



LITERACY AND HEALTH PRACTICES AMONG TRIBAL CHILDREN -A STUDY

K.Umashanker¹, Prof. T. Mrunalini²

¹Research Scholar, University College of Education, Osmania University, Hyderabad, Telangana State-500 007

² Professor of Education, , University College of Education, Osmania University, Hyderabad, Telangana State-500 007

Abstract: The Chenchus are Adivasi, their habitat is confined to the rocky hills and forested plateau of the Nallamala forest Range, extending on both sides of the Krishna River. They are the overwhelming majority of the speakers of the Dravidian tongue of Telugu. The Chenchus are characterized by a strong sense of independence and personal freedom. The current investigation delineates literacy and health practices prevalent among Chenchu group of Tribals in the state of Telangana. The main objective was to appraise the literacy and health practices among the tribal children. A sample of 120 was included from six tribal villages of Achampet region in Nagarkurnool District of Telangana State. Purposive sampling technique was used to identify the sample. An Interview schedule was prepared for Parents to elicit required information. The findings of the study demonstrated that there was no significant difference was found among the Parents on the literary and health practices among tribal children in the state of Telangana. Educational Implications as well as suggestions for further research were also portrayed.

Index Terms – Literacy; Health Practices; Tribal Children; Management; Health issues

I. INTRODUCTION

Chenchus are Adivasi, a designated Scheduled Tribe (ST) in the Indian states of Telangana, Andhra Pradesh, Karnataka and Odisha. They are the inveterate forest dwellers for over centuries, steadfastly refused to move out of their woods. The Chenchus are patriots in true spirit. They are an aboriginal tribe whose traditional way of life been based on hunting and gathering. They are the overwhelming majority of the speakers of the Dravidian tongue of Telugu. Chenchus talk with a Telugu emphasis in the Chenchu language. Chenchucoolam, Chenchwar, Chenswar, and Choncharu are large names for their language. The Chenchus are low in height, with a long head, clear cut foreheads, and a level nose. Their colouring goes from wheat dark to brown, and they have ebony wavy hair. Their flow environment is restricted to the stony high countries of the Nallamalai slopes, corresponding to the Krishna River on the two sides. They dwell in little homes with wattle dividers that look like colonies. Chenchus are magnificent climbers. The population of Chenchus is 49,232 as per 2011 census. The total literacy rate among them is 32.28 out of which male literacy rate is 40.87 and female is 23.45 as per 2011 census.

The Chenchus tribe is divided into a number of exogamous clans which are prefixed to their names. Some of the clans found among Chenchus are Mandli, Chigurla, Udathala, Tokala, Mekala, Bhumani, Katraju, Arthi, Dasari etc. Family is nuclear. A very few joint families are also found. Chenchu tribe is patriarchal and patrilineal. Monogamy is the most prevalent form of marriage. Polygyny is also practiced but it is rare. Divorce is socially permitted on reasons such as sexual incompetency of the man or his drunkenness or ill treatment by him or illegal sexual intimacy with another person or bareness of the woman or mutual distrust due to marital infidelity.

They worship and believe in many deities and spirits both malevolent and benevolent and follow all Hindu festivals. Their religious pantheon includes Mysamma, Rakta Veradu, Onti Veeradu, Peddamma, Lingamaiah, Mallanna, Narasimhaswamy, Pothuraju, Nagamaiah Sunkulamma, Manthanalamma, Ankamma etc.

Need and Significance of the Study

The tribal areas have Ashram schools (primary schools) in most Chenchu habitations. However, the children do not want to go to school as they do not have proper uniforms. Though the government provides two uniforms per child and books, these materials do not reach the children of these remote habitations. The Chenchu children feel uncomfortable in the residential schools because of the attitude of other children. In the absence of pre-primary education facilities (nursery schools or balwadis) they find it difficult to get accustomed to the pattern of study in the primary schools. Children's education was monitored. Attendance at schools and hostel facilities was checked. Lobbying was done with government departments for providing required education materials for children. School dropouts were enrolled in residential bridge schools. Teachers recommend retention for one of three reasons: developmental immaturity that has resulted in learning difficulties; emotional immaturity that has resulted in severely disruptive behavior; or failure to pass standardized proficiency or achievement tests at the end of specific years. Another less common reason for retention is poor

attendance due either to truancy or medical absences. Grade retention has become increasingly controversial as early 2000s education initiatives such as No Child Left Behind have pressed schools to meet certain standards defined by scores on standardized tests.

Despite the availability of several health schemes from the government, the Chenchus have not benefited due to the extremely poor accessibility to officials and workers from the departments concerned. The Chenchus complain that the services are mostly availed by the other communities and they are left out. Tuberculosis and malaria are widely prevalent and take their toll. Scabies is rife in some areas. The Chenchu women are unfamiliar with antenatal healthcare and institutional deliveries, though they ensure that infants and children are vaccinated as per the schedule when the staff visits the village. If there is an emergency they prefer to go to the private hospital at the mandal headquarters. Some deities are propitiated to avert evils. Foremost among them is potsamma, the small pox: goddess, sometimes also addressed as Ammavaru. A goddess of great power is Ellamma whose cult is widespread throughout Telangana. Chenchus offer a special puja in order to divert her dangerous influence. Another village deity is Elparnachena Maisama who is supposed to grant good health. Ceremonial prayers for this goddess are believed to relieve all kinds of diseases, including small pox. Vatikanka is a malignant deity residing near wells responsible for miscarriages.

Education is fundamental for achieving full human potential, developing an equitable and just society, and promoting national development. The global education development agenda reflected in the Goal 4 (SDG4) of the 2030 Agenda for Sustainable Development, adopted by India in 2015 - seeks to “ensure inclusive and equitable quality education and promote lifelong learning opportunities for all” by 2030. The National Education Policy 2020 lays particular emphasis on the development of the creative potential of each individual. It is based on the principle that education must develop not only cognitive capacities which includes the foundational capacities of literacy and numeracy and higher-order cognitive capacities but also social, ethical, and emotional capacities and dispositions.

In India the child health programme under the National Health Mission (NHM) comprehensively integrates interventions that improve child survival and addresses factors contributing to infant and under-five mortality. It is now well recognized that child survival cannot be addressed in isolation as it is intricately linked to the health of the mother, which is further determined by her health and development as an adolescent. Therefore, the concept of Continuum of Care, that emphasizes on care during critical life stages in order to improve child survival, is being followed under the national programme. Another dimension of this approach is to ensure that critical services are made available at home, through community outreach and through health facilities at various levels.

2. REVIEW OF RELATED LITERATURE

Khurshid Anjum. (2010) studied Health Care Management Training Needs in Pakistan; Narinder Deep Singh (2010) conducted a study on Rural Healthcare and Indebtedness in Punjab; Kumar, D. (2010) probed into the history of medicine and public health in India; Arulselvam and Maheswari (2011) pointed out another side of tribes and development; Muhammad Ayub Buzdar and Akhtar Ali's (2011) investigated the parents' attitudes toward their daughters' education in tribal areas of district Dera Ghazi Khan, Pakistan; Mahapatra, S. C., Das, R. K., & Patra, M. R. (2011). Evaluated Current e-governance scenario in healthcare sector of India; Subitha Lakshminarayanan (2011) studied the role of government in public health: Current scenario in India; Sharma, J. K., & Narang, R. (2011) conducted a study on Quality of healthcare services in rural India; Kharade, M., & Sharma (2011) appraised e-Health in India; Nagaraju Battini and Ivanov Alexey (2011) studied religion of Chenchus; Garnaik and Barik (2012) observed that education among tribals is given high priority for the simple reason that it is a key factor of socio-economic development of the tribal community; Abhimanyu Kumar, Kamala Fuloria and Krishna Agrawal (2012) conducted a comparative study of tribal and non-tribal women in the state of Uttarakhand; Kavitha.G et al (2013) studied the impact of Information Technology in Indian Healthcare System; Datta, R. (2013) studied the world of quacks: a parallel health care system in rural West Bengal; Pradhan, S. K. (2013) undertook a case study on Health and health seeking behaviour among the tribals; Purohit, B. (2014) Community Based Health Insurance in India; Purohit, B. (2014) studied Community Based Health Insurance in India; Alex Ivanov (2014) evaluated Chenchu tribe tradition and reality; Mohd Iqbal Khan, Amit Banerji (2014) investigated the 'Health Care Management in India; M. Venkata Ratnam, D. Venkata Rao, L. Giridhar, (2014) studied Effects of Deforestation on Chenchu Life; Senapati Tushar Kanti (2015) focused on holistic Tribal Education; Dar, T. A., & Saravanan, R. (2015) analyzed Health Seeking Behaviour of Scheduled Tribes in Anantnag District, Jammu and Kashmir; V.V.S.Sastry (2015) studied diet habits, health and medical practices of the Chenchu tribe; Venkataswamy B, Kommalapati Srinivasa Rao (2016) conducted a study on Social and cultural life style of Chenchu tribes; Syed Abdul Shameer (2016) investigated the Cultural Heritage of Chenchu Tribe; D Ramesh Prof. Ch Bapu Haranath (2016) studied Factors Inhibiting and Promoting Change in Development and Welfare Programmes Among the Tribal Communities; Bhavani Shankar (2016) took up a sociological study on Health Care Scenario in Rural India; Ramakrishnan Ramachandran (2017) studied on Public Private Partnership (PPP) in Indian Health Care; Dyavanapalli Satyanarayana (2019) studied festivals of Chenchu tribals of Nallamala forests; Kimnei salViana Leivon (2019) explored the idea of accessibility in education for tribal children; Anilkumar Pathavath (2019) evaluated the use of media among Chenchu tribes; Sanatanaa Mohanthy (2020) conducted a study to measure the attitude of the teachers of the schools of the tribal areas towards the education of the tribal children.

From the above perspective it is clear that there are umpteen studies documented and still research is on its way to find out various means to fulfill the internationally cherished goal of Education for All (EFA), but researches on the literacy and health practices among tribal children, especially in the State of Telangana, seem to be in embryonic stage. As a consequence, 'LITERACY AND HEALTH PRACTICES AMONG TRIBAL CHILDREN – A STUDY' was emerged as a new area for research.

Objectives of the Study

1.To delineate the perceptions of parents of Scheduled Tribe Students on the literacy practices in the Achampet region of Telangana State.

2. To appraise the perceptions of parents of Scheduled Tribe Students on the health practices prevalent in the Achampet region of Telangana State.

Delimitations of the Study

1. This study is confined to Achampet region in Nagar Kurnool district in the State of Telangana.
2. The investigation takes into its ambit the perceptions of Adults in Achampet region of Nagarkurnool district in Telangana State.
3. The study is restricted to probe perceptions of adults (parents) on literacy and health practices among Tribal children.

3.METHODOLOGY

The fundamental purpose of this investigation, as already pointed out to investigate into the *literacy and health practices prevalent among Chenchu group of Tribals in the state of Telangana*. Hence, this study falls under non-experimental designs and a *normative survey* is employed to elicit appropriate information from the respondents.

The universe of the present study consists of State of Telangana. The sample constitutes one hundred and twenty (120) parents selected from six (6) tribal villages of Achampet Region. Purposive sampling technique was employed to identify the sample.

The investigator has employed the a self-designed interview schedule for the present investigation. The same was administered after testing its validity and reliability on the sample selected. Suitable statistical techniques like Chi-square, along with SPSS (Statistical Package for Social Sciences) 16.0 was used for analysis.

4. RESULTS AND DISCUSSION

HO₁: There is no difference in the perceptions of adults on literacy practices with respect to learning of their wards.

Table showing perceptions of adult's to improve literacy of their wards.

			What do you expect from the school to improve literacy practices of your wards?				Total
			Teachers availability	Congenial atmosphere	Good Library & Playground	Other	
Village	Yerrapenta	Count	8	8	3	1	20
		% within Village	40.0%	40.0%	15.0%	5.0%	100.0%
	Mallapur	Count	14	5	1	0	20
		% within Village	70.0%	25.0%	5.0%	0.0%	100.0%
	Baurapur	Count	9	10	1	0	20
		% within Village	45.0%	50.0%	5.0%	0.0%	100.0%
	Appapur	Count	6	10	4	0	20
		% within Village	30.0%	50.0%	20.0%	0.0%	100.0%
	Farhabad	Count	9	7	4	0	20
		% within Village	45.0%	35.0%	20.0%	0.0%	100.0%
	Amarabad	Count	11	7	2	0	20
		% within Village	55.0%	35.0%	10.0%	0.0%	100.0%
	Total	Count	57	47	15	1	120
		% within Village	47.5%	39.2%	12.5%	0.8%	100.0%
Chi-square = 15.152		Df = 15	P = .442	Not significant			

It can be inferred from the chi-square test, the calculated p-value is insignificant at 5% level the calculated p-value is .442 which is more than .05. Therefore, the null hypothesis is accepted. Hence it can be concluded that there is a significant difference in the perceptions of adults on literacy practices of their wards.

HO₂: There will be no difference in the perceptions of adults on health practices for their wards.

Table showing perceptions of adult's on health issues of their wards.

			How often your children get health issues?				Total	
			Weekly	Monthly	Yearly	Seasonally		
Village	Yerrapenta	Count	1	0	1	18	20	
		% within Village	5.0%	0.0%	5.0%	90.0%	100.0%	
	Mallapur	Count	0	0	3	17	20	
		% within Village	0.0%	0.0%	15.0%	85.0%	100.0%	
	Baurapur	Count	0	0	2	18	20	
		% within Village	0.0%	0.0%	10.0%	90.0%	100.0%	
	Appapur	Count	1	0	1	18	20	
		% within Village	5.0%	0.0%	5.0%	90.0%	100.0%	
	Farhabad	Count	0	1	0	19	20	
		% within Village	0.0%	5.0%	0.0%	95.0%	100.0%	
	Amarabad	Count	1	0	3	16	20	
		% within Village	5.0%	0.0%	15.0%	80.0%	100.0%	
	Total		Count	3	1	10	106	120
			% within Village	2.5%	0.8%	8.3%	88.3%	100.0%
Chi-Square Value 12.702			df=15		P-Value=.625 Not significant			

It can be inferred from the chi-square test, the calculated p-value is insignificant at 5% level and the calculated p value is .625 which is more than .05. Therefore, the null hypothesis is accepted. Hence, it can be deduced that there is a significance difference in the perceptions of adults on health practices of their wards.

Major Findings

1. It was demonstrated from the findings that availability of teachers is the dominant factor for expansion of education among tribal children.
2. The results of the study indicated that the parents explicitly expressed that their wards would be affected through 'seasonal diseases'.

5. EDUCATIONAL IMPLICATIONS

The educational implications from the results of this study cannot be understated. The findings of the present study are of practical as well as theoretical importance to parents, teachers, students as well as to the policy makers.

The findings of this research provide insight to parents seeking educational development of their wards to focus on non-academic skills through which they can make their wards perfect to equip them for the world of work. However, they can also impress upon authorities to provide adequate number of teachers in creating a congenial atmosphere in the school with a good library and playground as well. Further, they can also make sure to attend all the programmes of the school and focus on the health of their wards.

The investigation holds implications even for the teachers to create an awareness among parents to avail the facilities that are being extended by the Government from time to time to make their wards productive citizens.

The results holds some implications even for students. They should be able to perceive the benefits of specific strategies taught to them and also experience the facilities extended to them from time to time.

The policy makers should also take into consideration of students needs and prepare curricular adaptations which are viable and achievable.

6. SUGGESTIONS FOR FURTHER RESEARCH

Since improvement and innovations are the hallmark of research, the present study explores many avenues for carrying further research. The suggestions can be summarized as:

- A similar study can be conducted with a *larger group of respondents* to have in-depth knowledge on 'the literacy and health practices among Tribal Children'
- Numerous cross *sectorial comparisons* of various other categories like emotional intelligence; academic success; teachers and parents' role may be carried out.
- An explorative study can be taken on the *early childhood teachers experiences* in teaching Scheduled Tribe students in the State of Telangana.

7. REFERENCES

- [1]. Bhavani Shankar (2016) Trivialization of Health Care Scenario in Rural India: A Sociological Concern. *International Journal of Humanities & Social Science Studies (IJHSS)*. Volume-II, Issue-VI, pp. 89-97.
- [2]. Dar, T. A., & Saravanan, R. (2015). Economic Analysis of Health Seeking Behaviour of Scheduled Tribes in Anantnag District, Jammu and Kashmir. *International Journal of Research in Social Sciences*, 5(4), 247-260.
- [3]. Datta, R. (2013). The world of quacks: a parallel health care system in rural West Bengal. *Journal of Humanities and Social Science*, 14(2), 44-53.
- [4]. Herrin, J., Kenward, K., Joshi, M. S., Audet, A.-M. J. and Hines, S. J. (2016), Assessing Community Quality of Health Care. *Health Services Research*, Vol.51: pp.98–116.
- [5]. Kumar, D. (2010). Probing history of medicine and public health in India. *Indian Historical Review*, 37(2), 259-273.
- [6]. Mishra, S., Panda, B. B., Mishra, T., & Sahu, T. (2015). Assessment of infrastructure at government healthcare facilities for providing family welfare services in Odisha. *Journal of Preventive Medicine and Holistic Health*, 2(1), 4-7.
- [7]. Neelmani Jaysawal (2015) Rural Health System in India: A Review. *International Journal of Social Work and Human Services Practice*. Vol.3. No.1.pp.29-37.
- [8]. Sanatanaa Mohanthy (2020) **Status and educational problems of tribal children at elementary schools in Orissa**. Thesis submitted to Utkal University.
- [9]. Senapati Tushar Kanti(2015) Holistic Tribal Education: A Case Study of Kalinga Institute of Social Sciences in Odisha, India. *Research Journal of Language, Literature and Humanities*. Vol. 2(3), 7-13.
- [10]. Simarjeet Kaur (2020) **Primary Health Care: evaluation of maternal and child health services in select tribal Areas of district Sirmour, Himachal Pradesh**. Ph.D. thesis, Punjab University.
- [11]. Subitha Lakshminarayanan (2011) Role of government in public health: Current scenario in India and future scope. *Journal of Family Community Med*.18(1): 26–30.
- [12]. Sujatha (1994) *Educational Development among Tribes (A Study of Sub-plan Areas in Andhra Pradesh)*: National Institute of Educational Planning and Administration, New Delhi.
- [13]. Vijaya Lakshmi, G. (2003) Problems of Secondary School Tribal Children. *Edutracks*, p. 33-35.
- [14]. Yadappanavar A.V (2003) **Tribal Education in India**. Discovery Publishers House, New Delhi.

