

WOMEN IN MANIPUR – PROBLEMS AND PROSPECTS OF RETRIEVAL

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It is one of the achievements of present day discourses and practices concerning development, that 'Women' and 'gender' have come to occupy relatively prominent places within. In India in particular, a range of institutions, including the state, declare that are committed to women's equality and to their empowerment. South Asia, has been the site for some of the finest examples of women's empowerment, whether in the area of affirmative action, or collectivizing women around economic and social issues, or the vibrancy of women's movements.

Unfortunately, it has also been the site of examples of some of the worst violations of human rights, discrimination and human deprivation. Cultural mores, son preference, violence against women and girls, still continue to haunt much of South Asia. Being poor, differently abled, or belonging to a minority or a disadvantaged group, makes women even more vulnerable.

These are manifested in a declining sex-ratio, lower female literacy, and lower health status. Only a minority of persons hold positions of decision – making. Although dependent on land and natural resources, most do not own or inherit land or property. For instance, in Manipur among the Tangkhul community, in the absence of male heirs, the women may head a house only as a caretaker, and to control the disposition to the family's property (1).

In spite of a growing recognition of women's contribution of the economic, this remains invisible in the national accounting systems, and in many sectors they continue to earn less than men for the same work. (for e.g. our women cultivators in Manipur). All these factors combine to create a gender development Index value of .535, which is 99 points lower than the average for developing counties (2).

Women in India are not only socially at a lower level compared to their male counterparts, but economically also they are less mobile, and in most cases deprived of assets and skills. Sex disparities in literacy and education level (male literacy 63.13%, female 39.29% - N.E. India) and work participation in non-agricultural sector (male 36.62%, female 18.19% in N.E. India) testify to the prevalence of this phenomenon. In North East India, more than 50% of Female are illiterate, every tenth female child dies before attaining the age of 2 years, about one third of females get married before attaining the age of 18 years, and crude birth rate continues to be as high as 30 per thousand. As regards work participation only, about one-sixth of the women are engaged as agricultural labourers, although the situation in the hill areas is somewhat different (3).

According to the 1991 census, the proportion of female workers to total population in N.E. India was 24.22% as against the country's average of 24.27%. Female work participation rate vary significantly in the North East, (States with significantly higher proportion of tribal population have higher women work participation), the highest being in Manipur 45.96%, followed by Arunachal Pradesh 44.08% and the lowest in Tripura 25.30%. High participation of women is the result of poor agrarian Economic base, that compels everyone to work for mere subsistence, and also the absence of prejudice against women participating in different economic activities, along with men. Spatial difference in districts level also vary : 8.23% in Dibrugarh as against 52.15% for Senapati District.

Although, the female participation in work is high, 48.59% of the total female workers are engaged in the primary sector as against 68.80% among males (Manipur is 76.50%) only 4.17% and 11.24% female workers are engaged in the secondary and tertiary sector (4). Manipur has a population of 23,88,634 and out of this the female population is 11,81,229 whereas that of the male is 12,07,388. The sex ratio is a demographic indicator that refers to the number of females per 1000 males. India's sex ratios have been declining from 972 in 1991 to 933 in 2001.

Provisional sex ratio in Manipur is 978 per 1000 males. The total number of rural females is 8,42,657 and urban females 2,89,287 in 2001 (5) Perhaps the sex ratio in Manipur

is more favourable, as there is no overt son preference, although people generally commiserate with mothers who have no son. The sex ratio of different districts in Manipur varies greatly :

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|----------------------|---|---------------|
| Bishnupur | – | 1004 females. |
| Chandel | – | 986 females. |
| Churachandpur | – | 993. |
| Imphal East and West | – | 1007. |
| Senapati | – | 928. |
| Tamenglong | – | 922. |
| Thoubal | – | 998. |
| Ukhrul | – | 920. |

Form the above table it is apparent that in 3 hill districts the sex ratio is below the All India figure. According to the census of India 1991 and 2001, Manipur's adult sex ratio was 955 in 1991 and 985 in 2001, and Child sex ratio was 961 against India's Average of 927. Out of every 1000 babies, 71 girls do not survive their first year of birth. But life expectancy at birth among females has improved. Women live up to an average of 62 years (6).

To retrieve the women it is first of all necessary to equalize the sex ratio. This can be done by creating general awareness on the worth of the girl child. This should not be a difficult task as daughters, whether married or unmarried maintain close filial ties with their natal family. The myth that only girls and women should be assigned the tasks of caring and nurturing must be exploded. Educated women must take the lead in assigning shared responsibilities in the domestic sphere to their husbands, sons and male relatives.

Women's right to health is impaired by factors like poor sanitation, unhygienic environment, difficulty in procuring safe drinking water, declining budgetary allocations for health, and the increasing trend towards privatisation in the sphere of health. In Manipur, the total fertility rate is 3.04 as against a total wanted fertility rate of 2.5 (7). The second lowest prevalence in regard to anaemia, Manipur 29% as against the Indian average of 51.8%. The

low levels of access to health care and lack of decision making make it very difficult for women to avail of reproductive protection, even when they want it. However, the couple protection rate for Manipur was 21.3 in 1998, and 21.2 in 1991. Safe motherhood can be accessed through examining the proportion of women receiving ante-natal, delivery and post-natal care. For Manipur, percentage of births deliveries in a Medical institution was 17.3% and 20.6%, where deliveries were as sited by a health by a health profession (8). Better health and well-being of women is closely associated with their overall status. There are age-old records which have shown women's active participation in multi-faceted fields (e.g. Nupilan of 1904 and 1932, Nisha Band, Meira paibi, Anti-Ceasefire extension, Disrobing of Meira Paibis 2003 etc.). In a recent study, the reasons for women's poor health is attributed to (i) lower socio status, vulnerability in relation to reproductive and sexual health, violence against women, inadequate and inappropriate health care facilities and education.

The study reveals that Meitei women in the reproductive age group, are less mobile, subject to greater restrictions, enjoy less economic independence, overburdened with household responsibility and child, and value is assigned to dowry (9). In Manipur, the concept of dowry per se does not exist, but awonpot i.e. gifts to the daughter at the time of marriage. But often after the marriage there would be frequent taunts about the awonpot being too meagre, resulting in mental distress and domestic disharmony (10).

The reasons ascribed for lower socio-economic status, is that women experience difficulty in getting jobs or pursuing sustainable livelihood, own little or no property, have little control over Awonpot, are unable to battle corruption in daily life, sons or males are given preference in regard to education and jobs in the organized sector. Women especially Meiteis, Eat last, and access to nutritious food is lesser than that of her husband and children.

To provide better health care facilities and access to services, women centric centres and clinics may be opened, subsidized by public or private sector, Parent must motivate daughter to develop a scientific temperament, and increase the number of women taking up medical studies. To prevent anaemia, Government can step up distribution of Iron

supplements. More women doctors translates into better health for women, as women are more patient and caring. Women doctors must not be confined to Gynaecology and Obstetrics but opt for other disciplines, surgery, radiology etc. As overt preference is currently for male doctors. Women doctors and medical personnel can persuade more pregnant women to give birth in hospitals, besides disseminating information on sexual and reproductive health, new interventions and technologies.

Another problem besetting women is the constant struggle they have to wage against the oppressive forces of the state, as well as the non-state / private groups who continuously threaten or disrupt daily life. Women are always placed in the fore front of agitations and protest marches, and bear the brunt of tear gas, water cannons, batons etc. In large turnouts, they are often shoved, pushed and trampled upon, even deaths, have resulted. Like any mother, Manipuri women's groups go to any extent to safeguard the lives of their children and society (11). To retrieve women and enhance their prospects, a concerted action by society is required.

Media campaigns on the issue may be stepped up to create an increase in public consciousness. Stem punishment must be meted out to offenders; women police station need to be established in every district.

With reference to women in the political arena, despite the 33% reservation, they are still struggling to acquire their legitimate power from the patriarchal state machinery, and are unable to make an impact on the prevailing political culture, which is beset by muscle power, financial clout, bribery and corruption, many women pradhans are told what to do by their husbands. They remains soft targets surrounded by chatnabis (societal rules), telling her, that no matter what, her husband and household come first (12). Male bureaucrats adopt an offhand attitude to women leaders. Women politicians, if any are invariably connected to an important family e.g. Landhoni Devi, the only elected women legislator is the wife of the Chief Minister of Manipur. It is unfortunate that women cannot come together on one common platform to support women candidates. Women have to overcome their disunity

and actively canvas for one of their won. As women form almost half the state's population, if a women candidate is supported by all women, she can be sure of success.

In the social sphere there are various subtle restrictions. A woman married through elopement, who has no issue, or only girl child, is barred from bearing gifts on ritual occasions e.g. Swasthi Puja or Leading the marriage procession. Girls are brought up to be submissive and obedient and to help in household chores, from which sons are excused. In low income families, elder girls have to care for their siblings, while the parents tend to fields.

This results in drop-out of girls from the formal education system. Literacy rate of females in Manipur is 59.70% and of males 77.87% (13). The genders disparities are more pronounced in the hill areas, girls enrolment less than 50% viz 47.7% in 2000 – 2001, and drop – out rate of girls in classes – I to V, 26.37% in 2001 – 2002, and from I to VIII – 36.61%. According to Government of India, 2001 census the drop-out rate for girls at the primary level in Manipur was 42.28% (14). Contrary to the aggressive image in public in the form of Meira Paibis, submissiveness in the domestic sphere is approved, accepted and desired by society. In fact, the day after being wed, the bride has to rise early in the morning to perform the majority of women are bread earners, especially in the unorganized sector. After delivery the mother has to be tended to by her natal family as she is regarded as polluted for a period of 12 days. Women are also assigned the left side in any social gathering in allocation of rooms (left is generally associated with impurity, defilement, death and women traditionally) (15). Societal restrictions impeding women from realising their potential / happiness, may be gradually eliminated, if women themselves make a concerted, joint effort to refuse to succumb. For instance, the on-going movement to armed tribal customary law denying women right of inheritance.

The sphere of work is the area where women's actual economic participation exceeds that of men in most cases, yet it remains unrecognized as a significant contribution to national income, labour force participation of women in rural areas of Manipur stood at 25.7 in 1991 – 2000 and in urban areas at 22.5 Manipur is a state where higher level of women's labours,

market participation has been registered. (The Ima Keithel is a historic exclusive women's market). But most primary sector activities offer only subsistence employment and are low paid or unpaid. Among the secondary sector employment avenues (manufacturing), women are pre-dominantly involved in informal home-based activities which offer little or no social security, low wages and poor working conditions (SHGs are numerous, many find it difficult to sell their products).

Women are at the lower echelons of employment in formal and informal sector activities. Women's share in organized sector employment is 17 % for India, Manipur – 0.8% in lakhs. Among the poor where work is a necessity for survival, women are involved in various unorganised sector activities. As no reliable estimates are available for this contribution, women's contribution is undermined (16). Endemic strikes and bandhs continually disrupt economic activities, and deprive daily wage earners of their daily livelihood. This cause great problems for poorer women who have to forfeit a meal to tide over the crisis. As on 31st March 2000, the total number of persons employed in the organized sector was 82 thousands; the total number of employees working under the state government was 64. 29 thousands of these male accounts for 49. 64 thousands and the female accounts for 14. 65 thousands. The total number of employee working under the central government establishments were 4,782 (810 females and 3972 males) during the same period (17).

A widely shared prosperity amongst women and men, can restore the economic prospects of women. Many of the cause for the sense of disparity felt by women are to a great extent, out of the bounds of the state to settle, with the resources in its hands at the moment. The state economy generates very little income. Its annual entitlements are also barely enough to pay even the salaries of the 80,000 and odd government employees (18). But unless public and private investment is substantially increased, it will not be possible improve women's economic status. Women's skills need to be continuously improved and updated and women SHGs must get a commitment from the government outlets to market their products in and outside the state e.g. State emporiums, craft melas, etc. Insurance has to be provided to women in the unorganized sector.

Currently, the government is considering extending health insurance to all. Economic independence is intimately linked with self-respect/esteem and measures to achieve this status have to be initiated especially for rural/illiterate women through non formal and adult education and vocational training which is market oriented.

The degree of participation of women in taking decisions on matters pertaining to their daily lives, is used as an indicator of women's autonomy. According to National family health survey 1998-99, the percentage of women in Manipur not involved in any decision making was only 3.3% involved in decision making on what to cook 87.4% on own health care 43.3% purchasing etc. 66.3% staying with her parents/siblings 63.2% with access to money 76.8%. But if we look quite closely, we will realize that the Manipuri women simultaneously live in two different worlds- the inside and the outside. Their outside image is that of a vigorous organized force fighting for justice and caretaker of society. While in their inside world traits such as submissiveness and subservience and the accepted behaviours.

According to Valley Rose, a Tangkhul women leader and a journalist 'women were considered secondary citizens in the society. Head counts are made only on the male members. Women are not allowed to speak for themselves in front of the male folk. Women are not allowed to represent in the grass root administration i.e. village authority or council. Male folk have the freedom to practice polygamy, whereas women are charged and judged with adultery, if she is found to be having extra marital affairs with another man. Dolly Kiran of the Naga people's movement for human rights states that the in-laws send women away from their marital homes on the death of their husbands if they have no children to look after. A widow is denied the right to get her deceased husbands pension funds. Even in the majority of Kuki tribes, if a woman does not have a son, inheritance by the wife and daughters is not permissible. The male inheritor has the custody of the children as well as the property, along with the pension of her husband (19).

According to the recently concluded 2005-2006 National Family Welfare Survey (NFHS-3) conducted by the Ministry of Health and Family Welfare, Manipur is a close second to Tripura when it comes to domestic violence. Approximately 43.9% among 4512 married women respondents in the age group of 15-49, have revealed that they have faced domestic violence at one point of time or other. The respondents were from 3,498 households spread across various districts. In Manipur, domestic violence in the urban area is 44.4% and in rural areas 43.7%. according to W. Sobita, activist “ Domestic violence does not necessarily mean dowry burning or physical assault. It can be in the form of a subtle harsh look, verbal scolding a finger raised to signal anger, bullying and maintaining stoic silence. The main reasons behind the rampant domestic violence are polygamy, the inherent male chauvinism in our patriarchal society, poverty illiteracy, drug abuse, alcoholism, dowry, and armed conflict”. Dowry is emerging as a major factor for domestic violence (20).

What is more alarming is how many of these cases some of which reach the heights of heinousness in their intensity, seldom make its appearance in police records or any other crime records. For the simple reason that most women choose to tolerate these crimes, as they are committed by their loved ones. According to the figures from the crime branch, Imphal, a total of 58 cases related to domestic violence were reported from 2001 to September 2006, which is only the tip of the iceberg, if you go by the unspoken fact, that almost every third household in the state, is probably witness to domestic violence. During the ten year period, from 1997 to 2006, only 30 cases pertaining to cruelty by husband and relatives were registered with the Imphal West District Police Station. What is worrying is how in many cases, the women justified the physical assaults. An independent survey conducted by correspondents Thingnam Anjulika Samom among 50 married women, Meitei, Muslim, Kuki, Naga found that at least 4% justify a man beat his wife for going out without telling him, while 76% said that the man can beat his wife if she neglects the house or the children. Another 54% justified the beating in case of argument with the husband and 52% justified it, if she shows disrespect to the in-laws. Another 34% justified spousal violence on suspicion of infidelity, while 24% justified it if the wife did not cook food properly. 38% of the respondents said that they had been slapped by their husbands, 16% reported forced

sexual relations, 24% had been beaten and kicked, 14% threatened with a knife/gun (21). For most the violence both in and outside the house is so internalized, that there is no other definition of a normal life. Social stigmatization of a woman separated from her husband, or staying at her paternal house, is another cause for violence. Violence impacts the children who often turn for relief to drugs, alcohol and even insurgency. It impacts the women's health and many women undergo severe mental trauma. There are no support, services to address the problems of mental health.

To prevent domestic violence encouragement must be given to women to report cases of violence and women NGOs representatives and women leaders can assist victims of violence in getting relief and justice. Although patriarchy as a concept pervades the whole ethos of society of generates the idea that man is superior, educated women must assert their rights to equality in practice and abandon double standards (proactive outside, docile inside). But if the Meira Paibis had the courage to disrobe in public as a form of protest against a women's killing surely they could take the lead in making decision pertaining to their well-being. Crimes against women can be decreased when exemplary punishment is routinely meted out to offenders and social vigilance and awareness in increased. Trauma counselling centres and access to mental health facilities will hold retrieve and rehabilitate victims of violence.

The breakdown of formal health care services in certain areas due to the on-going conflict in another major area of concern. It has intensified the violence faced by women which takes the forms of sexual , mental and physical abuses, killings clashes. The region has witnessed a resurgence of patriarchal values, norms along with restrictions on the movement of women, dress they wear overtly physical violence viz rape which is systematically used as a tactic against a particular individual or community. The number of suicides by young women is in the increase, armed conflict has given rise to more women headed households. Many women have to resort to selling liquor, drugs and even go into prostitution to make ends meet. When men are killed during conflict, families hardly get the ex-gratia. Families settled in relief camps lack basic infrastructural facilities (22).

Women's low economic and social status leaves them vulnerable unwanted sexual activities and negates access to accurate reproductive health information. In Manipur there is a definite co-relation between injecting drug use and rapid transmission of HIV to IDU's partners and children. The epidemiological analysis of HIV/AIDS in Manipur up to Aug 2006, reveals that in the age group of 11-20, 293 females are HIV+, in the age group of 21-30, 2543, and in the age group of 31-40, 1638 of 21,979 antenatal mothers screened, 412 are HIV+ giving a sera-positivity rate 1.87(23). The state which is generally ready to regulate and intrude into most areas of civil life is singularly averse to interfering in the private area of the family. It is in the private sphere, that most alcohol and drug related violence against women occurs. There is a definite link between increase in alcohol intake and increase in wife and child abuse. Women, children become fearful, quiescent, and ashamed. Male drug users use manipulation to coerce their partners into unprotected sex resulting in STIs, HIV, unwanted/early pregnancies, unsafe abortion, and early unplanned marriage. The last results in unequal relations between women and men, making women more vulnerable (24).

Manipur is a state with a society in transition; traditional social support systems have given way to nuclear families. Most teenagers are not given proper guidance in their adolescent years; school girls have been expelled for drug use. The young women have little knowledge about sexual, reproductive rights are manipulated through control over their sexuality and fertility. Women are also justifiably fearful of partner violence, abandonment, if suffering from an STI or if HIV+

To address the harm caused by alcohol and drug related violence against women, women must realize that the abuser wears many faces. Since abstinence is difficult to achieve, husbands/men can embrace and practices, harm reduction (25). In the harm minimization approach, attention is directed to the careful scrutiny of all preventions and treatment strategies in terms of their intended and unintended effects on levels of drug-related(26). Women's groups can exert pressure on government to carry out alcohol tests on drunken drivers, and lobby for access to ART for women, together with training for sustainable livelihood for HIV+ women. Nutritious supplements and tinned/packaged milk may be

given. Women's groups have to take the initiative to integrate positive women into the mainstream, beginning with buying products of positive women's networks, etc.

Prospects for retrieval for women of Manipur will only become a reality, if the problems faced by them are dealt with in depth, the strategies outlined for their empowerment are actually put into practice. Women can be empowered to find their own solutions. A process of self-discovery has to be facilitated to enable women to move ahead with confidence and dignity. It is important to acknowledge the vital role that subjective conditioning plays in the decision making process. Equality must not merely be a part of our thinking, but part of our living, women must determine what gives happiness and have the courage of conviction to follow through.

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