CHAPTER 3

ANTHROPOLOGY

Doctoral Theses

012. DAS (Mitoo)

Menstruation Narratives: Rituals and Restrictions in Simlitola, Assam.

Supervisor: Prof. Vinay Kumar Srivastava

Th 14646

Abstract

Provides a sociological explanation of how menses can play an important role in the way of living of a society. It comes alive socially and makes its presence felt in the cultural realm in the form of rituals at menarche, taboos and restrictions throughout one's menstrual life, the gendered meanings that are constructed as a result of the following of such taboos, and the variety of treatments used in the cure of menstrual disorders that come with menstruation. Peep into the unequal world of men and women, through a social entity such as menstruation. Whatever kind of gender asymmetry may be, it is there and it never ceases to surprise one that a physiological condition like menstruation can give meaning to the social world of men and women. Menstruation showed the numerous types of role-playing women engage, in, in order to sustain their "feminine" space within the society. The taboos, restrictions and rituals are replete with the subtle manner in which they bring about the oppression of women by assigning them the status of a pollutant. This status itself can never allow women to rise up to a better status and be equal to men. Moreover the taboos being connected as part of the Assamese tradition well not disappear from the lives of women, as they believe that traditions are to be respected and kept intact to maintain the identity of oneself as Assamese.

Contents

1. Menstruation: A glimpse into its biological and sociological expressions. 2. Methodology and fieldwork. 3. Introduction to Simlitola, Goalpara district and Assam. 4. Kinship, family and religion in Simlitola. 5. Women and menstruation: Rituals for

the polluted being. 6. Menstruation as pollution (Suwa): Narratives of Taboos and restrictions. 7. Application of medical pluralism in the treatment of menstrual disorders. 8. Conclusion and Bibliography.

013. GAUTAM (Rajesh K)

Population Characteristics of Middle and High Altitude Kinnaura of Kinnaur District, Himachal Pradesh, India.

Supervisors : Dr. Gautam K. Kshatriya and Prof. A. K. Kapoor Th 14649

Abstract

The Kinnaura of District Kinnaur, Himachal Pradesh, India are genetically as well as phenotypically are two conspicuous entities, inhabiting in two different ecological zones viz. middle and high altitude. The high altitude Kinnaura show mongoloid ethnic affinities, whereas middle altitude Kinnaura show non-mongoloid affinities. Indian population in general and tribal populations in particular are at different stages of demographic transitions, primarily because of their placement, economy, social and cultural practices, and their differential involvements in different development programs. Interestingly, pattern of early child bearing is common among both tribal and non-tribal populations of rural India. It has been further observed that fertility level of tribal groups are high and comparable to the more progressive southern states of 1970s. It has been reported that CBR and TFR dips in relation to developmental activities, level of living and literacy across various social groups. Regarding mortality measures, it has been found that literacy rate especially among women is a most important predictor variable that contributes to low CDR and IMR. Moreover mortality variables do not vary significantly by income as much as they are affected by the level of education among women. It can be observed that despite concerted efforts of various State Governments as well as Government of India, the tribal groups of India are lagging behind National Population. However, ever since independence, there is dramatic change in all the demographic indicators affecting tribal health together with a shift in morbidity profile. Although changes are slow, but obvious. Many tribal groups of India are participating in developmental activities and consciously coming in the fold of mainstream and are hardly distinguishable from the immediate non-tribal neighbors. And Kinnauras of Himachal Pradesh are one of those many tribal groups who are demographically more progressive. In the present study, Kinnauras are found to be more close to

Indian National population that with other tribal groups of India. Even in some of the characteristics they are more nearer to the state of Kerala, which is one of the progressive state of country. Economy, level of living, female literacy, awareness among users and placement of health providers along with their acceptability, availability and affordability can be said to be the most important variables among many others that have shaped the course of population characteristics of Kinnaura substantially.

Contents

- 1. Introduction. 2. Materials and methods. 3. Area and people.
- 4. Ethnographic profile of Kinnaura. 5. Results. 6. Discussion.
- 7. Summary, Conclusion and Bibliography.

014. KRISHNAKUMARI (Pebam)

Anthropological and Epidemiological Study on the Reproductive Health of Women in Manipur: A Rural/Peri-urban Comparison. Supervisors: Prof. P. C. Joshi and Dr. M. Meghachandra Singh Th 14643

Abstract

The study accentuates the reproductive health of women in Andro and Kwakeithel. This anthropological and epidemiological exploration of reproductive health of women underscores the need to incorporate women's perception of their illness in the light of women's belief about their bodies and the practice they follow with these belief to design a culturally sensitive implication of reproductive health programs as well as provide a basis of recommendation to health and family planning providers the "felt need" of the women. The finding explicates the underlying synergism of poverty and pathology which distinguishes "illness" from "disease". The reproductive tract infection represent "disease" a pathological state while phingou chatpa represents "illness" a condition of impoverishment, emphasizing that one cannot be understood without the other. Therefore there is a need to address the perceived "root cause" of their illness i.e. poverty to ameliorate the health condition of women in Andro and Kwakeithel. The time has come to look at the "felt needs" of the reproductive health of women. All human being have the basic right to a life free from hunger, poverty, ignorance, disease and fear. There is also a need to creat innovative health program which provides men and women with the knowledge to understand the "pathology" of disease within the context of their

lives. There is a call for an approach towards enhancing the informative base of women for better care, hygienic practices, maintenance and management of menstruation especially in rural Andro. Concludes that incorporation of women's perception of illnesses is essential to improve and make the reproductive health strategies more meaningful and relevant to the women in these two communites.

Contents

1. Introduction. 2. Literature review and theoretical framework. 3. Research methods. 4. Area and the poeple. 5. Women's perception of the body. 6. Women's perception of reproductive illness and their health seeking behaviour. 7. Reproductive morbidity: Women's report, clinical examination and laboratory diagnosis and associated risk factors. 8. Implication of reproductive health on policy and programme. 9. Conclusion and Bibliography.

015. NARANG (Mala)

Continuity and Change in an Angami Naga Village.

Supervisor : Prof. Vinay Kumar Srivastava. Th 14644

Abstract

Analyzes the traditional and the contemporary patterns of key social institutions in an Angami village, and to delineate the aspects of continuity and change in them. An important characteristic of an Angami village is that it is divided into two to four wards, or Khels. In the pre-British period, Khels acted as independent 'villages' with distinct boundaries and gates. Khels are comparable to clusters of caste groups, found in multi-caste villages in other parts of India, which come together and constitute a village. An Angami village is inhabited by a uniform population. Its members trace a common ancestry. The history of the four Khels of Kohima village (commonly known as the L, P, T, and D Khels) dates back around four hundred years, as claimed by the villagers. The founders of Kohima are believed to have migrated for several social reasons (such as fights among different clans, increased population, etc.), from the southern village of Kigwema and further south from Khazekhenoma in the state of Manipur. There is a lot of political turmoil in the state of Nagaland, with certain factions demanding sovereignty for the Nagas. Most Angami feel that Naga efforts would be fruitless unless they were united in their

struggle. Years of rampant extortions, kidnappings, and killings have left them estranged, and no one is willing to take the initiative to start a new enterprise. The Angami are generally disillusioned with the way the freedom movement has been going. Therefore, they are now more interest in their own career prospects and starting a better life by searching for new avenues rather than being a part of the movement. They look for government jobs and other benefits, which they can get only by being a part of the Indian state. With globalization, careerism has come up in a big way and has widened the perspective of the people. The new religion has wholly destroyed past customs and practices. In fact, some of the past customs have been reformulated to suit the changed ideology. Although Christianity has been the main instrument of change in Angami society, it has not transformed the society completely. Some ideas from the past culture still continue. It is clear that despite changes, social continuity is observed in Angami society.

Contents

- 1. Introduction. 2. Methods and fieldwork. 3. Relations of the Angami with the British and the contemporary village Kohima district. 4. Social structure of the village. 5. Lifecycle rituals.
- 6. Agriculture and other economic pursuits. 7. Culture symbols.
- 8. Traditional beliefs, priests, and the ritual calendar.
- 9. Festivals and feasts. 10. Christianity and issues of identity.
- 11. Conclusion and Bibliograpy

016. PALIWAL (Mridula)

Effect of HIV on Social Relation : A Comparative Study of Delhi and Lucknow.

Supervisor: Prof. P. C. Joshi

Th 14647

Abstract

Examines the intimate account of the patients living with HIV. The purposes of the study were manifold: to identify the distinctive experiences and relationship pattern of the HIV seropositive patients in Delhi and Lucknow; to determine the effect of associated sociopsychological factors on HIV patients' reltionship and to assess the impact of HIV on the patients' behavior and relationships within and outside the family. Findings indicate that many patients are facing the impact of sociopsychological repercussions of HIV. At an identifiable period, in the persons living with HIV, a set of interwoven and

mutually reinforcing problems produces an onrush of symptoms which overwhelm the patients' and prevent them from fulfilling the obligations associated with their accustomed social roles, which in turn affect patients' behavior and relations.

Contents

- 1. Introduction. 2. Literature review. 3. Research methodology.
- 4. Demographical characteristics of HIV/AIDS. 5. Socio-psychological aspect and HIV/AIDS. 6. Intra family relationships and HIV/AIDS. 8. Social relations outside the family. 9. Summary, Conclusion and Bibliography.

017. PUJA

Culture, Population and Health of Jat Sikhs: The Case of a Village in Punjab.

Supervisor: Prof. Vinay Kumar Srivastava

Th 14648

Abstract

Studies the community of Jat Sikhs, traditionally an agrarian caste group, in a universe where it belongs, which is a village in Punjab. This is an ethnographic study of Jat Sikhs in Kherda. The various facets of population change and health of Jat Sikhs have been elaborated through case studies. The study brings out the interplay between parameters of fertility, mortality, migration and morbidity of Jat Sikhs. The desire to emigrate is getting rooted as an obsession among young Jat Sikhs and has significantly impacted population and health aspects of Jat Sikh community. The progress of Punjab has uplifted the Jat Sikh community economically though much still needs to done in the realm of healthcare.

Contents

1. An introduction to the theoretical perspectives. 2. Field work initiation and methods: A perspective. 3. Introduction to the field area. 4. Jat Sikhs: The cultural context. 5. Resources available and socio-economic status. 6. Demography patterns in rural Punjab. 7. Religious beliefs and practices in Kherda. 8. Medical profile of Jat Sikhs of Kherda 9. Conclusions and Bibliography.

018. RAJESH PANKAJ

Health and Illness: A Study Among the Birhor of District Hazaribagh, Jharkhand.

Supervisor: Prof. Vinay Kumar Srivastava

Th 14645

Abstract

The Birhor is group small (numerically less) and politically insignificant inhabiting predominantly the state of Jharkhand with few in the adjoining states of Orissa, West Bengal and Chhattisgarh. Today, they are passing through a phase of transition which is reflected in most of their facets of life. The most striking change they have witnessed is the shift from nomadic or semi-nomadic life to a sedentarized living. Today most of them have moved into the concrete houses built by the government. This has led to the economic diversification as they have started picking up the upcoming available occupations. However, foraging which is still practiced by many is not done by changing the habitat but by remaining stationed at one particular place. Even the ones who are still living in their traditional conical-shaped leafy houses (negligibly found now) do foraging by staying at one place only. This change gets intensified with an increasing interaction with the outside world. The impact of cash economy is another factor that has affected their overall living. Today, whatever small or big game they hunt, they prefer to sell it for cash rather than distributing its meat among themselves. Their ethnomedical system is also undergoing a tremendous change as one can visibly feel the presence of allopathy and other systems in their life. However, their past practices have not completely vanished as even today one can feel the strong influence of shamanism and bonga worship. In fact, the Birhors are perfectly examplifying the concept of continuity and change in their life style. There are a few basic institutions which are still continuing whereas few processes involved in it are witnessing change. The study describes the life-style of contemporary Birhor with a predominant focus on their notions associated with health and illness.

Contents

1. Theoretical orientations and conceptual model. 2. An introduction to the area and its religious life. 3. Characteristic features of the social organization of Birhor. 4. The tandas where the study was conducted. 5. Methodology and fieldwork. 6. Health and illness. 7. Medicine, treatment and cure. 8. Food and health 9. Conclusion and Bibliography.

019. VERONICA (H T Rozy)

Gender and Identity Among Anal Women of North East of India: An Anthropological Study.

Supervisor : Dr. S. M. Patnaik

Th 14650

Abstract

The community under study is a significantly known group, the Anals of Manipur state in Northeastern of India. The study is based on the assumption that every human society recognizes gender difference and utilizes this perceived gender differences in institutionalizing human behaviour. Since the nature of gender, difference varies greatly depending on a specific cultural interpretation. Attempts to take a gendered perspective to explore the identity and position of Anal women in a changing world. The study looks at gender relations in the institutions such as family, kinship, marriage, economic, political, and religious and as these are transforming under the impact of democracy and globalization. Examines the existence of the domain of patriarchal ideology, Anal women's struggle in every day life for their survival and for the children, family and society as a whole. The specific attention is given on the roles played by the women folk and their behavioral patterns in milieu of diversified social trend.

Contents

1. Theoretical framework. 2. Research methods and field experiences. 3. Ethnohistory and identity. 4. Setting. 5. Kinship, family and marriage. 6. Exploring women's role in economy. 7. Mapping women's role in political realm. 8. Women in Anal religion. 9. Personhood and identity. 10. Summary, Conclusions and Bibliography.

M.Phil Dissertations

020. GUPTA (Pallavi)

Role of NGOs in the Education of Urban Slum (Delhi).

Supervisor: Dr. S. M. Patnayak

021. RATH (Subrat Kumar)

Religious Conversion and Tribal Indentity: An Anthropological Study of The Tribes of Keonjhar District, Orissa"

Supervisor: Dr. S. M. Patnayak

022. THOMAS (Rachel)

Locating Identity in the Present Thought and the Past Among the Paniyans of Kerala.

Supervisor : Dr. S. M. Patnayak

023. YADAV (Sarvendra)

Social Mobility Among the Shias of Lucknow

Supervisor: Prof. V. K. Srivastava