



EDUCATION AND HEALTH CONDITION OF THE TEA TRIBE WOMEN: A STUDY IN ASSAM WITH SPECIAL REFERENCE TO TINSUKIA DISTRICT.

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Abstract: The tea tribe community people spread in different areas throughout the state of Assam. In contemporary times, the tea industry is known not just for being the producer of one of the most consumed beverages in the world, but also as a site of social and economic hardship, especially for women workers. Tea tribes in Assam face significant physical health challenges, marked by high rates of malnutrition (especially underweight children/adults), pervasive anemia, high burdens of respiratory (like TB, coughs) and skin diseases, frequent worm infections, and emerging non-communicable diseases (hypertension, gastritis) due to poor sanitation, diet, high tobacco/alcohol use, and socio-economic factors. To address academic barriers, it is recommended that remedial teaching programs and counseling services be introduced in tea garden schools. Family planning, health, and hygiene awareness program should be organized frequently among the community people. The NGO can take the responsibility.

Key Words: Tea tribe community, physical health, educational opportunities.

INTRODUCTION:

A well-developed educational status along with proper physical health conditions strengthens the future nation. Educating a child today is making a strong nation for tomorrow. As an old Chinese proverb states, "If you want to plan for a year, plant wheat; if you want to plan for ten years, plant a tree; and if you want to plan for a hundred years, educate women." This wisdom highlights the lasting impact of education, especially in empowering women to break cycles of poverty, discrimination, and marginalization. According to Article 21-A of the Indian Constitution, both the Union as well as State Government is responsible for providing free and compulsory education to the children of age group of 6 to 14 years. Despite many governmental initiatives some community people especially the tea tribe community of Assam still lagging and the governmental policies are unable to reach the desired goal. Their literacy rate and health status are still in pathetic conditions due to many factors which are at some particular level and community level. Therefore it is very much needed to investigate and identified the problems they are facing at the grass root level and alleviate the problems to build up a healthy community.

The tea tribe community people spread in different areas throughout the state of Assam. In contemporary times, the tea industry is known not just for being the producer of one of the most consumed beverages in the world, but also as a site of social and economic hardship, especially for women workers. The establishment of tea plantations in India is attributed to British colonial efforts, and the legacy of these plantations remains significant today (Goswami, 2005). However, education has begun to offer them a pathway toward freedom, equality, and self-determination.

Tea Tribes in Assam: Historical Background

Over 150 years ago, during the colonial period, the foundation of Assam's tea industry led to the recruitment of a unique group now known as the Tea Tribe community. Initially, British contractors attempted to convince local Assamese communities that working in tea gardens would improve their livelihoods. However, it soon became evident that the local workforce was insufficient to meet the demands of the expanding tea industry. Consequently, the colonial authorities began importing laborers from eastern and central India, regions that today comprise states such as Uttar Pradesh, Bihar, Odisha, Jharkhand, West Bengal, Andhra Pradesh, and Chhattisgarh. These migrant laborers were largely drawn from marginalized groups, including Adivasi communities, Dalits (formerly Scheduled Castes), and other socially disadvantaged classes, some of whom are currently classified as Other Backward Classes (OBCs) (Barua, 2008). Despite the difficult working and living conditions and limited access to transportation and communication, they adapted and carried on with their lives under surveillance and systemic neglect. Women, particular, have been disproportionately affected, facing early marriage, poor access to schooling, and minimal economic opportunities. In recent years, some progress has been made in improving educational access for women in the tea tribe communities.

Health of the women

Tea tribes in Assam face significant physical health challenges, marked by high rates of malnutrition (especially underweight children/adults), pervasive anemia, high burdens of respiratory (like TB, coughs) and skin diseases, frequent worm infections, and emerging non-communicable diseases (hypertension, gastritis) due to poor sanitation, diet, high tobacco/alcohol use, and socio-economic factors. Occupational hazards like body pain and injuries are common, alongside poor hygiene and lack of access to timely healthcare, leading to high morbidity. Reproductive health under the age group 18-45 is one of the major aspects of physical health. This is the period when women get their menstruation and later they gets married and became pregnant. India is a developing country and being a developing country India is continuously developing in many fields but a major issue which needs to be concern is the reproductive ill-health of women under the age group of 18-45. Another major issue during this period is menstruation hygiene which women are suffered a lot. The reproduction health and reproductive right along with other health hazards related to women have been increasing very high in the past days. The lack of health services available for women and children are evident for poor health status. Many a time the tea gardens women are unaware about the various health issues and due to maximum number of illiterate women, they don't know how and where to approach for health benefits. In most of the tea gardens area, most of the female workers are undergo menstrual problem and due to less number of toilet facilities and unhygienic condition of workplace they have to suffer various diseases especially in their private part, more over in many part of the tea gardens area, the toilet facilities are not sound, for why during periods, women are unable to become sanitize themselves.

Significance of the Study

This study holds significant value as it aims to study the health condition and educational opportunities available to educated women within the Tea Tribe community in the Tinsukia District of Assam. This research provides a deeper understanding of the role education plays in shaping the quality of life and standardize the style of living. It serves as a vital indicator of the causes behind the increasing dropout rates among girls in the Tea Tribe community.

Moreover, the study reflects the health condition of tea garden women and the causes of their poor health condition. Through this analysis, the researcher tries to focus on the availability of the educational facilities, cause of illiteracy, health issues faced by the women and the underlying causes of their poor health condition of the women of the tea community living in the Tinsukia District of Assam.

Objectives of the Study

1. To examine the educational status of the tea tribe women of the Tinsukia District of Assam.
2. To analyze the barriers faced by tea tribe women in accessing education.
3. To Study the various health issues faced by the tea tribe women of the Tinsukia District of Assam.
4. To analyze the causes of the various health issues faced by the tea tribe women of the Tinsukia District of Assam.

Research Questions

1. What is the present educational status of the tea tribe women of the Tinsukia District of Assam?
2. What are the major challenges faced by tea tribe women in accessing education?
3. What are the various health issues faced by the tea tribe women of the Tinsukia District of Assam?
4. What are the causes of the various health issues faced by the tea tribe women of the Tinsukia District of Assam?

Research Methodology

This study adopts a mixed-methods approach, utilizing both primary and secondary sources to explore the educational status and health condition of the tea tribe women of the Tinsukia District of Assam.

Data were collected through interview and observation from a sample of 150 tea tribe women of Tinsukia District. Sample has been decided by using simple random sampling which is adopted for selection of tea garden and incidental sampling has been used to select the sample of the tea tribe women.

Sample of the study

Following is the table of the sample. For the present study 3 tea gardens has been selected and 150 women were selected

Table no 1
Table of the sample

Sl no	Name of Garden	No of women
1	Bisakopi	50
2	Talap	50
3	Baghjan	50

Analysis of the objectives:

The objectives of the present study has been analysed both qualitatively and quantitatively. Statistical technique such as percentile has been used.

Analysis of objective 1

“To examine the educational status of the tea tribe women of the Tinsukia District of Assam.” To analyse this objective researcher has used interview schedule. Following data has been received

Table no 2
Table of educational status

Tea garden	Educational status			
	Primary	Secondary	Higher	Illiterate
Bisakopi	47%	13%	7%	33%
Talap	43%	22%	11%	24%
Baghjan	51%	17%	10%	22%

The above table shows that among the 3 garden Baghjan garden is higher in educational status. Their illiteracy rate is comparatively low. But Talap garden is higher in the case of receiving secondary education and higher education. Here higher education is referred to college level only.

Analysis of objective 2

“To analyze the barriers faced by tea tribe women in accessing education.”

To analyse this objective researcher used both the interview as well as observation schedule. After analyzing the data, following causes has been found:

- Absenteeism due to illness
- Domestic responsibilities,
- Lack of motivation.
- Poor academic performance discourages further schooling,
- Lack of instructional support, especially for slower learners,
- Illiteracy of parents due to which they does not want to send Girls to the school
- Negative teacher’s attitudes and classroom neglect create a hostile environment for female students.
- Poverty of parents, could not effort for uniform, shoes, bag
- Child labour
- Early marriage

Analysis of objective 3

To Study the various health issues faced by the tea tribe women of the Tinsukia District of Assam. Analysis of data for this objective shows the following result:

Table no 3
Table of health issue

Sl no	Name of the diseases
1	Cough
2	Skin diseases
3	Anaemia
4	Vitamin A deficiency
5	Accidental injuries
6	Learning disability
7	Blind
8	Deaf and Dumb
9	Hypertension,
10	Gastric problems

Analysis of objective 3

“To analyze the causes of the various health issues faced by the tea tribe women of the Tinsukia District of Assam.”

To analyse this objective researcher used both the interview as well as observation schedule. After analyzing the data, following causes has been found:

Table no 4
Table of causes of health issue

Sl no	Causes of health issue
1	Poor Sanitation & Hygiene
2	Low Health Awareness
3	Substance Abuse
4	Malnutrition
5	Intake of heavy carbohydrate and low protein and vitamins

Findings of the study:

1. The tea garden community women are still lagging in terms of receiving educational facilities. 2. Consulting with some women of the tea garden area it is found that girls have to look after their siblings, cooking for their parents as the mothers are out for plucking tea leaves regularly.
3. Some of girls are temporarily performed as daily wages basis either in the factory or in some other people's house as financial instability is the major problem in their family.
4. Some respondents left school because of their poor performance, poverty and parental separation as well.
5. They are vulnerable to some common diseases as well as communicable diseases like colds, coughs, ringworm-like symptoms, skin infections, vitamin deficiency and anemia etc.
6. By analyzing the data it has been found that the language problem is one of the barriers while transacting the academic curriculum in both primary and secondary schools.
7. Liquor consumption or substance use by the people is identified as another major cause of their family conflict which may be considered one of the major reasons for drop-outs children and the unhealthy physical condition.
8. By visiting their homes it is found that some of the houses, sanitary systems are not in good condition and not maintained well.
9. Majority of the respondents and their parents are found unaware of basic health tips, cleanliness, and hygienic conditions. They do not know about the uses of sanitary pad during the menstruation cycle.
10. In their work place there is lack of proper urinal facilities which caused urine infection diseases to the women.
11. Accidental issues are the common issues among them due to which they suffer from back pain, joint pain etc.

Suggestions

1. Educational awareness campaigns and motivational programs should be driven in the areas of the Tea Garden community to bring positive attitudes of parents towards education.
2. Special emphasis should be given to them on skill-based courses or vocational subjects through the school curriculum.
4. Different types of co-curricular activities should be included in the curriculum to motivate the students towards learning.
5. Scholarships or financial aid should be provided to all the children as most of the children leave school due to their poor financial conditions and support their families by earning money.
6. Family planning, health, and hygiene awareness program should be organized frequently among the community people. The NGO can take the responsibility.
7. The people should be suggested by medical professionals in community health centers available in their locality. They should be advised to take healthy diet.
8. Community hospitals or Community Health centers should be modernized with adequate facilities and medical professionals, technicians, and pharmacists. The medicine should be made available for them.
9. Awareness camp should be organized regarding substance use.
10. The women should be trained to use sanitary pad and live hygienically during the time of menstruation.

Conclusion

It may be concluded from my above study there are considerable numbers of children drop-outs from primary and secondary schools. To address academic barriers, it is recommended that remedial teaching programs and counseling services be introduced in tea garden schools. These programs can support students who struggle academically or emotionally, reducing dropout rates caused by absenteeism and poor performance. Their physical health conditions are not in a good state as they are suffering from different communicable and deficiency diseases. The governmental initiatives or schemes cannot work alone until or unless mass awareness should be created among the community people. Therefore, a multi-pronged approach involving government agencies, NGOs, tea estate authorities, and community leaders is necessary to foster a supportive environment for girls' education.

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