



**MGNREGS AND WOMEN HEALTH:
MAKING A DIFFERENCE
A CASE STUDY OF MOHANIA SUB-DIVISION
OF KAIMUR DISTRICT IN BIHAR**

Niharika Kumari

Coordinator, Department of Business Economics,
St. Xavier's College of Management
and Technology, Patna

The National Rural Employment Guarantee Act 2005 renamed as MGNREGA (in 2009), launched in February 2006, has generated employment and enhanced lifestyle of the rural population, especially women population. The increased access to paid work due to MGNREGS has had a positive impact on women's socio-economic status and general well-being of women workers. If we talk about women worker's physical and mental health, reduction in domestic violence, access of health facilities through increased mobility and increase in decision-making opportunities are few indicators which show the positive impact of this scheme. Rural women are mostly illiterate and are often subjected to domestic violence by their husbands or the people in their families. Most of the times their health issues are ignored and they face mental as well as physical health problems. However, with this rural employment scheme, the condition of rural women has considerably improved relatively. Women beneficiaries have started taking decisions related to health care especially about family planning which is the main concern of women health. Access to health facility has also improved with increased mobility after joining this scheme. This paper tries to access the differences which are coming after implementation of this scheme in these indicators affecting women workers mental and physical health through a primary survey conducted in Mohania sub-division of Kaimur district in Bihar.

Keywords: Rural Employment, Domestic Violence, Mobility

INTRODUCTION

In the year 2006, a promising law National Rural Employment Guaranty Act with right of employment came into force. In the year 2009, this act was renamed as Mahatma Gandhi National Rural Employment scheme. MGNREGS has now become a household word. It is probably better known and understood than any other Indian law. As we know beyond the promise of employment, MGNRGA has other noteworthy features which are very encouraging for women workers. As a rural wage employment programme MGNREGS recognized the relevance of incorporating gender equity and empowerment in its design. Various provisions under the Act and its guidelines, aim to ensure that women have equitable and easy access to work, decent working condition, equal payment of wages and representation on decision making bodies. Hence this scheme can be seen as a ray of hope for rural women.

In the case of rural Bihar, it is a long thought notion that women, in particular, are lagging behind men in different spheres of life such as labour, employment, health, nutrition, education and social participation. If we will see from the dimension of human development health is an important factor for human well being and growth. But in general, women healthcare is not in the priority list of the rural poor family. This tendency results in ignorance of the mental and physical health problems of the women. They are also facing domestic

violence which affects their mental and physical health both. Although empowerment of women is the auxiliary objective of MGNREGS this scheme can play a big role in the life of women by giving them work in their village with dignity. If the financial status of women increases it affects many dimensions of their life and health is one of them. As through this scheme, women are getting work at their doorsteps so they are taking this opportunity in enhancing their financial independence and started taking care of their health also.

LITERATURE REVIEW

Many of the scholars have analysed the potential of MGNREGS in changing the scenario in rural India. The implementation process, the socio-economic impact of this scheme, its usefulness for rural women, awareness about its provision etc. have been also examined by different authors.

Pankaj and Tankha(2010) have mentioned in their papers that empowerment of rural women has emerged as unintended consequences of NREGS. By using and thoroughly examining the field survey reports about the empowerment effects of the NREGS (Now MGNREGA) on rural women in Bihar, Jharkhand, Rajasthan and H.P the authors of this article have arrived at certain conclusions. As per their view, the women workers have benefited/gained from this scheme, due to payment of wages at a fixed rate and achieved equality in gender. Previously in the rural area, there were discriminatory wages between male and female labourers. The benefits have been realized through income-consumption effects, intra-household effects and the enhancement of choice and capability. Their increased presence in the gram sabha, the increasing number of women speaking out in the gram sabha, frequent interaction with government officials and PRI representatives and access to bank and post-offices are new developments.

Dreze and Khera (2011) in their book 'battle for employment guarantee' presents an informed and authentic picture of the ground realities. The essay is based on field studies of MGNREGA. A wide range of issues is examined such as entitlement, corruption, people's perceptions of MGNREGA, women's empowerment, mobilization of unorganized workers, and socio-economic impact of MGNREGA. A comparative analysis of the challenges and successes in the implementation of MGNREGA in different States including Orissa, Himachal Pradesh, and Rajasthan is also provided.

Dreze and Oldiges (2011) provided an all-India picture of the implementation of MGNREGA. They have focused specifically on 2006-07 and 2007-08, the first two years of implementation. The whole analysis is based on the data extracted from the official website of the MoRD.

Sharma (2012) has attempted to examine the progress, problems and impact of MGNREGA. He has analyses in detail the positive aspects of the scheme and also pointed out the problems which must be taken care of. He rightly observes that the MGNREGA has uncovered the weakness of the earlier programmes through the introduction of the right based framework,

time-bound accession to fulfil guarantee demand-based resource availability and accountability. However inadequate worksite facilities, inadequate training, lack of childcare facilities, poor "worksite" management, negligence of social audit are some of the areas of concern. In his word "the youth, the less educated people, women, backward castes/classes have got benefits largely from the scheme and hence the performance of the MGNREGA has been good. However, there is scope for improvements like focused planning, shifting to permanent asset and infrastructure building activities, skill up-gradation for enhanced employability, reducing transaction cost, better monitoring, avoiding peak seasons in agriculture and extension to urban areas."

Xavier and Mart (2014) in their study try to evaluate the impact of MGNREGA on socio-economic empowerment of women in Kalakkanmoi panchayat of Sivaganga district, Tamilnadu. This study finds that MGNREGS has given the opportunity to the rural people to increase their household income and expenditure and also improved the standard of living of the rural poor. While talking about problems women are facing they mentioned about poor worksite facility, hot climate condition and reduction of leisure time.

This literature review gives significance of this research also. As other papers have analysed different aspects of this scheme, it was thought that women health and MGNREGS will be a good area to explore.

OBJECTIVE

To access the differences which are coming after implementation of MGNREGS in the indicators such as access of health facility, domestic violence, the decision about self-health care and family planning affecting women workers mental and physical health.

RESEARCH METHODOLOGY

Study Area and Sampling

This study was conducted in four villages- two each from two blocks namely Nuaon and Mohania in Mohania Subdivision of Kaimur district in Bihar. Two groups of Blocks were framed based on the distance from the Subdivision headquarter. In group number one those blocks have been selected which were within fifteen Kilometers of the radius of the headquarter of the subdivision and in group number two those blocks have been included which were located at a distance of more than fifteen Kilometers from the Subdivision headquarter. Selection of blocks and Panchayat were done based on the distance and from each panchayat 1 village was selected randomly and from each village 30 MGNREGS, women beneficiaries were selected randomly.

Data Collection

Table: 1 Distribution of Sample

District	Block	Panchayat	Village	Sample Size
Kaimur	Nuoan	Pajraon	Sonwarsha	30
		Chandesh	Sotwa	30
	Mohania	Akorhimela	Jigina	30
		Bellauri	Bellauri	30
TOTAL				120

This study is based on primary data. Primary data for this study was collected through a survey conducted in the four villages using a close-ended questionnaire. For qualitative information focus group discussion (FGD), in-depth interviews and case studies were also used.

Data Analysis

The quantitative data was fed and analysed with the help of statistical software. In the first step, the raw data from the survey schedules were fed with the help of MS Excel. The fed data was then cleaned, arranged and then tabulated according to the objective of the study. Simple and complex cross tables were formulated which were used for understanding the findings of the field survey. For analysis of the data percentage and averages were used. The graphical presentation is also used wherever it is required. For hypothesis testing, Minitab software was utilized. First of all, for normality test Anderson- Darling test has been performed and after this paired t-test was applied for the test of significance.

RESULTS AND DISCUSSION

Increase in The Household Income and Share of Women

Generally, it has been seen that rural families in India are male dominant i.e. most of the decisions taken within a family is headed by the male member of the family whether it is related to health or family planning. The role of women regarding decision making was found to be very negligible. One of the main reasons for this was that women in rural areas didn't enjoy economic independence in spite they add their labour to the income of the family in many ways. A primary change that MGNREG scheme brought to the rural society is that they provided income directly in the hands of the women workers which gave them their much needed economic independence. The survey found that due to this change, the overall status of women in the family regarding taking important decisions improved a lot.

The survey aimed to determine the nature of the change in the beneficiaries' household income after joining the scheme. Survey results indicated that working under MGNREGS had added additional income to the household earning. It was also essential to know what the particular role of MGNREGS was in the total increase of household income and what percentage of the

total MGNREGS earning of the household has been contributed by women beneficiaries. From this perspective, the survey tried to find out the proportion of earning from women-workers out of total MGNREGS earning and total household earning. The summarized data is given in the table below.

As we can see that the percentage contribution of women workers in total MGNREGS income

Table: 2 Women's Contribution to Household's Income through MGNREGS (2012-13)

Village Name	Women income from MGNREGS as % of total MGNREGS income of households Yearly ((in %)	Share of women MGNREGS income in the total income of households ((in %)
Sonwarsha	50.47	11.89
Sotwa	49.43	11.01
Jigina	50.21	12.31
Bellaury	64.36	16.29
Total	56.32	12.98

Source: Field Survey

of the household is near about 50 per cent which can be said to be a good achievement.

As MGNREGS has emerged as an employment opportunity to the rural poor people, it has given additional income to the beneficiaries' households. The data gathered during the survey indicates that there is an increase in the average income of the women beneficiaries' households after joining this scheme. In this increase in income, there is a role of earning from MGNREGS also. A Significance test was needed to evaluate whether a statistically significant increase existed between the average income of the beneficiaries household before and after joining MGNREGS. The hypothesis taken in this study was:

HYPOTHESIS

H₀: There is no difference between households' income before and after joining MGNREGS

H₁: There is an increase in the income of beneficiaries' households after joining MGNREGS.

To test the normality of data Anderson- Darling test has been performed which indicated that the data are from normal distribution. The result of normality test is given below.

Result of Anderson-Darling test on women migrant before and after MGNREGS:

Since $p > 0.05$ it is concluded that data is normally distributed. After getting the normality

Summary of Anderson-Darling test: Before and After joining MGNREGS

	Before joining MGNREGS	After joining MGNREGS	Remarks
Mean	11.25	6.25	There is decrease in the mean after MGNREGS
Stddev	1.5	1.25	There is difference in St. dev
p value	0.125	0.234	p values are >0.05 so the data are normal distributed

result paired't' test has been conducted and the result is summarized below.

Results of Paired't' test for Comparing the Average Income per Household Before and After Joining MGNREGS

The two set of income data i.e. yearly average income per household after and before joining MGNREGS were analyzed with help of Statistical tool (Minitab) and below is the result for the paired test methodology on these data:

Paired t for Average income per household. Before and After MGNREGS

	N	Mean	StDev	SE Mean
Average income After MGNREGS	4	25205	1673	836
Average Income Before MGNREGS	4	15750	1102	551
Difference	4	9455	1052	526

95% lower bound for mean difference: 8218

T-Test of mean difference =0 (vs > 0): T-Value = 17.98 p-Value = 0.000

The above result of paired 't' test to evaluate whether a significant increase existed between the mean of the average income of households before and after joining MGNREGS was significant, t value = 17.98, P-value is 0.000 i.e. less than 0.05, indicating that there is a significant increase in the average income of the beneficiaries households after joining MGNREGS. Since the value of p is less than 0.05 the null hypothesis is rejected and the alternative hypothesis is accepted. Therefore it is statistically proven that there is a significant increase in the income of these households after joining MGNREGS and women's' income was also an important part of it.

Decision About Health Care For Self

This increase in money indirectly started making differences in the life of women. With this economic empowerment, women status has uplifted in her house and this upliftment gave

them more respect in their family and a better environment to think about their health. It is quite common in the rural areas that the male counterpart least care about the health of the female in the family and women also hesitates to disclose their health-related issues with others. The survey collected data on how women are participating in several household decisions and who usually makes them. Specifically, decision-related to own's health care, and family planning, are considered for analysis and data about deciding on health care for self (before and after joining MGNREGS) percentage difference showing the change is represented in the table given below

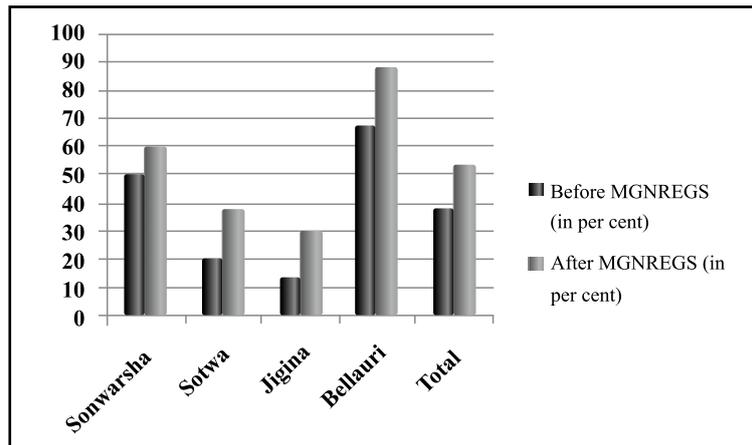
The summarized data gives us the difference which is coming in the thinking and belief system

Table: 3, Impact of MGNREGS on taking Decision about Health Care (Before and after joining MGNREGS)

Village Name	Before MGNREGS (in per cent)	After MGNREGS (in per cent)
Sonwarsha	50	60
Sotwa	20	37
Jigina	13	30
Bellaury	67	87
Total	37.5	53.3

Source: Field Survey

**Figure: 1
Impact of MGNREGS on taking Decision about Health Care (Before and after joining MGNREGS)**



Source: Field Survey

of the women beneficiaries' which is slowly making them understand that they should take care about their health which has increased from 37.5 per cent to 53.3 per cent after joining MGNREGS was only 37.5.

DECISION ABOUT FAMILY PLANNING

Although nature has bestowed women with the power of creation but still in the rural areas the decisions regarding family planning are mostly taken by the male members. Multiple deliveries without proper nutrition and gap between the children affect both the mental and physical health of a woman. Survey also enquired about who usually take the decision about family planning and is there any difference or change visible because of economic independence of the women after joining MGNREGS.

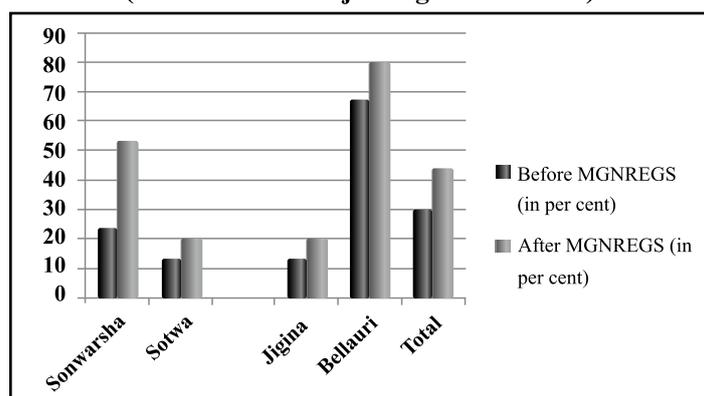
Percentage difference (before and after joining MGNREGS) in making this major decision

Table: 4, Impact of MGNREGS on taking Decision about Family Planning (Before and after joining MGNREGS)

Village Name	Before MGNREGS (in per cent)	After MGNREGS (in per cent)
Sonwarsha	23	53
Sotwa	13	20
Jigina	13	20
Bellaury	67	80
Total	29.2	43.2

Source: Field Survey

Figure: 2 Impact of MGNREGS on taking Decision about Family Planning (Before and after joining MGNREGS)



Source: Field Survey

related to family planning by the women workers by themselves indicates that this scheme has given them the confidence to speak about their wellbeing. The data show that before joining this scheme the percentage was 29.2 across the four villages which has increased to 43.2 per cent. Although the difference is not big at least now they have started taking these important decisions which not only affect their health but also the level of the whole family.

CASE STUDY 1: Sharda Devi from Bellauri village in Mohania block proudly said that it was she who insisted to her husband on adopting family planning measures and that the decision was entirely her own. She agreed that now a day's less number of children is better for every family. Manakidevi from the same village shared that she too had taken the decision for family planning herself and got it done successfully.

MOBILITY OF WOMEN WORKERS TO THE HEALTH FACILITY

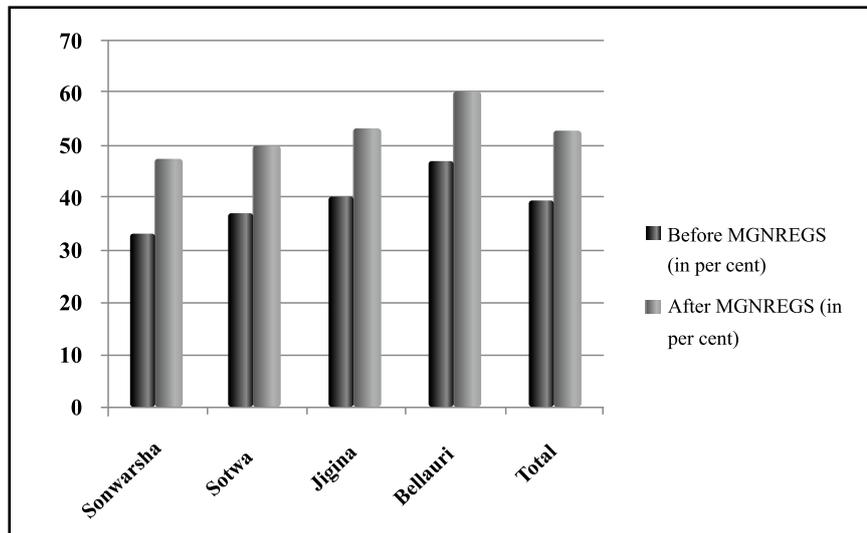
In rural areas due to a variety of social, religious and economic reasons mobility of women is generally restricted. Sometimes this restriction may be due to safety, illiteracy among the women and orthodox belief that women should stay at the home. Owing to this fact, if there is any health-related problem women are facing they need someone to accompany them to go to the health centers. In this process many of the times the problem gets ignored and delayed which makes their health sometimes critical also. With the inception of MGNREGS now they have cash in their hand and they have also started taking decisions about its expenditure. During the focus group discussion, they expressed their views and said that working under MGNREGS gives them a chance to meet many people and learn new things that they wouldn't know if they won't join the work and just doing household work staying at their home.

**Table: 5, Mobility of Women Workers to the Health facility
(Before and after joining MGNREGS)**

Village Name	Before MGNREGS (in per cent)	After MGNREGS (in per cent)
Sonwarsha	33	47
Sotwa	37	50
Jigina	40	53
Bellauri	47	60
Total	39.17	52.5

Source: Field Survey

**Figure No: 3 Mobility of Women Workers to the Health Facility
(Before and after joining MGNREGS)**



Source: Field Survey

The changing situation of women going to the health facility after joining MGNREGS can be seen from the table below, where we see that the women are seen to be more independent, and can see them going out to these health centers by themselves. Earlier, before MGNREGS, nearly 39 per cent of the respondents were going alone to the health centre now after MGNREGS, it has increased to 52 per cent. This difference tells us about the positive part that now they are realizing the importance of their health and started taking steps to be healthy and fit for work.

DOMESTIC VIOLENCE AT HOME

Living with the constant threat of domestic violence is considered as a source of disempowerment of women as considered by experts. It leads to both short term and long term detrimental effect on the health and welfare of women and their children. It is quite common in rural areas as well. Rural women are mostly illiterate and are often subjected to domestic violence by their husbands or the people in their families. They are exploited or tortured, and it lowers women's self-esteem and confidence. The women's basic need is that the family and her husband respect her and give her that level of freedom and independence that is necessary for the development of the people. It is also one of the causes of women being subjugated to dominance and dependence. But this trend has started to change a little bit with the onset of the programme. By providing economic independence the programme is bringing about change in the social status of the women. This survey revealed the 49 per cent of the women respondents were subjected to violence in their home.

Table: 6, Domestic Violence

Village Name	Women worker faced Domestic violence (in per cent)
Sonwarsha	40
Sotwa	53
Jigina	57
Bellaury	47
Total	49.25

Source: Field Survey

TYPE OF DOMESTIC VIOLENCE

It was very difficult to find the actual position of domestic violence respondents were facing in their home. When asked about any physical or mental violence they tried to hide the fact. But when asked after taking them in confidence they started revealing the fact. As indicated in the above table 49 per cent admitted that they were facing domestic violence at home. When asked about the form of domestic violence they shared narratives of the severe and mild form of violence and also about the humiliation and abuse in front of others Domestic Violence may take the severe form like beating, making injuries, sprains, deep wound dislocation etc., or maybe mild scuffle; slapping, pulling hair etc. or it may be in the form of abuse or humiliation. Women are often subjected to public humiliation by their husbands in public. This decreases the morale as well as the confidence of the women to confidently move out in society and work. They are often then too embarrassed to go out of their houses for fear of being made fun of by people. In the survey, it was revealed that about 41 per cent of the respondents faced a severe form of violence and about 17 per cent faced mild form of violence. About 20 per cent were subjected to humiliation and 22 per cent were abused by their husbands in front of others or public. Economic dependency is one of the prime factors responsible for domestic violence. But after MGNREGS, the survey revealed that the instance of domestic violence and public humiliation has also come down considerably due to the elevation of the status of working women in society.

CHANGE IN THE BEHAVIOR OF THE HUSBAND

The study aimed to analyze the change in the behaviour of the husband's after the women started working under the MGNREGS scheme. It can be seen from the table below that in Sonwarsha village 75 per cent women saw a change in the behaviour of their husbands after the earnings under the MGNREGS. Even in Sotwa village 56 per cent saw a change in the behaviour of their husbands. Hence, we can say that the MGNREGS has brought about a positive change in the behaviour of the husbands and many women are no longer subjected to any humiliation by their partners. A sense of self-respect and dignity is a very essential

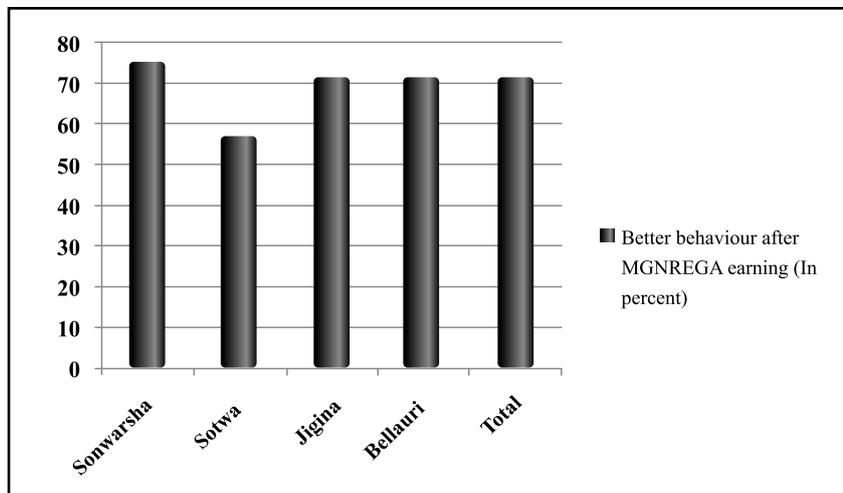
component of living a decent and a quality life when the women are not subjected to any torture, be it mental or physical. Villages like Jigina and Bellaauri have seen an overall change in the attitude and behaviour of their husbands after they have started earning wages under the MGNREGS.

Table: 7, Change in Behavior after MGNREGA Earning

Village Name	Better behaviour after MGNREGA earning (In per cent)
Sonwarsha	75
Sotwa	56
Jigina	71
Bellaauri	71
Total	67.79

Source: Field Survey

Figure No: 4, Change in Behavior of Husband after MGNREGA Earning



Source: Field Survey

Another type of change was also visible which is in the frequency of occurrence. Women workers reported that earlier before MGNREGS their husbands always use to humiliate or abused them. In some cases, a severe and mild form of domestic violence was a daily routine for them. But once they have joined the scheme and started working with their husband in the

same scheme the frequency of occurrence of domestic violence began to lessen. In many cases they stopped torturing them and "always" basis has changed in "some time" or "very often". The frequency changed from the always category to that of some time or very often. They also disclosed that the severe form of domestic violence had reduced drastically.

Case Study:-Aasha Devi lives in Jigina village of Akorhimela Panchayat of Mohania Block in Kaimur district. She has 4 daughters and one son. Her family members used to harass her because she had more daughters' than her son. Hence, she lives now separately with her husband. After doing work in MGNREGS she is now supporting her husband in maintaining her family.

The survey data (both qualitative and quantitative) suggest that women workers are more confident about their roles as contributors to family expenditure and their work decision and that they are also becoming more assertive about the factors which affect their mental and physical health.

CONCLUSION AND SUGGESTIONS

After analyzing the changes which are coming in the indicators taken in this study to know the impact of MGNREGS on the physical and mental health of women workers it can be concluded that economic independence has increased the morale and confidence of the women workers and sense of self has also been developed. With this change in their thinking process, they have started taking care of the factors affecting their mental and physical health. During this survey, a few important suggestions were shared by the women workers to make this scheme more beneficial for women workers.

- During the fieldwork, it was observed and also shared by the workers that the worksite facilities such as the shed, first aid kit, crèche facility were not present. Therefore worksite facilities such as the shed, first aid kit, and crèche facility should be provided.
- Women friendly tools have to be made available to women it will minimize health problems caused by heavy tools and will also increase their productivity.
- There should be some provisions related to maternity benefits such as advance payment of wages or paid maternity leave etc.
- Some awareness programmes related to women rights and also about specific provisions for women under this act will also increase their participation.
- Women's presence in the selection of work will also be beneficial.
- Women cell to listen to the problems faced by women workers may also be helpful. Despite all the grey areas in the implementation of MGNREGS a silent revolution is taking place in rural India for women in. Furthermore, it is popular among the women workers, who routinely ask if more work could be made available to them under MGNREGS. Happy and satisfied faces of women workers show us the power of MGNREGS in bringing change in rural women workers life.

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