

# ROLE OF PRADHAN MANTRI UJJWALA YOJANA IN STRENGTHENING TRIBAL HEALTH AMONG WOMEN

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**Abstract:** The primary objective of the research is to know the role of Pradhan Mantri Ujjwala Yojana (PMUY) to improve the health aspect of women living in villages . tribal women have to face many problems related to health, marriage and menstruation .Due to unhealthy lifestyle and poor lifestyle of women living in tribal area, Pradhan Mantri Ujjwala Yojana (PMUY) was launched in May 2016 by the Ministry of Petroleum and Natural Gas with the objective of ensuring availability of clean cooking fuels like LPG to rural and underprivileged households, who are otherwise using traditional cooking fuels and improve health by reducing the non-communicable diseases to the rural women. Pradhan Mantri Ujjwala Yojana aims to provide free cooking gas connections to women living below the poverty line. The population included in the research included tribal women of selected taluka of Nanded district of Maharashtra, beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY). A total of 142 samples were the target population of the study. Self-administered Interview Schedule (Marathi version ) was used to measure health status of Pradhan Mantri Ujjwala Yojana beneficiaries. Data was collected through demographic information and interview schedule from women living in tribal area in selected taluka in Nanded district of Maharashtra. The result shows that Pradhan Mantri Ujjwala Yojana (PMUY) is playing an important role in improving the health of tribal women.

**Keywords:** Health, Tribal, women, PMUY

## INTRODUCTION

Good health is an individual feeling in which a woman feels active and dynamic and can perform daily tasks without unnecessary fatigue. There has been a change in the status of women in our country but this change is not seen much in the women living in tribal areas. Even today tribal women have to face many problems related to health, marriage and menstruation. Being less educated or uneducated, family and financial problems become a part of their life. Keeping in mind the poor health in rural area with the slogan of “Clean Fuel, Better Life”, the Central Government under the leadership of Honorable Prime Minister Shri Narendra Modi has launched a social welfare scheme “Pradhan Mantri Ujjwala Yojana” for women from 1 may 2016 (Aggarwal, Kumar, & Tiwari, 2018). Petroleum Ministry is providing free LPG refills across the country under PMUY, deposit-free LPG connections are provided to poor household women. The scheme envisages a smoke-free rural India and aims to provide subsidized LPG connections to families living below the poverty line, especially women (Kar, & Zerriffi, 2018; Kumar et.al. ,2017; Pandey & Parthasarathy, 2019; Pillai, & Ammal, 2017; Sharma, Parikh, & Singh, 2019) . This scheme will increase the use of LPG and help in reducing health disorders, air pollution and deforestation (Ahmad, Sharma, & Singh,2018). Tribal women in India use traditional stoves for cooking. In a traditional stove called 'Chulha', cow dung cakes, crop residues and wood are burnt to generate energy, which has adverse effects on health (Swain, & Mishra, 2019, Yadav et.al. 2020).. This is a low efficiency open fire stove. It emits large amounts of air pollutants. Some of these pollutants have a longer residence time depending on the ventilation in the home ( Yadav et.al. 2020). This results in a higher risk of lung disease , lower respiratory infections, upper airway cancer , tuberculosis, asthma, and cataracts(Kumar et.al. ,2017; Pandey & Parthasarathy, 2019; Pillai, & Ammal, 2017.).The Government of India is aware of this issue and is taking several steps to reduce health disparities among rural women, where the Pradhan Mantri Ujjwala Yojana is one of them(Swain, & Mishra, 2019, Tripathi, 2019;Yadav et.al. 2020). There is a lack of research report available of impact of Pradhan Mantri Ujjwala Yojana on health status on tribal women, therefore investigator chosen the study on said research.

## METHODS

### Target Population and Study Area

The research sample includes beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY) scheme residing in Kinwat, Himayat nagar and Mahur taluka of Nanded district. A total of 142 beneficiaries of PMUY were the target population of the study.

**Sampling Method**

The sampling method was a purposive method of sampling design for the Pradhan Mantri Ujjwala Yojana (PMUY) scheme, the sample size of the study was 142 women who are from the tribal community.

**Source of Data**

The sampling method was a purposive method of sampling design for the Pradhan Mantri Ujjwala Yojana (PMUY) scheme, the sample size of the study was 142 women who are from the tribal community.

**Research Design**

The primary objective of the research is to know the role of Pradhan Mantri Ujjwala Yojana (PMUY) to improve the health aspect of women living in villages. This study involves in descriptive survey with socio-demographic information and Interview schedule from beneficiary of PMUY. The research design of the study is descriptive survey.

**Ethical Consideration**

In collecting data, the researcher follows ethical guidelines, principles, and standards for studies conducted with humans. The study included safeguards to protect human beings, including three key ethical principles: beneficence, respect for human dignity, and human justice.

**TOOLS OF THE STUDY**

The following tools were used for present study are as:

**Socio-demographic interview schedule:**

The demographic information about, Financial status, current disease, drug use, of the population was obtained before seeking responses.

**Women empowerment interview schedule.**

A self-structured interview schedule used for the present study is designed to help meet the research objective as well as make it easy and convenient for the respondents to give valuable and necessary information. A well-structured interview schedule makes analysis and interpretation easy and quick. The interview schedule for the study has been designed keeping in mind the perspective of the beneficiaries. For measure the health status, Self-administered Interview Schedule (Marathi version) was used to measure health status of Pradhan Mantri Ujjwala Yojana beneficiaries. The interview program reflects the life experiences of the beneficiaries of Pradhan Mantri Ujjwala Yojana. The interview schedule includes, five Improve health awareness, use of traditional stove, Impact on Swachh Bharat Abhiyan, Enhance the art of nutrition, ujjwala gas scheme and illness.

**Scoring**

Responses to the 3 questions were given on a 3-point Likert scale, with 1 = agree, 2 = indifferent, and 3 = disagree. The values for each question were added together to score PMUY-health status. This was followed by a summary of the values for each category. Then the values from each of the five categories were added together. The next values for each category were added together. Finally, summing the values across categories resulted in a total score. Pearson's product moment coefficient was used to determine the correlation between interview schedule categories and initial overall perceived response ratings. Percentage was calculated for all demographic variables.

**Results and Discussion**

The results concerning this are presented in the form of tables and also illustrated with the help of suitable figures where ever necessary. For the sake of convenience and methodical presentation of the results, following order has been adopted.

Table –1. Health related information among tribal women

Sr.No.	Demographic information	Percentage (%)
1	Any Chronic Disease	14.78%
2	Any physical abnormalities	13.38%
3	Daily smoking/ any other addiction	16.90%
4.	Use of Medicine	12.67%

Table-1 indicates the percentage of health related information of The beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY). The result revealed that, 16.33% The beneficiaries of (PMUY) used drugs/Medicine while 11.66%, The beneficiaries of Pradhan Mantri Ujjwala Yojana reported that the Any physical abnormalities, whereas, 08.33% The beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY) reported that they have smoked, while 16.33% The beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY) suffered from chronic disease.

Figure-1 percentage of Health related information among the beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY).

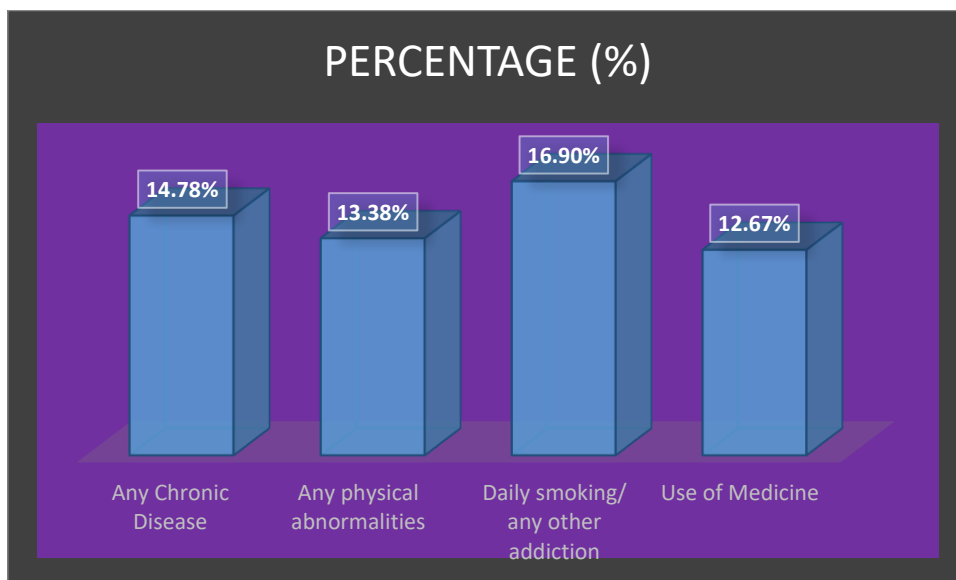


Table –2. Education of the beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY)

Sr.No.	Education	Percentage (%)
1	Up to 10th	16.90%
2	Up to 12th	19.71%
3	Under Graduate	2.11%
4.	Up to 8th	25.35%
5	Illiterate	38.02%

Table -2 Shows the education of tribal women, the findings of the study shows, 16.90% of the beneficiaries of Pradhan Mantri Ujjwala Yojana reported that they have education up to 10th; 19.71% of the PMUY reported that they have education up to 12th; 2.11% of the beneficiaries of Pradhan Mantri Ujjwala Yojana reported that they have education up to graduation, 25.35% tribal women reported that they have education up to 8th and 38.02% of beneficiaries have reported illiterate.

Figure –2. Education of the beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY)

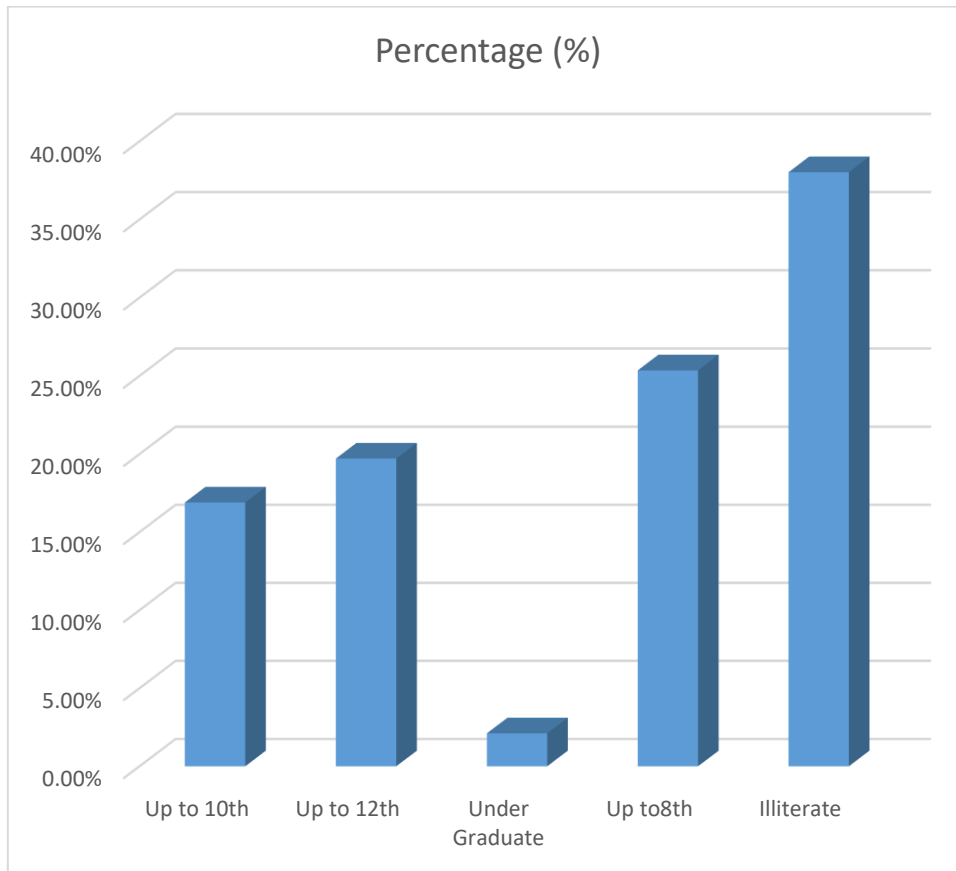


Table -3 Marital Status of the beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY)

Sr.No.	Marital Status	Percentage (%)
1	Married	85.91 %
2	Widow	12.67%
3	Divorced	1.40%

Table-3 indicates the percentage of marital status beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY) . The results indicate that, 85.91 % beneficiaries of PMUY were married. whereas, 12.67% beneficiaries of PMUY were reported that they had widow and 1.40% beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY) reported the Divorced status . The findings shows that most of the beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY) were Married.

Figure -3 illustrates the Marital Status of the Tribal woman

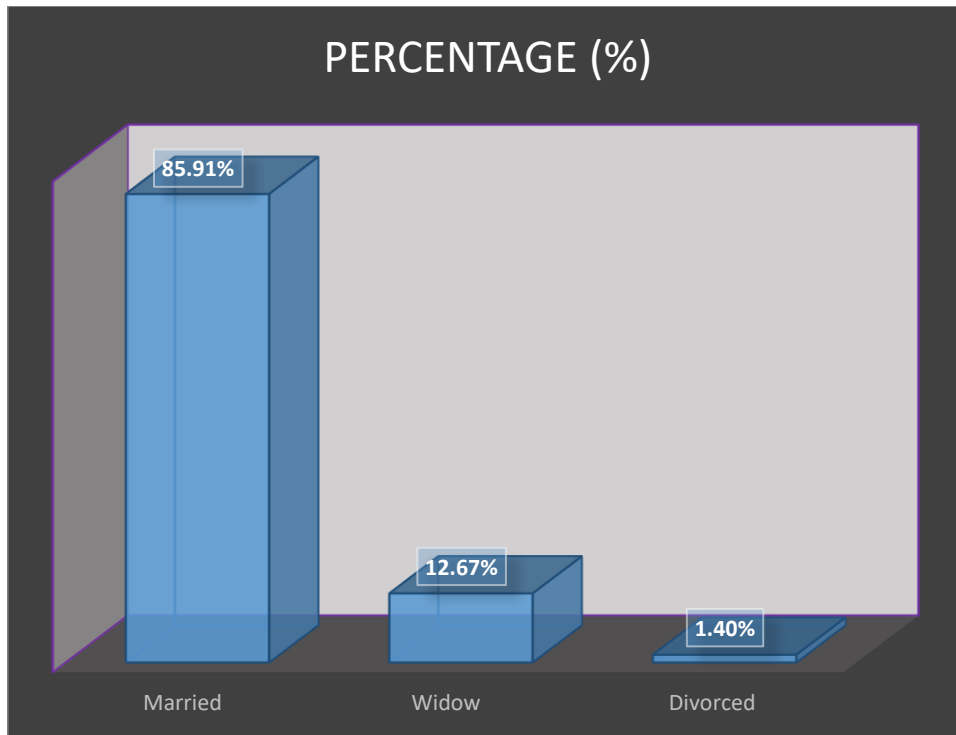


Table- 4 shows the Occupation of the beneficiaries of PMUY’s among tribal women.

Sr.No.	Category of Occupation	Percentage
1	Homemaker	40.14 %
2	Labor	42.25%
3	Farmer	17.60 %

Table-4 indicates the percentage of Occupation of the beneficiaries of PMUY’s tribal women . The results indicate that, 40.14 % beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY) were Homemaker. whereas, 42.25% beneficiaries of PMUY were Labor and 17.60 % beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY) were farmer . The findings show that most of the beneficiaries of Pradhan Mantri Ujjwala Yojana (PMUY) were Homemaker and labour.

Figure -4 illustrates shows the Occupation of the beneficiaries of PMUY’s among tribal women

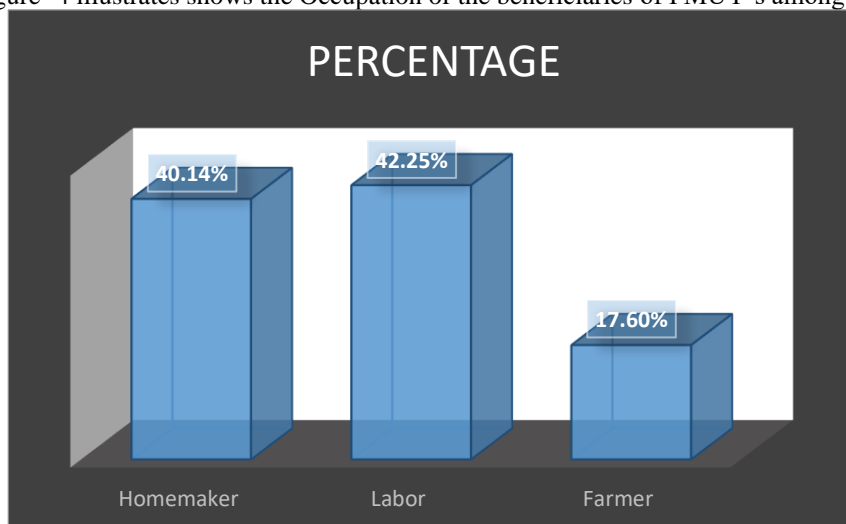
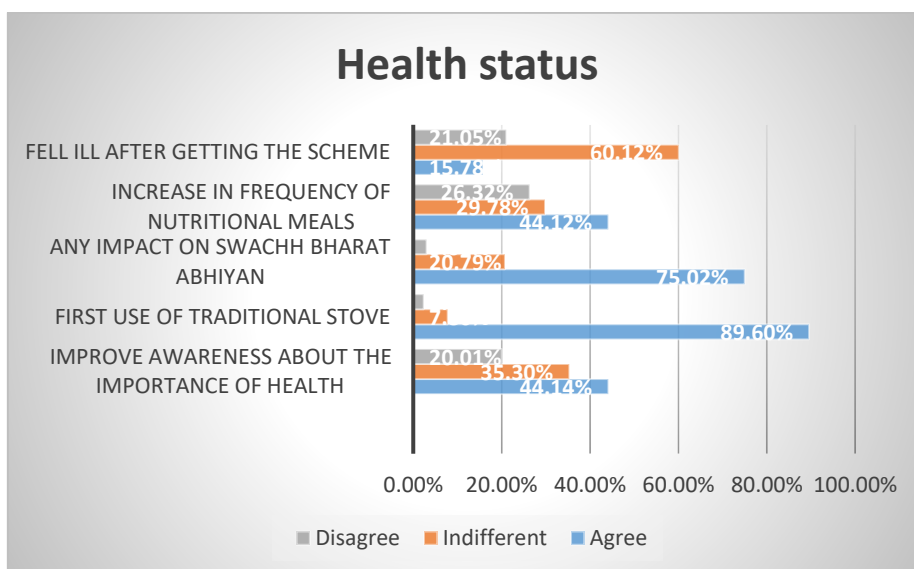


Table – 5 shows the percentage of responses of beneficiaries of Pradhan Mantri Ujjwala Yojana regarding health dimensions of tribal women.

Sr.No.	Health dimensions	Agree	Indifferent	Disagree
1	Improve awareness about the importance of health	44.14%	35.30%	20.01%
2	First use of traditional stove	89.60%	7.80%	02.33%
3	Any impact on Swachh Bharat Abhiyan	75.02%	20.79%	3.01%
4	Increase in frequency of nutritional meals	44.12%	29.78%	26.32%
5	Fell ill after getting the Scheme	15.78 %	60.12%	21.05%

Table-5 Shows the percentage of responses of beneficiaries of Pradhan Mantri Ujjwala Yojana regarding health dimensions of tribal women.

Figure-5 Shows the percentage of responses of beneficiaries of Pradhan Mantri Ujjwala Yojana regarding health dimensions of Tribal women



**RESULTS AND DISCUSSION**

Healthy women are essential for the social development of families, communities and countries. When women are living full and productive lives, free from disease, they can reach their full potential, contribute their skills to the workforce, and raise happy and healthy children ( Tripathi, 2019;Yadav et.al. 2020). The results show that 44.14.60% beneficiaries of Pradhan Mantri Ujjwala Yojana have agreed on improving awareness about the importance of health under the health dimensions of women empowerment, Whereas 35.30% beneficiaries of Pradhan Mantri Ujjwala Yojana have expressed indifference on improving awareness about the importance of health, On the other hand, 20.01% beneficiaries of Pradhan Mantri Ujjwala Yojana have expressed disagreement on improving awareness about the importance of health.

At the same time, 89.60% beneficiaries of Pradhan Mantri Ujjwala Yojana have agreed to use the traditional method of stove under the health dimensions of women empowerment; Whereas 7.80% of the beneficiaries of Pradhan Mantri Ujjwala Yojana have earlier expressed indifference towards the use of traditional stove;On the other hand, 02.33% beneficiaries of Pradhan Mantri Ujjwala Yojana have expressed their disagreement over the use of stove in the traditional way.

Firthermore , 75.02% beneficiaries of Pradhan Mantri Ujjwala Yojana have agreed that there is no impact on Swachh Bharat Abhiyan under health dimensions; While 20.79% beneficiaries of Pradhan Mantri Ujjwala Yojana have expressed indifference on any impact on Swachh Bharat Abhiyan; whereas, 20.79% beneficiaries of Pradhan Mantri Ujjwala Yojana have expressed indifference on any impact on Swachh Bharat Abhiyan, Moreover, 44.12% beneficiaries of Pradhan Mantri Ujjwala Yojana have agreed to increase the frequency of nutritional intake under health dimensions, Whereas 29.78% beneficiaries of Pradhan Mantri Ujjwala Yojana have expressed indifference on increasing the

frequency of nutritional meals; On the other hand, 26.32% beneficiaries of Pradhan Mantri Ujjwala Yojana have expressed disagreement on increasing the frequency of nutritious food.

Apart from this, 15.78% beneficiaries of Pradhan Mantri Ujjwala Yojana have agreed on Have you ever fallen ill after getting Ujjwala Gas under the health dimension; Whereas 60.12% beneficiaries of Pradhan Mantri Ujjwala Yojana have expressed indifference on whether they have ever fallen ill after getting the Ujjwala Gas Scheme; On the other hand, 21.05% beneficiaries of Pradhan Mantri Ujjwala Yojana have expressed disagreement on whether you have ever fallen ill after getting the Ujjwala Gas Scheme.

LPG can significantly reduce pollution, improving both environmental and public health. Despite government schemes like the PMUY enhancing access to clean energy, many households continue to rely on solid fuels, exposing themselves to severe health risks (Bansal, Saini, & Khatod, 2013). Recent research suggests that LPG use could prevent 150,000 deaths annually by reducing infant mortality, pulmonary diseases and providing significant health benefits to pregnant women (Gautam, 2024). Women living in villages play a vital role in helping their households and communities achieve food and nutrition security, generate income and improve rural livelihoods and overall well-being (Hammeed, 2016, Devi, 2017). They contribute to agriculture and rural enterprises and boost the local economy. (<https://www.un.org/womenwatch/feature/ruralwomen/facts-figures.html>). Women living in villages spend more time than urban women and men on household chores, including cooking in the traditional style, obtaining water and fuel, and caring for children and the sick. (<https://www.un.org/womenwatch/feature/ruralwomen/facts-figures.html>). Rural women have worse health outcomes and less access to health care than urban women. The number of health care providers, especially female health providers, is limited in many rural areas. (<https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2014/02/health-disparities-in-rural-women>)

## CONCLUSIONS

In discussing the above, the author said that Pradhan Mantri Ujjwala Yojana is play significant role to improve the health status of tribal Women

### Limitations of the study

The results of this study are limited to a relatively small preliminary survey of self-reported interview schedules rather than a study of actual behavior. Thus, participants may have answered questions in a socially desirable manner to avoid personal inadequacies. Another limitation is that the level of acculturation of the beneficiaries was not examined. A limitation of this study is that it reflects findings from some selected taluka.

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