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IN HUMANITIES, ARTS AND SCIENCE

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Madurai

Special Issue On
**Social Issues: Changes and Challenges
(Interdisciplinary View)**

Special Issue Editor-in-Chief

Dr. M. Meenakumari | Dr. S. Balakrishnan | Mr. B.P. Pereira

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The journal welcomes publications of quality papers on research in humanities, arts, science. agriculture, anthropology, education, geography, advertising, botany, business studies, chemistry, commerce, computer science, communication studies, criminology, cross cultural studies, demography, development studies, geography, library science, methodology, management studies, earth sciences, economics, bioscience, entrepreneurship, fisheries, history, information science & technology, law, life sciences, logistics and performing arts (music, theatre & dance), religious studies, visual arts, women studies, physics, fine art, microbiology, physical education, public administration, philosophy, political sciences, psychology, population studies, social science, sociology, social welfare, linguistics, literature and so on.

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FOREWORD

"Take up one idea. Make that one idea your life - think of it, dream of it, live on that idea. Let the brain, muscles, nerves, every part of your body, be full of that idea, and just leave every other idea alone. This is the way to success".   *-Swami Vivekananda*

India is an ancient country. Throughout its long period of history, India has witnessed and received several waves of immigrants. These people brought with themselves their own ethnic varieties and cultures and contributed to India's diversity, richness and vitality. Indian society is a complex mix of diverse cultures, people, beliefs and languages. This complexity and richness gives Indian society a unique appearance of a very vibrant and colourful cultural country. But the very same complexity brings with itself complex nature of social problems and issues. In fact every society of the world has their social issues unique to their society.   These social problems are developed in a long period of times and are still continuing in one form or other. India is facing a large number of social issues such as caste system, child labour, illiteracy, gender inequality, superstitions, religious conflicts, and many more. It is high time that the society gets relief from these undesirable social evils.

There is a lot needs to be done for the situation to improve. And without changing the mind set and beliefs of the people it is a very difficult task. Because without people trying to change themselves, any governmental or non-governmental efforts will prove as a half-measure. If we want to make India as a true world leader and a modern 21st country of the world, it is imperative that that we make an improvement on our social front. For this purpose educating people about various social problems and sensitizing them towards changing their way of thinking is the best way forward.

I am sure , the Conference "Social Issues : Changes and Challenges (Interdisciplinary view)" organised by the Department of Sociology and Social work, Fatima College in collaboration with CRRPS is a modest attempt to address various issues related to gender, society and culture. It is a collection of selected papers from the conference. I take this opportunity to congratulate the team for bringing out this volume on an important focal point. This journal will be useful for the academicians and scholars in the field of sociology, women studies, social work, anthropology, political science and other related disciplines.

EDITORIAL NOTE

We are very much delighted to place this Journal on your hands, the selective compilation of most thought pouring views scripted in papers by the presenters in the International Conference on *"Social Issues: Changes and Challenges (Interdisciplinary View)"* held on 25th January 2018, jointly organized by the Department of Sociology and Social Work, Fatima College, Madurai, Tamil Nadu and Centre for Resource, Research and Publication Services, Tamil Nadu. The most fundamental, yet ever interesting debate in the field of Sociology is about Social Issues.

This book is a compendium of the discussions, sharing, interactions and feed back of the platform staged practically to express the views of the authors of the papers as the contents are purely their own views based on their knowledge, intake and initiations grabbed and experienced empirically and orally besides reading of the thematic definitions explanations from various sources and resources. Hence it is published here as their own originals for intra and inter-personal discussions. We are indebted to all the Professors, Research scholars, Students and other well-wishes who have contributed their papers and efforts with full commitment and conviction to make this publication meaningfully purposeful and successful with knowledge value and thematic conceptual credit.

At this Moment we make our Sincere thanks to Management and all faculty fraternity of Sociology Department for this Successful Academic event backed by their wholehearted contributions and supports, which exhorted us at large that are really appreciably commendable.

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Aim & Objectives

Academic Excellence in research is continued promoting in research support for young Scholars. Multidisciplinary of research is motivating all aspects of encounters across disciplines and research fields in an multidisciplinary views, by assembling research groups and consequently projects, supporting publications with this inclination and organizing programmes. Internationalization of research work is the unit seeks to develop its scholarly profile in research through quality of publications. And visibility of research is creating sustainable platforms for research and publication, such as series of Books; motivating dissemination of research results for people and society.

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ALERTNESS AND PREPAREDNESS OF CATASTROPHE IN INDIA

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Kodaikanal

A disaster is "a sudden accident or a natural catastrophe that causes great damage or loss of life"

Abstract

A Disaster is an event or series of events, which gives rise to casualties and damage or loss of properties, infrastructure, environment, essential services or means of livelihood on such a scale which is beyond the normal capacity of the affected community to cope with. Disaster is also sometimes described as a "catastrophic situation in which the normal pattern of life or eco-system has been disrupted and extra-ordinary emergency interventions are required to save and preserve lives and or the environment". The paper intends to identify the catastrophical situations in India, its alertness and preparednes during catastrophe.

Keywords: *Disaster, Catastrophe, Mishap, Calamities, Environment and Situation.*

Introduction

The United Nations defines disaster as "the occurrence of sudden or major misfortune which disrupts the basic fabric and normal functioning of the society or community".3 A disaster is an event of nature or man-made that leads to sudden disruption of normal life of a society, causing damage to life and property to such an extent that normal social and economic values available are inadequate to restore normalcy after a disaster. Disaster may be defined as a "catastrophic situation in which the normal patterns of life have been disrupted and extraordinary emergency interventions are required to save and preserve human lives and the environment". A disaster is a sudden, calamitous event that seriously disrupts the functioning of a community or society and causes human, material, and economic or environmental losses that exceed the community's or society's ability to cope using its own resources. Though often caused by nature, disasters can have human origins (UNISDR)4 As per the Disaster Management Act 2005, a disaster is defined as "a catastrophe, mishap, calamity or grave occurrence in any area, arising from natural or man-made cause, or by accident or negligence which results in substantial loss of life or human suffering or damage to, and destruction of property, or damage to, or degradation of, environment, and is of such a nature or magnitude as to be beyond the coping capacity of the community of the affected area"5 Disasters produce a range of impacts; these include direct, secondary and indirect effects. Direct effects include deaths, injuries and physical damage. However, secondary disaster impacts such as releasing fire or hazardous material that is triggered by disasters. Finally, impacts include the ripple effect resulting from the flow of goods, services, unemployment etc.

Objectives

1. To understand the concept of Disaster Management.
2. To study the catastrophical situations in India, its alertness and preparedness during catastrophe.

Review of Literature

Pearce-Moses and Yakel, (2007) in their project titled, "The "May Day": Promoting disaster preparedness, discussed the necessity to conduct a yearly programme on disaster preparedness among cultural institutions and to promote concrete actions that can be taken to

enhance disaster planning and preparedness in cultural institutions for which cultural institutions may dedicate one day to be known as May Day yearly once for emergency preparedness and planning.

Mishap in India

Table 1 Mishap in India

S. No.	Name of Event	Year &State & Area	Fatalities
1.	Floods	October 2014, Jammu & Kashmir	
2.	Cyclone Hud Hud	September 2014 ,Andhra Pradesh & Odisha	
3.	Odisha Floods	October 2013, Odisha	21
4.	Andhra Floods	October 2013, Andhra Pradesh	53
5.	Cyclone Phailin	October 2013, Odisha and Andhra Pradesh	23
6.	Floods/Landslides	June 2013,Uttarakhand and Himachal Pradesh	4,094
7.	Cyclone Mahasen	May 2013,Tamil Nadu	08
8.	Cyclone Nilam	October 2012,Tamil Nadu	65
9.	Uttarakhand Floods	Aug – Sep 2012,Uttarkashi, Rudraprayag and Bageshwar	52
10.	Assam Floods	July – Aug 2012,Assam	---
11.	Cyclone Thane	December 2011,Tamil Nadu, Puducherry	47
12.	Sikkim Earthquake	September 2011,Sikkim, West Bengal, Bihar	60
13.	Odisha Floods	September 2011,19 Districts of Odisha	45
14.	Sikkim Earthquake	2011,North Eastern India with epicenter near Nepal Border and Sikkim	97 people died (75 in Sikkim)
15.	Cloudburst	2010,Leh, Ladakh in J&K	257 people died
16.	Drought	2009,252 Districts in 10 States	-----
17.	Krishna Floods	2009,Andhra Pradesh, Karnataka	300 people died
18.	Kosi Floods	2008,North Bihar	527 deaths, 19,323 livestock perished, 2,23,000 houses damaged, 3.3 million persons affected
19.	Cyclone Nisha	2008,Tamil Nadu	204 deaths
20.	Maharashtra Floods	July 2005,Maharashtra State	1094 deaths 167 injured 54 missing
21.	Kashmir	2005,Mostly Pakistan, Partially Kashmir	1400 deaths in Kashmir (86,000 deaths in total)
22.	Tsunami	2004,Coastline of Tamil Nadu, Kerala, Andhra Pradesh, Pondicherry and Andaman and Nicobar Islands of India	10,749 deaths 5,640 persons missing 2.79 million people affected 11,827 hectares of crops damaged 300,000 fisher folk lost their livelihood
23.	Gujarat Earthquake	2001,Rapar, Bhuj, Bhachau, Anjar, Ahmedabad and Surat in Gujarat State	13,805 deaths 6.3 million people affected

24.	Orissa Super Cyclone	1999,Orissa	Over 10,000 deaths
25.	Cyclone	1996,Andhra Pradesh	1,000 people died, 5,80,000 housed destroyed, Rs. 20.26 billion estimated damage
26.	Latur Earthquake	1993,Latur, Marathwada region of Maharashtra	7,928 people died 30,000 injured
27.	Cyclone	1990,Andhra Pradesh	967 people died, 435,000 acres of land affected
28.	Drought	1987,15 States	300 million people affected
29.	Cyclone	1977,Andhra Pradesh	10,000 deaths hundreds of thousands homeless 40,000 cattle deaths
30.	Drought	1972,Large part of the country	200 million people affected

Alertness and preparedness during catastrophe
Earthquake
Indoors

- STAY INDOORS, do not exit building or use elevators
- STAY AWAY from all windows and large glass objects
- AVOID being underneath heavier objects such as lights, wall hangings and other items which may fall.
- HELP DIRECT people with special needs to a safe place, if necessary
- Wheelchair-bound individuals should lock brakes

Outdoors

Move to an area AWAY FROM trees, power lines, buildings and walls.

DROP TO KNEES and get into a fetal position, close your eyes and cross your arms over the back of your neck for protection.

REMAIN in position until shaking has stopped

When aftershocks stop

- DO NOT USE cell phones, EXCEPT to report serious injuries
- ASSIST in the building evacuation of people with special needs, if safe to do so.

- TUNE radios to an emergency broadcast or local radio stations for news updates and instruction.
- BE PREPARED to evacuate if instructed to do so. (The decision to evacuate from campus will be based upon the severity of the earthquake and damage to buildings.
- The university will provide instructions for immediate actions by available means
- IF INSTRUCTED to evacuate, see "EVACUATION" section of this guide
- The university will provide instructions for immediate actions by available mean
- IF INSTRUCTED to evacuate, see "EVACUATION" section of this guide
- DO NOT ENTER any building that is deemed or looks UNSAFE.
- DO NOT ENTER any building that is deemed or looks UNSAFE

Tornado

- All lightning can be deadly. When you hear thunder or see lightning, GO INDOORS. In addition to potentially deadly lightning, a SEVERE THUNDERSTORM also has wind greater than 58 mph (50 knots), hail 1" or larger, and/or a tornado.
- A **WATCH** means that conditions are favorable for the development of severe weather in the watch area. Pay attention to broadcasts, and prepare to take action

- A **WARNING** is an URGENT announcement that hazardous weather is occurring, or is imminent. Take immediate action to protect life and property

Indoors

- STAY INDOORS, do not exit building or use elevators. You could be trapped in them if power is lost. Locate an interior room.
- HELP DIRECT people with special needs to a safe place, if necessary
- REMAIN INSIDE until 30 minutes after the last thunder
- In the event of a TORNADO WARNING, or if a funnel cloud is reported
- GO directly to an enclosed, windowless area in the center of the building, corners or building support columns are best. Avoid middle of interior walls
- STAY AWAY from all windows and large glass objects
- CROUCH DOWN and cover your head. Interior stairwells are usually good places to take shelter, and if not crowded, allow you to get to a lower level quickly
- AVOID being underneath heavier objects such as lights, wall hangings and other items, which may fall.
- REMAIN INSIDE until tornado has passed or cleared to leave.
- Do not use matches or lighters, in case of leaking natural gas pipes or nearby fuel tanks
- HELP DIRECT people with special needs to a safe place, if necessary.
- IF INSTRUCTED to evacuate, see "EVACUATION" section of this guide

Outdoors

- MOVE AWAY from trees, buildings, walls, and power lines
- SEEK the lowest possible ground, i.e. ditch, small trench. Lying flat in a ditch or low-lying area may be the only thing available. Note: Never enter an open trench where a cave in or flooding may be possible
- STAY AWAY from power lines and puddles with wires in them, they may be "live"

- DO NOT USE matches or lighters, in case of leaking gas pipes or fuel tanks
- REMAIN in position until "noise and high winds" have stopped
- DO NOT ENTER any building that is deemed or looks UNSAFE

Hall

- SEEK protective shelter immediately.
- SEEK protective shelter immediately
- REMAIN indoors or under protective shelter until hail has stopped, usually 5-10 minutes Lightening

If You Hear Thunder

- SEEK protective shelter immediately.
- If OUTDOORS, DO NOT STAND underneath tall isolated objects. Avoid projecting above the surrounding landscape. Seek shelter in a low area under a thick growth of small trees. Avoid open areas and SEEK LOW AREAS such as a ravine or valley.
- GET OFF or AWAY from OPEN WATER as well as metal equipment or small metal vehicles such as motorcycles, bicycles, golf carts, etc. Stay away from wire fences, clotheslines, metal pipes and rails. If you are in a group in the open, spread out, keeping people several yards apart.
- REMEMBER—lightning may strike some miles from the parent cloud. If you feel your hair stand on end, lightning may be about to strike you. DROP TO YOUR KNEES and BEND FORWARD, putting your hands on your knees. DO NOT LIE FLAT on the ground.

Hurricane

Unlike other natural disasters, a hurricane is usually preceded by hours or days of fore notice and warning, allowing you to prepare

Before the Hurricane

- Stay informed. Pay attention to announcements from university administrators, and visit www.hurricanes.gov for hurricane information.

- Bring in all outdoor furniture, decorations, garbage cans and anything else that is not tied down
- Suspend or shut down laboratory experiments. All chemicals used in an active experiment should be closed and returned to their normal storage location such as flammable storage cabinet, ventilated cabinet, refrigerator, or hazardous waste storage area.
- Shut down and unplug computers and sensitive equipment.
- In flood prone areas (basements), move valuable items and documents to table tops, away from windows, to prevent damage in the event of local flooding
- Refresh your emergency kit with fresh batteries, flashlight, important medications, drinking water, and snacks.
- Be prepared to evacuate if instructed to do so. (the decision to evacuate from campus will be based upon the severity of the hurricane)
- If instructed to evacuate, see "evacuation" section of this guide

During the hurricane
- Listen to the radio or tv for information, and visit www.tufts.edu
- Avoid using the phone, except for serious emergencies.
- Stay indoors during the hurricane and away from windows and glass doors
- Keep curtains and blinds closed. Do not be fooled if there is a lull; it could be the eye of the storm – winds will pick up again.
- Avoid being underneath heavier objects such as lights, wall hangings and other items, which may fall.
- Do not use matches, candles or lighters
- Avoid elevators
- Remain inside until the hurricane has passed or cleared to leave.
- Help direct people with special needs to a safe place, if necessary

After the hurricane
- Stay alert for extended rainfall even after the hurricane has ended.

- MINIMIZE TRAVEL. Drive only if absolutely necessary and AVOID flooded roads and washed out bridges.
- STAY OFF the streets. Go outdoors only if absolutely necessary and WATCH for fallen objects; downed electrical wires; and weakened walls, bridges, roads, and sidewalks
- KEEP AWAY from loose or dangling power lines and report them immediately to the University Police.
- DO NOT ENTER any building that is deemed or looks UNSAFE

Extreme Heat
- STAY INDOORS as much as possible and limit exposure to the sun
- DRINK plenty of WATER. Avoid drinks with caffeine.
- EAT well-balanced, light and regular meals.
- LIMIT intake of alcoholic beverages.
- AVOID strenuous work during the warmest part of the day
- DRESS in loose-fitting, lightweight, and light-colored clothes that cover as much skin as possible. Wear a wide-brimmed hat to protect face and head.
- BE AWARE of the symptoms of medical heat emergencies. See "MEDICAL EMERGENCY" section of this guide for information on first aid during heat emergencies

Winter Storm and Extreme Cold
- STAY INDOORS during the storm
- WALK CAREFULLY on snowy, icy walkways
- KEEP DRY. Change wet clothing frequently to prevent a loss of body heat.
- BE AWARE of the symptoms of medical cold emergencies. See "MEDICAL EMERGENCY" section of this guide for information on first aid during cold emergencies
- If outdoors, PREVENT medical cold emergencies by wearing warm, loose- fitting, lightweight clothing in several layers.
- MINIMIZE TRAVEL. Drive only if it is absolutely necessary travel alone; keep others

informed of your schedule; stay on main roads and avoid back road shortcuts. Let someone know travel destination, travel route, and expected time of arrival at travel destination.

Conclusion

The welfare of an individual depends on the welfare of the society as a whole. If our country utilizes "youth force" efficiently and effectively in disaster management then it is like a light on the top of the hill. Other countries may follow the strategy adopted by us to utilize its own youth force for disaster management activities. Disaster risk management is a multifaceted challenge, given that concerns about disasters are not only of humanitarian interest but also economic and human development concerns. Provision of effective mechanisms for rapid response to disasters, and to jointly respond to disaster emergencies through concerted national efforts and intensified co-operation of the people in the social issues, its issues and challenges is an earth shattering task.

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A STUDY ON EFFECTIVENESS OF YOGIC PRACTICES ON STRESS MANAGEMENT OF WOMEN WITH SPECIAL REFERENCE TO TAMILNADU

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Introduction

In this contemporary state of affairs, Women in mid-life face a range of specific challenges including occupational risks, multiple family and caring commitments which places them at an enhanced risk of psychological and emotional distress. Many women find themselves in the "poverty trap" in mid-life, primarily as a consequence of lower-pay, part-time working, family care giving, and inadequate pension provision. Those with caring responsibilities and women who primarily work inside the home are at an increased risk of becoming depressed and having low self-esteem`. Typically beginning in the early- or mid-40s, the crisis often occurs in response to a sense of mortality, as middle adults realize that their youth is limited and that they have not accomplished all of their desired goals in life. Of course, not everyone experiences stress or upset during middle age; instead they may simply undergo a midlife transition, or change, rather than the emotional upheaval of a midlife crisis. During the female midlife crisis, women may try to reassert their femininity by dressing in youthful styles, having cosmetic surgery, or becoming more socially active. Some middle adult women try to look as young as their young adult children by dying their hair and wearing more youthful clothing. Such actions may be a response to feelings of isolation, loneliness, inferiority, uselessness, non-assertion, or unattractiveness. Erik Erikson proposed that adults struggle with three particular crises - Intimacy, Generativity and Integrity. Intimacy versus isolation occurs around the age of 20, and continues into a person's 30's and beyond. During this time in life, people face the crisis of being alone versus being involved in meaningful relationships. Generativity versus stagnation occurs around the age of 25-30 and lasts into a person's mid to late 50's. During this time, people think about the contribution they are making to the world. Integrity versus despair occurs around the age of 50 and continues until the end of a person's life. During this time, people reflect back on the life they have lived, and they decide if their life was meaningful or not.

Problem Definition

Stress is a serious medical condition that can affect not only people's mood, but also their cognitive functions, such as concentration and decision-making abilities, and even their physical well-being. The symptoms can range from mild to severe. Men and women can experience stress in different ways, and although they also share many common signs and symptoms, a better understanding of the differences may help those with stress, researchers say. Here are seven ways that stress may look different in women.

- Dwelling on and rehashing negative feelings, known as ruminating, occurs more commonly in women who have stress in comparison to men who have the illness. This behavior may involve negative self-talk, crying for no obvious reason and blaming oneself.
- Women may turn to illegal drugs to medicate themselves prior to the onset of stress, and this is particularly true of teenage boys, Goldstein said. In women, substance abuse tends to occur after the onset of stress, or as anxiety levels increase, she said.

- Women may be more likely to become depressed in response to a stressful event. Some evidence suggests that when women experience stressful situations, such as a death in the family, a difficult relationship or losing a job, they tend to respond in a way that prolongs their feelings of stress more so.
- The symptoms of women have been shown very abruptly at the state of stress even the family members has to take care of them with almost effectiveness.
- Stress and eating disorders, such as anorexia and bulimia, often go hand in hand. Stress is also much more likely to occur at the same time as an anxiety disorder in women, such as panic disorder or obsessive-compulsive behavior.
- The depressed women may respond differently in the way they metabolize antidepressants and in their drug-absorption rates.
- Because stress symptoms in women can go longer without being diagnosed or treated, the condition might develop into a more devastating mental health problem. They commit suicide if the state is not considered seriously by their family members.

Review of Literature

Sahay BK. Role of yoga in diabetes. JAssoc of Physicians India.2007; 55:121-126. FINDING: Yoga has a role in diabetes control and prevention. Individuals with diabetes and without diabetes were randomized to different groups and performed yogic practices for 45 minutes each day, which was followed by relaxation practices. The studies confirmed that yoga has a useful role in the control of diabetes mellitus. Fasting and postprandial blood glucose levels decreased significantly. There were significant changes in insulin kinetics and those of counter-regulatory hormones such as cortisol. There was a decrease in fatty acids. There was an increase in lean body mass and a decrease in body fat percentage.

Yang K, Bernardo LM, Sereika SM, Conroy MB, Balk J, et al. Utilization of a 3-month yoga program for adults at high risk for type 2 diabetes: a pilot study. Evid Based Complement Alternat Med. Published on-line: August 18, 2009 doi:10.1093/ecam/nep117. 1-7. Yoga may help to lower adult risk for type 2 diabetes, reduce cardio-metabolic risk factors, and increase exercise self-efficacy. Twenty-three adults were randomly assigned to either a yoga intervention group, which participated in a 3-month yoga intervention with 1-hour Vinyasa style yoga sessions twice per week, or an educational group, which received general health educational materials every 2 weeks. All participants completed questionnaires and had blood tests at baseline and at the end of the 3-month program to measure blood pressure, blood glucose, insulin, lipid levels, and body weight, as well as to assess exercise self-efficacy. Compared with the education group, the yoga group experienced improvements in weight, blood pressure, insulin, triglycerides, and exercise self-efficacy. Findings suggest that a yoga program would possibly help to lower adults' risk for type 2 diabetes, as well as reduce cardio-metabolic risk factors for adults at high risk for type 2 diabetes.

Guarracino JL, Savino S, Edelstein S. Yoga participation is beneficial to obesity prevention, hypertension control, and positive quality of life. Yoga may be beneficial in controlling weight, blood pressure, and mood. The majority of study participants (55.7%) had practiced yoga for less than 1 year, followed next by those who had practiced yoga for more than 5 years (31.4%). The majority of participants (57.1%) practiced yoga for 1-2 hours per week, followed by those who spent less than 1 hour per week practicing yoga (24.3%). Seventy healthy women and men ages 18 years or older were recruited from 3 fitness centers in Massachusetts after completing a 1-hour yoga class and were asked to complete a survey. The survey was used to measure how the participants felt after the yoga class, and questions included those related to yoga frequency and duration, other physical activity and duration, past and present medication use, food consumption behavior, demographic information, and data related to height, weight, blood pressure, tricepsskin fold, and waist and mid-arm circumference. According to survey results of the 70 participants, hatha and relaxation yoga had a statistically significant role in controlling weight, hypertension, and mood. Of the participants,

those who had practiced yoga for less than 1 year had a significantly higher systolic blood pressure (mean 117.13) than those who had practiced yoga for 1-4 years (mean 107.56).

Objectives of the Research

1. To study the effectiveness of yogic practices on stress management of Women with special reference to Tamilnadu
2. To find out the decision making ability among women due to yogic practices
3. To find out the level of anxiety among women through yogic practices

Hypothesis

1. It is hypothesized that there is no significant difference in the heart rate level among the middle age women due to yogic practices.
2. It is hypothesized that there is no significant difference in the Decision Making Ability among the middle age women due to yogic practices.
3. It is hypothesized that there is no significant difference in the Anxiety among the middle age women due to yogic practices.
4. It is hypothesized that there is no significant difference in the Stress Level among the middle age women due to yogic practices.

Research Methodology

The research design is purely Descriptive Research design where the problem statement is clearly stated with objectives and it is a conclusive research method. The Primary data is collected from samples selected using simple random sampling method with a sample size of 50. The sample frame is limited to only middle aged women living in Tamilnadu. The Data has been collected through structured undisguised questionnaire with three parts. The first part is about the stress, the second part is about their anxiety and the third part is about their decision making ability. The research time period is two months that is October to November 2017. The data are analyzed using Paired t-test analysis.

Analysis, Results and Discussions

The data collected through questionnaire is processed as table and then analysed using paired

t-test analysis. The result of the analysis is discussed below.

Effect on Stress Level Due to Yogic Practices
Table 1 Raw Scores on STRESS

Subject	Before Yogic Practices	After Yogic Practices
1	20	10
2	15	9
3	19	15
4	18	13
5	10	5
6	20	20
7	22	11
8	12	8
9	13	12
10	7	2
11	24	14
12	12	6
13	16	8
14	18	19
15	16	10

It is observed that mean scores of stress of sample before yoga is higher (16.13) than that of after yoga (10.80) the t-value is (5.837) significant which speaks the impact of yoga which was given to the sample between two conditions of the study.

Table 2 Paired Samples Statistics - Stress

		Mean	N	Std. Deviation	Std. Error Mean	T Value
Pair 1	Pre experiment	16.1333	15	4.688	1.21	
	Post experiment	10.800	15	4.931	1.27	**5.837**

Table 3 Paired Samples Correlations - Stress

		N	Correlation	Sig.
Pair 1	Pre and Post Experiment	15	.730	.001

Results given in table clearly speak the effect of yoga exercises on STRESS level before yogic practices and after yogic practices. It is observed that mean Anxiety level before yoga practice was **16.133 ± 4.688.** It decreased significantly to 10.800 ± 4.931 after 6 weeks of yoga practice and the Pearson correlation Coefficient (0.730) has significant relationships which speaks the impact of yoga which was given to the sample between two conditions of the study. The exercises like deep breathing, relaxations. Pranayama, Meditations etc. are found to be effective in decreasing Stress level. T Value is 5.837 is also significant.

Effect on Anxiety Level Due to Yogic Practices

Table 4 Raw Scores on Anxiety

Subject	Before Yogic Practices	After Yogic Practices
1	16	10
2	15	9
3	15	15
4	18	13
5	10	5
6	16	10
7	14	11
8	12	8
9	13	12
10	7	2
11	19	14
12	12	6
13	16	8
14	14	5
15	16	10

It is observed that mean scores of stress of sample before yoga is higher (14.2000) than that of after yoga (9.2000) the t-value is (8.311) significant which speaks the impact of yoga which was given to the sample between two conditions of the study.

Table 5 Paired Samples Statistics - Anxiety

		Mean	N	Std. Deviation	Std. Error Mean	T Value
Pair 1	Pre Experiment	14.2000	15	3.07525	.79403	
	Post Experiment	9.2000	15	3.62925	.93707	**8.311**

Table 6 Paired Samples Correlations - Anxiety

		N	Correlation	Sig.
Pair 1	Pre and Post Experiment	15	.771	.001

Results given in table clearly speak the effect of yoga exercises on ANXIETY level before yogic practices and after yogic practices. It is observed that mean Anxiety level before yoga practice was **14.200 ± 3.07525.** It decreased significantly to 9.2000 ± 3.629 after 6 weeks of yoga practice and the Pearson correlation Coefficient (0.771) has significant relationships which speaks the impact of yoga which was given to the sample between two conditions of the study. The exercises like deep breathing, relaxations. Pranayama, Meditations etc. are found to be effective in decreasing anxiety level. T Value is 8.311 is also significant.

Effect on Decision Making Ability due to Yogic Practices

Table 7 Raw Scores on Decision Making Ability

Subject	Before yogic practices	After yogic practices
1	38	52
2	45	60
3	49	61
4	44	56
5	30	45
6	33	55
7	40	45
8	33	33

9	28	45
10	36	55
11	44	60
12	29	41
13	36	48
14	45	55
15	44	49

Mean Decision Making Ability before yoga practice was **38.267 ± 6.72.** It increased significantly to **50.667 ± 7.9** after 6 weeks of yoga practice.

Table 8 Paired Samples Statistics – Decision Making

		Mean	N	Std. Deviatio	Std. Error	T Value
Pair 1	Pre Experiment	38.2667	15	6.72380	1.73608	
	Post Experiment	50.6667	15	7.92525	2.04629	**8.419**

Table 9 Paired Samples Correlations – Decision Making

		N	Correlation	Sig.
Pair 1	Pre experiment& Post experiment	15	.708	.003

Results given in table clearly speak the effect of yoga exercises on Decision making ability before yogic practices and after yogic practices. It is observed that mean Decision Making Ability before yoga practice was **38.267 ± 6.72.** It increased significantly to **50.667 ± 7.9** after 6 weeks of yoga practice and the Pearson correlation Coefficient (0.708) has significant relationships which speaks the impact of yoga which was given to the sample between two conditions of the study. The exercises like deep breathing, relaxations. Pranayama etc. are found to be effective in increasing Decision making Ability. T Value is 8.419 is also significant.

Suggestions for Further Study
1. Similar study may be conducted for various age groups.
2. Similar study may be conducted for the extension period of experimentation.
3. Similar study may be undertaken by selecting a large sample.
4. Variables other than the selected Biochemical and psychological aspects may be done further.
5. The present study thesis needed to be to strengthened or support by more relevant research studies.

Conclusion

This research made an attempt to study the effectiveness of yogic practices on stress management of Women with special reference to Tamilnadu. This research is also discussed about the decision making ability among women due to yogic practices especially in the middle age and also the impact of the yogic practices on the level of anxiety among women.

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CHILD FRIENDLY SCHOOL EDUCATION SYSTEM: AN OVERVIEW

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Abstract

This research paper focuses on the child friendly school education in Indian to ensure the child right and child protection in the public space. The child friendly school education should be designed and run in a way that ensures that all children can learn in a safe, healthy, secure, stimulating and protected environment. This paper covers concept, needs of the study, importance of the child friendly schools, structure and implication with using existing sources on child friendly education system in global level.

The CFE approach focuses on the total needs of the child as a learner so that the student can develop his or her full potential. The goal throughout is to promote child-centred education with teachers who are trained accordingly, and supported by adequate resources and appropriate physical, emotional and social conditions for learning. It integrates many other areas including health, nutrition, water and sanitation, as well as protection. CFE is not a 'one-size-fits-all' model though, and the way child-friendly schools are built and operate may differ from country to country (UNICEF).

Keywords: Child friendly Education, Child Friendly Schools &Child-Centred

Introduction

The National Policy on Education (NPE) formulated by government of India in 1986 promoted education among all the people. The policy covers elementary education, school enrollment to both urban and rural areas. This NPC provided guidance and suggestions to child centered approach. Many policies available Indian for children, still it is a challenge to provide an integrated child friendly education for all children in schools. Though there is an improvement in enrolling the children in schools over 80 lakhs children in the age between 6 to 14 years of age are out of schools.

Among children who are already in the schools 42.39% of children drop out from the school before they complete standard 8. It is very much worrying factor in the 12th five year plan that girl children and children neglected are not enrolled in the schools and if at all they are enrolled maintaining their regularity in coming to school is tough task.

Needs of the Study

The present research paper disseminates the knowledge on child-centred education system in our society. Early childhood care is very important aspect by providing education, protection and over all development in each child. Integrated Child Development Scheme Services provides the needed care and protection for the children, there is a big gap in giving appropriate education, basic standards, improvement in infrastructures are not solved yet.

No child should be excluded from education because of his or her gender, race, culture, language, ability or social status. However, investments in education often miss their mark. Recent research, including Out-of-School Children's Initiative (OOSCI) studies, carried out by UNICEF and UNESCO suggest that efforts are often skewed in favour of children from better-off families and those who live in urban centres. Children with disabilities, for example, remain invisible in many countries and belong to one of the most marginalized groups.

Background of Child Friendly Schools

In Indian education system, child friendly education is not a new thing. In the beginning of 20th century itself eminent personalities such as Ravindhra Nath Tagore and Mahathma Gandhi through their approach had shown the way for child centered education system. Ravindhr Nath Tagore formed his education policies derived from educationists John Dewey and Montessori which

focused on children's interest, creativity, spontaneous in the educational development in the 20th century. The child centered approach was tested throughout the country and models were formed, except few the policies could not fulfill for what they were formed. For example, educationist Montessori visited India in the year 1939 and gave training to the teachers till the year 1947. This had different approaches to teaching method; activity based learning, democracy and integrated teaching method.

National Policy on Education (1986)

Policies such as National Policy on Education had very little effect on the education system. Educational documents started to reflect in the national policies about child centric education system authoritatively. National Policy on Education provided space for early education for all, enrollment, retention of children in the schools and strategy was formed to achieve child centric education in the country. Yash Pal committee report (1993) also reflected the same thing. The report highlighted the examination method, curriculum and the burden children were undergoing. The Yash Pal committee report respected the experience and encouraged child centric education system also the learning atmosphere. The report pressurized that the children should be active, enjoy learning and to have search-filled environment.

National Curriculum Framework (2005)

In 2005 National Curriculum Framework was created after spending almost a decade in carrying out various discussions by educationists, officials, teachers and civil society members involving in it, which was later expanded. This NCF invited for child centered approach from teacher centered approach through formulating curriculum and new method of teaching in the schools. NCF claims that children when they are in the child friendly atmosphere they feel happy and show keenness for learning.

Right to Education

Right to Education Act was enacted in the year 2010 for take forward the child centered education system throughout the country. This is seen as a big breakthrough in Indian education system. RTE has ensured that child friendly quality education for all the children and basic rights for children in the age of 6 to 14. It is mandatory for all the schools to accept RTE throughout India.

Persons who wish to share the idea of education system based on the need of the children, creating curiosity in children, welcomed and enjoyable approach, to have child centered education and activity based learning method is followed in the early childhood care and education itself. The first generation learners depending upon their capacity to learn should be taken care of. An appropriate method has to be followed rather than looking for evaluation in the early education itself. Physical punishment has to be eradicated from the educational system. School timing and term holidays should be as per the comfort of children.

National Policy on Education (1986)

Children's free and compulsory education (RTE 2009) and global funding agency UNICEF's policy on child friendly school's various factors:

- Policy and standard
- Learning Environment
- School Environment
- Teachers' Development
- Community Participation

Characteristics of Children Centered Education

The policy emphasizes on child centered approach in the child friendly education. Each and every child's interests, individual views have to be included in the dimensions of child friendly schools. Non violence, protective, infrastructure, water, school management, persons who teach (Teachers, Parents, Educationists and others), opinions suggestions on the best interest of the child, persons in the decision making and persons have to authoritative. Investing in education and final outcome should be in the best interest of the child.

Democratic Participation

Children have the full rights to express in the context of education and also in the designing of education method. Child friendly schools should be of child centric and facing children. Therefore, the participation of the children is must in

assessing their education. This policy emphasizes on the involvement of children, parents and also the community leaders in education system, content and deciding on the steps. This kind of democratic participation will lead all the children to participate without any discrimination, school system and education for every child.

Inherent Nature

All the children have the right to have education. Community providing education for the children is not an offer. It is the duty of the community. For a better education good, transparent and impartial rules and regulations are needed but that is not enough. Proper strategies are important for remove the barriers which prevents equal participation, making use of the opportunity for education for the children who are discriminated based on caste. And also, all the girl children in spite of caste or religion, male children, men and women have the right to education.

Structure of Child Friendly School Education
Learning Activities

- Children (Students) should join with other children of their age for observing, trying, questioning and debating kind of education. Children have to think and find out the new things within themselves.
- Children's learning has to based on the day to day activities and connected with the community.
- Children should be encouraged to participate with their opinions, thoughts, experiences without hesitation and independently.

Context Surrounding Children

- Priority for the children who are neglected from the society and no discrimination practiced with children.
- Respecting the local language of the children which helps for better understanding and using simple equipments for easy access.
- Abuses like physical, verbal and psychological on children should not be practiced. Children to have positive attitude towards achieving their goals and maintaining the class.

Learning Equipments

Learning equipments used continuously and showcased.
Class rooms' atmosphere should be of welcoming, colorful, creativity of children displayed in the classroom.

Continuous and Integrated Assessment

- Pay attention for overall growth with academic achievements.
- Need to arrange clear learning expressions of the passing of the children to the parents and teachers.
- The teacher should able to assess the children continuously without any tension and the same thing to be noted down. Not only memorizing the thing taught in the class but for the life.
- The teacher is a person who finds out the weak students and giving priority to those children. Assessment of the children is a continuous process and wherever more attention is needed the teacher should be able to change the method of teaching to them.
- The teacher has to encourage the children for their values, beliefs, multiple talents, behavior, creativity, artistic ability, physical growth, school activities and so on…
- Progress report of the children to be shared with the parents periodically.

School Environment

School environment should be neat and tidy. Children's passion, psychology, physical interests has to be embodied. Children should get the facilities of body health, providing nutritional food and drinking water, life skills and waste removal.

The school building has to be friendly to the differently abled children as well. This kind of atmosphere will encourage the children to come to school regularly and practicing equality among the children. Children should be protected from the violations happening right from their house, school and community. All the people and organizations must volunteer for the well being of the children and support in protecting the children. Children those who need more protection are girl children, children from poor

background, differently abled children, orphan, children subject to family crisis, minority children, drug addicts and victims of HIV/AIDS.

Infrastructure Facilities
- School building and class rooms should be neat and clean, protective and interesting to the children.
- Facilities such as artistic things, modernized library, class rooms, music instruments, play ground available for the children to have good time and expose themselves.
- Class rooms should have enough space, ventilation, lighting and seating for children.

Healthy and Safe Environment
- Proper drinking water and separate toilet facility for girls and boys should be there.
- Children should get freshly cooked mid-day meal, regularly monitoring the health of children; medical care should be included in the syllabus.
- School and the school environment especially the paths leading to school should be protected.
- Teachers and other staff in the school have to be equipped to help the children in need and protecting their feelings and well being. They should be professionally trained.

Democratic Participation and Practices
- Preventing punishing children physically and mentally. Implementing the policies, systematic order and arriving at nonviolent solutions.
- Encouraging the participation of children while creating rules and regulations, involving them in management activities (Ex. Children Parliament and forming children clubs).
- Ensuring the children who are subject to drug addict and coming from very poor background to have access to school.

Child Friendly Standard and Surveillance
- Child friendly schools will be linked with configuration guidelines and system settings.

- Right to education act's rules and standards will be linked with child friendly schools and system settings.
- Child friendly schools and system settings are monitored by coordinators from district and zonal resource centers and continuously assisted.

Conclusion

UNICEF (United Nations International Children's Emergency Fund) started child friendly schools in the year 1990 overall glancing for the children. This is being successfully implemented in 95 countries. Though there are various negative thoughts are there in the education systems still it is seen as an important tool for the development of the society. UNICEF's theory of child friendly school has got the attention all over the world. Institution for Social Education with the help of UNICEF to ensure the rights of the children in education and providing protective environment in the schools has got the support of the teachers who are interested in seeing changes in the present education system. So far 200 schools are part of this program and are child friendly schools.

If Government of India implement the child friendly education system at all school level children's rights will be protected and children are treated equally. Child friendly schools will ensure the children's rights and child protection. In child friendly schools children's knowledge, skills, behavior, values and ethics will develop. The child friendly learning system will make the students to contribute to the society for holistic development of the nation.

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REVIVE RELIABILITY TO COMBAT SOCIAL ISSUES

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Abstract

Social Issues - Changes and Challenges is the theme of the seminar. **Social issues** *(also social problem, social evil and social conflict) refers to any undesirable condition that is opposed either by the whole society or by a section of the society. It is an unwanted social condition, often objectionable, the continuance of which is harmful for the society.Of course number of social issues prevails in our society. Though these social issues are discussed in different forums, this is the best and suitable forum for all the social issues to be discussed. Because besides discussions this learned group can materialize the found out solutions. Our life is precious. It should be lived not to be passed. Here is the long list of social issues which always make our life unpleasant and insecure.*

- *Commercialization of Livelihood like Food, Water, Medicine, Education, Safety and   Security etc.*
- *Abuse of Power and Atrocities*
- *Corruption*
- *Exploitation and Sexual Harassment*
- *Denying justice and rights*
- *Superstitious beliefs……….*

The number of issues above alone not long listed. The dimensions also have assumed alarming proportions in recent times. They have grown and developed like a demon. When we look into the causes for these issues, again we find a very long list. But these causes can be suppressed by reviving the moral values. The most prominent moral value that can serve as a medicine to combat these social issues is Reliability. Reliability means trustworthiness. Society at large benefits from trust, which is sometimes called 'social capital'. In a healthy financial economy there is plenty of cash circulating. In the same way, in a healthy society there is plenty of trust and people feel safe and comfortable, even in the company of stranger. This paper emphasis the inevitability of Reliability to combat Social issues.

Introduction

Social Issues - Changes and Challenges is the theme of the seminar. **Social issues** (also social problem, social evil and social conflict) refers to any undesirable condition that is opposed either by the whole society or by a section of the society. It is an unwanted social condition, often objectionable, the continuance of which is harmful for the society.Of course number of social issues prevails in our society. Though these social issues are discussed in different forums, this is the best and suitable forum for all the social issues to be discussed. Because besides discussions this learned group can materialize the found out solutions. Our life is precious. It should be lived not to be passed. Here is the long list of social issues which always make our life unpleasant and insecure.

- Commercialization of Livelihood
  - Food and Water
  - Medicine
  - Education
  - Safety and Security
- Abuse of Power and Atrocities
- Corruption
- Exploitation and Sexual Harassment
- Denying justice and rights
- Superstitious beliefs………

The number of issues above alone not long listed. The dimensions also have assumed alarming proportions in recent times. They have grown and developed like a demon. When we look into the causes for these issues, again we find a very long list.

- Lack of Moral Values
- Self – motivated society
- Desire for luxurious life
- Money Minds
- Reducing Humanness
- Discriminations
- Break up of joint family system
- Increasing nuclear families
- Lack of welfare oriented government
- Unstable government
- Lack of civic awareness
- Illiteracy
- Population explosion
- Unemployment
- Lack of self control
- Lack of belief in karma
- Effects of globalization
- Cultural Degradation
- Technological Advancement
- Impact of media and social media

All these causes can be suppressed by reviving the moral values. The most prominent moral value that can serve as a medicine to combat these social issues is Reliability.

Reliability means trustworthiness.
'Reliability is the precondition for trust'
- Wolfgang Schauble.
'A man who lacks reliability is utterly useless'
- Confucius

Society at large benefits from trust, which is sometimes called 'social capital'. In a healthy financial economy there is plenty of cash circulating. In the same way, in a healthy society there is plenty of trust and people feel safe and comfortable, even in the company of stranger. Trust in life and trust in yourself. Trust that where you are at in your life at the moment is the right thing and the thing you need most. Don't compare your life to others, everyone is on an individual journey and is on a completely different path.

Life is not a race. So Slow down.

Trust is the fundamental prerequisite for human existence. In recent decades, the Food sector has been a site of an increasingly serious challenge. Indeed, a mounting number of food - related scandals, scares and recalls have resulted in a dramatic decrease in the public's trust in food, even though food has been increasingly regulated to ensure its safety eg. Maggi Noodles issue, Avin Milk issue etc.

Lack of trust in the safety of food represents an alarming situation for the modern world. Because ensuring the safety of food is one of the basic tasks of human society. State agencies, food providers on the market as well as consumers and their representatives, emerged as the three groups that had to collaborate in one way or another to make sure that food is safe and thus a reliable object of trust.

Regaining the public trust in the field of medicine is a professional duty. The creep of commercialism into medicine is commonly cited as a reason for declining trust of the medical profession as a whole. Patient trust in medicine is something of a Paradox. Most patients consider their own doctors trust worthy. Yet public confidence in health care as a whole has been steadily eroding. The medical profession is still the most trusted profession "without trust, you can't really heal". "Without trust, physician – patient interactions could become little more than the consumer transactions". If the public is not on the side of doctors, after all it is more likely that physician voices will go unheard in government policy decision about health care.

To ensure that public trust in the profession of medicine does not decline further, its members need to do more than just discuss the problem; they need to perform actions to reassure the public that doctors have the best interests of patients at heart. "The only way public trust will be maintained or increased by medical professionals, is not by just projecting an image of concern for the welfare of society, but by acting actually helping society".

In the field of Education, the trust gap between teacher and student could impact not only the students learning but also student's life. When students have lost trust they may be deprived of the benefits of engaging with an institution such as positive relationships and access to resources and opportunities for advancement. Violation of students rights,

exploitations of teachers and students, abuses especially sexual harassments are all due to eroding of trust between them. It can be minimized through inculcating moral values especially by instilling reliability.

Right to live is our fundamental right. It is also under threat due to declining of trust in our Police department. Loss of trust in police threatens the safety of public.

Now is the time to focus on fundamental changes that must be made to the police Bureau if we are ever to achieve real community policing. It is in need of sufficient ethical and professional standards.

Trust between citizens and their government officials and elected representatives is a vital element of a well governed society. In the absence of trust, citizens become cynical about their political system and disaffected with the existing order. Distrust may produce alienation and withdrawal from the political process, leaving behind a shallow, fragile state that cannot mobilize national resources or shape a collective vision for national development. If it festers for very long, widespread and intense distrust may eventually generate a backlash against the political order and a search for more radical, anti-system alternatives. Failed states, revolutions, civil wars and other related traumatic failures of governance all share in common the absence or collapse of trust between the citizens and the state, between different political factions or parties, and between ethnic, social or class groups at the mass level.

Many people engage in corrupt acts due to lack of good moral values. Corruption, as its definition states, is the "misuse of public trust or resources for private gain". Money / resources meant for the benefit of people are utilized by few individuals for private gain.

Corruption can be minimized through inculcating moral values. If individuals uphold good moral values, they will be aware of the consequences of their actions and refrain from indulging in such acts. Corruption can be prevented from within if an individual imbibes strong moral values of integrity, honesty, leadership, accountability, transparency, fairness, equity and trust.

Media has a very big role to play in a democracy and its stature is in no way less than that of politicians. Hence it is rightly called the fourth pillar of democracy i.e. Fourth Estate. It is through media that people become aware of so many aspects of life of which they are normally ignorant. Media act as a catalyst for democracy and development, helping to make public participation meaningful.

If media is honest and committed in its job, democracy is bound to function more efficiently and the loopholes present in any democratic system can certainly be plugged to the fullest satisfaction of the people. On the contrary, if media is biased, corrupt and favors only a particular party or few individuals, it can prove to be very dangerous for the smooth functioning of democracy. No one can become perfect and one can only strive to become so. The same holds true for media also. Certainly there is still a lot of scope for improvement by which the media can rise upon the aspirations of the people for which it is primarily meant.

When these institutions are not reliable, then the people finally knock the door of judiciary for justice. Judiciary is the most trusted wing.
But now,

CJI Versus Justices: Judicial crisis out in the open

"It is discharge of debt to the nation which has brought us here", said justice Gogoi sitting alongside justices chellameswar, Lokur and Kurian Joseph in an unprecedented press conference addressing serious concerns with the way the chief justice of India (CJI) Dipak Mishra was assigning cases.

From all accounts, this seemed like a last resort for them as justice Chellameswar stated in part, "This is an extraordinary event and it is with no pleasure we are doing this…. We are left with no choice but to address the nation".

With a move this brazen and in public the justices were left with no choice but to present to the nation a revered and important institution as the Supreme Court is not immune from bias or at the very least improper functioning at such high level.

"For the political establishment, the judiciary's internal trust deficit spilling out in the open could become another reason to question its

autonomy – and find a way to muscle in. What is more important, for now, is to heed the gravity of the issues that the four judges have felt compelled and constrained to draw public attention to".

'Trust deficit is not a society thing…. It is an individual thing to start with'.

So, every individual to be reliable and trust worthy, the following characters are essential.

- Not to participate in gossip
- Not to disclose secrets
- Keep up the individuality
- Accept the faults and shortcomings
- Not to pretend to impress people
- Not to pursue a relationship on need basis
- Keep up promises
- Not to peep into other privacy
- Not to steal away others credits
- To respect one's feelings and opinions.

When we have all such qualities we are the morally upright and ideal human beings like Vivekananda and we can lead an independent and blissful life. Hence by realizing the fact that TRUST is only Endangered and not at Extinct, Let us **REVIVE TRUST** to make our society an Eden of Earth.

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ROLE PERFORMANCE OF WOMEN IN INFORMATION TECHNOLOGY: CHANGES AND CHALLENGES

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Abstract

The nation of India has developed into an important location in the global software industry. Thousands of new jobs have been created as multinational software firms have established India branch operations, and numerous domestic start-up firms have been established to produce software. Top software companies like the Infosys employs 17 percent women, the TCS employs 20 percent and the Wipro employs 19 percent women. The massive incorporation of women into paid work has marginally increased their bargaining power and undermined the legitimacy of men's domination as providers of the family. The growing number of women in the Indian IT workforce has led to an increasing interest from academia and practitioners in the topic of work–life balance, specifically of working women in the IT industry. In the light of the increasing number of women in the IT industry, there is a need to examine the role performance of women in Information Technology professionals in greater depth. This paper attempts to analyze the issue of changes and challenges the women employees face in the Information Technology.

Introduction

The nation of India has developed into an important location in the global software industry. Thousands of new jobs have been created as multinational software firms have established India branch operations, and numerous domestic start-up firms have been established to produce software. Indian women enter the rapidly expanding Information Technology (IT) workforce, it could be predicted that their active participation in this sector will change their socio-economic status within the employing organization and the communities in which they reside. It is often expected that women's participation in the professional area will contribute to a breakdown of traditional gender roles.

Review of Literature

Ravinder Mohan Jindal, et.al., (2016) in their paper on **"***Role of Women in Information Technology Sector"* have stated that the role played by ICT industry in women empowerment. Industry norms are undergoing metamorphosis to attract and retain talented women employees. The need to balance work family balance is creating a talent crunch in the middle and top management. These talented women can utilize their experience and talent to become entrepreneurs. Women at the top of ICT industry are setting a role model for the young generation. Women have to maintain a balance between professional and personal life to capitalize on the opportunities provided by Information and Communication Technology. The study also concluded that the family members should support the women to utilize their talent and skills to establish their unique identity and for the economic welfare of the family.

The National Center for Women & Information Technology (2014), reported that Silicon Valley has never been known for gender diversity, titans like Intel, Google and Microsoft have released numbers that give a stark look at how disproportionate the workforce has become. For example, Intel's team of more than 50,000 was just 24 percent female in 2014. Google also revealed during the same year that only 30 percent of its workers were female, while Yahoo employs 37 percent women and Face book employs 31 percent. Even fewer women work in programming and technical jobs. Google ranked among the highest for this statistic, with 17 percent of its technical staff made up of women. Only 26 percent of the 2014 computing workforce was made up of women.

Vasanthisrinivasan (2011) conducted a qualitative study on "*Work-Family Balance of Indian Women Software Professionals*". The study is based

on an exploratory qualitative study of 13 women IT professionals in the software sector in Bangalore, India. The narratives revealed six major themes namely familial influences on life choices, multi-role responsibilities and attempts to negotiate them, self and professional identity, work–life challenges and coping strategies, organizational policies and practices, and social support.

Importance of the Study

Women who enter new occupations, which are traditionally reserved for men such as working in the night shifts, have to struggle hard, face many difficulties, coping with dual identities, problems of stress and strains and to balance the dual burden of work and family. When everyone is sleeping, they are awake, do their work, and are at rest when the others are at work, resulting in being cut-off from their social life. It is in this context study of role performance of women engineers in IT field is essential.

Research Design: Descriptive research Design
Objectives of the Study

- To evaluate the extent of the role performance of the respondents in the IT sector.
- To analyze the various problems of the respondents both in working and the family environment.

Area of the Study

The TIDEL is an Information Technology (IT) park situated in the city of Chennai. Its joint venture of TIDCO and ELCOT.

The TIDEL Park is located on the six-lane Rajiv Gandhi Salai in Taramani opposite to the Thiruvanmiyur MRTS Railway Station.

S. No	Designation	HCL	California Software Industries ltd	Sify	Cisco
1	Project Manager				
2	System analyst				
3	Team Leader				
4	Senior. Soft. Developer				
5	Software Developer				
6	Quality analyst				
7	Quality Tester				
8	Test writer				
	Total No.of Employee				

Although Bangalore is India's premier IT centres. Hyderabad is prominent. Chennai is rapidly developing as well and a huge array of software and BPO companies have established themselves in the city. Ranked by export revenue, India's top five software companies, all well-established in Chennai, are the Tata Consultancy Services (TCS), the Infosys Technologies, the Wipro Technologies, the Cognizant Technology Solutions (CTS) and the HCL Technologies. Above five companies are called by the name of the Indian Computer Services (ICS).

Sampling

Disproportionate stratified random sampling is applied for the selection of the respondents. In order to compete in the fastest growing field of computer software engineering and by this study only focused on women have to complete a bachelor's degree in engineering.

Role Performance of the Respondents in IT Sector

Among the 400 respondents employed in MNCs in Taramani Tidal Park at Chennai, 5 per cent of respondents were working in Cisco software development companies and 20.5 per cent of the respondents are working in the TCS and only 18.25 and 18.5 percent of the respondents were working in the Sify and California Software Industries Ltd and 37.5 percent of the respondents were working in the HCL.

From this survey 47 respondents are software developer, 47 respondents are senior developer, 52 respondents are team leader, 71 respondents are quality tester, 45 respondents belong to the quality analyzer, 107 respondents are test writer, 27 respondents are system analyst and 4 respondents are the project manager in the study. On the basis of the employees designation 21 respondents has been taken from the Cisco Software Company, 82 respondents from the TCS, 73 respondents respectively from California software industries ltd

and Sify and 151 respondents from HCL has been taken for this study.

From this survey it is found that the working hours vary across phases of the project cycle. The majority of respondents (61 per cent) said that they work ten hours per day on average, while only 39 per cent work more than ten hours.

From the study 37 percent of the respondents have experienced in the software industry for 4 - 6 years, of the total 27 percent of the respondents have experienced in the software industry for 2 - 4 years and 23 percent of the respondents have experienced only below two years.

From the survey it is found that 58.5 percent of the respondents agreed that they have the future targets for the development of the career in the software industry. Of the total 57.75 percent of the respondents agreed with the statement of acceptance of the feedback whenever they received the feedback regard the software industry. Of the total 47.25 percent of the respondents agreed with regularly evaluate their own performance and 83 percent of the respondents had confident over their abilities. Of the total 49.5 percent of the respondents agreed with the influence others plans or activities effectively.

The vast majority of the respondents strongly agree that being women is an asset for the company. Women have long played a vital role in engineering, overcoming discrimination and harassment to bring some of the most significant field moreover women has made and continues to make outstanding engineering contributions. A majority of 91.2 per cent strongly agreed that functional or technical expertise when the grounds for satisfaction at work are detailed; on the majority of criteria women express a higher level of satisfaction.

Problems Faced by the Respondents both in Working and Family Environment

In this survey 44.5 percent of the respondents disagreed with the statement of lack of time to spend with family because the IT jobs are one of the westernized and more prestigious and well economic jobs in the emerging 21st century. And 47.25 percent of the women IT workers felt that they have been socially isolated from the society due to often they work much longer hours or even

stay overnight in the office (known as a 'night out') or work on weekends, when faced with a project deadline. Further 61.25 percent of the respondents agreed that they were forced to work over the normal time of the work due to the deadline of the project.

The researcher presents that 75.25 per cent of the respondents strongly agreed child rearing is a difficult task and also found that 51.75 percent of the respondents agreed that family support is need to continue the job in the software industry.

Conclusion

The process of women individualization has been identified as a key feature of workers and work in the 'new economy of the West is also seen in the IT industry in India. Workers are required to be flexible and mobile, and also continually reinvent themselves in order to compete in the job market. But career planning and life planning presuppose a fairly stable economy and job market features that are absent in the IT industry and in the global economy generally, due to the high rate of mobility of capital and labour. In this context, software professionals cannot predict what kinds of jobs will be available in ten years.

Women engineers who reported to be the most satisfied with the careers worked in companies that not only valued and recognized their contributions but also invested substantially in their training and professional development. These women also received substantial support from their family and friends which elevated their levels of career satisfaction. These women had clear, identifiable set of task goals, responsibilities, and expectations to work with; they also felt confident in their abilities to navigate the political landscape in their companies and manage multiple life role responsibilities. Furthermore, successful women engineers reported working in companies that supported their efforts to balance their work-life responsibilities.

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IMPACT OF GLOBALIZATION ON POVERTY REDUCTION IN INDIA: A SOCIOLOGICAL DIMENSION

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Abstract

The impact of globalization on employment, poverty, inequality has been profound. India, which accounts for the second most populated country all over the world, initiated steps towards being a global economy in the year 1991, when a series of economic reforms were undertaken. Globalization describes a process by which national and regional economies, societies, and cultures have become integrated through the global network of trade, communication, immigration and transportation. In recent times, globalization has been prominently used in context of economics which is inclusive of, trade, foreign direct investment and international capital flows, etc. Negative impact on agriculture can be removed by good government policies and making optimal use of opportunities presented by globalization. The effect on employment is positive for service and manufacturing or secondary sector but the major cause of worry is the agriculture sector. The gap between rich and poor still exists because of capital intensive techniques being adopted from countries around the world; the labour class is getting affected due to this. Decline in poverty can be seen in the past few years but the decline is not substantial especially the poor sector is still struggling to come out of it. θGlobalization has given opportunity to choose from various goods. It is very clear that the globalization policy adopted by the government played an important role in growth of India in terms of GDP. The paper based on secondary sources.

Introduction

More than one billion people live in extreme poverty, which is defined by the World Bank as subsisting on less than one dollar a day.1 In 2001, fully half of the developing world lived on less than two dollars a day. Yet poverty rates are much lower today than twenty years ago. In the last two decades, the percentage of the developing world living in extreme poverty has been cut in half. While poverty rates were falling, developing countries became increasingly integrated into the world trading system. Poor countries have slashed protective tariffs and increased their participation in world trade. If we use the share of exports in gross domestic product (GDP) as a measure of globalization, then developing countries are now more globalized than high-income countries. Opening up of world trade, development of advanced means of communication, internationalization of financial markets, growing importance of MNC's, population migrations and more generally increased mobility of persons, goods, capital, data and ideas.

Poverty can be defined as a condition wherein a person is unable to fulfill the basic necessities for the sustenance of life. These basic necessities include- food, clothing and shelter. Poverty is a condition which drives out the essence of a decent standard of living for the people? Poverty becomes a vicious trap which gradually ends up entailing all the members of a family. Extreme poverty eventually leads to death. Poverty in India is defined keeping in mind all the dimensions of economy, semi-economy and the definitions which are devise according to international conventions. India judges poverty levels on the basis of both consumption and income. Consumption is measured on account of the money that is spent by a household on essential goods and income is calculated according to the income earned by a particular household. Another important concept that needs to be mentioned here is the concept of the poverty line. This poverty line acts a benchmark for the measurement of poverty in India vis- a-vis other nations. A poverty line can be defined as the estimated minimum level of income that a family needs to be able to secure the basic necessities of life. As of 2014, the poverty line is set at Rs 32 per day in rural areas and Rs 47 in towns and cities.

India's Problem with Globalization

- Some section of people in India, basically poor and very poor, tribal groups, they did not feel the heat of globalization at all.
- They remain poor & poorest as they were. Increased gap between rich and poor fuels potential terrorist reaction. Ethical responsibility of business has been diminished.
- Youth group of India leaving their studies very early and joining Call centres to earn easy money thereby losing their social life after getting habituated with monotonous work. High growth but problem of unemployment.
- Multi party rule, hence political ideology intervenes globalization (reservation, labor law reforms). Price hike of every daily usable commodities.

Causes of Poverty in India

A major reason of the existing poverty in India is the weather condition of the country. The non-conducive climate reduces the capacities of people to work in the farms. Floods, famines, earthquake and cyclones disrupt the production. Population is another factor which contributes to the menace. Population growth reduces the per capita income.

Further, larger the size of a family, lower is the per capita income. Unequal distribution of land and assets is another problem which deters the concentration of lands in the hands of the farmers equally.

Climatic factors

Climatic conditions constitute an important cause of poverty. The hot climate of India reduces the capacity of people especially the ruralites to work for which production severely suffers. Frequent flood, famine, earthquake and cyclone cause heavy damage to agriculture. Moreover, absence of timely rain, excessive or deficient rain affect severely country's agricultural production

Demographic factors

The following demographic factors are accountable for poverty in India.

(i) Rapid growth of population

Rapid growth of population aggravates the poverty of the people. The growth of population exceeds the rate of growth in national income. Population growth not only creates difficulties in the removal of poverty but also lowers the per capita income which tends to increase poverty. The burden of this reduction in per capita income is borne heavily by the poor people. Population growth at a faster rate increases labour supply which tends to lower the wage rate.

(ii) Size of family

Size of the family has significant bearing on rural poverty. The larger the size of family, the lower is the per capita income, and the lower is the standard of living. The persistence of the joint family system has contributed to the health and earning capacity of the ruralites.

Personal Causes

(i) Lack of motivation

Lack of motivation is an important cause of rural poverty. Some ruralites do not have a motive to work hard or even to earn something. This accounts for the poverty of the ruralites.

(ii) Idleness

Most of the rural people are lazy, dull and reluctant to work. Hence they rot in poverty.

Economic Causes

(i) Low agricultural productivity

Poverty and real income are very much interrelated. Increase in real income leads to reduction of the magnitude of poverty. So far as agricultural sector is concerned, the farmers even today are following the traditional method of cultivation. Hence there is low agricultural productivity resulting in rural poverty.

(ii) Unequal distribution of land and other assets

Land and other forms of assets constitute sources of income for the ruralites. But, unfortunately, there has been unequal distribution of land and other assets in our economy. The size-wise distribution of operational holdings indicates a very high degree of concentration in the hands of a few farmers leading to poverty of many in the rural sector.

(iii) Decline of village industries

At present consequent upon industrialization new factories and industries are being set up in rural areas. Village industries fail to compete with them in terms of quality and price. As a result they are closed down. The workers are thrown out of employment and lead a life of poverty.

(iv) Immobility of labour

Immobility of labour also accounts, for rural poverty. Even if higher wages are offered, labourers are not willing to leave their homes. The joint family system makes people lethargic and stay-at-home.

The ruralites are mostly illiterate, ignorant, conservative, superstitious and fatalistic. Poverty is considered as god-given, something pre-ordained. All these factors lead to abysmal poverty in rural India.

(v) Lack of employment opportunities

Unemployment is the reflection of poverty. Because of lack of employment opportunities, people remain either unemployed or underemployed. Most of these unemployed and underemployed workers are the small and marginal farmers and the landless agricultural labourers.

Social causes

(i) Education

Education is an agent of social change and egalitarianism. Poverty is also said to be closely related to the levels of schooling and these two have a circular relationship. The earning power is endowed in the individual by investment in education and training. But this investment in people takes away money and lack of human investment contributes to the low earning capacity of individuals.

In this way people are poor because they have little investment in themselves and poor people do not have the funds for human capital investment.

(ii) Caste system

Caste system in India has always been responsible for rural poverty. The subordination of the low caste people by the high caste people caused the poverty of the former. Due to rigid caste system, the low caste people could not participate in the game of economic progress.

A Shudra was not allowed to become a trader and a Vaisya could earn his bread only by trade.

Birth would decide their occupation and their economic fate. K. V. Verghese rightly observes, "Caste system acted as a springboard for class exploitation with the result that the counterpart of the poverty of the many is the opulence of the few. The second is the cause of the first."

(iii) Joint family system

The joint family system provides social security to its members. Some people take undue advantage of it. They live upon the income of others. They become idlers. Their normal routine of life consists in eating, sleeping and begetting children.

In this way poverty gets aggravated through joint family system.

(iv) Social customs

The ruralites spend a large percentage of annual earnings on social ceremonies like marriage, death feast etc. As a result, they remain in debt and poverty.

(v) Growing indebtedness

In the rural sector most of the ruralites depend on borrowings from the money-lenders and land-lords to meet even their consumption expenses. Moneylenders, however, exploit the poor by charging exorbitant rates of interest and by acquiring the mortgaged land in the event of non-payment of loans.

Indebted poor farmers cannot make themselves free from the clutches of moneylenders. Their poverty is further accentuated because of indebtedness. Such indebted families continue to remain under the poverty line for generations because of this debt-trap.

Impact of Poverty

It needs to be taken into account that although the economy has shown some visible signs of progress in the last two decades, this progress been uneven across various sectors or areas. The growth rates are higher in Gujarat and Delhi as compared to Bihar and Uttar Pradesh. Nearly half of the population doesn't have proper shelter, access to a decent sanitation system, villages do not have a nearby water source, and villages also do not have a secondary school and lack of proper

roads. Some sections of the society like the Dalits are not even included in the poverty list maintained by the concerned authorities assigned by the government. They're groups that are marginalized in the society.

Globalization and Growth of Employment

Globalization has also put a favorable effect on the employment scenario of the country. Over the years, due to the liberalization policies, India has become a consumer oriented market where the changes are brought by the demand and supply forces. Due to the high demand and the supply chains, there has been significant growth in the market. As such, more and more job opportunities are being created in different sectors. This has increased the per capita income considerably which has improved the poverty level to a great extent.

The growth of the various sectors has also opened up new employment opportunities which have put a positive impact on the overall poverty situation of the country. More and more industries are being introduced in the market to cater to the growing demand. Some of the well known industries that have recently become very popular in the country are personal and beauty care, agro products, health care, information technology and some other sectors. The service sector has a share of around 54% of the annual Gross Domestic Product (GDP). The share of the agricultural and industrial sectors in the annual GDP is 17% and 29%.

Growth of the Agriculture Sector and Poverty

A major portion of the poverty level in India is from the rural areas whose staple form of income is agriculture and farming. Due to the globalization, Indian agriculture has improved to some extent which has helped to reduce the poverty problems of the rural masses. Over the years, with the advent of more technology, there has been a significant change in the process of agriculture in the country. Earlier farmers used traditional farming techniques for growing crops. As such, they suffered a lot and the output was affected by a number of factors like pest problems, weather situations and lots more. Due to the globalization and introduction of better equipments, there has been a stark improvement in the techniques of agriculture. Today, farmers are using gadgets like rowers, tractors, electric pipelines and lots more for the cultivation of crops. This has increased the produce in terms of quantity as well as quality. As such, farmers have started earning more and have improved their per capita income and the standard of living. The government has also taken several positive steps to improve the poverty situation in the rural areas. Irrigational projects have been undertaken, dams have been built and more facilities have been provided to the farmers to increase their agricultural produce. As lots of farmers are poor, they are not in a position to buy expensive equipments. To solve this problem and make them self sufficient, the government also grants financial help and loan to the farmers at very cheap rates. The government has set up the National Bank for Agriculture and Rural Development (NABARD) and various other Regional Rural Banks (RRBs) to financially help the farmers in need. Housing projects are also being undertaken to solve the accommodation problems of the poor.

Government Schemes to Eradicate Poverty

Government efforts to alleviate poverty in India cannot be overlooked while discussing poverty. It needs to be brought to the forefront that whatever marginal drops that has been observed in the poverty ratios have taken place due to the government initiatives aimed at uplifting people from poverty. Though, a lot still needs to be done as far as the corruption levels are concerned.

PDS–The PDS distributes subsidized food and non-food items to the poor. Major commodities distributed include staple food grains, such as wheat, rice, sugar, and kerosene, through a network of public distribution shops established in several states across the country. But, the grains provided by the PDS are not enough to satisfy the consumption needs of a family. Under PDS scheme, each family below the poverty line is eligible for 35 kg of rice or wheat every month, while a household above the poverty line is entitled to 15 kg of food grain on a monthly basis. Being the most important system, the system is not without its flaws. Leakages and diversions of grains from the PDS are high. Only

41% of the grains released by the government reach the poor. The alternative against the PDS that has been suggested is that of a cash transfer along with food support, but this will not fulfill the need of the buffer food stocks.

MNREGA (Mahatma Gandhi National Rural Employment Guarantee Act)– This aim guarantees the right to work and ensure livelihood security in rural areas by providing at least 100 days of guaranteed wage employment in a financial year to every household whose adult members volunteer to do unskilled manual work. Employment generation under this act has been higher as compared to other schemes.

RSBY (Rashtriya Swasthya Bima Yojana) - This is a health insurance for the poor. It provides for cashless insurance for hospitalization in public as well as private hospitals. Every below poverty line family holding a yellow ration card pays 30 rupees registration fee to get a biometric-enabled smart card containing their fingerprints and photographs.

Globalization, Planning and Poverty Reduction

In 2001, Sachs, Bajpai and Ramiah (2002) observed that following the Green Revolution, high growth occurred in Punjab and Haryana and, to a lesser extent, in the adjacent states of Rajasthan, Gujarat and Maharashtra. The populous eastern states like Uttar Pradesh and Bihar, however, failed to take advantage of the Green Revolution. The authors thus regarded the differential effect of the Green Revolution as a cause of 'divergence' in inter-state living standards. In another detailed analysis, Kurian (2000), used data relating to:

1. Private investment;
2. Bank branches, deposits and credit; and
3. Trends in infrastructure development, to clearly establish that there are considerable disparities in socio-economic development across the states. In particular:

- Efforts through the planning process during the first decades of the Indian Republic had only partially succeeded in reducing regional disparities;
- The acceleration of economic growth since the early 1960s, with the increased participation of the private sector, appears to have aggravated regional disparities; and
- Ongoing economic reform since 1991, and in particular stabilization and deregulation, appears to have further aggravated inter-state disparities.

Conclusion

Flowing with globalization, India is shining in nearly every prospect. India is getting a global recognition and slowly moving towards to become a major economic and political strength. Though the development is progressing rapidly, still many basic problems like rural poverty, corruption and political instability remained unsolved. From the above analysis, it is clear that globalization has yielded many results; some of them are positive but some of them are negative for India as a whole and this is applicable to all other countries across the world as well. It is true that globalization of economy leads to access to resources that leads to higher GDP growth rate that eventually results into higher per capita income for nationals and lower poverty headcounts. So globalization seems to be helpful in poverty eradication to some extent but at the same time globalization results into increasing concentration of resources into few hands. This results into higher inequality. The same trend across the world has been witnessed whether it is USA or Latin America or China or India. In India after globalization process started in 1991, there has higher GDP and income growth leading to lower level of poverty in the country but inequality has increased because of distribution of income tilted in favour of rich. This problem can be tackled by bringing some regulations relating to distribution of income and wealth that can bring equality in society but not hindering growth and entrepreneurship in economy.

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ELDERLY WOMEN HEALTH CHANGES: ISSUES AND CHALLENGES

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Introduction

The study has focused on present society elderly women issues and challenges. As women age, they face challenging health issues. The elderly women are involved in the informal sector and not included in official statistics. The informal sector jobs such as domestic servant, small seller, artisan, field manual worker on a family farm. Most of these jobs are unskilled and low paying and do not offer remuneration to the women worker. Aged women are working in the informal sector is a severe economic risk. Particularly aged women are the poorest of the poor. Should they become ill, lose their job, or be unable to continue working, they and their families may fall into debt and find themselves in the depths of poverty. At risk are majority of poor who depend on the income generated by one or more women in their household. Elderly women may not benefit from jobs created by the new technology. Employment options for elderly women personnel have declined, and that many elderly women seek casual work in new sectors characterized by low salary and low output.

Health service

Geriatrics is an area of medicine dealing with elderly patients. The main goals of this field are to support the health of the elderly and to prevent and treat diseases they may encounter. A medical proficient that specializes in geriatrics is called a *geriatrician*. Their job can be quite demanding, as elderly patients tend to have unique health concerns, with many health issues occurring at one time in a patient. In addition, elderly patients often react differently than younger patients when they become ill. Therefore, a geriatrician role is essential to create a health plan to fulfill the needs elderly.

> ## Social and medical factors

Social and medical factors authority for conservatory of human life for several years it is one of the achieve. In the growing society increasing more number of elderly people in India. In ageing groups, there is more number of women living in the society. The disease burden appears significantly more in women compared to Indian men. Women in both rural and urban India suffer from more chronic diseases. The percentage of physically immobile persons is also high among women. Multiple problems are also more common. It is not uncommon for an average of elderly woman to have hypertension, diabetes, and respiratory problems. Post-menopausal years will comprise nearly a third of woman's life span today but, this will be marked by arteriosclerosis, maturity-onset diabetes and other problems. Hypo-thyroids are two to three times more common in women than in men and ushers in several physical and mental symptoms. Longevity poses several human problems. The major health problem of chronic illness and disability with ageing, chances of dementia, increasing health costs and the fear of outliving ones' resources or savings, problem of long-term care in the absence of family support. The women in traditional society spend their grown years in home making and non remunerative work. They tend to be needy on family for their endurance and welfare.

> ## Nutritional deficiency

Elder women are to some extent more likely than men to be living in poverty, and that gap widens in those over 80. Single elder adults are also considerably more likely to live alone with fewer assets. Deficiency affects elder health if people unable to afford doctor visits, medication for chronic conditions, and other essential senior

healthcare needs. The UNICEF report of 1996 clearly states that higher level of malnutrition among the women in the society. This nutritional deficiency for women first they become anemic and second they never achieve their full growth, which leads to an unending cycle of undergrowth as malnourished women cannot give birth to healthy children. Malnutrition results in poor health of women. The women of India are prejudiced from birth itself. Women are not given the right to free movement that means that they cannot go anywhere on their own and the women miss visiting doctors even when they should, which adds to their poor health.

Family issue

Family issues lead to a neglect of personal health in aged years leading to bigger weakness. The family atmosphere in which they are socialized does not support freedom. In old age there is an increase of disadvantages that reduce quality of life. The prevalence of morbidity is more common among women. The reasons being, women do not take the treatment at early stages. They need to be motivated to complete the course of treatment. They also suffer from other related disorders and need continued monitoring. Health in older persons is a product of life experiences and environmental factors. Nourishment, access to healthcare, immunization, instantaneous concentration to health troubles, healthy life style, physical exercise and genetically endowed constitution determine health status at any stage of life. With age, changes take place in system important to troubles. In women, most spectacular change occurs in the aging with menopause. In post reproductive yeas, there is a very low and incompatible level of estrogens. This affects the flexibility of the skin, muscular potency, hair pigmentation, ability to respond to stress forced by the atmosphere, augmented understanding to warmth and the implementation of the of the cardiovascular organism.

Hormone-related troubles

In Indian women, concerning the hormone-related troubles source numerous diseases. Besides chronic illnesses associated with aging and the disabilities caused thereby, estrogens deprivation alone brings a number of physical and metabolic changes in women leading to osteoporosis, vasomotor instability, uro-genital atrophy, and increased cardiovascular risks etc. While short-term hormone replacement therapy is considered beneficial, long term usage is still controversial. Specific wellbeing concern of elderly women both genders experience a decrease in the production of sex hormones during midlife.

Wellbeing troubles

The motherly death rate is high in the earth. As females are not given proper attention, which results in the malnutrition pregnancies at younger age, gynecological problems, which may become serious with time and may ultimately, lead to mortality. Many women experience a significant loss of minerals from bones predisposing them to fractures of the hip and vertebra. Such injuries result of loss of function, disability and often death. Health problems could be postponed by preventive measures. There are three aspects of effective protective strategy for bone loss. The first is to ensure that optimal peak bone mass is achieved during adolescence and early adulthood. The second is maintaining bone mass that has been acquired. Such maintenance requires adequate calcium intake and exercise as well as healthy lifestyle. The third is counteracting age related bone loss that occurs after 40 years. The problem with Indian women is, they are married early during adolescence when the body is still developing, they have multiple pregnancies that deprive body of its nutrients, the food they eat is not always balanced and age-related problems are accepted as inevitable. All add up to bone loss and related problems that reduce their mobility and social activity. Coronary heart disease was for a long time considered a chronic disease'. Such myths were not uncommon amongst the medical practitioners also. Coronary heart disease has been mostly affecting the women. Their perception of relative immunity from heart disease gives women a false sense of security. They do not initiate preventive measures among women. This lack of awareness programme among women in high mortality due to heart problems in women. Chronic lower respiratory diseases, such as chronic obstructive pulmonary disease (COPD),

are the third most common cause of death among people 65 and older, with 124,693 deaths in 2014. Among people 65 and older, about 10 percent of men and 13 percent of women are living with asthma, and 10 percent of men and 11 percent of women are living with chronic bronchitis or emphysema, according to the Federal Interagency Forum on Aging-Related Statistics. Although having a chronic respiratory disease increases senior health risks, making you more vulnerable to pneumonia and other infections, getting lung function tests and taking the correct medication, or using oxygen as instructed, will go a long way toward preserving senior health and their quality of life.

Cerebral wellbeing

Moving on a mental health, depression is not uncommon in women. In reality, women are more depressed than men across all stages of life. A number of drugs, particularly anti-hypertensive, hormonal drugs and psychopharmacological agents may cause depression as a side effect. Poly-pharmacy or taking multiple drugs is another factor. Diseases of endocrine system, vitamin deficiencies leading to anemia, metabolic illnesses may also lead to depression. Even otherwise, the lives of average older women have enough stressors to include depression. Some of the common stressors are loss of spouse, economic dependence, and lack of meaningful roles and reduced life satisfaction. Psychological distress is reported higher among older women especially among rural women suicide attempts in older age groups are often fatal. In spite of strides in gender equality, women still face challenges when it comes to socio-economic power, status, position, and dependence, which can contribute to depression and other disorders. Women are still the primary caregivers for children, and it i⟩ estimated that they also provide 80 percent of all care giving for chronically ill elders, which adds stress to a woman's life. Since majority of the research comes to light and there is greater understanding of women's mental health issues, experts are hopeful that targeted treatments will bring better results and more positive outcomes for women with mental health conditions.

Protective wellbeing

Elderly people often suffer falls because of loss of balance, graceful, episodes of giddiness, and often experience blackouts resulting in damage. The bones of the elderly are fragile and feeble, most of the time, when they fall it results in a wrecked trendy. At an older age, surgeries, particularly hip placement surgeries are painful and deadly.

Fragile bones can be avoided by undertaking weight bearing exercises in young, middle and even old age. Ensure that people consult a doctor and qualified trainer with help regarding which weight bearing exercises to pursue for maximum benefits. Prevention is better than cure and health education, improved nutrition are needed. Women should been courage to attend health camps and screening camps. Seeking medical assistance early enough helps improve the quality of life. Improving health status of older women is essential in a society. Essential health benefits include some services that are especially applicable to women, including maternity and newborn care, preventive and wellness services, and chronic disease management. In addition, important health profit contain ambulatory patient services; crisis services; hospitalization; mental health and material use confusion services, including behavioral health treatment; recommendation drugs; rehabilitative and facilitative services and plans laboratory services; and pediatric services, including oral and vision care. Healthy progress of women would be unfeasible. Health is not isolated from social status, power and prestige person enjoys and the privileges a role bestows on an individual. If women suffer from chronic ill health and disability, it is a reflection of their lower status in society.

Societal way of life

Societal way of life diminishes women from their privileges, consequential in an augmented possibility of women ending up alone. The life of a widow is riddled with severe ethical codes, with essential privileges relinquished and liberties circumvented. Social bias often results in unjust allocation of resources, neglect, and abuse, and exploitation, lack of access to basic services and

prevention of ownership of assets. Elderly women are more likely to get excluded from social security schemes due to lower literacy and awareness levels.

Conclusion

The study concludes that the issues of connecting to elderly women in order to ensure a reverential, joyful and healthy condition for them to live in. Elderly women have constrained social communication, inadequate earning potential, numerous therapeutic complications, emotional loneliness, very limited knowledge or awareness of their legal rights and natural unwillingness to seek justice. Due to social and customary family structure they are forced to live with several restrictions. They worked very hard all the way through their life, they enthusiastic each instant of her life for the sake of their family, and they poured love, compassion and empathy on her family and remained ready for any kind of sacrifice. But the elderly women require people support from the society; they left her alone actually, communally, sensitively.

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GENDER ISSUES IN FAMILY: INVISIBLE CHALLENGES

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Introduction

Discrimination against women is a contentious social issue even when the humanity has crossed the threshold of the 21st century. Enough ink is spilt on voicing the issues related to women from different quarters of life, but the road to real freedom for women seems to be still far-fetched. It is mainly because gender works in many invisible ways. Hence this article has made an attempt to unravel the invisible ways in which gender works, which are hidden in all the spheres of the life of women. Also this article will draw attention to the significant role played by the family in the process of gender socialization and to unearth the impacts of the same in the society.

According to psychologists such as Sandra Bem, one cognitive process that seems nearly inevitable in humans is to divide people into groups. The groups are partitioned on the basis of race, age, religion, and so forth. However, most of the times, humanity is split on the basis of gender.

What is instantly determined, when meeting of the other for the first time, is his or her gender. This process of categorizing others in terms of gender is both habitual and automatic. It is nearly impossible to suppress the tendency to split the world into half, using gender as the great divider. The gender divide actually commences with the process of gender socialization in family.

The Process of Gender Socialization

Gender Socialisation actually starts with the simple question "is it a boy or a girl" when a child is born. One study indicates that parents have differential expectations of sons and daughters as early as 24 hours after birth (Rubin, Provenzano, & Luria, 1974).From the time the children are born, parents treat sons and daughters differently, dressing infants in gender specific colours, giving gender differentiated toys, and expecting different behaviours from boys and girls (Thorne, 1993). For example, Dress choice, dress pattern, quality and quantity of food for girls and boys, choice of toys, formation of attitude of boys and girls, preference of education, domestic responsibilities and so on. All these things get aligned in the name of gender.

This is the beginning of a social categorization process that continues throughout the life of an individual. Following that there are number of ways in which children are directly or indirectly manipulated into "being socialized".

Individuals are socialized into conceiving of their gender as either masculine (male) or feminine (female) from birth. Identities are, therefore, normatively constructed along this single parameter. Gender identities are formed through socialization. Being aware of gender is a good place to understand the subsequent socialization processes in an individual's life. Being socialized here implies that through socialization children also learn what is appropriate and inappropriate for their gender. Gender socialisation is a more focused form of socialisation.

Infants are seen as blank slates, waiting to be written down on by their environment. Gender becomes internalized in the gender socialization process through our interactions with those around us. People, groups and institutions, who do the socializing, are the **agents** of socialisation (Family, peer group, teachers, media…). Gender roles are learnt through agencies of socialisation. Among these agencies, family plays a crucial role as the Primary agent and First social institution.

The Role of Family in Gender Socialization

Family has the primary influence on gender role development. Attitudes and behaviors related

to gender are generally learned first in home and are, then, reinforced by the child's peers, school experience, and media. Family plays a crucial role in passing on, both overtly and covertly, the beliefs about gender to the children.

Individuals' sense of belonging and intimacy is more towards the family. Family exhibits continuous control over the behavior in the life of the individual. From birth to death interaction of the person with family members is incessant. Whatever is learnt in the family is reinforced throughout the life by various ways and means (Boomeranged). Family is the epicenter and acts like a ring of concentric circles around oneself.

Children experience the process of gender socialization through variety of activities, opportunities, encouragements, discouragements, overt behavior, covert suggestion and various forms of guidance in the family. There are always latent mechanisms in the family that promote gender socialization. It is not easy for a child to grow to adulthood without experiencing all these things related to gender. So, as children grow and develop, the gender socialization, that they are exposed to at home, becomes stronger than any other agents of socialization. The main role of other agencies is to reinforce and perpetuate the already and firmly established and entrenched gender identity in the family.

The Family as gendered relationship

The family, as gendered relationship, influences strongly on gender socialization process. A child's earliest exposure to what it means to be a man or a woman comes from parents (Lauer & Lauer, 1994; Santrock, 1994; Kaplan, 1991).Hence, family plays an important role in the gender socialisation process.

Gender learning by infants is almost certainly unconscious. Before a child can label itself as either a boy or a girl, it receives preverbal cues. By age two, children have a partial understanding of what gender is. They know whether they are boys or girls, and they can usually categorize others accurately.

Thus, Children learn at a very early age what it means to be a boy or a girl in our society. They develop a schema for each gender. Schemas include not only knowledge and stereotypes (about each gender) but also feelings and values. Schemas are reified (treat them as real and universal and forget that it is human made). Through their interactions with people close to them and exposure to the values of their society, infants learn what sex is attributed to them and what roles they are expected to learn. Reinforcement (through rewarding gender-appropriate behaviour and punishing what may seem as deviant behaviour) socializes children into their genders. The children become gender-typed which lead to develop gender identity that remains throughout their life.

The Invisible Implications of gender socialization on the society

The gender socialization that we receive in childhood has a lasting effect on our ability to interact with others in society. Children who are socialized in this manner even deny the reality of what they see, when it doesn't conform to their gender expectations.

Family is the pivotal institution where the values (related to gender) initiated, practiced, perpetuated, reinforced and promulgated. There exists always a symbiotic relationship between the external macro world, the society and the micro world, the family. One supports the other. One influences the other. One has the impact on the other.

Gender socialization in the family adopts gender conditioning through Gender stereotyped behaviour. Gender stereotyped behaviour strengthens gender differences. Gender differences are thus attributed to differences in socialization process. It paves way for Gender polarization and consequently leads to gender discrimination.

Understanding gender socialization Vs Understanding Gender-based social problems

Learning gender socialization in the family helps us to develop a special kind of vision to understand many social problems like child marriage, honour killing, domestic violence, Dowry, divorce, female infanticide, farmer's death, and women committing suicide because of character assassination.

Mandatory of a radical change in our attitude to analyse the gender discrimination

Any attempt to solve these social problems need a special kind of vision that necessarily aim at positioning men's and women's issues at the backdrop of society with its socio-cultural context i.e. patriarchy or patriarchal mindset. This will subsequently lead to analysing the problems faced by women on the one side of the scale, while the counter arguments from patriarchal mindset on the other side of the scale. This kind of analysis is a never-ending road which places woman/man, feminine/masculine, feminity/masculinity as opposite poles. While men and women are viewed as opposite poles, they necessarily fall under binary-trap. From the binary-trap understanding, man-woman relationships are defined, confined and confirmed in order to conform with many fixed meanings. It has paved way for many construed and constructed conceptual confinement from which to free humanity has become almost a herculean task.

The assertion that femininity applies solely to women and masculinity solely to men is **fundamentally** a **flawed one.** Femininity and masculinity are **descriptors of behaviors and attitudes** without tying them directly to the genders, man and woman.

A radical shift is needed to understand that it is an identity that one feels strongly within oneself so. It is highly subjective, personal and subjected to perennial change. Hence, the characteristics which are delineated in the binary trap as male or female are fluid and cannot have permanent abode in one category. **They have to be understood as human qualities, not as sexed qualities and much less as two-sex model.** All must be included in the human realm and as humans. Otherwise, the society will continue to suffer with gender related issues.

Conclusion

"We cannot solve our problems with the same thinking we used when we created them" says Albert Einstein. It is also true with regard to the discrimination against women. Lasting solution cannot be found to the discrimination against women, if one holds on firmly the binary trap: Man and Woman. Gender Synchronization is the need of the hour which comprises of engaging both sexes in challenging the harmful constructions of masculinity and feminity. To understand one's identity as fluid will pave way for complementarity. Then only it is possible to equalise the balance of power between men and women in order to ensure gender equality and transform social norms that lead to gender-related vulnerabilities. All actors must be viewed in society in relation to each other. Understanding life as interconnected will enhance cooperation not competition.

So, **"let us Share our Similarities and celebrate our Differences"**.

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ICT ENABLED OPEN DISTANCE LEARNING (ODL): SYSTEM FOR SUSTAINABLE GROWTH AND DEVELOPMENT OF SOCIAL WORK PROFESSION IN INDIA

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Abstract

The growth of ICT enabled academic programmes are on the increase worldwide and the student enrolment for such programmes are growing, Open and Online courses are scarce in Indian institutions. There are several studies which reveal that demand for social workers in all the fields have increased but the existing trained Social Work professionals are very less. It is a high time that educational institutions adapt to the changing trends. Such constraints call for adopting innovative techniques by the Social Work faculties of educational institutions to enhance the social Work profession in India.

Background of the Study

The growing trends of this technological era have incited the academicians from different disciplines to bring in innovative methods and techniques of pedagogy. Sequentially to withstand the demands and also to facilitate growth and development of various professions, the educational institutions at national and international level need to understood the significance of Information and Communication Technology(ICT) enabled" Open and distance learning" in accomplishing their goals. In the context of globalization, the ODL institutions employ a variety of approaches in the teaching-learning process, especially designed to meet the needs of the ever -changing global scenario (Parameswara Rao-2017). This changing trend in Teaching-Learning scenario has landed in Massive growth of Open Distance Learning in all the academic disciplines across the world. Advances in interactive and educational technologies force us to change the existing teaching and learning paradigm (Altunisik, 2013).

Though the growth of ICT enabled academic programmes are on the increase worldwide and the student enrolment for such programmes are growing, Open and online courses are scarce in Indian institutions. There are several studies which reveal that demand for social workers in all the fields have increased but the existing trained Social Work professionals are very less (Du Plessis, Cuzette2017). It is a high time that educational institutions adapt to the changing trends. Such constraints call for adopting innovative techniques by the Social Work faculties of educational institutions to enhance the social Work profession in India.

Objectives

1. To enumerate the reasons for depreciated growth of Social Work profession in India.
2. To rationalize the enhancement of social Work profession and Education through ICT enabled Open distance learning**.**

Open Distance Learning- an overview

Open Learning has an important role to play by exploring new frontiers and developments in Open and Distance Education. The prominent users of this mode are worldwide in general and Asian region in particular. The growth of the ODE system in India and throughout the world has been phenomenal, particularly during the last two decades. Rapid changes have taken place in the practice of ODE, mainly driven by changes in Information and Communication Technologies (ICT). The revolution in ICT coupled with the social demand for education for all and the need for lifelong and continuing education have

resulted in the new vistas of open learning for knowledge society.(Parameswara Rao 2017). Distance learning, which is a formal or institutional education activity that brings together students, lecturers and education materials in different locations via interactive technologies, is a well-known education method that is used worldwide. In higher education, distance learning practices are based on interactive and information technologies therefore distance education is encountered as an education method that spreads more widely every day than previous traditional modes of teaching (Karaduman & Mencet, 2013). The policy aims to cross the time, geographical, economic, social, educational, and communication distance between students, academics, courseware, and their peers and to accommodate these prospective students from diverse backgrounds (Unisa, 2008: 2)

Empowering pedagogy of Social Work through ODL

As discussed above though most of the academic disciplines have adopted the ICT enabled pedagogy to attract learners all over the world, Social Sciences including Social Work through ICT have not been brought forward to the substantial level. For a variety of complex reasons, the social work profession in India has lagged behind developments in many other nations where social work is prominent (Goswami, 2012). The contribution of social work education in building professional attitudes, image and commitment among students, was slow to develop. the majority of studies conducted reported positive outcomes for distance-learning programmes (i.e. the educational achievements of distance-education social work students are comparable to those of traditional students (Potts & O'Hagan in Collins, 2008:426); distance learning social work students achieve equivalent grades compared to on-campus cohorts (Haga & Heitkamp in Collins, 2008:426); distance-learning social work students indicate satisfaction levels at least equivalent to those obtained by traditional classroom teaching (Potts & O'Hagan in Collins, 2008:426). Furthermore, the study by McFall and Freddolino (in Collins, 2008:426) discovered that it was "possible to implement a quality field instruction component

in a distance [social work] education setting at least comparable to what was provided on campus and, in some cases, even better"

In the initial stage, in the early fifties and sixties, efforts were made to promote three inter-related organisations. First came the Indian Conference of Social Work (1947), which acted as a forum for developing public opinion in favour of social welfare. It provided a common platform for voluntary leaders, professional social workers and public administrators to discuss the requirements of social welfare in the country. Thus it is evident that Social Workers since the evolution of Social Work Profession in India have strived through various approaches for its development. But such innovative ideas and techniques have not been adopted by the present Social Work Associations and Academicians leading to deterioration of Social Work Profession in our country. The prevailing trend of social work Profession and social work education in the country demand revolution, not only in its contents but in the objectives and approach to development.

It is apparent that the pioneers of Social Work in India have contributed to the development Social Work Education and Profession through many means and techniques available at that time. The present generation of Social Workers have the responsibility to involve themselves and strive for the growth and Development of Social Work in India. The conventional educational institutions ought to come forward with open minds for stepping into the new era which is Learner centred.

Chabbi Kumar(2012) in his analysis of Social Work Education through ODL Mode has come out with the strengths as listed below

- ODL programmes can reach out to large number of untrained social workers working in remote and deep rural interiors right at their work place.
- ODL course delivery can reduce the cost thereby making the programmes affordable to wider cross section of the people
- The course offerings through ODL can help the students to get exposure for wider context and concerns of SDGs will be served better

Suggestions

- Professional Social work Forums should come forward to discuss extensively about development of Social Work education in India through various means and techniques.
- Conscious effort to deliver Social work and interrelated new academic programmes through ICT enabled modes to attract the hi-tech younger generation.
- Linkage between the conventional and ODL institutions for successful efforts in developing Social Wok Education and Profession in India.
- Updating the Social Work curriculum and incorporating audio visual materials for better understanding by the students.
- Linkages with Social welfare and other relevant organizations to facilitate Field work Practicum and Internships of the students.
- Reliable Monitoring mechanism through brainstorming sessions and discussions to ensure the quality of the delivery of the academic programs.
- Availing the MHRD initiated schemes like SWAYAM to launch open and Online programs
- Regular training of Social Work faculties to update and equip them as per the growing need and changing trends in the fields of Social work.

Conclusion

"Acceptance" is the first step to overcome difficult situation. Hence the Social Workers in profession and academics should come forward to accept that Social Work Education in India is lagging behind. The concern for ICT enabled medium to deliver Social Work Education and the substantial efforts will enhance the sustainable growth and development of Social work in India.

It is a crucial time for all the existing Social Work educationists to deliberate over the future of Social Work and to strengthen the platform for upcoming social workers.

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ALTERNATIVE MEDICINES AND ITS EFFECTIVENESS –
A STUDY AMONG HOMEOPATHY AND AYURVEDA PRACTITIONERS

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Abstract

Alternative medicine denotes to medical interventions and techniques that have neither included in residency training nor usually taught in medical Institutes and which is generally not even in use at hospitals of today's era (Wetzel, M. S et al 1998) . At present around 70percent of the developing world's people still depends, relays and use these therapies on regular basis (Shaikh, B. T., & Hatcher, 2005). Homeopathy and Ayurvedha are two different system of medicine, which can be characterized as alternative medicines, used by people to come back to normal life, when they are affected by any disease and to address people's unavoidable needs for emotional and physical healing. **Homeopathy** believes in the "vitalist" philosophy. The treatment method in Homeopathy follows the "laws of similar" which means that to rid a person of a disease one has to treat the person with drugs that produce the same symptoms as the disease. **Ayurveda** generally believes in the philosophy that the health of a human body depends on the balance on the three key components, wind, bile and phlegm. Any imbalance in these three constituents causes diseases. The present paper studies the effectiveness of alternative medicines which are gaining importance in the recent days. Particularly homeopathy and Ayurveda healing technique were taken for the study. The data were collected from 50 homeopathy and 50 ayurveda practitioners using a structured interview schedule in order to know the effectiveness of these medicine. The systematically collected data were analysed and interpreted.

Keywords: Alternative medicine, Homeopathy, Ayurveda, effectiveness, side effects

Introduction

When anything practiced or performed outside mainstream then it can be called as alternative, whether it is with development or medicine. Thus the term 'Alternative Medicine' is any form of medicine that is practiced outside the mainstream of western medicine – allopathy. These alternative/traditional medicine systems display a common holistic approach, founded upon the assumption that wellbeing is intrinsically linked to the integration and balance of the whole person-body, mind, and spirit in harmony with the environment and prevailing culture. In 1973, the Medical Faculty of the University of Rome convened the first World Congress of Alternative Medicines and the provisional program contained no less than 135 therapies. Alternative medicine exists in all cultures to some degree and terms such as traditional medicine, indigenous medicine or folk medicine etc. are used to describe such practices. These alternative medicines were date back hundred or even thousands of years depending on the country and culture concerned.

Alternative Medicines

The medicinal practices which are out of the conventional medical practice are treated as alternative medicine and these medicinal practices are termed in the western countries as 'Complementary and Alternative Medicine' which are popularly characterized as CAM. In the Indian context the popular and the accepted medicinal practices other than the conventional one are known as AYUSH – which is an abbreviated version of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy. In India, in 1995 a separate department was initiated as the Department of Indian Systems of Medicine and Homoeopathy (ISM&H) as a government body with the objective of developing, education and research in the above mentioned medicines and other Indigenous Medicine systems. In 2003 the

nomenclature of the Department was changed as **AYUSH**, The department initially worked/operated under the Ministry of Health and Family Welfare. The Department of AYUSH was elevated as Ministry of AYUSH with effect from 9 November 2014. The idea of AYUSH also has a derivation from the Sanskrit term 'ayush' which means "life"

Homeopathy

Homeopathy (=homoeopathy) is a branch of medicine originated in Germany in 1794 created by Samuel Hahnemann late 18th century, which is based on the principle of The Law of Similar. In a way, it is an advanced form of vaccination; whereby a substance which is capable of producing a disease like state is administered to the patient, but in a very minute dose, to cure the similar disease. According to this belief, various external and internal causes disturb the "vital force" which negatively affects the health of a person. Homeopaths also take into account the psychological state along with the physical state of the person.

Ayurveda

Ayurveda is an ancient health care tradition that has been practiced in India for at least 5,000 years. The word comes from the Sanskrit terms *ayur* (life) and *veda* (knowledge) and hence Ayurveda is called the science of life. The concept of 'science of life' probably makes it the oldest medical science having a positive concept of health which is to be achieved through a blending of physical, mental, social, moral and spiritual welfare.. Ayurvedha practitioners believe every person is made of five basic elements found in the universe: space, air, fire, water, and earth. These combine in the human body to form three life forces or energies, called doshas. They control how your body works. They are Vata dosha (space and air); Pitta dosha (fire and water); and Kapha dosha (water and earth). According to Ayurveda, life is the combination of sarira (body), indriya (sense of organs), satva (mind) and atma (soul): sarirendriya satvatma samyogo dhari jeevitham. The oldest medical science of the world describes elaborately the measures of healthy living during the entire span of human life. Besides prescribing

the principles to be followed to maintain health, Ayurveda developed a range of measures to combat illness. These include principles of positive health and therapeutic measures related to physical, mental, social and spiritual welfare of human beings. Thus, this medical system deals with both the preventive and curative aspects of life in the most comprehensive way. It deals extensively with the conditions and circumstances conducive to happiness or otherwise responsible for misery during the entire span of life.'(Abdurahiman 2004: 66-67).

The healing practices has evolved over millennia by drawing on the religious beliefs and social structures of numerous indigenous peoples, by exploiting natural products in their environments, and more recently by developing and validating therapeutic and preventive approaches. The traditional and alternative medicines have a long history and they are becoming popular these years as substitute to the mainstream allopathic medical practice and sometime even supplement it. In this back drop the number of practitioners using homeopathic an ayurvedic method are also increasing, *the present paper is intended to assess and analyse the effectiveness of both this healing practice from the practitioners' view.*

Methodology

Ayurveda and Homeopathy are a science of life with a holistic approach to health and personalized medicine. Hence, evidence-based research is needed for global recognition and acceptance of Ayurveda and Homeopathy, which needs further advancements in the research. The aim of research in Ayurveda and Homeopathy is to study the effectiveness, from practitioners view. Descriptive research design was adopted. 50 Homeopathy and 50 Ayurveda practitioners were interviewed with interview schedule in order to know the effectiveness of these medicines. Effectiveness of medicine was identified by taking into consideration the components - *no side effects, no chemical substances and taking this medicine is easier than others*. The systematically collected data is analysed and interpreted. Primary data were collected from Ayurvedha and Homeopathy practitioners. Relevant secondary data was collected from publications, magazines, journals

and websites, added to the relevance and appropriateness of the study.

Analysis and Discussion

Any medical practice is assessed with its effectiveness for its survival and sustenance. In that way for the alternative medicine to hold for a long run its effectiveness is much needed one. The information related to the effectiveness of the alternative medicines, Ayurveda and Homeopathy are presented below using the collected data as tables.

Table 1 Effectiveness of Ayurveda and Homeopathy

System of Medicine Effectiveness	Ayurveda	Homeopathy	Total
Yes	50(100)	50(100)	100
No	0	0	0
Total	**50(100)**	**50(100)**	**100 (100)**

(Note: top row shows "(100)" continuing Total column from previous page)

Values in the parenthesis are in percentage.

All the practitioners agreed that **Homeopathy** and **Ayurveda** can be extremely **effective** in treating chronic and long-term health problems, when applied properly. The practitioners feel that the effectiveness of the treatment technique mainly relay on two things one- the practitioners diagnosing ability and the dedication show by the patient in following this techniques. If the practitioner can diagnose it rightly around fifty percent of the treatment is done. Then comes the patients part and his/her dedicated way of following the practitioners' instruction.

Table 2 Cause effectiveness in Homeopathy

Homeopathy	Always	Often	Sometimes	Rarely	Never	Total
No side effects	--	38(76)	12(24)	--	--	50(100)
No chemical substances	--	6(12)	27(54)	17(34)	--	50(100)
Taking this medicine is easier than others	16(32)	34(68)	--	--	--	50(100)

Values in the parenthesis are in percentage.

The table No.2 shows that majority of 76 percent of the practitioners' agrees that often there is no side effect in homeopathic medicines. 24 percent said that sometimes there are side effects. The Homeopathic remedies are not made using man-made drugs or chemicals, but rather made from things found in nature like trace minerals and herbs. They are normally used in very low doses, and are "gentle, subtle and powerful." Compared to prescription drugs they carry a very low risk for addiction and only very rarely cause any negative side effects. This becomes one of the important causes for the effectiveness of homeopathy.

Majority of 54 percent agree that sometimes there might be chemical substances. And 34percent said rarely they are with no chemical substances because they are prepared from a wide range of natural sources. Over 75 percent of the medicines origin from the vegetable kingdom, i.e. flowers, roots, leaves and the juice and certain chemicals and minerals are also used to prepare certain medicines. The revolutionary method of drug preparation in homeopathy, called as Potentization, utilizes a very minute quantity of the original drug substance. When diluted left behind is the power or energy of the medicine. One may call it dynamic power, which is capable to induce definite changes in the body system to bring about the healing process. The medicines thus are absolutely safe and free from any side effects. Thereby, they become a cause for effectiveness of the medicine.

For 68 percent of practitioners taking this medicine is easier than others because homeopathic remedies come in different forms, shapes and sizes. By far-and-away the most common is as sugar pills or liquids. They are smaller in size than a dried pea and their base is normally made from either sucrose or lactose. One pill is dissolved in the mouth as a dose and because the remedy itself has no taste, the pill tastes exactly like a little ball of sugar, so it becomes easier to take homeopathic medicines.

Table 3 Cause effectiveness in Ayurveda

Ayurveda	Always	Often	Sometimes	Rarely	Never	Total
No side effects	7(14)	36(72)	7(14)	--	--	50(100)
No chemical substances	4(8)	8(16)	38(76)	--	--	50(100)
Taking this medicine is easier than others	9(18)	25(50)	16(32)	--	--	50(100)

Values in the parenthesis are in percentage.

Table No.3 shows majority of 72 percent of Ayurveda practitioners agree that often there are no side effects and 14 percent are strong enough to say that there is always no side effects in Ayurveda. Other 14 percent agreed that sometimes there might be side effects, for this they have stated that if the prescription is wrongly or with doubt made there may be chances and also when the combination was differently taken by the patient also can create side effects. Ayurvedic medicine uses a variety of products and practices. Some of these products—contain herbs, minerals, or metals. Ayurveda treats the root cause of illness. The physician tries to restore the balance within the body-mind-soul axis in the patient. Thus, the practitioner starts with the 'roots of the disease' and not with cutting down the 'leaves of the symptoms'.

Any medicine may be harmful, particularly if used improperly or without the direction of a trained practitioner. It is also stated that like any other system of medicine, Ayurveda, if not practiced properly, would have negative effect. If a patient deviates from the strict diet regimen, it can cause side effects.

76 percent of the respondents agree that sometimes they may have chemical substances in ayurvedic products. They also stated that Ayurvedic Products are those made according to the principles of the traditional science of Ayurveda which means 'Life-knowledge'. This ancient Hindu system of medicine, spoken of highly in the Atharva Veda, the last of the 4 Vedas, incorporates the use of herbs and heavy metals like gold, silver, copper, sulphur, mercury, tin, etc. Therefore, there might be chemical substances in low proportions according to the need. But as the proportion varies it becomes a reason for the effectiveness of Ayurveda.

In Ayurveda, as the table shows 50 percent said taking this medicine is often easier, when they are in form of Tablets, Powder, Herbal extract, Medicated oil, Medicated ghee and Chewing. And 32percent said it is sometimes easier because they have Panchakarma Treatments which are the primary therapeutic, purification, detoxification and rejuvenation treatments in Ayurveda. Ayurveda practitioners believe that as protection of environment is important for preserving human health, it is said that human body cannot be separated from its surroundings. This integral relation applies to medicines too.

Conclusion

There are many alternative medicines which are gaining importance in the modern globalised era. The importance for the alternative medicines is mainly due to the side effects of mainstream medicine. Though there are successes in the alternative medicines due to the lack of systematic research and documentation they lag behind in proving their efficiency. To substantiate the treatment procedures, efforts are taken both by the researchers and the practitioners.

Homeopathy and Ayurveda considers the complaints of a patient in totality. It views a person as a whole, as an integrated entity, and not as a mere collection of body parts. So it treats the person as a whole too. Thus one does not have to visit ten different 'specialists' for his/her ten different body parts. After all our body is more than a collection of parts, therefore it can be concluded that the effectiveness of medicine depends mostly on the practitioner. The present study and the review of the literatures show the evidences of the effectiveness of the practices. They are cost effective and they make use of corrective mechanism, which promises healthy way of life. It is also to be noted that the proper learned, knowledgeable practitioners are expected to avoid misleads and misappropriation of treatments.

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CAUSES AND CONSEQUENCES OF OPEN DEFECATION IN AYYANAKOWNDANPATTI, MADURAI DISTRICT OF TAMIL NADU - A QUALITATIVE STUDY

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Abstract

The present paper explains the importance of utilization of toilet in the rural area. The present study has conducted in the village called AyyanakowndanPatti, Madurai District of Tamil Nadu. The objective of the present study is to disclose the significance of socio-cultural factors on influencing the utilization of toilet and use of open defecation. The present research adapted the qualitative method for analyzing the factors which are responsible for not using the toilet and use of open defecation in the rural area. The study states the knowledge on the use of toilet and hygiene practices among the people in the rural community. The present study examines the attitudes towards the use of toilet facility and the use of open defecation. The present study also explains the problems faced by the people in particular women and children in the village. This paper says how gender is associated with the practice of WaSH at the community level. The present study explains how open defecation causes pollution in the rural environment. This paper also divulges the role of government and non-governmental organizations in bringing the socio-cultural changes in the attitudes of rural people on the utilization toilet facility and protecting the environment in rural community.

Keyword: *socio-cultural factors, open defecation, beliefs, myths, consequences*

Introduction

The present paper studies the significance of health behavior towards WaSH and knowledge on health practices related to WaSH among rural people in India. Several organizations work for brining clean and healthy generation and healthy society such UNICEF (WaSH), the Central Government of India (Swatch Bharat Abhiyan) and the State Government of India (Nirmal Bharat Abhiyan). All these programmes and schemes endeavored to fabricate water, sanitation and hygiene facility and to eradicate open defecation in rural India. let us see the programs which are given below.

Nirmal Bharat Abhiyan

In order to ensure sanitation facilities in rural areas with the broader goal to eradicate the practice of open defecation, a comprehensive programme called 'Total Sanitation Campaign' was launched by Rajiv Gandhi National Drinking Water Mission, Government of India to cover all households with water and sanitation facilities and promote hygiene behaviour for overall improvement of health and sanitation in rural areas. The programme is demand-driven and people-centered based on the principle "From low to No subsidy". A nominal subsidy in the form of incentive is given to the rural poor households for construction of toilets. The key intervention areas have been identified as Individual Household Latrines (IHHL), School Sanitation & Hygiene Education, Community Sanitary Complex and Anganwadi Toilets. The Scheme laid strong emphasis on Information, Education and Communication (IEC), capacity building and hygiene education for effective behaviour change, with the involvement of PRIs, Community Based Organizations (CBOs), NGOs, etc. The Total Sanitation Campaign which was introduced in Cuddalore and Coimbatore districts initially in 1999 was extended in phases to all other districts in Tamil Nadu by 2004.

WaSH

UNICEF focuses on gender issues related to WASH in number of ways. UNICEF endorses and encourages women to participate in community WaSH management committees. UNICEF encourages the meaningful participation of women on community WASH management committees. In Angola, for example, a pro-active system to promote greater leadership of women on WASH committees has not only improved

WASH-related decision making. It has helped create forums for community discussion on other gender issues such as domestic violence and HIV/AIDS stigma. Elsewhere, UNICEF promoted techniques to encourage gender-sensitive planning at the community level, such as in Pakistan where a tool that maps the daily routines of women and men has been incorporated into the planning of community-led sanitation programmes, and in Zimbabwe where gender training of urban residents' associations enhanced their capacity to identify gender gaps in WASH service provision.

UNICEF also continued to provide substantial expertise and knowledge for gender-sensitive programing for WinS. One example is the continuing development and institutionalization of new toilet design standards that emphasize the needs of girls, including in China, Kenya, Mongolia and Zambia in 2013. Design criteria for gender friendly designs include the need for privacy (including features such as privacy screens, functional locks, and the physical separation of girls' toilet blocks from boys'), the need for an adequate number of stalls for girls, and the need for special WaSHing, changing and sanitary napkin disposal facilities.

UNICEF supports to initiatives to reduce stigma and discrimination related to menstruation, and to facilitate improved menstrual hygiene management, is also part of the UNICEF WASH programme. Most activities are centered on schools, activities include the distribution of sanitary napkins in emergency situations (211,908 emergency hygiene kits, which include sanitary napkins, were procured in 2013) and efforts to improve the availability of pads in communities, such as in Bangladesh where SaniMarts managed by trained adolescent girls in poor communities sell sanitary napkins and provide advice to young girls on safe menstrual hygiene management.

UNICEF supported government partners to perform sector gender analyses and audits and subsequently institute policy reforms based on audit findings. By the end of 2013, a total of 29 UNICEF Country Offices had provided support in this area during the programme cycle. Examples include Nepal where UNICEF is developing sectoral Gender and Social Inclusion guidelines,

and Ethiopia where a sector-wide gender gap assessment was carried out as a precondition for the establishment of a national WASH SWAp. In Ghana, UNICEF provided technical advice and financial support for a major new government initiative to assess progress in the sector and to develop a set of gender mainstreaming guidelines and toolkits. To date the exercise has identified key gaps and developed a set of appropriate policy responses currently being incorporated into sectoral guidelines. UNICEF also sponsored a variety of operational research examining the nexus between gender roles and WASH in communities in 2013. This includes an assessment of women's participation on WASH management committees in various countries.

Swachh Bharat Abhiyan

Swachh Bharat Abhiyan was launched on 2nd October 2014 throughout india. clean india campign instigated by the Prime Minister Narendra Modi with an intension of bringing healthy generation in the healthy environment. The provision of water, sanitation and hygiene in each and every school ensures the healthy school environment and protects the school children particularly for girl children from illness and exclusion.

Nirmal Bharat Abhiyan

Nirmal Bharat Abhiyan is introduced by the State Government of Tamil Nadu. The state government has introduced the scheme to support the people to build toilet in rural areas and urban slum. The scheme encourages the people to use the toilet. The main objective of the Nirmal Bharat Abhiyan is to eradicate open defecation.

Though many organizations brought many schemes and projects to eradicate open defecation, still it has not been achieved due to an important reason is called culture. Thus, the present study is carried out to analyse how socio-culture factors influence the use of open defecation.

Methodology

The present paper explains the importance of utilization of toilet in the rural area. The present study has conducted in the village called AyyanakowndanPatti, Madurai District of Tamil

Nadu. The objective of the present study is to disclose the significance of socio-cultural factors on influencing the utilization of toilet and use of open defecation. The present research adapted qualitative method for analyzing the factors which are responsible for not using the toilet and use of open defecation in the rural area.

Findings

- There is a belief that, god's presence would not be there in the house if they use the toilet at home. It is believed that, using toilet at home would pollute the religious life.
- The people in the village have not trained culturally to build and use toilet. Particularly, people in rural area are socialized to use open defecation. They feel comfortable to use open defecation.
- Class system occupies a significant role in not utilizing the toilet and use open defecation. People who belong to higher class are using toilet. Although the government built toilets for those people who belong to lower class, they are not utilizing the toilet facility. People who belong to lower class feel inferior to use toilet when compared to the higher class people. The perception of lower class people about themselves is the main cause for them to use open defecation.
- Education also determines the utilization of toilet facility. People who are educated and belong to higher class are using the toilet at home. People who are not educated and belong to lower class are using open defecation.
- Caste influences the utilization of toilet. Although the government supports to build toilets among lower caste community, people are not ready to use the toilet in their home and use open defecation.
- People in the village believe that, using toilet inside their home would affect their hygiene life. Using the toilet would pollute their home environment.
- Gender is an important social factor which determines the utilization of toilet. People hesitate to use toilet in their home. Particularly, women hesitate to use the toilet

at home. People do not aware about the hygiene and healthy practices.

- Health problems faced by women due to open defecation in particular young girls. Rural women have to wait until the night has to come for faeces. Women suffer at the time of menstruation due to open defecation. They feel difficult to dispose sanitary napkins in day. There is a belief that, if they dispose their sanitary napkins in the toilet at home, it would pollute their religious holiness.
- Environment got polluted due to open defecation. People in the village particularly women and children are easily affected by spreading diseases due to open defecation.
- The study found that, though the government has built toilet in the government school, the school children are not using the toilet. Since there is no water facility in the school toilet, the school children use open defecation.
- There are various reasons are there for rural people to do not use the existing toilet facility at home such as poverty, illiteracy, ignorance, not aware about the spreading diseases, lack of socialization on toileting, culture, superstitious belief and so on.

Conclusion and Suggestion

The socio-cultural attitudes of the people in the village towards the utilization of toilet should be changed and refined. Facilities such as water, sanitation and hygiene should be met in the rural area. Awareness should be created among the people in the rural community by the government and nongovernmental organizations. Sensitizing the people on the causes of open defecation and its consequences is the foremost responsibility of the government and nongovernmental organization. Sensitizing women on WaSH and its significance is an imperative step to bring social change in the society.

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"STUDY ON ISSUES AND CHALLENGES OF WOMEN WITH PHYSICAL DISABILITY IN MADURAI"

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Abstract

Women with disability face the consequences of their condition throughout their lifetime, right from birth for being born as women and for the bodily impairment. The major social challenges of woman with disability are stigma and discrimination, social exclusion and violence in the form of sexual, physical abuse and economic abuse. Psychological challenges are sometimes the cause of social challenges that they have experienced in life; psychological challenges are insecurity, inferiority, hopelessness, stress and the perception developed by women with disability towards self and society. The present quantitative study attempts to find out the psychosocial issues and challenges faced by Women with loco motor disability in Madurai. Non Random sampling is used to select 25 Women with disability as sample for the study and primary data is gathered using interview schedule. The study found that more than 50 percent of the women have experienced psychosocial problems in their life such as discrimination, social exclusion; abuses and more than 75percent have denied from holding rights and marital choices. The study suggested intervention program that should not only target disabled person but also her family and community and this would educate the environment and will bring change in the prevailing condition.

Keywords: Disability, Movement Impairment, Psychosocial, Discrimination, Exclusion

Introduction

Women with disabilities experience discrimination in many forms which intersect and are distinct from those experienced by women without disabilities or by men with disabilities. Women suffer from restrictions, oppressions and discrimination due to their existence in patriarchal societies. Gender influence is not the sole reason for these experiences but differences of race, ethnicity, class, sexuality, age, health condition, disabilities and religion shape women's experiences and reactions of disabled women in a existing society. The psychological and social challenges are more pervasive on women with disabilities. The women often face attitudinal and environmental barriers that prevent their full, equal and active participation in a society. Still there is stigma that prevails in the society due to which family and society avoids, hides, isolate, reject, and segregate women with disability. With regard to women with disability, persistence of certain cultural, legal and institutional barriers makes them the victims of two-fold discrimination; as women and as persons with disabilities. Violence and abuse affect them from all kinds of involvement and belongingness in everyday life activities. Sometimes, they are attacked by strangers, but most often they are hurt by people who are close to them. Violence and abuse can cause terrible physical and emotional pain without any legal protections. Women with disability tend to face the consequences of their condition throughout their lifetime, right from birth for being born as women and for the impairment. Right from birth they are denied of their freedom, rights, education and opportunity. The major social challenges of woman with disability are stigma and discrimination, social exclusion and violence in the form of sexual and physical abuse, economic and physical abuse. Psychological challenges are sometimes the cause of social challenges; psychological challenges are insecurity, inferiority, hopelessness, stress and the perception developed by women with disability towards self and society.

Significance of Undertaking the Study

Women with Disability face double discrimination; these women remain as suffers throughout their life. Their troubles and psychosocial issues are not properly understood by fellow beings or are not considered by the society

where they live. Some of significant issues that need to be brought forward are:

1. The issues of women with disability which is always been ignored and are less understood.
2. They are incompetent not because of disability but because of the society and the community by which they are surrounded.
3. They face denial for their rights, education, employment, freedom of choices, living independently and face so many barrier to come out of the ill condition.
4. Disabled women are seen imperfect, incomplete, inferior, asexual, and non-productive by the society especially with respect to marriage, they are unable to have marital choices and are demanded with high dowry, forced marriage, marriage with aged person etc.

Though there are acts and policies formulated, the issue needs a compassionate understanding for providing the equal space to access the rights like other human beings. Development programmes rarely address the needs of disabled women or include them in community development programmes. Lot of rehabilitation programmes which does not only focuses on the disabled person buy also focuses on the family and community is essential. The study will help in highlighting the issues which are personal and social and which need to be dealt for overall well being.

Objectives of the Study

- To assess the present status of women with movement impairment from personal and social aspect.
- To find how women with loco motor disability are socially challenged in their society.
- To analyze the psychological challenges of Women with movement impairment.

Research Methodology

The present study is conducted in Madurai district, quantitative research method is used in study for analyzing various factors. The research focused on studying the problems of the women with physical disability who are movement impaired (Loco motor disability). The research focused on women who are above the age of 18 so that marital consequences and difficulties can also be known in the present study. Researcher has selected 25 women who are movement impaired from Madurai. Primary data is collected from the respondents using Interview Schedule. The questions focused on the difficulties that they faced, daily challenges that they face in life and on the psychosocial factors that these women experience in society. Under Non Random sampling researcher has used convenience sampling method to collect the data using interview schedule method from women who have loco motor disability. Data were collected in both forms primary and secondary sources, primary data is collected from the respondents to study the psychosocial problem and challenges they face and secondary data is collected from secondary sources such as books and journals for the purpose of reference.

Results and Discussion

The research explains various psychosocial factors of women with movement impairment. The study focused at finding out the current status such as education level, employment status, and health care access, marital and psychosocial issues. The study was conducted among women who had loco motor disability which is considered as the category of physical disability. While examining the education level of the respondents 20% was found to be illiterate the condition reveals that they have never been to school. 24 percent only had primary education and they were denied education, 32 percent were allowed to pursue education till the high school level and only 8 percent were graduate which reveals that only few families have supported for education of Women with disability. Marital status revealed that among the respondents 12 percent are divorced and 8 percent are deserted women and this was mainly due to their disabled condition.

Most of the Disabled women's occupational status revealed that 44 percent of them were underemployed category, which revealed that they were engaged in jobs which are not full time and women who were employed and underemployed had income between the range of 6000 to 7000 per month but still 44 percent of women with disability were financially dependent on spouse that is their husband, 24 percent were dependent on parents and only 32percent relied on self, the percentage states that they are not allowed to be independent and hence they need to depend on

care takers in terms of finance. In terms of health care and accessing health these 40percent of women reported lack of family support, 24percent reported issue with mobility and lack of proper awareness in accessing health care. Rest 12 percent stated that they faced lack of financial support as their families were not ready to invest for the health purpose.

Since Women with Disability are subjected to double discrimination in terms of gender and their bodily blockage there are more chances of these women becoming socially handicap as well, in the study 52 percent of women depicted the condition due to social stigma and 56 percent of women also reported social stigma remained as a barrier in pursuing their passion in life and due to which their families also restricted them from being socially active.

Table 1 Distribution of the respondents by the challenges faced in Life

S.No	Most Challenging Component	Percentage
1	Mobility	20.0
2	Imposed Decision	20.0
3	Discrimination in Family	4.0
4	Social Exclusion	40.0
5	Managing marital life	12.0
6	Health	4.0

The table reveals that 40percent of the women face social exclusion as the major challenge in life. This depicts that they feel that they are not fully being accepted by the society and they are also being restricted from participating in social cause and events like normal women and this clearly shows that the discrimination is still a bothering issue which is affecting disabled women in society. Other 20 percent women face mobility and imposed decision as a challenge which states they are not provided with full freedom to choose or decide on their own. 12percent women have problem in managing marital life this is either due to lack of support or due to their functional limitation. 4 percent reported to have health issue as a major challenge and other 4 percent stated that they faced discrimination within family itself which they considered as most disturbing issue.

Table 2 Distribution of respondents on perception towards Disability

S. No	Perception of Respondents	Percentage
1	Normalcy	8.0
2	As Challenge	16.0
3	Hardship Situation	24.0
4	Very Stressful	52.0

The table depicts the perception of women with disability towards their disabled condition. The table shows how the disabled condition has influenced or created impact in the life of women who are physically disabled. Among all the respondents only 8 percent of them are able to describe their condition as normal which shows that they are confident enough to tackle the challenges due to disability or they are supported by healthy environment. 52 percent women have considered their disabled condition as very stressful it may be due to their life experiences, lack of support and lack of opportunity.

Table 3 Distribution of respondents by the psychosocial Issues

S.No	Psychosocial issue	Percentage Yes	No
1	Discriminated for disability	76.0	24.0
2	Subjected to Violence	52.0	48.0
3	Sexually Abused	56.0	44.0
4	Restricted for full participation	64.0	36.0
5	Struggles in marital life	76.0	24.0
6	Denied education	68.0	32.0
7	Disability affected marriage choices	80.0	20.0
8	Difficulty in accessing public places	56.0	44.0
9	Insecure about life	76.0	24.0
10	Psychological strain due to disability	77.0	23.0
11	Felt Inferior	64.0	36.0

The table clearly explains the psychosocial problems faced by disabled women, social problems are experienced from social circle, society and psychological problems are experienced from within, it can also be the effect of social problems or it depends on the life

experiences and coping level of individual, but disabled women experience more intensely than other women and disabled men. As stated in the table the among the respondents 76 percent are discriminated for their disability. 52 percent have subjected to violence , 56 percent have sexually abused , 64 percent have restricted to participate in social events and family's decision making, 76 percent of disabled women has struggles in managing marital life , 68 percent have completely denied or they were stopped from going to school after certain age, 80 percent of women have faced problems in marriages such as demanded dowry , marriage with aged person and marriage against their choice.76 percent of women feel insecure in life, 77 percent have psychological strain of disabled condition and 64 percent of women feel inferior when comparing themselves with other women in the society. The table depicts that more than 50 percent of women almost have all the psychosocial problems due to their weaker nature.

Conclusion

It is evident from the study that most of the Disabled women experience problems such as discrimination and social exclusion. Disabled women are more vulnerable comparatively to other non disabled women in the society.76 percent of women have stated that disabled women face more psychological, social and health problems than disabled men in the society and 80 percent of women also reported that the disabled condition get more worse due to the perception of society and stigma. The condition of disabled women is not only solely due to disability but it also drastically relies on the family, community, society and environment where the person lives. Positive life experiences, support from the family, paving way for opportunity, rehabilitation, proper health care and appropriate tailor-made services can change the prevailing negative condition and help Disabled women for independent living.

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ELDERS PEOPLE AS VICTIMS OF SOCIAL DEPRIVATION: A STUDY CONDUCTED IN MELUR BLOCK, MADURAI DISTRICT, TAMILNADU

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Abstract

Elderly life is often considered and perceived as a burdened life, predominantly, of struggle, illness, depression, exploitation and abuse etc. Due to their unproductiveness and non contributing nature, the elderly are considered as redundant population in family as well as in society. Changes in population structure will have several implications for health, economic security, family life and well-being of the elderly people. Dependency level is high among the elderly population. Hence provision of care and support to the elderly people in the family becomes a burden for the today's young generation. To identify the various determinants a qualitative understanding of the elderly's problem and prospects is undertaken in which case study methods as the tool for data collection is used. The study conducted at few villages in Melur block of Madurai district, Tamilnadu. Denial, neglect, elderly abuse, alienation, isolation and deprivation are the vulnerable factors that lead to victimization. Thus elders are victimized and socially excluded and victimization is a social problem.

Keywords: Isolation, Deprivation, Alienation, Denial, Neglect, Vulnerability, Victimization

Introduction

Old age is a process in which changes are both biological as well as psychological. Growth and maturity can be seen and experienced in aged life. Very often elderly life is considered or assumed as a burdened life, primarily, of struggle, illness, depression, exploitation and abuse etc. Due to their unproductiveness and non contributing nature, the elderly are considered as redundant population in family as well as in society. In the context of demography, population ageing is a threat to both developed and developing nations across the globe. In fact developing countries are ageing faster than the developed countries. Changes in population structure will have several implications for health, economic security, family life and well-being of people. The needs and problems of the elderly vary according to their age, socio-economic status, health, living status and other characteristics.

Family becomes a major source of shelter for the elderly people. Generations of older Indians have found shelter in the extended family system during crises, be these social, economical or psychological. The traditional family is fast disappearing, even in rural areas. With process of urbanization, families are becoming smaller and are not capable of caring for older relatives. The unconditional respect, power and authority that older people used to enjoy in rural extended traditional family are being gradually eroded in India in recent years. Certain socio economic and psychological factors push the elderly people to move away from the family setup to an old age home. To study the various determinants that makes the elderly people to be victimized. The study was conducted in 4 villages of Melur Block, Madurai district in Tamilnadu. The primary source target is the elderly people who are above the age of 60 years.

Review of Literature

1. **Duffy, 1995** in his text elder abuse is a social problem and elderly victimization falls under the broad purview of social exclusion. Social exclusion is "… is a broader concept than poverty, encompassing not only low material means but the inability to participate effectively in economic, social, political and cultural life and in some characterizations alienation and distance from mainstream society".

2. *Dr A. Ramaiah,* in his article Developing Supplementary Indicators from social inclusion perspective towards the achievement of MDGs: *Some Key Issues based on Indian Experiences.* Social Exclusion is a process in which one section of society looks down upon

the other, and alienates and excludes the latter from all opportunities of development on an arbitrary basis. The dominant section uses not only religion, tradition and culture but also political and bureaucratic powers and if nothing works also indulges in violence to perpetuate its dominant position.

3. **Amartya Sen, 2000** According to him, "Social exclusion can, … between the constitutive relevance and the instrumental importance of exclusion between active and passive exclusions…, thus, be constitutively a part of capability deprivation as well as instrumentally a cause of diverse capability failures". Also being excluded can sometimes can be itself a deprivation and this can be of intrinsic importance on its own

4. **Marhur, A, "Elder Abuse", Editorial report**, When vulnerability factors prevail, there exists a possibility for abuse, that is, elder abuse. Elder abuse can be of various forms such as physical, psychological or emotional and financial abuse. It can also simply reflect intentional or unintentional neglect. Victims associated with abuse can be distressing and include the loss of independence, homes, life savings, health, dignity, and security etc. Elder abuse occurs across all socioeconomic, social orders and religious lines, yet it is under-reported.

5. **"Elder Abuse in Indian Country - Research, Policy, and Practice" – A Research study, NATIONAL INDIAN COUNCIL ON AGING** *for the* **National Center on Elder Abuse,2004** According to the study the respondents, neglect and exploitation are the most common forms of abuse. They further indicated that those elders most likely to be abused are: 1) women, 2) very old, 3) socially isolated in their own homes, 4) perceived as burdens to their families, 4) living with their abusers, 5) in poor physical condition, and 6) likely to have become dependent on others suddenly. The respondents characterized abusers as: 1) family caregivers, 2) likely to be unemployed, 3) poor and in need of money, 4) feeling burdened by care giving, and 5) depressed. They did not believe that abusers

were likely to have been abused by others in the past or to have histories of abusing others. They were also in agreement that abuse was repetitive.

6. *http://www.nationalcenterdvtraumamh.org*, " Psychological abuse"

Perpetrators of psychological abuse against the elderly often take advantage of their vulnerability in ways that control and/or humiliate the victim, including: Denying or creating long waits for food, medication, heat, or basic care. Taking the victim's walker, glasses, or dentures and intentionally failing to follow medical, therapy, or safety recommendations.

Theoretical Framework:

The basic assumption for social deprivation and victimization of elderly people is than changes and break down of the family structure. In order to understand the family structure, it is necessary to contextualize the theory of Herbert Spencer, Structural Functionalism. Structural functionalism is basically a theory of social survival in society. What is needed for a society to maintain itself? The key idea is that families perform the critical functions of procreation and socializing of children so that they will fit into the overall society. Through family structure a social order, values, norms and culture is transformed and translated to the members of the family.

In India family is the basic unit of the society. Family becomes a major paramount source of asylum for the elderly people. Generations of older Indians have found shelter in the extended family system during crises, be these social, economical or psychological in traditional Indian society. There is strong cultural pressure to 'look after' the parents in the family. The younger generations treated the aged as the treasure house of care, knowledge and authority. A person's social network refers to those persons with whom he or she maintains contact and elements of emotional attachments. Social networks lead to human interactions and interactions to human support. Human support is both emotional and instrumental. Emotional support is required to make the individual feel accepted and that paves the way for the developmental of a healthy self-

esteem. Instrumental support includes monetary assistance; help to do tasks and to cope with difficulties and all other form of physical help assistance. Migration due to employment and other factors from rural areas breaks the existing traditional family structure which is resulted in the growth of more nuclear families in towns and cities. The degree of structure is very minimal in nuclear families. This affects the care and support of the elderly. The growth of 'individualism' in modern life led to their *denial, alienation* and *isolation* from family and society. When structure breaks inequality exist because of the loss of equilibrium.

Research Methodology
Objectives
1. To analyses how the families especially in rural areas get fragmented and loses its uniqueness
2. To analyses the impact of fragmentation of family structure which result in neglect, alienation and deprivation of elder people in the family towards the provision of care and support

(a) Area of Study:
The study was conducted in 4 villages in Melur Block, Madurai district, Tamilnadu.

(b) Selection of respondents:
The respondents were elderly people whose age is above 60 years. By using the conventional method of random sampling method, 10 respondents were selected from the villages and old age homes.

(c) Tool for the study
The tool used to collect the data from the respondents is Case - Study method which will reflect the on in-depth gathering of information relating elderly victimization.

Data Analysis and narration of cases
From the case studies it is been relived that elderly people are been marginalized and excluded by their own family members itself. This elderly people are been refused to participate in family ceremonies and social gathering. Moreover, the decision power which they enjoyed during their younger days is been taken or plucked by their own children. The members of the family they

dint accept the elderly peoples need, interest and feelings as the result they were abused verbally, sometimes physically. The fact is these elderly are vulnerable because of their unproductive nature in the old age. According to the elderly people the reason for staying away from family is the loss of dignity, disrespect and abuse. Since they are dependent they are vulnerable to victimization. The elderly people are emotionally dependent as well as socially in nature. They seek some kind of help in order to fulfill their needs from other member especially the family members which is deprived to them, which leads to frustration and anxiety. They are denied to access the family property soon after the property is partitioned. Mostly the female elders are used as an unpaid servant to take care of the grand children, looking after the house hold and assist the in laws in cooking also take care of their spouse. If it is a male elderly then they should be redundant, keeping quiet and sitting out side the house. The perception about the elderly by the younger generations is elderly life is a burden. When the family members feel or perceive them as a burden automatically deprivation and marginalization happens and finally they are excluded. The elderly people they prefer whether to stay within the home or move away from home to seek asylum in an old age home. Sometimes they are forced or compelled by the sons and daughters to stay out side the family due to some need and necessities. Also they are obligatorily or compelled by the sons and daughters to stay within side the family.

Another main issue pointed by the elderly is children relocating (Migration) themselves from the family due to employment reasons and other statutory needs. This makes the issue of who is going to take care of their elderly parents, elder one or the younger? Son or daughter or place them in old age homes? Yet another major issue of the elderly is the health problem due to biological degradation. Affordability to address the health issues of the elderly by the children or family becomes a burden in terms of economical. The elderly people are been deprived to access and meet their health. Loneliness is the only byproduct of the old age. Food pattern and types are changed and this has become a major source for all health problems. Love and affection is the most

important psychological factor that is need by the elderly people from the family members and peer groups. Sometime care givers also abuse verbally and emotionally in the care homes.

Major Findings

Based upon the discussion with the elderly persons it is relived that,

1. With urbanization, families are becoming nuclear, smaller and are not always capable of caring for older relatives.
2. The unconditional respect, power and authority that older people used to enjoy in rural extended traditional family are being gradually eroded in recent years.
3. Modern life style has led to *denial, alienation* and *isolation* of the elderly from family and society.
4. *Denial, alienation, isolation and deprivation* give raise the psychological problems to among the elderly people
5. The rights of elderly are been violated at all forms in all ways because their nature.
6. The major violation occurs in the form of *denial* that is denial of basic needs and rights of the elderly people, which leads to destitution at times.
7. The denial in terms of social, economical and psychological aspect within the family makes the elderly to feel lonely and neglected.
8. They depend for love, care and support, for the fulfilling their day to day routine etc which becomes a burden to the present day young generations, simply elderly are socially dependent on their children
9. Family becomes a major paramount source of asylum for the elderly people
10. *Neglection* is the main cause for all kind of psychological problem that persist among the elderly people. Especially emotional *Neglection* by the family members in terms of denying the power to make decisions, acceptance and participation in the social forum of the family activities etc, with that the old age people feel that they are powerless and worthless in the family.
11. *Social maladjustment* by the elder people also leads to frustrations that felt by the care takers, failure to adapt can result in bitterness,

inner withdrawal, depression, weariness of life.

12. The determinants of elderly abuse are always coupled with *neglect.*
13. Neglect leads to abuse and abuse leads to deprivation and further lead to alienation and homelessness. So the old people move to a secured institutional care centers like old age homes if and only if it is affordable.
14. *Denial, neglect and elderly abuse* is result of rapid urbanization and industrialization, disintegration of traditional joint family system and structure
15. Migration due to employment opportunities and other statutory needs has changed the values and norms of social relationships
16. These determinants create the *vulnerability* factor for *victimization* of the elderly people in the family and society.
17. Material exploitation, financial deprivation, Isolation, Abandonment, Verbal humiliation, Emotional and psychological torment, health at risk with poor or lack of care makes the elderly to be victimized. Victimization prevails virtually.
18. Elderly people accept that deprivation and marginalization are the normal consequence of ageing life.

Suggestions

The suggestion and implications for protection elderly people from victimization and vulnerability,

1. Establishing social protection measures to promote inclusiveness in all statutory and non statutory policies, such as social pensions and specialized nutritional assistance, to alleviate the risks associated with reduced food access and health.
2. Advocating and lobbying with voluntary organizations and State to assist in way that grants in aid for construction and maintenance of Old-Age Home, Daycare Centers, Multi-service Citizens Center, out reach services, supply of disability related aids and appliances to the elderly people.
3. Establishing a help line to protect the elder abuse in all districts.

4. Lobby with the corporate sectors to allocate and focus the issues and upliftment of the elderly community the under CSR in the local area

5. Family should take the role of rehabilitation process from problems to problem free situations within the family. Family and members of the family should inherit inclusiveness in all aspects of family day to day routine.

6. Family should become a major paramount source of asylum for the elderly people.

7. Encourage Research and documentation on ageing phenomena in rural areas.

Conclusion

Creating the basic conditions, such as eliminating violence and discrimination and promoting material conditions that facilitate a healthy and successful community and family life for elderly people becomes a profound challenge to the present developing nations. Creating an enabling environment for elderly within family also becomes a difficult situation due the changes in the economy of the country. Problems and prospects arising from social change due to migration, urbanization, modernization, technological development and environmental pressures of space are seen as the impact of occurrence of elder abuse and neglect in India. They are forced out of the family and family members to seek asylum in old age homes. Many still reside inside the family itself and go through the process of burden and deprived life later life.

These challenges create the vulnerability for victimization. Victimization prevails virtually. Victimization is a social problem.

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A STUDY ON ALCOHOLISM AMONG ADOLESCENCE IN TAMIL NADU – A SOCIOLOGICAL PERSPECTIVE

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Abstract

 Alcoholism is due to many interconnected factors, including genetics, social environment, and emotional health. People who have a family history of alcoholism or who associate closely with heavy drinkers are more likely to develop drinking problems. Finally, those who suffer from a mental health problem such as anxiety, depression, or bipolar disorder are also particularly at risk, because alcohol may be used to self-medicate. Since drinking is so common in many cultures and the effects vary so widely from person to person, it's not always easy to figure out where the line is between social drinking and problem drinking. The bottom line is how alcohol affects youth.
Keywords: *Alcoholism, Mental Disorder, Drinking*

Introduction

Alcoholism today has emerged as a major problem in cities across the country. More and more people, specially students and youth, during the past five years or so are being addicte4d to alcohol for various reasons. There are startling reports that alcohol consumption among teenagers in metros is increasing at a rapid pace with 45% of youths drinking excessively, five or six times a month. The reasons included peer pressure, plenty of pocket money, easy access to alcohol and low parental supervision. Alcohol use and heavy drinking are common during adolescence and young adulthood, although the minimum legal drinking age across the United States is 21 years. Some individuals may start hazardous alcohol consumption earlier in childhood. The prevalence of problematic alcohol use continues to escalate into the late adolescent and young-adult age range of 18 to 20 years. Drinking by college-aged students remains a major issue.

Use of alcohol at an early age is associated with future alcohol-related problems. The contribution of age at alcohol use initiation to the odds of lifetime dependence and abuse varied little across gender and racial subgroups in the study. Early alcohol initiation has been associated with greater sexual risk-taking (unprotected sexual intercourse, multiple partners, being drunk or high during sexual intercourse, and pregnancy);

academic problems; other substance use; and delinquent behavior in mid-to later adolescence. By young adulthood, early alcohol use is associated with employment problems, other substance abuse, and criminal and violent behavior. Independent of genetic risk, exposure to alcohol or other drug use disorders of parents predicts substance use disorders in children.

Defining "Young People"

There is currently no consensus regarding the age threshold at which an individual ceases to be a "young person" and becomes an adult. A World Health Organization (WHO) Study Group has defined a young person as someone between the ages of 10 and 24 years. For the purposes of alcohol consumption, a number of countries have a legally mandated threshold around drinking, which may or may not coincide with the age of majority for other activities. In developing policy and prevention approaches, it is important to differentiate between young people who are above the legal drinking age and those who are below it. The legal implications of drinking are different for the two groups, as well as for those who sell and serve them alcohol.

Social Considerations

Internationally, experiences with alcohol are relatively common among young people. Drinking

before adulthood, however, is generally discouraged in most countries, although young people may be introduced to alcohol at an earlier age in some societies, typically within the family and in the context of meals or celebrations. Such an integrative and relatively permissive approach to drinking is commonly found in cultures with a "Mediterranean" drinking style.

In general, studies have shown that young males are more likely to drink and do so in higher quantities than young females. However, recent data suggest that in some countries the gender gap among young people is narrowing, with girls and young women "catching up" with their male peers. These findings include not only the quantity of alcohol consumption but also frequency and drinking patterns.

Health Considerations

Several areas have been identified where risk for harm may be increased for young people. In comparison to adults, youths have a greater sensitivity to the effects of alcohol due to developmental changes that occur during childhood and adolescence, potentially resulting in greater risk of physiological damage. The developing brain appears to be more sensitive to disruption by chronic drinking than the mature adult brain. As a result, heavy consumption during adolescence may affect the development of certain brain regions including the hippocampus, involved in learning and memory. In addition, animal and human studies suggest that early heavy alcohol consumption may have a number of deleterious effects on bone metabolism and endocrine development. In addition, alcohol misuse and harmful drinking patterns among young people are correlated with injuries, for example as a result of acute intoxication, traffic crashers, or assault. Alcohol-impaired driving among youths accounts for a large proportion of those hurt or killed in road traffic crashes. For some young people, risky sexual behavior may accompany heavy drinking or intoxication and can result in unwanted pregnancy, sexually transmitted infections, and sexual assault and date rape. Heavy and harmful drinking patterns by young people have been correlated with negative health outcomes in adulthood, including alcohol dependence and problem drinking.

Another area for concern is prenatal exposure to high levels of alcohol due to maternal drinking patterns. Such exposure has been associated with a range of developmental problems in children and adolescents that may persist into adulthood. These include fetal alcohol syndrome (FAS) and other conditions. A number of risk factors for alcohol misuse among young people have been identified. Genetic predisposition may play a role in the development of alcohol dependence and in relative insensitivity to the effects of alcohol. Alcohol problems in some youths may be related to heavy maternal drinking during pregnancy. Various other stressors and environmental factors, such as living with a parent who is an alcohol abuse or heavy drinking within the immediate peer group may also contribute to alcohol problems in young people. However, youths are generally responsive to treatment and intervention, and targeted approaches have been developed to specifically meet their needs.

Implications for Policy and Prevention

A variety of measures have been implemented around the world to limit drinking among young people. Yet how best to reduce risks among this population remains, at best, uncertain. No single strategy has been shown to be successful in all settings, and combined initiatives targeting particular behaviors or aspects of drinking may be a more useful approach.

Prevention and intervention measures range from limiting young people's access to alcohol (e.g., through drinking age laws) to education them about drinking patterns, outcomes, and coping skills. Approaches also differ with regard to the desired end goal from, in some cases, complete abstinence to encouraging responsible consumption and minimizing risk. Both approaches have strengths and weaknesses, but recent years have seen a gradual shift in alcohol policy from measures that address entire populations to those that target specific drinking behaviours and minimize harm for groups at risk.

Minimum Age Limits

Many countries where alcohol consumption is legal mandate a threshold age at which buying or drinking alcohol becomes permitted. There is no universal agreement, however, on the exact age when alcohol consumption is considered appropriate. Legislation tends to reflect the prevailing cultural attitudes toward alcohol and drinking by young people. As a policy measure, the implementation of a minimum drinking age is effective only if it is enforced.

Alcohol Education

A variety of factors such as family, peers, cultural and religious norms, media, and government policies may contribute to young people's first experience with alcohol and to the development of subsequent drinking patterns. While all of these factors may play a role, evidence suggests that the strongest influence is that of parents and peers.

There is evidence that alcohol education can raise awareness among young people and in some cases change their behaviour around drinking; Several approaches have shown particular promise. The social norms approach relies on changing perceptions among young people about how much their peers actually drink. Integrative education that also includes family and the community has been found to be particularly effective. There is also evidence that life skills training, when incorporated into a general approach to teaching about health and lifestyle issues, can be useful in changing behaviour.

Marketing and Advertising

The relationship between beverage alcohol marketing and young people's drinking is the focus of considerable attention in research, prevention, and policy. While there is strong evidence that advertising and marketing are effective in changing brand choices, reviews of the evidence indicate that there is little to no effect on young people's drinking behaviour. Most producers of beverage alcohol and related organizations, such as trade associations, have strict rules of conduct around marketing. Internal company guidelines and industry wide codes exist in which special attention is paid to young people and safeguards around them.

Most young people have some experience with alcohol before reaching adulthood and before they are legally allowed to drink. The cultural acceptability of drinking plays a role in setting legally mandated drinking ages in different countries. It also influences attitudes around drinking and how young people are introduced to alcohol. There is an imperative to ensure that the laws in a given country are observed and that young people are kept out of harm's way. Among young people who drink, those who misuse alcohol face considerable risks for health, injury, and social problems. Developmental changes during childhood and adolescence may make young people more susceptible to harm particularly neurological harm from alcohol misuse. Dangerous patterns of drinking and risk taking behaviour place many young people at heightened risk, including from drinking and driving.

A variety of legal, economic, and social measures aimed at preventing underage drinking and at reducing risks are undertaken around the globe. Family, peers, media, government regulation, and culture blend together in creating the environment in which the young begin drinking. Much progress has been made in understanding the mechanisms shaping young people's consumption. Much more, however, remains to be learned in order to enhance the effectiveness of prevention and intervention programs for this group.

Conclusion

Youth who saw more alcohol advertisements on average drank more (each additional advertisement seen increased the number of drinks consumed by 1%. Youth in markets with greater alcohol advertising expenditures drank more (each additional dollar spent per capita raised the number of drinks consumed by 3%. Examining only youth younger than the legal drinking age of 21 years, alcohol advertisement exposure and expenditures still related to drinking. Youth in markets with more alcohol advertisements showed increases in drinking levels into their late 20s, but drinking plateaued in the early 20s for youth in

markets with fewer advertisements. Control variables included age, ethnicity, high school or college enrollment, and alcohol sales. Alcohol advertising contributes to increased drinking among youth.

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HEALING THE POOR OR THE RICH- HEALTH CARE IN INDIA

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"Health cannot be a question of income; it is a fundamental human right."

Nelson Mandela

Abstract

Health care for all a dream or a possible reality!. With the tremendous growth of population, are we really meeting the health needs of each and every person? Majority of the world even in the 21st century are craving for good food and good health. The world health organization is battling to reach its goal Health for all through public health .In such a mysterious world of diseases are the poor really able to tackle with their health issues ,are they able to withstand the financial burden or are they just self medicating themselves. Health care in India is the responsibility of the center, state and local bodies along with private sectors. This paper deals with the critical analyses of the healthcare system in India present reforms and its drawbacks .Is the health care system favoring the rich and neglecting the middle and the poor class. What can be done to improve the health care system in our country?

Introduction

India ranks 154 out of 195 countries in health care (according to the health care access and quality index 2015). Health care is nothing but the organized provision of medical care to the individuals or community given by healthcare professionals. According to the WHO **"A health system consists of all organizations, people and action whose primary intend is to promote, restore or maintain health".** Public health deals with group of people rather than individuals. In India health care is provided both by the government and by the private bodies. It is estimated that almost 70% of the urban households and 63% of the rural area are seeking health care facilities from the private sector in our country (according to the National family health survey). People in India spend a lump sum of money for health care. It is been estimated that out of pocket spending for health care is highest in India when compared to other countries. Health care in India is today being completely dominated by the private sector where quality of health care depends on the socio economic status of the individual.

Back Ground of the Studies

Most of the people in India prefer health care from the private hospitals and clinics rather than the public healthcare providers. Public health care in India is provided at three levels that is the centre, state and district level. Health care under the centre government is the responsibility of the union ministry of health and family welfare. The directorate general of health services has three units

- Medical care and hospital
- Public health
- General administration

The central council of health and family welfare are responsible for policy making, guiding, assisting, evaluating and coordinating the work of state health ministries. At the state level the health management sector is again the responsibility of

The State Ministry of Health

Directorate of health and family welfare services. The health ministry in the centre and the state are mainly involved in policy making, monitoring and enforcement of the policies. At district level health care can be divided into two:

1. Rural
   - Community development blocks
   - Villages
   - Panchayats
2. Urban
   - Corporation
   - Municipal boards
   - Town area committees.

Health care in India can be broadly classified into the following types:

1. Health care provided by the government sector.
2. Health care provided by the private sector.

Health care is one of the largest growing sectors in our country in terms of revenue and employment. Health care comprises hospitals, medical devices, clinical trials, outsourcing, telemedicine, medical tourism, health insurance and medical equipment. Almost 70% of the health care is offered by the private health care providers in our country.

Public Health Care Providers

Health care is free for all its citizens under the constitution of India. Each and every district head quarters in the states have one or more government hospitals where diagnoses, medicines and treatment are free of all.

Health care significantly varies from state to state in India. The state government is responsible for health care. Factors which influences the quality of health care in government hospitals are

- The population
- The number of government hospitals
- The level of education
- The number of healthcare providers in the state
- The schemes and policies by the center and the state government
- Funds allotted.

Quality of treatment provided by the health professionals and para medics. Lack of supply of latest medicines and treatment aids

The major drawbacks in the government hospitals in India are shortage of health care professionals and man power, medicines and basic amenities when compared to the number of patients. The main reason for preference of private

hospital is the quality of treatment provided by them over government hospitals. Surgeries are delayed due to the non availability of beds and lack of necessary manpower. The grave environmental conditions in the hospitals can itself be the reason for most of the diseases. Most of the government policies are promoting profit oriented and unregulated private health care providers.

Health Care Provided by the Private Hospitals

Private health care sector is the latest trend on the Indian economy .Private health care providers are more corporate oriented now a days where most of the private hospitals provide health care to gain high profits burdening the people. Most of the patient in order to get quality and timely treatment opt for private hospitals spending huge amount from their pockets. The unregulated fee structure of medical practitioners is increasing day by day which is pushing most of the people towards poverty. In the name of providing quality treatment most of the hospitals are misusing lot of medicines for example steroids for instant relief of pain. Due to the high expenditure for quality medicines and to avoid professional charges most of the general population in our country are opting for self medication which is misleading in the diagnosis of most of the diseases and increasing the drug resistance. In such annoying state only the rich and the affordable can think of proper quality treatment in the private hospitals.

Most of the private hospitals in India are adopting the corporate strategies and they are trying to engulf the health professionals by paying them more to increase their profit in this way most of the health professional do not wish to practice in rural areas. In India the major drawback is that the health care professionals are opting urban areas or moving abroad, the rural areas deprived of doctors and quality healthcare.

Health Policy

Health policy can be defined as the decision, plan, and actions that are undertaken to achieve specific healthcare goals within the society. Indian government has taken a lot of initiatives in implementing policies for health care in our country.

The government India has given high priority for reforms in the health care system. The aim is to assure health for all Indians and reduce the out of pocket spending on healthcare, with the help of state governments and along with few key factors like sanitation, drinking water and reduction in the incidence of water borne diseases in the country.

Health Care Initiatives Taken by the Government and their Impact

The health care reforms undertaken by the present government are:

1. Ending open defecation
2. New health policy
3. Swachh Bharat Mission.
4. E-health
5. Manufacture of medical equipments.
6. Sale of generic medicines at nominal rates through specific outlets.

Most of the government initiated programs have not met the desired results like the Swachh Bharat Mission, the mission is a sanitation program initiated by the government of India in the year 2014 this program aims at making India open –defecation free by the year 2019 and after almost four years of its initiation the survey conducted by the National Sample Survey Organization(NSSO) on the program has put a big question mark .According to the survey even after say two years the rate of open defecation has not come down, it finds that over half the population that is 55.4% still practice open defecation, at this rate will it be able to achieve its goals by 2019 or will it be a far dream.

New health policy by the government 2017 in brief aims in raising the public health care expenditure from 1.4% to 2.5% with more of its resources going to the primary health care centers. It is a comprehensive package which will include care for non communicable diseases, geriatric healthcare, mental health, palliative care and rehabilitation care. Target of the policy is to ensure that 2 beds per 1000 population and increases life expectancy from 67.5 to 70 years by 2025.Will this target be attainable by 2025 where there is no clear path between the private and public sectors.

E-health aims at use of the information and communication technology in the health sector.

How far are these policies benefiting the poor, are they really benefited from them or are these policies just getting lapsed with the passing of the time and benefiting the private sectors even more?

Measures to Improve the Health Care in Our Country

1. The government must implement strict laws to regulate the charges for each and every treatment by the private sector.
2. More health workers and the health care facilitators in the rural areas must be appointed and monitored on a regular basis.
3. The government rather than building toilets for the poor must encourage people to bring in behavioral change by educating them and telling them the importance of health and the spread of diseases with improper sanitation. The government should encourage people to build their own toilets.
4. The license provided to the private hospital must follow strict procedures looking for the quality of the treatment, facilities available and affordable to the general public.
5. Policies must be monitored so that there is a check that the rightful persons are benefited from these policies.
6. Medical students must be posted for a period of at least six months in the rural areas.
7. National level insurance health policy must reach the poor and part of the medical expenses must be funded by the government.

Conclusion

Health care in our country should be given more priority and there must be laws to regulate the private sectors. Quality treatment must be provided to all irrespective of class, caste, religion and region. Rural employment of medical professional must be increases. National health insurance policies must reach the middle and the poor class. Generalization of treatment charges for all the basic treatment must be considered. Physical, social and mental health of a community will lead to prosperity of its people and the country.

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IMPACT OF MEDIA ON CHILDREN AND YOUTH

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The influence of the media on the psychosocial development of children is profound. Thus, it is important for physicians to discuss with parents their child's exposure to media and to provide guidance on age-appropriate use of all media, including television, radio, music, video games and the Internet.

The objectives of this statement are to explore the beneficial and harmful effects of media on children's mental and physical health, and to identify how physicians can counsel patients and their families and promote the healthy use of the media in their communities.

Television has the potential to generate both positive and negative effects, and many studies have looked at the impact of television on society, particularly on children and adolescents. An individual child's developmental level is a critical factor in determining whether the medium will have positive or negative effects. Not all television programs are bad, but data showing the negative effects of exposure to violence, inappropriate sexuality and offensive language are convincing. Still, physicians need to advocate continued research into the negative and positive effects of media on children and adolescents.

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continued research into the negative and positive effects of media on children and adolescents.

Current literature suggests the following:

- Physicians can change and improve children's television viewing habits.
- Children watch excessive amounts of television.
- There is a relationship between watching violent television programming and an increase in violent behaviour by children.
- Excessive television watching contributes to the increased incidence of childhood obesity.
- Excessive television watching may have a deleterious effect on learning and academic performance.
- Watching certain programs may encourage irresponsible sexual behaviour.
- Television is an effective way of advertising products to children of various ages.

The average child watches nearly 14 hours of television each week. By his/her high school graduation, the average teen will have spent more time watching television than in the classroom. Studies show how time spent watching television varies between different age groups and cultures. This is especially relevant when studying the effects of excessive television exposure on disadvantaged populations.

The amount of time that younger children currently spend watching television has not decreased significantly. A substantial number of children begin watching television at an earlier age and in greater amounts than what experts recommend. Evidence suggests that television's influence on children and adolescents is related to how much time they spend watching television. As a result, with prolonged viewing, the world shown on television becomes the real world.

Television viewing frequently limits children's time for vital activities such as playing, reading, learning to talk, spending time with peers and family, storytelling, participating in regular exercise, and developing other necessary physical, mental and social skills. In addition to the amount of time spent in front of the television, other factors that influence the medium's effect on children include the child's developmental level, individual susceptibility and whether children watch television alone or with their parents.

Violence

The amount of violence on television is on the rise. The average child sees 12,000 violent acts on television annually, including many depictions of murder and rape. More than 1000 studies confirm that exposure to heavy doses of television violence increases aggressive behaviour, particularly in boys. Other studies link television or newspaper publicity of suicides to an increased suicide risk.

The following groups of children may be more vulnerable to violence on television:
- children from minority and immigrant groups;
- emotionally disturbed children;
- children with learning disabilities;
- children who are abused by their parents; and
- children in families in distress.

Physicians who see a child with a history of aggressive behaviour should inquire about the child's exposure to violence portrayed on television.

Nutrition

Because television takes time away from play and exercise activities, children who watch a lot of television are less physically fit and more likely to eat high fat and high energy snack foods. Television viewing makes a substantial contribution to obesity because prime time commercials promote unhealthy dietary practices. The fat content of advertised products exceeds the current average diet and nutritional recommendations, and most food advertising is for high calorie foods such as fast foods, candy and pre-sweetened cereals. Commercials for healthy food make up only 4% of the food advertisements shown during children's viewing time. The number of hours of television viewing also corresponds with an increased relative risk of higher cholesterol levels in children. Television can also contribute to eating disorders in teenage girls, who may emulate the thin role models seen on television. Eating meals while watching television should be discouraged because it may lead to less meaningful communication and, arguably, poorer eating habits.

Advertising

Advertising can have positive effects on children's behaviour. For example, some alcohol manufacturers spend 10% of their budget on advertisements warning about the dangers of drinking and driving. In addition, although some health care professionals disagree about the health benefits of appropriate milk use, milk consumption has increased as a result of print and broadcast advertisements.

The developmental stage of a child plays a role in the effect of commercials. Young children do not understand the concept of a sales pitch. They tend to believe what they are told and may even assume that they are deprived if they do not have advertised products. Most preschool children do not understand the difference between a program designed to entertain and a commercial designed to sell. A number of studies have documented that children under the age of eight years are developmentally unable to understand the difference between advertising and regular programming.

The average child sees more than 20,000 commercials each year. More than 60% of commercials promote sugared cereals, candy, fatty foods and toys. Cartoon programs based on toy products are especially attractive. Advertisements targeting adolescents are profoundly influential, particularly on cigarette use.

Education and parental involvement

High school programs promoting media awareness have been shown to be beneficial. They give students more understanding of how the media may affect them socially. Parents may use ratings but they must be used with caution. Currently, there is no consensus as to which rating system works best. Parental involvement in

determining desirable programming is the best choice. Parents have to monitor and control their children's viewing habits.

Studies show that parents play an important role in their children's social learning, but if a parent's views are not discussed explicitly with children, the medium may teach and influence by default. Other media, such as magazines, radio, video games and the Internet, also have the potential to influence children's eating habits, exercise habits, buying habits and mental health. If children are allowed to be exposed to these media without adult supervision, they may have the same deleterious effects as television.

Internet

Parents may feel outsmarted or overwhelmed by their children's computer and Internet abilities, or they may not appreciate that the 'new medium' is an essential component of the new literacy, something in which their children need to be fluent. These feelings of inadequacy or confusion should not prevent them from discovering the Internet's benefits. The dangers inherent in this relatively uncontrolled 'wired' world are many and varied, but often hidden. These dangers must be unmasked and a wise parent will learn how to protect their children by immersing themselves in the medium and taking advice from the many resources aimed at protecting children while allowing them to reap the rich benefits in a safe environment. The physician is in a good position to encourage parents and children to discover the Internet and to use it wisely.

The Internet has a significant potential for providing children and youth with access to educational information, and can be compared with a huge home library. However, the lack of editorial standards limits the Internet's credibility as a source of information. There are other concerns as well.

Conclusion

The amount of time spent watching television and sitting in front of computers can affect a child's postural development. Excessive amounts of time at a computer can contribute to obesity,

undeveloped social skills and a form of addictive behaviour. Although rare, some children with seizure disorders are more prone to attacks brought on by a flickering television or computer screen. No data suggest that television viewing causes weakness of the eyes. It may be different when a child is closely exposed to a computer screen for long periods, although there are no definitive references to support this.

Other concerns include pedophiles that use the Internet to lure young people into relationships. There is also the potential for children to be exposed to pornographic material. Parents can use technology that blocks access to pornography and sex talk on the Internet, but must be aware that this technology does not replace their supervision or guidance.

There is a wealth of information on coping with the vast resources of the Web, both good and bad. Above all, parents should be encouraged to appreciate that there is potential for more good than bad, as long as one has the knowledge to tell the difference. Canadian youth claim the Internet as a defining part of their culture and an integral part of their daily lives. Physicians and parents alike must be armed and ready to face that challenge and ensure that they reap the potential benefits as safely as possible.

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IMPACTS OF MEDIA ON SOCIETY: A SOCIOLOGICAL PERSPECTIVE

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Abstract

Man is a social animal he cannot live in isolation so his actions effect not only him but society affects a man in a so many ways. This paper gives a brief definition of media is and what are the effects of media society. During the course of this literature various types of impacts of media on the individuals, his family & society are highlighted.

Keywords: Society, Media, Impacts of Media, Theories of Media, Communications theories etc

Introduction

Human beings express their nature by creating and recreating an organization which guides and controls their behaviour in many ways. This organization liberates and limits the activities of men, sets up standards for them to follow and maintain. Whatever the imperfections and tyrannies it has exhibited in human history, it is necessary condition of fulfilment of life. This organization which is responsible for fulfilment of life of every individual is called society. Man in every society has suffered from one or the other problems. Men in modern societies are also experiencing various problems and his behaviour gets affected by many things, media is one of them. Media is the plural of the word medium. Media are the vehicles or channels which are used to convey information, entertainment, news, education, or promotional messages are disseminated. Media includes every broadcasting and narrowcasting medium such as television, face book, whats app, Instagram, newspapers, billboards, mails, telephone, fax, internet etc. (the main means of mass communication).

The effects of question is typically raised with an urgency deriving from a public rather than an academic agenda and with a simplicity which is inappropriate to the complexity of the issue (we do not ask of other social influences, what is the effect of parents on children or do schools have an effect which generalizes to the home or do friends have positive or negative effects). The possibility of media effects is often seen to challenge individual respect and autonomy, as if a pro-effects view presumes the public to be a gullible mass, cultural dopes, vulnerable to an ideological hypodermic needle, and as if television was being proposed as the sole cause of a range of social behaviours.

Functions of Media

Mass media & social media is a tremendous source of information for individuals as well as society. We know a bit about the role of mass media & social media in a democracy. Let us now see how the media perform their functions to bring about changes.

Mass Media can Help in Change

Using mass media, people's attitudes and habits can be changed. For example all of us have mistaken or wrong notions about various diseases like leprosy or HIV/AIDS. Many of us think that by touching people suffering from these diseases we would be infected. You might have heard on radio or watch television programmes or read messages which tell us that by touching an HIV/AIDS patient we do not get infected. Similarly, for eradicating polio there are special programmes and messages disseminated through the media. They inform people about the need for giving polio drops to children and about the day that is declared a polio day. Special arrangements are made to give polio drops to as many children

as possible on polio day. Change would also mean things for the better. The concept of development of a country is again a matter of change, when old practices and equipment are changed and new, better and more efficient means are being used. Mass media play an important role in communicating this change. By giving the necessary information, and sometimes skills, the media can help bring about this change. You may ask how media can impart skills. Mass media like television can demonstrate and show how things work. You would have seen on television how a certain dish is cooked using modern kitchen equipment.

- Mass media have made the World Smaller and Closer
- Mass Media Promotes Distribution of Goods
- Entertainment and informative.
- Media provide news and information required by the people.
- Media can educate the public.
- Media helps a democracy function effectively. They inform the public about government policies and programmes and how these programmes can be useful to them.
- Media can entertain people. Media can act as an agent of change in development.
- Media promote trade and industry through advertisements.
- Media can help the political and democratic processes of a country.
- Media can bring in positive social changes.

Social Impacts of Media

The mass media occupy a high proportion of our leisure time: people spend, on average, 25 hours per week watching television, and they also find time for cinema, magazines face book, whats app, Instagram and newspapers. For children, watching television takes up a similar amount of time to that spent at school or with family and friends. While school, home and friends are all acknowledged as major socializing influences on children, a huge debate surrounds the possible effects of the mass media and findings both in favour and against effects are controversial. The question of effects is typically raised with an urgency deriving from a public rather than an academic agenda and with a simplicity which is inappropriate to the complexity of the issue. The possibility of media effects is often seen to challenge individual respect and autonomy, as if a pro-effects view presumes the public to be a gullible mass, cultural dopes, vulnerable to an ideological hypodermic needle, and as if television was being proposed as the sole cause of a range of social behaviours. Such a stereotyped view of research tends to pose an equally stereotyped alternative view of creative and informed viewers making rational choices about what to see. Overview articles often describe a history of progress over the past seventy years of research which alternates between these two extremes first we believed in powerful effects, then came the argument for null effects, then the return to strong effects etc.

Media Effects: A Matter of Change or Reinforcement?

The media effects, we mean that exposure to the media changes people's behaviour or beliefs, then the first task is to see whether significant correlations exist between levels of exposure and variations in behaviour or beliefs. 'Change' theories on which this chapter will focus generally presume that the more we watch, the greater the effect. Most research does show such a correlation (Signorelli & Morgan, 1990), albeit a small and not always consistent one. The next question concerns the direction of causality. For example, having shown that those who watch more violent television tend to be more aggressive (Huesmann, 1982), researchers must ask whether more aggressive people choose to watch violent programmes (i.e. selective exposure), whether violent programmes make viewers aggressive (i.e. media effects), or whether certain social circumstances both make people more aggressive and lead them to watch more violent television (i.e. a common third cause). To resolve this issue, the effects tradition has generally adopted an experimental approach, arguing that only in controlled experiments can people be randomly assigned to experimental and control conditions, thereby controlling for any other variables in the situation. Only then can causal inferences be drawn concerning any observed correlation between the experimental manipulation (generally media exposure) and resultant behaviour. However, it does not necessarily follow that there are no effects of viewing such programmes or that motivated viewers can successfully undermine any possible effects. Similarly, it is extremely difficult to test the argument that the media, in combination with other social forces, bring about

gradual social changes over the long term, as part of the social construction of reality.

Sociological Theories of Communication

The sociological approach to communication theory is based on assumption that there exists a definite relationship between mass communication and social change. Some of the relevant theories which are going to be discussed here are:

- The cultivation theory
- Social Learning Theory
- Agenda Setting Theory
- Play Theory
- Uses and Gratification Theory

Media Effects

One of the more controversial areas of study of the media is what effect the media have on us. This is particularly timely as eyes are on Hollywood and the violent and sexy movies it makes.

- Does all the sex in the media, particularly the movies and television, have anything to do with the sexual mores of society?
- How about violence in the media?
- Does it have a relationship with the increase in violence in our society?
- Violent crimes in this country were on the rise.
- We were at war.
- A president (John Kennedy) was assassinated.
- A presidential candidate (Bobby Kennedy) was assassinated.
- A civil right leader (Martin Luther King) was assassinated.
- There was an attempt on the life of the Pope.

There had to be a cause. Why the sudden increase? To some, the media especially television seemed a good candidate. After all, in the 1960s we had the first American generation raised on television. And if you looked at the fare on television, you saw all kinds of cop shoot-em-up shows. Movies, threatened with extinction thanks to television, had responded by including more violence and sex.

Some of the Media Used by Adults

- Hike
- Facebook
- YouTube
- Instagram
- Whats app
- Television
- Movies
- Twitter

Consumption of Social Media

- 93% of teens are active users of the internet (60-70% daily)
- 75% of teens own a mobile phone.
- Teens average over 3000 texts per month (100/day).
- Text messaging has increased most dramatically, along with media multi-tasking.
- In February 2017 whats app crossed 200 million multi users in India.
- 76% of teens use twitter via mobile phones.
- The percentage of Internet users, ages 12-17, who do the following online?
- 89% send or read e-mail (Chat).
- 84% go to websites about movies, TV shows, music groups, or sports.
- 81% play online games.
- 76% go online to get news or information about current events.
- 75% send or receive instant messages.
- 57% go online to get information about college.
- 43% buy online merchandise.
- 22% look for information about a health topic that's hard to talk about.

Conclusion

In this paper we have discussed various positive and negative impacts that today media has on society. We find that major chunk of youth is using social media networks more than 5 hours a day resulting in decreasing their general health in general and mental health in particular. We also found that media is playing both constructive as well as destructive roles on one hand it has lots of advantages but on the other hand it has lots of disadvantages and at the end it's up to the individual and society to decide which ones to use.

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PATRIARCHAL SOCIALIZATION AND THE PLIGHT OF INDIAN WOMEN

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Introduction:

India is a multifaceted society where no generalization could apply to the entire nation's various regional, religious, social, and economic groups. Convention on the Elimination of all forms of Discrimination against Women (CEDAW) acknowledges that discrimination against women violates the principles of equality of rights and respect for human dignity and is an obstacle to the participation of women, on equal terms with men, in the political, social, economic and cultural fronts of their countries. The part played by women in the process of economic development is quite different from that played by men all over the world. However in developing countries where traditional roles of women predominate, status of women plays an important role in the transformation of society. Globalization has indeed raised hopes of women for a better and elevated status arising out of increased chances to work but, at the same time, it has put them in a highly contradictory situation where they have the label of economically independent paid workers but are not able to enjoy their economic liberty in real sense of the term. Though they are considered to be equal partners in progress, yet they remain subjected to repression, marginalisation and exploitation.Women are expected to be obliging and especially modest in all actions that may constrain their ability to perform, on an equal basis with men. In spite of modernization and better education, this cultural conditioning has undergone very little change. This paper analyses the impact of socialisation upon the status of women in India.

Patriarchal Social Structure

Patriarchy determines the status of women in Indian context. It manifests itself in social, religious, legal, political and economic organisation of society. It continues to strongly influence Indian society, despite the Constitution's attempt to bring about an egalitarian social order. The family is the true bedrock of patriarchy, an institution that has been nurtured and upheld through centuries. Between the external macro world and the atom of the society, namely the family, there is a symbiotic relationship, each supporting the other and consequently strengthening patriarchy. Patriarchy is thus seen to be constituted and reconstituted, structured and restructured time and again throughout the history.Its vicious hold has always prevailed over society. Family is the agency through which patriarchy evolves its very elaborate and complex dynamics because it is the vital institution where the values of the society are initiated. The social system of patriarchy, with males as the primary authority figures, is central to the organisation of much of Indian society. The system upholds the institutions of male rule and privilege and mandates female subordination.

Faulty Socialisation at the Family Level

In India, as soon as a child is born, families and society begin the process of gendering. The birth of a daughter is not celebrated as that of a son. Boys are encouraged to be tough and outgoing and girls to be homebound and shy. In India, families do not socialise people into normative roles of man/woman, rather into gender specific roles. The terms of relationships in a family are taken for granted and the rigidly defined gender roles assigned within a family are hardly refuted. Thus, families become repositories of exercising the functions of society and sustaining the power relations endorsed by it. The toys that girls are given, the way girls are

encouraged to dress up and be like their mothers, the way they are told to be docile and submissive are all part of this socialisation. Hence differentiation of gender also becomes differentiation of power and the principle of stratification and hierarchy in our society continues.

Violence and Violation of Rights within the Family

Violence and violation of rights may start from birth. But for Indian women, it starts even before birth. Economic conditions and cultural ethos have forged an invisible combination that threatens even the women embryo in the name of female foeticide. In India, violence within the home is universal across culture, religion, class and ethnicity. The abuse is generally condoned by social custom and considered a part and parcel of marital life. The unequal status of women in the society make them caught in a vicious circle of economic dependence, fear for their children's lives as well as their own, ignorance of their legal rights, lack of confidence in themselves and social pressures. These factors effectively force women to a life of recurrent mistreatment from which they often do not have the means to escape. The sanctity of privacy within the family also makes authorities reluctant to intervene, often leading women to deny that they are being abused. This is equally common in the higher as well as in the lower segments of the society. A woman who lodges a complaint of abuse is often forced to withdraw the complaint or drop the charges not only by her family and society but also by the authorities. Social prejudices reinforce domestic violence against women.

Husbands assume that this subordinate role gives them right to abuse their wives in order to keep them in their place. The family socialises its members to accept hierarchical relations expressed in unequal division of labour between the sexes and power over the allocation of resources. Violence against women is partly a result of gender relations that assumes men to be superior to women. Given the subordinate status of women, much of gender violence is considered normal and enjoys social sanction. Vulnerability of women is promoted by patriarchy and breeds violence against women. Education has failed miserably in changing the patriarchal minds towards treating women.

Gender based Division of Labour

In a country like India, productive employment is central to poverty reduction strategy and to bring about economic equality in the society. But the results of unfettered operation of market forces are not always equitable, especially in India, where some groups are likely to be subjected to disadvantage as a result of globalization. Women constitute one such vulnerable group. Poor women workers face constraints and oppression in their occupation, barriers of caste, class, gender which further marginalise their position both at home and workplace. Division of labour which is gender based is structurally and functionally supported, is enforced through socialization and culturally sanctioned. The historical gender based division of labour resulted in women being excluded for several decades from the most prestigious positions in the labour market. Reproductive work, or the domestic sphere and familial responsibilities were squarely the domain of the woman, while the productive work was delegated to the man. However the workplace shifted from home to factory and men migrated to find work. These changes created new and greater pressures on women. The changing social system is a universal factor which also brings change in the status of its members. An emergent phenomenon is the growing flexibility and changes in the gender roles of men and women. But, typically, the orthodox mindset in the Indian society makes it difficult for a working woman to balance her domestic environment with the professional life. Most of the problems that beset working women are rooted in the social perspective that men are the bread winners and women are seen as the housekeepers and child bearers. This typecast role model continues to put obstacles for the working women.

Women and Religion

Religion promotes the subordination of women. The origin of the Indian idea of appropriate female behaviour can be traced to the

rules laid down by Manu in 200 B.C.: "by a young girl, by a young woman, or even by an aged one, nothing must be done independently, even in her own house. In childhood a female must be subject to her father, in youth to her husband, when her lord is dead to her sons; a woman must never be independent". Women's lives are shaped by customs that are centuries old. 'May you be the mother of a hundred sons' is a common Hindu wedding blessing. Religions invariably preach separate and specific values for women.

Role of Politics

Though Indian government is promoting liberty, equality and justice as a constitution provision for women, reality poses many difficulties to achieve that. Though judiciary guarantees legal privileges, practical difficulties in accessing justice remain tough for most of the women in India. The representation of women in the Indian politics is a typical example of the Indian political scenario. In Tamilnadu, it is very common to see the upper hand of fathers or husbands of women politicians, especially in local bodies, than the elected women representatives. On seeing this, young minds develop and believe a strong notion that there is nothing wrong in that kind of system.

Impact of Media

Media as an important agent of socialisation plays a greater role in moulding the norms, values and beliefs related to gender in society. Cinema as a popular medium has a greater impact on youth. There are so many examples for movies glorifying stalking as heroism. Movies insist that women do not have the right to say no to men. Many songs and dialogues promote and justify the violence against women.Youth believe that dominating a woman is heroic. Since mass media is a powerful medium to reach the rural and illiterate people, its role in educating the people is to be appreciated and the media network should be geared to the task of achieving gender equality

Gender Socialisation

Problem behind this domination and discrimination lies in the faulty socialization done by family, peer group, community and media. Primarily, the family socialises its members to accept hierarchical relations expressed in unequal division of labour between the sexes and power over the allocation of resources. Awareness of inequality and a conscious will to fight discrimination is a precondition for social change. Women should reassess themselves to be insightful of the disparity and oppression existing in our system. Gender socialization can make a difference.

Conclusion

In a society where women receive less health care than men, where overwork is burdened on women, where crimes against women are increasing, where the patriarchal traditions make the women powerless, where women are treated as secondary citizens, where women are treated as property and commodity, education only can empower them. The potential of education for social transformation is not explored fully. The patriarchal notions have become so strong so that it is very difficult even for themembers to change their attitudes though they realize the reality after knowing the socio economic indicators revealing the disparity and discrimination. Women issues should be a part of curriculum right from the school onwards. Academia, Religious leaders, Judiciary, state, Politicians, Social activists, Media Personnel should join hands in addressing the gender discrimination faced by women because problems of women are not women's problems but social problems.

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EXTENT OF POVERTY IN INDIA AND POSSIBLE SOLUTIONS

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Introduction: Situation of Poverty in India

Poverty is a significant issue in India. As per the revised population calculation methodology the world in 2014 had 872.3 million people living below poverty line and India which has 17.5 % of total world's population has 179.6 million people living below poverty line as per the poverty calculation methodology and purchasing power party basis for measuring poverty world wide and hence contains 20.6 % of the world's poorest people.

According to the statistics given by Azariah in 1983, of the 700 million Indians only 300 millions live barely on or above the poverty line, that is, on an income of just paise 50 per day per head. Another 300 millions live below this poverty line, unable to obtain even the barest minimum requirements for human survival. Only about 85 millions are fed, clothed and housed adequately. Another 15 millions enjoy all the luxuries of the consumer society. The result is that about 70 % of the population remain undernourished. Even though the situation has improved considerably over the years,, India still has a long way to go to bring down the level of poverty considerably.

Poverty and its Causes

The causes of massive poverty are manifold and complex. The basic cause is the unjust structure of the society which in fact refers to the inbuilt mechanism of exploitation of the masses that are poor, by the rich elite. In India the rich elite from both urban and rural, constitute 12 % of India's population. But they own about 60% of the country's urban and rural property and also consume around 1/3 of the total production. The rich nations, comprising ¼ of the world's population consume around 87.5 % of world's wealth produced in a year leaving 12.5 % to the remaining ¾ of the world. The rich nations sent out their first missionaries and tradesmen 300 years ago. The luxury items produced by the rich nations were dumped on the so-called Third World Countries, presently known as Developing Countries. The rich countries supply `aid' to these poor countries like India for developmental programmes. Such `aid' does not constitute even 1 % of their Gross National Product (GNP).

The root cause for the prevalent unjust structures of society in India is not only the economic system of production, consumption and distribution known as the capitalistic economic system but also the various unethical practices of the Indian society which attributes everything to religion. It sets the landlords against the landless, capitalists against the labourers, high caste against the low and the urban against the rural in the struggle for economic power. This process leaves nothing but trails of inequality and capitalism. The cost of poor man's labour especially those of outcastes and victimized women have become very cheap. They cry for a chance to live. The victims, depraved and deprived are neither aware of their basic rights nor their potential power.

Towards an Alternative: C.T. Kurien

The present economic order does not provide justice to the poor through the eradication of inequality. It only worsens the situation. Hence the need for an alternative C.T. Kurien himself gives the nature of this alternative. This alternative in his view must aim at eradicating the very roots of the problem which are the inherent evils in the structure of the present economy itself. Hence a radical restructuring of the economic system would be the remedial alternative that would bring justice to the poor. The alternative must be one in which the primary charge of the resources would be to meet the basic needs of the entire population.

This would mean that, the social process in the country be given a new direction. Hence it is necessary to break the many fetters of the past. This process resulting in a new economic order will be possible only if people realize that they themselves must make the major decisions affecting their lives (C.T.Kurien, Poverty, Planning and Social Transformation, p. 137).

An important role is thus given to the people at large, in the establishment of this new order. Creating anawareness, conscientizing the people, mobilising and organizing them are part and parcel of the process of social transformation (ibid., p. 140). With the help of the awareness created, the common mass in each locality will be able to spell out their needs. Only then the goods produced will be produced by the masses and consumed by the masses themselves (ibid., p. 143).

However, a transformation is possible only when those who do not have any stake in the existing order become aware of the need to change it and of their ability to achieve it. It is possible here to identify three groups who do not have any stake in the present system. The first one comprises of those who are totally dispossessed. The second are those who are dispossessed and got linked up with the system as passive participants in the primary units of the want based economy. The third group are those who are described as `retinues' of the want based economy or W Circuit i.e., the non-producing households. This third group can be first reduced to the role of passive participants and then to the role of the exploited (ibid., p. 138 – 9). These groups must come together and struggle collectively for the social transformation. Planning must be viewed as organized efforts representing a form of collective will (and its translation to social action) to change the present social order.

The collective planning at the local level would mean a form of decentralized planning giving recognition to the locational specificity of need. The same would imply that the operation of the need based economy or N Circuit is established while that of the want based economy or W Circuit and C Circuit consisting of middle men are restricted and curbed. This turning back brings into the picture a new circuit that links up with the N Circuit by destroying the C Circuit's hold on it and at the same time insulating it from the W Circuit's influence (ibid., p.145). This new circuit Kurien the Social Circuit or S Circuit. The main purpose of this circuit is "restoring the battered and impoverished N-Circuit., first to ensure that every member of the locality has the goods necessary for minimum living and that the human potential of the locality is productively utilized, and then to see that progressively more needs are recognized and met..." (ibid., p. 147).

At the initial stage this would be brought about by establishing small collective farms by offering land to a group of landless agricultural labourers who must own the land in common and cultivate jointly or by bringing together small farmers into groups of co-operative farming units where decision regarding production and the manner of utilization of the produce are determined by the group as a whole. The aim is to enlarge collective ownership and co-operative operation to the possible extent. In short, the strategy of the planning procedure here consists in isolating the N Circuit and the W Circuit by cutting out the C Circuit and by producing the N Circuit through the S Circuit (ibid., p. 149).

Gandhi's Views on Economic Liberation

When Gandhi returned to India, after his sojourn in South Africa, he toured all over the country. He was taken aback by the poverty of the masses---which he witnessed. Being a man-for others, he was quick to find a means to remedy the situation of economic injustice in the Indian society. The fact that the Indians had a glamour for the West ---its products, fashions and framework did not escape notice of Gandhi. The Western framework of the economic system was profit motivated. The main factors that determined the relation between the classes was competition and money. In fact, the value of the individual was measured in terms of the bank balance and so the real worth of a person was ignored. On the contrary, Gandhi was "convinced that the economic system or any system of man must emphasize the basic human value, namely spiritual or religious dimension in him". Against the background of spiritual orientation Gandhi's objection to the machine-centred economy of the West is meaningful.

This mechanized economy tends to concentrate wealth into the hands of a few. Also machinery adds only to unemployment and poverty. Thus due to this economy the rich become richer and the poor poorer. The mechanization only added to the exploitation of the many by a few". This is very much true in Indian context. Hence Gandhi was for India to be a country of villages. In this context, the economy system of India must be devised so as to help the villagers to produce more. To give more importance to villages, Gandhi stressed on the village-centered economic system, swadeshi movement, khadi programme and so on.

Gandhi held that not only a life of poverty, but also an ever-increasing standard of life was equally degrading and dehumanizing. For, "if one hankered after riches, one had to resort to exploitation by whatever name it might be called" (Harijan, 25.08.1740). Hence Gandhi suggested voluntary poverty on the part of the rich as a necessity to maintain social justice in a society. "The rich have superfluous store of things which they do not need...while millions are starved to death for want of sustenance....if only they keep their own property within moderate limits, the starving will be easily fed and will learn the lesson of contentment along with the rich" (Nirmal Kumar Bose, p. 76).

Gandhi selects a method by which the rich would distribute their wealth to the community by themselves. The only effective method for Gandhi was the non-violent method. If, on the contrary, violence was used, then society will become poorer since it will lose all the gifted men who have the `know-how' to produce and make the nation wealthy. If so Gandhi argued that the non-violent way was superior to the violent one. The rich man must be left to have the possession of his wealth, but must be persuaded to use it for his essential needs and distribute the rest to others. The first step was persuasion and if argument failed, one can resort to non-cooperation as the next step. At the same time if one is to use this non-violent method, he must effect certain changes in his personal life. "He should reduce his wants to a minimum bearing in mind the poverty of India. His earnings would be free of dishonesty, the desire for speculation would be renounced. His habitation would be in keeping with his new mode of his life. When he has done all that is possible in his personal life, then only will he be in a position to preach his ideal among his associates and neighbours (*Harijan*: 25.08.1940).

Conclusion

The cause of poverty is the unjust structures giving way to exploitation. The same may be remedied through the models envisaged by both C.T. Kurien and Gandhiji. C.T. Kurien stresses on creating anawareness, conscientizing the people, mobilising and organizing the masses towards social transformation leading to the establishment of need based economy. This economical structure would remove inequality through the eradication of middle men who pave the way for the establishment of Want Based Economy. Mahatma Gandhi also stresses on satisfying the needs of the masses by enabling the rich to distribute their riches to the community by themselves. The transformation should be wrought about through non-violent method as the usage of violence will make the society lose `gifted persons' who can really contribute to uplift society. As a result the kingdom of God assuring equality, fraternity and justice would be established!

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EMPOWERMENT OF RURAL WOMEN THROUGH

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Abstract

The cause of poverty is the unjust structures giving way to exploitation. As per the latest statistics, India has 2.6 per cent of the world's poor numbering to 179.6 million. There has been a remarkable improvement from yester years as India had around 300 million poor in 1983. Still India has a long way to go to cater to the basic needs of the masses. The situation of poverty may be remedied through the models envisaged by both C.T. Kurien and Gandhiji. C.T. Kurien stresses on creating an awareness, conscientizing the people, mobilising and organizing the masses towards social transformation leading to the reestablishment of need based economy. This economical structure would remove inequality through the eradication of middle men who pave the way for the establishment of Want Based Economy. Mahatma Gandhi also stresses on satisfying the needs of the masses by enabling the rich to distribute their riches to the community by themselves. The transformation should be wrought about through non-violent method as the usage of violence will make the society lose `gifted persons' who can really contribute to uplift society! If the rich do not still cooperate, then a stiff resistance by resorting to non-cooperation would gradually bring about the needed transformation in the rich. As and when each and every individual reduces their wants and gives importance to every individual's needs, the unequal structures would disappear enabling the emergence the justice and thus pave the way for a equalitarian, fraternal and justice society wherein poverty would disappear altogether! Empowerment of women is a process that enables individuals and groups to realize their full identity and powers in all spheres of their life. This process provides opportunities for greater access to knowledge, skills and resources. Empowerment in simple terminology means helping people to help themselves and also leading the people to learn to lead themselves. In the broader terms it implies an increase in consciousness and act more than a forced change of power in which there is a destruction of previous structures and values. It empowers transfer of power in a dynamic way over a period of time. Empowerment occurs at two levels, namely at individual and collective level. At individual level there is increase of individual knowledge, competency, skills, resources, and opportunities which enable more effective action and interpersonal relations. The impact of individual empowerment should reflect within self, the self help group and the community at large. Community based activist groups can bring about sustainable development and find feasible solutions to social issues relating especially to women and children.

Keywords: Empowerment, SHG, sustainable development

Women in India as an independent group constitute 48 per cent of the country's total population as per the 2001 census. The importance of women as a prominent human resource was recognized by the constitution of India which not only accorded equality to women but also empowered the State to adopt measures of positive discrimination in favour of women for their empowerment. A number of Articles of the constitution specially reiterated the commitment of the constitution towards the socio economic development of women and also upholding their political right and participation in decision making.

Empowerment is a multi –faceted, multi-dimensional and multi-layered concept. Women's empowerment is a process in which women gain greater share of control over resources-material, human and intellectual like knowledge, information, ideas and financial resources like money- and access to money and control over decision-making in the home, community, society and nation, and to gain 'power'. According to the country Report of government of India, "Empowerment means moving from a position of enforced powerlessness to one of power".

Microfinance is a tool for empowerment of women. The enlistment of the poor has gained credence in the development dialogue, the world over. Reaching women in remote rural areas and creating a legitimate organizational space where women can meet and function as a collective unit has been recognized as a development of significant potential for challenging the social and economic isolation of women. Massive multiplication of such group-based lending programmes is being advocated by national and international donor organizations as the single

most effective anti-poverty intervention that can be globally adopted. Microfinance can assume a larger role in the global strategy in meeting the international pledge of the Millennium Development Goals and for the commitment to cut poverty by half by 2015 through a collaborative concerted effort of all the stakeholders.

The Specific Objectives of the Study are:

1. To discuss the formation of women SHGs, savings and loan performance in Madurai district.
2. To analyze the characteristics of the sample SHG members and their family profile.
3. To determine the income contribution of SHGs members towards their family income.
4. To evaluate the impact of SHGs on social, economic and decision making empowerment of women.
5. To offer suitable suggestions based on the findings of the study.
6. To give a specific focus to the objectives, a few hypothesis have been formed to test the above said objectives by using appropriate statistical tools. They are:
7. The income of SHG women members is independent of their family size, family monthly income and parents/spouses income.
8. SHG members contribute a significant share of income to their family income.
9. The women have attained more economic, social and decision making empowerment after joining SHGs.
10. Socio-Economic factors do not influence the level of empowerment.

Methodology

Designing a suitable methodology and selection of analytical tools are important for a meaningful analysis of any research problem. It includes sample design, collection of data, method of analysis and tools of analysis.

Sample Design

Madurai district comprises seven taluks and 13 blocks. For the purpose of collecting primary data, block-wise lists of SHG members were obtained from the Project Officer, District Rural Development Agency, Programme Officer, Tamil Nadu Corporation for Development of Women Ltd., (TNCDW) and Non-Government Organizations (NGOs) functioning in Madurai District. More than 80 per cent of the rural women members were concentrated in blocks, namely Vadipatti, T. Kallupatti, Chellampatti and Kottampatti. 300 sample women members from rural areas under SHG scheme from these four blocks were randomly selected by giving equal weight-age to all four blocks.

Collection of Data

Both primary and secondary data have been used for the present study. A reconnaissance survey was made of the selected respondents to get acquainted with the loan amount received, utilized, repayment and the like. On the basis of the information gathered, a well designed pre-tested interview schedule was drafted and used in the field survey to collect primary data. Before undertaking the main survey, a tentative interview schedule was prepared and administered to 25 members in order to test the validity of the interview schedule. The selected rural women members were contacted in person and the objectives of the study were clearly explained to them and their co-operation was ensured. The details regarding the general characteristics of the sample members, their families, income, savings and the like relating to the overall objectives of the study were collected from the sample members through the direct personal interview method.

Tools of Analysis:

In order to examine the relationship, Chi-square test was used and ANOVA test is used to examine the variance in monthly income.

Awareness among the Members before and after Joining SHGS

Sl. No.	Particulars	No of Respondents			
		Before Joining SHG		After Joining SHG	
		Yes	No	Yes	No
1.	Saving habits	81 (27.00)	219 (73.0)	300 (100)	0 (0)
2.	Group participation	0 (0)	300 (100)	300 (100)	0 (0)
3.	Peer group participation	0 (0)	300 (100)	300 (100)	0 (0)
4.	Money rotation	0 (0)	300 (100)	300 (100)	0 (0)
5.	Micro finance rotation	0 (0)	300 (100)	300 (100)	0 (0)
6.	Obtaining and Repaying Micro finance	21 (7.00)	279 (93.00)	300 (100)	0 (0)
7.	Interest rate	59 (19.67)	241 (80.33)	300 (100)	0 (0)
8.	Subsidy	0 (0)	300 (100)	300 (100)	0 (0)
9.	Small entrepreneurship	0 (0)	300 (100)	300 (100)	0 (0)
10.	Small scale production	76 (25.33)	224 (74.67)	300 (100)	0 (0)
11.	Marketing	76 (25.33)	224 (74.67)	300 (100)	0 (0)
12.	Accounting and auditing	0 (0)	300 (100)	300 (100)	0 (0)
13.	NGO's activities	0 (0)	300 (100)	300 (100)	0 (0)
14.	Govt. programmes/ schemes	0 (0)	300 (100)	278 (92.67)	49 (8)
15.	Self hygiene and health	106 (35.33)	194 (64.67)	300 (100)	0 (0)
16.	Immunisation	246 (82.00)	54 (18.00)	300 (100)	0 (0)
17.	Child care	132 (44.00)	168 (56.00)	300 (100)	0 (0)
18.	Nutrition	0 (0)	300 (100)	300 (100)	0 (0)
19.	Child education	96 (32)	204 (60.00)	300 (100)	0 (0)
20.	Women's rights and laws	0 (0)	300 (100)	300 (100)	0 (0)

Note: Figures in brackets represent percentage to total.

The above table clearly shows before joining SHGs all the sample respondents were not aware of Group participation, Peer group participation, Money rotation, Micro finance rotation, Accounting and auditing, and NGO's activities. Only 27.00 per cent had awareness about saving habits, 7.00 per cent had awareness about receiving and repayment of micro finance, 19.67 per cent had awareness about Interest rate, 25.33 per cent had awareness about Small scale production and Marketing, 35.33 per cent had awareness about Self hygiene and health, 82.00 per cent had awareness about Immunization, 44.00 per cent had awareness about Child care and 32 per cent had awareness about Child education. But it is seen that after joining SHGs all the members have got awareness regarding the above said except Govt. programmes/ schemes.

Distribution of Respondents According to Decision Making Before and After Joining SHGS

Sl. No.	Decision Making	No of Respondents					
		Before Joining SHG			After Joining SHG		
		Male	Female	Both	Male	Female	Both
1.	Marriage of daughter	211 (70.33)	34 (11.33)	55 (18.33)	101 (33.67)	51 (17.00)	148 (49.33)
2.	Marriage of son	184 (61.33)	46 (15.33)	70 (23.33)	99 (33.00)	48 (16.00)	153 (51.00)
3.	Education of children	138 (46.00)	58 (19.33)	104 (34.67)	23 (7.67)	221 (73.67)	56 (18.67)
4.	Child health	103 (34.33)	119 (39.67)	78 (26.00)	51 (17.00)	209 (69.67)	40 (13.33)
5.	Loan agreements	239 (86.33)	19 (6.33)	22 (7.34)	19 (6.33)	251 (23.67)	30 (10.00)

6.	Savings	153 (51.00)	44 (14.67)	103 (34.33)	20 (6.67)	261 (87.00)	19 (6.33)
7.	Asset building	199 (66.33)	33 (11.00)	68 (22.67)	158 (52.67)	79 (26.33)	63 (21.00)
8.	Food and clothing expenditure	232 (77.33)	31 (10.33)	37 (12.34)	36 (12.00)	198 (66.00)	66 (22.00)
9.	Festival expenditure	202 (67.33)	26 (8.67)	72 (24.00)	48 (16.00)	12.00 (69.61)	43 (14.33)
10.	Recreational expenditure	204 (63.00)	49 (16.34)	47 (15.67)	42 (14.00)	126 (42.00)	132 (44.00)
11.	Participation in group meetings	231 (77.00)	11 (3.67)	58 (19.33)	68 (22.67)	139 (46.33)	93 (31.00)
12.	Income generating activity	141 (47.00)	46 (15.33)	113 (37.67)	51 (17.00)	186 (62.00)	63 (21.00)

The above table shows that there was a visible change that has occurred in the level of participation of women in the decision making process within the family. There is a significant increase in the decision making of child education, health, loan agreements, savings, expenditure on food and clothing, festival and recreation, participation in group meetings and income generating activity.

Conclusion

Capacity building through Micro credit programme, reveals that 100% of the respondents had awareness about savings habits, group participation, money rotation, child care nutrition, child education and women's rights and laws.

Regarding the decision making empowerment, majority of the respondents have taken a final decision more than husband and other family members in terms of marriage of daughter, marriage of son, education of children, child health, savings, recreation and the like.

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SOCIO-ECONOMIC IMPLICATIONS OF LINKING AADHAAR WITH BANKS

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Abstract

The Government of India introduced Aadhaar to provide an efficient, transparent, and targeted delivery of subsidies, benefits and services for the socio-economic benefits to targeted individuals residing in India. Hence, the Government made it mandatory to link Aadhaar with bank accounts of individuals. In order to know the socio-economic implications of linking Aadhaar with bank this study was undertaken. The study proves that there is no significant difference among Age group with regard to Customer Loyalty after updating Aadhaar to Bank Accounts. However, there is a significant relationship between the factors influencing the customer satisfaction after linking Aadhaar. The study shows that there is a significant relationship between the factors influencing the customer satisfaction after linking Aadhaar irrespective of their locations. The study also indicates that there is no qualitative socio-economic transformation of the society on account of this compulsory practice.

Introduction

Aadhaar is a twelve-digit unique identification number (UID) mandated to all the residents of India except the state of Jammu and Kashmir. Aadhaar which means 'foundation' or 'base' in hindi captures biometric data along residential details to create UID for all the individuals.

In 1999, The Kargil review committee proposed to have a multipurpose national ID card thereby eliminate fake/ duplicate ID cards and then extend its usage for various purposes. On March 2016, finance minister ArunJaitley introduced the provisions of Aadhaar (Targeted Delivery of Financial and other Subsidies, benefits and services) Act as money bill in Parliament. The plans and policies of UID scheme is governed by the Unique Identification Authority of India (UIDAI) from January 2009. Some of the notable uses of Aadhaar are to make Direct Benefit Transfer (DBT), Biometric Attendance Systems and Digital India as mainstream Benefits. In recent past, the Government made it mandatory to link Aadhaar with bank accounts of individuals to the extent of freezingthe ATM facilities to the individuals who have not linked the Aadhaar.

SSN and Aadhaar

Earlier in 1935, Social Security Act (SSA) was enacted in United States to provide aid to retired, unemployed and children through a variety of social security benefits. The Social security board consented to have a Social Security Number (SSN), a nine-digit unique numbering system for all the individuals to keep track of the schemes. As years progressed, SSN was mandated to validate eligibility and gain benefits under different titles of SSA. Though SSN was not primarily intended to be a personal identifier, the disclosure of SSN with multiple agencies make it viable to hackers to misuse other's SSN as theirs owing to its uniqueness. This may cause the individuals vulnerable to identity thefts. The Privacy Act of 1974 was then enacted to limit the use of SSN that stated that individual's benefits cannot be denied due to refusal to disclose their SSNs making it a voluntary process rather a compulsion. Some Indians tend to relate SSN and Aadhaar on the account of these being used as personal identifiers and show affliction leaning in to the history of privacy breaches with SSN.Regardless, there are some notable differences to consider between SSN and Aadhaar.

Social Security Number (SSN)	Aadhaar (UID)
SSN is for citizens and non-citizens	Aadhaar is for all the residents of India.

who are authorized to work in US.	
SSN is not a biometric identifier.	Aadhaar includes fingerprints, iris data and photographs of individuals.
SSN is a 9 digit number introduced as part of Social Security Act and is used to foster social security benefits.	Aadhaar is a 12 digit number introduced as part of Aadhaar Act and grants unique identity to Indian residents.
The access or disclosure or protection of SSN records are regulated under the Privacy Act.	Aadhaar is a personal identity information and is not a secret. It's a sensitive information similar to Bank Account number and can be shared for transactional purposes.

The researcher wanted to study the Socio-economic implications of linking Aadhaar with banks starting from bank's technological security, quality of service leading to loyalty of customers and the socio-economic implications of this compulsory practice.

Statement of the Problem

The study is to evaluate customer satisfaction of Bank Account holder due to mandatory linking of Aadhaar card. Customer satisfaction in Bank Account is essential since that creates the longevity of the trust from the Account holders with Banks. Long term Bank Account maintenance also ensures the advisory role of Bank in a person's financial investments. When customer loyalty is impacted by the internal factors of the Bank Account, customers have options to switch to other Banks. When it is impacted by external factor such as Aadhaar (Government), the financial flow within Banks can be diversified to other financial instruments outside Banks. Around 103 million people in India belong to the age group of above 60 years and depend on the Bank Accounts to receive the pensions. The compulsive linking of Aadhaar to Bank Accounts can create agitation in their retired lives. The investigator's objective is to analyse the customer satisfaction due to compulsive linking of Aadhaar cards with Banks and the level of socio – economic impact generated among the population.

Objectives of the Study

To study the relationship between Age group with respect to customer loyalty after linking Aadhaar to Banks

To study the relationship between the factors that influence customer satisfaction after the Accounts are linked.

To study the impact of mandatory linking of Aadhaar card to Bank Accounts between rural and urban segments

Research Methodology

To study the socio-economic implications of linking Aadhaar with banks, a structured questionnaire was devised and administered among the sample individuals who have linked Aadhaar with their bank accounts.

Research Design - In view of the objectives of the study listed above, an exploratory research design has been adopted.

Sampling Design - The universe was finite in this study and the sampling unit is an individual who has linked Aadhaar with his/her bank account. The sampling size, due to time and resource constraints, was 50 individuals and the Convenient Random Sampling Technique was used.

Findings and Inferences

H1: There is a significant difference among Age group with regard to Customer Loyalty after updating Aadhaar to Bank Accounts

H0: There is no significant difference among Age group with regard to Customer Loyalty after updating Aadhaar to Bank Accounts

Performing Duncan Multiple Range Test (DMRT)

Factors of Customer Loyalty	Age Group (In Years)					F Value	P Value
	< 25	25– 35	35– 45	45 – 55	> 55		
Investment Bank options	2.00[a] (1.00)	2.74[a] (1.20)	2.83[a] (1.19)	1.50[a] (0.71)	1.25[a] (0.50)	2.236	0.08
Liability options with Banks	3.00[b] (1.00)	2.63[b] (0.96)	2.67[b] (1.16)	1.00[a] (0.00)	2.00[a] (1.41)	1.542	0.212
Satisfaction from Bank services	2.67[a] (0.58)	2.37[a] (0.76)	2.42[a] (1.24)	2.50[a] (0.71)	2.75[a] (0.50)	0.193	0.940
Better and unified KYC from Banks	3.67[b] (0.57)	3.00[ab] (0.82)	2.25[ab] (1.28)	1.50[a] (0.71)	2.25[ab] (0.96)	2.717	0.045*
Overall Customer Loyalty	11.33[b] (2.51)	10.74[b] (1.76)	10.17[b] (3.33)	6.50[a] (0.71)	8.25[ab] (2.22)	2.209	0.088

Notes:
- a – Subset 1; b – Subset 2
- Value within bracket refers to Standard Deviation
- * denotes significance at 2% level

Inference
DMRT

Since P value is less than 0.05, the null hypothesis is rejected at 5% level of significance with regard to the statement CL3 - Linking of Aadhaar has led to less fraud due to better and cheaper KYC for all. Hence, there is a significant difference among age groups on CL3. Also, the P value is greater than 0.05 for other statements of Customer Loyalty. This implies that there is no significant difference among age groups with respect to the investment options, liability products and other related services post linking of Aadhaar. Hence the null hypothesis is accepted at 5% level with regard to Customer Loyalty.

H1: There is a significant relationship between the factors influencing the customer satisfaction after linking Aadhaar

H1: There is a significant relationship between the factors influencing the customer satisfaction after linking Aadhaar

Customer Satisfaction Factors	Service Quality	Technological Strength	Client Loyalty	Economic Impact
Service Quality	1	0.307	0.412**	0.400*
Technological Strength		1	0.645**	0.596**
Client Loyalty			1	0.639**
Economic Impact				1

Inference

The correlation coefficient between Technological Strength and Client Loyalty is 0.645 which indicates positive relationship between the two factors. The relationship between Technological Strength and Client Loyalty is 41.6% ($0.645^2 = 0.416$) and is significant at 1% level.

The correlation coefficient between Economical Impact and Client Loyalty is 0.639 which indicates positive relationship between the two factors. The relationship between Economical Impact and Client Loyalty is 40.8% ($0.639^2 = 0.408$) and is significant at 1% level.

Hence, there is a significant relationship between the factors influencing the customer satisfaction after linking Aadhaar.

H1: There is a significant difference between Locations with regard to Economic Impact

H0: There is no significant difference between Locations with regard to Economic Impact

Customer Satisfaction Factors	Locations				t value	P value
	Urban		Rural			
	Mean	SD	Mean	SD		
Service Quality	2.26	0.72	2.02	0.51	-1.25	0.219
Technological Strength	2.53	0.95	2.32	0.86	-0.73	0.467
Client Loyalty	2.50	0.64	2.56	0.65	0.31	0.755
Economical Impact	2.62	0.76	2.15	0.76	-1.92	0.063

Inference

Based on the above result, there is no significant difference between rural and urban locations with respect to the factors as the p value is greater than 0.05. Hence, Null hypothesis is accepted at 5% level for all the factors such as Service Quality, Technology, Customer Loyalty and Economical Impact.

Conclusion

The study indicates that there is no significant difference among Age group with regard to Customer Loyalty after updating Aadhaar to Bank Accounts. However, there is a significant relationship between the factors influencing the customer satisfaction after linking Aadhaar. The study also shows that there is a significant relationship between the factors influencing the customer satisfaction after linking Aadhaar. It also points out that there is no significant difference between rural and urban locations. During the course of the study, the researcher also discovered that the general population is not completely aware of the possible privacy breaches of linking Aadhaar. Thus the study concludes that there are no significant socio-economic implications of mandatory linking of Aadhaar to bank accounts of the individuals.

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STATUS OF WOMEN: QUEST FOR EQUALITY

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Abstract

Women have been treated as "objects" by the male-dominated society in India and elsewhere. However, there is no uniform pattern of social, cultural and economic distinctions between men and women. In India gender-based consciousness has its origin in the emergence of the middle classes and their problems. Patriarchy is very strong in India. Even the neo-rich in the countryside have put restrictions on women in getting higher education, migrating and taking up jobs. The fact of the matter is that women have been dependent by men and by the social milieu they have created for them. This paper discusses the status of women in ancient, medieval, British and post-Independence India, legislations and social movements. These have been discussed with a view to understand women's quest for equality with men. Finally this paper ends with some suggestions to emancipate the status of women in the society and quench this thirst for equality.

Keywords: Patriarchy, Gender-Consciousness, Legislations, Exploitation, Equality

Introduction:

"It is impossible to think about the welfare of the world unless the condition of women is improved. It is impossible for a bird to fly on only one wing*." —* Swami Vivekananda. Women are not born, but made. What better than India to exemplify this statement by Simone de Beauvoir

Women have been treated as "objects" by the male-dominated society in India and elsewhere. However, there is no uniform pattern of social, cultural and economic distinctions between men and women. In India gender-based consciousness has its origin in the emergence of the middle classes and their problems. Patriarchy is very strong in India. Even the neo-rich in the countryside have put restrictions on women in getting higher education, migrating and taking up jobs. The fact of the matter is that women have been dependent by men and by the social milieu they have created for them. This paper discusses the status of women in ancient, medieval, British and post-Independence India, legislations and social movements. These have been discussed with a view to understand women's quest for equality with men. Finally this paper ends with some suggestions to emancipate the status of women in the society and quench this thirst for equality.

Women in History

A. Rid-Vedic Civilization

In this period, women enjoyed equal status with men. Women, like men received education and observed Brahmacharya and Upanayana was also performed for them. Women studied the Vedas, and composed Vedic hymns. Women had access to all branches of knowledge. Women like Ghosha, Apala, Vishvara were composeres of outstanding Vedic hymns. There were women rishis like Gargi and Maitreyi. Women could own property and widows could remarry. They also became teachers. Women were not secluded from men, and they freely participated in public life.

B. Later Rid-Vedic Civilization

The position enjoyed by women in this period deteriorated. They were denied the right of inheritance and of ownership of property. Inter-marriage between Brahmanas and Kshatriyas was not unknown between A.D. 700 and1206.

C. Buddhist Period

In this era women were not denied learning. They took active part in pubic life, but did not enjoy the right of Vedic studies. The position of women really deteriorated ion the Gupta age. Dowry emerged as an institution in this period. Sati had become popular by the 17th century A.D. Some women did receive higher education in this

period. Lilavathi and Khana were experts in arithmetic and astronomy.

Between A.D. 1206 and 1761

This period witnessed further deterioration in the position of women. In this period female infanticide, child-marriage, purdah, sati and slavery were the social evils affecting the position of women. Conservatism, superstition and belief in magic, sorcery and witchcraft were part of women's existence. The reform movements and the National Movement generated social consciousness among women. The All India Women's Conference was established in January 1927. This concentrated on educational and social work among women. Mahatma Gandhi brought women out into public life.

Second Half of 19th Century

This age witnessed several reforms regarding the position of women in Indian society. Raja Ram Mohan Roy and Ishwar Chandra Vidyasagar started agitation for widow re-marriage, and were successful in getting the Hindu Widows Remarriage Act passed in 1856. In Bombay, a widow remarriage Association was formed in 1861. The Arya Samaj gave priority to this programme. The most important acts are:
1. Special Marriage Act 1954
2. The Hindu Marriage Act 1955
3. The Hindu Succession Act 1956

British Period

Sati, Infanticide, slavery, Child Marriage, the prohibition of widow remarriage and the lack of women's rights were some of the social problem which attracted the attention of the British Raj and social reformers. In the beginning of the 19th century, Th practice of sati was confined to Hoogly, Nadia and Burdwan Districts of Bengal, Ghazipur of UP and Shahabad of Bihar. It was found in other parts of India, but only as a rare phenomenon. In Southern India, it was practiced in Ganjam, Masulipatinam and Tanjore Districts. In Rajasthan, Punjab and Kashmir the practice was confined to women of high caste. In Delhi, Charles Metcalfe stopped the practice. Aligarh and Agra seldom had occurrences of sati. In Bengal alone, three-fourths of the total occurrences occurred in British India. The British had shown interest in the abolition of sati in 1813.

Female infanticide was found mainly among Rajputs of Benaras, Gujarat, Madhya Pradesh and Rajasthan and in parts of Punjab and Sind and among Sikhs. In 1779, infanticide was declared to be murder by the Bengal Regulation XXI. In 1804, this was extended to other parts of India. Dowry was its main cause.

Child marriage is prevalent even today among the rural people and among the illiterate and poor. The first legislation was passed in 1860 under which the minimum age for the consummation of marriage in the case of girls was raised to 10. There were also the institutions of the nautch (dance) girls and prostitutes.

The following legislations have enhanced the status of Hindu women in matters of marriage, adoption and inheritance.
1. The Hindu law of Inheritance (Amendment) Act 1929
2. The Hindu women's right to property Act 1937
3. The Hindu Marriage Disability Removal Act 1946
4. The Special Marriage Act 1954
5. The Hindu Marriage Act 1955
6. The Hindu Succession Act and the Hindu Adoption and Maintenance Act 1956
7. The Dowry Prohibition Act 1961
8. The Maternity Benefit Act 1961
9. The Equal Remuneration Act 1976
10. The Criminal Law Amendment 1983

Women since 1950's till Date

With time, a lot has changed since those dark ages of the 1950s for the women. Though at some levels like dowry, crimes like rape, sexual harassment at office or public places, and molestation, eve-teasing, even after over sixty years of independence women are still exploited, which is the shameful side of our country. Yet one can't deny that the situation has improved since the earlier times. Women, who now represent 48.2% of the population, are getting access to education, and then employment. From 5.4 million girls enrolled at the primary level in 1950-51 to 61.1 million girls in 2004-05. At the upper

primary level, the enrolment increased from 0.5 million girls to 22.7 million girls.

Dropout rates for girls have fallen by 16.5% between the year 2000 and 2005. Programs like 'Sarva Shiksha Abhiyan' and 'Saakshar Bharat Mission for Female Literacy' has helped increase the literacy rates from less than 10 percent to more than 50% today. The result of this is that India has world's largest number of professionally qualified women

Today names like Arundhati Roy, Anita Desai, Kiran Desai, Shobhaa De, Jhumpa Lahiri can put any other writer to shame. In the field of cinema, women like Rekha, Smita Patil, Shabana Aazmi and Vidya Balan and Konkona Sen are such names who don't play feminised roles, but have asserted themselves over this male-dominated realm. In the field of Politics, from Indira Gandhi to Shiela Dixit, Uma Bharti, Jayalalithaa, Vasundhra Raje and Mamata Banerjee today, women are making their presence felt. Despite progress, the very fact that women, along with being achievers, also are expected to fulfill their roles as wives or mothers, prioritizing home against anything else.

This point of view hasn't changed much. There is still a large section of women who are uneducated, and married off before the age of 18. Families are required to supply a chaste daughter to the family of her future husband. Also very few women are actually employed in good-paying jobs, and hence parents don't see the point of spending money on girls' education.

Facts about Gender Inequality in India

- Over the last three years, there were over 24,000 reported dowry deaths in India.
- As many as 70% of married women in India between 18 and 49 years of age are victims of beatings or rape.
- Statistics say that close to 245 million Indian women lack the basic capability to read and write, which is a large number.
- Only 13.9% women are employed in the urban sector, and 29% in the domestic and agriculture sector, where too a majority of women are exploited by the men.

- According to a 2011 study, 72% of acid-attack cases in India from 2002 to 2010 included at least one female victim.
- Although child marriage is illegal in India, almost half of all women between the ages of 20 and 24 years were married off before the legal age of 18.
- A recent survey revealed that the median wage for women in India was 27% lower than what men make
- According to the National Crime Record Bureau's 2014 report, 39.8% of rape victims in India are girls under the age of 18.
- While the male literacy rate of India stands at 82.14%, the female literacy rate is only 65.46%, with Rajasthan having the lowest female literacy at 52.66%.
- And despite an improving child sex ratio, India still ranks an abysmal 127th out of 146 in the United Nation's Gender Inequality Index.
- The sex ratio of India shows that the Indian society is still prejudiced against female, and a lot is yet to be achieved in this context.

Quest for Equality

Women's quest for equality with man has become universal. What exists for men is demanded for women. This demand for equality with men, speaks of a notion of men's tyrannical hegemony. Women have hardly any choice but to adopt an independent path for their upliftment. They want to have equality within the framework of the existing highly rigid patriarchal society. Women participated in India's National Movement for freedom in British rule. Many of them worked with Gandhi ji in the pre-Independence period. Today women's organizations, women social workers and politicians have taken up the issues of price rise, dowry, rape, and exploitation etc. to seek equal status with men and a dignified life. Women have demanded their share of jobs in the police and other such services. Women's organizations have created a sense of consciousness for gender equality, particularly in the urban areas.

Consequent upon some social problems connected with women International women's Day, International women's Year, conferences and seminars on women, and women's studies

have been instituted in a big way since the late 1960s and 1970s. the provisions made in the constitution of India regarding equality of women with men have also been widely popularized by these organizations and associations. A notable development was the appointment in 1971 by the Government of India of the committee on the status of women. The committee submitted its report in 1974. The report of the committee was very widely welcomed. There is also an All-India Association of women's studies. Demonstrations, processions and strikes against tape, dowry deaths and the murder of women have become a regular feature in Delhi, Bombay and other cities. Feminist publications such as Manushi, Bayja, Mahila Andolan Patrika, Feminist network and several other publications are run by women's organizations to achieve equality with men. Some other suggestions:

- Education that helps create attitudinal shifts towards gender bias and activities to spread awareness.
- Continuous efforts towards breaking myths and stereotypes around gender.
- Ensuring State accountability to implement various schemes, policies, laws, constitutional guarantees and international commitments.
- Institutionalising gender sensitive processes within various systems such as law and programmes.
- Encouraging community ownership in preventing violations based on gender discrimination.

Conclusion

The problem is due to unequal access of men and women to society's resources and its distributive processes. Can me alone be blamed for these gender-based inequalities?. It has been observed that it is women who obstruct the path of other women even more than men do; as is the case with mother-in-law and colleagues at work. All women are not equally exploited or oppressed. Therefore there is a need to study women as unmarried girls, young wives, mothers, old women, and working and non-working women. Such a scheme of study will provide a comparative picture of the dimensions of women's problems as it covers ramifications and variations in the status of women. Interaction between women in different settings may also provide useful clues for our understanding of the problem.

To seek "gender justice" for them it would be proper to understand India's social formation, its layers and levels (including caste and class), male-female images and reality, various views of the woman's place in the family and at the place of work, and the congruence between technological advancement and patriarchy. However the quest for equality with men has been strongly expressed in recent years. It has been some tangible impact in metropolitan cities and big towns. There is a need for a lot more to be done in this field.

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A STUDY ON STRESS AMONG SCHOOL TEACHERS WITH SPECIAL REFERENCE TO MADURAI DISTRICT

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Abstract

Teaching is becoming more challenging as a profession and it is one of the most significant and visible profession in the world. Schools are as important as any other organisation in the world. These are tough times to be a teacher. The nature and organization of the job make teaching inherently difficult. Teachers face new challenges and opportunities from increasingly diverse and needy student populations. Demand on teachers develop new knowledge and skills t perform new tasks are rapidly. So too are expectations for school and teacher performance and accountability. Taken together, the characteristics and conditions of teaching present increasingly stressful situations for teachers and situations that may have positive or deleterious consequences for them and for their work with students. We framed this analysis with a conceptual and theoretical overview of psychological stress in the workplace, focusing particularly on organizational sources and consequences of stress. This overview draws primarily on literature from social psychology, organizational and industrial psychology, and organizational studies.

Keywords: Organisational stressors, Individual stressors, Role clarity, Role conflict.

Introduction

Hans Selye first introduced the concept of stress in to the life science in 1936. He defined stress as "The force, pressure, or strain exerted upon a material object or person which resist these forces and attempt to maintain its original state." Stress is ubiquitous in our society. It has become an integral part of everyday living. Stress is an unavoidable consequence of modern living. With the growth of industries, pressure in the urban areas, quantitative growth in population and various problems in day to day life are some of the reasons for increase in stress. Stress is a condition of strain that has a direct bearing on emotions, thought process and physical conditions of a person. Steers (1981) indicate that, "Occupational stress has become an important topic for study of organizational behavior for several reasons." 1. Stress has harmful psychological and physiological effects on employees, 2. Stress is a major cause of employee turnover and absenteeism, 3. Stress experienced by one employee can affect the safety of other employees, 4. By controlling dysfunctional stress, individual and organization can be managed more effectively.

The occupational role stress related to inter role distance, role stagnation, role expectation, role conflict, role erosion, role overload, role isolation, personal inadequacy, self role distance, role ambiguity and resource inadequacy.

Undertaking the study among the school teachers is highly pertinent and relevant. The study by their authors entitled "Study of Stress among School Teachers in Madurai District" focused on the basic factors viz., relationship with peer group, Satisfaction with the Pay , occupational stressors, Working conditions and individual stressors. Taken together, these general conditions and current challenges present potentially stressful situations for teachers, situations that may have deleterious consequences for them and for their work with students.

Review of Literature

Miles and Perrault (1976) identify four different types of role conflict: 1. Intra-sender role conflict 2. Inter sender role conflict. 3. Person- role conflict; 4. Role over load. The use of role concepts suggests that job related stress is associated with individual, interpersonal, and structural variables (Katz and Kahn, 1978;

Whetten, 1978). The presence of supportive peer groups and supportive relationships with super visors are negatively correlated with R.C. (Caplan et al., 1964).

There is evidence that role incumbents with high levels of role ambiguity also respond to their situation with anxiety, depression, physical symptoms, a sense of futility or lower self esteem, lower levels of job involvement and organizational commitment, and perceptions of lower performance on the part of the organization, of supervisors, and of themselves (Brief and Aldag, 1976; Greene, 1972).

Madhu et al., (1990) studied the influence of antecedent factors on role stress. The antecedent factors studied were personal factors of the individual, leadership, and communicator style of the superior, job conditions and organizational factors. The results showed that personal factors had no influence on role stress. With regard to job conditions it was found that low autonomy, poor planning and insufficient feedback added to role stress. Organizational factors like good interpersonal relations, better division of labour, proper control and formalization were related to lower role conflict and role ambiguity. The leadership style of the superior had very low influence of role stress. In the communication fact, it was found that role stress was less for subjects who described their superiors as dynamic, expressive, impressive and good in written communication.

Singh et al., (1991) examined the effects of organizational role stress and locus of control on job involvement among bank staff employed by them. They found that low stress group of employees were highly involved in their job as against those in the high stress group. External locus of control group had lower job involvement compared with those with internal locus of control.

Palas and Adhikari (2008) in his study entitled 'Role stress among nurses in the efficient running of hospitals'. Ten types of role stresses were measured using modified version of ORS Scale. Role expectation conflict, inter –role distance and role over – load are the highest contributing factors that cause stress among the respondent, nurses in a government hospital. Half

of the respondents are detected stressful. Both physiological and psychological (lack of enthusiasm, frustration, fatigue, indigestion and constipation) impacts of stress are found to be present among the stress.

Primary objective:

To understand and measure the occupational role stress as perceived by the teachers

Secondary objectives:

To find out whether the teachers' stress affects their social behavior

To identify the causes for the stress faced by the teachers working in the schools

Period of the Study

The study was conducted for a period of 6 months from July to December 2011. The respondents were contacted and interviewed i n the school premises during their leisure hours.

Research Design:

The design used in this paper study is descriptive type.

Research Instrument

A structured, non disguised interview schedule was prepared for the purpose of collecting the data. The factors of the study were d rawn out from the related studies and the statemen ts of the schedule were framed representing the fac tors. These were given shape in consultation with The field experts

Population profile and Sampling

The study was confined to Madurai district of Tamil Nadu. This district was selected keeping in mind that it is well endowed with school teachers. For the purpose of identifying organizational stressors in the school environment, twenty schools were selected. Out of twenty school, eleven were selected from the urban area and nine were selected from the rural area. It was decided to collect the necessary information from 60 teachers from each area. So total of 120 teachers were selected for the final study. Non –probability, convenient sampling method was used for the study. Respondents were given two weeks to answer their questionnaire.

Measurements

The predictor variables in this study were represented by four organizational variables namely conflict, alienation, work overload, and unfavourable work environment. These variables were measured by a 5-point response format ranging from (1) "Strongly Disagree" to (5) "Strongly Agree" was utilized. The mean scores were computed by averaging the scores for all the items associated with a particular stressor. The moderating variable in this study relates to the personality dimension of neuroticism. This trait was assessed by NEO Five Factor Inventory (Costa & McCrae, 1992). A 5-point response format ranging from (1) "Strongly Disagree" to (5) "Strongly Agree" was utilized. SPSS package has been used to analyse the data.

Tools for Analysis

Chi – square analysis, Correlation, One way ANNOVA and Regression.

Findings

In terms of gender, more than half (10%) of the respondents are males with the remaining 90% are females. As for age, almost (50%) are below 26 years old and respondents (23 %) are between 26 - 30 years old. Regarding marital status, a majority (56.7%) of respondents are married and (40%) being singles and the remaining (3.3%) are widows. As for working experience, 66.7% of the sample has been working for below 5 years. In terms of monthly income, 86.7% of the respondents receive below 10,000 rupees as their salary.

H01: There is no relationship between getting tiredness in the travel and satisfaction with the working hours

Table 1 Calculation of X2 Test:

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	100.995	3	.000
Likelihood Ratio	137.849	3	.000
N of Valid Cases	120		

Result: Calculated value = 100.995, Table value =7.81473 (d.f is 3 with 5% level of significance)

Interpretation

The researcher concludes that there is significant relationship between getting tiredness in the travel and satisfaction with the working hours.

H02: Organizational stressors do not positively relate to job stress.

Table 2: One way Analysis of Variance among the pressure level to show the good result and temper level when students are inattentive in class

Anova

Temptress	DF	SS	MS	Statistical Inference	Sig.
Between Groups	3	20.897	6.966	F = 47.615 >P	.000
Within Groups	116	16.970	.146		
Total	119	37.867			

P = 2.6802 at 5% level of significance.

Interpretation

The researcher concludes that organizational stressors positively related to job stress.

Ho3: there is no significant relationship between freedom of work and impact of work in the family life.

Cross Tabulation 3

		Impact of work in the family life			Total
		To a great extent	To a certain extent	Not at all	
Freedom of work	To a great extent	8	32		40
	To a certain extent	12	20	48	80
Total		20	52	48	120

Results

Value of co efficient of correlation = **.428**

It means a perfect substantial relationship between freedom of work and impact of work in the family life. So H03 gets rejected. Accept H1

H04: There is no adequate relationship between independent variables and Stress level while taking special class for slow learners.

Regression

Table 4.1

Model	R	R Square
1	.597	.357

A. Predictors

(Constant), Years of Experience, Monthly income of the respondents, Marital Status, Gender, Age of the respondents

B. Dependent Variable

Stress level while taking special class for slow learners.

Table 4.2

Model	R	R Square
1	.407	.166

A. Predictors:

(Constant), Monthly income of the respondents, Gender, Age of the respondents

Result

As seen in Table 4.1, when the five personal variables were entered into the regression equation in the first step, the coefficient of determination (R) was found to be 0.597. In step 2, by adding the three independent variables, R change (0.407) is significant. From the second regression model, it can be observed that control variables (working experience and marital status) did have significant influence on job stress. These results provided partial support for the alternate hypothesis of the study.

Conclusion and Suggestions for Future Research:

The contribution of this study rests on the identification of organizational-based stressors and the role played by the personality dimension of neuroticism as a moderator in the relationship between organizational stressors and job stress experienced by the teachers at the workplace. Although several studies on job stress within the teachers context have been reported each of them differs in terms of the variables selected (organizational-based, personal-based, or personality-based), the instruments used, and sample. The present study did not aim to construct a complete model of job stress for teachers but merely to extend one's knowledge about the influence of organizational-based factors and neuroticism on the job stress.

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UNEMPLOYMENT IN INDIA

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Introduction

"A Ploughman on his feet is better than a Gentleman on his knees."

Unemployment is a common economic malady faced by each and every country of the world, irrespective of their economic system and the level of development achieved. But the nature of unemployment prevailing in underdeveloped or developing countries sharply differs to that of developed countries of the world. While the developed countries are facing unemployment, mostly developing countries like India are facing structural unemployment arising from high rate of growth of population and slow economic growth.

Unemployment is the mother of countless ills which pollutes the society and endangers the democratic fabric of the country. one can't expect nobility, honesty and truth from a person who is unable to manage two square meals a day for his family. An unemployed person has no sense of self-respect as he has no sense of security.

Structural unemployment may be open or disguised type. But the most serious type of unemployment from which those undeveloped countries like India are suffering includes its huge underemployment or disguised unemployment in the rural sector.

Unemployment is a serious problem. It indicates a situation where the total number of job vacancies is much less than the total number of job seekers in the country. It is a kind of situation where the unemployed persons do not find any meaningful or gainful job in-spite of having willingness and capacity to work. Thus unemployment leads to a huge wastage of manpower resources.

India is one of those ill-fated underdeveloped countries which is suffering from a huge unemployment problem. But the unemployment problem in India is not the result of deficiency of effective demand in Keynesian term but a product of shortage of capital equipment's and other complementary resources accompanied by high rate of growth of population.

Unemployment Problem In India

Jobs in India are dwindling at an upsetting rate. Privatization and globalization have further intensified the problem. The problem of unemployment means the problem of providing work to those who are willing to work. A large number of people who are being educated and uneducated are capable of doing work and are also willing to do the work roam here and there without getting any job. So the unemployment problem has become a seriousproblem.

Out of the total pollution in India the total number of unemployed or underemployed ranges between 70 and 100 million. This estimated figure can cause various issues to any nation, but to a developing country like India, it is the cause a great distress. A developing country must mobilize its manpower resources to the maximum possible extent.

Some economists have pointed out that the jobs problem stems from an economic liberalization programme launched more than a decade ago. The country's huge public sector has shed thousands of jobs since it stepped on the road to privatization in the early 1990s.The Planning Commission, in a report on employment published last year, attributed rising joblessness to a policy of shedding excess labour in both the private and public sector. It has reported that companies had stepped up investment in plants and machinery more than in labour-intensive industries. Economists add that a $53 billion fiscal deficit prevents the government from creating employment by spending more on social sectors such as health and education.

Unemployment problem of the country can be broadly classified into:

(a) Rural unemployment and

(b) Urban unemployment.

Rural Unemployment:

It is an indisputable fact that unemployment is found in its severest form in rural India. Broadly speaking, rural unemployment may broadly be classified into three categories namely:

(a) Open unemployment,

(b) Concealed or disguised unemployment, and

(c) Educated rural unemployment.

1. Open Unemployment

Open unemployment is concerned with identification of the people without work is an easy task. Agriculture in the Indian context is a seasonal occupation and there is always a heavy demand for labour at the time of sowing, wedding and harvesting whereas in slack season, demand for labour falls considerably.

The period of seasonal unemployment in India varies from state to state, depending upon the methods of farming, nature of soil and possibility of multiple cropping. In rained agriculture farmers remain unemployed for four or six months in a year. Because of illiteracy, poverty and poor health they are unable to avail some alternative employment opportunity during this period.

Concealed Unemployment

This type of unemployment is otherwise known as disguised unemployment. The marginal productivity workers in this type is zero or even negative. In the absence of irrigation facilities, such people look busy in working on their own land, but in fact, they only relieve other members of their family from work. They contribute nothing to agricultural production.

Disguised unemployment in rural India is 25 per cent to 30 per cent. It is mostly prevalent among marginal and small farmers. Here we use the productivity criterion to measure the extent and degree of unemployment.

Educated Rural Unemployment

The another major problem of unemployment is educated rural unemplyment. The spread of education has created many unemployed young persons who are in search of jobs. But there is no job in the labour market for them. This sort of unemployment leads to very tragic consequences. It breeds frustration among some and discontent among others.

(b) Urban Unemployment

Urban unemployment has two aspects:

(a) Industrial unemployment and

(b) Educated or middle class unemployment.

Industrial Unemployment:

In the most of the urban areas of our country industrial unemployment is becoming more issues. With the increase in the size of urban population and with the exodus of population in large number from rural to the urban industrial areas to seek employment, industrialization because of slow growth could not provide sufficient employment opportunities to the growing number of urban population. Thus the rate of growth of employment in the industrial sector could not keep pace with the growth of urban industrial workers leading to a huge industrial unemployment in the country.

Educated or middle-class Unemployment:

Another major unemployment in the urban area is known as educated unemployment. This is a major problem among the middle class people. There is a rapidincrease of education in the country which in-turn increase the number of educated people day by day.

But due to slow growth of technical and vocational educational facilities, a huge number of manpower is unnecessarily diverted towards general education leading to a peculiar educated unemployment problem in the country. The total number of educated unemployment increased from 5.9 lakh in the year 1962 to 230.50 lakh in the year 1994.

Figure 1 Indian Unemployment Rate

Causes of Unemployment Problem in India

Unemployment problem in India is the cumulative result of so many factors.

The broad causes of unemployment problem are as follows:

Population Explosion

Since 1950s due to the high rate of population growth there is a major cause of unemployment in India and the consequent increase in its labour force. It was estimated that with the 2.5 per cent annual rate of population growth, nearly 4 million persons are added to the labour force every year. To provide gainful employment to increasing population is a huge task.

Underdevelopment

Indian economy continues to be underdeveloped even as a vast quantity of unutilized and under utilised natural resources are prevailing in the country. The scale and volume of economic activities are still small. The non-agricultural sector especially modern industrial sector which could generate huge number of employment, is growing very slowly.

During the pre-independence period also, Indian economy experienced a slow growth. British destroyed the indigenous small scale and cottage industries instead of expanding and modernising them. During the post- independence period also, the performance of the industrial sector has also been found far below the plan targets and needs.

Moreover, the slow rate of capital formation is also responsible for the hindrances in the path of realisation of growth potential in agriculture, industry and infrastructure sector. Thus this underdevelopment is largely responsible for slow expansion of employment opportunities.

Inadequate Employment Planning

In the first phase economic planning in India, employment opportunities could not be increased adequately and little has been done to utilise the Nurksian variety of labour surplus existing in the rural areas. Moreover, weak manpower planning is also another serious gap in Indian planning.

Less effort has been made for balancing the manpower needs and supplies in various production sectors, indifferent regions of the country and also indifferent skills.

This has resulted to large imbalances in the sphere of educated and trained personnel like engineers, technicians, cost accountants, plain graduates and port graduates, administrators etc. Thus huge amount of resources used for developing manpower could not come into much help due to faulty manpower planning.

Slow Rate of Growth

In India the rate of growth of the economy is very poor and even the actual growth rate lies far below the targeted rate. Thus the increased employment opportunities created under the successive plans could not keep pace with the additions to the labour force taking place in the country every year leading to a huge and larger backlog of unemployment at the end of each plan.

Backwardness of the Agriculture

Backwardness of the agriculture is due to the high population on land and the simple methods of agricultural operations which in turn leadsto rural unemployment and underemployment in the country.

Insufficient Industrial Development

There is an underdevelopment of industry in our country the growth rate is not sufficient. Due to shortage of capital, Technological obsolescence, depletion of industrial raw materials, shortage of electricity and lack of labour intensive investment and the like the industrial sector could not achieve its objectives and due to this it could not able to generate sufficient employment opportunities in the country.

Prevailing Education System

The current education system in India fails gain knowledge regarding the technical and vocational education. Huge number of graduates are paasing out every year without improper knowledge which is leading to an increasing gap between job opportunities and job seekers among the educated people.

In the absence of vocational education and professional guidance, these huge number of educated youths cannot avail the scope of self-employment leading to growing frustration and discontent among the educated youths.

Slow Growth of Employment during Economic Reforms

Finally, the current phase of economic reforms introduced in India has resulted jobless growth to some extent. Economic Reforms has resulted large scale retrenchment of surplus workers in different industries and administrative departments due to down-sizing of workers.

The annual growth rate of employment which was 2.40 per cent during the period 1983- 94, but the same rate declined to a mere 0.98 per cent during the period 1994-2000. As a result, the unemployment growth rates increased from 5.99 per cent in 1993-94 to 7.32 per cent in 1999-2000.

Initiatives by the Government

The following steps have been taken by Govt, to increase employment opportunities:

Integrated Rural Development Programme (IRDP):

In 1978-79, government of India introduced IRDP to create full employment opportunities in rural areas. Under this programme agriculture, animal husbandry, forests, fisheries, small and cottage industries, construction of roads and canals etc. are to be developed in all the 5111 development blocks. Moreover, to provide more employment, in the Seventh Plan a sum of Rs. 312 crores was spent on this programme. It benefited 182 lakh families. In 1995- 96 about 21 lakh families have been benefited.

Drought Prone Area Programme (DPAP)

This programme was launched in 13 states as were prone to drought. The programme has proved fruitful particularly in removing seasonal unemployment.

Training for Self-Employment

This programme was launched on 15th August, 1979 by the Government of India. It is called National Scheme of Training of Rural Youth for Self Employment (TRYSEM). The main objective of this programme is to reduce unemployment among the youth. During Seventh Plan about 11.6 lakh youth were imparted training under the programme.

JawaharRozgarYojana

The JawaharRozgarYojana was started on 28th April 1989. The objective of this Yojana is to provide employment to at least one member of each poor rural family for fifty to a hundred days a year at a work place near his residence. A special feature of the scheme is that 30% of the employment generated will be reserved for women.

Employment in Foreign Countries

Government also helps people to get employment abroad. Special agencies have been set up to recruit people to serve in gulf countries like Kuwait, etc.

Self-employment to Educated Unemployed Youth

In 1983, a scheme namely self-employment of educated unemployed was initiated. Under this scheme, loans up to Rs. 25,000 are given to those educated unemployed who have no other financial resources.

Nehru RozgarYojana (NRY)

This Yojana was started in the year 1989. There are three schemes under it.
(1) Under the first scheme, subsidy is given to urban poor to set up micro enterprises. In 1995, under this programme, 1.25 lakh families have been benefited.
(2) Under the second scheme arrangements have been made for wage-employment to labourers in

cities with less than 10 lakh population by providing Indian Economic Development and Elementary Statistic 'them basic facilities. In 1995, under this scheme 93 lakhs man-days of employment have been provided.

(3) Under the third scheme, urban poor in the cities are to be provided employment opportunities in jobs like house repairing etc.

Small and Cottage Industries

In order to reduce unemployment, government if has made special efforts to develop small and cottage industries. In 1995-96 about 33 lakh persons were employed in these industries.

Development of Organized Sector

Many people are getting employment in organized public and private sectors. In 1995-96, nearly 340 lakh persons got employment in large industries. In 1961, organized public sector provided employment to 70 lakh persons; now it provides employment to 1 crore and 92 lakh persons. Likewise, in 1961 organized private sector provided employment to 50 lakh persons; in 2000 it provided employment to 89 lakh persons.

Employment Exchanges

Government has set up about 890 employment exchanges offering information on the possible vocational avenues. These exchanges do not provide employment directly but are of great assistance in directing the job-seeker to the possible areas of employment.

Employment Guarantee Scheme

This Scheme has been launched in man; states, such as, Maharashtra, West Bengal, Kerala, Rajasthan etc. Under the scheme unemployed persons are given economic assistance.

Employment Assurance Scheme

The Employment Assurance Scheme (EAS) was launched in 1994 with the objective to provide 100 days of unskilled manual work to the rural poor who are seeking employment.

Prime Minister's Integrated Urban Poverty Eradication Program (PMIUPEP)

This programme has been implemented in 1995-96. This programme aims at to provide employment to the urban poor. It will cover 50 lakh urban poor living in 345 towns.

The Swaran Jayanti Rozgar Yojana

This plan began on December 1, whereas launching of this yojana, previous programmes meant for providing employment to urban unemployed like Nehru RozgarYojana and Prime Minister Integrate Urban Poverty Eradication Programme were merged into it.

Jawahar Gram SamridhiYojana

JawaharRozgarYojana has been restructured as Jawahar Gram Samridhi Yojana with effect from April 1999. This Yojana has been formulated to improve the quality of life of the rural poor by providing the additional gainful employment.

Other Programmes

The Government has launched other employment and poverty alleviation programme as under:

1. Pradhan MantriGramodayaYojana (PMGY)
2. Pradhan MantriGramodayaYojana (GraminAwas)
3. Pradhan MantriGramodayaYojana-Rural Drinking water project.
4. Pradhan Mantri Gram SadakYojana (PMGSY)
5. Autyodya Anna Yojana.
6. Jai Prakash Rozgar Guarantee Yojana (JPRGY).
7. Valmiki AmbedkarAwasYojana (VAMBAY).

Suggestions

Despite the measures taken by the government, India remains a country experiencing severe unemployment problems.

It is desirable to reduce tax rates and increase government spending which will eventually increase the aggregate demand and the rate of economic growth. Reduction of income tax would work as an incentive for the unemployed as well as employed. It is an attractive proposition which motivates the unemployed to join the

labour market and the existing workforce to strive harder.

- Lower tax rates increase the disposable income of people and thus increase consumption and purchasing power leading to high demand (AD).
- The interest rates should be decreased which would lower the cost of credit and encourage people to spend and invest. Also, the exchange rates would get reduced and which would lead to increase export.
- Career Counseling should be provided at school level.
- financial assistance can be provided to unemployed workers who moved to established areas which have high employment.

Conclusion

India is a fast growing economy. There has been enormous improvement in the unemployment scenario since the time it was recognized as a challenge. The government is implementing various measures for increasing the employment rate and has succeeded to a great extent. Participation of women and the marginalized groups speaks about the success of the policy measures. The wide spread skill development programmes have gained popularity across the nation. With better enforcement of the strategies mentioned above, the employment level can be significantly improved.

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BEHAVIOURAL CHANGE AMONG ADOLESCENTS IN THE IMPLEMENTATION OF RED RIBBON CLUB PROGRAMME: AN OVERVIEW

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Red Ribbon club is a voluntary on camps intervention program for adolescents in higher educational institutions in Tamil Nadu. It is initiated and supported by Tamil Nadu. It is initiated and supported by the Tamil Nadu State AIDS Control Society (TANSACS) and implemented through multi-sectoral collaboration, particularly, using the services of cadre officers of the State's National Service Scheme (NSS). The programme addresses the knowledge, attitude and behaviour of adolescents in the interrelated areas of HIV / AIDS and sexuality, as demanded by their age, environment and life style.

HIV/AIDS is a global pandemic that is weakening the developing world. The number of people living with HIV continues to increase worldwide. HIVis a virus that destroys the immune system, leading to opportunistic infections The progression from initial infection with HIV to end stage AIDS varies from person to person. This epidemic has started much early in African countries. Eastern Europe and some of the Asian countries are experiencing early phase and the epidemic is rapidly increasing in these countries. Mostly the younger generations are infected. In Asia, 7.4 million people are living with HIV. According to WHOs recent report says that India is having large number of HIV/AIDS cases worldwide. The recent estimate done by National AIDS Control Organization [NACO] reports that 5.1 million HIV infected people are living in India. Tamilnadu, Maharashtra, Karnataka, Andhra Pradesh, Manipur and Nagaland are reported by NACO as highly HIV prevalent states in India. The first case of HIV/AJDS in the country was detected in Tamilnadu in 1986.

All the countries now have National AIDS Prevention and Care Programmes and are organizing efforts to combat the spread of HIV which include sex education, condom programming, providing STD services and ensuring blood safety. Another important lesson learned is the need to prioritize programme activities.

Adolescents are considered as a powerful segment of each society. During this stage, they are very energetic, physically and mentally. If their energy is properly utilized, the process of development accelerates, if not, it retrogrades. It is the reason that each nation pays a greater attention over adolescents. A turning point in life where people wither make or break themselves The process of tapping adolescents power in educational institutions offers an added benefit i.e., teachers who are important catalysts in social community can work to keep AIDS from spreading. Providing sex education for adolescents is universally considered the most effective way to initiate prevention activities focusing on behavioral change.

Behaviour change happens in the context of the individual, the groups and the community. It is not just an event, but a process taking place over a long period of time, ranging from a stage of unawareness through awareness and trying out new behaviours to reaching sustained change. Behaviour change is first of all a personal responsibility, but it is very difficult to achieve alone. Community support is essential for a sustained change in behavior.Behavioural change is needed among the adolescents.

Tamilnadu is a forerunner in HIV/AIDS Prevention and Control activities. In Tamilnadu, there are many organisations which provides

HIV/AIDS Prevention and Control activities. The important key player in the state is Tamilnadu AIDS Control Society [TNSACS]. It provides sex education among adolescents through Red Ribbon Club Programme.

Objectives of the Study

- To study the nature of HIV / AIDS Prevention and Control Programmes which provides through Red Ribbon Club (RRC) among adolescents
- To assess the awareness regarding RRC Programme among the adolescents.
- To analysesthe change in the behavior among adolescents in the implementation of the Red Ribbon Club.

Methodology

Rapid assessment were adopted in this study. Interview method was used. Both qualitative and quantitative information were obtained from the adolescents with the help of pre-test and post-test questionnaire.

Coverage of the RRC Scheme

The RRC Scheme keeps at the centre students of higher education institutions who are invariably in the age group of 18-25. The scheme covers universities (except Medical and allied), Arts and Science Colleges, Engineering Colleges, Agricultural and Law Colleges and Polytechnics Around 75 laksh students receive their education in nearly 1000 institutions, Women account for 40-45% of the student's strength of the Post-graduate Program in the state and 50-55% of the undergraduate programmes.

Area of the Study

In Tamil Nadu, Red Ribbon club Project implemented in 1000 higher educational institutions. Tirunelveli District has been chosen as the area of the study. In Tirunelveli District RRC programme implemented in 46 colleges except medical and Paramedical colleges.

Sample Size

In Tirunelveli District, 5 Arts and Science Colleges were selected for this study. 10 students as RRC volunteers in each college were selected for data collection through Pre-test and Post-test. So, totally 50 samples were selected for this study.

Selection of Respondents

50 RRC Volunteers as respondents have been selected for the study from 5 Arts and Science Colleges i.e. St. Xaviers College, Palayamkottai, Thiruvalluvar College, Papanasam, Sri Parasakthi Women's College, Courtallam. Mano College, Sankarankoil and Rani Anna Arts College, Tirunelveli. Among 50 respondents, male students were 25 in number and female students were 25.

Nature of HIV / aids prevention and control programmes of RRC

Red Ribbon Club was firstly introduced on July 2005 in all 46 higher educational institutions in Tirunelveli District. After the introduction of Red Ribbon Club, the inaugural function was started in all the colleges at various time. Then, one programme officer was selected for each college to give training with the goals of RRC. During the inaugural function, college students were invited to join as a member in Red Ribbon Club was formed in all the 46 colleges of Tirunelveli District.

Red Ribbon Club (RRC) Programme is a comprehensive Promotional and Prevention intervention to mainstream HIV / AIDS Prevention, mitigation, stigma reduction, life skills, care and treatment among the youth in higher educational institutions in Tamil Nadu and also to prepare and promote peer group educators within and outside the campuses. To achieve the goals of RRC, campus level and District level programmes were conducted in all the colleges. The first Programme of RRC was Peer education Workshop for college youth. In this workshop, basic concepts of HIV / AIDS, sex and sexuality, gender issues, youth vibrancy life skills and skill development training with problem solving were explained for the adolescents.

RRC plays a big role to create awareness for the public through adolescents. For this, they are doing media programmes. By creating awareness through radio and cable network, it will easily reach all the literate and illiterate masses.

Assessment of Awareness regarding RRC Programme among the Adolescents

The lack of awareness puts the people in high risk because they are not able to protect themselves as well as they could not able to utilize the services available to them. Red Ribbon Club is important and effective one to create awareness among the adolescents.

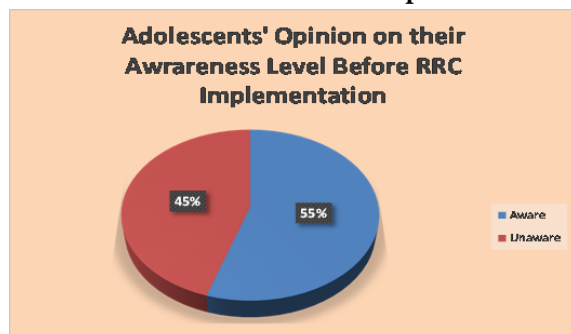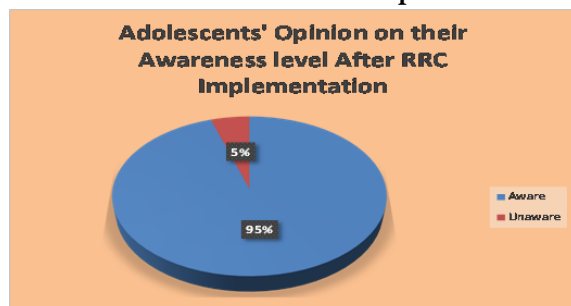**Figure 1.1 Adolescents' Opinion on their Awareness Level Before RRC Implementation**

Figure 1.2 Adolescents' Opinion on their Awareness Level After RRC Implementation

This study indicates that during Pre-test that is before the formation of RRC, only 55 Percent of the adolescents are aware of HIV / AIDS but the remaining 45 Percent of the respondents are unaware of HIV / AIDS. But during the post-test that is after the formation of RRC today 95 percent of the adolescents are fully aware of HIV / AIDS and the remaining 5 Percent of the respondents are not fully unaware but they are partially aware after the formation of Red Ribbon Club in Tirunelveli District.

In addition to this, oratorial competition for blood donation awareness, Eassay competition for sexual based adolescents' problem, Quiz Programnme, seminar on HIV / AIDS, creating HIV / AIDS awareness given by the adolescents for the public. Then, the sub committees were formed to strengthen the RCC. Tamil Nadu AIDS Control Society with technical support from Centre for Disease Control (CDC), Atlanda Prepared a manual of curriculamprogramme to provide education for the adolescents. CurriculamProgramme includes dimensions in growth and development, STD, HIV / AIDS, Sex, Sexuality and gender and life skill education for prevention of HIV / AIDS. These are the nature of Red Ribbon Club programmes which is processing among the adolescents.

Analyses the Change in Behaviour among the Adolescents in the Implementation of RRC

As the epidemic of HIV is progressing in to the third decade it had posed a lot of challenges to the humanity. To change this situation, Red Ribbon Club plays a prominent role among the adolescents.. Because, its main goal is to protect the youth community as well as the public through adolescents. This RRC provides a great impact on college youth. Particularly, this study assess the behavioural change among the adolescents. Through RRC, 100 percent of the students got knowledge on STI (Sexually Transmitted Infection), RTI (Reproductive Tract Infection) and HIV / AIDS. Due to the formation of RRC, myths and misconceptions are reduced i.e. about masturbation, menstration and opposite sex attraction etc. among the adolescents.. As a result of the implementation of RRC Programme, there is lot of changes in the behaviour occurred among them 78 percent of the adolescents are willing to donate blood in the efforts of RRC. Through cultural Programmes, they gained much knowledge on sexual behaviour. Before the information of Red Ribbon Club, youth were got partial knowledge regarding HIV / AIDS. But after that; they got much knowledge about HIV / AIDS.

Kind of RRC activities of Celebrating Life Module for changes in theirbehaviour

Sl.No	Activities of Celebrating Life Module
1.	Basic of STI/HIV/AIDS
2.	Socio-Cultural Influences
3.	Evaluation of Self-Esteem
4.	Fundamental Life Skills
5.	How to Lead a healthy life
6.	Setting boundaries to prevent HIV
7.	How to say 'No' assertively
8.	Stigma and Discrimination towards HIV/AIDS

Celebrating Life Module is very important programme to shape the life of the adolescents. This programme plays a key role for changing their behavior very easily. It is added as part V curriculum activity in the colleges.

Figure 1.3 Adolescents' Opinion on their Changes in Behaciour
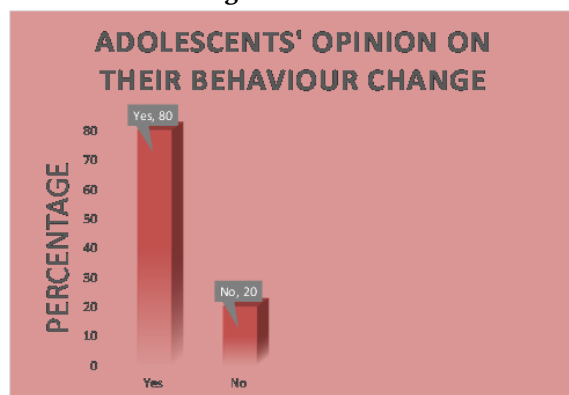
80percent of the adolescents opined that they have got changes in their behavior and only 20 percent of them do not have changes in their behavior through life skill programme which was conducted by Red Ribbon Club Programme. It indicates that most of the respondents' life is getting changes through the activities of RRCProgramme.

Conclusion

Red Ribbon Club opened the door to adolescents from their ignorance and illiteracy. Its effect will definitely reach the masses through them. After the implementation Red Ribbon Club Programme, majority of the male adolescents are well aware of the programme compared to female adolescents. Adolescents have achieved more knowledge of sex education on HIV/ AIDS as well as life skills. Majority of the adolescents have got changes in their behavior by life skill training programme which was conducted by RRCProgramme. Many unknown things regarding their livesopened their eyes after the implementation of the Red Ribbon Club Programme.We can say that the efforts of Tamil Nadu State AIDS Control Society lit the lamp in the life of every adolescent.

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WOMEN EMPOWERMENT: CHANGES AND CHALLENGES

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Abstract

This paper attempts to analyze the status of Women Empowerment in India and highlights the changes and Challenges of Women Empowerment. Today the empowerment of women has become one of the most important concerns of 21st century. But practically women empowerment is still an illusion of reality. We observe in our day to day life how women become victimized by various social evils. Women Empowerment is the vital instrument to expand women's ability to have resources and to make strategic life choices. Empowerment of women is essentially the process of upliftment of economic, social and political status of women, the traditionally underprivileged ones, in the society. It is the process of guarding them against all forms of violence. The study is based on purely from secondary sources. The study reveals that women of India are relatively disempowered and they enjoy somewhat lower status than that of men in spite of many e fforts undertaken by Government. It is found that acceptance of unequal gender norms by women are still prevailing in the society. The study concludes by an observation that access to Education, Employment and Change in Social Structure are only the enabling factors to Women Empowerment.

Keywords: *Women Empowerment, Education, Health, Socio-Economic Status, Crimes against women,*

Introduction

In the history of human development, woman has been as important as man. In fact, the status, employment and work performed by women in society are the indicator of a nation's overall progress. Without the participation of women in national activities, the social, economical or political progress of a country will be stagnated. Playing multiple roles in families, women have already proven their worth, but still their condition on social and economical fronts has not been up to the mark and in many parts of the world they are forced to lead a miserable life. In such a scenario, it calls for immediate attention to empower them and create conducive environment for their social and economic upliftment. Women constitute half of the humanity, even contributing two-thirds of world's work hours. She earns only one-third of the total income and owns less than one-tenth of the world's resources. This shows that the economic status of women is in pathetic condition and this is more so in a country like India. Among total Indian population of 1027.10 million, women constitute 495.73 million. Therefore, "women constitute nearly 50 per cent of population, perform two-thirds of the work and produce 50 per cent of food commodities consumed by the country. They earn one third of remuneration and own 10 per cent of the property or wealth of the country"

Concept of Empowerment

Empowerment is a multi-dimensional process, which should enable women or group of women to realize their full identity and power in all spheres of life. It consists of greater access to knowledge and resources, greater autonomy in decision making to enable them to have greater ability to plan their lives, or to have greater control over the circumstances that influence their lives and free from shocks imposed on them by custom, belief and practice. Generally development with justice is expected to generate the forces that lead to empowerment of various sections of population in a country and to raise their status specially in case of women. Empowerment of women is essentially the process of upliftment of economic, social and political status of women, the traditionally underprivileged ones, in the society. It is the process of guarding them against all forms of violence. Women empowerment involves the building up of a society, a political environment, wherein women can breathe without the fear of oppression, exploitation, apprehension, discrimination and the general feeling of persecution which goes with being a woman in a traditionally male dominated structure. Women constitute almost 50% of the world's population but India has shown disproportionate sex ratio

whereby female's population has been comparatively lower than males. As far as their social status is concerned, they are not treated as equal to men in all the places. In the Western societies, the women have got equal right and status with men in all walks of life. But gender disabilities and discriminations are found in India even today. The paradoxical situation has such that she was sometimes concerned as Goddess and at other times merely as slave.

Need of Women Empowerment

Women empowerment refers to increasing the spiritual, political, social, educational, gender or economic strength of individuals and communities of women. Women's empowerment in India is heavily dependent on many different variables that include geographical location (urban / rural) educational status, social status (caste and class) and age. Policies on Women's empowerment exist at the national, state and local (Panchayat) levels in many sectors, including health, education, economic opportunities, gender based violence and political participation. However there are significant gap between policy advancements and actual practice at the community level. Reflecting into the "Vedas Purana" of Indian culture, women is being worshiped such as LAXMIMAA, goddess of wealth; SARSWATI MAA, for wisdom; DURGA MAA for power. The status of women in India particularly in rural areas needs to address the issue of empowering women. About 66% of the female population in rural area is unutilized. This is mainly due to existing social customs. In agriculture and Animal care the women contribute 90% of the total workforce. Women constitute almost half of the total population, perform nearly 2/3 of its work hours, receive 1/10th of the world's income and own less than 1/ 100th the world property. 70% of people living in poverty are women. Lower sex ratio i.e. 933, the existing studies show that the women are relatively less healthy than men though belong to same class. They constitute less than 1/7th of the administrators and mangers in developing countries. Only 10% seats in World Parliament and 6% in National Cabinet are held by women.

Hindrances of Women Empowerment:

The main Problems that were faced by women in past days and still today up to some extent:

1. Gender discrimination
2. Lack of Education
3. Female Infanticide
4. Financial Constraints
5. Family Responsibility
6. Low Mobility
7. Low ability to bear Risk
8. Low need for achievement
9. Absence of ambition for the achievement
10. Social statuses
11. Dowry
12. Marriage in same caste and child marriage (still existing)
13. Atrocities on Women (Raped, Kicked, Killed, Subdued, humiliated almost daily.)

Signs of Women Empowerment

Indian women seem to have finally embarked on their journey to empowerment, the findings of the fourth National Family Health Survey (NFHS) data released by the Union health ministry on Tuesday shows that the fertility rate or the number of children each woman has dropping—a good sign given India's burgeoning population—the health of women and children remains a major concern, according to NFHS data. However, the data shown the overall health of Indian women

Data shows a marked increase in the percentage of women in the age group of 15-49 years having a savings account that they use themselves.

Among the 13 states whose data has been released, Goa at 82.8% has the maximum number of women who manage their own finances. However, it is Tamil Nadu which has outdone all other states with the numbers increasing from 15.9% in the third round of NFHS (NHFS-3) done in 2005-2006 to 77% in the fourth round. Tripura, Sikkim and Goa have also registered an increase of 40-42 percentage points from NFHS-3. But states like Bihar at 26.4% still have a long way to go, though the numbers have increased from 8.2% in NHFS-3. The Jan Dhan Yojana, launched in 2014 to ensure every Indian household has access to a banking facility, also strived to ensure that in

most cases, the account is opened in the name of the female member of the household. The government was of the view that women are more responsible and will be more careful in managing finances.

NFHS-4 has added an indicator—women owning a house and/or land (alone or jointly with others). Bihar, which otherwise is at the bottom in other indicators, tops the list with 58.8% women owning some form of property. Tripura finishes second at 57.3%, while West Bengal at 23.8% has the least number of women owning property.

The data also breaks the myth that women do not have a say in decision-making in what is perceived to be an inherently patriarchal society. At 95.3%, Sikkim tops the indicator—in the number of married women who usually participate in household decisions. West Bengal has shown the maximum increase from 70.2% in NFHS-3 to 89.8% in NFHS-4.

Interestingly, the percentage of women participating in household decision-making has fallen from 83.8% to 76.7% and from 87.4% to 84% in Haryana and Tamil Nadu, respectively.

Only 28% women in India own a mobile phone as against 43% men, according to Connected Women 2015, a report by Groupe Speciale Mobile Association (GSMA), an international grouping of mobile operators and related companies. The gender gap of mobile ownership, the report said, is as much as 114 million.

A new category added to the women empowerment section in NFHS-4—women's having a mobile phone that they themselves use—shows how this trend might be changing. Goa tops the list with 80.9%, while Sikkim closely follows at 79.8%. Though Meghayala (64.3%), Tamil Nadu (62%) and Uttarakhand (55.4%) show some gains, Madhya Pradesh lags far behind at 28.7%.

Female Literacy

On other indicators like the percentage of literate women, Goa again takes the cake with 89% literate women in the age group of 15-49 years. This is closely followed by Sikkim at 86.6%, while Haryana and Madhya Pradesh have had the highest growth from 60.4% and 44.4% in NFHS-3 to 75.4% and 59.4% in NFHS-4, respectively.

In Bihar, the female literacy rate improved from 37% in the last survey to 49.6% in the current one. Haryana, Karnataka and Madhya Pradesh, too, showed a rise in female literacy rates from 60.4% to 75.4%, 59.7% to 71.7% and 44.4% to 59.4%, respectively. In Tamil Nadu, the female literacy rate improved from 69.4% to 79.4% and in West Bengal, it rose to 71% from 58.8%.

Fertility and Maternal Mortality Rates

The fertility rate or the number of children each woman has is dropping, a finding that is expected to bring cheer to policymakers given India's already sizeable population standing at 1.27 billion population and its youth bulge.

In Bihar, the fertility rate has come down from four children per woman in NHFS-3 to 3.4 in NHFS-4. Some of the sharper declines in fertility rates were found in states with significant populations like Haryana, Madhya Pradesh and West Bengal—with the numbers coming down from 2.7 to 2.1, 3.1 to 2.3 and 2.3 to 1.8, respectively. In Tamil Nadu and Karnataka, other states with a sizeable populations the decline in fertility rates was marginal from 1.8 to 1.7 and 2.1 to 1.8. Data also showed that women were taking the lead in the case of adopting family planning methods. The findings showed, for example, that women were the ones opting for methods like sterilization rather than men. In the case of Haryana, the female sterilization rate was 38.1% compared to 0.6% among men. In the case of Bihar, the female sterilization rate was 20.7% compared with nil for men. And the case of West Bengal, the female sterilization rate was 29.3% while for men it was 0.1%.

Institutional deliveries shot up in most states and UTs. In Bihar, it rose threefold—from 19.9% in 2005-06 to 63.8% in 2014-15. Similarly, over the same period, institutional deliveries rose from 35.7% to 80.5% in Haryana and 26.2% to 80.8% in Madhya Pradesh.

Health remains a concern

While the overall health status of Indians has improved, there are glaring gaps in the health condition of children. In almost all the 13 states and two union territories, nutrition rates among children fared better than NHFS-3. But the

number of stunted (height for age) children, a key indicator of malnutrition, in certain states has remained high, even though it has slightly reduced in the past decade. In Bihar, Madhya Pradesh and Meghalaya, more than 40% of children were found stunted. In 2005-06, Bihar had 55.6% of its children stunted, which reduced to 48.3% in 2014-15. In Madhya Pradesh, stunting reduced from 50 to 42 and in Meghalaya from 55.1 to 43.8.

Anaemia continues to haunt children as well as women. In Goa, the percentage of anaemic children has gone up from 38.2% in 2005-06 to 48.3% in 2014-15. In Madhya Pradesh, there has been a marginal decline from 74% to 68.9%.

In Meghalaya, the percentage of anaemic women in productive age has gone up from 46.2% during NFHS-3 to 56.2% in NFHS-4. Haryana follows a similar trend—from 56.1% to 62.7%.

Another worrying factor is reduced awareness among women about HIV/AIDS. The percentage of women with comprehensive knowledge of HIV/AIDS in MP reduced from 20.3% to 18.1% of total women in the state. Similarly, in Bihar, it decreased from 11.7% to 10.1%. Tripura is an exception which saw an increase from 11.8% to 28%. It is pertinent to note here that India's HIV programme has been facing government apathy in recent times. Last year, massive shortages in medicines of HIV/AIDS in government facilities were reported across the country. It was only after it became a national issue that problems in procuring medicines were resolved.

Reasons for the Empowerment of Women

Today we have noticed different Acts and Schemes of the central Government as well as state Government to empower the women of India. But in India women are discriminated and marginalized at every level of the society whether it is social participation, political participation, economic participation, access to education, and also reproductive healthcare. Women are found to be economically very poor all over the India.

A few women are engaged in services and other activities. So, they need economic power to stand on their own legs on per with men. Other hand, it has been observed that women are found to be less literate than men. According to 2001 census, rate of literacy among men in India is found to be 76% whereas it is only 54% among women. Thus, increasing education among women is of very important in empowering them. It has also noticed that some of women are too weak to work. They consume less food but work more. Therefore, from the health point of view, women folk who are to be weaker are to be made stronger. Another problem is that workplace harassment of women. There are so many cases of rape, kidnapping of girl, dowry harassment, and so on. For these reasons, they require empowerment of all kinds in order to protect themselves and to secure their purity and dignity. To sum up, women empowerment can not be possible unless women come with and help to self-empower themselves. There is a need to formulate reducing feminized poverty, promoting education of women, and prevention and elimination of violence against women.

Challenges

There are several constraints that check the process of women empowerment in India. Social norms and family structure in developing countries like India, manifests and perpetuate the subordinate status of women. One of the norms is the continuing preference for a son over the birth of a girl child which in present in almost all societies and communities. The society is more biased in favor of male child in respect of education, nutrition and other opportunities. The root cause of this type of attitude lies in the belief that male child inherits the clan in India with an exception of Meghalaya. Women often internalize the traditional concept of their role as natural thus inflicting an injustice upon them. Poverty is the reality of life for the vast majority women in India. It is the another factor that poses challenge in realizing women's empowerment.

There are several challenges that are plaguing the issues of women's right in India. Targeting these issues will directly benefit the empowerment of women in India

Education

While the country has grown from leaps and bounds since independence where education is concerned the gap between women and men is severe. While 82.14% of adult men are educated,

only 65.46% of adult women are known to be literate in India. The gender bias is in higher education, specialized professional trainings which hit women very hard in employment and attaining top leadership in any field.

Poverty:

Poverty is considered the greatest threat to peace in the world, and eradication of poverty should be a national goal as important as the eradication of illiteracy. Due to this, women are exploited as domestic helps.

Health and Safety

The health and safety concerns of women are paramount for the wellbeing of a country and are an important factor in gauging the empowerment of women in a country. However there are alarming concerns where maternal healthcare is concerned.

Professional Inequality

This inequality is practiced in employment sand promotions. Women face countless handicaps in male customized and dominated environs in Government Offices and Private enterprises.

Morality and Inequality

Due to gender bias in health and nutrition there is unusually high morality rate in women reducing their population further especially in Asia, Africa and china.

Household Inequality

Household relations show gender bias in infinitesimally small but significant manners all across the globe, more so, in India e.g. sharing burden of housework, childcare and menial works by so called division of work.

Constitutional Provisions for Empowering Women in India

- Equality before law for all persons (Article-14).
- Prohibition of discrimination on grounds of religion, race, caste, sex or place of birth (Article 5(I)).
- However, special provisions may be made by the state in favors of women and children Article 15(3).
- Equality of opportunity for all citizens relating to employment or appointment to any office under the state (Article 16).
- State policy to be directed to securing for men and women equally the right to an adequate means of livelihood (Article 39(a); (v) equal pay for equal work for both men and women (Article 39(d).
- Provisions to be made by the state for securing just and humane conditions of work and maternity relief (Article 42).
- Promotion of harmony by every citizen of India and renouncement of such practices which are derogatory to the dignity of women Article 51A(e).
- Reservation of not less than one-third of total seats for women in direct election to local bodies, viz; Panchayats and Municipalities (Articles 343(d) and 343 (T).

Conclusion

Contemporary societies across the world have been exposed to the major processes of transformation on social and economic development front. However, these processes have not been implemented in a balanced way and have augmented gender imbalances throughout the world in which women remained the ultimate sufferer. The situation has adversely affected the pace of women empowerment. Therefore, we require a completely transformed society in which equal opportunities of growth can be suitably provided to women so that they can co-exist with their male counterparts contributing equally in all the factors responsible for the growth of society in a larger sense. If we want to bring about women empowerment in the true sense, there is a crying need for the elimination of the male superiority and patriarchal mindset. Also, women need to be given equal opportunities for education and employment without any sense of discrimination. Unless there is attitudinal change in society towards women, merely arming them with legal and constitutional rights will be simply inadequate.

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