

# Socioeconomic and Demographic Status of Tribal Communities of Assam: A Comparative Study

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Abstract:- Tribal of Assam are mainly the Kirata people of Sino-Tibatan linguistic family of Tibeto-Burmese branch. These consist of Boro & Boro kachari, Miri(Mishing), Karbi, Rabha, Sonowal Kachari, Lalung(Tiwa), Garo, Dimasa Kachari, Deori, Hajong, Kuki Tribes, Naga Tribes, Khasi, Jaintia, Synteng, Pnar, War, Bhoi, Lyngngam etc. To understand the part of population of our country, especially the backward section or a part, it is imperative to know their detail scenario, causes, consequences and circumstances of existing socio-economic condition. A successful study on them can enhance the efficiency of policy measures to carry out interventional as well as welfare measurement. The socioeconomic status is based on qualitative as well as quantitative approach to make some inference regarding life standard of tribal community. To examine the socio-economic status of tribal and nontribal, their population should be investigate under the head of demographic, education, health, poverty and employment. This paper attempt to analyze the socio-economic status of tribal communities of Assam(India) based on NSSO and census data.

Key Words- Tribal, Assam, Socio-Economic, Population, Demography, Community.

# 1. INTRODUCTION : -

Socio-economic status is a way through which we can ascertain the measure of material upliftment of backward classes, who suffers poverty, vulnerabilities of all sort. Scheduled Tribes (Hereafter ST) are the major sub-set of these backward classes (Sagar & Pan 1994). So this study provides special focus on the study of the vulnerable sub-set (i.e. ST) in the neglected region north-east (hereafter N-E) from national perspective. The N-E region is far behind in developmental indicator like GSDP percapita, NSDP Per-Capita, life expectancy, health status etc. as compared to the national average of the same. The NSDP Per-Capita of Assam is lower than national average in 2009-10, which is lowest among the N-E states in the same year. On the other hand Assam is the gateway to N-E, which alone holds 68.61% (Census,2011) population share of the north-eastern region with 3.7% (followed by Meghalaya with 2.5% on 2011) of national tribal population share, highest among N-E states. Therefore, the socioeconomic study on the life standard of tribal population of Assam is absolutely

indispensible and unavoidable.

The research covers the social group based study to fulfill the local needs, aspiration and to know the socioeconomic deficiency of those vulnerable groups to bridge the research-gap that the previous researchers have not undertaken. Positively, it will be helpful implement adequate



planning and policy measures for targeted vulnerable groups to reduce poverty, communal disparity and to improve national unity. Otherwise the unsolved economic cause may create growing threat from separatist, riots, insurgency, and communal violence among a group of people due to inequality, poverty, unemployment with tribal discontentment.

## STATEMENT OF THE PROBLEM:

According to Karl Marx (1867) unequal distribution of income and wealth is the mother of regional disparities, social disparity and development of two economic classes i.e. Bourgeoisie and Proletariat. This has been considered as the main problem faced by developing countries. A moderate difference among classes, castes even within a common geographical area is unavoidable. There are a numbers of cultural (Young, 1998), traditional and religious (Report, 2014) factors for differences among them, above the economic consideration. This socio-economic status study will help us to detect, differentiate and extract out the responsible factors and categorize as social, economic, cultural, tradition, geographical etc. The differences among communities considered to be precarious due to vigorous economic discriminations.

# 2. METHODOLOGY:-

To examine the socio-economic status of tribal and non-tribal, their population is investigated under the head of demographic, education, health, poverty and employment. Demographic status is investigated by population, population growth, sex-ratio, child sex ratio. Education status is measured by literacy rate, population percentages at different educational level, male & female, ruralurban, enrollment ratio, dropout, gender parity index(GPI). Health status is measured by sex-rate, mortality rate, fertility rate, healthcare availability, clean water availability, sanitary facility, open defecation, type of cooking fuel, intoxicant consumption. Employment status is measured by population percentages in different occupation, main & marginal worker by gender and social group, work participation rate

(hereafter WPR). Poverty is measured by calorie intake, monthly consumption (in  $\Box$  0.00) by rural & urban area.

For all these studies, only secondary data used from NSSO 68<sup>th</sup> round, NSSO reports, various census records, national family health survey report, ministry of tribal affaires govt. of India report, planning commission of India, statistics of school education report, statistical hand book of government of Assam etc.

## **OBJECTIVES OF THE STUDY:-**

(i) To analyze the socio-economic and demographic status of tribal communities of Assam.

(ii) To investigate the welfare status of tribal communities of Assam.

(iii) To ascertain the social overhead like health and education status of tribal communities of Assam.

## Mathematical and Software Tools and Instruments Used in the Study :

Different graphs (Pie graph, Bar graph etc), diagram, line is also taken as instruments to present and compare data. Sampled data presented in tabular form.



The empirical operation involves computer programs like MS-Excel, Software package like 'IBM SPSS Statistics 20 etc. in order to extract, analyze, classification and enumeration of empirical results.

# **COMPARATIVE DEMOGRAPHIC STATUS**

*District Wise Distribution Tribal Population - :*The district wise Demographic scenario of tribal of Assam is presented bellow. From which, we can have a precise perception about their concentration in different geographical locations of Assam.

Distric	t Wise Population D	Table-01	al Population Share i	n Assam
Name of the	Total Population	ST	% of ST to total	
District	rotar ropulation	Population	population	Assam Total ST
2 15 11 10		1 op manon	Population	
Kokrajhar	887142	278665	31.41	7.17
Dhubri	1949258	6332	0.33	0.16
Goalpara	1008183	231570	22.97	5.96
Barpeta	1693622	27344	1.63	0.70
Morigaon	957423	136777	14.28	3.52
Nagaon	2823768	115153	4.07	2.96
Sonitpur	1924110	232207	12.07	5.97
Lakhimpur	1042137	249426	23.93	6.42
Dhemaji	686133	325560	47.45	8.38
Tinsukia	1327929	82066	6.18	2.11
Dibrugarh	1326335	102871	7.75	2.64
Sibsagar	1151050	49039	4.26	1.26
Jorhat	1092256	139971	12.83	3.60
Golaghat	1066888	111765	10.47	2.87
Karbianglong	956313	538738	56.33	13.86
Dimahasao	214102	151843	70.92	3.91
Kachar	1736617	17569	1.01	0.45
Karimganj	1228686	1940	0.15	0.04
Hailakandi	659296	691	0.11	0.01
Bongaigaon	738804	18835	2.55	0.48
Chirang	482162	178688	37.06	4.60
Kamrup	1517542	182038	12.00	4.68
Kamrup(M)	1253938	75121	6.00	1.93
Nalbari	771639	23364	3.03	0.60
Baksa	950075	331007	34.84	8.52
Darrang	928500	8419	0.91	0.22
Udalguri	831668	267372	32.14	6.88
Total -:	31205576	3884371	12.44	100

Source—Census Commission Report 2011, India

It is evident that Karbianglon(56%) and Dima Hasao(71%) has the largest ST population to their respective total population. Hailakandi(0.11%) have been the least. Karbianglong(13%) also contribute highest share to total tribal population of the state, followed by Baksa(8.5%),



Dhemaji(8%) and Kokrajhar(7%). Hilakandi(0.01%) contributed the lowest tribal population share. The scenario will be more clear from the following figure..

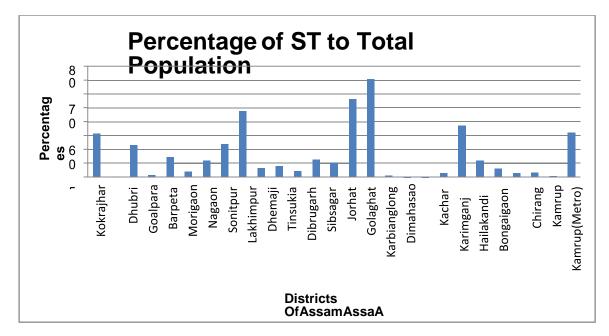


Figure -: 01 District Wise Tribal Population Distributions

The figure above illustrates that Kokrajhar, Dhemaji, Karbianglong, Dimahasao, Chirang and Udalguri districts of Assam have the tribal population above 30% of their respective population as a whole.

# Socio-Economic Status of Tribals of Assam

**Educational Status -** Educational status of targeted population plays a vital role. Education is an important component for all round development of an individual, of a household and finally for a society. It positively changes the income level, the choices among different commodities by making people aware of their social, political, cultural status, quality of life and health with improved socio-economic status. Literacy rate is the pivot factor that can develop HDI, as necessary & indispensible equipment for a better socio-economic status. The literacy position of Assam (72.2%) is not equal to the national (74.04%) literacy rate. Nevertheless,

Assam (66.27%) is above the national (65.46) female literacy rate. From STs points of view, Assam (71.01) is in a comfortable position as compared to the national average for STs(59.00%). Here we have been pursuing chiefly the internal comparative literacy scenario of ST population of Assam as follows..

Gender wise STs Comparative Literacy Rate with All India (in %)												
State/UT		Total ST Rural ST Urban ST						Overall				
									Populati	ion		
	Р	М	F	Р	Μ	F	Р	М	F	Р	Μ	F
Assam	72.1	79.0	65.1	70.9	78.0	63.8	90.0	93.7	86.3	72.2	77.85	66.27
All India	59.0	68.5	49.4	56.9	66.8	46.9	76.8	83.2	70.3	74.04	82.14	65.46

Table – 02 Gender wise STs Comparative Literacy Rate with All India (in %)



P=Person, M=Male, F=Female

Source- Census Report, India- 2011

From gender wise comparison of literacy STs (79%) male have been in a better position than the state average for male (77%). ST females (65.1%) are comparatively less literate on an average than others (66.27%). STs literacy rate have been increasing sharply in the last decade (15.4%) as compared to the overall literacy growth rate (14.1%). The literacy gaps have been decreasing from 3.7% in 1991 to 0.7% and 0.1% during 2001 and 2011 respectively with the state. It shows a higher probability for literacy gap to cross the state average within the current decade (Table-3). This is clear from the following table...

Table -(
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Comparative Literacy Rate of STs and Their Literacy Gap with Assam Overall (In%)

Census Years	All Assam	ST Assam	Decadal Growth I	•	Literacy GAP Between Assam overall & ST
			Assam	ST	
1991	52.9	49.2	-	-	3.7
2001	63.3	62.5	19.7	27.0	0.7
2011	72.2	72.1	14.1	15.4	0.1

Source- Census Report, India- 1991, 2001, 2011

Some other educational indicators like GPI, GER, and dropout can provide a broad picture, without which the complete educational scenario of STs of Assam will not be clear. The following table shows a comparative picture with its national counterpart....

#### Table-04 Comparative GER, Dropout, GPI and Girls-Boys Ratio in Different Stages of Education among STs

	1			5015	1		1		
Class	*GER A	All India	ST Dro	pout	**GPI		Number of ST Girl Per 100 Boy's		
	STs								
	India	Assam	India	Assam	India	Assam	India	Assam	
Classes I - V (6 - 10 Years)	137	106	35.6	25.7	1.00	1.02	94	100	
Classes VI - VIII (11 - 13 Years)	88.9	82.7	-	-	0.96	0.98	91	97	
Classes I - VIII (6 - 13 Years)	119.7	96.8	55	53.4	0.99	1.01	93	99	
Classes IX - X (14 - 15 Years)	53.3	51.2	-	-	0.86	0.85	81	87	
Classes I - X (6 - 15 Years)	106.8	86.7	70.9	-	0.97	-	92	97	
Classes XI - XII (16 - 17 Years)	28.8	15.5	-	_	0.76	-	74	71	



Classes IX - XII (14 - 17 Years)	41.5	33.1	-	-	0.82	-	78	83
Classes I - XII (6 - 17 Years)	94.8	73.5	-	-	0.96	0.96	91	96

Source: Statistics of School Education 2010-2011

It is clear that the GER for tribal in Assam is lower than its national counterparts at each and every stages of education. While, number of girls per hundred boys for STs of Assam is higher than all Indian number for STs at all stages of education except in the higher secondary stage (i.e. class XI,XII).. School dropout among STs of Assam is 25.7 and 53.4 at I-V and I-VIII level respectively, which is lower than the national average (35.6 and 55 for the same) for STs. GPI for STs are higher , than its national counterparts.

Further, the number and percentage of ST student enrolled in different educational level & discipline in the year 2012-13 is represented in the following table. In percentage term, their total enrolment is highest in HS level (18%). It indicates more proportion of STs enrolled in higher studies.

Table- (	)5
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Number and Percentage of ST Student Enrolled in Different Educational Level & Discipline (Session

Level of Education	Total	Number of ST	% of ST
Lower Primary	40,49,643	4,46,328	11.02
Upper Primary	18,03,635	2,40,387	13.33
High School ( Class-IX,	8,64,030	1,52,691	17.67
X)			
Higher Secondary (XI,	3,13,128	56,880	18.16
XII)			
Graduation(B.A., B.Sc.,	2,39,837	26,410	11.02
B.Com)			
P.G.(M.A, M.Sc,	16,851	1,772	10.52
M.Com)			
Engineer (B.E.)	935	142	15.18
LLB & LLM	7,852	578	7.36
M.Phil & Ph.D.	1,393	118	8.47

Source - Statistical Handbook, 'Directorate of Economics and Statistics'

Govt. of Assam-2015

As STs consists of 12.45% of total population of Assam, from this perspective their representation at any educational level is not bad. Their representation is lower at higher education like research, law, P.G. and Graduation. Notwithstanding they have higher representation in Higher Secondary and Engineering courses (15.18%). It can be summarized with the following Pie diagram.



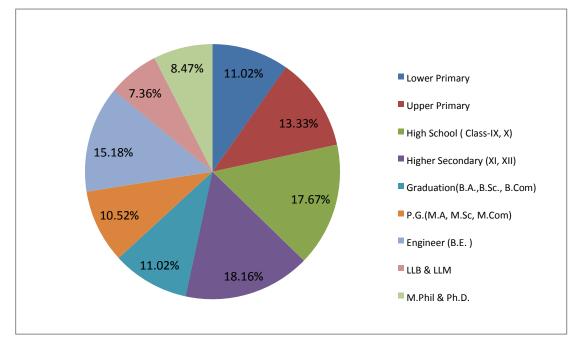


Figure-2 ST Students Representation to the Total Enrolment in Different Educational Level

As stated above, the educational attainment for STs of Assam is not absolutely good. In spite of the fact, if we compare the population and educational attainment ratio, than it is more or less same with state overall.

**Education and Health Expenditure:** To know the life standard of a household, consumption spending make by the household on education and health is imperative to obtain. It reflects the living condition and arrangements for a household to ascertain a rough idea about their welfare attainment. The following table shows the social group wise consumption spending on education and health ...

Table—06 One-Year Comparative Consumption Expenditure on Education & Health Items in Assam  $(\Box 0.00)$ 

Item	ST	ST SC O		OBC	OBC Ge		Genera		All Assam	
Consume							1			
d	□ 0.00	%	□ 0.00	%	□ 0.00	%	□ 0.00	%	□ 0.00	%
				19.5		18.9		18.2		
Educatio	1192.4	12.7	1984.8	2	2073.9	4	2073.7	3	1932.9	17.8
n	0	8	3		5		2		3	6
				3.50		2.57		3.39		
Medical	145.56	1.56	356.25		281.39		386.43		316.39	2.92

Source – Authors own calculation from NSSO 68<sup>th</sup> round, type-1 data(2011-12)

From the above table it is evident that ST population of Assam spends the least percentage share of consumption spending on education(12.78%) and health(1.56%) as compared to all other social groups of Assam. Whereas, All Assam overall percentage share of expenditure on the both are 17.86% and 2.92% respectively. In rupees term average ST household spends only



 $\Box$  1192.40 on education and  $\Box$ 145.56 on health per month respectively instead of the state average of  $\Box$ 1932.93 and  $\Box$ 316.39 for the same.

Similarly the socioeconomic status of a household depends mainly on educational status of the household head more than the overall literacy of the family. Lower the educational status of the household heads, more likely to be lower productive capacity and higher probability to be a lower standard of living. Similarly, higher the educational status of household heads, higher will be standard of living and vice versa. Therefore, study of household heads educational status is inevitable, which is evident from the following table.

Social-Group wise Percentage of Household-Heads in Different Educational Levels (In %)									
Educational level	State	ST	SC	OBC	General				
	Average								
Illiterate	21.1	21.1	16.8	19.9	22.8				
Below Primary	19.7	19.1	18.5	20.0	19.9				
Primary	20.6	23.7	20.3	18.9	20.6				
Middle(ME)	20.0	21.9	21.7	21.7	18.2				
Secondary	10.2	8.8	13.9	10.9	9.4				
Higher Secondary	5.7	4.0	5.5	6.1	6.0				
Diploma/Certificate	.1	.0	.1	.1	.1				
Graduate	2.3	1.2	2.7	2.3	2.6				
PG or Above	.3	.2	.5	.2	.4				
Total	100.0	100.0		100.0	100.0				

Table-07

Source – Authors own calculation from NSSO 68<sup>th</sup> round, type-1 data(2011-12)

The Table- 07 indicates social-group wise percentage share of household heads in different educational level of total sampled data. It is clear that there is less illiterate ST household heads (21%) than the general category (22%). However, illiteracy is high as compared to OBC (19%) and SCs (16%). Besides, less highly educated household heads has been seen among STs. From the sampled data it is evident that, a minor proportion among ST household heads acquires highschool passed qualification or above, which is lowest as compared to all social groups (SC, ST, OBC & General)



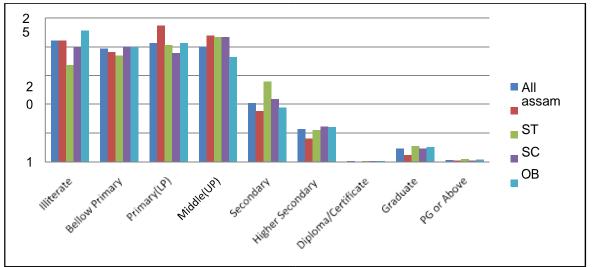


Figure :03 Social-Group wise Percentage of Population in Different Educational Level

From the above figure based on NSSO sampled data (Table-08) it is clear that most of the ST household-heads are above the primary level of education. Most of the ST household heads are primary (23%) & middle (21%) level qualified compared to all remaining social-groups (20%). The high school (8%) and higher secondary (4%) qualified household head is despite least among them. Besides, lowest percentage of ST household heads have higher academic qualifications ,like diploma/certificate(0%), graduation(1%) and PG & above(0.2%) educational qualification as compared to other social-groups .From this NSSO data , it is evident that , heads of ST households are not highly educated .

Lower the educational status of people, lower will be the productivity and hence will be least income, therefore expenditure and finally low standard of living. Similarly, higher the educational status, higher will be standard of living and vice versa.

From the above, we can find out quite an appreciable picture of STs Literacy scenario. The female literacy rate (65.1%) among them is satisfactory as compared to the national(49.4%) ratio for the same(Table 02). However, intra-tribal differences in educational attainment among STs are not negligible. Higher intra-tribal discrimination will definitely hinder the government welfare programs to reach to the needy and backward section. In such circumstances, government welfare policies will be inappropriate and workless unless resolving these differences. The following table provides a picture of STs intra-community differences in the state. ..

Intra-Thom Socio-Economic and Demographic Structure of Assam										
Tribe		Populati		Sex		Liter	acy	Working	Main	Margi
		on			Tot	Mal	Fema	Population	Work	nal
					al	е	le	(In	er	Worke
	Total	Male	Femal				-	%)		r
			e							
Boro & Boro	1,361,7	682,931	678,80	994(963)	70.	77.9	63.2	43.3	68.6	31.4
kachari(Inclu	35		4		6					
ding Sarania,										
Modahi etc)										

Table-08 Intra-Tribal Socio-Economic and Demographic Structure of Assam



Miri(Mishing	680,42 4	345,786	334,63 8	968(946)	69. 3	77.4	60.9	47.7	60.8	39.2
Karbi	430,45 2	217,758	212,69 4	977(957)	67. 9	75.2	60.5	38.7	65.1	34.9
Rabha	296,18 9	148,887	147,30 2	989(960)	75. 1	81.5	68.7	47.2	66.2	33.8
Sonowal Kachari	253,34 4	127,692	125,65 2	984(939)	85. 4	90.4	80.5	44.4	62.6	37.4
Lalung(Tiwa)	200,91 5	100,468	100,44 7	1000(10 15)	52. 9	58.7	47.1	44.9	69.0	31.0
Garo	161,39 2	81,278	80,114	990(952)	70. 4	73.7 5	67.05	41.75	64.3	35.7
Dimasa Kachari	102,96 1	51,832	51,129	986(971)	70. 1	76.8	63.3	41.0	73.3	26.7
Deori	43750	21938	21812	994(907)	83. 3	89.3	77.3	49.3	61.7	38.3
Hajong	34689	17608	17081	970(968)	61. 3	70.9	51.5	45.9	69.4	30.6
Kuki Tribes, including:**	33,399	17,220	16,179	940(897)	84. 0	87.8	80.0	40.8	75.5	24.5
	29,767	14,905	14,862	997(958)	80. 7	87.3	74.1	38.1	73.6	26.4
Dimasa*	19,702	9,738	9,964	1023(96 5)	84. 6	88.6	80.7	38.9	66.1	33.9
Khasi, Jaintia, Synteng, Pnar, War, Bhoi, Lyngngam	15,936	7,916	8,020	1013(10 38)	42. 9	43.6	42.3	45.6	83.5	16.5
Hmar	15,745	7,964	7,781	977(966)	92. 9	95.3	90.3	40.5	78.8	21.2
Mech	9,883	4,968	4,915	989(881)	87. 7	92.2	83.2	41.4	63.9	96.1
Barman in Cachar	6,716	3,398	3,318	976(855)	76. 0	81.9	70.0	42.8	73.4	26.6
Singhpho	2,342	1,175	1,167	993(860)	85. 8	91.7	79.9	45.8	66.1	33.9
Chakma	2,032	1,043	989	948(106 1)	28. 0	36.8	18.5	42.3	79.7	20.3
Man (Tai speaking)	1,269	644	625	970(109 4)	89. 7	94.1	85.2	38.9	82.0	18.0
Khampti	1,106	566	540	954(100 0)	85. 9	95.3	76.0	50.8	62.1	37.9
Mizo (Lushai) tribes	880	419	461	1100(10 22)	94. 4	96.3	92.8	36.9	91.4	8.6
Hojai	642	327	315	963(875)	61. 5	72.7	50.0	52.0	82.9	17.1



Lakher	37	20	17	850(125	42.	50.0	33.3	56.8	66.7	33.3
				0)	9					
Pawi	3	1	2	2000(-)	100	100	100	33.3	100	00
Syntheng	5	2	3	1500(10	33.	100	0.0	0.0	-	-
				(00)	3					
Generic Tribe	179056	-	-	-	-	-	-	-	-	-
All ST Assam	388437	195700	19273	985(957)	72.	79.0	65.1	44.0	65.9	34.1
	1	5	66		1					

Note: Numbers in parentheses are the child sex ratios. Source-Census Report India- 2011

It is observed that the communities who have at least 1 lakh population, Sonowal Kacharies have the highest literacy rate (85%). This is much above the state (72%) and national (74%) average. This is followed by Rabhas (75%) and Boro & Boro Kacharies (70%). Although, among small communities with small numbers of population Mizo's(Lushai) are highly literate(94%) followed by Hmar(92.9%). Regarding female literacy rate Sonowal kachari(80.5%), Rabhas(68.7%) and Mishing(60.9%) respectively in better positions.

**Health Status** – Health status as basic amenities of life standard is crucial to consider in welfare studies. There is a contradiction that higher health status definitely reduces consumption of pharmaceuticals & medical services. In contrast, high health alertness & precautionary measures are positively related with expenditure. The argument will be true according to society, place, environment and changing of time. Besides, availability of family health service reduces population growth, maternal mortality, infant and child mortality, life expectancy with nutrition, childcare facilities. Non-availability of proper heath service, health awareness and contraceptive measures leads to increasing rate of population growth and abnormalities. Therefore the health issues concerned with the socio-economic status of tribal have been discussed as follows .....

**Population & sex ratio** – Presently Assam consists of 12.45% of tribal population. The STs(17.40%) population growth had been higher than the state(17.07%) population growth rate , despite it is lower than the national(23.66%) growth rate for STs. From this, it is clear that STs of Assam is at better status in respect of decadal growth rate of population as compared to the national level. In comparative sex ratios, STs (985) of Assam is in a better position compared to the overall (958) status, but slightly lower than the national average (990) for the same. This is clear from the subsequent table

			2001				2011		
	State/Union	ST	Rural	Urban	Overall	ST	Rural	Urban	Overall
		Total	ST	ST		Total	ST	ST	
% Share of	India	8.2	10.4	2.4	-	8.6	11.3	2.8	-
ST to the	Assam	12.4	13.6	4.5	-	12.4	13.7	5	-
Total									
Population									
Sex-Ratio	India	978	981	944	933	990	991	980	940
	Assam	972	974	929	935	985	984	996	958

 Table —09

 Percentage Share of ST Population to the Total Population & Sex-Ratio

Source- Census Report India- 2001 & 2011



The difference of STs with national average may be due to demographic and geographical diversities.

Similarly regarding child sex ratios of 3 decadal records shows that, in the year 2001,

	Table -10											
Comparison of Child Sex Ratio (Population 0-6 age group) : Census 1991, 2001 & 2011												
State/UT	Census -	- 1991		Censu	s – 2001		Census	Census – 2011				
	Total	General	ST	Total	General	ST	Total	General	ST			
India	945	940	985	927	919	972	914	910	957			
Assam	975	973	990	965	966	962	957	963	957			

 $T_{a}h_{a} = 10$ 

# Source- Census Report India- 1991, 2001 & 2011

child sex ratio for STs of Assam was not satisfactory as compared to the national average for the same. It was even lower than the state overall ratio. In spite of the fact, in 1991 and 2011 the child sex ratios for tribal of Assam were more or less the same with the national and state average.

If we observe the intra-tribal comparative sex ratio, we can observe that among the major tribal communities Boro & Borokacharis (994) has the highest sex ratio, followed by Rabhas (989) (Table -05). Child sex ratio also, follows the similar pattern.

*Mortality* -: Population & sex ratio only provides the basic structural concept of the population. The complete health issue is related with mortality, life and death etc. The following table can provide a hint about present mortality statuses of STs.

## Table -11

Comparative Neonatal Mortality Rate (NNM), Infant Mortality Ratio (IMR), Child Mortality Rate (CMR) for STs in Assam<sup>2</sup>

	1						1	/					1					
Union/Sta	Ne	onata	al N	Iorta	lity ]	Rate	Inf	ant N	/lor	tality	y Ra	ate	Child Mortality					
t	199	92-	199	98-	200	5-06	199	92-	199	98-	200	)5-	199	2-	199	8-	200	5-06
е	93		99				93		99		06		93		99			
	S	Tot	S	Tot	ST	Tot	S	Tot	S	Tot	S	Tot	S	Tot	S	Tot	ST	Tota
	Т	a	Т	a		a	Т	a	Т	a	Т	a	Т	a	Т	a		1
		1		1		1		1		1		1		1		1		
Assam	4	52	3	37	43	48.1	9	89	5	62	5	74	15	142	74	80	83	100.
	8		3				0		9		9		0					9
					9													
India	5	49	5	43	39	34.5	9	79	8	68	6	48.9	13	109	12	95	95	59.2
	5		3		. 9		1		4		2		5		7			
																	7	

Source - Report of the High Level Committee on Socio-Economic, Health and Educational Status of Tribal Communities of India, "Ministry of Tribal Affairs, Government of India, May-2014"

 $\overline{2}$ 

IMR – Death of Child per 1000 live birth under 1 year of age from the day of birth (WHO). CMR – Child mortality rate is rate of death of child from 1 month to under 5 years of age of per 1000 live birth (WHO) NNMR



-Death of child per 1000 live birth within 28 days from the day of his birth (WHO)

The neonatal mortality of STs(43) of Assam had been in a better position as compared to nonSTs(48), but above the national average(39) for STs during 2005-06. Further, regarding IMR also, STs had been in a better (59) position as compared to the state average (74) and its national (62) counterparts in 2005-06.

Similarly, in CMR STs (83) had been in a comfortable position than Non-STs (100) in the most recent existing studies.

Availability of medical facilities, like receiving health care by children within 24 hour of birth, inclusion of children under immunization programs, place of delivery etc has considerable impact on the health status. This finally depends upon availability of hospitals, dispensaries, doctors etc (Report, 2014).

(a) Other health issues (Fertility, Immunization, Clean water & Fuel, Sanitation, Health-Activist etc.)

Lifestyle of population, whether they use mineral tap-water, clean fuel also affects the health status of those people. All of these are as follows,

Fertility Rate (2005-06) of ST and General									
UT/State	ST	Others/General							
India	3.12	2.35							
Assam	2.5	2.7							

Table-12 (2005-06) -of CT and C - -

Source: International Institute for Population Sciences (IIPS). National Family Health Survey, (NFHS-3), 2005-06: India. Mumbai

The table above shows that in fertility position STs (2.5) had been in a better stage as compared to nonSTs(2.7) and their national counterparts(3.12) during the year 2005-06. This is inspiring for STs.

Table -13										
Comparative Child Health Issues for STs of Assam (in-%)										
Child Health Issues	ST	Non-ST								
Institutional Delivery	34.2	35.1								
Children Received full	48.2	51.4								
immunization within 12-23										
month										
Received HealthCare Within 24	30.5	33.0								
hours of Birth										
Source- Tribal Ministry Report	Four of India $-2014$									

Source- Tribal Ministry Report, Govt. of India – 2014

Regarding STs Attainment to child health care issues, Assam was not in a satisfactory position (2007-08). Only 34.2% STs had institutional delivery instead of 35.1% for non-STs in Assam. Regarding immunization, 48.2% ST children within the age of 12 month to 23 month are undertaken under immunization program, which is lower than non-STs (51.4). Besides, only 30.5% newborn received healthcare within 24 hours of birth, instead of 33% for non-STs. Interestingly even after being lower facilities of child-health care among tribal community, the IMR and child mortality among tribal is lower than that of non-tribal (Table-11). Averse to medical facilities among tribal is due to the lack of awareness and deficiency of specialist doctors in tribal areas. As per the report of health and family welfare department, Govt. of



India (2012), there is shortfall of 59 specialist doctors in Community Health Centers (hereafter CHC) and 143 in Primary Health Centers (hereafter PHC) in tribal areas of Assam. As per SDG report 2021, 10.40% of household of Assam is covered by a health scheme or health insurance.

	0.												
Union	Avail	ability	of Tape	Water			Tap Water from Treated Sources						
/ State	ST Non-ST S						ST			Non-S	ST		
	Tota	Rura	Urba	Tota	Rura	Urba	Tota	Rura	Urba	Tota	Rura	Urba	
	1	1	n	1	1	n	1	1	n	1	1	n	
Assa	3	1.3	21.6	6.1	2.3	24.6	2.5	1.0	19.7	5.5	2.0	22.6	
m													
India	10.7	5.6	42.9	28.5	15.2	54.5	7.9	3.0	38.2	23.3	9.7	49.8	

Table-14
Comparative Availability of Tap Water to ST Households of Assam

Source- Census of India-2011

Table -15
Comparative Sanitary Facility Available to ST Household of Assam

		-		2	5										
Union		Improved Sanitary Facility							Open Defecation						
/ State	ST Non-ST						ST		Non-S	ST					
	Tota	Rura	Urba	Tota	Rura	Urba	Tota	Rura	Urba	Tota	Rura	Urba			
	1	1	n	1	1	n	1	1	n	1	1	n			
Assa	19.1	14.4	72.0	32.4	23.3	77.4	54.0	58.3	5.8	29.9	34.9	4.9			
m															
India	17.4	10.4	61.2	44.3	27.1	77.9	74.7	82.4	26.1	47.2	65.3	12.1			
a															

Source- Census of India-2011

STs Position had been not satisfactory in the use of tap-water and sanitary facilities. The open defecation is one of the causes of serious health hazard and which is higher for STs (54%) of than that of non-STs (29%). Use of tap water on the other hand is better sign for development. Notwithstanding, in the use of tape water, STs (3%) had been far behind the average use by non- STs (6%) and their national counterparts (10%).

Use of fuel is another factor to determine the socio-economic and health status. Domestically used fuel in rural areas increases lungs & respiratory disease with the probability of cancer. So, higher use of clean-fuel is desirable. But, ST households use of clean fuel is very law (11%) as compared to non-STs (20%)(Table-16). This indicates that performance of the ST households in this regard is not satisfactory.

Table	-16
Comparative Use of Cooking-Fuel by ST House	holds (in%)

State/Union		•				
	Clean Fuel*		Domestic	Domestic Fuel**		
	ST	Non-ST	ST	Non-ST		
Assam	11.0	20.4	78.5	67.8		
India	9.5	31.1	43.7	31.5		

Source- Census of India-2011

\*Clean-Fuel - LPG/PNG, Bio-Gas, Electricity; \*\*Domestic Fuel- Fire-Wood, Cow-Dung etc.



Clean fuel used in cooking is better for health status especially for women and children. Although domestic air pollution is globally considered as a risk factor for growing disease among children due to the use of smoke producing domestic fuel. The clean fuel used by ST households of Assam is higher than the National average for STs, but depressive as compared to non-ST households.

## Intoxicants & tobacco consumption by household

Addiction into alcoholic intoxicants or tobacco is considered as social evil. That has inverse impact into the socio-economic status of a society. That has severe impact on health, production & productivity and finally on the economy as a whole. Tribal households all over India are high alcohol and tobacco consumers. While, the north-eastern tribal are highly drugs addicted. In Assam, 70% of STs and 34% of non-STs are alcohol consumers (National Family Health Survey 2005-06, India). From women alcohol consumption ranking, Assam have been ranked 1<sup>st</sup> position among Indian states with 9% women alcohol consumers and 4<sup>th</sup> from male ranking (WHO, 2017).

The consumption of alcoholic intoxicants by ST household is higher, because of the prevalence of social and religious rituals among most of tribal communities including Assamese tribal. On the other hand, superstition, higher illiteracy among ST women as compared to non- STs (Report, 2014)

Social-Group wise Household Consumption of Intextcant (In-										
30 Days	Monthly	% of	Monthly	%	SC	%		%	Assa	% of
intoxicant	expenditu	spendi	expenditu	of		of	OB	of	m	spend
Consumed	re by	n g by	re by ST	spe		spe	С	spe	Overa	i ng
	General	Gener	Househol	ndi		ndi		n	11	by
	Househol	al	d	ng		n g		din		Assa
	d			by		by		g		m
				ST		SC		by		Over
								OB		al
								С		1
				2.3	84.2	2.6	81.8	2.7		
Pan	88.40	2.64	78.25	5	5	2	1	6	84.52	2.63
				1.3	40.9	1.2	33.3	1.1		
Tobacco	53.33	1.60	44.63	4	1	7	6	2	44.87	1.39
Intoxicants(W										
ith	11.97	0.36	75.64	2.2	26.1	0.8	54.5	1.8	35.49	1.11
Alcohol)				7	8	1	2	4		

Table-17 Social-Group Wise Household Consumption of intoxicant (In- 10.00)

Source- Authors own calculation from NSSO unit level data, 68<sup>th</sup> round, Type-1 (2011-2012) From the above table it is clear that monthly expenditure made by ST household on Pan and tobacco is lower than all the other communities of Assam . However, their expenditure on alcoholic intoxicants(2.27%) is higher than all the other communities. Which is more than 100% higher than the average alcohol consume by average household(1.11%).



## **EMPLOYMENT STATUS:-**

Generation of production and gainful employment is necessary for better socio-economic status. Absorption of growing workforce in a society is necessary for inclusive growth. Presently employment to tribal population has been a major concern of the government. With growing unemployment among them may be the cause of economic insecurity, which may provoke them towards some antisocial activities. Therefore their employment status is necessary to improve by ensuring their participation in different works/activities.

WPR among STs(44%) of Assam is found to be higher than the state average(38%) for the same. Where, 29% ST populations are engaged as main workers and other 15% are marginal workers. 56% of total ST populations are non-workers. Amongst their main workers, 65% are cultivators, 8% are agricultural laborers, 2% are engaged in household industries and remaining 35% are in miscellaneous other activities (Census, 2011). The scenario of marginal workers of STs and non-STs has been as follows...

Table –	18
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Social Group Wise Percentage of Population Engaged in Different Activities of Marginal works

Category of Marginal Work	STs of Assam	All Assam	
Cultivator	7.59	28.12	
Agricultural Labourer	26.84	35.59	
Household Worker	46.47	10.82	
Others	18.11	28.94	

Source- Census of India-2011

The table illustrates that major marginal workers within STs are engaged in household works (46%) followed by agricultural labourer(26%). Marginal worker in Cultivation (7%) and other minor activity (18%) is lower among STs as compared to state average for both (i.e. 28% for both). The gender wise differences of population share in different working activities are necessary to measure the frequency of gender equity and gender sensitization issues. It is more evident from the following table...

%)						
Type of Work	As	sam Overall	S	T Population		
	Male	Female	Male	Female		
Worker	71.36	28.64	60.77	39.23		
Main Worker	80.98	19.02	73.63	26.37		
Marginal Worker	45.91	54.09	35.9	64.1		

Table-19

Gender-Wise Working Population Engaged in Different Activities by STs and Non-STs (In

Source- Census of India-2011

In all the activities, i.e. Overall, Main and Marginal work, female participation for STs (39%, 26%, and 64%) are higher than state overall female participation ratio(28%, 19%, 54%). This indicates that, ST women are economically more empowered as compared to their non-ST counterparts.

The intra-tribal employment opportunity differences within ST have been a major concern of STs internal economic imbalances. All the 29 community within ST have not been performing equally. This is evident from the WPR of the Table-05. Where, amongst the main communities, who have at least one lakh population shows that, WPR is highest among the Miri(Mishing)



communities (47%) and lowest among Karbis(38%). Similarly among the smaller communities, Deories have higher WPR (49%). Of the total intra-tribe workers, Boro and Boro Kacharies have highest numbers of workers engaged in main works (68%) and least in marginal works (31%). The same is lowest (60%) among Mishing(Miris) and while their representation to Marginal works is highest (39%). From this observation we can come to a conclusion that, work availability among tribal community is not equally distributed. Populations engaged in main work have higher possibility to enjoy higher standard of living than marginal workers.

**Poverty Status --** Poverty has an adverse impact on production and productivity. It deteriorates physical and mental strength of population and increases the health hazard among them with decrease of productive workforce. The Planning Commission estimates the incidence of poverty at national and state level using household consumption expenditure data from NSSO quinquennial rounds on Household Consumer Expenditure Surveys. For measurement of poverty in India, there are two types of measurements recommended by Tendulker Committee and Lakdawala Committee. The Tendulkar Committee (2005) recommended the poverty line using MRP and URP procedure and preferred uniform poverty line baskets with the incorporation of private education and health expenditure. On the other hand, Lakdawala Committee (1993) recommended that the poverty should be measured based on individual daily calorie consumption. He stated that the state specific poverty line should be determine and updated using the Consumers Price Index of Industrial Workers (CPI-IW) in urban areas and Consumer Price Index of Agricultural Workers (CPI-AW) in rural areas . The planning commission of India, by using the Tendulkar Committee recommendation estimated the poverty line in 2011-2012 as following. As per their findings, the country has 21.9% of population living below poverty line, of which 25.7% lives in rural areas and 13.7% in urban areas respectively. Based on Tendulkar committee recommendation, the time bond poverty line has been recommended by Planning Commission as follows-

National Poverty Line(In  Per-capita per-month) for the years 2004-05, 2009-10 & 2011-12					
Years	Rural	Urban			
2004-05	446.7	578.8			
2009-2010	672.8	859.6			
2011-2012	816.0	1000.0			

Table -20

Source- Planning Commissions Report on Poverty of 2009-10 &2011-12 Based on the above limit of poverty line, the planning commission of India finds out the following status of poverty in India & Assam. The category of poverty here is estimated for overall as well as ST population in rural and urban areas respectively for the year 2009-2010.

Table-21

Comparative Poverty Status of Tribal of Assam						
State/Union	Overall Popula	ation	Schedule Tribe Population			
	Rural	Urban	Rural	Urban		
Assam	39.9	26.1	32.0	29.2		
India	33.8	20.9	47.1	28.8		



Source- Planning Commission Report 2009-10

Here, within Assam in urban areas STs (29%) have higher proportion of population living Below Poverty Line (hereafter BPL) than the Assam overall ratio (26%). Despite, in rural poverty STs have comparatively better status (32%) than that of overall Assam ratio (40%). But Assam is far behind the national average, as in overall, higher numbers of people living below poverty line in rural as well as in urban areas. STs of rural Assam are in a comfortable position than overall average rural populations. In case of urban STs of Assam, they are slightly higher than the all Indian urban average for the same. In precise, even after the poverty status in Assam is not being good but for STs, it is comparatively at an appreciable status.

The observation shows that tribal contains a progressive socio-economic status. In a numbers of indicator like WPR, IMR, poverty, fertility they are better than the common people. Tribal women are economically more empower even after the literacy rate is not as equal to general average. The population structure is more consolidated in northAssam and hills districts.

## SUMMARY, POLICY IMPLICATION AND CONCLUSION

In this chapter, a brief summary of major findings which are worth mentioning are presented, based on the results and discussions. Through the following points, the entire findings have been summarized.

\* ST's of Assam are mainly concentrate in hills, North Assam and north western part of Assam, basically in the autonomous  $6^{th}$  scheduled areas of Assam(Table-1).

\* ST Households' spending on education is lowest as compared to other social groups. They have been witnessing a major backwardness in monetary term. However, literacy rate is almost equal to state average. This literacy rate is concentrated only within the elementary level. Higher education above high school stage is still at an infant position among STs. Smallest proportions of household heads have higher educational qualification above the high school level.

\*ST household spends less in medical ground (Table-06), takes less medical facilities, low sanitary, high open defecation and low clean fuel use, low participation in immunization drive, child care within 24 hour, institutional delivery (Table-13;14;15;16) is also lower than non-STs. In contrast, the IMR, NNMR, CMR, fertility position, poverty rate are better for STs (Table; 11; 12; 13; 20; 21) as compared to the non-STs. It may be because of their food habits and consumption of domestically/locally produced goods. Another reason for this good health may be that, they are not affected by two extremes of nutritional burden, like over nutrition and male nutrition. Further, their health condition may be more positively affected by qualitative factors, like happiness, mental stress, satisfaction etc. which have not been captured by this study.

\* ST women's are educationally backward(Table-8). However, economically more empowered than their non-ST counterparts. As WPR ratio among them is higher than non-ST women (Table19). Besides, higher sex ratio (Table-9) among them indicates less gender biasness as compared to other communities.

\* Most of the ST's are engaged in agriculture and allied with household based works. ST's males are mostly engaged in main works, whereas the females are mostly engaged in marginal works.

\*Intra-Tribal discrimination is evident in education and employment. Sonowal Kacharies enjoys highest literacy rate, Boro & Boro kachari enjoys highest employment opportunities in percentage term, as the working population as main worker is highest among them(Table-8).

\*In rural poverty, STs(32%) are in better position than non-STs(40%), however in urban poverty STs(29) position is below than non-STs(26) as on 2009-10. In overall STs are in a



better position in poverty rate(Table-20; 21). ST's low expenditure on health is due to their better position of poverty line than other communities.

\*Alcoholic intoxicants consumption is significantly higher among STs(Table-17), but have less inverse impact on their society. The consumption of alcoholic intoxicants by ST household is higher, because of the prevalence of social and religious rituals among most of tribal communities including Assamese tribal. On the other hand, superstition, higher illiteracy among ST women as compared to non-STs (Report, 2014).

From this preliminary observation it provides the following recommendations for the development of tribal .....

**Recommendation - :** Based on the above findings, the following recommendations can be place to improve the socio-economic status of tribals of Assam.

• Improvement and spread of higher educational facilities to tribal population is necessary for their better welfare. The study shows that the universal elementary education only improves the literacy rate more in quantitative terms, not in qualitative. Therefore, to improve the quality of human resource in real term, universal higher education at affordable cost is necessary for the tribal.

• Conservation of traditional homestead (like forest land, agricultural land) of tribals has been the greatest challenge, where majority of tribal population depends for their livelihood.

• As majority of tribal has been considering agriculture as their prime occupation. Innovative agricultural skill and technology is necessary to support the growing population. For which appropriate agricultural training and financial support is necessary.

• Intra-tribal socio-economic differences are necessary to improve. For which, selective improvement measures in the field of education, health and employment is necessary among tribals. So that all the government welfare benefits for tribals cannot be wiped out by already better off tribes. Therefore, further classification among tribal is necessary based on socio-economic ground to contribute developmental packages to the needy.

• Tribal women of the state have been found to be empowered economically. But lagging behind educationally. Therefore appropriate educational policy measure with special emphasis on tribal women is necessary.

## 3. CONCLUSION -:

At the denouement of the study, we can say that in order to measure the well being of a certain part of population there is no single and universally accepted indicator that can be use as a yardstick. The conventional indicators can only provide a quantitative concept of welfare. From a numbers of studies (Including this study) it has been observed that, single quantitative measure is inefficient to detect actual dimension of welfare. As after post World WarII period welfare measurement procedure getting momentum with inclusion of more sophisticated qualitative measures than quantitative, which are more elusive in nature. Therefore, across the globe presently consider 4 approaches in the community welfare studies , namely (a) considering social variables at a glance like, poverty, mortality, literacy, cleanliness

(b) Monetary or financial status like, GDP per-capita, MPCE (c) Taking monetary measure as an instrument to adjust other qualitative factor into the system through appropriate channels and (d) taking into account some purely non-economic but unavoidable elements into the system, like happiness, satisfaction etc.

This study tries with its maximum efforts to unearth the actual picture of standards of living of tribals of Assam with the limited period and span of the study. It basically provides a space for



further studies in detail taking non-economic factors into account, which will be worthwhile to attain into a definite conclusion.

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