

An Inquiry into the World of the Adivasis of West Bengal  
Study carried out by Pratichi Institute and Asiatic Society

**Preliminary Findings**

According to the 2011 Census, India has 104,545,716 Adivasis in her population; had the Adivasis been able to form a country of their own, it would have been the world's twelfth most populous country. More so, the Adivasis of India—with more than 700 communities – contribute immensely to the country's rich linguistic, cultural, and social diversities. Despite such significance there seems to be a wide gap in the degree of knowledge about the Adivasis – at the all India level as well as in West Bengal. For example, the state has 40 groups notified by the government as Scheduled Tribes (STs), whom we refer to in this note as Adivasis, but even the educated middle class in West Bengal often use the terms "Adivasi" and "Santal" interchangeably. The latter is but one of the 40 notified tribes, forming 47 percent of the total ST population. With a view to the epistemological as well as the practical policy oriented importance of reducing this knowledge gap, the Asiatic Society and the Pratichi Institute came together to conduct an empirical research for a comprehensive understanding of the status of the Adivasis of West Bengal. Following a mixed-method approach, the research team, half of whom were members of various Adivasi communities, collected quantitative data from 1,000 households, and qualitative information from various sources in the sample areas. Districts selected for the study were: Puruliya, Bankura, West Medinipur (undivided), Birbhum, Bardhaman (undivided), Hugli, North 24 Parganas, Maldah, Darjeeling (undivided), and Jalpaiguri (undivided). We present below some of the preliminary findings of the ongoing analytical work.

West Bengal has 5296953 Adivasis, 6 percent of the total population in the state; in other words they form 5 percent of the total Adivasi population in the country. The Census 2011 data reveals that Adivasis of West Bengal lag far behind the average population and even Adivasis in other states in terms of human development.

The Adivasis follow the general pattern of aspiration of acquiring education reflected in increased level of school enrolment. Of a total of 661 children in the elementary education age group (6-14), 94 percent were found to be in school. Of the 41 children out of school in the above age group nine (1.4%) were found to be never enrolled, and 32 (4.8%) were reported to have dropped out.

Similarly in case of sicknesses, more than 98 percent patients sought treatment from persons or facilities practicing modern medicines.

There are however serious **capability constraints**.

- Children of eight percent of the respondents had reportedly to walk more than one kilometer to attend primary school, while the Right to Education Act 2009 mandates a primary school within 1 kilometer of each child's home.
- Only 36 (69%) of the 52 children above 12 months of age found in the survey could show immunization cards. Non-availability of immunization cards in respect of 31 percent of children points to weaknesses in the delivery of immunization. Of the children with immunization cards, only 21 (58%) were found to be fully immunized.

- Nearly two thirds of the households had no drainage system at all. Only three percent of those connected to drains had covered drains.
- Sixty one percent of the patients reportedly sought treatment from private allopathic practitioners (39% quacks, 19 % trained medical doctors, and 3 % private hospitals), and 34 percent went to public facilities.
- The miniscule share of treatment sought at the grassroots primary facilities (sub-centres and PHCs) was explained mainly by difficulty of accessing such services and poor functioning of the facilities (with huge lack of staff, staff, and empathy). Only 3 out of 54 institutional deliveries were done at the PHCs.
- The survey found that 53 percent of the total surveyed population was engaged in some or other income generating work. This implies that children and elderly people are also involved in earning. More than half of the total workers identified themselves as hired manual laborers (in both agricultural and non-agricultural sectors); 27 percent were cultivators. Nearly one fourth of the households were reported to be landless, and 88 percent were marginal farmers.
- Only 14 percent of the study population was aware of their rights under “The Scheduled Tribes and Other Traditional Forest Dwellers (Recognition of Forest Rights) Act 2006”, which legalized the Adivasis' right over forest lands.
- Shrinking work opportunities have resulted in the young men migrating long term to distant states, increasing the workload of the women members considerably.
- Thirty one percent of the surveyed households reported to have faced food scarcity of varying degrees during the last one year. For most of the households the diet contained mainly cereal; seldom could they afford to eat animal protein and pulses. Deforestation coupled with environmental pollution had severely reduced the availability of natural nutrients.
- Scarcity of food, poverty-born vices like alcoholism and the fragility of the public health system together seemed to have resulted in a much lower life span among the Advasis. The average age of family members who had died in surveyed households was 58 years – considerably shorter than the average life expectancy at birth of West Bengal (70).

The survey found significant **socio-economic and spatial variations**:

- While on an average 51 percent of the households had a toilet; none of the Lodha households had any. While 12 percent of the surveyed households were found to be unable to afford food more than twice a day, the corresponding figure for the Lodhas was 47 percent. Twenty eight percent of the out of school children was from Sabar households, as against the average figure of six percent. The incidence of landlessness among Tamang and Oraon households (73% each) far exceeded the average incidence of 23 percent. In Darjeeling and Jalpaiguri the proportion of pre-primary children attending private institutions were 71 percent and 59 percent respectively, far higher than the average figure of 20 percent
- Half of the total students pursuing elementary education were reportedly taking private tuitions, about one third of them from among the Adivasi youth. This indicates availability of local human resources.

In some areas like North and South 24 Parganas, Adivasis without political strength were found to be exploited by powerful lobbies including some politically and economically advanced Adivasis, alienating them from their land.

### Policy Requirements

For policy modifications, it is important to go beyond the administrative convention of bracketing Adivasis as a single category. Rather, policy framing requires mandatory recognition of the wide social, cultural, economic and other diversities, so as to address the different problems faced by different groups – community wise as well as region wise. For example, it may require special initiatives to expand the educational opportunities for those who are at the bottom. Similarly, while it may be mandatory to improve irrigation facilities for the agriculturist communities among the Adivasis, it would involve the development of a distinct program for the non-agriculturist groups who depend more on forest or other natural resources.

It is also important to abide by the general Constitutional rules, which are often violated by the state. In other words, the very common instances of violation of the Right to Forest Act, the Right to Education Act, the Mahatma Gandhi National Rural Employment Guarantee Act, and such have to be eliminated. It is not very difficult to identify the difficulties related to accessing the educational opportunities by the Adivasi children in general, and children of certain groups in particular. They include difficulties of physical access, the problem of language and culture, and the contrast between so called backwardness of these communities as imagined by the authorities and a very different objective reality, which upholds a plethora of cultural strength that can be fruitfully utilized while planning the educational initiatives. Utilization of the resources available in the form of educated Adivasi youths is just one of several ways that can be found.

Similarly, the terrible neglect in public delivery of healthcare must not be allowed to continue. Contrasting sharply with the general belief of the implementors, Adivasis tended to make use of the publicly delivered healthcare system, as and when available. Things can take a radically changed route by making the primary healthcare system, and other public programs, like education, employment, forest rights, and so on, effective.

The possibility of a fair implementation of the public programs, however, is contingent to an agentic involvement of the concerned communities. Instead of mere passive recipients, they must be respected as active agents of change and be involved in all spheres of policy—from planning to implementation.

Finally, it is imperative that the entire outlook on the Adivasi question be reversed. Instead of seeing the Adivasis as “problems”, the entire country can be hugely benefitted by seeing the Adivasis as co-citizens, and sharing their historically constructed cultural values, which often manifest the best forms of democracy and uphold the notions of higher levels of justice, fairness, and equality than those which prevail in the so called mainstream society. By ensuring their rights to live their own lives, the country can in fact guarantee itself a flourishing democracy.