

# A Study of Human Development among Tea-Garden Community in Dibrugarh District of Assam

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**Abstract** — As a scientific method of measuring development of a nation, HDI index has various superiorities over the traditional income based measures of development. It reflects the real scenario of development of human well-being. Though the Human Development Index has primarily space dimension, still it can be used to construct the Human Development Index by tribes, communities, ethnicity and religion. This paper is an attempt to analyze the status of human development of tea garden community of Assam. By adopting both old and new methodology of UNDP, HDI for the community is calculated. Both the values of HDI are very low as compared to the state and national average.

**Index Terms** — Adult literacy, Human development, Human Development Index, Human Well-being, Life expectancy, Schooling, Tea garden community, UNDP

## 1 INTRODUCTION

TRADITIONALLY development of a nation was measured by income level only. The most common and popular concepts that used for measuring development of a nation were per capita income and national income. With the increase in these two indicators it was said that the country is approaching towards development. But, in reality only the level of income or the income based measures of development cannot reflect the actual picture of development of a nation. Development experience of many fast-growing developing countries revealed that their high GNP growth rates failed to reduce the socio-economic deprivation of substantial sections of their population. Development in broad sense of a nation means upliftment of both social and economic indicators rather only improvement in income level. Regarding this UNO defined Economic development as improvement in both economic and social conditions along with cultural and institutional change. Thus, the concept of development of a nation cannot be limited only with income level. The increment in physical output or increment in national income is only a means of economic development. The final conclusion of development is the human well-being.

Moreover, the income based measures of development like GDP, GNP, GNP per capita etc. have many shortcomings. Among the major objections to these measures are their failures to include non-marketed or non-priced subsistence production including much of house makers work and to incorporate welfare and income distribution considerations. Because of these shortcomings, there have been numerous efforts both to remedy its defects and to create other composite indicators that could serve as complements or alternatives to these traditional measures. Major examples of these are the Unitary Index (Drewnovsky and Scott, 1966), UNRISD approach (United Nations Research Institute on Social Development, 1970), Adelman and Morris Approach (Irma Adelman and Cunthia Taft Morris, 1967), Physical Quality of Life Index (D. Morris, 1979) and finally the Human Development Index (UNDP, 1990).

## CONCEPT OF HUMAN DEVELOPMENT

The human development is a process of enlarging or widening people's choice and improving their level of well-being. Human development is about the real freedom that ordinary people have to decide who to be, what to do and how to live. The choices of people can be infinite or it can change with the passes of time. But there are three critical choices, that requires at all levels of development. These are: to lead a long and healthy life, to acquire knowledge and to be educated and to have access to the various resources which are very essential to lead a descent standard of living. Without these choices many other opportunities of human life remain inaccessible. However, the human development is not limited only with the attainment of these three choices. There are some additional choices which are highly valued by many people. These are: economic freedom, social freedom, political freedom, to enjoy self-respect and to enjoy the human rights. By keeping it in view Human Development Report, 1991 elaborated the concept human of development in this way- "People must be at the center of human development. Development has to be woven around people, not people around development. It has to be development of the people, by the people and for the people".

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## THE HUMAN DEVELOPMENT INDEX

For the first time in 1990, Human Development Report commissioned by United Nations Development Programme introduced the concept of Human Development Index. The architecture of Human Development Index was Dr. Mahbub-Ul-Haq. At the World Bank in the 1970s, and later as minister of finance in his own country, Pakistan, Dr. Haq argued that existing measures of human progress failed to account for the true purpose of development—to improve people's lives. Human development index measures average achievement of a country in three basic dimensions- a long and healthy life or life expectancy, educational attainment and standard of living of human being. Thus, human development index is a composite index of life expectancy at birth, educational attainment index (which is the weighted average of adult literacy rate and combined gross enrolment ratio) and income index (measure in terms of GDP per capita, US\$).

Though the Human Development Index has primarily space dimension, still it can be used to construct the Human Development Index by tribes, communities, ethnicity and religion. A country with higher value of human development index may have state wise or region wise variation, religion wise variation and cast wise variation regarding HDI value within the country. This study is an attempt to analyze about human development among tea garden community and construct a community specific Human Development Index by using UNDP methodology for the Tea garden community of Dibrugarh district of Assam, India. Since the internationally standard data are not feasible for the Tea-garden community of Assam, some proxies or substitute measures are used for the construction of human development index for the Tea-garden community in the present study.

Among the different factors that significantly contribute to the economy of Assam, tea is in the top position. Economy of Assam is incomplete without tea industry. Tea industry of Assam is said to be the backbone of Assam Economy. It contributes a huge portion to the NSDP of the state. The tea industry is an important identity of Assam, which recognizes Assam in India and worldwide. On the other hand, tea industry and tea garden labourers are the two sides of one coin. Both of these are complement to each other. Tea industry is incomplete without the tea garden labourers. In Assam, These tea garden labourers not only contribute a sizable chunk of the population in the state but also playing a major role in the tea production of the state, which in turn contribute towards the economy of the state. Thus, the development of the tea industry of Assam is directly or indirectly dependent on the tea garden labourers. But, the social and economic condition of this community is still backward, as compared to the other communities of the state (Saikia B., 2008). They are one of the most backward and exploited community in Assam due to decades of continuous exploitation by tea estate management and neglect on the part of the government ([https://en.wikipedia.org/wiki/Tea-tribes\\_of\\_Assam#Socio-economic\\_conditions](https://en.wikipedia.org/wiki/Tea-tribes_of_Assam#Socio-economic_conditions)). The level of education, Health and sanitation, housing condition, nutrition, per capita income etc. of this community are significantly poor. So, to

approaching this community towards development, a root level study about their social and economic condition is utmost necessary. Moreover, there are some aspects which are needed to be investigated to get a clear picture of level of development of this community. It will help in understanding the difficulties associated with their development issues.

## 2 OBJECTIVES OF THE STUDY

To make the present study systematic and precise, the following objectives have been articulated-

- To study the status of human development among the tea garden community people in Dibrugarh District of Assam.
- To construct a human development Index for the tea garden community.
- To suggest some policy implications from the findings of the study.

## 3 HYPOTHESIS OF THE STUDY

Based on the review of available literature and personal field observations the following hypothesis is set up.

- The status of Human Development among tea Garden Community is lower than national and state average.

## 4 METHODOLOGY

This study is based on both primary and secondary data. The primary data are collected with the help of structured questionnaires' from sample respondents. Besides, the knowledgeable persons of the study area and concerned officers are also consulted and information are supplemented to our primary data. The primary data are collected with the help of the technique of multistage sampling. So far as cultivation and production of tea are concerned Assam is in the top position within the country. On the other hand within Assam, Dibrugarh district is in the top position regarding both cultivation and production of tea. Dibrugarh district of Assam is also known as the "tea city of Assam". Moreover, Dibrugarh district has the highest concentration of tea garden community people within the state. Therefore the location of field investigation for the present study is limited only to the Dibrugarh district of Assam. Based upon the distribution of tea gardens and tea garden community's population, the whole Dibrugarh district is divided into four branches- Moran Branch, Dibrugarh Branch, Naharkatia Branch and Tingrai Branch. In the first stage, considering the size of the branches, two branches- Dibrugarh branch and Moran branch are selected purposively. In the second stage, from each branch, one commercially significant tea garden is selected followed by selection of 30% tea garden community household randomly from each tea garden. Thus, the selection of sample for primary data is in the following manner.

On the other hand, the various sources of secondary data of the study are as taken.

- Records of Tea garden- various records of tea garden offices, tea garden hospitals and tea garden schools.

- Booklets of various organizations related to tea garden community- Booklets and publications of Assam Chah Mazdoor Sangha (ACMS), Assam Branch Indian Tea Association (ABITA), Bharatiya Chah Parishad (BCP) and Tea Board of India.
- Booklets and publications of government organizations and departments- Assam Statistical Handbooks published by Directorate of Economics and Statistics, Assam; Assam Human Development Report 2016, published by OKD Institute of social Change and Development, Guwahati and Institute for Human Development, New Delhi; Assam Economic Survey, published by Directorate of Economics and Statistics, Assam; Booklet of Directorate for Welfare of Tea and Ex-Tea Garden Tribes, Assam; Publications of Tea Tribes Welfare Department of Assam.

Along with these government and organization's reports, various research papers and books related to Human Development Index, Tea Industry of Assam and Tea Garden Community people were reviewed and various web-site were visited and the necessary secondary data are supplemented for obtaining an unbiased picture of status of human development of the tea garden community.

## 5 LIMITATIONS OF THE STUDY

This study is an effort to analyze the status of human development of Tea Garden Community with some underlying objectives. To fulfill these objectives researcher is trying as much as possible with a specific planning. But, in spite of having careful planning there remain some limitations of the study. The main limitations of the study are.

- The study is limited only within the Dibrugarh district. Although the tea garden community people are spread out all over the state, only Dibrugarh district is selected for study purpose.
- Researcher often faced some difficulties while collecting data. It was observed that the people are so much introvert and they often not like to provide all the information required for the study. Therefore, some information are supplemented only from observation.

## 6 FINDINGS AND CONCLUSIONS OF THE STUDY

- Percentages of young and old dependent population in the study area are 41.36% and 4.16% respectively. Total percentage of dependent population is 45.52, indicating a very high dependency ratio of 83.49.
- Sex ratio among the sample position is lower than state (958, according to 2011 census) and national (943, according to 2011 census) average. Out of total 934 sample population, males and females are 482 and 452 respectively. Therefore the overall sex ratio among the sample population is 937.
- Main income sources of the sample population are wage income, income from livestock and poultry and income from trade and commerce. In the study

- area among the 161 household total income per annum from different sources is estimated at Rs. 3,88,50,366/-, indicating Rs. 2,42,814/- and Rs. 41,595/- per household income and per capita income respectively. This amount of per capita income is much lower than the national and state average. During the period 2016-17, annual per capita income of Assam and India were Rs. 67,303/- and 1,26,349/- respectively (at current price).
- Asset ownership status is very poor among the sample population. The assets of the sample population are mainly in the form of land, livestock and poultry, consumer durable goods, cash in banks, insurance policies etc. land ownership is not so significant among the sample population. In the study area only 4% of the sample households have 2.5 (0.826 acre) biggah land per household. Regarding bank account, 93% of the sample households (149 households) have bank account. Out of 149 households, only 23% households (34 households) have bank deposit more than Rs. 10,000/-. Remaining 115 households have bank deposits less than Rs. 10,000/-. On the other hand, In the study area only 11% of the respondeants have life insurance policy.
- During last five years, total numbers of death in the study area were 51. Therefore, annual average per annum is 10 (10.2). Thus, crude death rate of tea garden community people in study areas is 10.7 per thousand. This crude death rate of tea garden community in the study areas is much higher than state and national average according to 2011 census. According to 2011 census, crude death rate in Assam an India were 7.2 and 7.1 respectively.
- During the last five years total live births in the study area were 117. Thus, crude birth rate among the sample population is estimated at 24.6. This crude death rate is higher than state (22.8) and national (21.8) average as according to the 2011 census.
- From the crude birth rate and crude death rate natural growth rate of the sample population is estimated at 13.9, which is lower than national and state average. According to 2011 census, natural growth rate of population for Assam and India were 15.6 and 14.7 respectively.
- To study about the disease prevalence among the sample population diseases are categorized into two categories-major disease and minor disease. Regarding major disease 8.45% of the respondent's family members suffered from T.B.; 1.4% from cancer; 4.22% from high BP; 5.63% from respiratory problem; 7.04% from heart disease; 5.63% from Malaria and 4.22% from Encephalitis. On the other hand, regarding minor disease, almost all the households' family members among the sample household suffer from some minor diseases like fever, cough etc. On the other hand some other minor diseases that experienced by the family members of the sample households are stomach pain (38.8% of the

sample households), Diarrhea (26.3% of the sample households), Joint pain (36.1% of the sample households) and Jaundice (37.5% of the sample households).

- ix. In the study area, during the last five years ten infant deaths were observed. Thus the infant mortality rate among the sample population is estimated at 87, which is much higher than the national and state average. Infant mortality rate in Assam and India were 44 and 34 respectively, as according to SRS, 2016,
- x. By adopting abridged life table method life expectancy at birth for the sample population is calculated. By adopting this method life expectancy for the sample population is estimated at 60.1 years, which is lower than the national and state average. According to "Abridged Life Table- 2010-14", Office of the Registrar General & Census Commissioner, India, infant mortality rate in Assam and India were 63.9 and 67.9 respectively.
- xi. Access to health care facilities in the study area is found to be not satisfactory. The nearest health centers for the sample population are tea garden hospitals and primary health centers. But these are not sufficient for health care services. Very less amount of health services are available in the nearby tea garden hospital and primary health center
- xii. Knowledge about various health care facilities and schemes of the sample population are not satisfactory. Maximum of the respondents are not aware about various health care schemes launched by government.
- xiii. Regarding vaccination status, a good picture is observed among the sample population. Out of total sample households 84% household have vaccinate their children. However, it does not include all the recommended vaccines. It includes only those vaccines which are provided free of cost from government. In this case ASHA workers are playing very active role.
- xiv. Only 36% of the sample households have access to safe drinking water and the remaining 64% use impure drinking water.
- xv. Literacy rate among the sample population is estimated at 61.03, with 71.09% and 51.09% male and female literacy respectively. The overall literacy rate is found to be smaller than both national and state average. According to 2011 census, overall literacy rate for Assam and India were 72.19 and 74.04 respectively.
- xvi. Adult literacy rate for the sample population is estimated at 47.64%, which is lower than the national average as according to the 2011 census.
- xvii. Enrollment ratio at primary level is estimated at 81%.
- xviii. Regarding access to educational facilities in the study area, only access to primary and upper-primary level education is satisfactory.
- xix. Mean years of schooling is estimated at 4.03 years.
- xx. By using old methodology of UNDP, the HDI value for the sample population is estimated at 0.429. On

the other hand, by adopting new methodology of UNDP, the HDI value for the sample population is calculated at 0.253. This HDI value is lower than the national (0.640, according to the UNDP's human development report 2018) and state (0.557, according to Assam Human Development Report, 2014) average.

- xxi. HDI value for the tea garden community falls under the category of low human development.

## 7 RECOMMENDATIONS

On the basis of the findings of the study the following measures are suggested for improvement of the level of human development among the tea garden community people.

- i. Daily wage rate of the tea garden labourers are considerably low as against their hard labour. It should be increased by the Garden management so that a minimum standard of living can be maintained. On the other hand the casual or temporary workers of tea gardens get very small amount of wage. Moreover, they get employment only during the peak seasons of production. Thus, they are said to be seasonal unemployment. Therefore, Facilities of additional or substitute income sources for these people should be generated.
- ii. Tea-garden hospitals should be modernized. Maximum facilities of health services should be made available in the tea garden hospitals. It will ensure the easy access to health care facilities for the tea garden labourers.
- iii. School dropout is very high among the children of tea garden community. Special awareness activities against school dropout should be arranged in the tea garden areas by the government and garden management. Along with the general education, special technical or vocational education scheme should be launched by state or central government especially for unemployed youth belongs to tea garden community. It will provide the opportunities of self-employment for them.
- iv. An adult literacy Programme should be launched in the tea garden areas with specific time and specific curriculum convenient for the adult tea garden workers.
- v. Alcoholism is a major problem among the tea garden community society. In the study area it was observed that maximum of adult persons (both male and female) are addicted from alcoholic liquor. It is very harmful for their health and social life. Thus, both production and consumption of alcoholic items in nearby tea garden areas should be banned.
- vi. Most of the sample households in the study area are using impure drinking water, which may cause prevalence of various diseases. Safe drinking water facilities should be provided by the garden management.
- vii. The female tea garden worker should get the facilities related to health, as the government

- employees. The female garden labourers do not get the facilities of maternity leave or child care leave, as obtained by the female government employees. Therefore, they do not get the necessary chances to take care their child during both pre and post natal periods. It may causes prone to diseases and malnutrition of their children. Therefore, to give birth and to grow a healthy baby, they should be provided leaves along with all the facilities. Moreover, for better care of female and children, special physician for female (Gynecologist) and child should be arranged in the tea garden hospitals by the garden management.
- viii. The saving habit should be created and popularized among the tea garden labourers. For this, special branches or sub-branches of nationalized commercial banks should be opened in the tea garden areas. Though, after introduction of Pradhan Mantri Jan Dhan Yojana, many households have opened bank accounts, the saving amounts in these accounts are considerably low. Therefore, special effort should be made by garden management and government. Moreover, various NGOs may take steps regarding this.
- ix. People should be made aware about various government programmes and schemes related to economic and social development. These programmes and schemes should be popularized among them, so that they easily access the benefits of these.

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