

A Comparative Study On Constraints During Mensuration Among Paliyar And Kanikkar Tribes Of Tamil Nadu

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Abstract

Traditional menstrual practices have long been a delicate and diplomatic issue in India. The beliefs and taboos prevent women from participating in several of their daily socio-cultural meetings and practice. Women in many parts of India must be prepared and informed about menstruation, which causes them to confront several issues and challenges at home, school, and work. It also imposes numerous unneeded constraints on women's daily lives. As a result of these factors, the current research intends to discuss how Knowledge and Traditional practices are related to menstrual health among tribes. The purpose of this dissertation is to investigate the constraints of Paliyar and Kanikkar women during menstruation.

Keywords – Culture, Menstrual Hygiene, Kanikkar, Paliyar

Introduction

Paliyar and Kanikkar are two of the 36 Tamil Nadu tribes listed in the Gazette of India. They are a forest tribe that inhabits the hills of the Theni and Kanyakumari Districts and they reside in the Western Ghats in the southern part of Tamil Nadu. There are 36 sub-tribes in the state. There are significant tribes such as Malayali, Toda, Kurumbas, Paniyan, Irular, Kattunayakan, Kanikkar, Palliyan, Kadar, and others. Toda, Kota, Kurumbas, Kattunayakan, Paniyan, and Irular are called 'Primitive Tribes. In Tamil Nadu, the total number of persons identifying as tribal is 5.20 lakh or 1.07 per cent of the total population. The proportion of persons in the state who are members of Scheduled Tribes is significantly lower than the percentage of individuals in India who are members of Scheduled Tribes. Between 1971 and 1981, there was a 67% growth in the population of the Scheduled Tribes. The removal of tribal area limitations in 1981 has been related to the astounding expansion that has transpired since then. According to the census, Tamil Nadu had a total tribal population of 761,421 persons in 2011. Even though Tamil Nadu is home to 36 unique tribes and sub-tribes, just 28.9% of the state's population is literate.

In Indian society, menstruation is still considered unclean or dirty. Inadequate or erroneous information about menstruation is frequently the source of unwarranted constraints in menstrual girls' everyday regular activities. The cyclical occurrence of menstruation has given rise to several myths and superstitions throughout history (OUJ & VE, 2008). A woman is always told to observe the constraints that society has set for her in the guise of tradition (Kaundal & Thakur, 2014). Menstruation, despite being a normal phenomenon, has traditionally been treated with secrecy in many Asian cultures. As a result, adolescent knowledge and information regarding reproductive functioning and reproductive health issues are limited (Adhikari, 2007).

Traditional menstrual hygiene practices and constraints

Several traditional norms and beliefs, socioeconomic situations, and physical infrastructure can and do influence menstrual practices. Traditional menstrual practices have long been a delicate and diplomatic issue in India. The beliefs and taboos prevent adolescent women from participating in several of their daily socio-cultural meetings and practice. Women in many parts

of India are unprepared and uninformed about menstruation, which causes them to confront several issues and challenges at home, school, and work. It also imposes numerous unneeded constraints on women's daily lives like not bathing, combing hair, or entering holy locations. Dietary limitations include bans on consuming foods such as rice, curd, potato, and sugarcane. Certain taboos are observed and are superstitious, such as refraining from participating in daily activities after Menstruation begins, having a bath shortly after waking up, sleeping in a separate room, and washing soiled clothes every day in the morning, consider Menstruation filthy, but no scientific basis has been provided.

Need of the Study

The topic of menstruation has been subject to neglect or misinterpretation as a result of prevailing social taboos. While there have been studies undertaken to gain a better understanding of cultural practices that restrict women during menstruation, there is a notable dearth of research specifically focused on indigenous populations. Consequently, the objective of this study is to conduct a comparative analysis of the cultural limitations observed within the Paliyar and Kanikkar tribes.

Statement of the Problem

Menstruation is associated with a diverse range of cultural beliefs, myths, and taboos. Stigma surrounding menstruation gives rise to violations of various human rights, most notably the right to human dignity. Unwritten norms and customs pertaining to the management of menstruation and interactions with menstrual women are prevalent across all aspects of tribal society. Within the realm of unspoken regulations imposed upon women, only a limited number can be deemed advantageous, while the majority of them carry the potential for adverse consequences. It is the study's motivation.

Objectives of the Study:

- To compare the limitations imposed on women in relation to menstruation of Paliyar and Kanikkar tribes.

Review of Literature:

- Sridhar D. & Gauthami N. (2017) study found that education and awareness play an important role in sustaining menstrual hygiene. Hygiene education should be provided at all levels. Bad cultural practises are expected to be addressed at the community level through intervention.
- Sharada Devi (2015) she believes that all such taboos and restrictions on women have been created by men in the name of religion. Even today, in this modern cultured world, there are women who are not awake of the use of sanitary napkins and who still follow barbaric traditions.
- Khanna, Goyal and Bhawsar (2005) Ventured to find out the vital issues related to menstrual practices and its relationship with reproductive morbidity among the adolescent girls in the Rajasthan state. The study showed that a higher amount of girls were not aware of menstruation when they first experienced it. For them the mothers, sisters and relatives and friends were the major sources of information.
- Dhanasekharan, (2005) conducted study in Vatlagundu and Dindigul district of Tamil Nadu revealed that 65 per cent of the samples were not fully aware regarding maintenance of sanitary latrines and remaining have only partial awareness.
- Abdad et al., (2006) conducted their study in tribal areas of Madhya Pradesh reported that majority (98%) of respondents having knowledge about family planning methods and six per cent of them have the knowledge on tubectomy, and 13 per cent of them have knowledge on vasectomy and 26 per cent have knowledge on both.

Area of the Study

The area selected for the study is Theni and Kanyakumari districts. Theni district has 16 tribes with a total population of 1835 distributed among six blocks and five municipalities. Out of that, 690 are Paliyar tribe with 334 women, who are primarily dense in Kadamalaikundru and Periyakulam blocks, which has a significant population of 38% of the total tribal population, Kadamalaikundru panchayat, with 98% of the Paliyar population, resides is chosen for this study. The villages of Ayyanarkoil, Karattupatti, and Endapully provided 197 samples for this study. The Kanyakumari district has 21 tribes with a population of 7282, all distributed among eight blocks and four municipalities. Out of that, 3409 are Kanikkar tribe with 1734 women, who are primarily dense in

Tiruvattar block, which has a significant population of 58% of the total tribal population in seven panchayats, Peechiparai panchayat, with 93% of the Kani population, resides is chosen for this study. The villages of Maangamalai, Mudavanpetrai, and Mothiramalai provided 315 samples for this study.

Study Methodology

The current study used a method of sampling known as cluster sampling. It is one of the types of probability sampling in which the population is divided into subgroups (clusters), such as school, districts or geographic regions, from which a sample is drawn randomly. Each cluster will ideally be a small version of the entire population. Even though these groups of people are dispersed across the Western Ghats, two clusters were chosen at random for this study. In order to obtain the analysis effective, the data was analyzed from the primary and secondary data source that was gathered through structured interviews. Multistage sampling is adopted in different stages, like purpose and random sampling. In the statistical design, descriptive statistics like percentage analysis are used to compare one quantity against another.

Study result

Constraints	Practices	Paliyar		Kanikar	
		F	%	F	%
Religious	Entering religious places and participation in ceremonies	185	94%	270	86%
Social	Absenteeism to School	16	8%	34	11%
	Playing with friends	18	9%	7	2%
	Attending marriage and family functions	11	6%	5	2%
Cultural	Doing household work	125	63%	17	5%
	Entering kitchen& Isolation	174	88%	297	94%
	Bathing	188	95%	310	98%

In the above table the constraints for the women during the menstruation has been categorized into Religious, Social, and Cultural.

Religious Constraints

The limitations for the religious constraints encompass two aspects: the act of entering religious locations and the

participation in religious ceremonies. The findings of this study indicate that a considerable proportion of the Paliyar and Kanikar respondents, specifically 94% and 86% respectively, reported being prohibited from entering holy places and participating in religious activities during menstruation. Furthermore 6% and 14% of Paliyar and Kanikar, respectively, are granted permission to engage in religious activities and gain access to sacred spaces. This phenomenon can be attributed to the adherence to alternative religious beliefs.

Social Constraints

The social constraints include three primary limitations: the ability to attend school, engage in social activities with friends in public spaces, and participate in marriage and family events. The results of this study suggest that a significant percentage of the Paliyar and Kanikar participants, namely 23% and 46% respectively, reported being granted permission to engage in activities like as attending school, socializing with their peers, and participating in family gatherings. Moreover, a little 73% of individuals belonging to the Paliyar community and a mere 54% of individuals belonging to the Kanikar community are not afforded the authorization to partake in the aforementioned social activities.

Cultural Constraints

The cultural boundaries comprise three fundamental constraints, specifically: the individual is prohibited from engaging in domestic chores, experiencing isolation, restricted access to the kitchen, and bathing. The results of this study suggest that a significant percentage of the Paliyar and Kanikar participants, namely 95% and 98% respectively, experience constraints in terms of bathing, while 88% and 94% are prohibited from engaging in various kitchen activities and are socially isolated.

Findings and Discussion

The study revealed that the Paliyar and Kanikar tribes continue to enforce restrictions on women during menstruation. The religious constraints, as determined by the respondents, are firmly established and adhered to diligently by followers of Hinduism. Within the Kanikar tribe, there exist individuals who are granted permission to engage in religious practices while adhering to faiths other than the predominant one. It is encouraging to observe that

a significant proportion of individuals belonging to the Paliyar and Kanikar tribes, do not encounter any hindrances in engaging in social gatherings throughout their menstrual cycles. It is encouraging to note that the adolescent girls who were given permission to attend school were not subject to severe constraints about their capacity to attend school and participate in extracurricular activities. In contrast to the influence of religion; cultural limitations exert a significant impact. Women from both cultures face several limits that hinder their participation in household activities, including restricted access to the kitchen, which eventually results in their social isolation.

Overall, religious and culture restraints are factors put on adolescent and women during menstruation. Cultural practices observed among adolescent females belonging to tribal communities encompassed various aspects, such as religious constraints, specialized bathing schedules, sleeping arrangements on the floor, avoidance of handling preserved food items, and adherence to dietary constraints during menstruation. The acquisition of education is of utmost importance for individuals in order to address the impact of cultural factors that lead to unclean menstrual practices and to decrease rates of school absenteeism.

Menstruation is associated with a diverse range of cultural beliefs, myths, and taboos. The stigmatization of menstruation represents a violation of certain fundamental rights, most notably the right to human dignity. The practices during menstruation exhibit a good correlation with the empowerment of women in household decision-making. If a woman possesses decision-making authority within the family, it is more likely that she will also possess the capacity to make decisions pertaining to the constraints during menstruation.

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