



# PROBLEMS OF TRIBAL FAMILIES IN SEETHAMMAPETA MANDAL OF SRIKAKULAM, ANDHRA PRADESH

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The socio-economic problems facing tribal families are diverse and complex. These communities often experience poverty, inadequate access to education and healthcare, and limited economic opportunities. Land rights issues, including land alienation and exploitation, further compound their challenges. Discrimination and marginalization based on cultural identity contribute to social exclusion and hinder socio-economic advancement. Insufficient infrastructure in tribal areas worsen these problems, restricting access to essential services. Collaboration between governments, NGOs, and community organizations is essential for implementing sustainable solutions and improving the well-being of tribal families. The study has been taken with the objective to understand the socio economic and cultural problems of tribal families in the study area.

Research design is an indispensable component of any research endeavour. It encompasses the process of formulating a plan that facilitates the systematic exploration of social reality in a logical and structured manner. In the context of the present study, a descriptive research design has been adopted to elucidate the socio-economic conditions and challenges confronting tribal families.

## **Universe and Sample Method**

The study was conducted in Srikakulam District, which is known for its significant tribal population. Among the district, Seethampeta Mandal was chosen specifically because it has a concentration of Savara and Jatapu castes among its tribal population. Therefore, the study was purposively undertaken in the Seethampeta mandal to assess the socio-economic problems of tribal families.

From the Seethampeta mandal, eight villages were purposively selected based on the concentration of different tribes. Mutyalu, Gulumuru, Kirapa, and Kodisa villages were chosen from the interior hill areas to cover Konda Savara households. Goidi, Gadiguddi, Silagam, and Valagedda villages were chosen to represent Jatapu households.

Among the Konda Savara, 30 households were selected from each of the four villages, resulting in 120 Konda Savara households. Similarly, 120 households were identified as belonging to the Jatapu caste, with 30 households selected from each of the four villages, totaling 120 Jatapu households. This selection was done using a disproportionate stratified random sample method. Therefore, the total sample selected from all eight villages together is 240 households, comprising 30.45% for the present study.

## **Socio-Economic Problems of the Tribal families**

Socio-economic problems among tribal families are deeply rooted and multifaceted, often stemming from

marginalization, lack of access to resources, and cultural disparities. These communities frequently grapple with poverty, limited education opportunities, inadequate healthcare access, and challenges in securing land rights. Cultural marginalization and discrimination further isolate tribal groups from mainstream opportunities. Moreover, tribal families are often vulnerable to exploitation by external entities, threatening their socio-economic stability and cultural heritage. Addressing these challenges necessitates a holistic approach, involving collaborative efforts among government agencies, NGOs, and community organizations.

**Table -1: Preference of Male Child Vs. Age**

Age	What is opinion about preference to male child			Total
	To remain surname	To look after parents	To get dowry	
Below - 25	27	8	6	41
	65.9%	19.5%	14.6%	100.0%
26 - 35	32	19	3	54
	59.3%	35.2%	5.6%	100.0%
36 - 45	40	15	9	64
	62.5%	23.4%	14.1%	100.0%
46 - 55	35	22	4	61
	57.4%	36.1%	6.6%	100.0%
56 - >	12	6	2	20
	60.0%	30.0%	10.0%	100.0%
Total	146	70	24	240
	60.8%	29.2%	10.0%	100.0%

The table 1 reveals on opinions regarding the preference for a male child among tribal families. The majority, comprising 60.8 per cent, express the opinion that the preference for a male child is motivated by the desire to continue the family surname, reflecting the importance attached to family and inheritance within the community. About 29.2 per cent believe that male children are preferred for their perceived role in looking after parents in old age, underscoring traditional familial expectations and support structures. However, a smaller percentage, accounting for 10.0 per cent, associate the preference for a male child with the expectation of receiving dowry, reflecting entrenched gender biases and socio-cultural practices that perpetuate inequitable treatment of female children.

In the age group below 25 years, comprising 41 respondents, the majority (65.9 per cent) expressed the opinion that having a male child is associated with the desire to continue the family surname. A smaller percentage believed that having a male child is important for looking after parents (19.5 per cent), while an even smaller proportion mentioned the desire for dowry (14.6 per cent).

In the age group of 26 to 35 years, which consisted of 54 respondents, a similar trend was observed. About 59.3 per cent expressed the opinion that having a male child is linked to the continuation of the family surname. Furthermore, a significant portion (35.2 per cent) believed that having a male child is important for looking after parents, while a smaller percentage mentioned the desire for dowry (5.6 per cent).

In the age group of 36 to 45 years, comprising 64 individuals, the distribution of opinions continued to vary. Among them, 62.5 per cent expressed the opinion that having a male child is associated with the continuation of the family surname. About 23.4 per cent believed that having a male child is important for looking after parents, while 14.1 per cent mentioned the desire for dowry.

In the age group of 46 to 55 years, totaling 61 individuals, a similar trend persisted. Here, 57.4 per cent expressed the opinion that having a male child is linked to the continuation of the family surname. Furthermore, a significant portion (36.1 per cent) believed that having a male child is important for looking after parents, while a smaller

percentage mentioned the desire for dowry (6.6 per cent).

In the age group of 56 and above, comprising 20 respondents, the distribution of opinions showed variability. Among them, 60.0 per cent expressed the opinion that having a male child is associated with the continuation of the family surname. About 30.0 per cent believed that having a male child is important for looking after parents, while 10.0 per cent mentioned the desire for dowry.

**Table -2: Dowry System in Tribal Families Vs. Caste**

Caste	Will you give dowry to the bridegroom		Total
	Yes	No	
Savara	100	20	120
	83.3%	16.7%	100.0%
Jatapu	100	20	120
	83.3%	16.7%	100.0%
Total	200	40	240
	83.3%	16.7%	100.0%

The table 2 reveals on whether dowry will be provided to the bridegroom within tribal families. A large majority, comprising 83.3 per cent of respondents, indicate a willingness to provide dowry, reflecting the persistence of traditional customs and expectations surrounding marriage within the community. About 16.7 per cent of respondents express a stance against providing dowry, suggesting a potential shift towards challenging or rejecting long-standing practices associated with dowry exchange.

Among Savara caste, about 120 tribal families, the vast majority (83.3 per cent) expressed their willingness to give dowry to the bridegroom. This indicates a prevalent cultural practice within the Savara community where dowry is commonly offered. Further, a smaller proportion (16.7 per cent) of Savara respondents reported that they would not give dowry to the bridegroom.

Similarly, among Jatapu caste, about 120 tribal families, the majority (83.3 per cent) expressed their willingness to give dowry to the bridegroom. This indicates a similar cultural norm within the Jatapu community, where the practice of dowry is widely accepted. Further, a smaller portion (16.7 per cent) of Jatapu respondents reported that they would not give dowry to the bridegroom.

Overall, combining both castes, out of the total 240 respondents surveyed, the majority (83.3 per cent) expressed their willingness to give dowry to the bridegroom. This suggests a prevailing cultural practice across both Savara and Jatapu communities where dowry is commonly offered as part of marriage customs.

**Table -3: Get Easy Divorce in Tribal Society Vs. Religion**

Religion	Will you get easy divorce in tribal society		Total
	Yes	No	
Hindu	191	24	215
	88.8%	11.2%	100.0%
Christian	19	6	25
	76.0%	24.0%	100.0%
Total	210	30	240
	87.5%	12.5%	100.0%

The table 3 depicts regarding the ease of obtaining divorce within tribal society, the majority, constituting 87.5 per cent of respondents, perceive divorce as being relatively accessible or easy within their community. Further, 12.5 per cent of respondents believe that divorce is not readily obtainable within tribal society, indicating potential

barriers or challenges in accessing legal mechanisms for marital dissolution.

Among Hindu religion, about 215 respondents, the vast majority (88.8 per cent) expressed the belief that divorce is relatively easy to obtain in tribal society. Further, a smaller proportion (11.2 per cent) of Hindu respondents expressed the belief that divorce is not easily obtainable in tribal society.

Among Christian religion, comprising 25 respondents, the majority (76.0 per cent) expressed the belief that divorce is easy to obtain in tribal society. However, a notable minority (24.0 per cent) of Christian respondents expressed the belief that divorce is not easily obtainable.

**Table -4: Prevalence of Domestic Violence Vs. Marital Status**

Marital Status	Is there any prevalence of domestic violence		Total
	Yes	No	
Married	127	90	217
	58.5%	41.5%	100.0%
Unmarried	2	2	4
	50.0%	50.0%	100.0%
Widow	10	2	12
	83.3%	16.7%	100.0%
Divorced	5	2	7
	71.4%	28.6%	100.0%
Total	144	96	240
	60.0%	40.0%	100.0%

The table 4 describes that prevalence of domestic violence within tribal communities. Out of 240 respondents, around 60.0 per cent reported the prevalence of domestic violence in tribal society. Moreover, 40.0 per cent of respondents revealed that there is no domestic violence in tribal society.

It's imperative to prioritize raising awareness, promoting gender equality, and implementing robust strategies to prevent and address domestic violence in tribal contexts. These efforts are crucial for fostering safer and healthier family environments and ensuring the well-being of all community members.

Among married respondents, consisting of 217 tribal families, the majority (58.5 per cent) reported the prevalence of domestic violence in tribal society. Additionally, 41.5 percent of respondents stated that there is no domestic violence in tribal society.

For unmarried respondents, about 4 tribal families, an equal percentage (50.0 per cent) reported the prevalence of domestic violence in tribal society. Likewise, 50.0 percent of respondents revealed that there is no domestic violence in tribal society.

Among widows, comprising 12 tribal families, the majority (83.3 per cent) reported the prevalence of domestic violence in tribal society. Furthermore, 16.7 per cent of respondents stated that there is no domestic violence in tribal society.

For divorced respondents, about 7 tribal families, the majority (71.4 percent) reported the prevalence of domestic violence in tribal society. Additionally, 28.6 percent of respondents revealed that there is no domestic violence in tribal society.

**Table -5: Common Diseases Prevailed in Tribal Area Vs. Type of Family**

Type of Family	What are the common diseases prevailed in your area				Total
	Dengue	Malaria	Typhoid	No disease	
Nuclear	43	59	49	13	164
	26.2%	36.0%	29.9%	7.9%	100.0%
Joint	17	28	20	1	66
	25.8%	42.4%	30.3%	1.5%	100.0%
Extended	4	4	2	0	10
	40.0%	40.0%	20.0%	.0%	100.0%
Total	64	91	71	14	240
	26.7%	37.9%	29.6%	5.8%	100.0%

The table 5 represents regarding common diseases prevailing in the tribal area indicates several prevalent health concerns. Malaria emerges as the most common, with 91 cases reported, constituting 37.9 per cent of the total respondents. Following closely behind is typhoid, with 71 cases reported, representing 29.6 per cent of the respondents. Dengue fever is also significant, with 64 cases reported, constitute 26.7 per cent of the respondents. Interestingly, a small proportion of respondents, 5.8 per cent, reported no disease.

Among nuclear families, out of 164 respondents, the most commonly reported diseases were malaria, dengue, and typhoid. Specifically, 59 respondents (36.0 per cent) reported malaria, 43 respondents (26.2 per cent) reported dengue, and 49 respondents (29.9 per cent) reported typhoid. Further, a smaller proportion of nuclear families, comprising 13 respondents (7.9 per cent), reported no disease.

For joint families, out of 66 respondents, similar patterns were observed in the prevalence of diseases. Malaria, dengue, and typhoid were the most commonly reported diseases, with 28 respondents (42.4 per cent) reporting malaria, 17 respondents (25.8 per cent) reporting dengue, and 20 respondents (30.3 per cent) reporting typhoid. Only one respondent (1.5 per cent) reported no disease within joint families.

Among extended families, comprising 10 respondents, malaria and dengue were the most commonly reported diseases, with each affecting 4 respondents (40.0 per cent). Typhoid was reported by 2 respondents (20.0 per cent), while no respondents reported no disease within extended families.

**Table -6: Treatment Practices Vs. Occupation**

Occupation	What are the treatment practices			Total
	Traditional	Govt. Hospital	PMP	
Agriculture	59	9	26	94
	62.8%	9.6%	27.7%	100.0%
Agriculture Labour	31	7	30	68
	45.6%	10.3%	44.1%	100.0%
Business	16	5	8	29
	55.2%	17.2%	27.6%	100.0%
MFP	20	3	26	49
	40.8%	6.1%	53.1%	100.0%
Total	126	24	90	240
	52.5%	10.0%	37.5%	100.0%



The table 6 shows the treatment practices within tribal communities highlights a diverse range of healthcare-seeking behaviors. The treatment practices adopted by respondents in the area vary significantly. The majority of respondents, accounting for 52.5 per cent, reported resorting to traditional treatment methods. Another notable portion, constituting 37.5 per cent of respondents, sought treatment from Private Medical Practitioners (PMPs) who are not qualified. A smaller proportion, 10.0 per cent, relied on government hospitals for treatment. This distribution suggests a diverse healthcare-seeking behavior among the population, with a substantial reliance on traditional practices and significant utilization of PMP services.

Among tribal families engaged in agriculture, out of 94 respondents, the most common treatment practice reported was traditional medicine, with 59 respondents (62.8 per cent) opting for this approach. A smaller proportion of respondents, comprising 9 respondents (9.6 per cent), sought treatment from government hospitals, while 26 respondents (27.7 per cent) consulted Private Medical Practitioners (PMPs).

Among tribal families working as agriculture laborers, out of 68 respondents, traditional medicine was also the most commonly reported treatment practice, with 31 respondents (45.6 per cent) opting for this approach. A minority of respondents, comprising 7 respondents (10.3 per cent), sought treatment from government hospitals, while the majority, totaling 30 respondents (44.1 per cent), consulted Private Medical Practitioners (PMPs).

Among tribal families engaged in business, out of 29 respondents, the majority (55.2 per cent) reported opting for traditional medicine as their treatment practice. A smaller portion of respondents, comprising 5 respondents (17.2 per cent), sought treatment from government hospitals, while 8 respondents (27.6 per cent) consulted Private Medical Practitioners (PMPs).

Among tribal families involved in Minor Forest Produce (MFP) collection, out of 49 respondents, the most common treatment practice reported was consulting Private Medical Practitioners (PMPs), with 26 respondents (53.1 per cent) opting for this approach. Traditional medicine was also commonly reported, with 20 respondents (40.8 per cent) choosing this treatment practice. A smaller proportion of respondents, comprising 3 respondents (6.1 per cent), sought treatment from government hospitals.

**Table -7: Alienation of Land Vs. Caste**

Caste	whether land is alienated		Total
	Yes	No	
Savara	28	92	120
	23.3%	76.7%	100.0%
Jatapu	41	79	120
	34.2%	65.8%	100.0%
Total	69	171	240
	28.8%	71.2%	100.0%

The table 7 presents data on the perception of land alienation among the tribal families. Land alienation refers to the process by which indigenous or tribal lands are taken over, usually by the state or private entities, often without the consent of the indigenous communities who originally inhabited or used the land. From the provided data, it's evident that among the surveyed 240 tribal families, 28.8 per cent reported that their land is alienated, while the majority, constituting 71.2 per cent, stated that their land is not alienated.

For tribal families, belonging to the Savara caste, out of 120 respondents, 28 respondents (23.3 per cent) reported that their land is alienated, while the majority of 92 respondents (76.7 per cent) stated that their land is not alienated.

Similarly, among tribal families, belonging to the Jatapu caste, out of 120 respondents, a higher proportion, comprising 41 tribal families, (34.2 per cent), reported that their land is alienated. However, the majority of 79 respondents (65.8 per cent) stated that their land is not alienated.

**Table -8: Area of Land Alienated Vs. Religion**

Religion	If yes area of land			Total
	< - 1 acre	2 - 3 acres	4 - 5 acres	
Hindu	1	26	36	63
	1.6%	41.3%	57.1%	100.0%
Christian	1	1	4	6
	16.7%	16.7%	66.7%	100.0%
Total	2	27	40	69
	2.9%	39.1%	58.0%	100.0%

The table 8 provided data presents an analysis of land alienation categorized by religious affiliation. Among Hindu respondents, out of 63 respondents, 1.6 per cent reported alienating less than 1 acre of land, 41.3 per cent reported alienating between 2 to 3 acres, and 57.1 per cent reported alienating between 4 to 5 acres.

Similarly, among Christian respondents, out of 6 respondents, 16.7 per cent reported alienating less than 1 acre, 16.7 per cent reported alienating between 2 to 3 acres, and 66.7 per cent reported alienating between 4 to 5 acres.

The data illustrates the distribution of land ownership among Hindu and Christian respondents who reported land alienation, with a notable proportion of respondents owning land between 4 and 5 acres in both groups.

**Table -9: Impact of land alienation Vs. Occupation**

Occupation	Impact of land alienation		Total
	Lost of livelihoo od	Going to labour work	
Agriculture	20	11	31
	64.5%	35.5%	100.0%
Agriculture Labour	10	3	13
	76.9%	23.1%	100.0%
Business	6	3	9
	66.7%	33.3%	100.0%
MFP	9	7	16
	56.2%	43.8%	100.0%
Total	45	24	69
	65.2%	34.8%	100.0%

n=69

The table 9 reveals among the respondents who reported land alienation (69 respondents), the data reveals the perceived impacts of land alienation on their livelihoods. Specifically, 65.2 per cent of respondents cited the loss of livelihood as a consequence of land alienation, while 34.8 per cent mentioned resorting to labor work.

Among tribal families engaged in agriculture, out of 31 respondents, the impact of land alienation is substantial. Specifically, 20 respondents (64.5 per cent) reported the loss of livelihood due to land alienation, while 11 respondents (35.5 per cent) mentioned resorting to labor work as a consequence.

For those working as agriculture laborers, out of 13 respondents, the majority, comprising 10 respondents (76.9 per cent), reported experiencing the loss of livelihood due to land alienation. Meanwhile, 3 respondents (23.1 per cent) mentioned going to labor work.

Among respondents engaged in business, out of 9 tribal families, the impact of land alienation was significant, with 6 respondents (66.7 per cent) reporting the loss of livelihood. Further, 3 respondents (33.3 per cent) mentioned turning to labor work as an alternative means of income.

For those involved in Minor Forest Produce (MFP) activities, out of 16 respondents, the impact of land alienation is notable. Specifically, 9 respondents (56.2 per cent) reported experiencing the loss of livelihood, while 7 respondents (43.8 per cent) mentioned resorting to labor work.

**Table -10: Problems of Tribal Families**

Sl.No	Problems of tribal families	Yes	No	Total N= 240
1	Social discrimination	37.9	62.1	100.0
2	Exploitation from the middleman	58.8	41.2	100.0
3	Lack of Credit Facilities	76.7	23.3	100.0
4	Lack of Transport Facilities	59.6	40.4	100.0
5	Lack of Health facilities	62.1	37.9	100.0
6	Electricity Problem	76.7	23.3	100.0
7	No Potable water	67.9	32.1	100.0
8	Any other	48.8	51.2	100.0
<b>The Overall Total Percentage</b>		<b>61.1</b>	<b>38.9</b>	<b>100.0</b>

The table 10 presents the several significant problems faced by tribal families, highlighting the challenges they encounter in various aspects of life.

Social discrimination emerged as a prevalent issue, with 37.9 per cent of tribal families face social discrimination, which can include biases, prejudices, and unequal treatment based on their tribal identity, while 62.1 per cent did not encounter such discrimination.

Exploitation from middlemen was reported by 58.8 per cent of tribal families experience exploitation from middlemen, who may take advantage of their vulnerable position to manipulate prices or extract unfair labor or product concessions, while 41.2 per cent reported not experiencing such exploitation.

Lack of credit facilities was a widespread concern, with a considerable 76.7 per cent of tribal families struggle with the lack of access to credit facilities, hindering their ability to invest in livelihood activities, education, or healthcare, whereas only 23.3 per cent reported having access to credit facilities.

Similarly, the lack of transport facilities was a notable issue, with 59.6 per cent of tribal families face difficulties due to the lack of transport facilities, limiting their access to markets, schools, healthcare facilities, and other essential services, compared to 40.4 per cent who did not face such difficulties.

A significant proportion of respondents, accounting for 62.1 per cent of tribal families encounter challenges due to the inadequate availability of health facilities, including hospitals, clinics, and trained medical personnel, leading to compromised health outcomes, while 37.9 per cent did not encounter this problem.



Electricity problems were prevalent among tribal families, 76.7 per cent of tribal families grapple with electricity problems, which may include irregular supply, voltage fluctuations, or lack of access to electricity altogether, affecting their daily activities and quality of life, while 23.3 per cent did not face such problems.

In terms of access to potable water, 67.9 per cent of tribal families lack access to potable water, facing challenges related to waterborne diseases, sanitation, and hygiene due to the unavailability of clean drinking water sources, whereas 32.1 per cent reported having access to potable water.

**Table -11: Problems of Tribal Families Vs. Education**

Problems	Education	N	Mean	Std. Deviation	F Value	P Value
Social discrimination	Illiterate	128	1.5234	.50141	7.515	.000
	Primary	35	1.5143	.50709		
	High school	36	1.9444	.23231		
	SSC	30	1.8000	.40684		
	Graduate and above	11	1.5455	.52223		
	Total	240	1.6208	.48619		
Exploitation from the middleman	Illiterate	128	1.4531	.49975	6.543	.000
	Primary	35	1.3714	.49024		
	High school	36	1.5833	.50000		
	SSC	30	1.0333	.18257		
	Graduate and above	11	1.5455	.52223		
	Total	240	1.4125	.49331		
Lack of Credit Facilities	Illiterate	128	1.1328	.34071	5.546	.000
	Primary	35	1.3714	.49024		
	High school	36	1.2222	.42164		
	SSC	30	1.4333	.50401		
	Graduate and above	11	1.4545	.52223		
	Total	240	1.2333	.42384		
Lack of Transport Facilities	Illiterate	128	1.35156	.479334	2.963	.020
	Primary	35	1.31429	.471008		
	High school	36	1.58333	.500000		
	SSC	30	1.56667	.504007		
	Graduate and above	11	1.27273	.467099		
	Total	240	1.40417	.491756		
Lack of Health facilities	Illiterate	128	1.3438	.47683	1.876	.115
	Primary	35	1.4286	.50210		
	High school	36	1.5556	.50395		
	SSC	30	1.2667	.44978		
	Graduate and above	11	1.3636	.50452		
	Total	240	1.3792	.48619		
Electricity Problem	Illiterate	128	1.1328	.34071	5.546	.000
	Primary	35	1.3714	.49024		
	High school	36	1.2222	.42164		
	SSC	30	1.4333	.50401		
	Graduate and above	11	1.4545	.52223		
	Total	240	1.2333	.42384		
No Potable water	Illiterate	128	1.3125	.46533	3.155	.015
	Primary	35	1.1714	.38239		
	High school	36	1.4167	.50000		
	SSC	30	1.5000	.50855		

Any other	Graduate and above	11	1.0909	.30151	3.869	.005
	Total	240	1.3208	.46777		
	Illiterate	128	1.4219	.49580		
	Primary	35	1.5714	.50210		
	High school	36	1.6111	.49441		
	SSC	30	1.7667	.43018		
	Graduate and above	11	1.3636	.50452		
	Total	240	1.5125	.50089		

The ANOVA descriptive table provides insights into the mean scores and standard deviations across different education levels for various social factors, along with the F-values and associated p-values indicating the significance of differences among education groups.

**Lack of Health Facilities** - Mean scores vary across education levels, with individuals having a high school education reporting the highest mean score (1.5556). The F-value of 1.876 with a p-value of .115 suggests no significant difference in mean scores among education levels, indicating similar perceptions of lack of health facilities across educational backgrounds at 0.05 level.

**Social Discrimination** - The mean scores vary across education levels, with individuals having a high school education reporting the highest mean score (1.9444), followed by those with SSC education (1.8000). The F-value of 7.515 with a p-value of .000 indicates a significant difference in mean scores among education levels, suggesting that individuals with different education levels perceive social discrimination differently at 0.05 level.

**Exploitation from the Middleman** - Mean scores differ across education levels, with individuals having a high school education reporting the highest mean score (1.5833). The F-value of 6.543 with a p-value of .000 suggests a significant difference in mean scores among education levels, indicating varying perceptions of exploitation from middlemen across educational backgrounds at 0.05 level.

**Lack of Credit Facilities** - Mean scores vary across education levels, with individuals having a primary education reporting the highest mean score (1.3714). The F-value of 5.546 with a p-value of .000 indicates a significant difference in mean scores among education levels, highlighting varying levels of perceived lack of credit facilities based on education at 0.05 level.

**Lack of Transport Facilities** - Mean scores differ across education levels, with individuals having a high school education reporting the highest mean score (1.5833). The F-value of 2.963 with a p-value of .020 indicates a significant difference in mean scores among education levels, suggesting varying perceptions of lack of transport facilities based on education at 0.05 level.

**Electricity Problem, No Potable Water, and Any Other Issues** - Similar patterns of mean scores and standard deviations are observed across education levels for these factors. The F-values and associated p-values indicate significant differences in mean scores among education levels for electricity problem, lack of potable water, and any other issues, except for lack of health facilities at 0.05 level.

Overall, the analysis reveals significant differences in perceptions of social factors among respondents with different education levels, highlighting the importance of education in shaping individuals' perspectives on social issues at 0.05 level.

**Table -12: Working of CBOs/NGOs Vs. Caste**

Caste	CBO/NGO working in this area		Total
	Yes	No	
Savara	40	80	120
	33.3%	66.7%	100.0%
Jatapu	45	75	120
	37.5%	62.5%	100.0%
Total	85	155	240
	35.4%	64.6%	100.0%

The table 12 indicates that among the total of 240 respondents, 35.4 per cent reported the presence of Community-Based Organizations (CBOs) or Non-Governmental Organizations (NGOs) working in tribal areas, while the majority, constituting 64.6 per cent, indicated the absence of such organizations. This suggests a significant gap in the provision of services or support from external agencies in tribal areas. Further there is need to identify potential strategies for improving their engagement in addressing the socio-economic needs of tribal communities.

Among the Savara community, out of 120 respondents, 40 tribal families (33.3 per cent) reported the presence of CBOs or NGOs working in their area. Further, 80 respondents (66.7 per cent) indicated the absence of such organizations.

For the Jatapu community, out of 120 respondents, 45 tribal families (37.5 per cent) reported the presence of CBOs or NGOs in their area. In contrast, 75 respondents (62.5 per cent) stated the absence of such organizations.

### Conclusion

The article explores the impact of developmental programs and revealed the socio economic problems of the tribal families. However, there are concerning trends, such as the decline in MFP collection in sampled villages, attributed to factors like forest depletion and restrictions imposed by forest guards, as reported by respondents engaged in MFP collection activities.

Nevertheless, challenges persist, with half of the respondents in sampled villages reporting having loans. The tribal households, face issues related to social discrimination, marketing hurdles, intermediary exploitation, and inadequate transportation facilities.

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