have increased from 1983 to 2009-2009-10. It means that dependence on traditional source has decreased and on formal economic activities has increased. As the formal sector has not been able to provide jobs the rate has increased. Unemployment levels appear less among Scheduled Tribes. This can be explained in terms of dominance of traditional purists where people are not considered unemployed. But ground reality is different as is explained above.

Proportion of unemployed persons (number of unemployed per 10000 persons) has increased for rural male, urban male and female workers in 2009-10. This means that the extent of integration of STs in formal economy is gradually increasing with increase in the proportion of unemployed STs.

**Table 1.6: Unemployment Rates for Scheduled Tribes and All Groups based on UPS approach**

Social Groups	Rural			Urban			Rural and Urban		
	M	F	P	M	F	P	M	F	P
STs	33	32	33	42	96	54	35	38	36
Overall	40	58	44	42	128	57	40	72	47

Table 5.17, GoI,2014

The above table shows that unemployed rates for STs as compared with all groups are less. But this rate is more for urban STs, both male and female, as compared rural counterparts. This conforms to earlier statement of less unemployment of STs. But this is not a real presentation of the situation as large section of tribal people still follows traditional livelihood options. Whatever may be the existent of ST employment, the fact is that they have been a part of unemployed force.

**Causes of Unemployment:** You can summarise the above discussion to identify the causes of unemployment. As you know tribes live in different states with different socio-economic

and environmental set up. So their problems and causative factor may vary. However, we can discuss the following reasons of emerging phenomenon of unemployment among the STs.

1. **Land Alienation:** Land including forest is an important source of gainful economic employment. As you know tribes have been alienated from the land due to several reasons like government policies, indebtedness, exploitation of money lenders, etc.
2. **Low agricultural productivity:** At present agriculture is not remunerative to tribal farmers. Due to alienation cultivable land is insufficient. Moreover, irrigation facility is absent or insufficient and so no scope of double cropping like rabi crops is available. Due to less land and increasing population landholdings have become wherein modern technology cannot be used in cost effective way.
3. **Seasonal nature of work in the village:** We have already discussed that agriculture is seasonal in nature. Other opportunities like wage work in forests and under MNREGA are also seasonal.
4. **Industrial backwardness:** Tribal areas in some case are industrialised. But tribes do not have skill endowment required for employment in industries. You will find tribal areas /states in the Northeast India which are not industrialised. Cottage and medium sale industries are few and in many cases these are capital intensive.
5. **Tribal economy is not diversified** in a way to absorb ST workers and STs are not skilled enough to compete with others outside their areas.
6. **Most of the tribe person at present looks forward government jobs.** The government sector is not expanding as per the need and the importance of privatisation has checkmated the expansion further. But private sectors are biased to the employments of STs as they are believed to have less competence. In fact it is seen in many cases that ST candidates do not match in competition with other candidates who possess additional qualification, better education, training and skill.
7. **The government policies, attitude of hidden caste and class consideration, nepotism, corruption, etc. also stand on the way of ST employment.**

**Consequences:** Unemployment in general and ST unemployment in particular have serious implications. The following are the consequences of unemployment:

1. Poverty, starvation and beggary in some states
2. Labour migration and family and social disorganisation
3. Contribution to the practices of bonded labour and child labour
4. Juvenile delinquency, drug addicts and alcoholism
5. Increase in crime

6. Victim of human trafficking
7. Suicide
8. Adverse effect on physical and mental health
9. Victim of misguided promises and involvement of insurgency

Needless to say, proper quality education with skill development, protection from exploitation at every quarters effectively, implementation of reservation policy in letter and spirit, creation of regular employment opportunities nearby would be helpful to address ST employment problems.

### **1.4.2 Migration**

Unemployment and migration present a cause and effect relationship. But the phenomenon of migration has broader implications. It can have inter-state, inter-district, inter-regional or international dimensions. The causes of migration can be voluntary or involuntary. As far as migration of tribes is concerned, it is not a new phenomenon. Migratory nature of the tribes is well recorded in historical documents and found in tribal oral traditions. Security reason, whether livelihoods or life, stands out singularly for earlier tribal migration. When population increases and resources in a place become scarce, the tribe or a section of it migrates to another place with resource abundance as a survival strategy. Disaster, frequent feuds, etc. are life security concerns that also cause migration. But migration of this nature is not the subject matter of discussion in this section.

As you know people in general and STs in particular migrate to other places for the purpose of education, employment etc. on their own choice. Such migration is known as voluntary migration. On the other hand, there are migrations which result due to natural disasters, war, fear of prosecution, environmental degradation, etc. Such migrations are known as involuntary migration. Even, displacement of people to give space to development projects is in the nature of involuntary migration. In displacement the involuntary nature of migration however, carries a content of force from the authority. It is a development -induced forced migration. A forced migration has another implication. Migration of people voluntarily under distress condition is a type of forced migration. Sanjeeb Kumar Jena (2014) informs that there is a deep linkage between migration and poverty specially of survival migration where tribal found at the bottom of the pyramidal structure of poverty. In other words, the migration apparently seems voluntary but results from a compulsion imposed by poverty.

GoI,2014 maintains that tribal people suffer predominantly from the phenomenon of poverty-induced migration. Due to compulsion involved in migrating in search of livelihood it would be more accurate to describe such migration as 'forced migration'. Migration of this type results from the tendency of exclusion present in market driven forces of development within formal system of the economy. Exclusion and thus deprivation and poverty compel STs to migrate to secure basic survival needs.

Majority of the tribals in central and western India became landless labourers. Wage employment opportunities being very limited in interior tribal areas, the tribals face the problem of unemployment and food insecurity. They migrate to administrative headquarters and outside in search of wage employment. Labour contractors take the advantage of cheap availability of tribal labourers and take them to work even outside the State. Jena (2014) reports that from tribal dominated KBK districts of Odisha thousands of people migrate to neighbouring Andhra Pradesh and work in brick kilns and construction sites. In a sample survey he finds that 70 per cent of the migrant labourers are STs.

The migrant labourers work for long hours, more than 12 hours a day for small extra earnings. They work under inhuman condition, become under paid, under fed and are physically tortured. Further, adults are financially and sexually exploited. They do not get proper health care, particularly for diseases which need long term treatment such as TB, leprosy, etc. The children drop out of schools contributing to the high illiteracy rate among the STs.

Often these labourers are pushed to bonded labour conditions. Even migration feeds to child labour system. You must have read from news papers how bonded labourers and child labourers working in mines, hazardous activities are freed by NGOs and government.

You can list the causes of labour migration as push factors and pull factors. In simple words, poverty, unemployment, indebtedness, etc. push the people out of their native place in search of works to secure livelihoods. These factors compel the people to leave their native place. On the other hand pull factors are facilities and opportunities available in the urban and industrial centres which lure the poverty stricken people. These facilities attract the people; the people see the benefit which they lack in their native places.

Jena (2014) has outlined some other causes of migration in the context of KBJ districts of Odisha. He reports that people migrate to other places to avoid forceful joining in Maoist cadre. Education for children and health facilities in towns attracted some persons. In other words, it is not always economic compulsion but better facilities which also cause migration.

Let us discuss the consequences of labour migration. As you have learnt labour migration often leads to the system of bonded labour, child labour, physical and exploitation, sexual exploitation and oppression at the migration site. Besides it also has backward effects in native places.

1. Sexual diseases: Jena (2014) reports incidences of venereal diseases. It was reported that the migrants picked up the diseases and passed it to their wives and girlfriends in the village. From them it also spread to others due to extra marital sex.
2. Family and social disorganisation: The absence of migrants for a longer time at home creates socio-psychological anxiety. Even there are cases when a young wife elopes with other man. Long absence not only affects family life it also loosens kinship ties and leads to emotional distancing.



3. Ill health due to intoxicant and low quality of food: As workers want to save money to bring home they do not care for manageable illness. Consequently they become physically weak. In the changing environment at the migration site, their food habit changes. The water also changes for them. In addition poor sanitation and workload adversely affect their health. They return home exhausted and their productivity decreases.

The only possible solution is to create employment opportunities to tackle the twin problem of unemployment and poverty-induced migration. However, migration also takes place due to facilities available in urban centres. Therefore, provisions urban facilities in rural areas as was suggested by A.P.J Abdul Kalam, the former President of India would be an effective measure to arrest the problems of unemployment and migration. The provisions include not only educational, recreational, health and other infrastructural facilities but also employment opportunities throughout the year. Government schemes are already in operation. What is needed is to regularise it and make corruption free in tribal areas. In addition agricultural modernisation; establishment of cottage and small scale industries, food processing and forest based units; poultry, goatery etc. and diary should be promoted with proper market facilities. Role of middle man should be abolished at any cost.

### **Check Your Progress – III**

#### **Answer the following**

1. Is displacement synonym of migration?
2. Why are development projects responsible for the displacement of tribal people?
3. Why do you think that displacement has multidimensional effects?
4. What are major causes of tribal displacement?
5. Where do urban centres grow?
6. What are the reasons of increase in urban ST population?
7. How has globalisation affected tribal society?
8. Why R & R policy has not been effective to rehabilitate displacees properly?

### **1.5 Let us sum up**

As you completed this unit, you have learnt that

- Economic problems faced by the tribal society are the result of their interaction with formal economy.
- The problems are poverty, indebtedness, land alienation, unemployment, migration and displacement.

- These problems are mutually reinforcing. One problem may be the cause or effect of another. For example, poverty may be the cause of indebtedness and indebtedness also may be the cause of poverty.
- Poverty is a situation of deprivation of entitlements to minimum means necessary to meet basic needs such as food, clothing and shelter.
- Expression of poverty in monetary terms is absolute poverty.
- Poverty in India is defined in terms of income or consumption/expenditure over a period of time.
- The concept of poverty is alien to traditional tribal pursuits of livelihood.
- There is a correlation between poor states and concentration of tribes.
- Poverty is also defined in terms of calorie intake fixed 2400 calories for rural area and 2100 for urban area.
- Ownership of bank accounts and assets in India does not give a true picture of economic condition of the tribal persons.
- On the basis of the provisions of the Land Acquisition Act of 1894 tribal land is acquired for public interest.
- Land alienation in tribal areas has its origin in colonial period with the introduction of Zamindari system.
- Indebtedness has a socio-cultural dimension. It is a form of exploitation by village money lenders.
- The magnitude of loan of the tribal borrowers is less than those of other sections of the society but it is more extensive.
- PESA,1996 and FRA,2006 provide for preservation and protection of customs, traditions and for prevention of land alienation.
- Industrialisation and urbanisation cause tribal displacement and subsequent poverty.
- Unemployment is a major cause of migration. Other causes being educational and medical facilities in urban centres.
- The problem of unemployment is intrinsic market imperfection and state sponsored development model.
- Both push and pull factors are the driving forces behind rural-urban migration
- Labour migration often leads to the system of bonded labour, child labour, physical and exploitation, sexual exploitation and oppression at the migration site
- When tribal people migrate to urban centre a rural-urban continuum reflects in their life across generations and places of interaction- at home, town and factory.
- Displacement sometimes is associated with forced evacuation.
- Resettlement and rehabilitation (R & R) policy is not implemented and tribal oustees are not adequately compensated. There is a gap between policy vision and ground reality displaying miseries of the project affected tribals.
- There are lacunae at planning stage of R & R policy also.
- Present globalisation is a financial globalisation. National and international policies facilitate movement of finance across the globe.

- Role of MNCs and creation of SEZs in the process of globalisation alienate the tribals from their forests and lands and displace them.

## 1.6 Keywords

Bonded labour:	it refers to persons belonging to any particular caste or community who are forced or partly forced to work for the creditor under an agreement either without wages or for nominal wages
Capital intensive:	more machines and less labour in the production per unit
Diku:	a derogatory remark for outsiders by tribes in Jharkhand who are considered dishonest and exploiter
Forward linkage:	refers to investments subsequent to a particular initial project
Labour force:	a group consisting of persons who are working or are available for/seeking work
Labour Force Participation Rate (LFPR):	the number of persons in the Labour force per 1000 persons
Pull factor:	facilities available in an area (urban and industrial centres) like employment opportunities, higher wages, educational and medical facilities, which attract persons to the area from an area lacking in them
Push factor:	unfavourable conditions in native place like poverty unemployment, etc. which compel a person to migrate to urban/industrial centred in search of work
Rural Urban continuum:	refers to change and continuity of socio-economic life from the village to the city; at one end of the continuum is village and at the other the city, in between two ends there are formations of ceaseless interaction

Sanskritisation:	it is a process of social change process which a lower caste or tribe or any other group emulates customs, rituals, ideology and way of life of a upper, dominant or more often twice-born caste
Special economic zone (SEZ):	an area within the boundary of a country in which business and trade laws are different from the rest of the country
Unemployment rates:	number of unemployed per 1000 in the labour force

## 1.7 Probable Questions

### Short Answer Questions

- 1 What are the economic problems of STs in India? Were these problems existed in traditional tribal economy? Explain.
- 2 What is consumption based measure of poverty in India?
- 3 How does money lending exploit tribal borrowers?
- 4 Discuss cause and effect relationship between poverty and indebtedness.
- 5 What remedial measures would you like to suggest to control tribal indebtedness?
- 6 Write a few important causes of land alienation.
- 7 Mention colonial laws and the provisions in them which caused tribal miseries.
- 8 Industrialisation and urbanisation are complementary to each other. Justify.
- 9 What do you mean by pan-tribalistic ideology? Explain.
- 10 Explain universalisation of urban culture in tribal society.
- 11 What are the causes of displacement? List them.
- 12 How does dam affect the health of tribal people living in the vicinity?
- 13 What are the consequences of displacement?
- 14 What do you mean by SEZ? What are its effects on tribal population?
- 15 Briefly discuss the impact of globalisation on tribes of India.
- 16 Discuss the causes and consequences of land alienation problem in tribal society.
- 17 Write short notes on a) poverty, b) unemployment.
- 18 Why do tribal people incur debt? Examine the consequences of indebtedness.

### Long Answer Questions

1. What is poverty? Explain its nature and extent among the tribes in India.
2. Tribes are vulnerable to indebtedness? Do you agree? Discuss its causes and effects?
3. Discuss the mechanism of tribal land alienation from colonial period.
4. Explain the unemployment situation of the STs. What are its causes and consequences?
5. What are the causes of migration of tribal persons? Discuss its consequences. Suggest measures to control it.
6. Describe the nature and magnitude of tribal displacement due to industrialisation and urbanisation with suitable examples.

7. Rehabilitation compensates the miseries of displacement. Do you agree? Give reasons to your answer.
8. Write a note on dam induced displacement.
9. Discuss the impact of development induced displacement on tribal people.
10. Write a note on development induced problems in tribal society.

### 1.8 Answers to Check Your Progress

#### Answers to Check Your Progress –I

- |                   |          |          |                  |
|-------------------|----------|----------|------------------|
| 1. True           | 2. True  | 3. False | 4. True          |
| 5. Partially true | 6. False | 7. True  | 8. False 9. True |

#### Answers to Check Your Progress – II

1. No.
2. Because development projects are commissioned in resource abundant tribal areas
3. Displacement leads to land alienation, causes environmental pollution and food insecurity, and results in the loss of traditional social networks and so on.
4. Commissioning of development projects and rules and regulations on the subjects of land acquisition, forest management and conservation of wildlife.
5. Urban centres grow in trade centres, places of pilgrimage and religious, at the junction of important trade routes and at the administrative centre or capital seat of a government.
6. Increase in ST urban population is due to natural growth of population, increase in the number of urban centres, rural-urban migration, addition of new communities in ST list and extension of urban area to neighbouring rural areas/villages.
7. Globalisation has facilitated MNC investment in resource abundant tribal areas. This resulted in the displacement of tribals, exposure of tribals to pollution and environmental degradation and socio cultural tensions.
8. Because of improper implementation, lack of seriousness, haphazard planning with no provision of consultation with affected people, often low finance allocation for rehabilitation, etc.

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## Unit -II

# Economic Issues II

## Structure

- 2.0 Learning Objectives**
- 2.1 Introduction**
- 2.2 Industrialisation, Urbanisation, Displacement & Rehabilitation and Globalisation**
  - 2.2.1 Industrialisation and Urbanisation,**
  - 2.2.2 Displacement & Rehabilitation**
  - 2.2.3 Globalisation**
- 2.3 Let us sum up**
- 2.4 Keywords**
- 2.5 Probable Questions**
- 2.6 Answers to Check Your Progress**
- 2.7 Further Reading**

## **2.0 Learning Objectives**

After reading this unit you will be able to

- gather knowledge on economic related tribal problems in the country;
- list some important economic problems of the tribes;
- explain the nature of poverty, indebtedness, land alienation, unemployment and migration;
- identify the causes and discuss the consequences of economic problems;
- describe the participation of tribes in the process of industrialisation and urbanisation;
- explain consequences of tribal participation in the process of industrialisation and urbanisation;
- examine the nature and extent of tribal displacement in the process;
- explain rehabilitation policy for displaced people and its implementation;
- understand the meaning of globalisation and its implication for tribal development and displacement; and
- suggest remedial measures to address economic problems of tribal communities.

## **2.1 Introduction**

As you know traditional tribal economy was subsistence in nature; production was primarily meant for consumption without marketable surplus. The notion of economy was not a distinct domain of human activity; rather it was embedded in culture. Perceptually, all aspects of life, to a tribal person, were an integrated cultural whole. Therefore, non-tribal persons including

academics could not conceptualise culturally embedded economic pursuits following economic principles and concepts of non-traditional and non-tribal economic system. Methodologically, traditional tribal economy did not fit in the premise of non-traditional and non-tribal economic studies. You will not find in conventional economic texts dealing with traditional tribal economy.

So you just learnt two types of economic system; one traditional tribal economy and the other non-traditional and non-tribal economy or 'modern economy'. Economic anthropologists have made a distinction between the two, the former as substantive economy and the latter as formal economy. By definition, the formal economy is not embedded in culture; it is a separate domain of activities and is distinct from other domains activities like political, religious and so on.

You also know that contemporary tribes no more pursue traditional livelihoods exclusively. They have been integrated to formal economic system in different degrees through colonial mechanism of exploitation and development interventions of national government. You should know that formal economy is a dominant ideology based on specialisation, market principles, money, accumulation and individualistic attitude. It also has a hierarchical power base at the stages of policy making, execution and implementation of policies and beneficiaries of policies. The power hierarchy also expresses through command over and access to state resources and privileges-finance, legal, political, service, etc.

In contrast, substantive tribal economy is characterised by embeddedness, barter exchange, sharing and community mode of ownership and production. Power relations vary between power structures of village council and chieftainship. But as far as mode of production, ownership and accessing to resources are concerned power hierarchy is culturally embedded and hence not functionally specialised as in a formal economy. So the topic of integration of tribes with national development process apparently shows two different, to some extent opposite systems, coming together. It is not the formal economy which also integrates with some principles of substantive economy, but it is the other way round, a one directional process. The tribal substantive economy is a subordinate economy as it only integrated with formal economy. In other words, the formal economy is considered to be the dominant economy. You should also know that it is not tribal community which wanted integration; rather it is the dominant economy, under the obligation of its welfare commitment, articulated and initiated the process of integration through development agenda.

In the process of integration, it is but natural to think that the dominant economy approached the tribals with a parental outlook. Neither the tribes were consulted nor were their needs appreciated. As a result the tribes did not accept everything of what the national economy provided and the national economy did not provide everything that the tribes really needed. During our present time, despite ideology of globalisation, participatory development and rights based strategy of equitable development the dominant and subordinate relations translate through tribal marginalisation, exclusion, subsequent protest against the State and so on. Even industrialisation and urbanisation which are considered to be indicators of



development have caused displacement of tribals from their land. What follows is that tribal integration with formal economy whether during colonial period or post colonial India, the tribals get exploited. You can understand it better with reference to the following explanation.

Let us discuss the notion of exploitation perceived as a stereotype. Exploitation of tribals has always been attributed to the handiwork of non-tribals like traders, government officials working in tribal areas, and so on. This is, however, one aspect of the whole issue of exploitation. There are tribal states in Northeast India like Arunachal Pradesh where non-tribals like the traders are not even allowed to hold business license. The tribal elites as bureaucrats, politicians, etc. do corner the benefits which otherwise would have accrued to the general public and as a result of which inter- and intra-tribal inequality has been visible even to a casual observer.

A little reflection, however, would reason out differently. The tribal or non-tribal dimension of exploitation is but an integral part of the commercial ethics of accumulation of wealth in place of the traditional tribal value of sharing. The exploitation due to interaction between non-tribal traders and tribals is direct and is of specific nature. But this specificity is the reflection of a general principle. The advantageous, strong and powerful have the potentiality of exploiting the disadvantageous and the weak. The former put it into practice with every opportunity available and the latter are subjected to exploitation. It is not a surprise that we often hear the rich nations exploiting the poor ones; the industrialists the workers, and so on. Tribal exploitation, therefore, can be viewed directly and indirectly having both general and specific contexts. So, problems of the tribes are linked with power differences between them and the State forces.

In this unit you will learn problems of tribal people in the process their integration with national development process. As you know, tribes were exploited during colonial rule. They faced a lot of economic problems. Most of these problems continue and intensify even in the welfare model of national government.

## **2.2 Industrialisation, Urbanisation, Displacement & Rehabilitation and Globalisation**

Displacement is the crux of tribal problem. It takes place in the process of industrialisation and urbanisation and implementation of other development projects like mega dams. The incidence of displacement however has been a greater concern in the process of globalisation also. You will learn about displacement caused due to industrialisation, urbanisation and recent development ideology under globalisation. The provision of compensation to displacees, which is called resettlement and rehabilitation (R & R) will also be the theme of discussion in this section.

### **2.2.1 Industrialisation and Urbanisation**

Urbanisation has a long history before industrialisation. But in a formal sector economy both are interrelated. In India establishment of industries have led to urbanisation. For example, Duliajan, Namrup, New Bongaigaon, Nazira and Numaligarh in Assam developed as industrial-urban centres consequent upon establishment of oil refineries. Tata Nagar, Rourkela, Bokaro, Dhanabad, Ranchi, Bhilai, Jharia are also industrial urban centres. In fact the first wave of industrialisation in tribal areas was felt with mining exploitation in Jharia, Bokaro and in Karanpura coal fields in present state of Jharkhand in 1856. It was followed by the installation of Tata Iron and Steel factory at Jamsedpur in 1907.

But it is not always the industrialisation that always led to urbanisation. Urban centres develop no doubt in industrial places; but they also grow in trade centres (Tinsukia in Assam), places of pilgrimage and religious centres (Puri, Dwarka). A place situated at the junction of important trade routes (Singapore which is now a country) and the capital seat of a government (Dibrugarh, Itanagar) also develop into urban centres. In Arunachal Pradesh all the 27 urban centres enumerated in 2011 census except three developed from administrative headquarters. The three began as industrial places followed by establishment administrative centres. These three urban centres are Namsai, Deomali and Jairampur. At Deomali, Nocte Timber Company Ltd. was started by British owned private company namely Assam Railway and Trading Corporations Ltd. in 1962. In Jairampur JCVM Ply Wood Industries Ltd. started in 1975 and the Assam Saw Mill and Timber Company, the first in Assam, established in 1920 in Sadiya region shifted to Namsai after the great flood and earth quake of 1950. The circle headquarters practically were concomitant to the industrial activities.

You will see that there is growth in ST urban population in every Census. In India urban ST population increased from 2.4 percent of the total population in 2001 to 2.8 per cent in 2011. In Arunachal Pradesh the urban ST population as a percentage to total ST population in the state grew from 0.9 % in 1971 to 2.3 % in 1981 and to 17.02% in 2011. In Arunachal Pradesh in 1971 there were four urban centres which increased to 6 in 1981 and to 27 in 2011. Obviously, the growing ST urban population cannot be explained stating one or two reasons. It depends on several factors like natural growth of population, growth of urban centres, rural-urban migration, addition of new communities in ST list and extension of urban area to neighbouring rural areas/villages. For example, as we learn from Kalilash Sharam (in Ganguly,1995) establishment of Guwahati University, Assam Engineering College and Assam Ayurvedic College augmented the space of urbanisation in Jhalukbari area which ultimately merged with Guwahati city (greater Guwahati). You will find that Sikkim saw a ST population in Sikkim rose from 20.6 per cent of total population in 2001 to 33.8 per cent in 2011 as the Limboo and Tamang communities were added to the ST list.

Urbanisation and industrialisation are complementary to each other. Urbanisation develops around industries and urbanisation also provides incentive to establish industries. As a result, after an industry is set up and urbanisation starts, then new industries come up. But often industries are set up in tribal areas where land and resources are abundantly available. You will find mining industries in tribal areas of Jharkhand, Odisha, Chhatisgarh, etc. the Rourkela steel plant in Odisha was established in 1956 in the original Rourkela village

mainly inhabited by tribes. So you will not benefit from studying urbanisation and industrialisation separately. You will learn that both have affected tribal ways of life mainly on two counts. The first one relates to uprooting tribal villages and thus leading to tribal displacement. The second one relates to impacts on tribes, tribal demography and ways of life. You will also learn the difference of this impact during initial period of industrialised urbanisation and later periods.

Rourkela steel plant uprooted villages inhabited mainly by tribals. Not only the steel plant directly caused displacement, it also required ancillary services and facilitated more industrial units which also displaced villages. This is called forward linkage in the process of industrial development. In this regard a record of Government of Orissa throw light on the nature and magnitude of displacement. the year 1954 and continued up to 1976. According to the latest record of the Revenue Department, Government of Orissa for the RSP and its township all total 7,889 ha (19,722,69 acres) of land was acquired from 33 villages. Of the total acquired land the government land was 24.84 per cent (4898.51 acres) and the rest was private land (75.16%). This resulted in direct displacement of 2,901 families, out of which 1,974 (68.05%) were scheduled tribes (STs) or tribal and 279 ((9.62%) were scheduled castes (SCs). Added to that in order to meet water needs of the plant and the new township a water reservoir was built on river Sankh at Mandira around 30 km away from the plant site. The construction of the Mandira dam on river Sankh further affected 31 tribal villages and displaced 1,193 families. The total land acquired for the dam purpose was around 4,786 ha (11,964 acres).

Though they have been rehabilitated in six colonies their traditional society is completely disintegrated. Health and hygiene, house space etc. are like those of slum dwellers. From the producer people they have become consumers and often providing services as house help, rickshaw pullers, age labourer, etc. Obviously, level of education is so low that most of their third generation people do not fit in job requirements.

A good example of displacement in the process of expansion of urban area comes from Shimray (2006). In a small booklet entitled *Tribal Land Alienation in Northeast India: Laws and Land Relations* he records an example cited by Prof.A.C.Bhagabati. The example shows how National Highway 37 has changed the scene which existed 35 years ago. Shimray writes,

The land that has been used for the bypass near Guwahati, including the Games Village was once tribal livelihood. Several tribes, especially the Karbi, Tiwa and Garo could be found in sizeable numbers in these areas. One cannot exclude the use of dubious means by the State or the contractors to lure the original occupants to part with their land and such as “One bottle of Rum for one bigha of land.” Karbis in and around Ganeshpur-Dispur area used to grow orchards. The area was fertile and yielded abundant fruit. Today this fertile area has been privatized and the Karbi have lost it. Based on it the speaker argued that “Entire Guwahati has seen displacement”.

Hussain (2008) also informs that The expansion of Guwahati city due to shift of capital from Shillong in 1973 alienated tribal people, mostly the Bodos of Kamrup tribal belt about 43,000 acres of land.

You will learn initial impacts of industrialisation on tribals of the central India from earlier writings. B.R.Mishra in a Report *on the Socio-Economic Survey of Jamsedpur* (1959) found the tribal community wielding itself in re-emergent force. Joint family system was largely disintegrated, but still it sufficiently illustrated the operation of rural-urban continuum in that it worked differently at three levels, at home (village), factory, and town (residential home). His report also reflected fundamental differences in the first, second and third generations. A.C. Haldar's (1993b) observation supports to Mishra's findings. He finds that children in the mining centres grow up detached from the old social controls. Elders always try to make compromise with their traditional norms to tackle problems of the younger.

Interestingly Mishra observed class basis of stratification, 'working class' and 'managerial class' among the tribes working in the factory and living in the town. But the overall situation of the tribes living the town marked a difference between the tribals and non-tribals particularly in matters of housing accommodation and educational facilities. Mishra states, 'the tribals are forced to feel 'as if they are orphaned'. You can understand the life of tribes in an urban centre where both tribal and non-tribal people live and non-tribal group enjoys superior status in social hierarchy. However there is a difference if the urban centre is in tribal area and is dominated by the tribal population. Non-tribal people in these places do not enjoy any superiority in the social organisation. The difference is that there is no comparison between tribal and non-tribal groups of people like such places dominated by non-tribal culture.

When tribal people migrate to urban centre a rural-urban continuum reflects in their life across generations and places of interaction- at home, town and factory. L.P.Vidyarthi (1978), quoting from P.G Ganguly's unpublished thesis of Lucknow University (1958), informs that three forces operate in the process of rural-urban continuum in the context of tribal migrants to urban centres and displays a pan-tribalistic ideology. These are revivalism, selective detribalisation and selective modernisation. Selective detribalisation and modernisation emerges as a thesis of tribal urban life. But revivalism, the move to live in tradition, emerges as antithesis. In between the two, a synthesis emerges creating a pan-tribalistic identity that can be perceived in opposition to ethnocentric community identity.

The rural-urban continuum is described by G.S. Aurora (in Vidyarthi,1976/1985) within the conceptual frame of Sanskritisation that accommodates tribal consciousness and modern occupation simultaneously. In his study of folk-urban relation in Alirajpur Tehsil of former Madhya Pradesh he found market places providing linkages between the kinship relations at the regional levels. The process of diffusion from the marketing centres to the peripheries, and from the town to the neighbouring tribal villages is indicative of universalisation of urban culture.

Vidyarthi (1976/1985) elaborates the point taking the example of Hatia village of Ranchi which before 1958 was characterised by isolation, homogeneity and collective way of living. These folk and rural traits got mixed up with urban industrial characteristics. Earlier traits were greatly disturbed; ideals, language, food habits, population composition, dress pattern social and religious outlook characterised heterogeneity and industrial outlook. The net result of the uprooted tribal village and workers working in factories was loss of traditional occupation land, house, unemployment, high aspirations and great frustration.

Vidyarthi (1978) was predictive about the status of tribal population in industrial towns. He inferred from a number of studies that modern industry with ultra modern technology in a tribal region formed and would likely to form the bulk of industrial labour in several places. He (1976/1985) found that in the Chaibasa Cement Works, set up in Ho area in 1947, 65.7 % of Ho workers are unskilled labourers out of five categories like skilled high, skilled upper, skilled lower, semi-skilled and unskilled. He further recorded less than one per cent (0.9%) in 'skilled high', 3.3 % in 'skilled upper', 8.0 in 'skilled lower' and 25.8 % in semi-skilled category. There were only two foremen and no representation in the managerial category from the Ho community. These workers though are dominant in number in the workforce belong to the lowest socio-economic stratum.

Dipankar Banerjee (1995, in Ganguly, 1995) informs us the impact of urbanisation on Karbi people. The urbanisation took place after establishment of the District Council on 23<sup>rd</sup> June 1952 as per the provisions of the Sixth Schedule of the Constitution of India. You should know that the situation here is different from central India where non-tribals enjoy superior socio-economic status as compared with tribals. The Karbis readily accepted the new democratic form of government because it did not have any conflict with their traditional socio-political life. They participated in the process according to capacity and benefitted without external forces of exploitation. The District Council also helped to promote political consciousness among them. It ushered in a new era in the political outlook of the people. It also opened up new vista for the Karbi leadership to manage the new political set up and spire for participation the national sphere of political life. It is through such political organisation and activities that the Karbis have become conscious of the need of modernising themselves on the one hand and preserving their culture on the other. The urbanisation in district headquarters encouraged rural-urban migration and created urban Karbi elites. Inequality has emerged in the society as a whole. The occupational structure has changed. The Karbis are found adopting modern way of life and at the same making efforts at preserving age old customs in the urban and semi urban areas. In these areas they have taken up occupations like horticulture, sericulture, animal husbandry, blacksmithy and permanent agriculture. A new social order emerges.

The emergence of a new order was also observed by A.C.Haldar (1993a) even during early phase of tribal contact with mining industries. He informs that at the initial stages of industrialisation the tribals faced disorganisation at various levels through uprooting and the introduction of cash economy. This resulted in the formation of self-oriented nuclear families,

loosening of kinship ties, weakening of the authority structure, etc. But reorganisation of their culture in the new set up also takes place. They realise the importance of some of their traditional social institutions for maintaining social unity. They have found 'archery' as a meaningful way of preserving their rational bondage with 'arrow and bow' and at the same time develop the sportsmanship in a modern sense. Haldar noticed attitudinal change of the tribes living in mining sites towards the concept of *diku*. The tribes accepted *diku* (outsider) industry to be beneficial to them unlike the *diku* activities aimed at their exploitation.

This is also the case in tribal states like Arunachal Pradesh Mizoram, etc. where urbanisation has started through planned development interventions. Establishment of urban centres did not displace the people in the way it has displaced tribal people in central parts consequent of industrialisation. This process has not made people landless. But urban problems like water shortage, growth of unauthorised colonies, environmental degradation, juvenile crime, etc have come up. There is a change and continuity in cultural life of people. As urban centres have been the locus of elite interactions new ideas emerge. The idea of an alternative political party, which is now Arunachal Pradesh People's Party in Arunachal Pradesh, evolved in Pasighat town. The movement of indigenous faiths and beliefs had its germination in district headquarters towns like Aalo, Pasighat, Ziro, Changlang, Khonsa, Roing, etc., but it has taken its root at Itanagar, the capital city.

Urbanisation and industrialisation have its negative impact on tribal population in many ways. But in a slow and steady way the process facilitates integration of the tribes with the national goals.

### **2.2.2 Displacement and Rehabilitation**

Tribal people used to live in harmony with Nature since time immemorial till they encountered the forcers of development both in colonial and post-colonial periods. Normally, when the carrying capacity of the resource base in their habitation reduced, they migrated to another place without disrupting their socio-cultural and economic life. This type of displacement is natural as a livelihood strategy. But development induced displacement is one which is neither normal nor an alternative strategy for tribal livelihood security.

Displacement can be direct where people shift to a new settlement. As a result they lose homestead land and become displaced persons (DPs). There is indirect displacement also. Many people who are not directly displaced are affected either by losing agriculture land or livelihood or by any other counts and become project affected persons (PAPs). Obviously, the projects have adverse impact on the life and livelihood of tribal people both directly and indirectly. The physically displace the villagers to a lesser extent, but their effects physical environment and social environment both in long run and short run are immense.

**Why displacement of tribal people? :** As a matter of fact, tribal communities have been playing a vital role in preservation and management of natural resources, and it is not a surprise that about 80% of the world's cultural and biological diversity have been reported in

their inhabited regions. There are also large deposits of mineral resources. These resource rich regions are obviously the target of various companies and commercial concerns. The companies and business corporations commission mining activities, build dams to harness hydel power and set up industries to produce mineral based goods to meet the growing demand of the people of resource poor regions. In the process the people, particularly the tribals, who have been guarding the resources from time immemorial in the framework of their worldview are displaced to make room for the activities of the companies.

Mega-development projects are the models of economic development recognised across the world. It may be hydro-power project like Sardar Sarovar in Gujarat and Hirakud Hydro-Power Dam Project constructed in Odisha during 1950s; industrial houses like Rourkela Steel Plant of Odisha or Bhilai Steel Plant in Chhatisgarh or BHEL in Andhra Pradesh; mining projects in Odisha as well as in other states which explore ores like dolomite, iron, bauxite by both Private and Public Sector Companies. One will find these activities carried out in tribal areas as there are resources for such activities. Millions of tribal people have been displaced from their lands, their homes, their livelihoods, and their communities to make way for projects. You have already studied about industrial- induced development in section 1.5.1

Associated with the process of industrialisation is urbanisation which also results in displacement. Urbanisation requires large tracts of land which otherwise is difficult to obtain from non-tribal areas. We have seen in the section of land alienation how the growth of Guwahati city has displaced the Bodo, Garo, Karbi and Tiwa people originally inhabiting various areas which now have become parts of Guwahati city. The Guwahati city has displaced tribal people and forced them to the status of marginalisation severely affecting two tribal communities, namely the Krbi and the Bodo. The Karbi tribe used to live in the Chenikuthi-Chandmari-Noonmati-Narangi areas until 1960s and 1970s; these areas are now a growing urbanisation centre in Guwahati city. Their land has been purchased by relatively advanced Assamese society, mostly belonging to non-tribal groups. The Karbis have been displaced from their original settlement due to the urbanisation and pushed to Bonda-Chandrapur area outside the city boundary. The expansion of the city has also displaced the Karbis and the Rabhas living in Kahilipara area. No doubt, the urbanisation process in Guwahati, as Hussain (2008) remarks, has been 'community selective' wherein the indigenous tribals have been excluded to the advantage of the non-tribals.

There are some security concerns which also displaced tribal people from their original inhabitation and alienated them from their ancestral lands. In mid 1960s, Hussain (2008) writes, the Indian armed forces regrouped Mizo villages in order to contain Mizo rebellion which severely dislocated the Mizo tribal economy and the community structure. He gives a figure of 45,000 tribal people (out of total population of 3 lakhs) from 109 scattered villages which were grouped into 18 group centres.

**Magnitude and Nature of displacement:** There are different figures on displacement due to commissioning of projects or carrying our mining activities from different sources. The figures supplied by government or company sources understate the actual figures. For

example, the Utkal Alumina International (UAIL) calculates that the Bauxite mining at Kashipur in Odisha would displace only 147 families in three villages; another calculation tells that it affects more than 2100 families in about 24 villages. A calculation by Norsk Hydro estimates this to the extent of 750 families, and Norwegian Development Corporation estimates this to 60,000 populations. However, estimation by Prakritika Sampad Surakhya Parishad (PSSP), a local people's organisation, says that the plant site would directly affect 2500 people living in 24 villages and the open cast mining would affect in 42 villages.

In reality the figures of displacement are quite enormous not only in absolute terms but also in relation to the total tribal population in the region. Some figures of displacement are available for different projects. More specifically in Indian context the magnitude of displacement as calculated by Fernades for the period 1951-2000 tunes to the extent of 21.3 millions while for academicians like Mahapatra (1999) the estimate accounts this to the tune of 25 millions. Another estimate puts it that some sixty million people have been displaced in the last sixty years.

Mahapatra (1999) provides an estimate on the magnitude of displacement of human population in Odisha due to the establishment of various mega-projects during the period 1951-95. It reflects that Hydro-Electric Multi-Purpose projects have displaced around 3,25,000 people, of which only 90,000 oustees (27.69%) have been rehabilitated. Similarly, due to industrial projects out of 71,794 displaced in Orissa, only 27,300 (38.03%) oustees have been rehabilitated. While mining projects have displaced around 1,00,000 people, of which almost 60 per cent oustees have been rehabilitated; and due to the declaration of Sanctuary around 50,000 people have been displaced, of which only 15,540 (31.08%) are rehabilitated. In other words about 70 per cent of displaced people are still displaced.

Generally, projects tend to displace a disproportionately large tribal population. A UNEP (2003) report cites the examples of Karjan and Sukhi reservoirs in Gujarat that displaced only tribal people. In the Balimela Hydro Project, 98 per cent of those displaced were tribal people. In Upper Kolab Dam project the tribal people displaced constituted 96 per cent of the total affected population. Hussain (2008) has presented that the Dumbur Hydroelectric Project in a small state like Tripura displaced an estimated 8,000 tribal families and approximately 40,000 people from the dam site.

According to WCD (2000),

Overall, 40 to 50 per cent of those displaced are estimated to be tribal people, who account for barely 8 per cent of India's total population of over a billion.

A Government of India (2004) document, however, records that at least 55 per cent of those displaced are tribal people. It is to me mentioned that the government occupies tribal lands for 'public purposes,' for it is easy to do so. Ministry of Tribal Affairs gives us data of total and tribal persons affected due to Development Projects since 1999 as presented in table 1.7.

**Table 1.7: Project affected persons including ST population**



Sl. No.	State	No. of Projects cleared	Total No. affected Persons	Total No. affected ST population
1.	Andhra Pradesh	15	316242	123946
2.	Arunachal	1	Nil	Nil
3.	Jharkhand	1	70820	21000
4.	Chhattisgarh	2	455	155
5.	Himachal Pradesh	1	836	9
6.	Kerala	1	20	20
7.	Maharashtra	11	151408	20534
8.	Madhya Pradesh	4	195081	12261
9.	Orissa	11	64674	42036
10.	Rajasthan	11	34452	4258
11.	Uttrakhand	2	6716	1489
<b>Total</b>		<b>60</b>	<b>665131</b>	<b>225708</b>

**New Threats of Displacement:** In addition to conventional development projects like dams, industries, mining a new area of development intervention has emerged which is equally responsible in displacing people. Currently, the pressures to acquire land for Special Economic Zones (SEZs) are going to cause displacement on an unprecedented scale. Protected areas are also emerging as substantial people-displacing projects. In India, for protected areas alone, one estimate suggests that as many as 600,000 tribal people have been displaced. You will learn more about SEZs in section 1.5.3.

**Consequences of displacement:** Displacement puts people in a new environment, unfamiliar neighbourhood, new production relations, changing socio-political dynamics and with future uncertainty. Mega projects severely affect the life and culture of people. They do not get compensation for their customary ownership of land. They do not get employed in the new locations for lacking marketable skills. Under such situations, tribal oustees earn a meagre amount from sources like selling firewood or working as daily labourers. The projects damage the forests. With the loss of forestland, they also lose their forest-based sustainable livelihood, cultural aspects of life, and kinship ties. Women lose scope for supplementary income from forest products, and become idle and dependent. Thus, in the process of creating mega projects, the tribal people in general and women and aged in particular bear the highest risks. The displaced people turn from a producer to consumer community in the new settlement.

WCD (2000) remarks in this regard,

Due to neglect and lack of capacity to secure justice because of structural inequities, cultural dissonance, discrimination and economic and political marginalization, indigenous and tribal peoples have suffered disproportionately from the negative impacts of large dams, while often being excluded from sharing in the benefits.

We have discussed that land alienation, marginalisation, unemployment, poverty, etc, are major problems in tribal areas. Displacement is a major factor for all these maladies. M. Cernea (2000) has outlined some common risk factors culminated out of displacement. These are landlessness, homelessness, joblessness, marginalisation, food insecurity, loss of access to common property resources, social disruption and loss of various coping mechanisms adopted by the oustees. Padel and Das (2010) have enumerated some areas of life of displaced people where their living standards have shown a marked decline. These included,

- Food security, which is lost along with their land.
- Self-employment, replaced by humiliating dependency on a supply labouring jobs.
- An egalitarian social structure, replaced by a low place in an extreme hierarchy.
- Splits in the community between people for and against a project/company.
- Access to fresh stream water, replaced by pump water, often polluted and unreliable - residents in many rehabilitated colonies testify to a dire water shortage.
- Deterioration in community values, corruption, prostitution, oppression by *goondas*

Food insecurity directly results from loss of land as is evident from declining size of landholdings. The post-displacement situation in Odisha has marked a sharp decline in the average size of land holdings from 4.36 acres to 1.50 acres of irrigated and 5.32 acres to 1.97 acres of non-irrigated land in Upper Indrāvati Project in Orissa. Ota (1996) observes that landless families have increased and average working days in a year have reduced from 290 days to 119 days after displacement in Rengali multipurpose dam. Upper Kolab Hydro-power Project reveals an increase in the number of landless people from 12.2 per cent to 41.9 per cent after displacement. A study of Rengali Irrigation Project (Samala Barrage) also reports a decrease in marginal farmers from 72.2 per cent to 48 per cent. On the other hand there is an increase in landlessness from 24 per cent to 3 per cent. Behera and Rath (2004) report the misuse of compensation money and the rise in cost of land leading to landlessness or marginalisation in new settlement.

Social and cultural disruptions are outcome of displacement. People displaced directly and involuntarily lose their traditional society and social networks. Resettlement is also socially disruptive, because people are not necessarily moved together in a group as they have lived for years. Naturally it disperses and fragments communities, kinship groups, and dismantles patterns of social organisation and interpersonal ties. The tribal people suffer the trauma at

new settlement because of their close spiritual ties to their homeland and their apprehension that once they move their way of life will be lost forever. Informal networks of reciprocal help in social functions, calamities, local voluntary associations, and self-organised mutual services are disrupted. Kinsmen do not interact with DPs wholeheartedly anymore because the impoverished oustees cannot reciprocate the mutual obligations. Lack of support and consolation from kinsmen increases psychological depression. Consequently, DPs experience social alienation and meaninglessness. Disruption of social system caused by displacement is difficult to rebuild. Padel argues that with long established social networks gone, economic recovery becomes doubly difficult, and people are left to face an uncertain future in difficult circumstances. It is not a surprise that in most cases, development projects have only led to further impoverishment of tribal people. The WCD (2000) also observed in the context of displacement due to large dams,

Large dams have had serious impacts on the lives, livelihoods, cultures and spiritual existence of indigenous and tribal peoples.

The tribal people suffer more largely due to legal codes and governmental practices that often do not recognize their ownership of resources, especially individual rights to lands. The Land Acquisition Act of 1894 does not recognise customary titles of land. As we have discussed this provision facilitates government effort of land acquisition. It is almost a universal fact that tribal communities do not have the legal rights to most of their lands. It becomes easy to remove tribals from their lands as they do not have *pattas* (land deeds) to claim their ownership. Following the land acquisition, they do not get any compensation against such customary lands.

Another traumatic experience with displaced people is the harrowing experience of multiple displacements. A study shows that Gond people of Bijasen, village affected by the Bargi dam, were relocated twice. The site at which the people were first settled and where the government allocated people homestead lands, complete with legal titles, was submerged. Most of the people fled to Jabalpur and Narsinghpur in search of wage labour. There is another study that records the multiple displacements in Singrauli region due to Rihand dam and subsequent new projects. Displacement is a very, and as if displacement once in a lifetime is not enough there are cases where people had to relocate several times. One harrowing example from such multiple displacements comes from the. The first lot of people who were displaced in the 1960s were subsequently displaced due to mining activities, opening of railway lines, installation of thermal power plants and establishment of industries within a 20 km radius of the Rihand reservoir. As a result the displacement took place repeatedly, sometimes as many as five times.

The dams affect the tribal people living in the vicinity by exposing them to different types of pollution. Padel and Das (2010) maintain that flooded forest decomposes, creating methane, one of the main greenhouse gases. Water quality drops dramatically from lying stagnant instead of getting oxygenated by constant movement in complex currents. This deadness in the water kills off large populations of fish and other life-forms which lived in the river.

Siltation is frequently twice as fast as estimated and large areas get overgrown with algae and weeds. Mosquitoes breed, spreading malaria and other diseases. They inform us that the smelter in Hirakud emits huge quantities of toxic waste into the air and water. Locally one of the worst impacts is in fluoride contamination of surrounding villages, where crops, cattle and people suffer from wasting diseases. They have also drawn our attention to the regular pollution of rivers flowing nearby Anugul smelters and the impact of fluoride contamination over 500 acres of fields, making the crop unfit for consumption. They have observed severe signs of skeletal fluoridosis among the inhabitants of nearby villages, caused basically due to acid rain from the smelter that pollutes the water.

In addition to these regular effects there are also sudden hazards. Padel and Das further have reported the damage caused from huge spill of toxic chemical waste from Angul smelter power station's second ashpond.

Part of the dam wall containing the slurry cracked, and waste spread over thousand acres, causing a toxic flash flood in the Nandira and Brahmani rivers, damaging land and buildings in 10-20 villages. Several people died of gastroenteritis or from immersion in the toxic water ...

### **Case of Displacement of tribals due to Bargi dam of Madhya Pradesh**

H.M.Mathur once discussed the displacement of tribals by the Bargi dam in a seminar at Rajiv Gandhi University in February, 2009. He informed that the Bargi dam has been one of the first completed dams among the chain of 30 major dams visualised over river Narmada. The proposal of this dam construction was conceptualized by the Central Water and Power Commission in 1968 envisaging irrigation in 2.98 lakh ha and hydro-power generation capacity of 105 MW. Later, the Bargi diversion scheme was planned, increasing the total irrigation potential to 4.37 lakh ha.

The submergence area of the Bargi dam once had prosperous farmers, tilling the fertile lands of the Narmada Kacchar, producing abundant food-grains of all varieties without any sort of irrigation or chemical fertilizers. There was availability of vegetables and seasonal fruits in abundance along with healthy and sufficient livestock. There was no dearth of milk and milk products and the region was prosperous and people enjoyed good mutual co-operation in times of marriages and deaths, festivals and all other occasions. All their needs were met from the local markets nearby and thus, hardly any contact with cities.

The Bargi dam affected 162 villages and uprooted about 7000 families without the estimation of population indirectly affected. The oustees were forced to live in the slums of Jabalpur and eke out their living through pulling rickshaws or working as construction labourers or migrating to the supposedly command areas of the Bargi dam.

The solution to this problem lies in finding an alternative to mega development projects. In this regard Schumpeter's *Small is Beautiful* or Gandhi's tenets of *minimisation of wants*,

*trusteeship* is worth trying. However, given the present model of development a sound and enabling Resettlement and Rehabilitation (R &R) policy is required. The available policy has many loopholes for which resettlement and rehabilitation suffers. The Draft National Tribal Policy also recognises the shortcomings. It mentions that the present National Policy on Resettlement and Rehabilitation for Project Affected Families -2003 (NPRR) compensates only assets, not livelihoods. Consequently, the STs, having few property assets and depending largely on common property resources, get little compensation and are further impoverished as the cost compensation paid gets spent in debt repayment and subsistence in the interim between displacement and rehabilitation, leaving little or nothing for future livelihoods. So the policy suggests, inter alia, for minimum displacement, fixing a ceiling for the maximum people to be displaced in a project, impartial social impact assessment, reexamining the term 'public purposes and the provision of land for land and so on.

Though Resettlement and Rehabilitation Policy has considered the problem seriously and provides for matching compensation, the ground reality gives a picture to the contrary.

### **Resettlement and Rehabilitation**

Displacement is intrinsic in the development process we have adopted. But there are no proper records of the magnitude of displacement. With reference to various studies Sujit Kumar Mishra (2002) informs that the Working Group on Development and Welfare of Schedule Tribes during Eighth Five Year Plan (1990-95) reports that out of the 16.94 lakh person displaced by 110 projects studied, 8.14 lakh were tribal (Thukral, 1992). Till 1990 Fernandes (1994) estimates that 2,13,00,000 198 - July 2002 people were displaced by development projects in India. A vast numbers of them are tribals. Out of a total of 74,10,000 tribal people displaced, only 24.9% have been rehabilitated and a staggering 75.1% still await rehabilitation.

Displacement causes immense miseries. It violates the constitutional safeguards of right to life and right to live with dignity as provided for in Article 19(i)(e) of the Indian Constitution. The Supreme Court of India and human rights groups have been taking an increasingly humanistic view of the problems created by displacement. The National **Rehabilitation and Resettlement (R&R) Policy formulated in 2007** provides for the basic minimum requirements, and intends that all projects leading to involuntary displacement of people must address the rehabilitation and resettlement issues comprehensively. Primarily the policy aims to minimise displacement and to promote, 'as far as possible, non-displacing or least-displacing alternatives; to ensure adequate **rehabilitation** package and expeditious' implementation of the **rehabilitation** process with the active participation

Many state governments and public and private sector undertakings have their own R & R rules. Bu some of the broad principles of the policy are given below:

1. The policy states that displacement should not be forced and people should only be moved if they want to, and feel confident that on the whole they will be better off than before.
2. Forced displacement of people should only be permitted in the 'rarest of rare case'.
3. It should be ensured that no less displacing or non displacing alternatives are possible.
4. Displacement should be initiated only after it has been established that the displacing project has arranged all the sorts of social benefits for the displacees or project affected persons (PAPs).
5. Adult sons and adult unmarried daughters must also be treated as separate families, with an appropriate compensation package.
6. All compensation must be given in the joint name of both the spouses.
7. Disregard to the prior status of the PAPs they must be above the poverty line after displacement. In fact they must be invariably better off so that all the non quantifiable losses are at least partly compensated.
8. Compensation for land and other tangible assets should be calculated at the operative market rates. In addition loss of livelihoods and opportunities should also be compensated.
9. Communities must be adequately and appropriately compensated for common amenities and assets lost because of the project and for fulfilling basic needs in the new settlement. This is especially important in order to prevent conflicts with host communities, whose common resources would otherwise be under pressure from the PAPs.
10. Communities should be invariably kept together after displacement so that their social and cultural identities are safeguarded.
11. The principle of 'land for land' must be followed scrupulously, and each PAP that loses land must be given land of equal size, with a minimum of two hectares, and of at least of equal productivity. Two hectares of land should also be given to other land dependent families (like agricultural labourers) who might not legally own land.
12. The timeframe for the displacement process should be sensitively determined, and people given enough time to adjust to their new locations and life styles.
13. The policy of rehabilitation should be governed by the principle of 'total rehabilitation'. Rehabilitation would not only extend to financial compensations or providing means of livelihood but it should be multidimensional. It shall include social, economic, educational, environmental, physical, occupational and cultural aspects as well.
14. PAPs should not be forced to change their occupations and professions, there must, of course, be the flexibility to allow individual PAPs to choose from among other viable alternatives.
15. The PAPs must also have a first right to employment in the project and for that training should be organized for interested PAPs even before the project is initiated.

You must know that the rehabilitation policy has evolved over the years. Earlier policies were full of loopholes and even then their implementation was not at all satisfactory. You will find that a recent rehabilitation policy in Andhra Pradesh does not have safeguard against double or triple displacements. Well –formulated policies also are not implemented properly. Padel and Das (in Behera and Basar,2014) informs that displaced people's

standard of living has not gone up, rather it has gone down contrary to the provision of R & R policy. Studies also find that the amount spent on the rehabilitation of oustees is also quite low. A study conducted by the CSE states that only as little as 1 per cent of the total cost of the dam project in India has gone towards rehabilitating the DPs. In the SSP, the cost of the temporary accommodation for the staff colony at Kavediya in Gujarat overseeing the dam construction over Narmada was more than the amount of compensation allotted for the rehabilitation of some 100,000 persons.

Further, there is no seriousness on the part of the project management and officials. Mathur (in Behera and Basar,2014) cites an example of faulty planning. The Alamatti dam in Karnataka provides an example of how the lack of planning can add to woes of the project area people. Here, in 1996 and 1997 water caught the people before the new sites were ready to receive them, so that emergency action had to be taken, including boats and helicopters to evacuate a large number of people.

There is no place in the planning process for consultations with the affected people. The officials in charge of overseeing R & R are rarely well-trained or well-motivated to carry out the implementation. It is not a surprise that most of the people faced with displacement do not see the projects as development at all, since far from raising their standard of living, they lower it. Moreover, in most of the sites socio-cultural aspects of life in planning process were lacking. It is not a surprise to learn that a lack of socio-cultural concerns of the tribal people backfired in a resettlement colony set up in Andhra Pradesh. The Gond tribals from two regions found their customs and manners so incompatible that they could not live together at the same place. Mathur (in Behera and Basar,2014) informs that that resettlement is rarely achieved without the use of force, but where the tribal people are involved eviction is invariably carried out in the most ruthless manner imaginable. Any sign of resistance to move always invites the severest police action and worse. In Kacheipadar and Sunger, the two villages of Odisha, a CSD study team found overwhelming evidence of excessive use of coercive methods by the district authorities against the tribal population. In both the villages, hundreds of people, including young boys and girls, were arrested and taken into custody. Teargas shells were fired in Kacheipadar. In the Sunger area, the company let loose goons to harass the villagers.

This problem is not a contemporary issue. It even existed during initial period of launching projects. Sujit Kumar Mishra (2002) informs such inconsistencies even when Hirakud dam was commissioned. He informs that the seriousness of this problem can be understood from the fact that as many as 22,147 families in 249 villages in Orissa were affected. In view of this the Government of Orissa announced its rehabilitation policy as early as 1946 (Construction of the dam commenced in April 1946). The policy provided for cash compensation for land and house loss and physical rehabilitation through the provision of land and house. The government promised that the resettled villages would be provided with modern amenities like water, electricity and the re-settled evacuees would be vested with the proprietary right on the lands allotted to them. The total number of colonies established for rehabilitation has been twelve for 28 villages. The total number of households re-settled

therein was about 11% of the total households displaced and the total land reclaimed for their rehabilitation was no more than 5% of the land acquired for project from them. However, the promises made by the government were not kept in many instances.

This is also evident in the claims of the Tribal Displaced Committee of Rourkela as is informed by G.C.Rath (in Rath,2006). The Committee claimed that 5 per cent of the displaced persons did not receive the compensation, 75 per cent of them were not provided land against land. The materials for construction of houses in the rehabilitated colonies were never supplied. Moreover, the housing plots were so small that they could hardly accommodate a joint family.

What is evident is that displacement is unavoidable and resettlement and rehabilitation adequately with a humanistic concern is always a failure. This apathy is a major cause of tribal marginalisation and deprivation.

### **2.2.3 Globalisation**

Globalisation simply refers to mobilisation across the globe. It is not a new phenomenon. Before globalisation became a catch word particularly from 1980s there was ideological globalisation. You know that religious ideology (Buddhism, Christianity, etc.) and political ideology (Marxism) crossed the national boundary. So what is new about contemporary idea behind globalisation? The globalisation we talk about is very comprehensive and encompasses all aspects of life. At its core is financial mobilisation. So present globalisation is a financial globalisation; national and international policies facilitate movement of finance across the globe. Because of its all encompassing nature and finance at its core, it is defined as an economic process of global interaction and integration associated with social and cultural dynamics.

It is considered as the sharper and continuing integration of the world economy. In a technical sense it is a process of ‘trans-nationalisation of production and capital, and standardisation of consumer tastes and their legitimization with the help of international institutions like World Bank,IMF and WTO’.

A visible characteristic of globalisation is investment by a national government or a company in other country or countries. The companies investing in many countries are multinational or transnational companies (MNCs/TNCs). You must have heard the names of Coca Cola, Sony Corporation, Samsung Electronics, Vedanta, Tata Investment Corporation, Larsen & Toubro, Toyota Motor, Posco (Pohang Iron and Steel Company and many others. These are MNCs and they invest in a number of countries. A number of MNCs invest in resource based industries like mining and mining based industries. World Resources Institute in its report of 2005 informs that indigenous territories encompass up to 22 per cent of the world’s land surface and they coincide with areas that hold 80 per cent of the planet’s biodiversity. This is also the fact in India. You will find land, forests and mineral resources in tribal belts. Naturally, tribal areas attract the investors. The Government also create Special Economic



Zones (SEZ) to attract MNC investment. The MNC investment displaces and destroys the livelihood of tribals and other people. Tripathy (in Behera and Basar,2014) reminds that tribals evicted by industrial houses were pushed to starvation in Koraput district and other parts of Odisha. The unreplenishable mineral wealth has been looted, leaving behind barren land and poverty stricken people.

It is for your information that the Special Economic Zones (SEZs) Policy was announced in April 2000. The first step towards establishing SEZs is to land acquisition, upto a minimum of 1000 hectares for multi-product and 100 hectares for service sector SEZs. The immediate result of this step is displacement of thousands of people and livelihoods in the countryside where lands are acquired. Nihar Ranja Mishra (2012) informs that acquisition of land for SEZs actually transfers ownership of this land to ‘developers’. Displacees are left in the mercy of private corporate sectors. In view of this, protest movements are organised. The protests by tribals and others in Singur & Nandigram in West Bengal, Kalinganagar in Odisha and in Nellore District, Andhra Pradesh due to SEZ are some burning examples showing the ill effects of SEZ strategy.

Tripathy (2014 in Behera and Basar, 2014) informs the extent of displacement and the nature of problems. From his information you will know that the government of Andhra Pradesh has acquired 340 acres of village common land, 70 acres of temple land from the endowments department and 500 acres from the local gram panchayat — China Mambattu of the Tada Mandal in Nellore district — to set up a special economic zone (SEZ). Some private industrialists have purchased another 100 acres of agricultural land in the vicinity and 400 acres of the SEZ are being given to Apache to set up a shoe factory. Three hamlets of the panchayat, N.M. Kandrika, China Mambattu and Peda Mambattu, are being affected by the SEZ. These villages are inhabited by weavers, shepherds, barbers, washermen community and Yanadi tribals. The most vulnerable among these are the Yanadis, because they do not own land and are thus ineligible to receive any sort of compensation for the displacement caused by the SEZ. For projects like these, the question of these communities whose livelihoods do not depend on farms but on natural resources and community property resources is very crucial.

### **Check Your Progress – III**

#### **Answer the following**

1. Is displacement synonym of migration?
2. Why are development projects responsible for the displacement of tribal people?
3. Why do you think that displacement has multidimensional effects?
4. What are major causes of tribal displacement?
5. Where do urban centres grow?
6. What are the reasons of increase in urban ST population?
7. How has globalisation affected tribal society?
8. Why R & R policy has not been effective to rehabilitate displacees properly?

## 2.3 Let us sum up

As you completed this unit, you have learnt that

- Economic problems faced by the tribal society are the result of their interaction with formal economy.
- The problems are poverty, indebtedness, land alienation, unemployment, migration and displacement.
- These problems are mutually reinforcing. One problem may be the cause or effect of another. For example, poverty may be the cause of indebtedness and indebtedness also may be the cause of poverty.
- Poverty is a situation of deprivation of entitlements to minimum means necessary to meet basic needs such as food, clothing and shelter.
- Expression of poverty in monetary terms is absolute poverty.
- Poverty in India is defined in terms of income or consumption/expenditure over a period of time.
- The concept of poverty is alien to traditional tribal pursuits of livelihood.
- There is a correlation between poor states and concentration of tribes.
- Poverty is also defined in terms of calorie intake fixed 2400 calories for rural area and 2100 for urban area.
- Ownership of bank accounts and assets in India does not give a true picture of economic condition of the tribal persons.
- On the basis of the provisions of the Land Acquisition Act of 1894 tribal land is acquired for public interest.
- Land alienation in tribal areas has its origin in colonial period with the introduction of Zamindari system.
- Indebtedness has a socio-cultural dimension. It is a form of exploitation by village money lenders.
- The magnitude of loan of the tribal borrowers is less than those of other sections of the society but it is more extensive.
- PESA,1996 and FRA,2006 provide for preservation and protection of customs, traditions and for prevention of land alienation.
- Industrialisation and urbanisation cause tribal displacement and subsequent poverty.
- Unemployment is a major cause of migration. Other causes being educational and medical facilities in urban centres.
- The problem of unemployment is intrinsic market imperfection and state sponsored development model.
- Both push and pull factors are the driving forces behind rural-urban migration
- Labour migration often leads to the system of bonded labour, child labour, physical and exploitation, sexual exploitation and oppression at the migration site

- When tribal people migrate to urban centre a rural-urban continuum reflects in their life across generations and places of interaction- at home, town and factory.
- Displacement sometimes is associated with forced evacuation.
- Resettlement and rehabilitation (R & R) policy is not implemented and tribal oustees are not adequately compensated. There is a gap between policy vision and ground reality displaying miseries of the project affected tribals.
- There are lacunae at planning stage of R & R policy also.
- Present globalisation is a financial globalisation. National and international policies facilitate movement of finance across the globe.
- Role of MNCs and creation of SEZs in the process of globalisation alienate the tribals from their forests and lands and displace them.

## 2.4 Keywords

Bonded labour:	it refers to persons belonging to any particular caste or community who are forced or partly forced to work for the creditor under an agreement either without wages or for nominal wages
Capital intensive:	more machines and less labour in the production per unit
Diku:	a derogatory remark for outsiders by tribes in Jharkhand who are considered dishonest and exploiter
Forward linkage:	refers to investments subsequent to a particular initial project
Labour force:	a group consisting of persons who are working or are available for/seeking work
Labour Force Participation Rate (LFPR):	the number of persons in the Labour force per 1000 persons
Pull factor:	facilities available in an area (urban and industrial centres) like employment opportunities, higher wages, educational and medical facilities, which attract persons to the area from an area lacking in them

Push factor:	unfavourable conditions in native place like poverty unemployment, etc. which compel a person to migrate to urban/industrial centred in search of work
Rural Urban continuum:	refers to change and continuity of socio-economic life from the village to the city; at one end of the continuum is village and at the other the city, in between two ends there are formations of ceaseless interaction
Sanskritisation:	it is a process of social change process which a lower caste or tribe or any other group emulates customs, rituals, ideology and way of life of a upper, dominant or more often twice-born caste
Special economic zone (SEZ):	an area within the boundary of a country in which business and trade laws are different from the rest of the country
Unemployment rates:	number of unemployed per 1000 in the labour force

## 2.5 Probable Questions

### Short Answer Questions

- 1 What are the economic problems of Sts in India? Were these problems existed in traditional tribal economy? Explain.
- 2 What is consumption based measure of poverty in India?
- 3 How does money lending exploit tribal borrowers?
- 4 Discuss cause and effect relationship between poverty and indebtedness.
- 5 What remedial measures would you like to suggest to control tribal indebtedness?
- 6 Write a few important causes of land alienation.
- 7 Mention colonial laws and the provisions in them which caused tribal miseries.
- 8 Industrialisation and urbanisation are complementary to each other. Justify.
- 9 What do you mean by pan-tribalistic ideology? Explain.
- 10 Explain universalisation of urban culture in tribal society.
- 11 What are the causes of displacement? List them.
- 12 How does dam affect the health of tribal people living in the vicinity?
- 13 What are the consequences of displacement?
- 14 What do you mean by SEZ? What are its effects on tribal population?
- 15 Briefly discuss the impact of globalisation on tribes of India.
- 16 Discuss the causes and consequences of land alienation problem in tribal society.
- 17 Write short notes on a) poverty, b) unemployment.
- 18 Why do tribal people incur debt? Examine the consequences of indebtedness.

## Long Answer Questions

1. What is poverty? Explain its nature and extent among the tribes in India.
2. Tribes are vulnerable to indebtedness? Do you agree? Discuss its causes and effects?
3. Discuss the mechanism of tribal land alienation from colonial period.
4. Explain the unemployment situation of the STs. What are its causes and consequences?
5. What are the causes of migration of tribal persons? Discuss its consequences. Suggest measures to control it.
6. Describe the nature and magnitude of tribal displacement due to industrialisation and urbanisation with suitable examples.
7. Rehabilitation compensates the miseries of displacement. Do you agree? Give reasons to your answer.
8. Write a note on dam induced displacement.
9. Discuss the impact of development induced displacement on tribal people.
10. Write a note on development induced problems in tribal society.

## 2.6 Answers to Check Your Progress

### Answers to Check Your Progress – I

- |                   |          |          |          |         |
|-------------------|----------|----------|----------|---------|
| 2. True           | 2. True  | 3. False | 4. True  |         |
| 5. Partially true | 6. False | 7. True  | 8. False | 9. True |

### Answers to Check Your Progress – II

1. No.
2. Because development projects are commissioned in resource abundant tribal areas
3. Displacement leads to land alienation, causes environmental pollution and food insecurity, and results in the loss of traditional social networks and so on.
4. Commissioning of development projects and rules and regulations on the subjects of land acquisition, forest management and conservation of wildlife.
5. Urban centres grow in trade centres, places of pilgrimage and religious, at the junction of important trade routes and at the administrative centre or capital seat of a government.
6. Increase in ST urban population is due to natural growth of population, increase in the number of urban centres, rural-urban migration, addition of new communities in ST list and extension of urban area to neighbouring rural areas/villages.
7. Globalisation has facilitated MNC investment in resource abundant tribal areas. This resulted in the displacement of tribals, exposure of tribals to pollution and environmental degradation and socio cultural tensions.
8. Because of improper implementation, lack of seriousness, haphazard planning with no provision of consultation with affected people, often low finance allocation for rehabilitation, etc.

## 2.7 Further Reading

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## **Unit-III**

# **EMERGING SOCIAL PROBLEMS**

### **Structure**

- 3.1 Learning Objectives**
- 3.2 Introduction**
- 3.3 Issues Related to Education**
  - 3.3.4 Illiteracy**
  - 3.3.5 Alcoholism and Drug Abuse**
- 3.4 Gender Inequality**
- 3.5 Let us sum up**
- 3.6 Keywords**
- 3.7 Probable Questions**
- 3.8 Answers to Check Your Progress**
- 3.9 Further Reading**

### **3.1 Learning Objectives**

After reading this unit you will be able to

- understand problems related to health and education as emerging social problems among STs;
- explain the meaning, types and causes of malnutrition of STs;
- identify malnutrition on the basis of symptoms;
- learn methods to measure the incidence of malnutrition;
- discuss nutritional status and its nature of tribal India;
- create awareness about HIV/AIDS among tribes;
- list the causes and suggest measures to control HIV/AIDS
- learn the meaning and scope of reproductive health;
- understand the implications of reproductive health as women's rights;
- study various components of reproductive health and its status among tribal women;
- understand level of illiteracy among the STs across sex and rural-Urban divide;
- develop an insight into the problems of alcoholism and drug abuse among ST population;
- explain the nature and extent of gender inequality;
- compare the nature of gender inequality in traditional and contemporary periods; and
- suggest measures to arrest social problems in the field of health and education.

## **3.2 Introduction**

You have read economic problems of tribal communities in Unit –I of this paper. You have also read that the economic problems emerged due to integration of tribes with mainstream life, particularly the state power. The process of integration not only displays economic problems of tribes, but also emerging social problems encountered by the ST communities.

As you know tribes in India traditionally lived in autonomous units. At that phase of their life the problems they had were addressed by traditional norms, customs and practices. They had their community specific culturally perceived mechanisms to address their problems. As they are in the process of integration with the state and development forces they encounter new or new forms of traditional social problems. For example, in traditional tribal communities, people had health problems, gender inequality, etc. But as they get exposed, the dimensions of health related problems widen through contact with new problems and by looking old problems with new outlook. In this context pre- and post natal care in traditional and contemporary periods may be cited.

Over the years, the process of integration has become progressive. The level of awareness, the degree of achievement and the extent of participation in various developmental fields required for effective integration are comparatively low among the tribes. Obviously, there is a gap between the tribes and other social categories. This gap indicates the nature and extent of problems faced by the STs. In social front three burning problems related to health, education and gender inequality. These problems concern to the rights of tribal population as a whole and across gender. In this unit you will study emerging social problems relating to health, education and gender inequality.

## **3.3 Issues Related to Health and Education**

Education creates awareness about proper health care. But you know that tribal people in general are backward in terms of educational attainment, particularly higher education. Even literacy rate is comparative low among the STs. In the matter of health care they are in a transition between traditional and modern outlook. Their health status in terms of modern criteria is comparatively poor. However, there is a progressive improvement of health scenario. You will study issues related to health such as malnutrition, incidence of HIV/AIDS, alcoholism and drug abuse in addition to literacy status in this section.

### **3.3.4 Illiteracy**

Education is a crucial agent of social change and development. It is important in shaping human life and development. Human Development Report considers education as one of three main dimensions initially selected for calculating human development index. One of the important indicators of overall educational scenario is literacy. Even our Constitution also emphasises on education. Article 21A of the Constitution of India which states: “*The State*



*shall provide free and compulsory education to all children of the age of six to fourteen years in such manner as the State may, by law, determine*". However, the target is not achieved even after 70 years independence. There remains little improvement in the overall status, particularly educational status of 'Scheduled Tribes' in India. A large number of STs does not have access to successive stages of education also. A considerable portion of them are illiterate. There is also male female gap and rural urban gap in literacy level. In different states, STs also have different levels of achievement in literacy.

You will understand the extent of illiteracy among STs with reference to literacy rates presented in table 4.5. The said table is presented with reference to *Statistical Profile of Scheduled Tribes in India, Ministry of Tribal Affairs, 2013*. In fact the literacy situation of scheduled tribes is presented on the basis of data available in the said profile.

**Table 4. 5 Trend of Illiteracy among the STs and General Population in different censuses**

<b>Category / Census Year</b>	<b>1961</b>	<b>1971</b>	<b>1981</b>	<b>1991</b>	<b>2001</b>	<b>2011</b>
Total Population	28.3 (71.7)	34.45 (65.55)	43.57 (56.43)	52.21 (47.79)	64.84 (35.16)	72.99 (27.01)
Scheduled Tribes	8.53 (91.47)	11.30 (88.7)	16.35 (83.65)	29.60 (70.4)	47.10 (52.9)	58.96 (41.04)
<b>Gap</b>	-19.77 (+19.77)	-18.15 (+23.15)	-19.88 (+27.22)	-22.61 (+22.61)	-18.28 (+ 17.74)	-14.03 (+14.03)

You will see that the literacy rate has improved. It has increased from 8.53 per cent in 1961 to 58.96 percent in 2011 for STs, while the corresponding increase of the total population was from 28.30 percent in 1961 to 72.99 percent in 2011. Though ST literacy rate has improved, the gap of literacy levels between total population and STs and between ST male and ST female has not declined significantly. In fact the gap increased from 1971 to 1991, falling thereafter, to a little above the 1971 level. Literacy rate increased by 11.86 percentage points from 2001 to 2011 for STs and 8.15 percentage points during the same period for total population. Statistical profile presents that the rate has however, all along been lower both for male and female STs as compared to others. Male - female gap in literacy rate decreased from 24.41 percentage points in 2001 to 19.18 percentage points in 2011 for STs and for the total population, it declined From 21.59 percentage points in 2001 to 16.25 percentage points in 2011.

From table 4.6 it is evident that the gap of literacy and illiteracy between total population and ST population was 19.77 percentage points in 1961 census. The minus sign states the extent by which the literacy rate of ST population is less than the total population. The plus sign states the extent by which the illiteracy rate of ST population is more than that of the total population. It represents the relative illiteracy. In 1981 illiteracy among ST population was

comparatively higher by 27.22 percentage points. In next three decades following it the gap has declined. If you consider the absolute rate of illiteracy (100 - 58.96, i.e. the gap between 100 per cent achievement and actual rate of literacy) it stands at 41.04 per cent in 2011. It is quite a huge gap. But the relative gap, i.e. the difference between the illiteracy rates of ST population and total population is less, i.e.14.03. This means the illiteracy gap between them is declining significantly Literacy rate has increased by 11.86 percentage points from 2001 to 2011 for STs and 8.15 percentage points for total population during the same period.

Though the literacy rate among the tribal population is increasing since 1961 census, the increase is not evenly distributed in urban and rural areas and across the gender in urban and rural areas.

**Table 4.6: Rural–urban gap in literacy rates among ST population since 1961 census**

Category/Census Year	1961	1971	1981	1991	2001	2011
<b>Urban</b>	22.41	28.84	37.93	56.60	69.09	76.8
<b>Rural</b>	8.16	10.68	11.92	27.38	45.02	56.9
<b>Gap</b>	<b>-14.25</b>	-18.16	-26.01	<b>-29.22</b>	-24.07	-19.9

Table 4.6 presents urban rural gap of literacy rates among the scheduled tribe population of the country since 1961. The gap has increased up to 1991 from 14.25 percentage points to 29.22 percentage points. One of the reasons may be migration of rural literates to urban areas. The gap is still huge at 19.9 percentage points even in 2011 between urban and rural literates.

The situation is discouraging if we look at it from absolute illiteracy. In urban area the illiteracy rate in 2011 is estimated 23.2% and in rural area it is 43.1%. This means rural tribal area is characteristically illiterate.

**Table 4.7: Gender gap in literacy rates among ST population since 1961 census**

Category/Census Year	1961	1971	1981	1991	2001	2011
<b>Male</b>	13.83	17.63	24.52	40.65	59.17	71.7
<b>Female</b>	3.61	4.36	8.04	18.19	34.76	54.4
<b>Gap</b>	<b>10.22</b>	13.27	16.48	22.46	24.41	17.3

Gender gap was quite alarming during initial census years as can be viewed from table 4.7 This mean the rate of illiteracy was higher among the scheduled tribe female category. The gap increased till 2011 and declined by 7.11 (24.41 -17.3) percentage points. In terms of absolute illiteracy it is estimated 28.3 per cent from ST male and 45.6 per cent for ST female. This means about 50 percent of tribal women are illiterate.

Data used for discussion presents over all scenario of illiteracy through the estimate of literacy levels. The situation of individual tribes, PVTGs and tribes across states reflect wide diversity. GoI (2014) Report states that literacy rates among PVTGs are extremely low, most often much lower than even the State average for the Scheduled Tribe population (see table 4.8). This is largely due to the abysmal education infrastructure in tribal areas, poorly trained or absentee teachers, lack of teaching in tribal languages and irrelevant and alienating curriculum.

**Table 4.8 Literacy rate of total population and Scheduled Tribe Population and Gap in Literacy rate India /States/ Union Territories: 2001 (Figures in %)**

Sl. No.	India/State/UT	Literacy Rate				Gap in Literacy Rate	
		2001		2011		2001	2011
		Total	ST	Total	ST		
	<b>INDIA</b>	<b>64.8</b>	<b>47.1</b>	<b>72.99</b>	<b>58.96</b>	<b>17.7</b>	14.03
01.	Andhra Pradesh	60.5	37.0	67.0	49.2	23.4	17.8
02.	Arunachal Pradesh	54.3	49.6	65.4	64.6	4.7	0.8
03.	Assam	63.3	62.5	72.2	72.1	0.8	0.1
04.	Bihar	47.0	28.2	61.8	51.1	18.8	10.7
05.	Chhattisgarh	64.7	52.1	70.3	59.1	12.6	11.2
06.	Goa	82.0	55.9	88.7	79.1	26.1	9.6
07.	Gujarat	69.1	47.7	78.0	62.5	21.4	15.6
08.	Haryana #	67.9	NST	-	-	-	-
09.	Himachal Pradesh	76.5	65.5	82.8	73.6	11.0	9.2
10.	Jammu & Kashmir	55.5	37.5	67.2	50.6	18.0	16.6
11.	Jharkhand	53.6	40.7	66.4	57.1	12.9	9.3
12.	Karnataka	66.6	48.3	75.4	62.1	18.3	13.3
13.	Kerala	90.9	64.4	94.0	75.8	26.5	18.2
14.	Madhya Pradesh	63.7	41.2	69.3	50.6	22.5	18.8
15.	Maharashtra	76.9	55.2	82.3	65.7	21.7	16.6
16.	Manipur	70.5	65.9	79.2	77.4	4.6	1.9
17.	Meghalaya	62.6	61.3	74.4	74.5	1.3	<b>-0.1</b>
18.	Mizoram	88.8	89.3	91.3	91.5	0.5	<b>-0.2</b>
19.	Nagaland	66.6	65.9	79.6	80.0	0.7	-0.4
20.	Odisha	63.1	37.4	72.9	52.2	25.7	20.6
21.	Punjab #s	69.7	NST	-	-	-	-
22.	Rajasthan	60.4	44.7	66.1	52.8	15.7	13.3
23.	Sikkim	68.8	67.1	81.4	79.7	1.7	1.7
24.	Tamil Nadu	73.5	41.5	80.1	54.3	32.0	25.8
25.	Tripura	73.2	56.5	87.2	79.1	16.7	8.1
26.	Uttarakhand	71.6	63.2	78.8	73.9	8.4	4.9
27.	Uttar Pradesh	56.3	35.1	67.7	55.7	21.2	12.0

28.	West Bengal	68.6	43.4	76.3	57.9	25.2	18.3
29.	Andaman & Nicobar	81.3	66.8	86.6	75.6	14.5	11.0
30.	Chandigarh	81.9	NST	-	-	-	-
31.	Dadra & Nagar Haveli	57.6	41.2	76.2	61.9	16.4	14.4
32.	Daman & Diu	78.2	63.4	87.1	78.8	14.8	8.3
33.	Delhi	81.7	NST	-	-	-	-
34.	Lakshadweep	86.7	86.1	91.8	91.7	0.6	0.1
35.	Pondicherry	81.2	NST	-	-	-	-

The overall literacy gap amongst the various groups and STs has come down from 19.77% in 1961 to 14.03% in 2011. A scrutiny of state-wise literacy data with reference table 4.8 reveals that in most of the north eastern states like Arunachal Pradesh Manipur, Meghalaya, Mizoram and Nagaland, STs are at par with the general population. In Lakshadweep also ST literacy is at par with the total population. But in Madhya Pradesh, Maharashtra, Odisha, Tamil Nadu and West Bengal, the literacy gap is about as high as 18 to 26%. North-eastern states are tribal states. In Madhya Pradesh, Odisha, West Bengal, etc. tribal population constitutes a part of general population. High literacy gap, i.e. higher level of illiteracy among ST population points to policy tilt towards non-ST population.

In general, the low socio-economic development is the main reason for low literacy rate among the Scheduled Tribes. On the other hand, low level of socio-economic development results from their habitation in various ecological and geo-climatic conditions ranging from plains and forest to hills and inaccessible areas. The government has many plans/schemes to raise the level of education among the STs. The Ministry of Tribal Affairs is implementing the education-oriented schemes which include Post-Matric Scholarship for ST students, Hostels for ST girls and boys, Establishment of Ashram Schools in Tribal Sub-Plan Areas, Upgradation of Merit through coaching and remedial classes, Rajiv Gandhi National Fellowship for ST students, Top Class Education for ST students and National Overseas Scholarship for ST students to improve the literacy level of students belonging to the Scheduled Tribe communities, besides usual reservation for ST students. These are supplementary to the efforts made by other Ministries. Nevertheless, the achievement is still low. Behera and Basar (2009) in their study of educational growth in Arunachal Pradesh find that the disparity in literacy levels among the tribes of the state is inherent in the process of implementation of policy. It is therefore necessary to evolve a suitable implementation strategy so that in states like Madhya Pradesh, Kerala, etc. ST population catches up the literacy level of non-tribal population.

### **3.3.5 Alcoholism and Drug Abuse**

The problem of alcoholism and drug addiction is an added dimension to health problem in tribal areas, and especially among the youths. It is not only a sign of social irresponsibility but also an illegal act. Many scholars consider it a complicated, chronic and immensely costly disease. An alcoholic is different from a drinker. Any person who takes alcohol is a

'drinker', while a 'compulsive drinker' who cannot live without taking alcohol is called an 'alcoholic'. Broadly speaking, alcoholism has been characterized by four factors: (1) excessive intake of alcoholic beverages, (2) individual's increasing worry over his/her drinking, (3) loss of the drinker's control over his/her drinking, and (4) the disturbance in functioning in his/her social world.

In tribal communities drinking is a part of dietary intake and a practice in social and religious occasions. Such drinks are brewed from fermentation of the rice, millets and other grains. But now, most of them have become addicted to distilled, spirituous and highly intoxicating liquors and drinks. It is highly intoxicant and carries little food value.

There is social irresponsibility when distilled liquors are not discouraged on occasions beyond the tradition. School picnic, for example is not a traditional event, but the drinking of foreign liquor or locally distilled liquor during picnics in many schools of tribal region is not discouraged and considered to be a part of the culture. Due to development interventions, the tribals have lost their traditional livelihood base and instead work as labourers. The rural and tribal development programmes provide them money income. They are also entitled to many other schemes like subsidised or free ration, etc. But their traditional outlook has not changed. With money income or from government schemes they get easy access to the provision of rations and clothing. Occasionally, they go to depleted forests for hunting and collecting which supplement their food requirement. The point which is important to make is that due to money income at their hands they get ample leisure time. In the absence of other activities they spend time in drinking which is available in the in shops in the vicinity. The vendors take advantage of the tribal people's traditional drinking habit and drinking takes place outside the cultural boundary. Giving drinks to the tribals has also become a mechanism to lay hand on their resources. As the tribal gets addicted, for he has leisure time, money at hand or future promises for the payment, the liquor vendor's articulation, he neglects family. He suffers from several drinking related diseases and for their cure he sells his assets. During field study we have come across many instances of drinking related deaths at different ages. There are also instances when some tribal people ask for money from researchers in the field for drinks. The youth threat outsiders and often forcibly collect money which they spend on liquor. The problems of alcoholism manifests in personal misery, family budget, family discord, loss of wages, failure of health, accidents, cost of hospital treatment, etc. Even family violence, family unrest and divorce in tribal areas are caused by alcoholism. Wife beating is a common phenomenon in an alcoholic family. Drinking to alcoholism is an instance of misuse of cultural liberty.

NFHS-4 confirms higher percentage of ST people used to drink. The reasons may be as describe above. Drinking alcohol is more common among women of the age group 15-49 from scheduled tribes (6.57%) than from SC (0.9%), OBC (0.7%) and other (0.5%). Out of them 17.9% consume alcohol every day. The percentage is 19.7 % for SC, 20.9 % for OBC and 8.2% for other category of men. This shows the extent of addiction among different social groups. When it comes to men 41.3 % of ST men drink alcohol as compared with 36.3 % of SC, 28.5 % of OBC and 21.1 % of other social category. In terms of consumption of

alcohol everyday it is more common among ST men (15.9%) followed by 13% SC men, 10.6 % OBC men and 9.2 % other category men. Among the STs the percentage of consumption is recorded more for men than that of women.

The percentage of women of age group 15-49 who drink alcohol is by far the highest among women in Arunachal Pradesh (26%) and Sikkim (23%) as compared with the percentage of women in India (only 1%) who drink alcohol. Alcohol use among men is highest in Arunachal Pradesh (59%) and Tripura (58%) and is the lowest in Lakshadweep (5%). The percentage is 29 % for men in India who drink alcohol.

Since independence, hundreds of tragedies have taken place throughout the country, as reported in various News Papers, in which thousands of people including tribals have died on consuming spurious liquor. The victims of spurious are invariably are poor people. About 132 lives were lost and 200 persons suffered physically in Baroda in hooch tragedy in 1989; 200 persons living in four slums in north-west Delhi died on taking illicit liquor on November 6, 1991; about 100 persons died in south Mumbai in a similar hooch tragedy on January 1, 1992; about 60 persons died in Tamil Nadu in March 1992; about 200 persons died in Cuttack city in Odisha on May 7, 1992; about 52 people died and more than 400 were taken ill after consuming spurious liquor in Hazaribagh and in two districts of south Bihar on November 19, 1994, and more than 33 people died in a hooch tragedy in Pudukkottai in Tamil Nadu in October 1996.

Drug abuse is another health menace in tribal areas. The terrorist outfits often are found dealing in drugs in tribal belts for local, national and international supply. Addiction to a drug means that the body becomes so dependent to the toxic effects of the drug that one just cannot do without it.

The characteristics of drug addiction are. (1) an overpowering desire or need (compulsion) to continue taking the drug and to obtain it by any means; (2) a tendency to increase the dose., (3) a psychological and generally a physical dependence on the effects of the drugs; and (4) an effect detrimental to the individual and to the society.

'Drug abuse' is the use of illicit drug or misuse of legitimate drug resulting into physical or psychological harm. It includes smoking *ganja* or hashish, taking opium, taking heroin or cocaine or LSD, injecting morphine, drinking alcohol, and so forth.

Drug addiction is another serious health problem with several tribes. It is said that opium addiction reduces fertility, increases the death rate and contributes to the vicious circle of poverty. Singpho tribe of Arunachal Pradesh is a case in point. From 40,000 about 150 years ago, the Singphos have been reduced to around 1,000. Most of the people are opium addict. In recent years the Khamptis and Mishmis, especially the youth have fallen victim to opium addiction. The school children forcibly snatch dendrite from shops and inhale. They paste it in handkerchiefs and inhale time and again. As a result there are drop outs from the schools of Khampti areas.

We often come across various slogans to avoid drugs. "Say 'no' to drugs and 'yes' to life"; "drug abuse is life abuse"; "born free, live free". These are the messages which are now being relayed by the Ministry of Welfare, Narcotics Control Bureau, and every man or woman of importance to the deluded youth of India. But unfortunately the menace has not reduced. It has become a fashion of tribal children of many rich parents in Northeast India. Obviously the death rate among the children drug addicts is high.

The Ministry of Welfare, Government of India has evolved a four-point action plan on drug abuse: (i) community-based action for identification, motivation, counselling, treatment and after-care, (ii) generation of awareness about the consequences of drug abuse, (iii) training for service providers, and (iv) association of non-governmental organizations in the implementation of the programme and providing funds to them for, the establishment of counselling and de-addiction facilities. The National Institute of Social Defence at one time was engaged in training functionaries of governmental and non-governmental agencies engaged in drug abuse prevention. In the last one decade, hundreds of de-addiction centres have come up all over the country. Private nursing homes and government hospitals have opened new wings to treat addicts.

However, the drug de-addiction programme in our country has not made any significant headway. Official records of the progress of the programme in-between 1990 and 1995 show that 65 per cent to 75 per cent of the registered drug addicts could not be cured, though by March 1995, the country had a total of 291 counselling/de-addiction/aftercare centres for the rehabilitation of drug addicts.

Keeping in view different approaches to combat drug menace and their ineffectiveness the Draft National Tribal Policy, 2006 suggests the following:

- Creation of awareness about and elimination of evil and anti-social practices such as addiction to alcohol and drugs, witchcraft, etc.;
- Taking up research, collection, collation and compilation of relevant statistics, health indicators such as nutritional status, life expectancy, IMR, MMR, disease-specific mortality rates, alcoholism, drug-addiction, disability rates, suicide rates,
- Amendment of the State excise laws, rules and regulations to abolish liquor vending in Scheduled Areas and tribal areas, and
- Encouraging women's organizations to play a big role in weaning STs away from alcoholism and drug abuse.

### **3.4 Gender Inequality**

You might know that biological difference between male and female led to difference in their roles in the society. Biological difference, however, is not gender difference or inequality. On the other hand, gender inequality refers to socially and culturally constructed differences due

to biological differences. Biological differences between male and female reflect in all aspects of life, such as social, economic, political, religion and so on, and are socially and culturally institutionalised. As a result, differences in socio-culturally constructed role behaviour reflect in unequal status between male and female. In such an unequal frame woman is subordinated and a dependent of man. She enjoys less, restricted or no rights in some matters.

You might know that a tribal woman has no inheritance and ownership rights to landed property, especially in patriarchy. Even in matriarchy like that of the Garos, all the daughters do not have inheritance rights to ancestral property. Though a suitable daughter inherits such property, it is managed by maternal uncle.

In traditional village councils or in any other form of tribal body politics you will not find female members. They do not have a voice in the arbitration of justice. They do not participate in decision making of village or tribe administration. In religious matters many rituals are tabooed for women, and they are prohibited to take part in many religious activities. Rosemary Dzuwichu (2012), in the context of the Northeast writes,

In the tribal communities of the region, discrimination, and marginalization of women has been based on customary practices and a patriarchal mindset, leading to serious gender bias and inequality in the region.

The traditional practice of gender inequality has been shifted to modern life-ways to a greater extent. Dzuwichu (2012) informs us how the inequality of women in patriarchy in Naga tradition has been reinforced in state sponsored development programmes. A similar trend is reported by Sitlhou (2015) about Kuki women in the process of development within the frame of new power structure.

In addition to the above practices of gender inequality, you will find prevalence of inequality in development spheres. Despite the provisions of equal opportunity and preferential treatment to women according to special safeguards in Constitutional provisions there are gender gaps in many aspects of life. Women lag behind men in such fields as in education, occupation, active political participation and so on. Prevalence of gender gap is a mark of gender inequality.

### **Gender gap and inequality in Education**

There is a marked gender gap with respect to education in tribal society. This is reflected in the drop-out rates, enrolment in higher education and disparity in literacy levels. According to the Statistics of School Education 2010-11, MoHRD, the dropout rates of ST boys in classes from I-V is 37.2 per cent as compared to 33.9 per cent girls. When classes from I-VIII are taken the dropout rate of ST girls is 55.4 per cent and that of boys is 54.7 per cent. Again the percentage of dropouts of girls increases when classes from I – X is considered. The



dropout rate of ST girls is 71.3 again 70.6 per cent for boys. It shows that after classes from I-V, dropout rate of tribal girls increases. This is also evident in enrolment of ST boys and girls.

The comparison of number of Scheduled Tribe girls per 100 ST boys reveal that there are 94 girls in Classes I-V, 91 girls in Classes VI-VIII, 81 girls in Classes IX-X and 72 girls per 100 boys in Classes IX-XII.

**Table 4.9: Gender gap in ST Literacy in India since 1961**

Category/Census Year	1961	1971	1981	1991	2001	2011
ST literacy	8.53	11.3	16.35	29.6	47.1	58.96
Male	13.83	17.63	24.52	40.65	59.17	71.7
Female	3.16	4.85	8.04	18.19	34.76	54.4
Gender Gap	<b>-10.67</b>	-12.78	-16.48	-22.46	<b>24.41</b>	17.3

Gender inequality is clearly evident in literacy rates. Table 4.9 (also table 4.7) shows gender gap in ST literacy rates in six Censuses over a period of five decades. Census, 2011, as can be seen from table 4.9 records 58.96 per cent of ST literacy rate in the country. Out of it, male literates stand at 71.7 per cent as against 54.4 per cent of female literates in the category. The gender gap in literacy rates among ST population in the country is 17.3 percentage points. However, this inequality is not the situation of the recent census. In 1961 Census, total literacy rate of the STs was 8.53 per cent and out of it male literacy was at 13.83 per cent and female at 3.16 per cent with a gap of 10.67 percentage points. In view of total literacy rate, female literacy rate is less by 5.37 percentage points as compared to 4.56 in 2011 census. Obviously, there is an improvement over 5 decades, but the incidence of gender inequality in terms of literacy rates among the ST population is spectacular.

The inequality does not appear at the level of total literacy rates; it also appears at the level of rural-urban divide. In 2011 Census, as can be seen from table 4.10 literacy rate among rural ST male is recorded 66.8 per cent as against 46.9 per cent for rural ST female, thus marking a gender gap of 19.9 percentage points.

**Table 4.10 Gender gap in ST Literacy in Rural India since 1961**

Category/Census Year	1961	1971	1981	1991	2001	2011
Male	13.37	16.92	22.94	38.45	57.39	66.8
Female	2.9	4.36	6.81	16.02	32.44	46.9
Gap	<b>-10.47</b>	-12.56	-16.13	-22.43	<b>-24.95</b>	19.9

On the other hand, as can be seen from table 4.11, 83.2 per cent of urban ST male population is recorded literates as against 70.3 per cent of urban ST female literates. The gender gap in urban area is 12.9 percentage points, less than rural situation. The incidence of gender inequality in literacy among the STs is considerably higher in rural areas than in urban areas.

**Table No. 4.11 Gender gap in ST Literacy in Urban India since 1961**

Category/Census Year	1961	1971	1981	1991	2001	2011
Male	30.43	37.09	47.60	66.56	77.77	83.2
Female	13.45	19.64	27.32	45.66	59.87	70.3
Gap	-16.98	-17.45	<b>-20.28</b>	-20.9	-17.9	<b>-12.9</b>

### *Empowerment and Inequality*

Gender inequality prevails in the field of decision making power and in accessing health related information. Statistical profile 2013 presents that among STs, only 8 per cent of women have a comprehensive knowledge of HIV/ AIDS as against 20 per cent of men. To assess women's decision making power four types of decisions were considered. These were the respondent's own health care, making major household purchases, making household purchases for daily needs, and visiting her family or relatives. It is recorded that 59.9 per cent of currently married women of age group 15-49 takes their decision on own health care, 54.8 per cent in making major household purchases, 62.4 per cent in making household purchases for daily needs and 62.9 per cent of women take their decision on the matter of visiting family and relatives. As regards women's participation in decision making, it is seen that while 37.5 per cent currently married women of age 15-49 participate in all four decisions, 20.0 percent participate in none of the four decisions.

It is further recorded, on the basis of women's reports that only 17.1 per cent of women (earning wives) and 59.0 per cent of both husband and wife decide how a woman's income shall be used. Nineteen point four per cent women do not have any decision on their own, as the record shows that this per cent of husbands decide how the income of a wife shall be used.

When the reports of men are taken the figure stands at 14.8 per cent, 69.8 per cent and 14.9 percent respectively. The difference in reporting shows the attitude of men towards women's decision making freedom. The difference is clear when men's attitude toward wives' participation in decision making is concerned. It shows that 47.9 per cent of currently married ST men of age group 15-49 think that their wives should have an equal or greater say than their husband on all decisions. While 88.1 per cent of ST men think that their wives should have an equal or greater say than their husband on how many children to have. Only 4.4 per cent think that their wives need not be a part of any of the decisions.

### ***Gender inequality in health status***

Gender gap that prevails in nutritional and health status is a clear sign of gender inequality. GoI report 2014, provides the following picture of nutritional status. It states,

- i) 53 percent boys and 50 percent girls in preschool age were underweight, and 57 percent boys and 52 percent girls were stunted in height.
- ii) 49 percent of Scheduled Tribe women had a body mass index less than 18.5 indicating chronic energy deficiency.
- iii) 40.2 percent of Scheduled Tribe men had a body mass index of less than 18.5 including chronic energy deficiency.

The above data shows nutritional deficiency and chronic energy deficiency among the ST women indicating nutritional problem being more serious for this category. In addition 68.5 per cent of women and 39.6 per cent of men whose haemoglobin level was tested were found to be anaemic.

### ***Gender gap in occupation***

Gender inequality is noticed in participation of various occupations. Census, 2011 records that 43.5 per cent of ST males were main workers as compared to 23.9 per cent of ST females. Among the marginal workers, 9.7% were ST males whereas 20.9 % were ST females. In overall work participation rates 53.2% were male and 44.8% were female workers. This means that many works in the domain of women are not considered as occupation.

### ***Violence and Gender Inequality***

Violence on women marks subordinate status of women in patriarchy. Because of this they are exploited in different forms. Women become the victim of violence because they do not have equal power in patriarchy structure. Statistical profile, 2013 observes that violence is higher among women belonging to STs.

It is recorded that one ST woman out of ten ST women in the age group of 15-49 years have sometimes or the other experienced sexual violence. Further, it is recorded that among ever married ST women 47 per cent of ever married women in the age group of 15-49 years have experienced emotional, physical or sexual violence which is higher than that of any of the other social groups. Such types of violence indicate lower status of women.

### Check Your Progress –V

Select the correct answer from among the alternative choices

1. The illiteracy rate among STs in 1961 census was
  - i. 8.53%
  - ii. 91.47%
2. In 2011 census ST urban literacy is
  - i. 76.8%
  - ii. 56.9%
3. Urban rural gap of literacy rates among the scheduled tribe population in 2011 census is
  - i. 19.9 per cent
  - ii. 19.9 percentage points
4. The gender gap in ST literacy has increased from 10.22 percentage points to 24.41 percentage points in
  - i. 2001 census
  - ii. 2011 census
5. NFHS-4 confirms that drinking percentage of alcohol among ST women of the age group 15-49 is
  - i. 6.57%
  - ii. 0.9%
6. Gender inequality in traditional tribal society reflects in
  - i. inheritance of ancestral property
  - ii. formal education

### 3.4 Let us sum up

After reading this unit, you have learnt that

- social problems of STs relating to health and education are exclusionary in nature;
- health problems reflect in the state of malnutrition, reproductive health, alcoholism and drug abuse and in the incidence of HIV/AIDS;
- illiteracy and gender inequality are burning social problems among the STs;
- malnutrition in the form of undernutrition is widely prevalent in ST communities;
- malnutrition leads to nutritional deficiencies and causes nutritional deficiency diseases like anaemia and reflects in nutritional disorders like kwashiorkor and marasmus;
- children are very vulnerable to protein-energy malnutrition;
- malnutrition can be acute, chronic and both acute and chronic;
- nutrition deficiency causes underweight, wasting and stunting;
- nutritional indicators and health status are commonly assessed by using Anthropometry measures in which BMI (body mass index) is a popular measure;
- dietary methods are also used to assess nutritional status and in such methods calorie units are estimated;
- problems of malnutrition emerge in tribal societies consequent upon their integration with mainstream development and the problems are declining over the years as more tribal people enter into higher income baskets;

- poverty, unemployment, migration along with socio-cultural practices cause malnutrition;
- STs have a higher incidence (0.46% as against 0.24 % of country average) of HIV/AIDS and its prevalence is high in the North-eastern states like Mizoram, Manipur, Nagaland, etc.
- causes of HIV/AIDS are unprotected multi-partner sex, transfusion of blood from an infected person, sharing of intravenous needles and syringe by drug addicts, and so on;
- reproductive and sexual health is concerned with human rights in general and women's rights in particular;
- traditional practices relating to reproductive health have undergone changes;
- tribal women have comparatively low reproductive health status in many areas;
- tribal illiteracy rate is higher than other social groups and these rates are higher in some states than in others;
- gender gap in literacy rate is high and this gap is narrowing down ;
- alcoholism and drug abuse is a serious health problem particularly among tribal youths;
- gender inequality existed in traditional tribal society and it exists in present period also. This inequality reflects in literacy, decision making, occupation, health care, etc.;
- violence against women has its root in gender inequality and associated social structure in which women have subordinated position;
- social problems in tribal communities are complex and multi-dimensional.

### 3.5 Keywords

Anthropometry:	scientific study of measurements of sizes and proportions of human body especially on a comparative basis
Bitot's spot:	whitish patchy triangular/oval/irregular lesions on the side of the eye
BMI (Body Mass Index):	measurement of a person's weight (in kg) in relation to his/her height (in meters squared)
Byagne:	house constructed outside the settlement area for the isolation of menstruating women from the dwelling house. The woman stays there as long as she bleeds
CD4:	white blood cells in the body that play an important role in the immune system. CD4 cells are also called T-cells (T-Lymphocyte (white blood cell)) or helper cells
Child mortality:	death between the first and fifth birthdays
Early neonatal deaths:	deaths in the age group of 0-6 days among live-born children
Fertility rate:	number of live births in women over a specific period of time
Goitre:	swelling on the front of the neck
Index (as used in anthropometry):	a combination of two measurements or one measurement plus the person's age such as weight-for-age, weight-for-height or height-for-age
Infant mortality:	death between birth and the first birthday

Literacy rate (LR):	percentage of literates among the population aged seven years and above
Neonatal mortality:	death within the first month of life
Obesity:	obesity is an overnourished condition—a condition of overweight, involving body fat and increased risk of health problems
Oedema:	a condition characterised by an accumulation of fluid in body tissues and cavities
Overnutrition:	excessive food intake over a period of time
Perinatal death:	deaths comprising stillbirths and early neonatal deaths
Perinatal mortality rate:	the number of perinatal deaths per 1,000 pregnancies of seven or more months' duration.
Postneonatal mortality:	death between the first months of life and the first birthday (often computed as the difference between infant and neonatal mortality)
Stillbirths:	foetal deaths in pregnancies lasting seven or more months
Stunting:	low height for age of the child compared to the standard child of the same age
Total fertility rate (TFR):	average number of children a woman would have by the end of her childbearing years (15-49)
Under-five mortality:	death between birth and the fifth birthday
Undernutrition:	insufficient food intake over an extended period of time
Wasting:	low weight for the height of the child compared to the standard child of the same height.

### 3.6 Probable Questions

#### Short Answer Questions

1. What are emerging social problems in contemporary tribal societies?
2. What do you mean by malnutrition? What does it mean in the context of tribes?
3. Mention the types and corresponding symptoms of malnutrition.
4. What is Kwashiorkor? How can it be corrected?
5. Why does Kwashiorkor occur? What are the symptoms?
6. Write a short note of marasmus.
7. What do you mean by Anthropometry measure? Define its indices.
8. What are various indices of malnutrition? What are their implications?
9. Write a short note on dietary methods of measuring the condition of malnutrition.
10. Distinguish between clinical and biochemical methods of assessing the status of malnutrition.
11. Mention the nutritional status of Arunachal Pradesh in brief.
12. What is anaemia? Why does it occur? Explain with suitable examples.
13. Write notes on underweight, stunting and wasting.
14. Discuss the steps initiated to fight malnutrition.

15. What is HIV? What are its stages? Discuss.
16. Discuss the causes of spread of HIV/AIDS.
17. Write a note on the symptoms of HIV/AIDS.
18. What do you think of the prevalence of HIV/AIDS among the tribes?
19. Do you think creating awareness will be an effective step to prevent occurrence HIV/AIDS? Discuss the level of awareness among people in brief.
20. Mention various disorders of reproduction.
21. What is reproductive health? Is it gender neutral? Justify your answer.
22. Write in brief various elements of reproductive health.
23. Discuss the status of reproductive health with reference to types of mortality in tribal India.
24. What do you mean by maternal health? Discuss its status with reference to tribal women.
25. Write a note on the trend of literacy among STs from 1961 census.
26. What do you mean by alcoholism? What are its problems?
27. Do you think drug addiction is a serious health problem? Why?
28. Suggest measures to fight against alcoholism and drug abuse.
29. Gender inequality is a phenomenon of contemporary society. Do you agree? Justify your answer with suitable examples.
30. The system of patriarchy is based on the structure of gender inequality. Justify the statement with reference to traditional tribal societies.
31. Write a note on violence against women and gender inequality.
32. Briefly describe gender gap in literacy among the STs.

### **Long Answer Questions**

1. Define malnutrition. Discuss malnutrition disorders with suitable examples.
2. What are the indicators of malnutrition? Critically discuss various methods of measuring malnutrition. Which method do you think is easy to adopt and why?
3. What is Anthropometry? How does it assess conditions of malnutrition? Examine critically.
4. Do you agree that the conditions of undernutrition in tribal communities result from their transition from tradition to modernity? Explain your answer with suitable examples.
5. Critically examine the incidence of malnutrition among the STs.
6. Why does malnutrition occur in tribal communities? Explain in details with reference to the Report of Government of India, 2014
7. Critically examine the emerging problem of HIV/AIDS in India with special reference to the North-eastern states.
8. Critically examine the importance of women's reproductive health from feminist rights perspective.
9. Examine various elements of reproductive health in the context of the tribes.
10. Make a critical assessment of illiteracy in tribal India.

11. Do you think alcoholism and drug abuse are serious health problems? Give reasons to your answer. Discuss the incidence of alcoholism and drug abuse in tribal India.
12. Critically examine the incidence of gender inequality among STs with reference to education, health, occupation and empowerment.

### 3.7 Answers to Check Your Progress

#### Check Your Progress –I

1. True
2. False
3. False
4. False
5. True
6. False

#### Check Your Progress –II

1. weight and height
2. acute
3. *protein*-energy malnutrition
4. protein deficiency
5. wasting
6. traditional eco-system
7. Dietary
8. overnutrition
9. undernutrition
10. food security

#### Check Your Progress –III

1. ST category
2. Communicable disease
3. **HIV virus spreads through contact with the infected fluids like blood.**
4. Unsafe sex in the age group of 15-39
5. IEC (information, education and communication) campaigns are organised to create HIV/AIDS awareness among the people.

#### Check Your Progress –IV

1. incorrect
2. correct
3. correct
4. correct
5. incorrect
6. correct
7. correct
8. incorrect
9. incorrect



10. correct

### Check Your Progress –V

1. ii. 91.47%
2. i. 76.8%
3. ii. 19.9 percentage points
4. i. 2001 census
5. i. 6.57%
6. i. inheritance of ancestral property

### 3.8 Further Reading

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**UNIT-IV**  
**EMERGING SOCIAL PROBLEMS WITH SPECIAL REFERENCE TO HEALTH**

**Structure**

- 4.1 Learning Objectives**
- 4.2 Introduction**
- 4.3 Issues Related to Health**
  - 4.3.1 Malnutrition**
  - 4.3.2 HIV/AIDS**
  - 4.3.3 Reproductive Health**
- 4.4 Let us sum up**
- 4.5 Keywords**
- 4.6 Probable Questions**
- 4.7 Answers to Check Your Progress**
- 4.8 Further Reading**

**4.1 Learning Objectives**

After reading this unit you will be able to

- understand problems related to health and education as emerging social problems among STs;
- explain the meaning, types and causes of malnutrition of STs;
- identify malnutrition on the basis of symptoms;
- learn methods to measure the incidence of malnutrition;
- discuss nutritional status and its nature of tribal India;
- create awareness about HIV/AIDS among tribes;
- list the causes and suggest measures to control HIV/AIDS
- learn the meaning and scope of reproductive health;
- understand the implications of reproductive health as women's rights;
- study various components of reproductive health and its status among tribal women;
- understand level of illiteracy among the STs across sex and rural-Urban divide;
- develop an insight into the problems of alcoholism and drug abuse among ST population;
- explain the nature and extent of gender inequality;
- compare the nature of gender inequality in traditional and contemporary periods; and
- suggest measures to arrest social problems in the field of health and education.

## **4.2 Introduction**

You have read economic problems of tribal communities in Unit –I of this paper. You have also read that the economic problems emerged due to integration of tribes with mainstream life, particularly the state power. The process of integration not only displays economic problems of tribes, but also emerging social problems encountered by the ST communities.

As you know tribes in India traditionally lived in autonomous units. At that phase of their life the problems they had were addressed by traditional norms, customs and practices. They had their community specific culturally perceived mechanisms to address their problems. As they are in the process of integration with the state and development forces they encounter new or new forms of traditional social problems. For example, in traditional tribal communities, people had health problems, gender inequality, etc. But as they get exposed, the dimensions of health related problems widen through contact with new problems and by looking old problems with new outlook. In this context pre- and post natal care in traditional and contemporary periods may be cited.

Over the years, the process of integration has become progressive. The level of awareness, the degree of achievement and the extent of participation in various developmental fields required for effective integration are comparatively low among the tribes. Obviously, there is a gap between the tribes and other social categories. This gap indicates the nature and extent of problems faced by the STs. In social front three burning problems related to health, education and gender inequality. These problems concern to the rights of tribal population as a whole and across gender. In this unit you will study emerging social problems relating to health, education and gender inequality.

## **4.3 Issues Related to Health and Education**

Education creates awareness about proper health care. But you know that tribal people in general are backward in terms of educational attainment, particularly higher education. Even literacy rate is comparative low among the STs. In the matter of health care they are in a transition between traditional and modern outlook. Their health status in terms of modern criteria is comparatively poor. However, there is a progressive improvement of health scenario. You will study issues related to health such as malnutrition, incidence of HIV/AIDS, alcoholism and drug abuse in addition to literacy status in this section.

### **4.3.1 Malnutrition**

Malnutrition is a situation that manifests under two conditions, namely undernutrition and over nutrition. It happens when the intake of nutrients is too low (the case of undernutrition) or too high (the case of overnutrition).

But generally malnutrition is understood as the condition of under nutrition. In this sense, malnutrition is defined, according to Cambridge English Dictionary, as a condition of physical weakness and bad health caused by having too little food, or too little of the types of food necessary for good health. The definition informs us what malnutrition is and what its effect is. However, in simply words and in the sense of undernutrition, malnutrition results from a poor diet or a lack of food. It is lack of proper nutrition, caused by not having enough to eat, and not eating types of food for fulfilling nutritional deficiency and maintaining nutritional balance.

### ***Problems of Malnutrition***

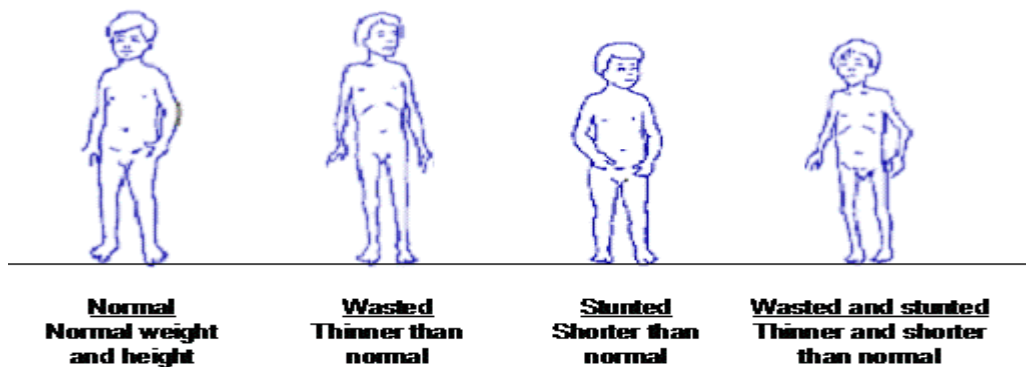
Malnutrition in the form of undernutrition has several health implications for the children. A UNICEF report (2009) states that undernutrition in children can manifest itself in several ways. Undernutrition is most commonly assessed through the measurement of weight and height. A child can be too short for his or her age (stunted), have low weight for his or her height (wasted), or have low weight for his or her age (underweight). A child who is underweight can also be stunted or wasted or both. Each of these indicators captures a certain aspect of the problem. Weight is known to be a sensitive indicator of acute deficiencies, whereas height captures more chronic exposure to deficiencies and infections. Wasting is used as a way to identify severe acute malnutrition.

Types of health implication due to malnutrition (undernutrition) are (i) deficiencies in any or all nutrients and (ii) deficiency of specific micronutrients. The first type is called Protein-energy malnutrition and the second type as micronutrient deficiency. Therefore due to the causes of their occurrence malnutrition is of two types as stated above: *protein-energy malnutrition* and *micronutrient deficiency*. Children are very vulnerable to *protein-energy malnutrition*. Such malnutrition takes three forms as is discussed with reference to UNICEF report. These are (i) acute malnutrition, (ii) chronic malnutrition and (iii) acute and chronic malnutrition. Symptoms and causes of these three types of protein energy malnutrition are presented in table 4.1.

**Table No 4.1: Symptoms and causes of nutritional deficiency diseases**

Type	Symptom	Cause
Acute malnutrition	Wasting or thinness	Acute deficiency in nutrition leading to rapid weight loss or failure to gain normal weight
Chronic malnutrition	Stunting or shortness	Nutrition deficiency over long period of time leading to failure of linear growth
Acute and chronic malnutrition	Underweight (result of wasting, stunting, or both)	A combination of both leading to underweight

**Body structure of children with protein energy malnutrition**



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**Kwashiorkor:** Acute protein-energy malnutrition causes kwashiorkor among children. It is a nutritional disorder caused by a lack of protein in the diet. As you know every cell in your body contains protein. Protein is required for body to repair cells and make new cells. It is also important for growth during childhood and pregnancy. Lack in protein prevents normal body functioning and often causing kwashiorkor.



**Suffering from Kwashiorkor**

(Downloaded from [http://conflict.lshtm.ac.uk/page\\_115.htm](http://conflict.lshtm.ac.uk/page_115.htm))

Kwashiorkor is also known as oedematous *malnutrition* as a child develops oedema/edema. Oedema is an excess of watery fluid accumulated in the cavities or tissues of

the body, especially the feet and legs. Children suffering from kwashiorkor may look fat or swollen. But they may not lose weight, because the weight of accumulated oedema fluid counterbalances the weight of lost fat and muscle tissue. People who have kwashiorkor typically have swelling appearance in body parts. Other symptoms include change in skin and hair colour, fatigue, diarrhoea, signs of stunting and weightlessness, irritation etc.

Kwashiorkor can be corrected by eating more protein and more calories, especially if treatment is started early. Late treatment may have permanent physical and mental disabilities of a child. Even with treatment, kwashiorkor affected children may never reach their full growth and height potential.

**Marasmus:** Marasmus is another form of severe nutritional disorder. It is a disease caused due to protein deficiency. It can occur in anyone who has severe malnutrition, but it usually occurs in children. It occurs in children who do not get enough intakes of protein, calories, carbohydrates, and other important nutrients. The disease can be life-threatening, but it has treatment. The main symptom of marasmus is being underweight. Other symptoms like dry skin and brittle hair are also noticed. Children with marasmus may have chronic diarrhoea, respiratory infections, and stunted growth. They may be short-tempered and irritated.

Marasmus can be corrected by eating more protein and more calories, especially if treatment is started early. The diet may include dried skim milk powder mixed with boiled water. Later, the mixture can also include a vegetable oil such as sesame, casein, and sugar. Late treatment may have permanent physical and mental disabilities of a child even leading to death.



*A child with marasmus*

(Downloaded from [http://conflict.lshtm.ac.uk/page\\_115.htm](http://conflict.lshtm.ac.uk/page_115.htm))

### ***Indicators and Measurement of Malnutrition***

From the definition of malnutrition you are clear that it is a condition lacking in required nutrition. An understanding of assessment of nutritional status will be useful to understand the nature and extent of malnutrition. There are a number of ways of measuring nutritional indicators and status. World Health Organization (1995) has recommended anthropometry measure to assess the nutritional and health status of adult. Anthropometry is the measurement of physical dimensions of the human body, such as height or weight and the fat mass composition as well in order to provide information about a person's nutritional status. BMI (Body Mass Index) is one of popular anthropometry measures. It is also known as Qutelet Index. The value of BMI is the body weight (in kg) divided by the square of the body height in meters (m<sup>2</sup>). It is expressed in units of kg/m<sup>2</sup>.

Anthropometry is a popular and easily manageable method of assessing nutritional status. You have learnt that it measures weight, height and fat mass composition of human body. It uses mainly three indices, namely weight-for-age, weight-for-height and height-for-age.

*Weight-for-age* is an index used to assess underweight of children. On the other hand, the index of *weight-for-height* is used to assess the condition of wasting which manifests acute malnutrition. You can calculate the index for under weight and wasting in case of a child as follows:

$$\text{Weight-for-age} = \frac{\text{Weight of the Child}}{\text{Weight of the standard child of the same age}} \times 100$$

$$\text{Weight-for-height} = \frac{\text{Weight of the Child}}{\text{Weight of the standard child of the same age}} \times 100$$

*Height-for age* is an index used for assessing stunting. It manifests chronic malnutrition in children. The index is estimated as follows:

$$\text{Height-for-age} = \frac{\text{Height of the Child}}{\text{Height of the standard child of the same age}} \times 100$$

The other methods of assessing nutritional status are biochemical/laboratory methods, clinical methods, and dietary methods.



**Biochemical method:** Biochemical method is also known as laboratory method. In this method micro-nutrient status is studied to assess nutritional status. This method is followed when disorders are not apparent. Diagnosis is conducted by testing bodily samples (i.e. blood, urine, stool and body tissue) in order to measure an individual's micronutrient status. In this method micro-nutrient status of the patient is tested in the laboratory. For example, iron deficiency anaemia can be diagnosed by measuring the level of haemoglobin in the blood.

**Clinical method:** Clinical method of assessing nutritional status is used to identify certain cases of malnutrition on the basis of the presence of symptoms on the body. The patient may also be asked whether she/he has any symptom so that nutrient deficiency can be diagnosed. For example, the presence of goitre would suggest iodine deficiency disorder. Vitamin A deficiency can be identified asking a patient if he/she has problem of vision at night. In other words, if a patient reports night blindness or a Bitot's spot is observed in the eye, it suggests deficiency in Vitamin A.

**Dietary methods:** Dietary methods of nutritional assessment entail looking at past or current intakes of food items and assessing nutrients from these food items to determine their nutritional status. The nutrition intake is estimated in calorie units.

The total calorie requirement for a moderate working male and hard working female is, recommended by Indian Council of Medical Research (ICMR) (1990) is 2800. Suvendu Baral (2010) finds average calorie intake of an adult working Lodha adult, male and female is 2090.

Generally, anthropometry, dietary and clinical methods are used in assessing the nutritional status. The assessor, however, has to have basic knowledge on calorie unit of various food items in order to use dietary method. Similarly, he/she has to have knowledge on diseases, symptoms and corresponding nutrient deficiencies to use clinical method.

### ***Tribal transition and Undernutrition***

A question arises: is undernutrition a chronic problem of the tribals? You will get an answer to it from the following example:

In 1986, it was reported that in a village of West Siang district many families availed of the government scheme and converted the jhum fields to terrace fields in 1982. In 1984, they reconverted the terrace fields to jhum fields for they could not produce variety of crops they used to produce from jhum fields. A similar event is also recorded by Hussain (1993:55, 56-57; 1984) in Yangse Valley of East Kameng district of Arunachal Pradesh.

What follows is that the traditional tribals had access to a variety of crops and thus to a variety of sources and types of nutrition. It is because different crops produced in jhum fields are rich in different types of nutrition. Moreover, the tribals used to get animal food from hunting, fish from rivers, and leafy vegetables, fruits, roots, shoots, etc. from jungle freely. Varieties of items provided them required nutrition intake. But in the process of development tribals lost their free access to forests and rivers. A number of rules were formulated restricting their access to forests. You have already got some idea in Unit-III of this paper. Development process also depleted their forest resources. As a result of deforestation and forest laws tribal access to forest produce was restricted. Hunting and fishing were also brought under legal restrictions. On the other hand, through government initiatives they cultivated mono crops and large cultivators took interest in commercial crops. The traditional source of dietary intake was replaced by changing cropping pattern and market supply of items. But due to wide spread poverty tribals lack purchasing power to make good of the loss of traditional sources by market items. As a result they are undernourished. As reported by Reuters on 20<sup>th</sup> Septemebrt,2018, out of every 1,000 tribal children 57 die before age five due to malnutrition, compared with 37 deaths in other social groups in India.

Losses of traditional livelihoods and rights over resources are recognised in Xaxa Committee report (GoI,2014) as cause of malnutrition and other problems of tribal communities, particularly of PVTGs. the report reads,

The vulnerability of the PVTGs primarily stems from the loss of their traditional livelihoods, habitats and customary resource rights through the gradual exploitative intrusion of the market and State into their areas in the form of industrial projects, conservation efforts, tourism, and the forest bureaucracy and so on. These conditions have led to the loss of their land and resources resulting in chronic malnutrition, starvation and ill health among these groups. The groups most under threat have been identified as the Shompens, Sentinelese and Jarawas of the Andaman Islands; the Bondos of Odisha; Cholanaickans of Kerala; Abujh Marias of Chhattisgarh and Birhors of Jharkhand.

Studies, including World Bank reports, also link changes in livelihood patterns and in socio-cultural practices of the tribes to their health problems as they integrate with mainstream development. In other words, malnutrition appears among the tribes during transition from tradition to modernity. During transitional period the alternative to traditional livelihood source available in market mode is not within the easy reach of the tribals due to their poverty and consequently low purchasing power.

It is clear that tribal people whose life is primarily based on their traditional eco-system get adequate nutrition. The more they are distanced from traditional resource base the more they encounter shortage of adequate nutrition. A number of studies showed a relationship between the tribal eco-system and their nutritional status. Rao and Rao (1994) have also found this relationship between traditional eco-system and nutrition in the case of Maria Gonds. Kapoor

and Dhall (2016) have recorded mean values of BMI for certain tribes. WHO has considered 18.5 kg/m<sup>2</sup> as normal. The found Toto tribe of West Bengal and Car Nicobarese of Nicobar Island showing mean value of normal range (21.3 and 21.9 kg/m<sup>2</sup> respectively) while Bodo, Desia Khond and Nolias from Orissa (18.5, 17.6 and 16.8 kg/m<sup>2</sup> respectively), Kamar from Madhya Pradesh (17.9 kg/m<sup>2</sup>), Tadavi from Gujrat (18.1 kg/m<sup>2</sup>), Mina from Rajasthan (17.5 kg/m<sup>2</sup>), and Rajis from Uttrakhand (16.6 kg/m<sup>2</sup>) showing mean values of BMI lower than the normal range.

You know that Toto and Car Nicobarese of Nicobar Island are more dependent on their traditional eco-system than Desia Khond and Raji tribe. Bodo also still maintain their traditional food habit to a greater extent. The Meena though do not depend on traditional eco-system largely, some of them have white collar jobs and thus purchasing power for nutritious diet. The latter however has not influenced the average, because most of them, who have lost their traditional eco-system and do not have enough purchasing power, suffer from nutrition deficiency to a greater extent. To conclude, tribal population in transition are more vulnerable to undernutrition. But, when the tribal people especially in tribal states are exposed to development process to a greater extent, cases of overnutrition increase. You can learn it with reference to Arunachal Pradesh.

### Check Your Progress –I

Write 'True' or 'False'

1. Health problem is a social problem.
2. Social problem did not exist in traditional tribal communities.
3. Malnutrition manifests under the condition of overnutrition only.
4. Stunting of a child refers to low weight for his or her height.
5. Kwashiorkor is a nutritional disorder caused among children by a lack of protein in the diet.
6. BMI (Body Mass Index) is a clinical method of measuring malnutrition and health status.

Arunachal Pradesh is a tribal state. The tribes are in transition because of development interventions. Those who have limited dependence on traditional eco-system have shown signs of undernutrition. The section which possesses enough purchasing power shows signs of overnutrition. However, NFHS -4 (2015-16) has not made any such observation. From the table 4.2 you will find that 8.5 per cent of female population is below normal in 2015-16. The percentage has dropped from 16.4 per cent during 2005-06. Similarly, the percentage has decline from 15.2 to 8.3 during the same period for male population. In contrast, incidence of overweight and obesity has increased from 8.8 % to 18.8% for female population and 7.1 % to 20.6% for male population. In total more than 25 % of population in Arunachal Pradesh is recorded under malnutrition. Secondly, due to development

interventions, percentage of people accessing higher income bracket is increasing, as with higher purchasing power symptom of overnutrition is increasing.

**Table No.4.2 Total and Urban-Rural distribution of Nutritional Status**

Indicators	NFHS-4 (2015-16)			NFHS-3 (2005-06)
	Urban	Rural	Total	Total
<b>Nutritional Status of Adults (age 15-49 years)</b>				
Women whose Body Mass Index (BMI) is below normal (BMI < 18.5 kg/m <sup>2</sup> )14 (%)	8.7	8.5	8.5	16.4
Men whose Body Mass Index (BMI) is below normal (BMI < 18.5 kg/m <sup>2</sup> ) (%)	8.8	8.1	8.3	15.2
Women who are overweight or obese (BMI ≥ 25.0 kg/m <sup>2</sup> )14 (%)	25.8	16.3	18.8	8.8
Men who are overweight or obese (BMI ≥ 25.0 kg/m <sup>2</sup> ) (%)	26.0	18.4	20.6	7.1

As you know anaemia is a symptom of undernutrition. Since the loss of nutrition intake from traditional ecosystem is regained from increasing purchasing power, the incidence of undernutrition is declining. In other words, cases of anaemia will also show declining trend. This is presented in the table below. NFHS-4 shows a decadal decline of anaemia cases. However, the decline is less in case of women than men. Table 4.3 presents the incidence of anaemia among ST children and adults.

**Table 4.3 Incidence of Anaemia**

Indicator	NFHS-4 (2015-16)			NFHS-3 (2005-06)
	Urban	Rural	Total	Total
<b>Anaemia among Children and Adults</b>				
Children age 6-59 months who are anaemic (<11.0 g/dl) (%)	51.0	55.0	54.2	56.9
Non-pregnant women age 15-49 years who are anaemic (<12.0 g/dl) (%)	41.4	44.3	43.5	50.6
Pregnant women age 15-49 years who are anaemic (<11.0 g/dl) (%)	36.8	38.0	37.8	51.8
All women age 15-49 years who are anaemic (%)	41.2	44.0	43.2	50.5
Men age 15-49 years who are anaemic (<13.0 g/dl) (%)	15.9	19.7	18.6	27.7

While tribes are distancing from traditional source of livelihood, they are accessing to alternative sources due to development interventions. Loss and gain are not perfect substitutes and the trend is not similar among all the tribes. You have seen that obese case among tribal women in KBK districts is low as compared to those in Arunachal Pradesh. The case of underweight is comparatively higher in case of tribal women of KBK districts.

Conclusively, tribes with more exposure to development forces shift from the stage undernutrition to overnutrition as compared to less exposed tribes during transitional phase.

### ***Incidence of Malnutrition among Tribes and causes***

In the context of tribals, the condition of malnutrition is the condition of undernutrition, for tribals are generally poor and do not have enough purchasing power to buy adequate and blanked nutritious diet. You have learnt in section 1.3.1 of the present paper that poverty is wide spread in tribal areas. The striking point is that the rural urban gap of tribal poverty is 18.3 percentage point as compared to this gap (12.9 % point) between all India rural and urban population. In other words, rural STs are yet to come at par urban STs. Data available in *Statistical Profile of Scheduled Tribes in India 2013, Ministry of Tribal Affairs*, show that 47.1 per cent of tribal population was below poverty line in 2009-10 as compared to 28.8 per cent of their urban counterparts and 33.8 per cent of rural India for all categories of people. Moreover, tribes living in different states show different incidences of poverty. In Odisha it is highest (75.6%) for rural STs, while in Uttarakhand ST urban poor records the highest (64.4%). Kachhap and Kachhap (2008) inform that in Gujarat 29.11 per cent of rural ST population is record below poverty line as against 13.17 per cent for population of all categories in rural areas. Similarly, 36.6 per cent of urban ST is recorded below poverty line as against 15.59 per cent for population of all categories in urban areas.

In terms of lowest wealth index (LWI) the National Family Health Survey (NFHS) -4 records that 45.9 per cent of ST population belongs to LWI as compared to SCs (26.6%), OBC (18.3%) and others (9.7%). Even in the group of second LWI Scheduled Tribe population records highest (24.8%) followed by SC (21.8%), OBC (10.3%) and others (15.1%).

Obviously, malnutrition in tribal context is a situation of undernutrition as it is linked with poverty. Of course over nutrition is observed among elite section of the tribes, but the problem is not so serious like undernutrition. In a study conducted by Suwendu Baral in 2010 among the Lodhas of Odisha, obesity is reported to be 7.2 per cent among Lodha male and 5.6 per cent among Lodha female. The study entitled *Nutritional Status of the Lodha Tribe of Mayurbhanj District, Odisha: A Socio-Economic and Demographic Analysis* also records 35.8 per cent undernourished Lodha male and 43.0 per cent undernourished Lodha female. Incidence of undernourishment is higher among the Lodha female. Incidence of malnutrition (undernourishment) is higher among tribal female than tribal male. Such a trend is also reported by Kar, Sarangi and Nanda (2007) in KBK (former Koraput, Bolangir and Kalahandi) districts of Odisha. They find 17.80 per cent of underweight girls as compared to 11.84 per cent boys. They have presented case of malnutrition tribal women in 8 districts of KBK region of Odisha. They found that as high as 26.67 per cent of the women are in the underweight category and 15.05 per cent in the category of severely underweight. Again 5.81 per cent of them are obese and 1.93 per cent is seriously obese.

Stunting is a major problem resulting from protein energy malnutrition. **In India very second tribal child is stunted, and the bulk of them are severely stunted.** According to National Family Health Survey-3 (2005-06), India has the highest number of stunted children globally and most of them are from tribal communities. The survey records a total of 6.2 million out of 11.5 million tribal children aged under five in India are stunted. This makes 54 per cent and among children of India's tribal peoples. In terms of numbers, nine tribal dominated states of central India collectively house 4.7 million of these stunted children: Andhra Pradesh, Chhattisgarh, Gujarat, Jharkhand, Madhya Pradesh, Maharashtra, Odisha, Rajasthan and Telengana.

The UNICEF Report 2015 states that stunting in children is a measure of chronic undernutrition having future implications. Stunting contributes to one third of under-five deaths globally, and adversely affects a child's health, cognitive capacity, school performance and productivity in adulthood. **The risk of stunting increases two fold if a mother is stunted or had a pregnancy interval less than two years.**

GoI (2014) Report finds the following with regard to nutritional status of tribes in India:

1. It was observed that, in general, the overall intake of various foods were less than Recommended Daily Allowance (RDA). Similarly, the average intakes of all the nutrients, except for thiamine and vitamin C were less than RDA.
2. Cereals and millets formed the bulk of the diets in all the States. The intake of protective / income-elastic foods such as green leafy vegetables, milk and milk products, fats and oils were well below the recommended levels. The inadequacy was greater among younger age groups.
3. The extent of dietary energy and proteins inadequacy was more pronounced, reiterating the fact that, it is essentially a 'food gap'. The intakes of various micronutrients, specifically that of iron, vitamin A, riboflavin and folic acid was found to be grossly inadequate, which is in consonance with inadequate intake of protective foods.
4. The average intake of all nutrients, barring thiamine, niacin and vitamin C declined over the period 1998-99 to 2007-08. The intake of most of the nutrients declined in Tamil Nadu, Karnataka, Andhra Pradesh and Maharashtra, Orissa and West Bengal during the same period.
5. The proportion of tribal population of different age groups consuming less than 70 percent of protein and energy was observed to be higher compared to their rural counterparts. About 29-32 percent of children of different age groups and 63-74 percent among adult men and women were consuming diets that were adequate in both protein and energy. The proportion of individuals with protein-calorie adequacy decreased among all the age groups, during the same period.
6. The prevalence of clinical forms of protein-energy malnutrition, vitamin deficiency, signs like Bitot spots and angular stomatitis declined over the period 1998-99 to 2008-09. The distance charts revealed that there was marginal improvement in the weight

and height of individuals of different age groups and both the genders over the period, but continued to be lower than the median NCHS values.

7. Though, the overall prevalence of underweight, stunting and wasting (WHO standards) among 1-5 year tribal children was higher (52 percent, 55 percent and 22 percent versus 43 percent, 49 per cent and 19 per cent respectively), compared to their rural counterparts, but was slightly lower than the previous survey carried out in 1998-99 (57 percent, 58 per cent and 23 per cent respectively).
8. Similarly the overall prevalence of severe underweight (weight for age <Median-3SD) also declined from 23 percent in 1998-99 to 20 percent in 2007-08, severe stunting decreased from 31 percent to 26 percent, while the prevalence of severe wasting, has declined marginally from seven percent to six percent (NNMB 1998-99). Thus, it was concluded that the improvement in the nutritional status of preschool children was only marginal. The prevalence of under-nutrition was higher among 1-3 year children as compared to 3-5 year children as was observed in other studies.
9. The prevalence of chronic energy deficiency (BMI<18.5) had decreased by about nine percent in adult men and by about six percent in adult women during 1998-99 to 2007-08, while the prevalence of overweight/obesity (BMI≥23) had increased from 3.6 percent to seven percent among men and four percent to eight percent among women during the same period. It was observed that the prevalence was 17 percent among men and 20 percent among women for the rural counterparts.

**Causes of malnutrition:** The main causes associated with malnutrition among the tribals are as follows:

1. **Poverty:** As you have learnt poverty is the major cause of malnutrition; and poverty exists widely among the tribes. Poverty affects adequate nutrition intake which in turn causes stunting, wasting and underweight. You have learnt that stunting is a major undernutrition problem. UNICEF Report (2015) identifies household **poverty as a strong determinant of severe stunting in tribal children. But poverty is not the only factor.** Stunting in tribal children is influenced by multiple interrelated factors. In addition to household poverty other factors affecting stunting are:
  - food insecurity,
  - maternal undernutrition before and during pregnancy,
  - **inter-pregnancy interval,**
  - poor complementary feeding practices in the first two years of life, and
  - poor access to water, health and sanitation services

It is reported that **if mothers are stunted, the chance of the children being severely stunted is 1.8 times higher in tribal children. Further, if the pregnancy interval is less than two years the chance of stunted children is 1.4 times higher.**

2. **Unemployment:** It is a cause of poverty and thus cause of inadequate nutritious food intake.
3. **Migration:** In migration for job purpose, the people save money to remit home. So they do not spend for nutritious food in the workplace. Child labour and bonded labour are exploited and they do not get adequate food. Even if they are paid in cash it is so meagre that it is adequate only to keep them alive.

If children accompany parents, they do not go to schools and thus are deprived of mid-day meals. At home people keep poultry birds, goats, pigs, etc. But during migration they cannot keep them and as a result they lack animal food.

4. **Drinking:** Tribals are accustomed to drinking. Drinking without food causes undernutrition. It also becomes a cause of poverty.
5. **Tribes in transition:** You have already read above that tribals depending on their traditional ecosystem for food used to get varieties of food items- fish from river, animal food, fruits, leafy vegetables, etc from forests and of course a variety of crops from cultivation by those who were agriculturists. Forest policies restricted tribals' access to forests and rivers. Modernisation of agriculture introduced mono-crops. All those whose dependence on eco-system decreased did not get alternative source to recuperate the loss. These people became poor and thus lacked purchasing power to buy adequate diet.
6. **Cultural factors:** Taboos are observed by the tribals. During certain type of taboos food restriction is followed. Even certain food items are also tabooed for certain persons and under certain occasions. This practice affects nutrition intake.

### ***Addressing the problem of malnutrition***

You have already learnt that malnutrition, as the name suggests, is a condition of lack of nutrition, particularly in the context of the tribes. Lack of nutrition is caused due to inadequate dietary intake which in turn occurs due to poverty. The remedy to the problem of malnutrition underlies the provision of adequate purchasing power, i.e. eradication of poverty in order to enable the tribals to go for sufficient dietary allowances.

The government of India is well aware of the problem of malnutrition. Various Ministries are working to address the issue. these include (i) Ministry of Rural Development; (ii) Ministry of Public Distribution and Civil Supplies; (iii) Ministry of Health and Family Welfare (MoHFW); (iv) Ministry of Women and Child Development(MWCD); (v) Ministry of Drinking Water and Sanitation; and (vi) Ministry of Tribal Affairs (MoTA). The Ministry of Tribal Affairs, being the nodal ministry for welfare, development and protection of tribal children, has the mandate to convene, coordinate and synergize efforts of line ministries to reduce undernutrition in tribal children. It has advised all the states for use of traditional food,



and minor millets in the food basket, through intervention in schools and also for supplementing food with iron and folic acid. Funds are also provided to States, as Special Central Assistants to Tribal Sub-Plan (SCA to TSP) and grants under Article (275(1)) of the Constitution of India, for addressing health needs of Tribals.

This Ministry had revised Guidelines for ‘Special Central Assistance to Tribal Sub-Plan (SCA to TSP)’ and ‘Grants under Article (275(1) of the Constitution of India’ in June 2016, to provide for 10-15% of allocation under health sector.

Information available with the Ministry for Women and Child Development states the following initiatives of the government tackle the problem of malnutrition. These include:

- i. strengthening and restructuring of the ICDS with special focus on pregnant and lactating mothers and children under three including International Development Association(World Bank) assisted ICDS Systems Strengthening and Nutrition Improvement Project (ISSNIP) in 8 states having higher under nutrition,
- ii. a multi-sectoral programme to address the maternal and child malnutrition in selected 200 high-burden districts,
- iii. a nationwide information, education and communication campaign, and
- iv. bringing in strong nutrition focus in Ministries dealing with Health, Drinking Water Supply and Sanitation, School Education, Agriculture and Food & Public Distribution.

The National Food Security Act 2013 is also a step towards contributing to food security. The National Food Security Act 2013 is also a step towards contributing to household food security. A Pilot Scheme on Nutri-farm by Ministry of Agriculture is being implemented in 100 high malnutrition burden districts of 9 states during the year 2013-14.

### **Check Your Progress –II**

Select the correct answer from the parentheses.

1. Undernutrition is most commonly assessed through the measurement of ..... (weight/height/weight and height).
2. Wasting is used as a way to identify ....(acute/chronic) malnutrition.
3. Children are very vulnerable to ..... (*protein-energy* malnutrition/micronutrient deficiency).
4. Kwashiorkor and marasmus are caused due to..... (protein/energy) deficiency.
5. Index of *weight-for-height* is used to assess the condition of .....(wasting/stunting).
6. Generally tribal people whose livelihood is primarily based on their .....(traditional eco-system/ wage earning) get adequate nutrition.
7. Calorie units are estimated in .....(Anthropometry/Dietary) methods.

8. In Arunachal Pradesh symptom of..... (overnutrition /undernutrition) is increasing as percentage of people accessing higher income bracket is increasing.
9. Malnutrition in tribal context is a situation of.....(overnutrition/undernutrition).
10. The National Food Security Act 2013 provides for ....(food security/ safety measures from HIV/AIDS).

### 4.3.2 HIV/AIDS

You might have seen hoardings displaying ‘facts’ about HIV/AIDS along road side or in important public places in your town or near Primary Health Centre in your village. When you hear the word HIV/AIDS a chilly sensation runs through your bones. It is such a deadly disease! Do you know what is HIV and what is AIDS? Do they mean the same thing? No, they refer to two stages of a continuum. First, one contacts HIV infection and at the final stage of it he/she develops AIDS. Precisely, AIDS describes a set of symptoms and illness that occurs at the final stage of untreated HIV infection.

HIV is the short form of *human immunodeficiency virus*. It is the virus that attacks the body’s immune system, specifically the CD4 cells (white blood cells). If untreated, it can lead to *acquired immunodeficiency syndrome*, or AIDS. You might know that CD4 cells help the immune system fight against infections and some other diseases. If this immune system is destroyed the body becomes weak to fight against infections and other diseases. Loss of CD4 cells make the infected person more likely to get other infections or infection-related cancers. Ultimately it leads to death of the HIV infected person if untreated. One crucial point about HIV is that the virus once enters into the body it remains forever. Unlike some other viruses, the human body can’t get rid of HIV completely, even with treatment. So once a person gets HIV, he/she has it for life. Only one can control it with proper medicines that fight HIV infection and lower the risk of infecting others. With early and proper treatment one can live with the disease for a long time.

No effective cure currently exists, but with proper medical care, HIV can be controlled. The medicine used to treat HIV is called *antiretroviral therapy* or ART.

As you know without treatment HIV infection finally leads the stage of AIDS. In fact there are three stages of HIV infection. These are (1) acute HIV infection, (2) clinical latency, and (3) AIDS (acquired immunodeficiency syndrome). AIDS is the most severe phase of HIV infection. Once a person reaches AIDS stage he/she gets an increasing number of severe illnesses, called *opportunistic infections*. Without treatment, people who progress to AIDS typically survive about three (3) years. Once a person has a dangerous opportunistic illness like cancer, his/her life-expectancy without treatment is about one (1) year or less. ART can be helpful for people who have AIDS when diagnosed and can be lifesaving. However, it is advisable to treat HIV at an early stage.

### Symptoms

HIV infected persons develop certain symptoms. From the symptoms you can understand the progress of HIV towards AIDS.

Once a person is HIV infected, within 2 to 4 weeks of infection symptoms like fever, swollen lymph glands (mainly on the neck), sore throat and painful mouth sores, rash, muscle and joint aches and pains, and headache may occur. This stage is called acute *retroviral syndrome* (ARS) or *primary HIV infection*. Some of the infected persons also develop flu-like symptoms. These symptoms can be so mild that the infected person might not even notice them. But this is the stage when the amount of virus in the bloodstream is quite high.

In the next stage some symptoms continue and some new symptoms appear. These are: fever, fatigue, swollen lymph nodes — often one of the first signs of HIV infection, diarrhoea, weight loss, oral yeast infection (thrush) and shingles (herpes zoster). As HIV approaches near AIDS stage, the immune system is completely damaged. Along with initial opportunistic infections or opportunistic cancers other signs and symptoms may appear. These include: soaking night sweats, recurring fever, chronic diarrhoea, persistent white spots or unusual lesions on your tongue or in your mouth, persistent, unexplained fatigue, weight loss and skin rashes or bumps.

### **Carriers of HIV**

HIV is a communicable disease. The virus is found in certain body fluids like semen, blood, vaginal and anal fluids, and breast milk of the infected person. Obviously, when these fluids enter into a healthy person's body, then virus in it spreads and attacks the body's immune system. This also means that HIV does not spread through the air, water or insect bites. The virus through these fluids enters into a healthy person's body due to following reasons:

- **By unprotected sex:** When a healthy person involves in unprotected vaginal, anal or oral sex with an infected partner, his/her blood, semen or vaginal secretions enter the healthy person's body.
- **From blood transfusions.** In some cases, the virus enters into a healthy person's body if blood of an infected person is transfused.
- **By sharing needles.** Sharing contaminated intravenous needles and syringes by drug addicts transmits HIV virus.
- **During pregnancy or delivery or through breast-feeding.** An infected mother can pass the virus on to her baby during pregnancy, or at the time of delivery or through breast feeding.

**Now you have understood that contact with the infected fluids only transmit HIV virus. Therefore, a person is not infected** through ordinary contact. One can hug, kiss, dance or shake hands with someone who has the infection.

## **The issue of HIV/AIDS among the Tribes**

HIV case was first detected in the Democratic Republic of Congo in 1959. Scientists have identified a type of Chimpanzee in West Africa as the source of HIV infection in humans. From Africa it spread over into other parts of the world through fluid contacts. Needless to say, in traditional tribal society of India, and for that mattered in India itself, HIV infection did not exist. It entered into tribal society as tribes are integrated with modernity, because in the process of integration tribal women are sexually exploited, as Reddy (2014) maintains, by so-called 'civilized societies', tribal tourism (unwed motherhood among Paniyas of Kerala, HIV/AIDS). A similar point is made by Subramanyam (2014) with regard to HIV/AIDS cases in many tribal areas due to culture contact with outsiders and development of tourism in natural forest zones where tribal inhabit.

It is not that only tribal women's sexual exploitation is responsible for HIV infection. Tribal women in many areas also work as sex workers. Citing S.M. Patnaik (2002) Reddy (2014:76) reports that in Dumkurias the dormitory practice has taken shape of brothels where trade of tribal women as sex workers has started.

In an unpublished paper entitled *Occupational Health Hazards among the Tribal Coal Mining Workers, Odisha* Shreyasi Bhattacharya has reported sexually transmitted diseases among tribal women and men. These women are sexually exploited by contractors, shopkeepers and other outsiders like drivers, non-tribal workers. Rao and others, 2009, Akram, 2005 and Bhasin, 2004 have found sexual illness among tribal women and men. Sexually transmitted diseases (STDs) are reported in tribal women who work in mining areas and migrate to urban centres. The point is that tribal women are sexually exploited by non-tribals. As non-tribals carried HIV infection this was transmitted to tribal women and through them to their men. Naik and others (2005) report that even tribal men also contacted it in urban areas through commercial sex workers. Because tribal members are forced to migrate outside of their communities in search for work and increased wages, this contributes to the spread of HIV/AIDS as many engage in extramarital affairs, seek commercial sex partners, or are under the threat of sexual harassment (females). Citing Centre of Social Medicine and Community Health, 1998 Bhasin (2004) data reports extremely high male-female ratio of STD infection. Most men gave a history of extra-marital contact while the few women in whom STD could be demonstrated were either commercial sex workers or partners of these men.

Among communicable diseases existence of HIV in tribal areas is admitted in reports of GoI, 2014 and 2018. Drawing on the report of National Nutrition Monitoring Bureau (NNMB) of 2009, a GoI (2014) Report records nine types of diseases prevalent in tribal areas. Under the category of Communicable Diseases, sexually transmitted diseases and HIV are prevalent in tribal areas. NFHS-4 records highest incidence of HIV positive among tribal women and men. It states that women and men belonging to scheduled tribes have a higher HIV prevalence (0.46%) than those belonging to SC (0.23%), OBC (0.21%) and other category (0.17%). In case of India the prevalence is 0.24%.

The Report of GoI, 2018 relied on data from the 2011 Census, National Family Health Survey (NFHS), National Sample Survey Organisation (NSSO), studies conducted by civil society, and a study by the National Institute of Research in Tribal Health. It also reproduced the same information. There is not any specific study to identify HIV cases among the tribals in different parts of the country. However, the report of GoI, 2014 places that HIV prevalence rate among the STs is 0.25 per cent compared to all India figure of 0.28 per cent. It also mentions that the proportion of women and men who have been tested for HIV but who did not get the test results is very low (0.2 and 0.1 percent among women and men, respectively). But we learn from the reports of Indian Council of Medical Research (ICMR) and National AIDS Control Organisation (NACO) that Mizoram, Manipur and Nagaland were accounted as states with adult (15-49 years) HIV prevalence above the national average. Mizoram, Manipur and Nagaland each reported 2.04, 1.43 and 1.15 per cent respectively.

You will find in NFHS-4 that percentage of HIV positive among women and men of age group 15-49 (and men age 15-54) have been compared among 11 groups of states/union territories. However, all states are not included in the groups. The groups of states and union territories are:

1. Andhra Pradesh and Telangana
2. Bihar, Jharkhand, West Bengal, and the Andaman & Nicobar Islands
3. Gujarat, Dadra & Nagar Haveli, and Daman & Diu
4. Himachal Pradesh and Jammu & Kashmir
5. Karnataka
6. Maharashtra and Goa
7. Mizoram, Manipur, and Nagaland
8. Odisha and Chhattisgarh
9. Punjab, Haryana, Delhi, and Chandigarh
10. Tamil Nadu, Kerala, Puducherry, and Lakshadweep
11. Uttar Pradesh, Madhya Pradesh, Uttarakhand, and Rajasthan

The above mentioned survey finds that group 7 states (Mizoram, Manipur and Nagaland) register highest percentage of HIV positive among the 11 groups for men (1.54%), women (1.45%) and total (1.49%) of age group 15-49 followed by group 1 (Andhra Pradesh and Telangana – men (0.93%), women (0.89%) and total (0.91%)) and group 5 state i.e. Karnataka (men 0.56%, women 0.71% and total 0.64%). The incidence is considerably higher in group 7 states than others. Further, the percentage of both couples with HIV positive is recorded for group 7 (.92%) followed by group 1 (.49%) as against 0.11% of national figure. But there is a declining trend in group 7 states as HIV prevalence for men of the age group 15-24 is at 0.20 per cent, lower than in four other groups of states/union territories registering higher incidence of prevalence.

In 1998 when the Arunachal Pradesh Aids Control Society (APSACS) was set up, only two HIV positive cases were reported in the entire state, but the figure rose to 202 as per the count made in December, 2012. According to a recent survey Arunachal Pradesh has reported a 65 per cent increase in new HIV infections in 2017 with 76 new HIV infections, with 39 per

cent of new HIV infections among women. Papum Pare district topped the list of HIV/AIDS-infected patients followed by Lohit and Changlang. In these districts migrant non-tribal populations, mainly labourers, constitute a large portion. It is to be mentioned that most of those tested positive were in the age group of 15 to 39. It is expected that actual number of AIDS positive cases would be much higher as the figures available with APSACS were only of those who voluntarily came for testing. APSACS source states that unprotected sexual contact is found to be the primary reason for increase in HIV infection among people in the age group of 15 to 39 in the state.

But the case is different in Manipur and Mizoram. In these two states, as reported by (ICMR) and NACO, endemic drug usage and use of infected syringes are on the rise. Therefore infection among drug users is quite high in both the states. In Mizoram, there were 1,503 new HIV infections in 2017. The first HIV-positive case in Manipur was reported in February 1990 from the blood samples drawn from a cluster of injecting drug users (IDUs). The number of HIV/AIDS affected individuals has increased to 24,457 till August 2017, but its rank has declined from first to fifth among the Northeast states in 2018 as reported by the Manipur AIDS Control Society (MACS). A 2016-17 survey by the Manipur AIDS Control Society (MACS) said the virus is now transmitted through sexual relationship in 78 per cent of HIV/AIDS transmission cases in the state. Only 15 per cent are due to sharing of syringes, the remaining 7 per cent are attributed to parent-to-child transmission.

Meghalaya state reported according to NACO, 191 new HIV infections in 2017 with a 10 per cent increase and 42 per cent new HIV infections among women. However, HIV/AIDS scenario in the state varies from place to place. For example, Jaintia Hills districts have slighter more HIV infections as compared to East Khasi Hills district. It could be so because of migrant flow or truckers. Migrant labourers and truckers have been identified as the reason of increasing HIV infection cases in Assam. In the state 1,387 new HIV infections have been reported in 2017 with a staggering 37 per cent increase, accounting for 41 per cent of new HIV infections among women.

A source of Nagaland State AIDS Control Society (NSACS) reports that Nagaland has 22,878 'People living with HIV' (PLHIV) and AIDS cases. In 91% of the cases in Nagaland, the route of virus transmission is unsafe sex, especially between the age group of 25 to 34 years. In India Andhra Pradesh, Maharashtra, Karnataka, Gujarat, Uttar Pradesh, Bihar, Tamil Nadu, West Bengal and Rajasthan register high incidence of HIV/AIDS infection. The incidence is more in the North-eastern states.

Though the tests are conducted in general still the incidence of HIV/AIDS among the tribes is alarming. Higher percentage in tribal states of the Northeast is a serious matter. The government and many NGOs are working towards creating awareness among the people, for 'awareness is the only way to stay away from infection'. IEC (information, education and communication) campaigns are organised to create awareness among the people. However the level of awareness is not satisfactory given the seriousness of the problem of HIV/AIDS. NFHS-4, for example reports the awareness level in Arunachal Pradesh as shown in table 4.4.

**Table 4.4 Level of awareness of AID/HIVs in Arunachal Pradesh**

Indicators	NFHS-4 (2015-16)			NFHS-3 (2005-06)
	Urban	Rural	Total	Total
Women who have comprehensive knowledge of HIV/AIDS (%)	24.8	12.9	16.0	12.7
Men who have comprehensive knowledge of HIV/AIDS (%)	37.7	23.5	27.4	30.2
Women who know that consistent condom use can reduce the chances of getting HIV/AIDS (%)	58.9	40.5	45.2	33.3
Men who know that consistent condom use can reduce the chances of getting HIV/AIDS (%)	77.9	58.7	64.1	62.5

There is an increase in the level of awareness over a period of 10 years, but still there is rural-urban and gender gaps. In this regard NGOs have a greater role to play as they are more nearer to people than government agencies.

### Check Your Progress –III

Answer in a word, group of words or in a sentence

1. Which social category in India has highest prevalence of HIV/AIDS?
2. What type of disease is HIV/AIDS?
3. How does HIV virus spread?
4. What is the main cause of AIDS in the North-eastern states in recent years?
5. Which campaigns are organised to create HIV/AIDS awareness?

### 4.3.3 Reproductive Health

Reproductive health is a very comprehensive health care programme. Following World Health Organization’s definition of health, it refers to a state of complete physical, mental and social well-being, and not merely the absence of reproductive disease or infirmity. According to the International Conference on Population and Development Programme of Action, reproductive health implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so.

World Health Organization defines health as ‘a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity’.

The programme of reproductive health is gender neutral and covers reproductive health care of both male and female though female reproductive health is very crucial in modern health care system. Precisely, reproductive health in its comprehensive sense covers a wide range of issues like the diseases, disorders and conditions that affect the functioning of the male and female reproductive processes, functions and system at all stages of life. Disorders of reproduction include birth defects, developmental disorders, low birth weight, preterm birth, reduced fertility, mortality, impotence, menstrual disorders, malnutrition, miscarriage, unsafe abortion, maternal and perinatal health problems, and so on. Access to contraception, socio-economic determinants of well-being and empowerment, etc. are also included in reproductive health care. As sexual health is also considered as a state of reproductive health, often the concept is expressed as *reproductive health and sexuality*.

### **Importance of Reproductive Health for Women**

As discussed above reproductive health is a universal concern and covers the health needs of both men and women. But the common understanding relates it to women's reproductive health as women only reproduce. Reproductive health care is important from birth to death, for malnutrition during childhood may affect health of women at later stage. Similarly, complicacy during reproductive phase affects health after this phase is over. Health problem at one stage of life, if not taken care of, may reflect health and developmental problems in later stages and carry it to following generation. The health of the newborn largely reflects mother's health and nutrition status and her access to health care. Therefore, the problem has cumulative implications and women reproductive health is crucial particularly during the reproductive years.

A further point of explanation is due. Though reproductive health covers both male and female it is understood in the context of women. Men's reproductive health concerns and needs, however, reflect in their general health conditions to a lesser extent than those of women. In patriarchy, men take decision on women's health matters. Therefore, men have particular roles and responsibilities in terms of women's reproductive health.

In patriarchy, as Banerjee and Khaperde (2015) argue, 'most women have to suffer from serious reproductive and sexual health problems'. In traditional societies like those of tribals', women work hard but do not get equal treatment like their male counterparts. Banerjee and Khaperde (2015) write,

... they have been denied the right to inheritance of property, they have had to assume total responsibility for house work and the care of children and the elderly and this work is not counted as of being of any economic value, they have had to go underfed and have been subjected to domestic and external violence of the worst kind. As a consequence of this secondary status, women have to bear more babies to ensure that there are male progeny who will



inherit the property and provide security in old age. Along with this there is social control over the sexuality of women so that men can be assured that the children born to their wives are truly theirs and so ensure the purity of their descent. Naturally, all this affects the overall health of women and especially their reproductive and sexual health. Since there is a taboo on the discussion of these issues, women have to suffer their troubles in silence and this leads to mental problem.

They further remark,

... the menstrual cycle which is an integral part of the reproductive process is considered in the prevailing patriarchal system to be the cause of various negative things and has been given a dirty connotation in India. This affects the ability of women to maintain personal hygiene and results in their being afflicted by various diseases of the reproductive tract.

The general remark also holds for tribal women. In Mizi community of Arunachal Pradesh, a menstruating woman lives in *byagne*, a hut constructed outside the settlement area. Among the Galos of Arunachal Pradesh, the floor space of a Galo house is divided into two parts- *pimme* and *pinte*. *Pimme* is considered 'polluted' and is meant for female members of the house. Women during menstruation, miscarriage and after child birth are confined to *pimme*.

The above discussion reveals socio-economic dimension of women's reproductive health and provides insight how patriarchy regulates it. Along with diseases socio-economic considerations undoubtedly justify the importance of women's reproductive health than that of men's. Therefore, normally the concept reproductive health is taken almost synonym for women's reproductive health and sexuality. There is another reason for associating and equating reproductive health with women's reproductive health.

Banerjee and Khaperde (2015) inform that emergence of feminist discourse problematised reproductive and sexual health of women. Feminists all over the world drew international attention to the sorry state of affairs. They campaigned in favour of establishment of reproductive and sexual rights of women. Finally, the International Conference on Population and Development (ICPD) Programme of Action organised by the United Nations at Cairo in 1994 and the World Women's Conference in Beijing in 1995 recognised this feminist view point and adopted resolutions. Needless to say, the concern for women's reproductive health was the beginning to which men's needs were also combined to define it comprehensively. However, as you will learn in following paragraphs, most of the elements of comprehensive outline of reproductive and sexual health relate to women issues. Obviously, women are at the centre of reproductive and sexual health programme and socially men have to assure it which is denied to them in patriarchy.

## Women's Reproductive Health

As mentioned earlier, women's reproductive health and sexuality is a component of general reproductive health programme. Before ICPD Programme of Action 1994 and the World Women's Conference in Beijing of 1995 feminists have outlined the scope of reproductive health and sexuality of women. Jennifer Seymour Whitaker on the basis of the declaration of the First World Women's Conference organised by the United Nations in Mexico in 1975 summarises reproductive and sexual health. According to her, the Conference exhorted both governments and the people at large

...to recognise the health needs of women of all ages and situations, those with children, girls who were yet to reach child bearing age and women who had passed the child-bearing age range and also those living singly or as couples, give women the right to choose the number of children they wish to have and also the spacing between them and prevent any such discrimination and violence that is against the welfare of women, that prevents them from taking active part in the social, economic and political development of their societies and that violates their human rights .

Another definition before 1994 and 1995 also throws light on elements which subsequently are included in reproductive and sexual health programme. Banerjee and Khaperede (2015) quoting Germain and Ordway, 1989 state that reproductive health status of women

enables women, including adolescents, everywhere to regulate their own fertility safely and effectively by conceiving when they desire, terminating unwanted pregnancies and carrying wanted pregnancies to term; to remain free of disease, disability or death associated with reproduction or sexuality and to bear and raise healthy children.

ICPD Programme of Action, 1994 outlines the following elements of reproductive and sexual health programme particularly concerning women:

- Voluntary, informed and affordable family planning services;
- Pre-natal care, safe motherhood services, assisted childbirth from a trained attendant (e.g., a physician or midwife), and comprehensive infant health care;
- Prevention and treatment of sexually transmitted infections (STIs), including HIV and AIDS and cervical cancer;
- Prevention and treatment of violence against women and girls, including torture;
- Safe and accessible post-abortion care and, where legal, access to safe abortion services; and
- Sexual health information, education, and counselling, to enhance personal relationships and quality of life.

## Reproductive Health and Women's Rights

Reproductive health and sexuality is a crucial component of general health and underlies the concern of human development. Its international recognition and advocacy present it as human rights. In other words, the approach to reproductive health and sexuality is a rights-based approach. No doubt, the subject appears in all human rights instruments.

World Health Organization declares that the 'enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition'.

The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) adopted in 1979, is the only human rights treaty that specifically affirms the reproductive rights of women. CEDAW advances the right to reproductive and sexual health in many ways. It requires the state parties to

- take all appropriate measures to eliminate discrimination against women and girls, including in the health sector;
- challenge harmful traditional norms and modify social and cultural patterns that arise from and perpetuate the notion that women are inferior to man;
- ensure that men and women are equally able to determine the number, spacing and timing of their children-including whether to have any at all-and have sufficient and accurate information, education and supplies to enable control of fertility.
- prevent early marriage and eliminate discrimination against women in marriage and family issues, such as by ensuring divorce, inheritance and property rights; and prevent and respond to violence against women.

Other international human rights documents support and advance reproductive and sexual health rights of women. In *Millennium* Development Goals (MDGs) also reproductive and sexual rights are central to achieving time bound targets on the matter of improving maternal health, reducing maternal and child mortality and achieving access to reproductive health services.

Referring to the article of S. Correa and R. Perchesky, 1994, entitled 'Reproductive and sexual rights; A feminist perspective', Banerjee and Khaperde (2015) inform for aspects of reproductive and sexual rights concerning women. These are:

*Bodily Integrity:* All women have the right to protect their bodies and have control over them. Thus women cannot be deprived of their sexual and productive abilities by men or the state and they cannot be made to use these abilities according to the latter's whims and fancies.

*Personhood:* Women will take their own decisions regarding reproduction and sexual behaviour and nobody can interfere in this.

*Equality:* Women are equal to men in all aspects and so the gender division of labour under which women have been given their work of exclusively tending the children and the elderly and also doing housework has to be abolished and men should also take up these responsibilities. Apart from this, women's health issues should be better addressed on par with those of men.

*Diversity:* the differences arising from differences in values, culture, religion, class, nationality and the like should be respected.

## **Tribes and Reproductive Health**

The subordinate position of women in patriarchy generally leads to indifference or negligence of their health. This condition having been articulated in feminist movement led to the reproductive and sexual health programme particularly of women in general across the globe. Similar situation, often with more intensity due to tradition and custom, prevails in tribal communities. It is therefore imperative to know the status of reproductive health and sexuality of tribal people in general and tribal women in particular. The discussion is based on NFHS data supported by studies on individual tribes wherever possible. You will learn the status of reproductive health in terms of some important elements of reproductive and sexual health programme.

### ***Fertility***

Higher fertility rate is an indication of lower awareness and access to reproductive health services. It has adverse health consequences. NFHS-4 has estimated total fertility rates for the period 1-36 months preceding the interview. It records a higher fertility rate for tribal women (2.48) as against national total fertility rate (2.2) and the fertility rates in other social categories- SC (2.26), OBC (2.22) and other (1.93) per woman.

In tribal states like Arunachal Pradesh, Meghalaya, Mizoram and Nagaland the rates are 2.10, 3.04 2.27 and 2.74 respectively. Except in Arunachal Pradesh, as per the data of NFHS-4, other states have recorded higher rates than the national rate.

### ***Menstrual protection***

Using a hygienic method of menstrual protection is important for women's health and personal hygiene. In NFHS-4 records that In India, women within the age group of 15-, who have ever menstruated, 42 per cent use sanitary napkins, 62 per cent use cloth, and 16 percent use locally prepared napkins. Overall, 58 percent of women in this age group use a hygienic method of menstrual protection. In comparison to India, among the ST women, 28.0 per cent use sanitary napkins, 75.4 per cent use cloth, and 12.3 per cent use locally prepared napkins. Only 0.7 per cent of ST women do not use anything. Overall, 40.3 per cent of women in this

age group use a hygienic method of menstrual protection. Obviously, the poor state of affair in menstrual protection has adverse health consequences.

### ***Teenage Childbearing and Motherhood***

Pregnancy and motherhood in teenage, the period between 15 and 19 years, affect the health of the mother. In India, 8 per cent of women of age 15-19 have begun childbearing; 5 per cent of women have had a live birth and 3 per cent of women are pregnant with their first child. In comparison teenage childbearing is higher among scheduled tribe women of the same age group (10.5%) and also than the other three social groups such as SC (8.8%), OBC (7.0%) and other (7.5%). Similarly 7.6 per cent of ST women in the age group 15-19 have had a live birth and 3.0 per cent (equal to national data) are pregnant with their first child. States like Tripura (19%); West Bengal (18%); Assam (14%); and Bihar, Jharkhand, and Andhra Pradesh (12% each) with a sizeable tribal population also have higher levels of teenage pregnancy. NFHS-4 data however shows an improved situation in Arunachal Pradesh. It records 5.2 per cent of women in the age group 15-19 have had a live birth and 2.7 per cent are pregnant with their first child. Similarly 7.9 per cent of women of age 15-19, almost equal to national figure, have begun childbearing. However, this does not give any idea about the situation of Arunachal Pradesh tribal women as the data represent the satate population as a whole.

### ***Sex preference***

You know that preference for a male child increases number of births till a male child is born. When 20.1 percent of ST women want more sons than daughters, it is 21.0 percent of ST men who want more sons than daughters. Only 3.8 per cent of women and less than it, i.e. 3.4 per cent of ST men want more daughters than son. Though in tribal communities female child is not undesirable still 85.2 per cent of women are recorded showing their preference for at least one son. The figure stands 87.8 per cent for the preference of ST male. As they do not consider a female a burden their preference for at least one daughter is higher; 81.8 per cent of women and 83.5 per cent of men have shown their preference for the same. However, the preference for at least one daughter is lower than that of for a son.

In India the preference for more sons than daughters is recorded 18.8 per cent for women and 18.7 per cent for men. Similarly, 3.5 per cent of women and the equal per cent of men have expressed their preference for more daughters than sons. In both the cases the preference recorded for ST category is higher than all India data. Same is the case with Arunachal Pradesh where 27.2 per cent women and 18.7 per cent of men prefer more sons than daughters. The figures drop to 4.5 per cent for women and 4.9 per cent for men who prefer more daughters than sons.

### ***Early child mortality rate***

Study of this rate throws light on status mother's health, maternal health care and thus has bearing on reproductive and sexual health at large. Early child mortality rate includes Neonatal mortality (NN), Postneonatal mortality (PNN), Infant mortality, Child mortality and Under-five mortality. The status of ST women as compared to SCs, OBCs and others is presented.

Neonatal mortality refers to the death of new born at less than 28 days of age. The rate is the number of resident neonatal deaths divided by the number of resident live births and multiplied by 1000. In other words the rate is calculated per 1000. NFHS-4 records that Neonatal mortality (NN) rate for STs is 31.3 (31.3 neonatal deaths per 1000 live births) which is less than SCs (33.0) but more than OBCs (30.5) and others (23.2).

Postneonatal mortality (PNN) refers to deaths in a given year of children between the 28<sup>th</sup> day of age and the first birth day. It is also calculated as the ration per 1000 live births. It is recorded higher for STs (13.1) as compared to SCs (12.2) OBCs (11.6) and others (8.9).

Infant mortality refers to the death between birth and one year of age and is calculated per 1000. NFHS-4 records that infant mortality rate for STs is 44.2 which is less than SCs (45.3) but more than OBCs (42.1) and others (32.1).

The under-five mortality rate for scheduled castes (55.9 deaths per 1,000 live births), scheduled tribes (57.2 deaths per 1,000 live births), other backward classes (50.8 deaths per 1,000 live births) are considerably higher than for those who are not from scheduled castes, scheduled tribes, or other backward classes (39 deaths per 1,000 live births). Even the rate for others is 38.5, which is much lower. It is evident that the rate is considerably higher for STs as compared to other social groups.

Child mortality refers to the death of children under the age of 14 and includes neonatal mortality, postneonatal mortality, under-five mortality and mortality of children aged 5-14. It refers to deaths per 1000 live births. NFHS-4 records highest rate for STs (13.4) as compared with those of SCs (11.1), OBCs (9.0) and others (6.6).

### ***Perinatal mortality rate***

The perinatal mortality rate encompasses both stillbirths and early neonatal deaths, and offers a better measure of the level of mortality and quality of service around delivery. The rate as expressed in 1000 is recorded in NFHS-4. The perinatal mortality rate for scheduled castes is 40.4 deaths per 1,000 live births, scheduled tribes 36.1 deaths per 1,000 live births, other backward classes 36.9 deaths per 1,000 live births. It shows that STs have a lower perinatal mortality rate than other two social categories. Even it is almost equal to national rate of 36 per 1000. But is it considerably higher than others which stands at 30.1 deaths per 1000 live births.

## ***Maternal health***

Normally, maternal health means antenatal care, intranasal care (care during delivery) and postnatal care. The status of maternal health care reflects the extent of reproductive and sexual rights enjoyed by women.

Antenatal care (ANC): About 73 per cent of ST women in age group of 15-49 received ANC from a skilled provider as per NFHS-4 record. Skilled providers are doctors, auxiliary nurse, midwives, nurses, midwives, and lady health visitors. This percentage however, is less than the total percentage (79.3%) of all India level and among SCs (77.5%), OBCs (78.2%) and other (85.6 %). Nevertheless it is not a small achievement when most of the tribal areas do not have easy access to such provisions and people depend on traditional beliefs and health care.

Among ST women with a live birth in the past five years, 26.8 per cent during the pregnancy of their last birth took iron and folic acid (IFA) tablets for 100 days or more, 79 per cent received two or more TT injections, 85.9 had birth protected against tetanus and 19.3 per cent took intestinal parasite drug. Percentage of pregnant ST women who had their blood pressure measured was 90.9 and whose blood sample taken was 87 per cent. A urine sample was taken for 86.3 per cent of ST women and 65.6 per cent of women had their abdomen examined.

About 46 per cent of pregnant ST women had taken an ultra sound test which is less than those pregnant women belonging to SC (58.0%), OBC (61.5%) and other (71.0%) social categories. The lower percentage may be accounted for poverty and remoteness of service available tribal women. This is also reflected in lower percentage of delivery taken place in private sector health facility. For ST women it is 11.6 percent while for SC, OBC and women of other categories, the figure stands at 18.1 %, 28.9% and 36.1% respectively. Another noticeable point is higher percentage of home delivery in case of ST women (27.9%) as against 18.5% for the SC, 1.7% for OBC and 14.1% for women belonging to other categories. Remoteness and poverty may be accounted for the reason. Similarly, the reasons for a higher percentage of delivery (3.6%) at woman's parents' home for STs as compared to 2.6 for SCs, 0.2 for OBCs and 2.6 for others may be attributed to customs related to place of delivery. Of course this custom also prevails to some extent in other social groups, though to a very lesser extent.

Fifty nine per cent of ST women had received a postnatal check within 2 days of birth and 26.7 per cent of newborns had a postnatal check in the first two days after birth. It shows that the reproductive and sexual health status of tribal women, though is comparatively low in some cases, it is certainly and steadily progressing.

### Check Your Progress –IV

State whether the following statements are correct or not-

1. The programme of reproductive health is gender specific.
2. Birth defects and developmental disorders are disorders of reproduction.
3. Reproductive health problem is severe among women in patriarchy.
4. Emergence of feminist discourse problematised reproductive and sexual health of women.
5. Reproductive health has no relation with human development.
6. The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) is the important international instrument that specifically affirms the reproductive rights of women.
7. NFHS-4 records a higher fertility rate for tribal women.
8. Sex preference increases the status of women's reproductive health.
9. NFHS-4 records higher infant mortality rate for STs.
10. The perinatal mortality rate encompasses both stillbirths and early neonatal deaths.

#### 4.4 Let us sum up

After reading this unit, you have learnt that

- social problems of STs relating to health and education are exclusionary in nature;
- health problems reflect in the state of malnutrition, reproductive health, alcoholism and drug abuse and in the incidence of HIV/AIDS;
- illiteracy and gender inequality are burning social problems among the STs;
- malnutrition in the form of undernutrition is widely prevalent in ST communities;
- malnutrition leads to nutritional deficiencies and causes nutritional deficiency diseases like anaemia and reflects in nutritional disorders like kwashiorkor and marasmus;
- children are very vulnerable to protein-energy malnutrition;
- malnutrition can be acute, chronic and both acute and chronic;
- nutrition deficiency causes underweight, wasting and stunting;
- nutritional indicators and health status are commonly assessed by using Anthropometry measures in which BMI (body mass index) is a popular measure;
- dietary methods are also used to assess nutritional status and in such methods calorie units are estimated;
- problems of malnutrition emerge in tribal societies consequent upon their integration with mainstream development and the problems are declining over the years as more tribal people enter into higher income baskets;
- poverty, unemployment, migration along with socio-cultural practices cause malnutrition;
- STs have a higher incidence (0.46% as against 0.24 % of country average) of HIV/AIDS and its prevalence is high in the North-eastern states like Mizoram, Manipur, Nagaland, etc.



- causes of HIV/AIDS are unprotected multi-partner sex, transfusion of blood from an infected person, sharing of intravenous needles and syringe by drug addicts, and so on;
- reproductive and sexual health is concerned with human rights in general and women's rights in particular;
- traditional practices relating to reproductive health have undergone changes;
- tribal women have comparatively low reproductive health status in many areas;
- tribal illiteracy rate is higher than other social groups and these rates are higher in some states than in others;
- gender gap in literacy rate is high and this gap is narrowing down ;
- alcoholism and drug abuse is a serious health problem particularly among tribal youths;
- gender inequality existed in traditional tribal society and it exists in present period also. This inequality reflects in literacy, decision making, occupation, health care, etc.;
- violence against women has its root in gender inequality and associated social structure in which women have subordinated position;
- social problems in tribal communities are complex and multi-dimensional.

#### 4.5 Keywords

Anthropometry:	scientific study of measurements of sizes and proportions of human body especially on a comparative basis
Bitot's spot:	whitish patchy triangular/oval/irregular lesions on the side of the eye
BMI (Body Mass Index):	measurement of a person's weight (in kg) in relation to his/her height (in meters squared)
Byagne:	house constructed outside the settlement area for the isolation of menstruating women from the dwelling house. The woman stays there as long as she bleeds
CD4:	white blood cells in the body that play an important role in the immune system. CD4 cells are also called T-cells (T-Lymphocyte (white blood cell)) or helper cells
Child mortality:	death between the first and fifth birthdays
Early neonatal deaths:	deaths in the age group of 0-6 days among live-born children
Fertility rate:	number of live births in women over a specific period of time
Goitre:	swelling on the front of the neck
Index (as used in anthropometry):	a combination of two measurements or one measurement plus the person's age such as weight-for-age, weight-for-height or height-for-age
Infant mortality:	death between birth and the first birthday
Literacy rate (LR):	percentage of literates among the population aged seven years and above
Neonatal mortality:	death within the first month of life

Obesity:	obesity is an overnourished condition-a condition of overweight, involving body fat and increased risk of health problems
Oedema:	a condition characterised by an accumulation of fluid in body tissues and cavities
Overnutrition:	excessive food intake over a period of time
Perinatal death:	deaths comprising stillbirths and early neonatal deaths
Perinatal mortality rate:	the number of perinatal deaths per 1,000 pregnancies of seven or more months' duration.
Postneonatal mortality:	death between the first months of life and the first birthday (often computed as the difference between infant and neonatal mortality)
Stillbirths:	foetal deaths in pregnancies lasting seven or more months
Stunting:	low height for age of the child compared to the standard child of the same age
	Total fertility rate (TFR): average number of children a woman would have by the end of her childbearing years (15-49)
Under-five mortality:	death between birth and the fifth birthday
Undernutrition:	insufficient food intake over an extended period of time
Wasting:	low weight for the height of the child compared to the standard child of the same height.

#### 4.6 Probable Questions

##### Short Answer Questions

33. What are emerging social problems in contemporary tribal societies?
34. What do you mean by malnutrition? What does it mean in the context of tribes?
35. Mention the types and corresponding symptoms of malnutrition.
36. What is Kwashiorkor? How can it be corrected?
37. Why does Kwashiorkor occur? What are the symptoms?
38. Write a short note of marasmus.
39. What do you mean by Anthropometry measure? Define its indices.
40. What are various indices of malnutrition? What are their implications?
41. Write a short note on dietary methods of measuring the condition of malnutrition.
42. Distinguish between clinical and biochemical methods of assessing the status of malnutrition.
43. Mention the nutritional status of Arunachal Pradesh in brief.
44. What is anaemia? Why does it occur? Explain with suitable examples.
45. Write notes on underweight, stunting and wasting.
46. Discuss the steps initiated to fight malnutrition.
47. What is HIV? What are its stages? Discuss.
48. Discuss the causes of spread of HIV/AIDS.
49. Write a note on the symptoms of HIV/AIDS.

50. What do you think of the prevalence of HIV/AIDS among the tribes?
51. Do you think creating awareness will be an effective step to prevent occurrence HIV/AIDS? Discuss the level of awareness among people in brief.
52. Mention various disorders of reproduction.
53. What is reproductive health? Is it gender neutral? Justify your answer.
54. Write in brief various elements of reproductive health.
55. Discuss the status of reproductive health with reference to types of mortality in tribal India.
56. What do you mean by maternal health? Discuss its status with reference to tribal women.
57. Write a note on the trend of literacy among STs from 1961 census.
58. What do you mean by alcoholism? What are its problems?
59. Do you think drug addiction is a serious health problem? Why?
60. Suggest measures to fight against alcoholism and drug abuse.
61. Gender inequality is a phenomenon of contemporary society. Do you agree? Justify your answer with suitable examples.
62. The system of patriarchy is based on the structure of gender inequality. Justify the statement with reference to traditional tribal societies.
63. Write a note on violence against women and gender inequality.
64. Briefly describe gender gap in literacy among the STs.

### **Long Answer Questions**

13. Define malnutrition. Discuss malnutrition disorders with suitable examples.
14. What are the indicators of malnutrition? Critically discuss various methods of measuring malnutrition. Which method do you think is easy to adopt and why?
15. What is Anthropometry? How does it assess conditions of malnutrition? Examine critically.
16. Do you agree that the conditions of undernutrition in tribal communities result from their transition from tradition to modernity? Explain your answer with suitable examples.
17. Critically examine the incidence of malnutrition among the STs.
18. Why does malnutrition occur in tribal communities? Explain in details with reference to the Report of Government of India, 2014
19. Critically examine the emerging problem of HIV/AIDS in India with special reference to the North-eastern states.
20. Critically examine the importance of women's reproductive health from feminist rights perspective.
21. Examine various elements of reproductive health in the context of the tribes.
22. Make a critical assessment of illiteracy in tribal India.
23. Do you think alcoholism and drug abuse are serious health problems? Give reasons to your answer. Discuss the incidence of alcoholism and drug abuse in tribal India.
24. Critically examine the incidence of gender inequality among STs with reference to education, health, occupation and empowerment.

## 4.7 Answers to Check Your Progress

### Check Your Progress –I

1. True   2. False   3. False   4. False   5. True   6. False

### Check Your Progress –II

11. weight and height
12. acute
13. *protein*-energy malnutrition
14. protein deficiency
15. wasting
16. traditional eco-system
17. Dietary
18. overnutrition
19. undernutrition
20. food security

### Check Your Progress –III

6. ST category
7. Communicable disease
8. **HIV virus spreads through contact with the infected fluids like blood.**
9. Unsafe sex in the age group of 15-39
10. IEC (information, education and communication) campaigns are organised to create HIV/AIDS awareness among the people.

### Check Your Progress –IV

11. incorrect
12. correct
13. correct
14. correct
15. incorrect
16. correct
17. correct
18. incorrect
19. incorrect
20. correct

### Check Your Progress –V

7. ii. 91.47%

8. i. 76.8%
9. ii. 19.9 percentage points
10. i. 2001 census
11. i. 6.57%
12. i. inheritance of ancestral property

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