

ROLE OF WOMEN IN RURAL TRIBAL SOCIETY : A STUDY BASED ON A MISHING TRIBAL VILLAGE, ASSAM

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ABSTRACT

Women play a vital role in society. It has been recognized that for an accelerated socio-economic development any community that active participation of women in the entire process is very essential. It is the women who are capable of building such children who may lead the country to the path of progress and prosperity. The status of women in society shows the basic appearance of societal progress. Development of the society depends upon the proper realization of women's role who lead the family mainly in Indian scenario. Therefore, women of tribal society have the vast and peculiar role in their way of life whole over the world. There are mutual duties between men and women in tribal societies.

The life of Mishing women is really very tough. But work is worship for them. From the very morning till night mishing women engaged themselves both household works and agricultural works. Mishing women may be illiterate, but they extremely hard working, industries and proficient in their own spheres.

THE OBJECTIVES OF THE STUDY ARE :

1. To study the educational development among tribal women.
2. To find out the availability of infrastructural facilities of health in the village.
3. To study the level of health awareness among the tribal women in the village.
4. To study the role of tribal women in health and sanitation aspects in the village.

The study will be complied with the help of both primary and secondary data and the study area will be Jorhat District, Assam.

INTRODUCTION :

India can proudly be called the largest tribal population in the world in which the scheduled tribes constituted 8.2 percent of India's population according to 2001 census. North-east India is the homeland of a large number of tribes and there are about 145 tribal communities of which 78 are large each with a population of more than 5000. They constitute around 12 percent of the total tribal population of India and 25.81 of the total population of North-East India. The popular image and perception of tribal women is that they enjoyed much better social status than their non tribal counterparts

as the tribal women have no fear of early marriage, no stigma of widowhood, have the freedom of divorce and remarriage and earns in her own way to get economic independence.

Women play a vital role in society. It has been recognized that for an accelerated socio-economic development any community that active participation of women in the entire process is very essential. It is the women who are capable of building such children who may lead the country to the path of progress and prosperity. The status of women in society depends upon the proper realization of women's role who lead the family mainly in Indian scenario. Therefore, women of tribal society have the vast and peculiar role in their way of life whole over the world. There are mutual duties between men and women in tribal societies. From the very morning till night mishing women engaged themselves both household works and agricultural works. Mishing women may be illiterate, but they extremely hard working, industries and proficient in their own spheres.

Like in any other human societies, women constitute half of the total population in the tribal societies also. If the half of the population are kept crippled, no desired development can be achieved. The conceptual framework to assess women's status consists of seven roles played by women at different stages in life : parental, conjugal, domestic, kin, occupational, community and as an individual. As has already been said that the social groups of north-eastern region of the country are governed by three social patterns. Many of the tribal groups of Assam, such as the Bodos, the Mishings, the Deoris, the Karbis, the Sonowal Kacharis including the tribes of Arunachal Pradesh, Nagaland, Manipur, Mizoram, Sikkim and Tripura etc., for instance, are governed by patriarchal pattern of social structure while the Khasis and Garos of Meghalaya by matrilineal one. At the same time, some clans of the Rabhas, especially living between the border of Assam and Meghalaya and the Dimasas of Dimaraji of Assam are found to be bilinear in social structure. Patriarchy denotes a culture of power relationship that conditions man's supremacy and women's

subjugation. It encompasses institutional endorsement of man's dominance in society.

Keeping this prevailing condition in view an attempt was made to study the role played by women in rural tribal society. A field study was conducted in a tribal village of Assam inhabited by the Mishing tribe. The state of Assam located in the north-eastern part of India is a mosaic of tribes living in the hill and plain areas. Among the tribes the Mishings (Miris) is the second largest tribal group in the plains and one displaying the closest rapport with the mighty river Brahmaputra. As a rule the Mishings build their houses by the bank of a river perpendicular to its main stream. They build their houses on bamboo platforms raised about 5 ft. above the ground supported by rows of wooden posts. They generally live in one long rectangular hall varying from 50-150 ft. in length and 15-20 ft. wide. A typical Mishing house has no complete inner position. Educationally the Mishings are not advanced. Regarding their education no proper statistical data is available. These people are also backward in different spheres of life. It is worth mentioning here that Jorhat District where this village is situated is one of the educationally advanced district of Assam. The main occupation of the Mishing is based on agriculture and poultry. The rural Mishing women are engaged in agriculture, poultry, weaving and handicraft. So the role of this tribal women needs to be studied.

OBJECTIVES :

The objectives of this study can be mentioned as follows :

1. To study the educational development among tribal women.
2. To find out the availability of infrastructural facilities of health in the village.
3. To study the level of health awareness among the tribal women in the village.
4. To study the role of tribal women in health and sanitation aspects in the village.

METHODOLOGY :**A) Selection of the universe :**

The universe of the study is one of the tribal village of Assam which is inhabited by the Mishings i.e. one of the important plain tribes of Assam. The village is 'Bahfala' which is situated in the district of Jorhat under Dhekargara Development Block, Jorhat district, Assam. Originally, according to a popular belief, once there was a young man in the village who could pull apart a bamboo (Bhaluka) with his hands and such an astounding feat of the youngman resulted in the name of his village 'Bahfala'. It is a flood affected area and lies at a distance of 20 km from the nearest city Jorhat and about 4 kms away from the river Brahmaputra. In the north of the village there is Lality village and in the south there is Dhankhuloi village. In the east and west there is Kolbari village and Charigaon and Neul Gaon. The nearest primary health center is located in the nearest neighbouring village Kolbari. All these villages inhabited by the Mishings and Deori tribes.

'Bahfala' is purely a Mishing village in a Mishing dominated area at a distance of 3 km. In the north-west of Alengmora Road which is the subdivision of Dhekorgara Development Block under Jorhat district. It is under the jurisdiction of North-West Gaon Panchayat. There are only five (5) primary schools located in the village. One (1) Middle School situated about 1.5 kms away from the village, One (1) High School and Higher Secondary School is situated about 3 kms away from the village. One (1) Junior College is situated about 1 km away from the village. One (1) Degree College is situated at a distance of 10 kms away from the village. There are 329 households in the village and the village population is about 2250.

B) Sample :

There are 329 total households in the village which are found during the time of the field study. The head of the total 75 household were selected randomly as respondents for the present study.

C) Types of data :

Both primary and secondary data were collected for the study. To collect the primary data two processes had been applied.

- (1) Interview schedule
- (2) Participation observation

The secondary sources of data were collected from books, magazine, internet, different articles published in various Journals and Census Report and also from the villagers.

FINDINGS AND DISCUSSION :

Regarding formal educational development among women we found 8 (eight) graduates and 3 post-graduate women, 25% women's education is upto the high school standard and 50% women's are illiterate. When nearly 50% of women have not attended school, the question is what were they doing? From our queries we arrived at a conclusion that many of them got married early and became mothers, many were involved in household work, working in fields, looking after younger seedlings or working in unorganized sectors. Also due to various reasons there is skepticism about the utility of education. What so ever their views regarding education may be we all know that in the present day context.

It is found that the infrastructural facilities of health in the village is almost non-existent. There is no primary health center in the village, the nearest PHC which is located in the nearby Kolbari village functions in a very erratic manner. We gathered from the villagers that the government appointed doctor visits the center only seven or eight times in a month so the work at the center is conducted by the compounder assisted by a government nurse who is expected to work in various capacities according to the need of the hour. A large section of women are also unaware of pulse-polio immunization and about the availability of Vitamin-A in government centers.

Regarding health awareness among these women it was found that they had lower awareness among these women it was found that they had lower awareness because of their ignorance regarding various health issues, lack of adequate time, low purchasing power and above all certain cultural

beliefs and traditional practices attached with them.

The role of mass media is important in creating awareness among the people, but in this particular village its impact was not found to be very satisfactory. Printed media has failed to create any awareness among the villagers. Only a handful of villagers particularly men have access to the newspapers but that too not on a regular basis. Only about 7% villagers are in possession of modern gadgets such a radio and tape-recorder. Only 5% families have T.V. which they operate on the battery system due to lack of electricity in the village.

The basic elements of quality of life essentially includes safe drinking water, food security, self-shelter and sanitation. It is an accepted fact that 60-80% of all illness is caused due to unhealthy sanitary condition and unsafe drinking water. Even elementary sanitary facilities are non-existent in this

village. Defecation in the fields is the only form of sanitation.

CONCLUSION :

It can be concluded that lack of education, infrastructural facilities of health, communication, mass media, existence of social tribes and norms and lack of information are major hindrances in creating health awareness among women in the village. Due to various issues tribal women are lagging behind in their educational level that non-tribal women. Social activities, government organization and administration, educationists and thinkers of different sections of the society can have positive impact towards great socio-cultural, educational and progressive transformation of the tribal women. Present finding indicate that women have vital and changing roles as tribal society. In this study can not be generalized for all rural society.

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