

# A Study on The Victimization of The Women in The Narikuravar Community of Madurai District

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## ABSTRACT

The study explores the victimization of Narikuravar women, a marginalized and semi-nomadic tribal community focusing on access to education, employment, cultural-economic challenges, child marriage, and legal challenges. Conducted in Madurai, Tamil Nadu, the research adopts a quantitative research method approach to explore the various challenges faced by Narikuravar women. The study involves a sample of 102 women from the Narikuravar community and gathering information data on how gender-based violence and remains underreported due to fear of stigma, societal norms, and lack of trust in legal institutions. This study aims to investigate the awareness of the Prohibition of Child Marriage Act among the Narikuravars community and their nutrition health. The study highlights the education barriers faced by these women, lack of access to schools and their cultural stigmatization to limit their access to education and employment. Through this research, the study aims to reveal the pressing issues faced by Narikuravar women and offer recommendations to address their challenges, improve their well-being, and break the cycle of exploitation.

**Keywords:** victimization of Narikuravars women, education, employment, cultural & economic challenges, legal challenges

## INTRODUCTION

### Victim

Under the Criminal Procedure Code, 1973, by virtue of Act 5 of 2009, the definition of “victim” was added by way of section 2(wa) to mean a person who has suffered any loss or injury caused by reason of the act or omission for which the accused person has been charged and the expression “victim” includes his or her guardian or legal heir. [1]

### Narikuravargal

The Narikuravars are a semi-nomadic tribal community primarily found in Tamil Nadu. The name Narikuravargal can be divided into two words, Nari (fox) and Kuravar (a nomadic or tribal community) where the fox in their first name connects to the practice of observing animal behavior, especially foxes, to make fortune predictions of the future. Foxes were often considered religious creatures with the ability to sense upcoming events. The Narikuravargal probably evolved from the larger Kuravar tribal community, a group traditionally associated with

unsettled lifestyles, hunting, and gathering. Some specific groups of people within this community are proficient in fortune telling, giving a new rise to the Narikuravargal. They play a significant role in predicting natural signs and offer wise guidance an important occasion. Many Narikuravargal might have been Siddhar or spiritual healers who were well-versed in the Siddha medical system. [2]

### Occupation

In ancient times, they were skilled in tracking and hunting small animals, birds, and reptiles, using simple tools like traps, slingshots and bows. Implementation of the Wildlife Protection Act of 1972 in India, hunting was prohibited to secure the endangered species. Narikuravargal was engaged in traditional systems of education, spiritual practices, and community leadership. They were responsible for the youth by educating philosophy, literature, ethics, religion, and governance. This education was typically through oral traditions, where ancient would teach from religious write like the Thirukkural, Tamil Sangam literature, and some Vedic texts. They often as monks, pastor who led rituals and provide advices

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to individuals about religious and spiritual leadership. [3,4] Many narikurvavars families make sell handmade bead necklaces, bracelets during festival. some are

selling the small items such as toys, hair accessories, or household goods in roadside stalls and travelling vendors.



fig.1.



fig.2.

Bead craftsmanship by the narikurvavar community Narikurvavars also act as a daily wage labour in constructing sites, and agriculture. They often taught classical music, dance, and traditional forms of literature. In contemporary society, many Narikurvavargal are highly educated and hold positions in educational institutions, either as professors, researchers, or spiritual leaders. They continue to contribute to the development of philosophy, literature, and cultural studies through formal education.

### Education

In ancient times, the primary method of education in these early times was oral, where elders learned through discussions, debates, and storytelling. They followed Guru-shishya method of training. Elders teach Children about their history, customs, lifestyle, hunting methods, crafting tools and making bead jewelry. Children learn from their ancestors. In recent times the efforts taken by NGOs and governments have helped them to access schooling by providing scholarships and vocational training. In this modern era, many people from their community pursue degrees in many normed universities. They also connected to digital platforms publishing books and delivering speeches. [5]

### Habitat

The Narikurvavargal traveled across rural areas and villages in Tamil Nadu. They set huts and made tents

using bamboo, thatched and available materials. They settle near forests, open fields, highways and villages. In recent years government has taken initiatives to provide housing schemes for settling in secure places. In Madurai the Narikurvavar community first got their permanent house in 1991 under the Indira Gandhi Awas Yojana Scheme, under this scheme they constructed houses in the Sakkimangalam Panchayat.

### BACKGROUND

Narikurvavars migrated from Rajasthan, Gujarat, and Maharashtra to south India about 400 years ago. During the British colonial period, Narikurvavars were categorized under the “Criminal tribes Act” of 1871 and stigmatized for a long time. They were denotified in 1952, but still, the stigma continues. The Narikurvavar community was categorized under the Most Backward Classes (MBC) in Tamil Nadu in 1989. In 2016, the Central government officially recognized Narikurvavars communities as Scheduled Tribes (ST). Under this categorization, they get reservation in education, employment, economic schemes and cultural recognition. In December 2022 India Parliament passed the Constitution (Scheduled Tribes) order (Second Amendment) bill, 2022. [6]

### Health and Nutrition

Narikurvavars due to their semi-nomadic lifestyle and socioeconomic status lack access to nutrient-rich foods such as fruits, Vegetables, dairy and proteins. Lack of sanitation, poor hygiene and limited access to

clean water, no toilet facilities cause infectious diseases like diarrhea, malaria. Lack of awareness of maternal health can affect the mothers during pregnancy and childbirth. Inadequate access to healthcare services during prenatal and postnatal care



fig.3.

The water facility of narikuravar community in sakkimangalam, madurai district

### Challenges

Due to their isolation from formal education and urbanization, many narikuravars remain unaware of their rights. Still, they are stereotyped as criminals most of the companies do not provide jobs for the Narikuravar community. They sell beads, ornaments and handmade goods they earn low income and unreliable sources of livelihood. Lack of access to schools near the surroundings. The literacy rate among the narikuravars is very low, especially among women and children. Lack of awareness about hygiene, nutrition and preventive healthcare. [11]

### Significance:

The study will help raise awareness about education, employment, and reservations quota, with the involvement of NGOs, for Narikuravar women. It will also emphasize the need for greater access to resources and support, contributing to the empowerment of the community and promoting gender equality.

### Need of Study

This study will provide valuable insights into the root causes of the issues faced by Narikuravar women and assess the effectiveness of existing legal protections.

causes nutritional deficiency in mothers and infants. Discrimination, poverty and social stigmatization of narikuravar community make them into stressful condition like depression and anxiety. [7,8,9,10]



fig.4.

It will help identify the socio-cultural and economic factors contributing to the victimization of women.

### AIMS AND OBJECTIVES:

The aim of the research is to explore the victimization of women among narikuravars on Madurai district.

- To analyze the social-economic status of women among narikuravar community.
- To identifies the cultural factors, traditional practices, gender roles and societal stigmatization contributing to victimization of women among narikuravars.
- To identify the obstacles faced by narikuravar women in accessing education an employment.
- To investigate the health and nutrition issues faced by the narikuravar community
- To propose effective remedies to improve the living standard of the narikuravar community by addressing the challenges in education, employment, nutrition and health issues.

### RESEARCH METHOD

Sample of this case was taken on women from narikuravar community. Minimum of 102 samples are taken for this study in Madurai, Tamil Nadu. Quantitative method research for an in-depth understanding of the victimization faced by Narikuravar women.



**Data Collection Methods**

Sampling technique: snowball sampling.

Interviews: Semi-structured interviews with Narikuravar women to gather personal narratives.

**Target Population**

Primary Participants: Women from the Narikuravar community across various age groups.

**Method of Data Analysis**

Structured questions will be implemented in SPSS software used for static value of the collected data.

**PROCEDURE:**

The samples were collected from the womens in the Narikuravar Community. The researcher obtained consent from each individual sample. Data were collected using a questionnaire method. After collecting the samples the data were analysed, coded and the SPSS software was used for data analysis and interpretation.

**RESULT AND DISCUSSION:**

<b>Gender</b>				
Female	102	100.0	100.0	100.0
<b>Age</b>				
Under 18	7	6.9	6.9	6.9
18 - 30	52	51.0	51.0	57.8
30 - 35	35	34.3	34.3	92.2
Above 50	8	7.8	7.8	100.0
<b>Marital Status</b>				
Married	82	80.4	80.4	80.4
Unmarried	20	19.6	19.6	100.0
<b>Living Condition</b>				
House	87	85.3	85.3	85.3
Roadside Dwelling	15	14.7	14.7	100.0
<b>Religion</b>				
Hinduism	102	100.0	100.0	100.0
<b>Educational Qualification</b>				
Not Educated	98	96.1	96.1	96.1
Primary Education	1	1.0	1.0	97.1
Higher Secondary	2	2.0	2.0	99.0
Degree Holder	1	1.0	1.0	100.0
<b>Annual Income</b>				
Below 1,00,000	102	100.0	100.0	100.0
<b>Primary Education</b>				
0 - 25%	102	100.0	100.0	100.0
<b>Identity Proof</b>				
	102	100.0	100.0	100.0

Social economic condition

Table 1

According to the data, all of the people who were surveyed were female, and the majority of them (51%) were in the 18–30 age range. The majority of respondents (80.4%) are married and reside in homes (85.3%), whereas a smaller proportion (14.7%) live on the side of the road. With only a small percentage obtaining higher secondary or degree levels and

96.1% lacking any formal education, educational attainment is incredibly low. All responders, however, have identity documentation, which could facilitate their access to necessary services. Furthermore, the group as a whole earns less than ₹1,00,000 annually, which suggests financial difficulties. Overall, the results show that this community faces serious socioeconomic difficulties.

Category	Frequency	Percent	Valid Percent	Cumulative Percent
<b>Importance of Traditional Customs</b>				
Important	14	13.7	13.7	13.7
Neutral	81	79.4	79.4	93.1
Not Very Important	7	6.9	6.9	100.0
<b>Women's Participation in Community Decision-Making</b>				
Yes	91	89.2	89.2	89.2
No	11	10.8	10.8	100.0
<b>Women Expected to Follow Strict Cultural Norms</b>				
No	102	100.0	100.0	100.0
<b>Age of Girls When They Get Married</b>				
19 - 22	42	41.2	41.2	41.2
Above 22	60	58.8	58.8	100.0
<b>Child Marriage in the Community</b>				
Rarely	88	86.3	86.3	86.3
Sometimes	14	13.7	13.7	100.0

cultural factors and traditional practices

Table 2

According to the data, only 13.7% of respondents think traditional customs are important, while the majority (79.4%) are neutral. None are expected to

adhere to rigid cultural norms, and a sizable majority (89.2%) of women participate in community decision-making. The community reports that child marriage is uncommon (86.3%), with 58.8% of marriages taking place after the age of 22.

Category	Frequency	Percent	Valid Percent	Cumulative Percent
<b>Primary Responsible for Earning Income in the Family</b>				
Both Equally	102	100.0	100.0	100.0
<b>Are Girls Encouraged to Pursue Higher Education</b>				
Never	98	96.1	96.1	96.1
Sometimes	4	3.9	3.9	100.0
<b>Women Allowed to Work Outside the Community Without Restriction</b>				
Very Unlikely	75	73.5	73.5	73.5

Gender roles

Table 3

According to the data, income responsibility is distributed equally among all families surveyed.

Gender-based societal limitations are highlighted by

the fact that a sizable majority (96.1%) say that girls are never encouraged to pursue higher education and 73.5% think it is extremely unlikely for women to work outside the community without restrictions.

Category	Frequency	Percent	Valid Percent	Cumulative Percent
<b>Ever faced discrimination from outsiders based on your community?</b>				
Rarely	2	2.0%	2.0%	2.0%
Sometimes	51	50.0%	50.0%	52.0%
Often	35	34.3%	34.3%	86.3%
Always	14	13.7%	13.7%	100.0%
<b>Ever faced difficulties in accessing education because of your community?</b>				
Never	102	100.0%	100.0%	100.0%
<b>Any women in your community being denied job opportunities due to societal stigma?</b>				
Sometimes	4	3.9%	3.9%	3.9%
Often	22	21.6%	21.6%	25.5%
Always	76	74.5%	74.5%	100.0%
<b>Rate the level of discrimination faced by Narikuravar</b>				
High	82	80.4%	80.4%	80.4%
Moderate	20	19.6%	19.6%	100.0%

## Societal stigmatization and discrimination

Table 4

According to the data, half (50%) said they had occasionally experienced discrimination from outsiders, 34.3% said they frequently experienced it, and 13.7% said they always experienced it. All respondents (100%) said they had never encountered any obstacles when it came to access to education,

suggesting that educational accessibility may have improved. Women's employment prospects continue to be a significant concern, as 74.5% of respondents said they were consistently turned down because of social stigma. Furthermore, 80.4% of respondents gave their community's discrimination a high rating, underscoring the pressing need for social reforms.

Category	Frequency	Percent	Valid Percent	Cumulative Percent
<b>The nearest school from your home</b>				
1-3 km	102	100.0%	100.0%	100.0%
<b>Reason for stopping school</b>				
Lack of interest in studies	25	24.5%	24.5%	24.5%
Discrimination or social stigma	20	19.6%	19.6%	44.1%
Financial issues	57	55.9%	55.9%	100.0%
<b>Faced discrimination in school</b>				
Never	89	87.3%	87.3%	87.3%
Rare	1	1.0%	1.0%	88.2%
Sometimes	12	11.8%	11.8%	100.0%
<b>Age do most girls in your community stop going to school</b>				
10-12	21	20.6%	20.6%	20.6%
12-15	81	79.4%	79.4%	100.0%
<b>School of studying</b>				
Government school	102	100.0%	100.0%	100.0%
<b>Received scholarships or financial aid</b>				
No	102	100.0%	100.0%	100.0%
<b>Regular employment</b>				
One or two	89	87.3%	87.3%	87.3%
More than two	13	12.7%	12.7%	100.0%
<b>Primary source of income</b>				
Traditional occupation (bead selling)	78	76.5%	76.5%	76.5%
Daily wage labor	11	10.8%	10.8%	87.3%
Unemployment	13	12.7%	12.7%	100.0%

## Education and Employment

Table 5

According to the data, the majority of students (87.3%) have never encountered discrimination at school, while a tiny minority (11.8%) have occasionally done so. Just 1% of respondents said they had occasionally experienced discrimination. This suggests that although discrimination is not pervasive, a sizeable minority of students still

experience it on occasion. With 55.9% of students citing financial difficulties as a barrier, it seems to be the most common cause of school dropouts. Additionally, none of the students received financial aid or scholarships despite attending government schools. This implies that in order to increase school retention rates, financial assistance programs are desperately needed.

Category	Frequency	Percent	Valid Percent	Cumulative Percent
<b>Sanitized drinking water</b>				
Always	102	100.0%	100.0%	100.0%
<b>Aware of government nutrition programs</b>				
Aware	26	25.5%	25.5%	25.5%
Very aware	76	74.5%	74.5%	100.0%
<b>Food through government welfare scheme</b>				

Often	11	10.8%	10.8%	10.8%
Always	91	89.2%	89.2%	100.0%
<b>The nearest healthcare facility from your home</b>				
1-3 km	102	100.0%	100.0%	100.0%
<b>Prenatal care</b>				
Government hospital	102	100.0%	100.0%	100.0%
<b>Birth giving</b>				
Government hospital	102	100.0%	100.0%	100.0%
<b>Postnatal care</b>				
Never	63	61.8%	61.8%	61.8%
Rarely	35	34.3%	34.3%	96.1%
Sometimes	4	3.9%	3.9%	100.0%
<b>Family planning</b>				
Yes	102	100.0%	100.0%	100.0%
<b>Toilet facility in home</b>				
Yes	7	6.9%	6.9%	6.9%
No	95	93.1%	93.1%	100.0%
<b>Where usually go</b>				
Open defecation	97	95.1%	95.1%	95.1%
Shared community toilet	5	4.9%	4.9%	100.0%
<b>Usage of public toilet</b>				
Occasionally	6	5.9%	5.9%	5.9%
Rarely	81	79.4%	79.4%	85.3%
Never	15	14.7%	14.7%	100.0%
<b>Faced safety issue in public toilet</b>				
Yes	72	70.6%	70.6%	70.6%
No	30	29.4%	29.4%	100.0%
<b>Toilet facility during menstruation</b>				
Yes	102	100.0%	100.0%	100.0%
<b>Government support for toilet construction</b>				
Yes	18	17.6%	17.6%	17.6%
No	84	82.4%	82.4%	100.

### Health and Nutrition Conditions

Table 6

According to the data, there are notable gaps in postnatal care and sanitation, even though all respondents have access to sanitized drinking water and local medical facilities. 61.8% of women never receive postnatal care, despite the fact that all births take place in government hospitals. Furthermore, 95.1% of households are forced to use open

defecation because only 6.9% of them have a private toilet. Given that 70.6% of people report problems using public restrooms, this lack of sanitation raises safety concerns. Even though government programs encourage menstrual hygiene, only 17.6% of people have benefited from aid for building toilets, underscoring the pressing need for better sanitation facilities.

Category	Frequency	Percent	Valid Percent	Cumulative Percent
<b>Awareness of Government Welfare Schemes</b>				
Very Unaware	68	66.7	66.7	66.7
Unaware	18	17.6	17.6	84.3
Neither Aware nor Unaware	15	14.7	14.7	99.0
11.00	1	1.0	1.0	100.0
<b>Knowledge About Free Healthcare Services</b>				
Unaware	5	4.9	4.9	4.9
Neither Aware nor Unaware	9	8.8	8.8	13.7
Aware	69	67.6	67.6	81.4

Strongly Aware	19	18.6	18.6	100.0
<b>Awareness of Free Educational Opportunities</b>				
Unaware	57	55.9	55.9	55.9
Neither Aware nor Unaware	24	23.5	23.5	79.4
Aware	21	20.6	20.6	100.0
<b>Awareness of Prohibition of Child Marriage Act 2006</b>				
Unaware	5	4.9	4.9	4.9
Neither Aware nor Unaware	6	5.9	5.9	10.8
Aware	18	17.6	17.6	28.4
Strongly Aware	73	71.6	71.6	100.0
<b>Knowledge About Women's Rights and Legal Protection</b>				
Never	70	68.6	68.6	68.6
Rarely	19	18.6	18.6	87.3
Sometimes	13	12.7	12.7	100.0
<b>Challenges in Accessing Government Support</b>				
Lack of Awareness	90	88.2	88.2	88.2
Others	12	11.8	11.8	100.0
<b>Access to Financial Support</b>				
Never	67	65.7	65.7	65.7
Rarely	7	6.9	6.9	72.5
Sometimes	9	8.8	8.8	81.4
Often	19	18.6	18.6	100.0

#### Awareness and Accessibility

Table 7

According to the data, 66.7% of the community is "Very Unaware" of government welfare programs, and 17.6% is "Unaware." This indicates a serious lack of knowledge about these programs. Only 20.6% of respondents said they were aware of free educational opportunities, despite 67.6% saying they were

"Aware" of free healthcare services. Furthermore, 68.6% of respondents say they have "Never" come across information about women's rights and legal protection, despite a high awareness of the Prohibition of Child Marriage Act (71.6%). The pervasive "Lack of Awareness" (88.2%) is a major obstacle to obtaining government assistance.

<b>Educational Qualification</b>	<b>Lack of Interest in Studies</b>	<b>Discrimination or Social Stigma</b>	<b>Other Reasons</b>	<b>Never Faced Discrimination</b>	<b>Rarely Faced Discrimination</b>	<b>Sometimes Faced Discrimination</b>
Not Educated	22	20	56	86	1	11
Primary Education	1	0	0	1	0	0
Higher Secondary	2	0	0	2	0	0
Degree Holder	0	0	1	0	0	1
Total	25	20	57	89	1	12

#### Crosstabulation Educational Qualification and Experiences of Discrimination

Table 8

According to the Cross-tabulation data, the majority of uneducated people stopped going to school because they were uninterested in learning (22) and because they were subjected to discrimination or social stigma

(20), with many (77) dropping out between the ages of 12 and 15. Although some (11) of the uneducated group reported occasionally experiencing discrimination, a sizable portion (86) said they had never encountered it. Few people achieve higher secondary (2) or degree level (1), indicating early dropout trends in the community.



<b>Educational Qualification</b>	<b>Studied in Government School</b>	<b>Received No Scholarships/Financial Aid</b>	<b>Never Faced Difficulties in Accessing Education</b>
Not Educated	98	98	98
Primary Education	1	1	1
Higher Secondary	2	2	2
Degree Holder	1	1	1
Total	102	102	102

Cross tabulation Educational Qualification and Access to Education

Table 9

According to the cross-tabulation data, all 102 respondents attended government schools and did not receive financial aid or scholarships. Furthermore,

none of them said that their community had ever made it difficult for them to get an education. Even so, the vast majority (98) do not have an education, pointing to structural obstacles that go beyond simple institutional or financial access.

Age Group	Bead Selling	Daily Wage	Unemployment	Income Responsibility	Women Working Outside (Very Unlikely)	Women Working Outside (Unlikely)	Job Opportunities Lost Due to Stigma
Under 18	5	0	2	7	5	2	0
18 - 30	38	8	6	52	39	13	2
30 - 35	27	3	5	35	24	11	2
Above 50	8	0	0	8	7	1	0
Total	78	11	13	102	75	27	4

Cross Tabulation of Age Group and Employment-Related Factors

Table 10

According to the cross-tabulation data, traditional occupations (78) are the main source of income, particularly for people in the 18–30 age range (38) and 30–35 age range (27). Working outside the

community is severely restricted for women; 75 respondents said it is "very unlikely." Furthermore, social stigma often prevents 76 women from obtaining employment, especially among those aged 18 to 30 (44). All age groups share equal income responsibility in spite of these obstacles.

Age	Prenatal Care: Government Hospital	Food Through Government Welfare Scheme	Postnatal Care: Never	Postnatal Care: Rarely	Postnatal Care: Sometimes	Total
Under 18	7	Often: 1, Always: 6	7	0	0	7
18 - 30	52	Often: 4, Always: 48	33	17	2	52
30 - 35	35	Often: 4, Always: 31	20	13	2	35
Above 50	8	Often: 2, Always: 6	3	5	0	8
Total	102	Total (Often: 11, Always: 91)	63	35	4	102

Cross Tabulation of Age and Health Care

Table 11

According to the cross-tabulation data, 91 respondents—particularly those between the ages of 18 and 30—frequently depend on government welfare programs for their food needs (48). There is a

significant reliance on public healthcare, as evidenced by the fact that government hospitals provide nearly all prenatal and delivery care (102 cases). However, 63 respondents—mostly from the 18–30 (33) and 30–35 (20) age groups—never received postnatal care, highlighting gaps in maternal health support. The

results show that even with sufficient prenatal and delivery support, access to postnatal care needs to be improved.

Living Condition	Toilet Facility at Home (Yes)	Toilet Facility at Home (No)	Usually Go for Open Defecation	Use Shared Community Toilet	Faced Safety Issues in Public Toilets (Yes)	Faced Safety Issues in Public Toilets (No)	Toilet Facility During Menstruation (Yes)
House	6	81	83	4	63	24	87
Roadside Dwelling	1	14	14	1	9	6	15
Total	7	95	97	5	72	30	102

Cross Tabulation of Living Condition and Toilet Facility Data

Table 12

According to the cross-tabulation data, 97 people must rely on open defecation because 95 households lack toilets. With 72 respondents experiencing problems using public restrooms, particularly those residing in homes (63 cases), safety is a major concern. A significant gap in sanitation infrastructure was highlighted by the fact that only 18 people

received government assistance for the construction of toilets, even though 102 people had access to menstrual hygiene facilities. The results highlight how urgently vulnerable communities need better restrooms and government assistance.

### Logistic regression

#### Classification Table

Observed	Predicted: yes	Predicted: no	Percentage Correct
Toilet facility in home = yes	5	2	71.4%
Toilet facility in home = no	0	95	100.0%
Overall Percentage			98.0%

### Variables in the Equation

Variable	B	S.E.	Wald	df	Sig.	Exp(B)
Where usually go	-12.532	8987.421	0.000	1	0.999	0.000
Constant	16.393	8987.422	0.000	1	0.999	13158019.207

Regression Table: Toilet Facility in Home

Table 13

According to the logistic regression the dependent variable "toilet facility in home" is significantly influenced by the predictor "where usually go," according to the regression analysis. With a p-value of 0.000 and an F-value of 232.843, the model is statistically significant, suggesting that the predictor accounts for a sizable amount of the variation in the availability of restroom facilities. The unstandardized

coefficient for "where usually go" is -0.490, which indicates that the availability of a toilet facility in the home decreases by 0.490 units for every unit increase in this predictor. The findings imply that the absence of a toilet facility at home is associated with the places where people typically go (presumably referring to open defecation). Because of the inverse relationship between these two factors, places where people lack access to restrooms.

	Frequency	Percent	Valid Percent	Cumulative Percent
unaware	5	4.9	4.9	4.9
neither aware or unaware	6	5.9	5.9	10.8
aware	18	17.6	17.6	28.4
strongly aware	73	71.6	71.6	100.0
Total	102	100.0	100.0	

Aware of prohibition of child marriage act 2006

Table 14

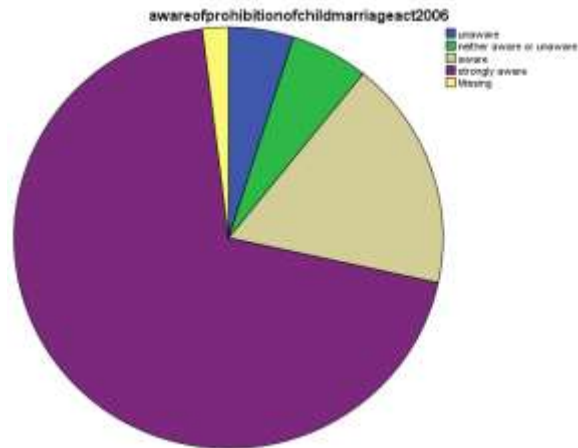


Chart 1

The chart data shows that a majority (71.6%) are strongly aware of the Prohibition of Child Marriage Act, 2006, while 17.6% are aware to some extent. However, 10.8% remain unaware or uncertain,

indicating gaps in legal awareness. Strengthening community education and outreach efforts can help ensure universal awareness and enforcement of the law.

Category	Frequency	Percent	Valid Percent	Cumulative Percent
Very Unaware	68	66.7	66.7	66.7
Unaware	18	17.6	17.6	84.3
Neither Aware or Unaware	15	14.7	14.7	99.0
11.00	1	1.0	1.0	100.0
Total	102	100.0	100.0	

Aware of government welfare schemes

Table 15

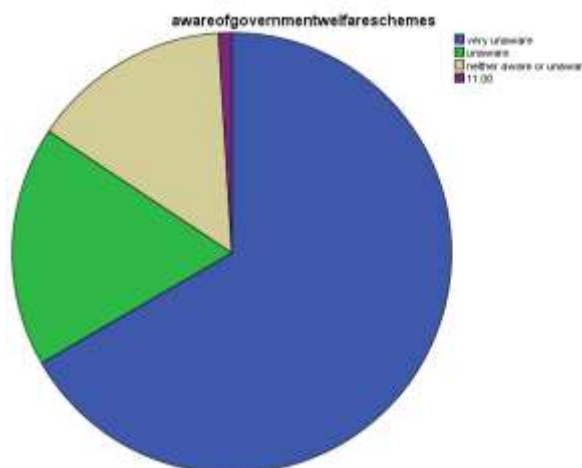


Chart 2

According to the chart data, 84.3% of respondents lack adequate awareness of government welfare programs, with the majority (66.7%) being very unaware and 17.6% being unaware. Nearly none of the respondents (1%) reported higher awareness, and

only a small percentage (14.7%) are neutral. In order to guarantee that communities can access and profit from government assistance programs, this reveals a serious awareness gap and highlights the necessity of improved outreach, education, and communication initiatives.

Category	Frequency	Percent	Valid Percent	Cumulative Percent
unaware	57	55.9	55.9	55.9
neither aware or unaware	24	23.5	23.5	79.4
aware	21	20.6	20.6	100.0
Total	102	100.0	100.0	

Aware of government welfare schemes

Table 15

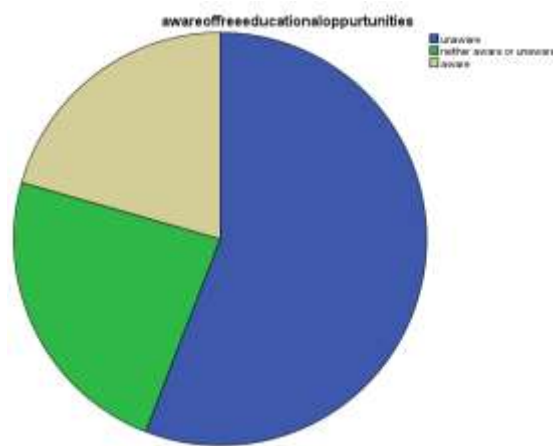


Chart 3

According to the chart data, 23.5% of respondents are neither aware nor unaware of free educational opportunities, while 55.9% of respondents are unaware of them, suggesting a lack of precise knowledge. There is a notable awareness gap, as only

20.6% are aware. To guarantee that more people can take advantage of free educational opportunities, this points to the necessity of more robust outreach initiatives, community involvement, and educational campaigns.

Category	Frequency	Percent	Valid Percent	Cumulative Percent
Lack of awareness	90	88.2%	88.2%	88.2%
Others	12	11.8%	11.8%	100.0%
Total	102	100.0%	100.0%	

Challenges in accessing government support

Table 17

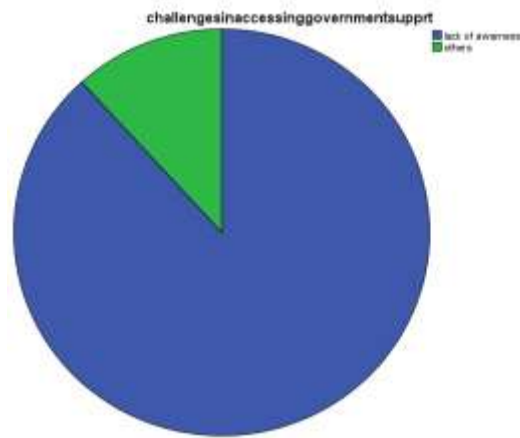


Chart 4

According to the chart data reveals that 88.2% of respondents face challenges in accessing government support due to a lack of awareness, while only 11.8% cite other reasons. This indicates that awareness is the primary barrier preventing people from benefiting

from government programs. Improving information dissemination, conducting awareness campaigns, and enhancing accessibility can help bridge this gap and ensure better utilization of government support services.

Category	Frequency	Percent	Valid Percent	Cumulative Percent
Never	67	65.7	65.7	65.7
Rarely	7	6.9	6.9	72.5
Sometimes	9	8.8	8.8	81.4
Often	19	18.6	18.6	100.0
Total	102	100.0	100.0	

Access to financial support

Table 18

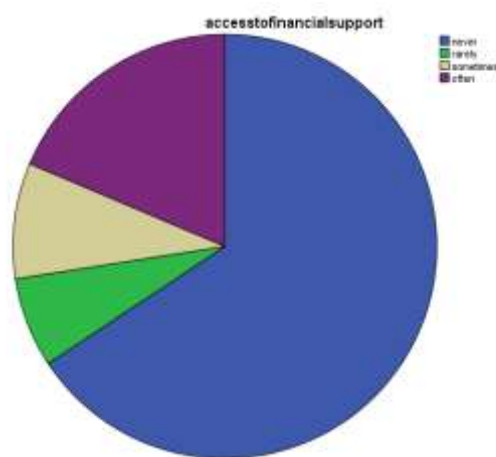


Chart 5

According to the chart data, over 72% of respondents face significant financial barriers, with 65.7% reporting never having access to financial support and 6.9% reporting receiving it infrequently. The fact that only 8.8% occasionally and 18.6% frequently apply for financial aid suggests that funding is scarce and erratic. In order to better assist those in need, financial

assistance programs must be made more widely available, more widely known, and more widely distributed.

## DISCUSSION:



The result of the project is aims to analyse the socio-economic status of women within the Narikuravar community, focusing on the cultural factors, traditional practices, gender roles, and societal stigmatization that contribute to their victimization. By understanding the impact of these deeply rooted practices, the project highlights how they limit the opportunities and freedoms of Narikuravar women. One significant objective is to identify the difficulties these women face in accessing education and employment, which are crucial for breaking the cycle of poverty. The study also investigates the pressing health and nutrition issues within the community, including inadequate postnatal care, poor sanitation, and limited access to essential healthcare services. However, collecting data on such sensitive topics presents several challenges, including cultural barriers and societal prohibitions, which may result in hesitation among community members to openly discuss issues such as discrimination, and health problems. Additionally, lack of awareness about government schemes and educational opportunities complicates the data collection process. Socio-economic factors such as financial difficulties and illiteracy further hinder participation in surveys or interviews. Despite these difficulties, the research aims to propose effective remedies to address the challenges faced by Narikuravar women in education, employment, nutrition, and healthcare, with a focus on cultural sensitivity and community involvement. The findings are expected to inform interventions that can improve the living standards of the Narikuravar community and also provide vocational training and entrepreneurial support to help women gain financial independence and self-sufficiency. Conduct regular legal workshops and awareness sessions to educate women about their rights, legal protections, and available support systems. Encourage non-governmental organizations (NGOs) and self-help groups to work with the community, creating a support for women. Create legal support systems to guarantee efficient victimization prevention and easily accessible legal aid. The Government has provided fund and assistance to construct restrooms for the narikuravar community. This initiative aims to improve sanitation and enhance their quality of life

## CONCLUSION:

The study provides a comprehensive analysis of the socio-economic status of women in the Narikuravar community, like on various cultural, social, and economic challenges they face. The findings indicate that traditional practices, gender roles, and societal stigmatization significantly contribute to the victimization of women, limiting their access to education, employment, and essential resources. The lack of awareness regarding government welfare schemes and legal rights further increase their struggles difficulties in accessing education and employment are evident, with many women facing financial constraints, discrimination, and societal norms that discourage them from seeking opportunities beyond their community. Health and nutrition issues are also prominent, as poor access to healthcare services and inadequate nutritional support contribute to the community's vulnerability. The prevalence of child marriage, limited financial support, and lack of proper sanitation facilities further highlight the urgent need for intervention. To improve the living standards of the Narikuravar community, effective remedies must be implemented. These include enhancing educational opportunities, increasing awareness about government welfare programs, providing skill-based employment training, improving access to healthcare, and addressing societal barriers that restrict women's empowerment. Collaborative efforts from governmental and non-governmental organizations are crucial in ensuring sustainable development and empowerment for the Narikuravar women

## REFERENCE

1. AM LEGALS. Who is a victim under Indian laws? 2016 Mar 21 [cited 2025 Apr 12]. [https://amlegals.com/who-is-a-victim-under-indian-laws/?utm\\_source](https://amlegals.com/who-is-a-victim-under-indian-laws/?utm_source)
2. Vijay S. Identities of Narikuravars in Tamil Nadu. SELP J. 2018;49. <https://iaraindia.com/wp-content/uploads/2018/12/SELP-Journal-previous-issues.pdf#page=49>
3. Susairaj A. The study of Narikuravar community: Challenges faced in transition from their traditional to present occupation. J Nanzan Acad Soc Humanit Nat Sci. 2023; 26:115–135. [https://scholar.google.com/scholar?hl=en&as\\_sdt=0%2C5&q=antony+susairaj+research+on+narikuravar&btnG=](https://scholar.google.com/scholar?hl=en&as_sdt=0%2C5&q=antony+susairaj+research+on+narikuravar&btnG=)

4. Dragomir CI. Gendered practices as rituals of knowledge. *Feminist Theory*. 2019;20(3):326–333. Available from: <https://doi.org/10.1080/14616742.2019.1599296>
5. Kumar SH, Priyadharsini S, Kaviya DE, Arjunan R, Rajeshwari K, Little Flower FXL. An intricate research on developing successful entrepreneurship of women in Narikuravar community: Enhancing self-reliant India. In: ICSSR Ebook. 2022. p. 245. <https://webfiles.amrita.edu/2022/10/icssr-ebook-2022.pdf#page=245>
6. Chandru S, Thirumalasamy K. Status of Narikuravar (a type of gypsy community) women entrepreneur in Coimbatore, Tamil Nadu. *Asian Rev Soc Sci*. 2019;8(2):150–155 <https://doi.org/10.51983/arss-2019.8.2.1565>
7. Priya S, Sridevi PN, Thirukumaran R, Robinson J, Muthuraman AK. Prevalence of low bone mineral density among Narikuravar women of 18–45 years of age in Sakkimangalam Village, Madurai, 2021. *Indian J Community Med*. 2025;50(2):289–294. [https://doi.org/10.4103/ijcm.ijcm\\_711\\_23](https://doi.org/10.4103/ijcm.ijcm_711_23)
8. K S, Chellappa LR, Indiran MA, Kumar JK. Self-perceived stress and oral health-related quality of life among tribal gypsies in Chennai. *J Pioneering Med Sci*. 2023 Oct;12(3):15–19. <https://jpmsonline.com/article/jpms-volume-12-issue-3-pages15-19-ra/>
9. Kumaraguru M, Balasubramaniam A, Arumugham M. Oral health status and oral health risks among tribes in Tamil Nadu, India: An epidemiological study. *Cureus*. 2020;12(7):e48721. Available from: <https://doi.org/10.7759/cureus.48721>
10. Kanthiah Alias Deepak R, Velaudham C, Manivannan M. "Gypsy" Narikuravar community: Problems in accessing health care services. *Indian J Community Med*. 2019;44(2):143–146. Available from: <https://doi.org/10.5958/0976-5506.2019.02400.8>
11. Dragomir CI, Zafiu M. Vulnerable populations' access to health care: A study of the nomadic "Gypsy" Narikuravars in Tamil Nadu, India. *Int J Res Stud*. 2019;8(2):1–12. Available from: <https://doi.org/10.17583/ijrs.2019.3034>
12. K S, Chellappa LR, Indiran MA, Kumar JK. Self-perceived stress and oral health-related quality of life among tribal gypsies in Chennai. *J Pioneering Med Sci*. 2023;12(3). Available from: <https://doi.org/10.61091/jpms20231234>.

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