Chapter – II

Researching Adivasi Women: A Note on Self-Reflexivity

Introduction:

This chapter aims to narrate the experiences of researching the intimate lives of marginal groups i.e. adivasi women. It aims to do a critical examination of the methodology and process of doing field work. In this connection, it discusses the issue of power, research ethics – confidentiality and the very act of doing research complicates the identity of the researcher. I discuss how my subjectivity influenced the research and especially the realisation of shifting of my identity over the course of time generated pivotal questions. Inversely, I discern how experience of doing field work and respondents’ questioning and comments affected the research process and building up the arguments.

Generally a lot has been written on the way researcher who seemingly from a non-<i>adivasi</i> background shapes the very process of data collection and analysis (Denzin 2005). Against the ethnographic tradition, particularly participant observation, Bourdieu (2003) writes how artificially researcher from the West immerses into the social/living worlds of the non-west. Thus, he suggests an alternative methodology i.e. participant objectivation-native researcher from marginalised background studying own community and articulating the issue of colonialism, power and knowledge production. Like Bourdieu, Spivak (2000) critiqued western scholarship that speak and represent the non-west or third world especially subaltern groups. She questioned the text of western academia which marginalised the very text or their-own text. Spivak invigorated the feminist discourse in her essay “Can the Subaltern Speak?” In this essay, she focuses upon some of the trouble issues of the Third World Women that they have never been mentioned in the global structure. Spivak’s writings reflected the surroundings of women’s struggle and repression in the Third World Countries. According to her, Feminism as a theory could not take into deliberation the views and aspirations of all the women in the world.
There are local differences all over the place and the history that has played a key part in their arrangement should be analyzed additional vibrantly.

Following this tradition and feminist methodology especially standpoint feminism (Harding 1987), as well as postulation of post-colonial feminism and Bourdieu’s conception of ‘reflexivity’ this chapter narrates and reflects the experiences of doing fieldwork on one’s own community.

**Feminist Method Emerged:**

India is a land of varieties and vitalities. It is divided into dissimilar states in the name of class, religion, language, ethnicity, gender and citizenship. Spivak (2000) challenged some of the critical assumptions of feminism in universals and instead argued that all women are not the same and there are a lot of variations active even among women with view to class, colour and faith. She reiterates the fact that there are differences in the case of race, class, religion, citizenship and culture among women. Feminism needs to concentrate on this variation that exists among women and help them to achieve their personal goals.

It is generally observed that mainstream feminists always write from the angle of educated and salaried women who are always situated in the context of the upper caste and class social order. But here the question is who will speak for *adivasi* women and when? I argue that *adivasi* women are doubly marginalized as they are subdued by non-*adivasis* as well as *adivasis*. In order to substantiate the specific social location of *adivasi* women, a brief contextualisation of *adivasis* is provided here. Nevertheless, the details of weak social standing are elaborated in the fourth chapter. For the centuries, *adivasis* have been removed from the plain areas by the outsiders and started living in remote areas like forests and hilly terrain (Prasad 2003). Consequently, living in forest area posed disadvantages in their lives such as their livelihoods were limited to farming and pastoral activities (as productive activities were primarily depended on the rain) which was only fulfilling the minimum need of their survival. Next phase of oppression started in British period when they invaded these regions and occupied large tracts of forest lands and
common properties of *adivasis* under Forestry Act to extract the natural resources. British officers and non-*adivasis* took advantage of the *adivasis* who were illiterate and poor who sold their land at a much cheaper rate. This precipitated the migration of *adivasi*’s in search of work as the Forestry Act brought an end to their dependence of the forest for fodder and livelihoods. In the next phase, after Independence, whatever small piece of land they had, post-colonial Indian government took possession of those in the name of development. Additionally, in other case, non-*adivasis* mainly Patidars acquired land in forest areas in south and eastern parts of Gujarat. Is this development really beneficial for the *adivasis*? If *adivasis* in general are endangered, the conditions of *adivasi* women are more vulnerable since the economic change adversely affect women more. As briefly discussed in the first chapter, *adivasi* women share the economic burden as well as the responsibility of the family.

**Own Viewpoint of the Word “Feminist”**

I did not know the philosophy and activism of “feminism” formally until my association with the NGO from where I did my post-graduation. Nevertheless, after formal training into gender studies, I realised that I was already a feminist without labelling it as “feminist act”. It all started with my struggle at family and society. I never knew the word ‘feminism’ until I worked in the NGO (Non-Government Organization) of RSSS (Rajpipla Social Service Society) in Rajpipla in Narmada district. I studied Post Graduate Diploma course in ICRD (Integrated Community and Rural Development), affiliated to NIRD (National Institute of Rural Development), an Organization under Dept. of Rural Development, Government of India and Hyderabad. Thus both RSSS and NIRD have jointly conferred this course in Rajpipla. During the course work, many distinguished lecturers and experts from outside were invited and would take sessions on Politics, Human Rights, Equality, Secularism, Adivasi History, Adivasi Culture, Indian Constitution, Indian Institutions, Sexuality, Violence Against Women, Feminist and about Law etc. I eventually learnt about “Feminism”, particularly I understood Feminism from the day when feminist scholar ‘Trupti Shah’ took our class wonderfully. Then I related these instances with my own childhood experience. I remembered my childhood life that I would be very upset with my mother as she would tolerate my
father’s physical and mental harassment very often. Once my father hit my mother very badly. My mother would often think of taking divorce from him but refrained from it by thinking about the social implication of it on our (me and my younger sister’s) lives. Once my father threatened us (me, my sister and my mother) that he would kill us. On that particular episode, I was determined that I would do something. So I approached the police and filed a complaint against him. Actually during those days, in the neighbouring village named as “Kel”, a training camp was organised for the youth by the state police department. So, I approached a Jamadar (a junior officer in police station) and complained to him. As a result a Jamadar showed up at our house for enquiry. At our house, my grandmother was present and she was abusing my mother instead of taking her side. My relatives took the side of my father and questioned my mother. When Jamadar arrived, he came along with Somabhai (who knew us and our family). While questioning, Somabhai slapped my father for his mistreatment to my mother. After that episode my father has stopped drinking and domestic violence especially physical violence was ended. Nonetheless, they sometimes have arguments. But, his relationship with me was strained though temporarily and he started disdaining me and went to the extent of saying that “Salu is not my daughter.” He stopped talking to me for three months. However, later on when I got sick, he came to see me.

There was another turning point in my life when I realised that I practiced feminist principles and especially Uma Chakravarthy’s concept of “multiple patriarchy”. This was when I completed my M. A. in Sanskrit in Valsad. Thereafter, I joined a course called COPA (Computer Operator Cum Programming Assistant) in the ITI (Industrial Training Institute) at Ahwa. Along with me, there was K (she is also an adivasi but belonged to Kunkana community) who was my close friend and we have been studying together since 11th standard onwards. So, she joined with me at Ahwa for the computer course and we were staying on rent in Patilpada Faliya in Ahwa. One day my villager Pareshbhai Gaikawad showed up at Ahwa and persuaded me to accommodate his younger brother in the rented house. He says, ‘My younger brother (J) is doing nursing course in the Ahwa. This is one year course but for this purpose, he is required to stay only 6 months in Ahwa and rest of the six months, he is expected to do internship/field work outside. So I request
you to keep him in your room, because he cannot stay alone as he cannot cook’. I did not agree immediately and instead replied P, ‘I will inform you after K agrees on this matter as we both stay here.’ He again tells me, “Please adjust him only for six months for theory. And then he would go to Chikhali for practical.” I replied, ‘Okay, I will try!’ This thing I shared with my friend K. First she told me that “as J was a boy so we can’t keep him here. Because if anything goes wrong, who is responsible?” But, next day again I told K and convinced her to keep him here only 6 months. After K agreed P sent his brother J to stay with us. Three months passed well in our relationship with J. J was doing everything to help us like cooking, cleaning vessel, room, bought vegetables and brought water from the handpump through pot. After three months K was going to Surat, Veer Narmad South Gujarat University to do correction in her M. A. marksheet as there was some mistake. So I was alone in the house and J found it appropriate to express his feelings to me, ‘S, I like you very much!’ I resisted, ‘J, do you have sense what you are telling?’ He replied, “Yes”. I replied again, “You are younger than me and you are my friend’s brother. Also, this type thought does not suit you.” He again said the same thing! So, I told him, “You leave my room right now. I don’t like this kind of behaviour.” He left for his friend’s house and he returned when K arrived. However, early morning he showed up at my house and told me, “S, I want to marry you!” I replied, “Okay you tell P and your parents.”

Later he finished his course work on theory and went to Chikhali for practical course. Eventually we became good friends. Meanwhile, K and I also finished COPA and went for B. Ed. training at Vansda in Navasari district. Again J sent me message, “I want to marry you!” I replied, “Okay, you come and meet me!” One day he met me and we decided to marry irrespective of our parents’ consent. We both went for civil-marriage in Unnai court, without parents’ permission. Now when I recollect and reflect my experience, I feel feminist spirit was already instilled in me as I did not opt for traditional marriage but defied customs. Simultaneously, I never thought of abandoning my parents as it is the norm in traditional marriage. So I made a proposal/condition with him that this marriage would take place only with the condition that I would stay with my parents and he agreed on this contract. Ours was an inter-caste marriage as J was from the Kunkana
Adivasi community who from long has been sanskritised into the Hindu tradition, whereas I belong to Bhil community who has always maintained their independency from Hindus. Obviously, his mother was against the marriage. And even if my parents were against the marriage, because of the anticipation that they would be out casted by the village panchayat, they agreed to it due to my feeling.

However, after marriage his mother influenced him and he completely changed his attitude. His mother was of the views that since Bhils are lower ritually and especially for their intake of beef; I cannot be accepted as the daughter-in-law of the house. Even though Kunkanas are non-vegetarians, they do not eat cow. Furthermore, his family members wanted me to go to their house and had the plan to type cast me as “witch”. So, I decided to break the marriage and sought for divorce and instead concentrate on my career. My parents too supported me for this decision and filed a divorce case in Rajpipla’s “Samajik and Kanuni office” (Social and Legal office) Ahwa in 2008. This personal experience was not only political and I fought against it, it also exposed me to other processes of social inequality like caste based inequality which are used to regulate women’s body. After my divorce the discrimination of human beings on the basis of caste and class caused me angst and I strongly determined to raise voice against this kind of graded inequality. Then I joined the ICRD course at Rajpipla in the Narmada district. Since then I always fight for the cause of adivasi women. I wrote here my own story but, I also came across similar kind of instances in the society, in Dangs and other side of adivasi society. The reason to put down my own experience is that although as a better educated woman I could fight back against many challenges, there are many adivasi women who are victims of these issues i.e. non-adivasi men who boast themselves as socially higher than the Bhils, sexually exploit adivasi women and develop relationships with them but desist themselves from the marriage. In this situation, adivasi women are caught between two different worlds- face harassment from their own community who do not accept them; as well as from the non-adivasi men who disown them after sexual relationships—because they could not succeed or unable to raise voice. Similarly, though adivasi society which includes Bhil society is considered as egalitarian society in terms of its gender relations, but in my knowledge, it is not completely egalitarian. This is
observed in the case of decision making and membership of the village panchayat. Village panchayat is dominated by men, women just bring their cases and suvarins and women associations are called upon to represent the cases related to women. But decisions are solely taken by the male mukhiya (leader). This point was already made during the M. Phil. study. But the moot question is who would raise the voice? Adivasi women are exploited from the external world-upper caste and class men, but equally they are oppressed by their own men. Adivasi men too view that marrying outside- non-adivasi men is a mistake and how can we do good justice to women in the own society?

Feminist Methodology:

Thapan (1998) writes that the question of “we” (implying anthropologists) then have to concentrate on not so much of how to radically amend or change the dialogue of anthropology but one; it in the context of growing political challenges. What is it about the discourse of anthropology that needs to be considered anew? There are new agendas and new expressions of the present episteme in contemporary discourse on anthropology. Undoubtedly the postmodernist statement for the company and multiplicity in our understanding of the world and society is a significant contribution. But how do we move clear of this to advance a more important anthropology? What is it that is critical to its revolution is perhaps the most significant question.

Reasons for Interest in Reproductive Health and Labour in Adivasi Society

As mentioned in the previous chapter, during my M. Phil. field work ‘Identity of Adivasi Women: A Sociological Study of Bhils of South Gujarat’; which critically examined the custom of bride price, I observed that in the villages of Dangs, there was excessive emphasis on Nasbandi (female sterilisation) whereas other developmental initiatives promulgated by the Indian state did not have equal weightage or almost got the status of non-existence except to some extent MGNREGA (Mahatma Gandhi National Rural Employment Guarantee Act 2005) and fair price shops. But these programmes met with harsh criticisms from the villagers when these women observed that despite going for sterilisation, women could conceive again. So they had doubt and questioned the casual
approach of these public health programmes supposed to be implemented on the bodies of the poor like adivasis. Adivasis complained that because of sterilisation, their health is in danger as public health workers do not take care of these women properly and medical guidelines might not have followed properly. I sensed also that there is a competition between suvarins (who are not attached to institutional health care) and government health programmes where ASHA workers are incentivized to mobilise adivasi women for sterilisation (Rs 150 is given to ASHA worker for getting a woman for sterilisation) and institutionalisation of delivery. Similarly, adivasi women are given various welfare benefits (like Rs 2000 is given to individual woman for hysterectomy and for hospital delivery). Government health programme especially Nasbandi spread quickly as this is work was done through ASHA worker and her salary was fixed by the number of sterilisation cases she brought. So the issue was not clearly the binary opposition of adivasi women for institutional delivery or the dualism of tradition vs. modern medicine which is generally represented/discussed in the literature. Similarly, the problem was not related to aversion to family planning programme but mistreatment and discrimination of historically subaltern communities. Additionally, I observed that many adivasi women were in need of good quality medicine but they were complaining that they do not get medicine daily. This was noticed during a self-help group meeting called, “Payal Mahila Mandal”. It was reported by SHG members that ASHA worker does not supply medicine in sufficient and equal quantity to all women. Thus, the main point that evolved during my observation was that there is a disjunction between the state account of health programmes in tribal areas and the issues articulated by the adivasi women. This gap intrigued me to continue research on reproductive health and probe the question and critically examine the role of the state. On the other hand, local adivasi women do not show interest to visit public hospital and popularity of suvarins continue despite the introduction of reform in public health care. A significant reform occurred recently during the rolling out of NRHM 2005 is discontinuation of dais (TBA) training and introduction of ASHA worker. Simultaneously, the latter is alluded as “voluntary” worker instead of employee. The following data illustrates the point.
Table 2.1

<table>
<thead>
<tr>
<th>Year</th>
<th>Delivery [Total]</th>
<th>oe Delivery</th>
<th>Institutional Delivery</th>
<th>Midwife home Delivery</th>
<th>Normal Delivery</th>
<th>Cesarean Delivery</th>
<th>Maternal Death</th>
<th>Infant Death</th>
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<td>4552</td>
<td>1948</td>
<td>4456</td>
<td>6500</td>
<td>0</td>
<td>8</td>
<td>100</td>
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<td>4564</td>
<td>2788</td>
<td>4523</td>
<td>7351</td>
<td>0</td>
<td>1</td>
<td>129</td>
</tr>
<tr>
<td>2009-10</td>
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<td>4645</td>
<td>2414</td>
<td>4556</td>
<td>7059</td>
<td>0</td>
<td>8</td>
<td>125</td>
</tr>
<tr>
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<td>4203</td>
<td>7219</td>
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<td>194</td>
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<td>169</td>
</tr>
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<td>3319</td>
<td>7322</td>
<td>0</td>
<td>10</td>
<td>162</td>
</tr>
</tbody>
</table>

(Collected the data Health District office in the Dangs during the fieldwork in Dangs 2016)
Selection of Villages and Respondents

I selected Garkhadi PHC as well as Subir, PHC for the study for the following considerations. Initially my plan was that I would get a broader picture of gender, social inequality and health. Thus, I would interact with higher health officials in District Health office in Ahwa and Jilla Panchayat office in order to get factual information on health and gender. Though I could talk to a doctor for some time called C\(^4\) sir and he suggested me while asking about the district information on health, “Why do you want this type of data and why do you want to study District Hospital? You take PHC which is near to your village, like Garkhadi and do work properly. Because, doctors do not stay in the PHC and, so you can find out why they do not stay and doing work properly?” I followed his advice and also I recollected my field experience of Zari during the M. Phil. work that Garkhadi PHC is not functional. So I decided to study Garkhadi PHC. Additionally, doctor G\(^5\) of Garkhadi PHC told me, “If you want to observe the delivery woman then go the Subir, PHC. Because, here few woman come for the delivery and we can not ascertain when they would come. Subir PHChas now developed as Community Health Centre. So many pregnant women go there for the delivery. So, you properly do your delivery observation work there.” Based on these interactions I focused on these two PHCs, Gardhadi and Subir for this study. I have taken interview of ASHA workers, ANMs or ICDS staffs, personnel from nearest PHC at Garkhadi and PHC at Subir. Subir PHC is 23 km from my own village.

However, after completion of first phase of field work in December 2014, I learnt that not only Subir PHC was converted into CHC but also the old staff of Subir PHC had to move to Singana. Among the old staff, a doctor who was popular among adivasis (who ethnically belonged to Bihar and was Muslim) was upset with the government’s decision. Nevertheless, I did some preliminary observation at civil Hospital Ahwa - Dangs despite the discouragement of the doctor. In the district hospital, I conducted an interview with a

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\(^4\) He belonged to dominant tribal community called “Chaudhury” and this community is known to be sanskritised and educationally and economically higher than the other adivasis

\(^5\) He belonged to Garasia tribe and they are equally called as “Dhodiya Patel”
woman who recently has undergone a caesarean during delivery. It is to be noted that this respondent had caesarean delivery in Valsad civil hospital when she was referred from civil hospital at Ahwa due to unavailability of this facility here. I spent two days at civil hospital, AHWA for observation. Apart from focusing on institutional and modern health care in public set up, I focused on NGOs too. For instance, a missionary NGO in Subir “Jivan Jyot High School” and another NGO “Deepshila” in Harpada, Ahwa were part of the study. The Missionary NGO is controlled by the sisters. These sisters stay and provide care to children and patients. This missionary NGO runs educational programmes as well as carry out health work at grass-root level. The missionary clinic is called as ‘Divya Chhaya Davakhanu, Subir’ (DCDS). I took interview of two sisters among whom one is a Gynaecologist from Kerala and another sister called S is a localite from Satbabla in the Dangs. The latter works as a nurse. In Deepshila NGO, I observed and interviewed two managers. But when I interviewed him, then this village was under the jurisdiction of Subir and at present it has changed to Ahwa. In addition to health institutions, Panchayat (village council) was also studied. I took unstructured interview with members of the Naktiyahanvat Panchayat which covers the village of Naktiyahanvat, Badigavantha, Bibupada, Bardipada. It goes without saying that civic programmes like Mid-Day Meals, ICDS, Housing programmes, MGNREGA, etc which runs through Panchayat were examined.

In addition to these institutions, I have covered seven villages for the study such as Naktiyahanvat, Badigavantha, Bibupada, Bardipada, Garkhadi, Harpada and Subir.6 Besides the observation and informal interviews, the study too used case study methods especially of pregnant women and suvarins. I also carried out informal interview with the family members and elders of the pregnant women. In this study, information was collected through participant observation especially deliveries and post-partum care done by the suvarins. In this regard, two participant observations on deliveries were done and in both the cases deliveries were done by the suvarins. Among this, one suvarin received training in modern medical services whereas the other suvarin was a local one and did

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6Subir is a village as well as an administrative unit. It was developed as an administrative unit recently in 2014 and I learnt about this when I visited this place during the second phase of the study.
not receive any type of training. In short, all total I have undertaken 22 case studies and interviews, 3 observations of local midwife deliveries and 5 places of observations reports includes PHC of Garkhadi, PHC of Subir, Civil Hospital of Ahwa, missionary based private ‘Divya Chhaya Davakhanu, Subir’. Apart from these, several written documents such as district health records, Census Data of 2011 and a Gujarati book of Bela Thaker (her book was published in Gujarati by Gujarat Vidyapith and I had translated into Gujarati for my thesis) have been used.

Secondly, I also visited the district library. But it is pathetic to state that there are no new books and only old books were available. I had registered and paid my fees, yet I was not issued any ID cards even after I had completed my field work. So, we can understand the condition of the library. I was particularly interested to explore and understand the local newspaper and get a sense of health problems reported by the locals. Library gave me permission to scan the old paper but to my dismay, I did not find asinglereportage of Dangs related to health and gender issues. So it made me wonder how a non-ādivasi researcher as well as researcher from ādivasi community would find the library useful for their study. I also had a second thought that perhaps it is a way to divert the attention of the public from the real issues faced by the ādivasis and produce a constructed image of ādivasis and their problems i.e. recalcitrant and primitive living style.

**Challenges of Doing Field Work:**

As stated earlier, being an ādivasi and a localite, language was not an obstacle for me to extract information from the villagers and understand the Dangi dialect. Furthermore, being a daughter of a suvarin not only enabled me to know about suvarin’s work closely. Through her I could contact other suvarins and learn about their struggle and movement against the state. Similarly, I too have experienced the distress which Bhils and others go through for their livelihood, conflict with the police, Forest Department. I vividly remember a personal incident where my parents and other villagers (nine Bhil families and one Kunkana family) were entangled into a tussle with Forest Department for cultivating in Forest Land. When villagers were cultivating in the Forest soon after the
enactment of Scheduled Tribes and Other Traditional Forest Dwellers- Recognition of Forest Rights- Act, 2006, Forest Department objected and prohibited initially. On the other day, villagers asked me to bring camera to take photo as a proof so that Forest Department would be fixed as violating the recent law. So the next day while I was taking the photos of nagli plantation, officers came and interjected me. They threw my camera. Because of the dispute, Van Samiti (Forest Association) later was suggesting that as a compensation, I should be offered a job in the Forest Department. But I faced other kinds of challenges during field work. Firstly, free discussion with the suvarins created problems as some were furious anticipating that may be this fact- still practising delivery through traditional method- would be revealed to the state and police. Some of them asked me, ‘whether the police would arrest us’. When I assured them “no one will catch you, I’m doing this interview for the study only and I will maintain confidentiality. Don’t be afraid of these things. I took your interview only for my Ph. D. study; don’t worry, okay!” they were convinced. At another level, suvarins were not only cooperative throughout the interview but also expressed their satisfaction with the fact that in this modern age at least someone is discussing about their condition. Indeed my understanding about their work underwent transformation while doing the fieldwork as I sensed that their approach to work is cannot be reduced to traditional or backward since they themselves want to undergo training in modern delivery practices whereas state is in back foot.

Secondly, it was really difficult to catch hold of the suvarins because of their nature of work. As suvarins were involved in multiple kinds of work ranging from field or agricultural work to construction work and household work besides attending deliveries, many times I had to wait for their free time. However, I was careful not to disturb them and waited patiently for their free time.

Thirdly, power differentials and profound corruption disrupted the study and my relationships with the respondents. Since corruption is rampant in public offices and in this case in welfare programmes initiated by the state, district level officers, taluka level officers as well as Panchayat members were curious to know the reasons for this kind of
study and the outcome of the study when I would enquire about the MGNREGA, AWC, Janani Surakhya Yojana, Mid-Day Meals, Fair Price Shops, Indira Awas Yojana. They were objecting and in jittery when they came to know that I have collected the detail information from lower rung staffs or front line workers like AWWs, male suvarins and ASHA workers about the functioning of these public programmes.

Subsequently, ASHA workers and AWWs were anxious about the repercussions of their revelations during their interview. They were initially of the opinion that I might have come for the inspection from the public department. This made me conscious that though I feel that I am tribal woman and educated, but others like ASHA and AWWs do not perceive me as adivasi woman but a public servant came for surveillance. This brings back the question of relationship between identity (self-perception) and identification (perceived by others).

In other scenario too, high status and authority of the officials created problems for the study. For instance, in order to get the information about the number of hospital delivery and home delivery in the district, it took almost two years. For this, first I made repeated visits to the district health centre, later they have declined and delayed. Even if the information officer knew me being from neighbouring village, he deliberately delayed it as he might have got direction from the health officer.

As discussed earlier, I could not observe deliveries in PHC’s and civil hospital at Ahwa. I went to both places twice but doctors and nurses continuously changed their stance and I was not given permission for this. Let me elaborate the incident. First day I went to Ahwa civil hospital and I found that there was a nurse on duty. She did give me permission. But that day I realised that this permission was of no use as there was no delivery scheduled on that particular day. There I met a woman who recently underwent caesarean delivery. I took her interview at civil hospital Ahwa. I saw that there were admission of four pregnant women in the maternity hall; but their deliveries were not scheduled on that day. So, nurse told me, “You can come tomorrow. May be tomorrow your work would be done!” I replied, “Okay nurse, I will come tomorrow!” Next day I went to civil hospital,
Ahwa for my work. But there was a female gynaecologist. She seemed to be very young and I heard that she is also an adivasi. She went to maternity hall and Itoo followed her. She saw me and asked ‘who are you?’ I replied, “Madam, I am Ph. D. student and I came to observe delivery.” She told me, ‘You take permission first.’ I replied, “Yes, Madam I came yesterday and took permission from the nurse who was on duty here.” Doctor replied, “It is not enough to takenurse’s permission, you have to take civil surgeon's permission. Only then you would be allowed to observe delivery in the maternity hall! But sir is not present today so you can come tomorrow”. I replied, “Okay madam!” Then I went there on the third day, but civil surgeon was not present on that day also and without permission she would not allow me to enter the maternity hall. Then I stopped going to the civil hospital, because I thought I was wasting my time there.

As these experiences revealed, it was not merely limitations of the study but point out the power hierarchy and pyramid from where information can be collected and information cannot be collected. If a person is socially powerful and the researcher is powerless like a woman and from adivasi background doing social science research, the circulation of information from him/her is almost impossible. Inversely, if the researched is little lower in the power hierarchy, and then researcher’s social position does not pose challenge in obtaining information.

**Question of Ethics:**

When I conducted interview, I generally informed the respondents that this study requires detail information about their lives such as work, sexuality like premarital pregnancy, remarriage, health, kinship relations, etc. Having said that, I assured them that this private information would be kept confidential and I would never misuse those as I am also an adivasi woman. When I introspect myself, I fulfilled the promise by not mentioning any of the respondent’s names and tried to see their story from a larger perspective. Secondly, my approach of interviewing was different in the sense that I told women before the interview that some of the questions would be related to their sexuality and if they feel at any point uncomfortable, they can interrupt me. This gave a sense of power to them and they were quite relaxed and freely talked to me. In other instance, when I
followed suvarins for home deliveries which generally takes place in their natal homes, I was asked by their parents that how this kind of studies would be useful for them. Even if I convinced them that since adivasi culture is different from other culture, through this kind of study, others can learn about it. They might not have understood the point, though they allowed them. Parents were surprised that even though I am highly qualified, I am wandering for field work. They were surprised that why I am not taking up a desk-job. It is to be noted that in order to be allowed to observe the delivery, I not only had take the permission of suvarins, I had to convince the pregnant women before-hand. I too realised that inadvertently this study affected the daily lives of respondents. For instance, ASHA workers who are overburdened with reporting work and care work had to face additional problem because of my presence. As this study needed a prolong discussion, this not only affected their health and reportage work but also their domestic work and agriculture work.

In the climate of extravagant corruption and loot of public money in the rhetoric of tribal development/welfare projects, I observed how the actual needy and vulnerable people suffer and the better off adivasis pocket all the benefits of welfare programmes. Being an educated woman from the community, deep inside I feel suffocated of not doing any service for my own community. However, I have made my mind to do something for the betterment of adivasis. Especially when I compare the kind of work done by Social Service Society in the Rajpipla, as an outsider for adivasis, I question myself, how our own educated and economically better of adivasis have contributed for this society. Workers in the former places are actually from far away places providing training in skill development for adivasi students of degree of 12th standard, graduate, post graduate, PTC and B. Ed etc. in ICRD course and CDT courses (Computer Directed Training) etc. Once I suggested the Director of RSSS to open English medium school in adivasi area, because adivasi students are very weak in English language. Thus, they do not perform well in competitive examination compared to students from non-adivasi background. I too faced the difficulty to write and converse in English when I joined in Central University of Gujarat for research and later for an internship programme in Mac-Master University, Canada.
Secondly, Sanskrit language is promoted among *adivasis* especially after the proliferation of Hindu radicals. It is ironical that Sanskrit language is not promoted among dominant sections of Gujaratis in schools but it is imposed among *adivasis* who perceive themselves to be outside of Hindu caste society. I strongly feel that this might be a plot to maintain hierarchy and differences among dominant sections and subalterns in terms of the nature of job in the period of trans-nationalisation. So I had a plan that when I get some opportunity then I would open an English medium school in remote area. So with this discontent I forced myself to opt for registering an NGO. Eventually I succeeded and registered the NGO as AAMVMN (Adivasi Asmita ane Mahila Vikas Mandal, Naktiyahanvant). In English, it is translated as *adivasi* Identity and Women Development Group, Naktiyahanvat. As per the plan, myself and one of my friends from Gamit community (in fact, she has done her post-graduation and B.ed. in Hindi) decided to establish an English medium school and named it as PEMSNN (Prakruti English Medium School, Naktiyahanvat). We applied in District, Primary Education office in the Dangs. Currently, they have accepted the application. We were instructed to start the classes immediately once at least twenty children are admitted.