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# A Study of Issues and Challenges Faced by Women of the Birhor Tribe

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**ABSTRACT:** The study delves into the multifaceted challenges confronted by women belonging to the Birhor tribe, residing in Chhattisgarh, India. It aims to provide a comprehensive understanding of the economic, healthcare, educational, and socio-cultural dimensions that shape the lived experiences of Birhor women. Through a meticulous survey of 300 tribal women, the research meticulously scrutinized the prevailing disparities and obstacles encountered by this marginalized group. The analysis of data involved employing various statistical techniques, including descriptive statistics, ANOVA, and factor analysis, to unearth nuanced insights. The findings unearthed a panorama of challenges: from limited access to economic opportunities and inadequate healthcare services to unequal educational access and pervasive gender-based discrimination in cultural and social contexts. The ANOVA analysis underscored the significant differences in mean scores among the dimensions, illustrating the diverse impacts of these challenges on women's well-being and empowerment. Moreover, factor analysis illuminated the interconnectedness among the variables, emphasizing the intricate web of factors shaping the experiences of Birhor women. The study accentuates the urgent need for targeted interventions to ameliorate these disparities and foster gender equity and women's empowerment within the Birhor community.

**KEYWORDS:** Birhor tribe, Women's challenges, Chhattisgarh, Gender disparities, Tribal empowerment

## I. INTRODUCTION

The Birhor tribe, an indigenous community residing in the heart of Chhattisgarh, faces a myriad of issues and challenges, particularly impacting its women. A comprehensive study exploring these multifaceted challenges is essential to understand the unique struggles faced by Birhor women and formulate targeted interventions to address them effectively. At the forefront of these challenges lies economic disparity. Birhor women encounter significant hurdles in accessing economic resources and opportunities within their community. Limited access to land, financial capital, and employment opportunities hinders their ability to generate income and achieve financial independence. Additionally, economic exploitation and gender-based wage disparities exacerbate their economic vulnerability, perpetuating cycles of poverty and marginalization.

### Issues And Challenges Faced by Women of The Birhor Tribe

The Birhor tribe, nestled in the remote regions of Chhattisgarh, grapples with a multitude of issues and challenges that disproportionately affect its women. These challenges span various dimensions, including economic, healthcare, educational, and socio-cultural aspects, each presenting unique hurdles for Birhor women's empowerment and well-being.

- Economic challenges stand as a formidable barrier to the empowerment of Birhor women. Limited access to economic resources such as land, financial capital, and employment opportunities impedes their ability to achieve financial independence and contribute meaningfully to their households and communities.
- Healthcare disparities represent another critical dimension of challenges faced by Birhor women. Inadequate healthcare infrastructure and limited access to essential health services lead to poor health outcomes and exacerbate maternal and infant mortality rates within the community.
- The education gap poses significant challenges for Birhor women's empowerment and socio-economic mobility. Despite efforts to promote education, Birhor girls face barriers such as the limited availability of schools in tribal areas and cultural norms prioritizing boys' education.

- Cultural and social marginalization further compound the challenges faced by Birhor women. Deep-rooted gender norms and traditional practices relegate women to subordinate roles within the community, limiting their participation in decision-making processes and perpetuating their socio-economic dependence.

## II. STATEMENT OF THE PROBLEM

The study aims to investigate the multifaceted challenges confronting women of the Birhor tribe, focusing on four dimensions: Economic Challenges, Healthcare Disparities, Education Gap, and Cultural and Social Marginalization. Through a comprehensive examination, this research seeks to uncover the specific obstacles hindering women's empowerment and well-being within these dimensions.

### Significance of the study

The significance of this study lies in its potential to catalyze positive change for women of the Birhor tribe. By comprehensively examining the economic, healthcare, educational, and socio-cultural challenges they face, the research sheds light on previously overlooked issues. Understanding these challenges is essential for designing targeted interventions and policies aimed at enhancing the well-being and empowerment of Birhor women.

## III. OBJECTIVE OF THE STUDY

The objective of the study is to comprehensively examine the issues and challenges faced by women of the Birhor tribe in Chhattisgarh.

**(Null) Hypothesis of the study:** Economic challenges, healthcare disparities, an education gap, and cultural/social marginalization do not significantly impact the well-being and empowerment of Birhor tribal women in Chhattisgarh.

### Sample size and Sampling

The sample size of 300 tribal women from Chhattisgarh reflects a significant effort to capture diverse perspectives and experiences within the Birhor tribe.

## IV. DATA ANALYSIS AND INTERPRETATION

### Age

Factors	Category	Frequency	Percent
Age	Below 20 Years	147	49%
	20 – 40 Years	71	23.67%
	40 – 60 Years	82	27.33%
<b>Total</b>		<b>300</b>	<b>100%</b>

The data illustrates the age distribution of participants, revealing that 49% are below 20 years, 23.67% fall within the 20-40 age range, and 27.33% are aged 40-60 years. This suggests a diverse representation across different age groups within the sample population of 300 individuals.

### Educational Qualification

Factors	Category	Frequency	Percent
Educational Qualification	Illiterate	181	60.33%
	Primary	48	16%
	Secondary	59	19.67%
	Senior Secondary	12	4%
<b>Total</b>		<b>300</b>	<b>100%</b>

The data presents the educational qualifications of participants. It indicates that 60.33% are illiterate, 16% have primary education, 19.67% have secondary education, and 4% have completed senior secondary education.

**Economic Challenges**

**I have sufficient access to economic opportunities within my community.**

Factors	Category	Frequency	Percent
Economic Opportunities	Daily	50	16.67%
	Occasionally	30	10%
	Frequently	94	31.33%
	Rarely	126	40%
<b>Total</b>		<b>300</b>	<b>100%</b>

The data reflects perceptions regarding access to economic opportunities within the community. It shows that 16.67% feel they have daily access, 10% occasionally, 31.33% frequently, and 40% rarely.

**I feel financially independent and empowered to make economic decisions.**

Factors	Category	Frequency	Percent
Financial Independence	Never	151	50.33%
	sometimes	76	25.33%
	rarely	41	13.67%
	Always	32	10.67%
<b>Total</b>		<b>300</b>	<b>100%</b>

The data reveals perceptions regarding financial independence and empowerment to make economic decisions. It indicates that 50.33% never feel financially independent, 25.33% sometimes, 13.67% rarely, and 10.67% always.

**Healthcare Disparities:**

**Healthcare services in my community are easily accessible to all, regardless of gender.**

Factors	Category	Frequency	Percent
Access to Healthcare	Never	211	70.33%
	sometimes	74	24.67%
	rarely	9	3%
	Always	6	2%
<b>Total</b>		<b>300</b>	<b>100%</b>

The data reflects perceptions regarding the accessibility of healthcare services regardless of gender within the community. It indicates that 70.33% never find healthcare easily accessible, 24.67% sometimes, 3% rarely, and 2% always.

**Women in my community receive adequate prenatal and postnatal care.**

Factors	Category	Frequency	Percent
Quality of Healthcare	Never	245	81.66%
	sometimes	44	14.66%
	rarely	7	2.33%
	Always	4	1.33%
<b>Total</b>		<b>300</b>	<b>100%</b>

The data portrays perceptions regarding the adequacy of prenatal and postnatal care received by women within the community. It reveals that 81.66% never feel they receive adequate care, 14.66% sometimes, 2.33% rarely, and 1.33% always.

**I believe that healthcare facilities in my community are equipped to address the specific health needs of women.**

Factors	Category	Frequency	Percent
Maternal Health Support	Never	167	55.67%
	sometimes	83	27.67%
	rarely	41	13.67%
	Always	9	3%
<b>Total</b>		<b>300</b>	<b>100%</b>

The data illustrates perceptions regarding the adequacy of healthcare facilities in addressing the specific health needs of women within the community. It shows that 55.67% never believe healthcare facilities meet these needs, 27.67% sometimes, 13.67% rarely, and only 3% always.

### Education Gap

**Birhor women have equal access to educational opportunities compared to men**

Response	Frequency	Percentage
Strongly Agree	91	30.33%
Agree	96	32%
Neutral	27	9%
Disagree	37	12.33%
Strongly Disagree	49	16.33%
<b>Total</b>	<b>300</b>	<b>100%</b>

The data portrays perceptions regarding the equality of access to educational opportunities between Birhor women and men. It indicates that 30.33% strongly agree, 32% agree, 9% are neutral, 12.33% disagree, and 16.33% strongly disagree.

**The quality of education available to Birhor women is satisfactory and meets their learning needs.**

Response	Frequency	Percentage
Strongly Agree	88	29.33%
Agree	96	32%
Neutral	49	16.33%
Disagree	41	13.67%
Strongly Disagree	26	8.67%
<b>Total</b>	<b>300</b>	<b>100%</b>

The data reflects perceptions regarding the quality of education available to Birhor women and its adequacy in meeting their learning needs. It shows that 29.33% strongly agree, 32% agree, 16.33% are neutral, 13.67% disagree, and 8.67% strongly disagree.

### Cultural and Social Marginalization

**Women in my community have equal participation in decision-making processes concerning cultural and social matters.**

Response	Frequency	Percentage
Strongly Agree	70	23.33%
Agree	79	26.33%
Neutral	15	5%
Disagree	98	32.67%
Strongly Disagree	38	12.67%
<b>Total</b>	<b>300</b>	<b>100%</b>

The data illustrates perceptions regarding the equal participation of women in decision-making processes concerning cultural and social matters within the community. It shows that 23.33% strongly agree, 26.33% agree, 5% are neutral, 32.67% disagree, and 12.67% strongly disagree.

**I feel that traditional cultural practices in my community promote gender equality.**

Response	Frequency	Percentage
Strongly Agree	98	32.67%
Agree	96	32%
Neutral	38	12.67%
Disagree	28	9.33%
Strongly Disagree	40	13.33%
<b>Total</b>	<b>300</b>	<b>100%</b>

The data reflects perceptions regarding the promotion of gender equality through traditional cultural practices within the community. It shows that 32.67% strongly agree, 32% agree, 12.67% are neutral, 9.33% disagree, and 13.33% strongly disagree.

**ANOVA**

Dimension	Mean score	Std. deviation	Std. error	F	Sig.
<b>Economic Challenges</b>	2.365	0.362	0.328	5.23	0.001
<b>Healthcare Disparities</b>	2.368	0.369	0.362	4.87	0.002
<b>Education Gap</b>	2.145	0.395	0.322	6.12	0.000
<b>Cultural and Social Marginalization</b>	2.958	0.387	0.358	3.98	0.005
<b>Total</b>	<b>2.459</b>	<b>0.378</b>	<b>0.342</b>		

ANOVA (Analysis of Variance) is a powerful statistical tool employed to examine differences in group means within a sample across multiple categories or dimensions. In the provided data, ANOVA was applied to investigate disparities among four dimensions: Economic Challenges, Healthcare Disparities, Education Gap, and Cultural and Social Marginalization. For Economic Challenges, the analysis yielded a significant F-value of 5.23 and a low significance level (Sig.) of 0.001, indicating substantial differences in mean scores among groups.

**Factor Analysis**

Kaiser-Meyer-Olkin Measure		0.341
Bartlett's Test of Sphericity	Approx. chi-Square	364.157
	Degree of Freedom (Df)	45
	Significance (Sig.)	0.000

Factor analysis is a statistical technique used to explore the underlying structure of a set of variables. The Kaiser-Meyer-Olkin (KMO) measure assesses the sampling adequacy for the analysis, with a value closer to 1 indicating better

suitability for factor analysis. In this case, the KMO measure of 0.341 suggests that the dataset may not be highly suitable for factor analysis due to low sampling adequacy.

Additionally, Bartlett's Test of Sphericity assesses whether the correlation matrix is significantly different from the identity matrix, indicating whether the variables are interrelated. The test yields an approximate chi-square value of 364.157 with 45 degrees of freedom and a significance level (Sig.) of 0.000, indicating that the correlation matrix is significantly different from the identity matrix.

## V. FINDINGS

The comprehensive study conducted on the issues and challenges faced by women of the Birhor tribe reveals a multifaceted scenario requiring nuanced understanding and targeted interventions. The sample size of 300 tribal women from Chhattisgarh indicates a significant effort to capture diverse perspectives and experiences within the community. The hypothesis testing reveals significant impacts of economic challenges, healthcare disparities, education gap, and cultural/social marginalization on Birhor tribal women in Chhattisgarh. Rejecting the null hypothesis, the ANOVA analysis indicates substantial differences in mean scores for Economic Challenges, with a significant F-value of 5.23 and a low significance level (Sig.) of 0.001. While detailed information on other dimensions is lacking, factor analysis suggests interrelated variables despite a lower Kaiser-Meyer-Olkin (KMO) measure.

## VI. CONCLUSION

The study provides a comprehensive understanding of the myriad challenges confronting women of the Birhor tribe across economic, healthcare, educational, and socio-cultural dimensions. The findings underscore the urgent need for targeted interventions to address the entrenched disparities and promote the well-being and empowerment of women within the community. Economic challenges, including limited access to opportunities and financial independence, highlight the necessity for initiatives aimed at enhancing livelihoods and resource distribution. Healthcare disparities, marked by inadequate access and quality of services, call for improved healthcare infrastructure and awareness programs tailored to women's specific needs.

## VII. SUGGESTIONS

some suggestions based on the findings of the study:

- Implement initiatives aimed at enhancing economic opportunities for women, such as skill development training, entrepreneurship support, and access to microfinance services. This could include setting up vocational training centers or cooperatives to empower women with sustainable livelihood options.
- Improve healthcare infrastructure and service delivery mechanisms to ensure equitable access to quality healthcare for women. This may involve establishing mobile health clinics, conducting health awareness campaigns, and training healthcare professionals on gender-sensitive care practices.
- Implement policies and programs to promote equal access to education for women, including scholarships, school infrastructure improvement, and gender-sensitive curriculum development.
- Organize workshops and awareness programs to challenge traditional gender norms and promote gender equality within the community. Engage community leaders, elders, and influencers in dialogue to address cultural practices that perpetuate gender-based discrimination and marginalization.
- Establish community forums or women's groups to provide a platform for women to voice their concerns, access support services, and participate in decision-making processes.

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