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TITLE OF THESIS : **Nutritional Status of Dalit Community – A Case Study of
Khagaria District (Bihar)**

ABSTRACT

Nutrition is the one of the most important emerging area of study today to understand the level of the development of the nation. Nutritional status reflects the health status and the level of economic growth of population in a particular society or nation. Indian society is structured on the basis of social/caste discrimination and untouchability. Poverty and social discrimination are complementary to each other. Dalits are the most vulnerable section of the Indian society. They have suffered and are continuously suffering from deprivation of ownership of the means of production and resources, and faced with social exclusion. The nutritional status of Dalits across all over India is minimally low, and the present study is examining the nutritional status of Dalits in Khagaria district of Bihar.

Against the backdrop of intense interest shown by government, policy makers, researchers and social movements to know and solve the nutritional deficiencies of the Dalit community, the study tries to evaluate the nutritional status of the Dalit society in Khagaria district of Bihar, giving special thrust to women and children. The study also examines the health policy of the government or governments and their impact on the nutritional improvement of the Dalit community.

The 2011 census has found Khagaria with a sex ratio of 864, the lowest in urban areas. The study took into account the secondary sources, along with doing a primary survey and analysis

base on it. The study is not highly technical, but more socioeconomic. That is, the study made less use of BMI calculations; yet it made use of food intake measurements and health variables. Study is subject to margin of error. The present research leaves scope for further studies in the area and related aspects. Health, especially of Dalit women and children, as a development paradigm and exclusion variable has further relevance and scope for study. The present work, the author believes, may contribute to this vast range of enquiry.

The study made the following Recommendations and Suggestions:

- The issue of inequality of health should be part and parcel of any discourse on inequality in social, economic, political and civil spheres of Dalit oppression.
- Create mechanisms within the whole healthcare system where the Dalits get a space to voice their health needs and be partners in setting their healthcare priorities and participating in developing creative health programmes to deal with their inequalities.
- There should be allocation of resources in the spheres of health and related sectors in favour of disadvantaged groups so that the gaps in their health status are narrowed.
- Dalits being the poorest in society, approaching the private system for care is a clear indicator of the failure of the public health system that needs to be looked at closely.
- Dalit women have been most ignored and special attention should be given to them.
- Government should move to the rights perspective in addressing the nutritional and health issues.
- Government should take significant steps to facilitate the opportunities in education and jobs which may further solve the problem of health in the rural settings and to some extent in the urban settings. In addition, the social organizations and civil society have to encourage proactive provisions to better the conditions of Dalits in general and those in Khagaria in particular.