

Study Aimed to Know the Mental Health Problem Faced by Tribals during Migration Out of Nandurbar District of Maharashtra

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ABSTRACT

Migration is one of the burning issues of the state like Maharashtra be it pull factors (high wages, city life, better opportunity etc) or push factors (like unemployment, poverty, pathogenic home environment, uneven land distribution etc) the tribals which include both Bhil and Pawara are compelled to leave their native place in search of their better livelihood prospect. Mental health problem faced by tribals during migration out of Nandurbar District of Maharashtra of Maharashtra. Total 150 samples were taken of migrant and non-migrant who include both male and female tribal groups. The stratified random technique was used to collect the data. Descriptive analysis was made to find out the result. The findings show that the migrant group is having more anxiety in compared to non-migrant groups of tribal people. Migrant male group of people are showing more psychopathic deviation, repression sensitization, anxiety, depression and hysterical symptoms, whereas female migrant group was found the psychiatric symptoms like anxiety, repression sensitization, depression and hysterical behaviour.

Keywords: *Migration, Tribals, Mental Health.*

Migration has its positive as well as negative impact on mental health. The persons who go outside the district or state for job have different dimension as to judge their reason for going there. Many of them who enjoyed migration were found mentally well and no anxiety comes out from their face. In contrary of it the persons who used to feel themselves compelled to go outside the native place in search of job is found under stress and may have mental health problems, because they were found very serious about the future of their family members. In case of failure of getting such expected job or money they become the victim of mental tension and disorders.

Migration has been defined broadly as a permanent or semi-permanent change of residents (Lee, 1969), Migration creates conditions for deep-rooted changes in the social and social and cultural life of both the migrant community as well as host community. The term has been defined in the new Webster's Dictionary (1966) as "the act of an instance of moving from

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Received: February 7, 2019; Revision Received: March 14, 2019; Accepted: March 18, 2019

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one contrary, region of place to settle in another (2) the act or an. Yousef et. al, (1978) has shown that gender differences do create distinct patterns of migration. The focus of the studies on migration in India was the level and pattern of migration (Davis, 1961; Kadi and Sivamurthy, 1988; Malhotra, 1974; Narayan, 1993; Skeldon, 1986, Srivastava, 1998), Very few studies have focused on women's migration (Gulati, 1983; Jetley, 1987; Lingam, 1995; Premi, 1980; Singlh, 1978),

Similarly, Tee Rink (1995) has documented the seasonal survival migration of poor tribal (Bhil) households from Maharashtra to the sugarcane fields of southern Gujarat. The study a seasonal out – migrating workers, especially women from the Chhattisgarh region of Eastern Madhya Pradesh are known locally as Sukhavasis (happy people) by Sen (1995), highlights the physical hardships, sexual vulnerability, lack of social security and access of services that migrants face at the point of destination. The studies on migration done by Banerjee (1985), Caldwell (1967), Cowling & Metcalf (1968), Mandal (1981), Nanda (1964), Todaro (1969) found that economic factors are responsible than the social and political. Barnum (1976) has however, studied correlation of social and political factors with economic structure.

Kelkar & Devnathan (1991) found tribal women in Maharashtra state are less educated and untrained due to poverty. They do not have equal right in property like men folk. Even then they are bound to look after their family because most of the tribal men in Maharashtra have bad habits of drinking Haria (Rice) and Daru (Wine). Dayal (2001) Studied labour migration from Maharashtra is mainly a seasonal one. Men and women both migrate from their region to brick kilns, construction sites to agriculturally prosperous area (Rohtas, Punjab, and harayana) For plantation harvesting and post harvesting operations etc. Dewan (2003) has studied socio- economic correlates of tribal and non-tribal and non-tribal migrant women in Maharashtra and found that the percentage of tribal women migrants is higher than that of non-tribal women migrants. Chattopadhyay (2005) gives evidence of increased mobility between states or long-distance migration due to betterment of transport systems and also highlights the increase mobility of women from poorly developed states to that of prosperous and developed states. Sundari and Shanti (2005) found and stated that both census and NSSO (National Sample Survey Organization) data reveal an overall growing trend of female migration compared to men in rural and urban sectors. Kumar (2006) had to say in his study that these women not only migrate due to 'push' factors in fact there is a sufficient 'pull' for women from rural and tribal areas.

Shanti (2006) indicates the failure of NSSO (National Sample Survey Organization) data to capture the magnitude of high level; or rural-urban migration of females of employment reasons. Acharya (2007) concludes that trafficking and prostitution related migration of women is another type of the phenomena of female migration.

In the year 1932, Overgaard in a study on migration and its connection with mental health of migrants found that the people who migrated had genetically predisposed psychosis and later they developed Schizophrenia. He pointed out that they are not only vulnerable to mental illness but also prone to develop disorders in subsequent to migration. It means to say that migration becomes a precipitating factor for mental illness due to various barriers that people come across in the post migration period (Bhugra and Gupta, 2011). The pattern of migration may negatively affect the health of the migrants (Smith et al, 2003). The migrant adolescents have reported worse mental health symptoms and highly engaged in risk behaviour compared with the native Israel counterpart, it was even significantly higher when compared with the

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Second generation migrant adolescents (Nakash et al, 2012), More over the services are not inclusive because of which social and health related issues are more prevalent among migrants (Mc Mohan and Ward, 2012), In migrant children feeling of anxious, helplessness, sometimes suicidal thoughts by self –degrading and self-blame were also found (Altinyelken, 2009). In India, in a study it was found that the poor psycho-social health status was there in internally migrated population (Bhardwaj et al, 2012), Migrants have poor awareness about their mental health as well as have a very poor help seeking behaviour (Aravindraj, 2004) In refugee children are having adjustment problems with the environment , low self –esteemed and emotional problems, They have high psychological and social distress, which indicates a poor mental health status of the refugee children (Krishnaveni, 2010) The psychiatric morbidity was more among Kashmiri migrants (33.66%), who were staying in Muthi camp at Jammu, compared with non-migrants (26%) (Banal et, al, 2010). The psychiatric patients among the migrated group had been suffering for more than 10 years and mostly belong to older aged group, (Sethi et al, 1972).

Objective

- To study the mental health status of the tribal men and women after migration

Hypotheses

1. The anxiety level will be higher in migrant groups as compared to non-migrant groups.
2. The symptoms of mental disorder will be common in migrant group than non-migrant group .

METHODOLOGY

Sample

The sample for the study was consisting of 150 migrant 75 and non-migrant 75 groups of tribal men and women. The selection of the sample was based on stratified random technique.

Tools

- 1. Personal data sheet : to Gather the basic information**
- 2. Sinha's Anxiety Scale**

This is another test on anxiety consisting of 100 items, all in positive form, taken from the following areas :

- (i) Health, appearance and injury
- (ii) Area of ambition
- (iii) Family anxieties
- (iv) Friendship and love anxieties
- (v) Social relationship and approval
- (vi) Worries of future.
- (vii) Worries of civilization, war, virtue
- (viii) Guilt or shame
- (ix) Physical and psychological manifestation
- (x) Psychological manifestations.

- 3. Multiphase Personality Questionnaire (MPQ)**

Derived from the Minnesota Multiphase Personality inventory (Hathaway and McKinley, 1955), it was developed and validated in India by Murthy (1970). It is a 100-item forced choice true false inventory. It taps personality profile in terms of Anxiety, Depression, Mania, Paranoia, Schizophrenia, Hysteria, Psychopathic Deviance, K(lie) and Repressor-Sensitizer scales. The cut-off norms provided for the general population

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are in the form of cut-off scores and not as mean \pm sd scores (Table 2). The scale has been used in earlier research in India (De, 1996) The three groups were compared against the normative data and with each other using X² test, student's t test, one-way analysis of variance (ANOVA) and Scheffe's test (Scheffe, 1957) Multiple discriminate analysis was carried out to assess the contribution of various variables to predictability of the correct group assignment.

RESULT AND DISCUSSION

The above table -1 shows that the percentage of average anxiety of migrant groups is higher than the counterpart non-migrant tribal group. Total cases of migrant anxiety groups are found 123 out of total 150 cases which percentage is 82.5 where as non-migrant tribal cases were found 75 which percentage is 41 below of the migrant tribal groups.

In this was the findings do prove the hypothesis VI which has been stated as that the anxiety level will be higher in-migrant groups as compared to non-migrant tribal groups.

Table -1: The anxiety level in migrant and non-migrant groups

Category	No. of cases of having anxiety above the average	Percentage (%)
Migrant	61/75	82.5
Non- Migrant	30/75	41
Total	150	

Table-2: the symptoms of mental disorder in migrant group and non-migrant (NM) Groups.

Clinical dimensions or factors	Cut – off points	Mig.		%	NM		%
Psychopathic deviation (pd)	3	4	20	32	3	7	11
Repression sensitization (RS)	3	5	31	42.5	5	28	38.5
Anxiety (A)	2	4	61	82.5	7	30	41
Schizophrenia (Sc)	2	1	12	16	-	-	-
Paranoia (Pa)	3	2	6	07	-	-	-
Mania (Ma)	2	1	14	18.5	-	-	-
Depression (D)	1	2	20	27	1	6	7
Hysteria (Hy)	2	2	28	38.5	2	14	19
Lie (K)	1	1	5	6.5	1	7	7.5

Shows that the migrant groups of tribal are having more mental health problem in compared to non-migrant tribal people. The cases of anxiety were found higher and common in migrant as well as non-migrant tribal group. Maximum number of anxiety cases were found in migrant groups i.e. 82.5% followed by 41% in non-migrant tribal groups. The migrant group have crossed its cut-off points in the factors more in anxiety (82.5), followed by repression sensitization (42.5), hysteria (38.5) psychopathic deviation (32%) and depression (27%), where as non-migrant group have crossed its cut-off point more in anxiety (41%) followed by repression sensitization (38.5%) and hysteria (19%). The findings suggest that the migrant

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groups are having more mental health problems than the non-migrant groups. In this way the hypothesis is proved that mental health problems are more common in migrant groups than the non-migrant groups of tribal.

CONCLUSION

The findings suggest that the migrant group is having more anxiety in compared to non-migrant group of tribal people. Migrant male group of people are showing more psychopathic deviation, repression sensitization, anxiety, depression and hysterical symptoms, whereas cut-off score of female migrant group was found more on the psychiatric symptoms like anxiety, repression sensitization, depression and hysterical behaviour. In contrary to the non-migrant tribal groups of people the cut-off scores were also reflecting higher on the disorders like repression sensitization, depression and hysteria.

REFERENCES

- Acharya, P.K. (2007) Migration and Trafficking of Women. *Women's Link*, Vol. 13 (1), Jan-Mar.
- Altinelken H.K. (2009) Migration and Self-esteem: A qualitative study among internal migrant girls in Turkey. *Adolescence*: 44 : 149-63 (PubMed)
- Arvindraj E (2004) Psycho-social profile of Migratory Quarry Workers: NIMHANS Deemed University, Bangalore.
- Banal R, Thappa J, Shah HU, Hussain, kA, Et al (2010) Psychiatric Morbidity in adult Kashmiri Migrants living in a migrant camp at Jammu; *Indian Journal of Psychiatry*; 52: 154-8.
- Bhardwaj U, Sharma, V, George s & Khan, A (2012), Mental Health Risk Assessment in selected Urban Slum of Delhi-A Survey Report. *J NursSciPract*, 1:1.
- Bhattacharya, S. (2006) Internal Migration of Women and Development in India : A Case study of a vulnerable Group. *International Conference on Population and Development in Asia: Critical Issues for a Sustainable Future*, 20- 22 March.
- Bhugra D. & Gupta S. (2011) Editors Migration and Mental Health. New York: Cambridge University Press:
- Chattopadhyay, B (2005) typology of Female Migration Urban India, 25 (1) : 1-20
- HemaKumari T.A. and Tataji, U, (1998) Seasonal Migration of Women Workers: Process, Patterns and Consequences. *Indian Journal of Social Work* 59 (3) 701-806.
- Hindustan Times: Ranchi, Sept 13, 2013. Jetly, S. (1987) Impact of Male Migration on Rural Females, *Economic and Political Weekly*, 22 (44) WS 47-WS 63.
- Karlekar, M (1995) Gender Dimensions in Labour Migration: An Overview, in Schenk-Sandhergen (Ed) *Women Seasonal Labour Migration*, Sage Publications, New Delhi.
- Kumar N, (2006) Working Conditions of Female Domestic Workers in Delhi [Accessed 24.03.2007].
- Labor Migration from Maharashtra (2001) Summary and Conclusion –A Study Sponsored by Ministry of Labour. IHD Government of India, New Delhi.
- Lingam, L. (1995) *Women in Migration : A Study Among Low Income Andhra Migrant Households in Bombay (mineo)*: Tata Institute of Social Sciences, Mumbai.
- Mazumdar, V. (1990) *Women Workers in India* Chanakya Publications, Delhi.
- Mukherjee, M (2000) Report on Out-migration of Tribal Woman in Domestic Work with Special Reference to Ranch District (unpublished), p.23.
- Nakash O, Nagar M, Shoshani A, Zubida H, Harper RA (2012). The effect of acculturation and discrimination on mental health symptoms and risk behaviours among adolescent migrant is Israel; *Culture Divers Ethnic Minor Psycho*: 18: 228-38, (PubMed).

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- Santhi, K.(2005) Gender Dimensions in Urban Migration in India. IUSSP XXV International Labour and Working Class History No.65 Spring pp 77- 104.
- Shanti, K. (1993). Issues Relating to Economic Migration of Females, A.N. Sharma and s. Singh (Eds) Women and Work Changing Scenario in India, Indian Society of Economics, 136-153. Patna.
- Shanthi,K. (2006) Female Labour Migration in India : Insights from NSSO Data Working Paper 4, Madras School of Economic Chennai.
- Singh, A.M. (1978). Rural Urban Migration of Women in among Urban Poor in India: Causes & consequences, Social Action, 28 (4) , 326-65.
- Skeldon, R.(2005) Migration and Mobility. The Critical Population issues of Our Time. Asia Pacific Population Journal, 20 (3) Dec.PP 5-9
- Srinivasan, S (1997) Breaking Rural Bonds through Migration : The failure of development for women in India Journal of Comparative Family Studies, 28 (1) 90-92, 1997.
- Shivastava, Ravi and Kumar, S.K. (2003) An Overview of Migration in India, its Impact and Key Issued, Paper presented in Regional conference on Migration, Development and pro-poor Policy choices in Asia, June, 22-23, Dhaka.
- Tee Rink, R. (1995). Migration and its impact on Khandeshi Women in the Sugar Cane Harvest. In Gender dimensions is Labour Migration An Overview Sage Publications, f New Delhi.
- Thadani, V.N. and Todaro, M.P. (1984) Female Migration: A conceptual framework. In J.T. Fawcett, S.E. Khoo, and P.C. Smith (Eds) Women in the cities of Asia: Migration & Urban Adaptation. West View Press, Colorado.

Acknowledgements

The author(s) profoundly appreciate all the people who have successfully contributed in ensuring this paper in place. Their contributions are acknowledged however their names cannot be mentioned.

Conflict of Interest

The authors carefully declare this paper to bear not conflict of interests

How to cite this article: Mahajan. V.G. (2019). Study Aimed to Know the Mental Health Problem Faced by Tribals During Migration Out of Nandurbar District of Maharashtra. *International Journal of Indian Psychology*, 7(1), 892-897. DIP:18.01.100/20190701, DOI:10.25215/0701.100