Vol 4 Issue 11 May 2015

ISSN No :2231-5063

International Multidisciplinary Research Journal

Golden Research Thoughts

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RNI MAHMUL/2011/38595 **ISSN No.2231-5063**

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International Recognized Double-Blind Peer Reviewed Multidisciplinary Research Journal
Golden Research Thoughts
ISSN 2231-5063 Impact Factor :3.4052(UIF)
Volume - 4 | Issue - 11 | May - 2015 Available online at www.aygrt.isrj.org

INVOLVEMENT OF RURAL WOMEN IN AGRICULTURAL ACTIVITIES AND FAMILY LIFE EDUCATION

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Short Profile

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ABSTRACT:

Indian women and rural women in particular play many social and economic roles inside as well as outside the home. Rural Indian women are extensively involved in agriculture activities. Agriculture in the so called third world countries depends heavily on manual labour and women constitute the maximum number. The women are the backbone of agricultural workforce but worldwide her hard work has mostly been unpaid. Over the years, there has been a gradual realization of the key role of women in agricultural development and their contribution in the activities like sowing, transplanting, weeding, irrigation, winnowing, storing, food security, horticulture, nutrition and other household activities. Considering the fact, the study was conducted with the objective mainly to study the impact of agricultural activities on knowledge of rural women regarding family life. The study was carried out in Rohtak and Bhiwani district of Haryana state randomly selecting a total sample of 300 women. Two villages from each district i.e. Kanni and Shangi from Rohtak district, Mehrra and Badeshra villages from Bhiwani district were selected randomly .Assessment was done by self structured knowledge inventory on family life education. To measures this, a set of questions were framed. Three categories were framed to depict the level of agricultural activities pattern by subtracting high, medium and low achievable scores. Knowledge on family life was further divided into seven major sub-aspects i.e. personal hygiene, nutrition and health, family planning, maternal and child care, HIV/AIDS and physical

and emotional health. For assessing knowledge in sub- aspects of family life education, three levels (i.e. low, moderate and high) were formed on the basis of achievable scores.

KEYWORDS

Knowledge, Family life, Personal hygiene, Child care and Emotional health. Agricultural Activities.

INTRODUCTION :

Women in the family play a pivotal role in improving the quality of family life, as they constitute one third of country economically active population. In rural areas the women are ignorant about the latest information on different components of family life, which may be due to the poor literacy rate of females. Non availability of time due to involvement of women in agricultural sector is another hindering factor in implementation of the gained knowledge, giving no time for their self and family care (Mathu, 2001).In the recent past there has been a remarkable upsurge of interest in the improvement of quality of family life of rural people.

Along with poverty, illiteracy among women cannot be put aside which mean due to lack of education there is lack of awareness among women regarding health and nutrition. Today also, women are careless about their health, no matter whether they are literate or illiterate. Knowledge enables these women to evaluate the situation and make safe choice based on well developed sense of life. Women carry a disproportion and growing share of economic and domestic responsibility for the family. Nearly 84 per cent of all economically active women in India are engaged in agriculture and allied activities (anonymous, 2002). The extent participation of farm women in decision–making was more in religious, health and hygiene practice in homes area and care of animals and storage of grains in farm area, and she had a say in spending the family income but their decision is repair articles etc, which were very basic to their existence. National Commission on women (2006) has reported that the importance of women in agriculture could be attributed to alleviation of poverty, attainment of food security, promotion of well being but the greatest concern is her contribution is not being recognized.

A healthy and dynamic agricultural sector is an important foundation of rural development, generating strong linkages to other economic sectors. Sustainable Agricultural is one of the most effective ways to respond to the challenges of the rural community. Sustainable Agricultural development seeks food and nutritional security, improved livelihood for our women, safe ecosystem, and sustainable economies of agriculture. Rural livelihood are enhance through effective participation of rural women and communities in the management of their own social, economic and environmental objective by empowering women in rural areas. According to Human Development Report 2013, in rural India in the agriculture and allied industrial sectors, females account for as much as 89.5% of the labour force. In overall farm production, women's average contribution is estimated at 55% to 66% of the total labour. According to a 1991 World Bank report, women accounted for 94% of total employment in dairy production in India. Women constitute 51% of the total employed in forest-based small-scale enterprise.

Nagaraja (2013) stated that women perform key agricultural tasks in all region of the world, ranging from hoeing, seeding, application of fertilizers and pesticides, harvesting, threshing and winnowing and storage of products for marketing. Traditionally, women attend to the care of animals and birds including feeding, providing water, milking, clearing out stables, processing animal products

like butter, cheese etc. and also preparation of cow dung cakes for fuel. All these activities stretch on throughout the day and women work longer hours as compared to their male counterparts.

MATERIAL AND METHOD:

The study was carried out in rural area of Rohtak and Bhiwani district of Haryana state randomly selecting a total sample of 300 women in the age group of 20-30 years (fig-1).Two village from each district i.e. Kanni and Shangi villages from Rohtak district, Mehrra and Badeshra from Bhiwani district were selected randomly .From each village, 75 women were selected randomly. Assessment was done by self structured knowledge inventory on family life education. Frequency and percentages were calculated to have the level of knowledge on different aspects of family life education.

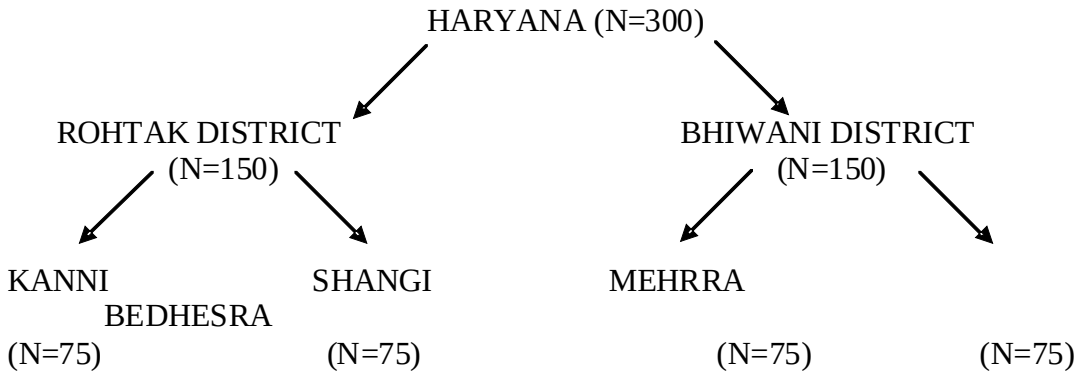


Figure 1. Distribution of samples.

The data were collected through personal visits. Rapport was established with the respondents before conducting the interview. The data were analyzed using the various statistical tools. It has been operational as the degree to which a respondent was involved in various activities like sowing, transplanting, weeding, irrigation, winnowing, storing, food security, horticulture, nutrition and other household activities. To measures this, a set of questions were framed. For assessing knowledge in sub-aspects of family life education, three levels (i.e. low, moderate and high) were formed on the basis of achievable scores. Three categories were also framed to depict the level of agricultural activities by subtracting high, medium and low achievable scores. The data were classified and tabulated in accordance with the requirement of the objective to arrive at meaningful and relevant inferences.

Development of Inventory for Agricultural Activities:

The extent of involvement of women in agriculture and their activities affects the interest she will show in other program to gain knowledge and skill, which indirectly will influence here knowledge related to family life.

Table 1: Inventory for Agricultural Activities

Categories	Code
Low (6-12)	1
Medium (13-18)	2
High (19-24)	3

Regarding the agricultural activities, the table1 indicates that almost equal percentages of respondent from both districts were involved in followed by low, medium and high in agricultural activities.

RESULT AND DISCUSSION:

Knowledge of respondents on family life education

The figure 2 indicates the district wise distribution of respondents for their knowledge level. For the total sample, 43.67 percent respondents were in low category of knowledge on personal hygiene followed by moderate (33.33%) and high (22.00%) category of knowledge. Comparative analysis revealed that 45.30 percent respondents of Bhiwani district in the low category of knowledge on personal hygiene against 42.00 percent respondents from Rohtak district. Whereas, 33.33 percent respondents of Bhiwani district was in moderate category of knowledge on personal hygiene against 35.33 percent respondents in Rohtak district. As far as high knowledge level is concerned, 21.67 percent of Bhiwani district was in category against 22.67 percent of Rohtak district.

Knowledge related to nutrition and health education has been defined as the amount of information or knowledge an individual respondents possessed regarding various areas of health and nutrition component like nutritional deficiency diseases, malnutrition and its impact over human being. It is seen that 45.33 percent respondents were in low category, followed by 32.67 percent in moderate category of knowledge and 22.00 percent in high category. District wise comparison revealed that 44.00 percent respondents were in low category from Bhiwani district against 46.67 percent respondents of Rohtak district. As far as respondent on moderate level of knowledge is concerned, no district wise differences were seen. Whereas 23.30 percent respondents were in high category of knowledge of Bhiwani district against 20.67 percent from Rohtak district.

Figure 2 Further depicts data on knowledge about gender sensitivity. Out of the total sample, 46.33 percent respondents were in low category followed by 39.33 percent respondents in moderate category of knowledge on gender sensitivity. Rests of the respondents (13.33 %) were in high category. District wise comparison showed that 45.30 percent respondents of district Bhiwani were in low category against 47.30 percent respondents of Rohtak district. Whereas 38.70 percent respondents of Bhiwani were in moderate category against 40.00 percent respondents from Rohtak district.

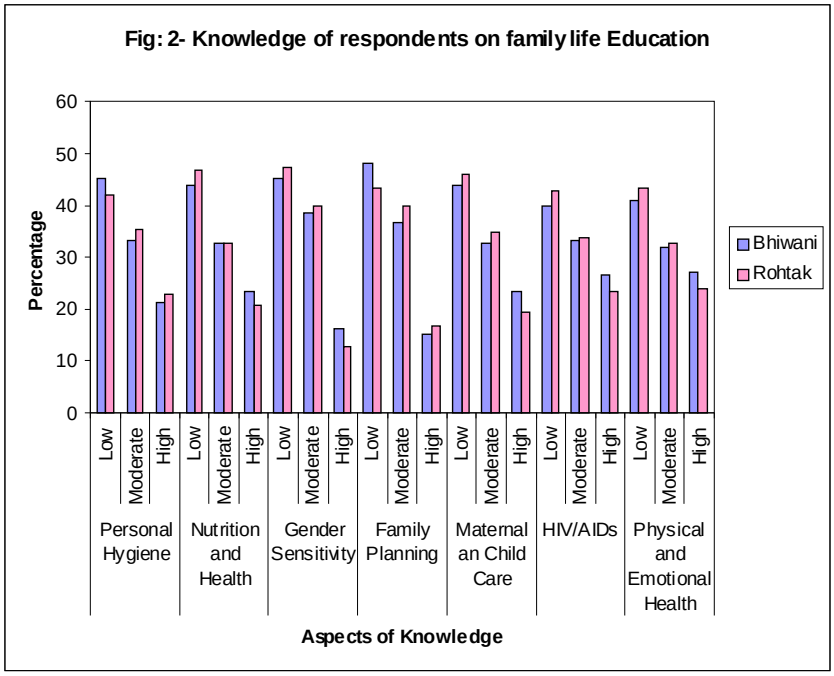
Figure further indicates the distribution of respondents for their knowledge level regarding family planning. For the total sample, 45.67 percent were in low category followed by 38.33 percent who were in moderate category. Rests of the respondents (16.00 %) were in high category of knowledge regarding family planning. Almost similar trend was observed in both districts.

Knowledge regarding maternal and child care respondents point out that 45.00 per cent were in low category followed by 33.67 percent respondents in moderate category. Comparative analysis of

both districts highlights that 44.00 per cent respondents of Bhiwani district were in low category against 46.00 percent from Rohtak district. Figure further reveals that 32.67 per cent respondents were in moderate category of knowledge from Bhiwani against 34.67 per cent respondents from Rohtak district, followed by 23.33 per cent and 19.33 per cent respondents who were in high category from Bhiwani and Rohtak district respectively.

The result pertaining to knowledge regarding HIV/AIDS aspects revealed that 41.33 per cent respondents in moderate category, whereas 25.00 per cent respondents were in high category of knowledge on HIV/AIDS aspects. Comparison of two districts indicates that 40.00 percent respondents were in low category from Bhiwani against 42.67 per cent respondents from district Rohtak. Further data revealed that there were no district wise differences, as almost equal percentage of respondents were in moderate category of knowledge on HIV/AIDS. It can be observed that 26.67 per cent respondents of Bhiwani district were in high category against 23.33 per cent respondent in same category of knowledge from Rohtak district.

Regarding the physical and emotional health of respondents, the fig. indicates that 42.00 per cent respondents were in low category. There were 25.67 per cent respondents who were in high category of knowledge. District wise slight differences were found as 40.67 per cent respondents were in low category from district Bhiwani against 43.33 percent from Rohtak district. Almost equal percentages of respondents were in moderate category of knowledge, whereas 27.33 per cent respondents were in high category from Bhiwani against 24.00 per cent from Rohtak district (Fig.2).



Respondents of involvement in agricultural activities

Table 2 indicates that the district wise comparison shows that the respondents of Rohatk district were slightly more involvement in agricultural activities as there were 58.67 percent respondents who had low involvement followed by 32.67 percent and 08.67 percent with medium and high involvement respectively.

Table 2: Respondents of involvement in agricultural activities

Variable **Involvement in agricultural activities**	Bhiwani N=150	Rohatk N=150	Total N=300
Low (6-12)	80 (53.33)	88 (58.67)	168 (56.00)
Medium (13-18)	61 (40.67)	45 (32.67)	106 (28.33)
High (19-24)	9 (6.00)	17 (08.67)	26 (12.33)

Figures in parentheses indicate percentages

Whereas 53.33 percent respondents of Bhiwani district had low involved followed by medium (40.67%) and high (6.00%) involved, on the whole it can be said that almost 50 percent of respondents from both the districts had medium to high involvement in agricultural activities. It concluded from table that most of the women had low involvement in agricultural activities because they may be associated to the caste from which majority of the sample.

Family life education knowledge on the basis of involvement in agricultural activities.

Results presented in table 3 reveal that 48.21 percent respondents with low involvement in agricultural activities had low level of knowledge on personal hygiene against 41.51 percent from moderate and 23.08 percent with high agricultural involvement. The highest percentage (46.15) of respondents who were highly involved in agricultural activities were in high knowledge category. Approximately 59.00 percent respondents from moderate agriculture involvement were in moderate to high knowledge category against approximately 51 percent from low agricultural involvement. Respondents from medium level of agricultural involvement were slightly better than respondents from low level agricultural involvement.

Table regarding nutrition and health aspect indicates that more than half of the respondents (53.84 %) from high agricultural involvement group were in low knowledge category followed by moderate (34.62 %) and high (11.54%) knowledge category. Respondents from low involvement in agricultural activities (42.62%) were in low category followed by 29.76 percent in moderate and 22.62 percent in high knowledge category. Respondents from medium agricultural involvement were almost equally distribution in low and moderate knowledge categories followed by 23.58 percent in high level of knowledge.

Regarding knowledge on gender sensitivity aspect, the table shows that half of the respondents (50.00%) from low agricultural involvement had low level of knowledge followed by moderate and high knowledge. Almost equal percentage of respondents in low (42.45%) and moderate (44.34%) knowledge category from medium agricultural involvement group followed by 13.21 percent in high level of knowledge. Where as 38.46 percent respondents from high agricultural involved group had low knowledge followed by moderate and high knowledge (30.77%).Another study reported that one of the greatest disabilities the girls suffer from is their poor educations. In rural and tribal India, girls contribute still further by fetching water and fuel wood by walking long distances (Joshi, 1997).

Further the distribution of respondents on family planning aspects, points out that respondent who were less involved in agricultural activities were slightly better in knowledge against those who had high and medium level of involvement. There were approximately 57 percent respondents from

low agriculture involvement in moderate to high level of knowledge against approximately 53.00 percent and 51.00 percent respondents from high or medium agricultural involvement.

Table 3: Family life education knowledge on the basis of involvement in agricultural activities

Aspect of knowledge	Agricultural Involvement			Total N=300
	Low n=168	Medium n=106	High n=26	
Personal hygiene				
Low (12-20)	81 (48.21)	44 (41.51)	6 (23.08)	131 (43.63)
Moderate (21-28)	61 (36.31)	34 (32.08)	8 (30.77)	103 (34.33)
High (29-36)	26 (15.48)	28 (26.41)	12 (46.15)	66 (22.00)
Nutrition and Health				
Low (13-21)	80 (47.62)	42 (39.62)	14 (53.84)	136 (45.33)
Moderate (22-30)	50 (29.76)	39 (36.80)	9 (34.62)	98 (32.67)
High (31-39)	38 (22.62)	25 (23.58)	3 (11.54	66 (22.00)
Gender sensitivity				
Low (10-16)	84 (50.00)	45 (42.45)	10 (38.46)	139 (46.33)
Moderate (17-23)	63 (37.50)	47 (44.34)	8 (30.77)	118 (39.33)
High (24-30)	21 (12.50)	14(13.21)	8 (30.77)	43 (13.33)
Family planning				
Low (9-15)	73 (43.45)	52 (49.05)	12 (46.15)	137 (45.67)
Moderate (16-21)	61 (36.31)	40 (37.74)	14 (53.85)	115 (38.33)
High (22-27)	34 (20.24)	14 (28.30)	0	48 (16.00)
Maternal and Child care	78 (46.43)	43 (40.57)	14 (53.85)	135 (45.00)
Low (23-38)	63 (37.50)	33 (31.13)	15 (19.23)	101 (33.67)
Moderate (39-54)	27 (16.07)	30 (8.34)	7(26.92)	64 (21.33)
High (55-69)				
HIV/AIDS				
Low (8-13)	58 (34.52)	58 (38.09)	8 (30.77)	124 (41.33)
Moderate (14-19)	63 (37.50)	26 (24.53)	12 (46.15)	101 (33.67)
High (20-24)	47 (27.98)	22 (20.75)	6 (23.08)	75 (25.00)
Physical and emotional health				
Low (8-13)	59 (35.12)	57 (53.77)	10 (38.46)	126 (42.00)
Moderate (14-19)	64 (38.10)	30 (28.30)	3 (11.54)	97 (32.33)
High (20-24)	45 (26.78)	19 (17.93)	13 (50.00)	77 (25.67)

Figures in parentheses indicate percentages

On maternal and child care aspect, table shows that highest percentages (53.85%) of respondent of high agricultural involvement were in low knowledge category followed by high and moderate level (26.92% and 19.23% respectively). Whereas respondents whose involvement in

agricultural was medium were better against those who were involved less. Approximately 60 percent respondents from medium involvement group possessed moderate to high level of knowledge against 51 percent from low involvement group.

Result further, points out that more than half of the respondents (54.72%) from medium agricultural involvement group were in low category of knowledge on HIV/AIDS followed by moderate and high level (24.53% and 20.75%, respectively).Regarding the moderate knowledge on HIV/AIDS the highest percentage (46.15%) was from high agricultural involvement group followed by low (37.50%) and moderate (24.53%) involvement groups. The trend was reversed for high knowledge category. The highest percentages of respondents with knowledge were from low agricultural involvement group against high and medium involvement group respondents. The results are also supported by national family health survey 3 (NFHS-3,2005-06) also show that young people poorly informed on issues related to HIV prevention only 28 percent of young women and 45 percent of young men in the age group 15 to 24 had comprehensive knowledge about HIV/AIDS. Another study by Rani and Rao (1995).

The respondents of low and high agricultural involvement were comparatively more knowledgeable on physical and emotional health aspects against those who were having medium level of agricultural involvement. There were approximately 65.00 percent and 62.00 percent respondents having low and high agricultural involvement who were in moderate to high knowledge categories against 46 percent from medium agricultural involvement.

It is concluded from the figure that the maximum percentage of respondents were illiterate, having no say in family decisions and poor knowledge on different aspects of family life. Further the results concluded that the women who had low involved in agricultural activities were better in their knowledge on almost all the aspect except HIV/AIDS, aspect of the family life education. Kaur and Goyal (2008) in their study showed a definite link between low status of women and deficiencies in knowledge and utilization of preventing health services.

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