

- (a) Have they accepted the co-existence with non-tribals?
- (b) Have they accepted the territorial division between their territory and that under the active occupation of non-tribal villagers?
- (c) Why do they plunder villager's farms and houses even now.

(iii) *Extent of acceptance could be understood by finding answers to the following:*

- (a) acceptance by only few people
- (b) acceptance by particular age group
- (c) acceptance in a specific situation (name such situations)
- (d) acceptance by all in the specific situation only
- (e) acceptance by the all in all the situations
- (f) sex-wise difference in extent of acceptance in all above cases

## (II) SHORTAGE OF FOOD

- (i) Shortage of food could be assessed by investigating the following sub-issues:
  - (a) Nutritional status of Jarawas
  - (b) Identification of animal and plant food items in Jarawa Forest
  - (c) Availability and accessibility of such animal & plant food items.
  - (d) Extent of utilization of such items by Jarawas.
  - (e) Shortage / adequate / plenty of these items for Jarawas.
  - (f) Diversification of utilization of food items naturally available.
  - (g) Quantity / extent of consumption of foreign (outside) food items.

## (III) OCASSIONAL MEDICAL HELP

- (i) The following aspects would be relevant to the Health and Medical Care for the Jarawas:
  - (a) Morbidity / disease pattern in different months / seasons.
  - (b) Etiology of diseases (causes of diseases).
  - (c) Diseases occurring prior to outsiders contact.
  - (d) Morbidity and mortality due to diseases occurred prior to outsiders contact.
  - (e) Ethno-medicine and its extent of efficacy.
  - (f) New Diseases due to contact with outsiders their morbidity and mortality.
  - (g) Preventive measures for aboriginal and new diseases.
  - (h) Curative measures for aboriginal and new diseases.
  - (i) Promotive measures for aboriginal and new diseases.
  - (j) Module of Health delivery system for Jarawa.