

## **Socio-Economic Profile and Quality of Life of Selected Oraon Tribal Living in and Around Sambalpur Town, Orissa**

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**Abstract:** The present research study elucidates some aspects of Quality of Life of Oraon, Sambalpur town of Orissa. Oraon is one of the most primitive tribals of Eastern India. A sum of 120 households comprising 552 individuals (60 native families of Charbhati and 60 migrant families living in and around Sambalpur town) of Sambalpur District, Orissa was selected purposely and interviewed through the help of a pretested structured scheduled for collecting relevant information on socio-economic and on various indicators of quality of life. The major findings reveal that the socio-economic and overall quality of life of natives, is far from satisfactory as the natives are very poor and they have poor educational status, poor sanitary and housing facilities, less possession of asset and vehicle, deficient food intake, poor fuel and energy availability and low per capita income. Thus, there is an urgent need to launch income generating, educational and health awareness programmes as well as to make them aware and help them, grab the opportunities provided by the government and non government organisations to improve the status of the tribals.

**Key words:** Oraon tribe, quality of life, sambalpur, socio-ecological

### **INTRODUCTION**

The term 'Quality of Life' is often discussed in broad terms as satisfaction of needs, feelings of well-being, good or bad working conditions, and other indicators. Such a conceptualisation of Quality of Life (QOL) encompasses all the material aspects of human life, and may extend beyond, to cover the physical and psychological dimensions. Quality of Life covers diverse and innumerable human need. Human needs at the elementary level may include essentials of survival like drinking water, perpetuation needs, shelter and warmth. However, a consideration of basic needs cannot stop at the level of mere survival; it has to transcend survival due to the special attributes and characteristics of human beings and social and psychological urges and demands.

Work on the concept of quality of life grew out of the social indicators movement of the 1960s and investigators started using a social indicator approach to define what QOL meant to them. However, subsequently, many researchers adopted both subjective and objective approaches to assess QOL, available on wide literature on the subject (Echevarria-Usher, 1999; Singh, 1989, 1999; Forget and Lebel, 2001; Noronha and Nairy, 2005; Sheyki, 2006). Sheyki (2006) made an extensive sociological study of Quality of life by examining the fertility behaviour from a multidimensional perspective. Echevarria-Usher (1999) equated health, in its fullest and multicultural connotation, with well being or quality of life. Understanding of QOL needs exploration of

relationship between various components-economic, biophysical, socio-cultural and political- to arrive at the priority determinants of health and wellbeing (Forget and Lebel, 2001). Noronha and Nair (2005) adopted participation process, case histories, biomedical health analysis and spatial and environmental analysis in developing a Quality of Life.

Orissa is predominantly, a small rural state of India, occupies an important place in the country with a high concentration of Scheduled Tribe and Scheduled Caste population. According to 2001 census, the total population of Orissa was about 36.7 millions, out of which the percentage of scheduled tribe population is 22%. Oraon is one of the 63 tribes of Orissa, scattered in and around Sambalpur District. The health and nutritional status of the different tribal groups are observed to be far from satisfactory in comparison to their sister counter parts of urban and rural areas of India. (Sen Gupta, 1980; Mahanty and Sahu, 1991; Hanumantha *et al.*, 1993; Meera and Leelathy, 1997). The incidence of angular stomatitis, glossitis, night blindness, photophobia, malnutrition and non-nutritional disorders like scabies, dental caries and malaria are found to be high in the tribes of Andhra Pradesh, Central India and other parts of India (NIN, 1973; Pingale, 1973; Sharma, 1971; Ali, 1978-79). Various study in India, indicated that unhygienic living conditions of the tribal are the major cause of skin infection and gastric disorder (NIN, 1973; Pingale, 1973; Ali, 1978-79).

Unfortunately, the Tribal's in India are struggling to make both ends meet. Displaced from their natural forest habitats, their economic, social and psychological poverty is steadily increasing. At one end of spectrum, are those "untouched by civilization". These groups still inhabit the forests that are closely linked to every aspect of their lives. They often have a balanced diet accessed through agriculture, hunting and food gathering. Here peoples' concept of health is more functional than biomedical, in that a person is considered healthy unless she/he is feels incapable of doing normal work assigned to that age/sex in that culture. The cause of illness is also attributed to specific acts of commission or omission, "spirits", or in some cases physical factors in the environment. Healing can take place through a herbal preparation or an act of atonement, all advised by a shamanic medium. At the other end of the spectrum, are those tribals displaced completely from the forest, whose modern lifestyle mirrors many of the problem of our age. As opportunities in mainstream society are limited, these people suffer from all the illness of the very poor. In addition, they suffer from social discrimination. Through interaction with other groups in society, they may follow a more clinical/ biomedical model of health and disease and accept other systems of medicine. Majority of the tribal people lay somewhere in between these two poles and are struggling to make both ends meet. Displaced from their natural forest habitats, their economic, social and psychological poverty is steadily increasing. It is in this context, it is essential to look at the quality of life led by the different tribal communities. A systematic approach is used to illustrate the dynamic state of the social, economic and environmental quality of life. The dimensions of life to be examined include; education employment, energy, environment, health, human rights, income, infrastructure, national security, public safety, re-creation and shelter. With this backdrop the present survey on Socio-ecological study on the Oraon tribe in Sambalpur, Orissa, was carried out during 2008-09 to observe the Quality of life led by these group of tribal population.

**Objectives:** The specific objectives of this study are as follows:

- To analyse the socio-economic condition of the selected Oraon tribal families along with the infrastructural facilities available in the locality where the tribal people live
- To evaluate the quality of life of these tribal people by the Quality of Life Index (Saxena *et al.*, 1998)

## MATERIALS AND METHODS

Field survey for this study has been carried out during July 2008 to June 2009 in and around Sambalpur

**Table 1: Parameters used for the computation of the quality of life index**

i)	Housing (Type and Number of room)
ii)	Source of Water used
iii)	Sanitary facilities Available
iv)	Food nutrients intake
v)	Health and safety status
vi)	Educational status
vii)	Fuel and energy availability
viii)	Assets possessed
ix)	Own transportation means
x)	Per-capita income

town of Orissa. The data for the present study has been collected from 120 Oraon tribal households (60 native families of Charbhati and 60 migrant families living in and around Sambalpur town, Orissa). The research design followed for this study is exploratory and descriptive in nature and the samples were selected purposively for collection of relevant data.

The study covers two aspects viz., socio-economic profile of the people and assessment of quality of life, with regard to demographic features, educational status, occupational structure, facilities available in the area and living condition, food intake pattern, asset ownership structure and income distribution. Health status of the people has been assessed pertaining to frequency of occurrence of various diseases. The study has sought to examine the incidence of various types of common diseases as well as chronic diseases viz., air borne diseases, water born diseases and parasitic infections.

The Quality of Life index (QOL) has been computed for the study with broadly the methodology adopted in a study "Quality of life index of the Mining Areas" by Saxena *et al.* (1998) of Centre of Mining Environment, Indian School of Mines, Dhanbad. The parameter used for the assessment of quality of life is presented in Table 1. The scoring for different parameters is as per the details in Table 2.

The minimum desired level of score for the above parameters for a fair living condition was defined with a value of 40 on a scale of 0 to 100. All the parameters have been given equal weight age and the total score of QOL index is 100. The classification on the basis of total score used for an analysis is as follows: <20- Poor, 2. 20-40 Average, 3. 40-60- Fair/Satisfactory and 4. >60 Good.

Caste, age, sex, marital status, family-type, per capita income, family size, nature of job etc was selected as the independent variables. The influence of these factors on respondent's quality of life and health and nutritional status is revealed in the present study. Appropriate statistical analysis was conducted wherever necessary to interpret the results.

## RESULTS AND DISCUSSION

**Socio-economic profile:** Description of the subjects by the socio-economic characteristics has been presented in

Table 2: Method used for the assessment of quality of life

Parameters considered	score
<b>1. Housing</b>	
Pucca - 3 rooms	5
Mixed - >5 rooms	5
Kuccha- >10 rooms	5
<b>2. Source of water</b>	
Bore Wells or own wells	5
Common well or tube well	3
Lower and higher values are assigned according to availability of rooms	
<b>3. Sanitary facilities</b>	
No facility	0
Proper facility	5
For Additional Own source of water higher value is assigned	
<b>4. Food type</b>	
Good (Rice + Pulses + curry)	5
Moderate (Rice + pulses + GLV)	3
Poor (Rice + Onion + GLV)	1
For additional facilities higher values are assigned	
<b>5. Prevalence of common diseases</b>	
Suffering from severe diseases	1
Suffering from common diseases	3
Suffering from no major disease	5
No diseases	10
Higher values are assigned as per availability of non-vegetarian foods and other protein	
<b>6. Educational qualification</b>	
Illiterate	0
<Matriculate	3
Matriculate	5
Higher education	7
<b>7. Fuel and energy used</b>	
Coal + Gas + Electricity	10
Coal + Electricity	7.5
Coal	5
Wood + coal	3
Wood	2
<b>8. Assets possessed amounting to</b>	
Rs. <5000/-	2
Rs. 5000 - 30,000	3
Rs.30,000-60,000	5
Rs. 60,000-90,000	7
Rs. >90,000	10
<b>9. vehicles possessed</b>	
Cycle	3
Scooter /Motorcycle	5
Four Wheelers	>7
Rest. 1800-2300	5
Rest. 2300-5000	6
Rest. 5000-10,000	7
Rest. 10,000-20,000	8
Rest. 20,000 above	9
<b>10. Per capita income per month</b>	
Re. <1000	2
Re. 1000-1400	3
Re. 1400-1800	4
Re. 1800-2300	5
Re. 2300-5000	6
Re. 5000-10,000	7
Re. 10,000-20,000	8
Re. 20,000 above	9

Table 3. The study shows that among natives and migrants majority of the head of the family belonged to 31 to 60 years of age group, the education level of the head of the family indicates that 43.3% of the natives were illiterate and there were no illiterate head of the family among migrants groups. Regarding the occupational status there is great difference among natives and

Table 3: Respondents on the basis of general information

Distribution and description	Natives		Migrants	
	No.	%	No.	%
<b>Age</b>				
30 years and below	9	15.0	-	-
31 - 60 years	45	75.0	56	93.3
Above 60 years	6	10.0	4	06.7
<b>Educational status</b>				
Illiterate	01.26	43.3	-	-
<Matriculate	22.00	36.7	07	11.7
Matriculate	10.00	16.7	10	16.7
Higher Education	02.00	03.3	43	71.7
<b>Occupational status of natives</b>				
Making bidi	14	23.4		
Shop	3	5.0		
Service	5	8.3		
Tailor/Driver	5	8.3		
Housewife/Retired	5	8.3		
Labour	28	46.7		
<b>Occupational status of migrants</b>				
Officer			16	26.7
Clerk/teacher/nurse			23	38.3
Peon/driver/technician			09	15.0
Housewife/retired			10	16.7
Carpenter/part time			02	03.3

migrants indicating that only 8.3% of natives are engaged as peon and operator in government offices. The rest 46.7% are working as daily wage labourers, 23.4% engaged in making and selling bidi, others are engaged as tailor, driver, or employed in medicine store, garage, cloth store as helper. But in case of migrants, majority of them are well established, some are O.A.S officers, bank officers, and are working as nurse, teacher, driver and clerks in government office and some retired government servants engaged in part time jobs like giving coaching or making candles.

Information relating to the different indicators used for the assessment of quality of life has been presented in Table 4. The study revealed that most of the natives live in kaccha houses with khupar roof and more over many of these houses are made up of two rooms without kitchen. The hygienic conditions of the houses are poor and no toilet facility is available in the houses. There is no water supply from the government, they collect drinking water from the bore well of one household paying for it. They go to nearby river for bathing and washing clothes. All the native Oraons use wood collected and/or purchased as their fuel except few who uses kerosene stoves and electric heaters as cooking fuel. All of them have supply of electricity to their houses. None of the families own vehicles, only one family have an Auto rickshaw which carry goods and 45% have a bicycle. The daily menu of native Oraons consists of rice with pulses and/or curry. Non-vegetarian items are consumed once in a week or month and the consumptions of fruits like apple, bananas are almost negligible due to which they suffer from many deficiency diseases. There is no reporting on any member suffering from any severe disease like blood pressure, diabetics, heart disease etc. This may be due to the fact that they were not aware of the problem.

Table 4. Respondents on the basis of family/ housing information

	Natives		Migrants	
	No.	%	No.	%
<b>Type of house</b>				
Pucca	6	10.0	6	9.3
Mixed	47	78.3	4	6.7
Kaccha	7	11.7	-	-
<b>Source of water</b>				
Public PHd, tubewell, or well	59	98.3	1	1.7
Own borewell or well without motor.	1	1.7	8	13.3
Own water facility.	-	-	51	85.0
<b>Sanitary</b>				
No facility	60	100.0	-	-
Common Toilet facility	-	-	2	3.3
Own Toilet facility	-	-	13	21.7
Own Toilet with proper facility	-	-	45	75.0
<b>Fuel</b>				
Wood	47	78.8	-	-
Coal + wood or coal + kerosene	13	21.7	1	1.7
Kerosene heater	-	-	4	6.7
Gas, heater, etc.,	-	-	55	91.6
<b>Vehicles possessed</b>				
No Vehicles	28	46.7	1	1.7
Cycle	27	45.0	7	11.7
Scooter/Motorcycle	4	6.6	35	58.3
Four wheelers	1	1.7	17	28.3
<b>Food</b>				
Rice, Pulses, Curry	39	65.0	-	-
Rice, Pulses, Curry				
Fruits, Milk, Non- Vegetarian	19	31.7	2	3.3
	2	3.3	58	96.7
<b>Health</b>				
Severe diseases	-	-	20	33.3
Common diseases	60	100.0	36	60.0
Major diseases	-	-	4	6.7
<b>Assets</b>				
Below Re. 5000	37	61.7	-	-
Rs.5000-30,000	23	38.3	1	01.7
Rs.30,000-60,000	-	-	6	10
Rs.60,000-90,000	-	-	27	45
Above Re. 40,000	-	-	26	43.3
<b>Per Capita per month income of natives</b>				
Rs. 200-500	25	41.7		
Rs. 500-700	16	26.6		
Rs. 700-900	12	20		
Rs. 900-1500	7	11.7		
<b>Per Capita per month income of migrants</b>				
Rs. 500-1000			7	11.3
Rs. 1001-3000			21	35.0
Rs. 3001-5000			20	33.3
Rs. 5001-10,000			11	18.3
Rs. 10,001-20,000			1	1.7

The economic condition of Oraons is not sound. They did not possess television, radio etc. Because of this they were observed to be unaware of many things and have ignorant attitude towards education, thereby increasing the prevalence of illiteracy. The Per Capita Income (PCI) is also low, i.e., 41.7% of native tribals have PCI per month in between Rs. 200-500/- and only 11.7% of families have PCI per month in between Rs. 900 to 500/-.

As a result they were not in a position to buy household materials; some families do not even have a cot and other essentials. A few families have bed, table, chair etc. The main source of income of these native Oraons comes from making and selling rice bear. Refrigerator, wardrobe, cooler and other luxury commodities were seen only in one household as their standard of living was better than rest. This particular family had a grocery shop and also sold alcohol.

The picture of migrant tribal are totally different from the native tribal, as 93.3% of the migrant tribal lived in pucca houses with proper toilet and water facilities. They used L.P.G as main fuel and kerosene and electric heater was also used by some. All had electric power supply and they maintained television, refrigerator, computer and other luxury gadgets for their convenience. It is observed that only one family did not have any vehicle as the head of the family was suffering from paralysis but rest 98.3% of migrant tribal have vehicles. Many have cycle and bikes. Some have four wheelers as well as bikes and cycles. They consume rice, dhal and curry as well as non-vegetarian items two or three times a week. Fruits and milk are also taken by many migrants. 60% of migrant tribal suffered from malaria, jaundice etc. in last one year, 6.7% of migrant tribal suffered from disease like headache, cold, cough, dysentery etc. and a good portion 33.3% of migrant tribal suffer from life style disease like diabetics, asthma, blood pressure etc. Though the migrants have good food to eat, all luxury commodities in comparison to natives but their situation regarding health is poor in comparison to natives. The PCI of each family is also good as they are employed in government and private sectors, 11.3% of migrant tribal have PCI between Rs.500 to 1000/-, 35% of migrant tribal have PCI between Rs.1001 to 3000/-, 33.3% of migrant tribal have PCI between Rs.3001 to 5000/-, 18.3% of migrant tribal have PCI between Rs.5001 to 10,000/- and 1.7% of migrant tribal have PCI above Rs.10, 000/-.

**Quality of life index (on the basis of various indicators):**

**Housing:** Mainly the type of houses can be categorised into three- pucca, mixed and kaccha. The different types of houses are scored following the methods used for the assessment of quality of life (Table 2). Score assigned for pucca house having 3 rooms is 5, pucca house with more than 3 rooms, pucca house where at least the floorings are of marble and pucca house which have first floor are assigned 7, 8 and 9 marks, respectively. Where the house is mixed that is the walls are made of bricks and cement or made of bricks or mud and the roof covered with tiles or asbestos and have >5 rooms the score is 5, but if there are less rooms like 1 or 2 rooms with or without kitchen then it is assigned score as 1, 2, 3 and the like according to the number of rooms. In case of kaccha house where

Table 5: Assessment of quality of life index among the sample respondents

	Natives		Migrants	
	NO (%)	X(sd)	NO (%)	X(sd)
<b>Housing</b>				
Poor	57(95)	2.29(1.13)	-	-
Average	3(5)	6.00	22(36.7)	4.81(0.50)
Fair	-	-	18(30)	6.77(0.42)
Good	-	-	20(43.3)	8.30 (0.57)
<b>Source of water</b>				
Poor	59 (98.3)	3.00	-	-
Average	-	-	1(17)	3.00
Fair	1(1.7)	5.00	16(26.6)	5.81(0.91)
Good	-	-	43(71.7)	9.76(0.64)
<b>Sanitary facilities available</b>				
Poor	60(100)	-	-	-
Fair	-	-	14(23.3)	4.78(0.57)
Good	-	-	46(76.7)	7.60(0.71)
<b>Food Intake</b>				
Poor	39(65.0)	3.00	-	-
Average	14(31.7)	5.00	-	-
Fair	2(3.3)	7.00	2(3.3)	5.5000(0.707)
Good	-	-	58(96.7)	7.4138(0.4968)
<b>Health</b>				
Poor	-	-	56(93.3)	2.8857(0.9670)
Average	60(100)	-	-	-
Fair	-	-	4(6.7)	5.00
Good	-	-	-	-
<b>Educational status</b>				
Poor	51(85)	-	-	-
Average	8(13.3)	-	2(3.3)	-
Fair	1(1.7)	-	3(5)	-
Good	-	-	55(91.66)	-
<b>Fuel availability</b>				
Poor	48(80.0)	2.02(0.14)	-	-
Average	12(20.0)	4.16(0.38)	1(1.7)	3.00
Fair	-	-	4(6.7)	6.00
Good	-	-	55(41.7)	7.98(0.35)
<b>Assets possessed</b>				
Poor	37(61.66)	2.05(0.22)	-	-
Average	23(38.33)	9.91(0.90)	1(1.66)	3.50
Fair	-	-	6(10)	5.00
Good	-	-	53(88.33)	7.50
<b>Own transportation means</b>				
Poor	49(81.7)	1.28(1.50)	-	-
Average	10(16.7)	4.70(0.94)	6(10)	3
Fair	1(1.7)	7	36(61)	5.86(0.42)
Good	-	-	18(30)	7.94(0.96)
<b>Per capita income</b>				
Poor	55(91.7)	577.89 (205.49)	7(11.66)	779.59
Average	5(8.3)	21243.33 (98.31)	21(35)	2308.73 (443.47)
Fair	-	-	20(33.33)	4222.61 (601.13)
Good	-	-	12(20)	7166.66 (1509.69)

the number of rooms are >10 then 5 score is assigned but less number of rooms are assigned less marks accordingly.

Taking the scores into consideration the families are classified as average, fair and good families with a score of 4 or 5 come under average category, score of 6 or 7 is considered fair and families with score of 8 or more come under good. Thus, from Table 5 it is seen that the housing

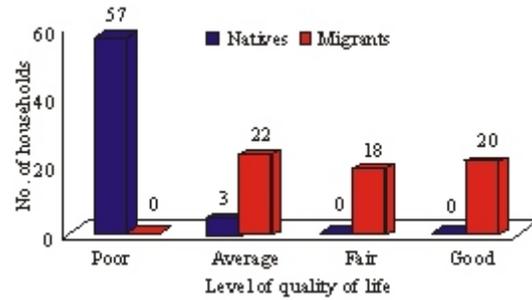


Fig. 1: Quality of life index on the basis of housing

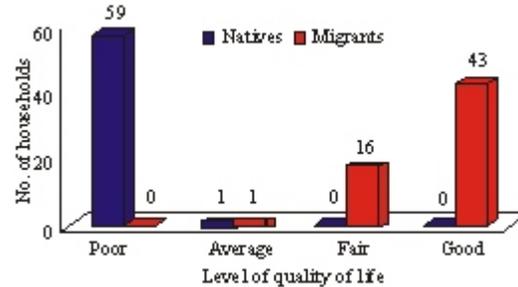


Fig. 2: Quality of life index on the basis of sources of water

condition of 95% of native tribals is poor with a mean score of 2.29 and standard deviation of 1.13 and rest 5% have average housing condition with a mean score of 6. (Fig. 1). Native tribals household have poor housing condition and 3 native tribal household have average condition. In case of migrants 22, 18 and 20 households have average, fair and good housing condition respectively, (Fig. 1).

**Sources of water:** If the source of water especially used for drinking purpose has been collected from public taps, tube well or well then the score assigned is 3, if it is collected from own tube well, bore well or well then it is scored as 5. If the family has own water facility as they have bore well or well or Public Health Department water supply and have over head tank with pumping facility, the households are given with a score of 8. If own water facility is there and through taps it is supplied to bathrooms, kitchen then score given is 9 or 10. On the basis of score the household are divided into four group i.e., poor, average, fair and good.

Thus, it was found that almost 98.3% (with a mean score of 3) of native tribal come under poor category because they fetch water from common source of water from the bore well in their area and only 1.7% of family have their own well with motor fitted in it. But 71.7% migrant tribals have good water facility with a mean score of 9.76 and 26.6% come under the fair category having a mean score of 5.81 and standard deviation of 0.91 and 1% come under average category with a mean score of 3 (Table 5). Figure 2 also presented the result in this connection.

**Sanitary facility:** Households having no toilet facility are assigned with a score of 0, having common toilet facilities as in government quarters are assigned with a score of 4, having own toilet but no water supply to toilet are assigned a score of 5, having toilets with water supply are scored 8.

Table 5 shows that all native tribal (100%) come under poor category as no family had toilet in their houses. No migrant tribals go to open field for defecation. 23.3% migrant tribal having a mean score of 4.78 and standard deviation of 0.57 come under fair category on the basis of sanitary facilities and 76.7% migrant tribal come under good category with a mean score of 7.60 with a standard deviation of 0.71. Figure 3 also depicts sanitary facility of the respondents according to the number of households.

**Food intake:** The families taking rice with onion and green leafy vegetables were assigned with a score of 3 and below and considered as poor category. 4 or 5 score was assigned to families taking rice with pulses and vegetable curry and considered as average category. Score of 6 or 7 has been assigned to families taking rice with pulse and curry along with sometimes fruits, meat, egg etc and considered as fair category. Those who take extra food like fruits, milk, vegetable items, cheese etc. along with rice and pulses and curry is assigned score of 8 or 9 and they come under good category.

Figure 4 and Table 5 presents the pattern of food intake. 65% of natives or 39 households come under the poor category as have a mean score of 3 with regard to dietary intake, 31.7% families or 19 households score between 4 or 5 and come under the average category and 3.3% of native tribal have fair food intake. In case of migrants 3.3% of tribal come under fair category with a mean score of 5.50 and standard deviation of 0.70 and 96.7% of tribal have good food intake with a mean score of 7.41 and standard deviation of 0.49.

**Health status:** Health of all the members of the family is studied by asking question regarding the health problem they have in the last one year. Accordingly, scores was given. Families who have person suffering from severe disease like blood pressure, diabetics, asthma etc are given score of below 4 and come under poor category. Families having persons' suffering from common diseases like jaundice and malaria are given 4 to 5 score and such families come in the average category. In families, when the members do not suffer from any major disease come under fair group with a scoring of 6 to 7. Families, where no members suffer from any diseases are given 8 to 10 score and come under good category. It is clear from Table 5 and Fig. 5 that 6.7% or 4 households of migrant tribals suffer from diseases like headache, cold and cough etc; therefore they come under the fair category. It has

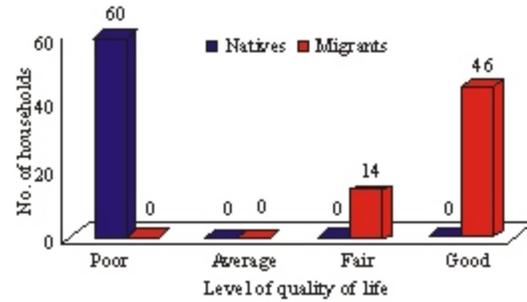


Fig. 3: Quality of life index on the basis of sanitary facility

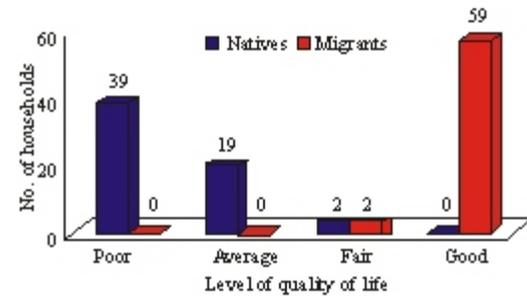


Fig. 4: Quality of life index on the basis of food intake

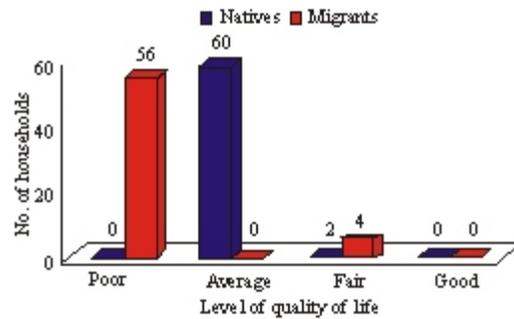


Fig. 5: Quality of life index on the basis of health

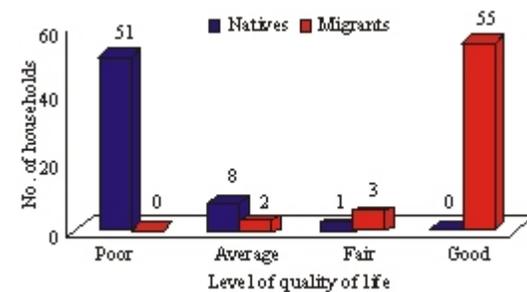


Fig. 6: Quality of life index on the basis of education

been revealed that rest 93.3% or 56 households come under poor category as one or more members in each family suffer from blood pressure, asthma, diabetics and other problems. All the natives came under fair category as no respondents suffered from any severe diseases like blood pressure, asthma, diabetics etc.

**Educational status:** The educational status of all the members of the family has been recorded and scored as per the details at Table 2. The members are categorized into four categories and marked accordingly. Those who were illiterate were not assigned any score, those who have done their schooling are given a score of 3, those having education upto matriculation both pass or fail are given a score of 5 and those who have done their intermediate, graduation or other professional course are assigned a score of 7. All the members of the family are assigned score individually and an average score is computed for each family. Those families with a mean score of below 3 are considered poor in their educational level, with a mean score of 3-4 are average, with a mean score of 5-6 are fair and the score of more than equal to 7 are considered as good in their educational level.

Thus, it is seen from Table 5 that 85% of natives are illiterate so they are considered as poor in their educational status, 13.3% of natives come in the average group and only 1.7% come under the fair group regarding their educational status. Whereas there are only 3.3% of migrants in the average category, 5% are in fair, 91.66% are in good category in their educational level.

Figure 6 also presents the educational status of the respondents according to the number of households, the educational status of 51 native tribal households is observed to be poor. Among migrant tribals the educational level of 55 households is observed to be good.

**Fuel availability:** All the respondents use different types of fuel like wood, coal, kerosene, electric heater or LPG cylinder, therefore, the respondents are divided according to the use of fuel and assigned scores to measure the quality of life. Score of 2 is assigned to those who used wood, score of 3 to those who used coal and wood, score of 7 and 10 marks to those who used electric heater or LPG cylinders respectively as fuel.

According to the scoring on the use of fuel the families are categorised as poor, average, fair and good. Table 5 revealed that no natives use LPG cylinders. 20% of the natives are in the average group having a mean score of 4.16 and a standard deviation of 0.38 and 80% are in poor category with a mean score of 2.02 and a standard deviation of 0.14. In case of migrants only 1.7% come under average category with a mean score of 3.00; 6.7% are in fair category with a mean score of 6 and 91.7% of migrants come under good category with a mean score of 7.98 and standard deviation of 0.35. Figure 7, also revealed the quality of life on the basis of use of fuel.

**Asset possessed:** The household assets possessed by each family like television refrigerator, table, chair, bed, vehicles etc. are observed and the total cost of all materials was approximately calculated and on the basis of this estimation they are grouped and assigned with scores. Families having asset below of Rs. 5000 are given a score of 2, assets worth of Rs. 5000-30,000 are scored

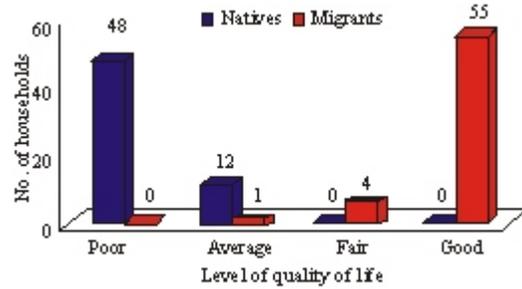


Fig. 7: Quality of life index on the basis of fuel availability

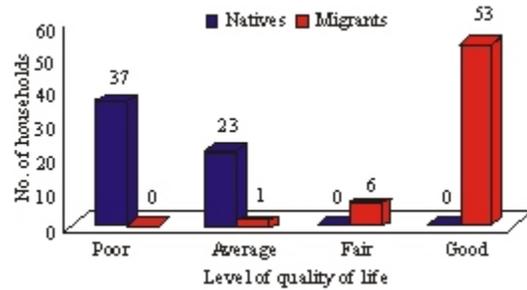


Fig. 8: Quality of life index on the basis of asset possessed

3, worth of Rs. 30,000 to 60,000 are scored 5, and assets worth of Rs. 60,000 to 90,000 are scored 7 and asset worth of above Rs. 90,000 scored 10. Families with a score of 3 and below are considered as poor in the category of asset possessed, with a score of 4 or 5 are in average category, score of 6 or 7 are in fair category and score of 8 or more are considered as good.

Thus, it is clear from Table 5 that natives own less material assets as their standard is poor in asset possessed, 61.7% are poor in assets possession group with a mean score of 2.05 and standard deviation of 0.22 and rest 38.3% come under average category having a mean score of 4.91 and standard deviation of 0.09. Whereas among the migrants 1.66% come under average category, 10% come under fair category and 88.33% come under good category on the basis of asset possession. Figure 8 also depicts asset possession of the respondents. Out of 60 household 37 native tribals household fall under poor category of asset possession and 23 under average. Among migrant tribal 53 household have good asset possession.

**Transportation means:** On the basis of means of transportation used and vehicle possessed the families are categorised as, poor, average, fair and good. Table 5 shows that 81.7% of native tribals are in poor group on the basis of means of transportation, having a mean score of 1.28 and standard deviation of 1.50; 16.7% come under average group with a mean score of 4.70 and standard deviation of 0.94 and only 1.7% come under fair category with a mean score of 7 whereas only 10.2% migrants come under average category having a mean score of 3.

61% of migrants come under fair category with a mean score of 5.86 and standard deviation of 0.42 and rest 28.8% come under good category having a mean score of 7.94 and standard deviation of 0.96.

Figure 9 presents the result on the basis of the number of households. Among native tribal 49 households have poor means of transportation, 10 have average and 1 have fair means of transportation. Among migrant tribals, 6 have average, 36 have fair and 18 have good means of transportation.

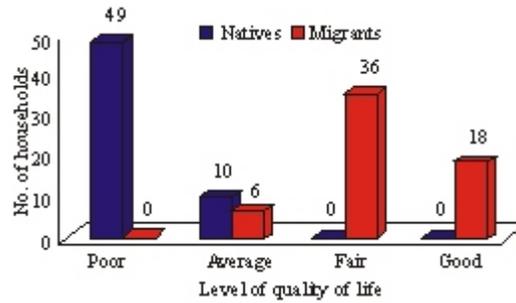


Fig. 9: Quality of life index on the basis of own transportation means

**Per-capita income:** The per capita income of each family is calculated by taking the total income of the family and dividing it by total number of family members. The families with PCI of Rs. 1000 and below per month are assigned a score of 2, those having PCI of Rs. 1001 to 1400 are assigned a score of 3, those having PCI of Rs. 1401 to 1800 per month are assigned 4. The score of 5,6,7,8 and 9 are assigned to families having PCI of Rs. 1801-2300, Rs. 2301 to 5000, Rs. 5001 to 10,000, Rs. 10,001 to 20,000 and above Rs. 20,000, respectively. Families with PCI of Rs. 500 to 1000 are categorised as poor, with PCI of Rs. 1001 to 3000 as average, with PCI of Rs. 3001 to 5000, as fair and PCI of Rs. 5001 or more are considered as good on the basis of economic status.

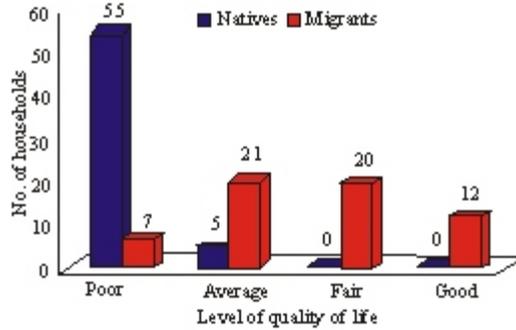


Fig. 10: Quality of life index on the basis of per capita income

Table 5 shows that 95% of the natives fall under the poor category on the basis of income with a mean score of 577.89 and standard deviation of 205.49 and the remaining 5% fall under the poor category with a mean of 1243.33 and standard deviation of 98.31, whereas only 11.66% migrants fall under the poor category with a mean score of 779.59 and standard deviation of 195.96; 35% come under the average category with a mean score of 2308.73 and standard deviation of 601.13; 33.3% are the fair group with a mean of 4222.61 and standard deviation of 601.13, and rest 20% have a good PCI with a mean score of 7166.66 and standard deviation of 1509.69. Figure 10 revealed that 55 native tribal households have poor PCI and 62 migrant households have average to good PCI indicating better economic status.

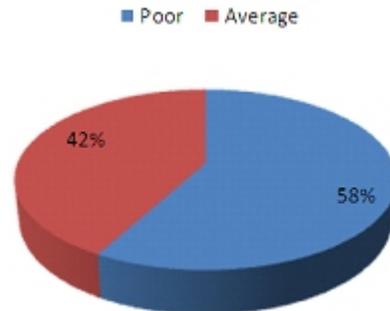


Fig. 11: Quality of life of natives

**Quality of life index:** All the 10 parameters are used for the computation of the Quality of Life Index in this research study. They were (i) housing (type and number of rooms) (ii) source of water used (iii) sanitary facilities available (iv) food and nutrition intake (v) health status (vi) educational status (vii) fuel and energy availability (viii) assets possessed (ix) own transportation means and (x) Per Capita Income.

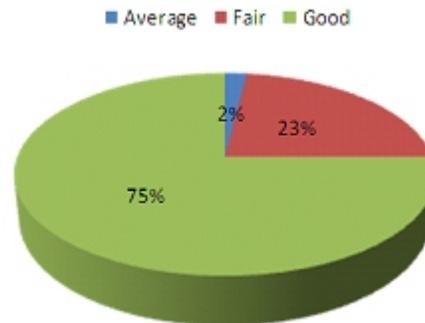


Fig. 12: Quality of life of migrants

Each parameter is scored out of 10 and hence, the total score comes to 100. The minimum desired level of score for the above parameters for a fair living condition was defined with a value of 40 on a scale of 0 to 100. All the parameters have been given an equal weightage and the total score of quality of life index is 100. The classification on the basis of the total score used for analysis is as follows: 1. <20- Poor, 2. 20 to 40- Average, 3. 40 to 60- Fair/Satisfactory 4. >60-Good.

Table 6 and Fig. 11 and 12 shows that only 2% of migrant tribal families have average quality of life, 23%

Table 6: Quality of life Index based on all the parameters combined

Rank	Natives		Migrants	
	No. (%)	X (SD)	No. (%)	X (SD)
Poor	25(42)	17.94(1.23)	-	-
Average	35(58)	26.05(4.08)	1(2)	38.00(-)
Fair	-	-	14(23)	53.79(3.56)
Good	-	-	45(75)	69.94(9.22)
Total	60(100)	22.67(5.14)	60(100%)	65.64(9.22)

have fair quality of life and majority 75% have good quality of life. Whereas among native 42% have poor and the remaining 58% have average quality of life.

### DISCUSSION AND CONCLUSION

It is well known that most of the tribal are victims of acute poverty and are living in wretched living conditions. Lack of money, along with illiteracy and unawareness, is often responsible for poor health conditions, and as a result the tribals remain at their present position on the graph of development (Sharma and Dwivedi, 2007). Various studies have been made on poverty, living standard and quality of life of different tribal populations, viz., Elwin (1939), Saxon (1957), Caprihan (1982), Mahapatra (1994), Yadav (2001), Sharma *et al.* (2002, 2004), Mishra *et al.* (2008, 2009) and many others exhibit low quality of life of the Tribals.

The present study shows that the native Oraons like many other tribal populations are victims of poor socio-economic conditions. Majority of native tribals live in kaccha houses with two rooms without kitchen and possess one cycle only. They don't have toilet and drinking water facility, purchase wood for fuel and their daily food intake consists of rice with dhal or curry which is void of rich foods like fruits, milk and non vegetarian items. The migrants are originally from Sundargarh, Deogarh, Kuchinda district and Jharkhand or Madhya Pradesh state. Majority of them are farmers but have well established themselves in different government and private services as they have good educational status. They have their own pucca houses with water and sanitary facilities and own television, refrigerator, computer and other luxury gadgets. They possess vehicles like cycle, motor bikes and cars, use LPG as fuel. Their diet consists of rice, dhal, curry along with milk, fruits and fish, meat or egg twice or thrice a week. Many suffered from lifelong diseases like diabetes, asthma, blood pressure which is not seen among native tribals.

Lack of money, interest and motivation along with alcoholism has led to the downfall of natives in their educational and occupational status. Thus, there is an urgent need to launch income generating, educational and health awareness programmes so as to make them aware and help them to grab the opportunities given by the government and non government organisations.

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