

Occupational Mobility and Health Awareness in the Dhobis of Duliajan and Dibrugarh Towns of Upper Assam

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Abstract: The Dhobis in Assam is passing through gradual change in Health awareness due to occupational mobility since independence. The traditional way of life of Dhobis has been changing gradually. Therefore, this paper aims to analyse the occupational mobility and its role in health awareness. The data were collected on 15th June to 25th Aug 2022 by administering structured interview schedule to a random sample of Dhobi respondents in Dibrugarh and Duliajan town in upper Assam.

Keywords: Dhobis, Occupational mobility, Industrialisation, Urbanisation, Health awareness, Social change, Assam etc.

I. INTRODUCTION

Occupational mobility among Dhobis signifies the rise of Dhobis which relates to the issue of health awareness and social change. Spread of education, reservation policies of government have led to the Occupational mobility among them. At present, the educated Dhobis have entered into modern occupations, improving their social position. Upward occupational mobility is observed among them. This movement refers to intragenerational and intergenerational mobility, specially originating in the industrialisation and urbanisation of the society which brings occupational opportunities and also results in health awareness among them.

The Dhobi (washermen) is a caste primarily specialized in washing clothes. They occupy a lower position in the society. They are economically backward, socially depressed and educationally neglected section of the society. Dhobis in Assam are presented by witnessing change in health awareness which is not uniformly patterned throughout the state. The difference is observed even among different groups of Dhobis. Under influence of urbanization, industrialization, modernization, globalization and other forces, the changes like new occupations, decline of

traditional values, taboos and customs are observed. They are losing their traditional culture and original way of living is changing gradually. At present, Dhobis are experiencing the modernity, fast change in their life. They are now working as teachers, lawyers, doctors, engineers, leaders and administrators at different levels. However, most of Dhobis are engaged in the low paid jobs like carpenters, masons, car drivers, rickshaw pullers, vegetable shopkeepers, betel leaf sellers, grocery shopkeepers, stationers etc. Besides, a large number of Dhobi youths are either unemployed or underemployed.

In urban areas, occupational mobility is observed among them. Some Dhobis work as daily labourers, carpenters, masons, helpers, drivers etc. Some of them are engaged in vegetable selling, grocery shop, cloth selling, betel leaf selling, Xeroxing, cycle repairing, wristwatch repairing, mobile repairing, photo shop, sweet shop, decorating and dry cleaning etc. Some Dhobi women work as domestic servants in towns. Some Dhobis are government employees, middle class farmers and working in private firms too. However, one can perceive occupational mobility and the resultant change in social behaviour regarding health awareness among Dhobis. A question arises: What kind of interrelationship is perceived between occupational mobility and social change regarding health awareness among Dhobis in the urban and industrial areas of Assam, specially the towns in Upper Assam?

II. REVIEW OF LITERATURE

I. Studies on Social Mobility and Social Change among Dhobis in India

Keshav C Kaisth (1987) who employed three approaches to study occupational prestige; namely, reputational, subjective and objective and finds that the Dhobis along with other castes has significant change in their occupation. GaurangRanajanSahay (1998) examined the relationship between caste, occupation and the status of Jajmani system and found that caste occupation of Dhobi along with other castes has undergone notable changes in contemporary time. SubhadraMitraChanna (1999) supports the agglomeration thesis on the origin of caste system as put forwarded by Karve (1961) and supported by Berreman, Habib and others by using data of Dhobis (washermen) of Delhi. She found that social and ritual practices of Dhobis are different

from higher castes. She adds that lifestyle of Dhobis has changed due to sanskritization and westernisation. She also observes that they adopt higher caste Hindu traits like observing fast, going on pilgrimage etc.

Hridaya Narayan Singh (1987) who discusses distribution of power and privileges in a Dobhi block says that caste and education are the important factors which determine status in the block. Thakurs are economically, socially and politically higher than any other castes: 73% of teachers are Thakurs and Brahmins who have agricultural land and other material assets too. He also found that three fourths of Pradhans are Thakurs and Brahmins. The upper castes occupy 80% position in the cooperative societies and other institutions. The Dhobis and other scheduled castes have reservation in the village panchayats, cooperative societies and at other levels, but a small minority of Dhobis have access to sources of power and privileges.

Thus, these studies reveal that the Dhobis has undergone significant change in their occupations. Though social and ritual practices of Dhobis are different from higher caste, sanskritisation, westernisation and modernisation have brought significant changes in their life style.

III. OBJECTIVE:

To understand the interrelationship of occupational mobility and health awareness among Dhobis of upper Assam.

IV. METHODOLOGY

In the study, the data are collected from a random sample of 428 Hindi and Bengali Dhobis of Dibrugarh district by using interview schedule. 30% respondents are taken through a stratified sample from the universe i.e., 1397. Firstly, it was divided into three age groups (18-35, 36-59 and 60 & above) by random sampling method and then the samples were selected from the two genders equally in each of the age groups. The study has analysed the empirical data in a comparative perspective of occupational mobility among Dhobis. At first, tables are classified and analysed and findings are drawn by analysing average of two communities on occupational aspects.

V. OCCUPATIONAL MOBILITY AND THE CHANGE IN HEALTH AWARENESS PATTERNS

Health awareness among Dhobis have been changing gradually during last two decades under influence of urbanization, industrialization, modernization, globalization and other forces that lead occupational mobility. It is studied through the following factors: i) Change in Attitude towards Safe Drinking Water. ii) Change in Treatment Pattern.iii) Change in Sanitation Habit. andiv) Change in Bathing Habit which also refers change in their health awareness patterns.

❖ Occupational Mobility & the Change in Health Awareness

Occupational mobility enhances health awareness about safe drinking water, Change in Treatment Pattern, use of toilet and bathroom and etc. The Pattern of drinking water among Dhobis is seen to be changing as they move towards the use of filtered water. The relationship between occupational mobility and the change in attitude towards drinking water is shown in the following table:

Table 1.1

| Status of the Respondents' | No. of the Respondents | | | | | | | | |
|-----------------------------------|------------------------|------------------------|----------------|----------------------|------------------------|--------------|----------------------|------------------------|----------------|
| | Hindi Speaking Dhobis | | | Bengali Dhobis | | | Total | | |
| | Using Filtered Water | Using unfiltered water | Total | Using Filtered water | Using unfiltered water | Total | Using Filtered water | Using unfiltered water | Total |
| Experienced Occupational Mobility | 32 (32.98) | 147 (58.56) | 179 (51.43) | 3 (5.08) | 11 (52.38) | 14 (17.5) | 35 (22.43) | 158 (58.08) | 193 (45.09) |
| Experienced Occupational Mobility | 65 (67.01) | 104 (41.43) | 169 (48.56) | 56 (94.91) | 10 (47.61) | 66 (82.5) | 121 (77.56) | 114 (41.91) | 235 (54.90) |
| Total | 97 (100) | 251 (100) | 348 (100) | 59 (100) | 21 (100) | 80 (100) | 156 (100) | 272 (100) | 428 (100) |

Source: Field Study Conducted 15th June to 25th Aug 2022.

Occupational Mobility and the Change in Attitude towards Safe Drinking Water among Dhobis (Percentage in Parentheses)

The table reveals that 77.56% occupational mobile Dhobis use filtered water while 41.91% use unfiltered water. Thus, most of the respondents who experienced occupational

mobility use filtered water. Thus, it reveals that occupational mobile respondents are more aware towards using safe drinking water. It is also observed that Comparatively Bengali Dhobis (94.91%) with occupational mobility than their counterparts (67.01%) use filtered drinking water.

Treatment pattern have been changing among the occupationally mobile Dhobis. It has been changing from faith healing to Government hospital, private hospital. It is given in the following table:

Table 1.2
Occupational Mobility and the Change in Treatment Pattern among the Dhobis
(Percentage in Parentheses)

| Satus of the Respondents' Occupational Mobility | No. of the Respondents | | | | | | | Grand Total | | | |
|--|------------------------|------------------|---------------|----------------|----------------|------------------|--------------|----------------|------------------|---------------|----------------|
| | Hindi Speaking Dhobis | | | | Bengali Dhobis | | | Govt. hospital | Private hospital | Faith healing | Total |
| | Govt. hospital | Private hospital | Faith healing | Total | Govt. hospital | Private hospital | Total | | | | |
| Experienced No Occupational Mobility | 145 (57.53) | 28 (31.46) | 6 (85.71) | 179 (51.43) | 9 (28.12) | 5 (10.41) | 14 (17.5) | 154 (54.22) | 33 (24.08) | 6 (85.71) | 193 (45.09) |
| Experienced Occupational Mobility | 107 (42.46) | 61 (68.53) | 1 (14.28) | 169 (48.56) | 23 (71.87) | 43 (89.58) | 66 (82.5) | 130 (45.77) | 104 (75.91) | 1 (14.28) | 235 (54.90) |
| Total | 252 (100) | 89 (100) | 7 (100) | 348 (100) | 32 (100) | 48 (100) | 80 (100) | 284 (100) | 137 (100) | 7 (100) | 428 (100) |

Source: Field Study Conducted 15th June to 25th Aug 2022.

It is observed that 45.77% Dhobis seek treatment in government hospital 75.91% seek treatment in private hospital, and 14.28% seek treatment in faith healing those who have experienced occupational mobility. So, there is shift towards a treatment in Government/ Private Hospitals. It is also added that comparatively, more of the Bengali Dhobis with occupational mobility than their Hindi speaking counterparts go to hospitals. Occupational mobility brings change in sanitation habit among Dhobis. Awareness regarding sanitation habits generally increases in occupational mobile Dhobis. The following table show the relationship between occupational mobility and kachcha, Pacca, semi pacca toilets and open defecation among Dhobis:

Table 1.3

| Status of the Respondents' Occupational Mobility | No. of the Respondents | | | | | | | | | | | | | |
|--|------------------------|----------------|--------------------|-----------------|----------------|-----------------|---------------|--------------------|--------------|-----------------|----------------|--------------------|-----------------|----------------|
| | Hindi Speaking Dhobis | | | | | Bengali Dhobis | | | | Grand Total | | | | |
| | Kachcha Latrine | Pacca Latrine | Semi-Pacca Latrine | Open Defecation | Total | Kachcha Latrine | Pacca Latrine | Semi-Pacca Latrine | Total | Kachcha Latrine | Pacca Latrine | Semi-Pacca Latrine | Open Defecation | Total |
| Experienced No Occupational Mobility | 11 (64.70) | 111 (48.05) | 31 (44.92) | 26 (83.87) | 179 (51.43) | 4 (80) | 6 (11.53) | 4 (17.39) | 14 (17.5) | 15 (68.18) | 117 (41.34) | 35 (38.04) | 26 (83.87) | 193 (45.09) |
| Experienced Occupational Mobility | 6 (35.29) | 120 (51.94) | 38 (55.07) | 5 (16.12) | 169 (48.56) | 1 (20) | 46 (88.46) | 19 (82.60) | 66 (82.5) | 7 (31.81) | 166 (58.65) | 57 (61.95) | 5 (16.12) | 235 (54.90) |
| Total | 17 (100) | 231 (100) | 69 (100) | 31 (100) | 348 (100) | 5 (100) | 52 (100) | 23 (100) | 80 (100) | 22 (100) | 283 (100) | 92 (100) | 31 (100) | 428 (100) |

Occupational Mobility and the Change in Sanitation Habit among the Dhobis

(Percentage in Parentheses)

Source: Field Study Conducted 15th June to 25th Aug 2022.

The table reveals that 58.65% of the occupationally mobile Dhobis using pacca latrine, 61.95% of those using semi-pacca latrine, 31.81% of those using-kacha latrine and 16.12% of those defecation in open space. Thus, it is seen that the open defecators are largely the Dhobis (83.87%) who have no occupational mobility. The occupationally mobile Dhobis show a movement from kachcha to semi-pacca/pacca latrines. It is also seen that comparatively, more of the occupationally mobile Bengali Dhobis than their Hindi speaking counterparts have pacca/semi-pacca latrines and none of the Bengali Dhobis defecate in open space.

Occupational mobility is also associated with awareness regarding use of bathroom among the Dhobis. It is shown in the following table:

Occupational mobility and the Change in Bathing Habit among the Dhobis

| Status of the Respondents' Occupational Mobility | No. of the Respondents | | | | | | | | | | | | | |
|--|------------------------|----------------|---------------------|-----------------|----------------|------------------|----------------|---------------------|--------------|------------------|----------------|---------------------|-----------------|----------------|
| | Hindi Speaking Dhobis | | | | | Bengali Dhobis | | | | Grand Total | | | | |
| | Kachcha Bathroom | Pacca Bathroom | Semi-Pacca Bathroom | Open Defecation | Total | Kachcha Bathroom | Pacca Bathroom | Semi-Pacca Bathroom | Total | Kachcha Bathroom | Pacca Bathroom | Semi-Pacca Bathroom | Open Defecation | Total |
| Experienced No Occupational Mobility | 19 (61.29) | 106 (45.88) | 18 (42.85) | 36 (81.81) | 179 (51.43) | 7 (58.33) | 2 (3.77) | 5 (33.33) | 14 (17.5) | 26 (60.46) | 108 (38.02) | 23 (40.35) | 36 (81.81) | 193 (45.09) |
| Experienced Occupational Mobility | 12 (38.70) | 125 (54.11) | 24 (57.14) | 8 (18.18) | 169 (48.56) | 5 (41.66) | 51 (96.22) | 10 (66.66) | 66 (82.5) | 17 (39.53) | 176 (61.97) | 34 (59.64) | 8 (18.18) | 235 (54.90) |
| Total | 31 (100) | 231 (100) | 42 (100) | 44 (100) | 348 (100) | 12 (100) | 53 (100) | 15 (100) | 80 (100) | 43 (100) | 284 (100) | 57 (100) | 44 (100) | 428 (100) |

(Percentage in Parentheses)

Source: Field Study Conducted 15th June to 25th Aug 2022.

The above table reveals that 61.97% of the Dhobis using pacca, 59.64% of those using-semi pucca bathroom, 39.53%-of those using kachcha bathroom and 18.18% of those defecating in open space have occupational mobility and most 81.81% of the defecators have no occupational mobility. It is also found that comparatively, more of the occupationally mobile Bengali Dhobis have pucca (96.22%) and semi pucca (66.66%) bathrooms.

VI. RESULTS AND DISCUSSIONS

(i) From above analysis, it is observed that there is shift towards a treatment in Government/ Private hospitals. Majority 75.91% Dhobi respondents seek treatment in private hospital for treatment that experience occupational mobility. It is also found that comparatively, more of the Bengali respondents (100%) with occupational mobility than their Hindi speaking (99.40%) counterparts go for treatment in hospitals rather than seeking faith healing.

(ii) Occupational mobile respondents (77.56%) are more aware towards using safe drinking water. It is also observed that comparatively, for more of the Bengali respondents with occupational mobility (94.91%) than their counterparts (67.01%) use filtered drinking water.

(iii) The occupationally mobile respondents show a move from kachcha to semi-pacca/pacca latrines. 58.65% of the respondents using pacca latrine, 61.95% of those using semi-pacca latrine, 31.81% of those using-kachcha latrine and 16.12% of those defecation in open space have occupational mobility. The open defecators are largely the respondents (83.87%) who have no occupational mobility. Comparatively, more of the Bengali respondents with occupational mobility than their Hindi speaking counterparts have pacca/semi-pacca latrines and none of the Bengali respondent defecate in open space.

(iv) The occupationally mobile respondents show a move from kachcha to semi-pacca/pacca bathroom. 61.97% of the respondents using pacca, 59.64% of those using-semi-pacca bathroom, 39.53%-of those using kachcha bathroom and 18.18% of those defecating in open space have occupational mobility and most 81.81% of the defecators have no occupational mobility. Comparatively, more of the Bengali respondents with occupational mobility have pacca (96.22%) and semi-pacca (66.66%) bathrooms.

VII. CONCLUSION

Occupational mobility also leads change in Health and sanitation, use of filtered drinking water, treatment in private treatment centre and pacca and semi-pucca latrine and bathroom which is more in Bengali Dhobis than Hindi speaking Dhobis in occupational mobile

respondents. By maintaining, good health, proper hygiene and sanitation they can improve the quality of their life. It also leads wide range of economic development among them.

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