

# Occupational Health Risks among Unorganised Sectors in India: An Analysis

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**Abstract:** Occupational health risks are the emerging problems all over the world. Majority of the manpower belongs to unorganized or informal sectors and it constitute a vital part of the Indian economy. Unorganised sector play a crucial role in the field of Labour sector. Unorganised workers faces lots of occupational health risks due to the nature of work and working condition/environment. Occupational health risks becomes more sensitive when people ignore safety measures. Around ninety three percent of the total workforces are engaged in informal sectors (only seven percent of the total manpower is engaged in formal sector) such as Rags pickers, Mines workers, Weavers, Rickshaw Pullers, leather workers, tea or coffee workers, silk workers, building and other construction workers, sewage and sanitary workers etc.

**Keywords:** Occupational Health Risk, Hazards, Informal Sector, Unorganised Sector

## Introduction:

The World Health Organization (1948) defines health in its broader sense as “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity”

## Safety and health at work – A human right

The right to safety and health at work is enshrined in the United Nations Universal Declaration of Human Rights, 1948, which states:

Everyone has the right to work, to free choice of employment, to just and favourable conditions of work ... (Article 23)

The United Nations International Covenant on Economic, Social and Cultural Rights, 1976, reaffirms this right in the following terms:

The States Parties to the present Covenant recognize the right to everyone to the enjoyment of just and favourable conditions of work, which ensure, in particular... (b) Safe and healthy working conditions ... (Article 7).

At its first session in 1950, the Joint ILO/WHO Committee on Occupational Health defined the purpose of occupational health. It revised the definition at its 12th session in 1995 to read as follows:

“Occupational health should aim at: the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations; the prevention amongst workers of departures from health caused by their working conditions; the protection of workers in their employment from risks resulting from factors adverse to health; the placing and maintenance of the worker in an occupational environment adapted to his physiological and psychological capabilities; and, to summarize: the adaptation of work to man and of each man to his job”.

The term ‘**Informal Sector or Unorganised Labour**’ stands for those workers who have not been able to organise themselves in pursuit of their common interests due to certain constraints like the casual nature of employment, ignorance and illiteracy and small and scattered size of establishments, etc. Ministry of Labour has categorised the unorganised labour force under four groups in terms of occupation, nature of employment, especially distressed categories and service categories. The very common nature and characteristics of unorganised labour is like lack of relationship between employee and employer.

Unorganised workers are facing lots of problems apart from health risks many other problems are facing by the unorganised labour such as minimum wages, payment of wages, equal remuneration for similar work or work of a similar nature, working conditions, conditions of works, regularization of work, working hours, pensions etc.

We could define unorganised sector into the following words

"The unorganised sector consists of all unincorporated private enterprises owned by individuals or households engaged in the sale and production of goods and services operated on a proprietary or partnership basis and with less than ten total workers".

"Unorganised workers consist of those working in the unorganised enterprises or households, excluding regular workers with social security benefits, and the workers in the formal sector without any employment/ social security benefits provided by the employers".

There are some specific characteristics of unorganised labour such as there is no such relationship between employer and employee, both labour and establishment is scattered in nature, there is casual nature of employment, unorganised labour is ignored by the employer as well as State, majority of the labours are illiterate and not aware about their rights, get minimum wages and unequal wages for similar work or work of a similar nature especially to the women, overtime, do not get paid holiday or sick leave, work in a unhygienic place, do not idea about trade union, high level of work insecurity is very common, loss of job due to silly reason,

In terms of occupation, it included small and marginal farmers, landless agricultural labourers, share croppers, fishermen and those engaged in animal husbandry, beedi rolling, labelling and packing, building and construction workers, leather workers, weavers, artisans, salt workers, workers in brick kilns and stone quarries, workers in saw mills, oil mills etc.,.

In terms of nature of employment, they are attached with agricultural labourers, bonded labourers, migrant workers, contract and casual labourers.

Toddy tappers, scavengers, carriers of head loads, drivers of animal driven vehicles, loaders and unloaders, belong to the especially distressed category.

And midwives, domestic workers, fishermen and women, barbers, vegetable and fruit vendors, newspaper vendors etc. come under the service category.

### **Occupational Health Risks: Some Perspective**

Health risks are very common among informal sectors and informal sector are highly neglected by the government. Occupational Health Hazards among informal sector is very common. Occupational health hazards are the health risks which arises from the occupation. There are various common health risks such as eye burning, skin infection, breathing problem, lung infection, tuberculosis, back pain, headache, backache, stress, fatigue etc. Government ignores all forms of health security of the unorganised labour.

We see many times an individual's health fails not only due to genetic or hereditary causes but also due to the working conditions of the labour. Working conditions of the labour exposes the physical, biological and chemical risks which make vulnerable to an individual. Individual faces lots of occupational health risks.

They do not have any knowledge about work hazardous and occupational safety: Introduction of different hazardous machinery, high rise in construction, unguarded machinery, various toxic chemical, coal dust, lime dust, blazes crude materials for synthetic generation leads quantities of tragic deaths of many unorganized labours because the working condition is more severe as compared to that organized sectors furthermore the knowledge of occupational health and safety is negligible of the workers of unorganized sectors

There have been a series of labour laws aimed at ameliorating the conditions of labour; some of these laws are directly related to the safely and health conditions of workers employed in specific occupation and profession. But these do not cover the causal and contract labourers. However, it is precisely these categories of workers, who work in unhealthy environments and are engaged in dangerous production processes; they form the bulk of the labour force as far as the informal sector is concerned. Since, the prevalence of unemployment in developing countries is in very high order, so workers are prepared to accept any job, irrespective of the dangers and inhuman working environment. In most of the developing countries, particularly India, labour is abundant and easily replaceable; therefore employers see no need to invest in measures to safeguard the health of workers. When the security of employment and consequently of livelihood is not guaranteed, it is foolhardy to expect health hazards stemming from the nature of employment to be addressed. The emphasis on growth has, therefore, increased the health risks confronting the vast majority of workers in the developing countries.

### **Nature of Occupational Health Risks among Unorganised Labour**

Occupational health risks may be same or different in forms depend upon the nature of labour. Occupational health risk arises not only by the nature of work or working conditions but it also arises from the ignorance of the safety measures. Health and occupation is associated to each other and we cannot separate to each other. Here Author is trying to describe the various occupational health risks through analysing various studies based on occupational health risks among workers who are engaged in unorganised work and these workers faces various occupational health risks which may arises from their work due to the nature of work or working condition. Author tried to discuss various occupational health risks under the following sub-headings of workers engaged in different unorganised work.

### Weaving Workers

Workers engaged in weaving are suffering from various health risks due to the less leg space (congested space), continuous sitting or standing without rest, work for long hour without rest of work (interval of work), weaving for a long hour in a same position or posture, inhale fibre or dust while weaving, lack of proper ventilation facility and poor hygiene conditions. Weaving workers are suffering from many occupational health risks such as headache, spondylitis problem, shoulder pain, backache, knee pain, breathing problem, , hearing problems, chest problem and pain in palm or hand joints. Authors here mentioning a report study which explicitly showed the common health risks

Sr. No.	Health Risks	Frequency (Percentage)
1	Headache	17(24.29%)
2	Spondylitis	22 (31.42 )
3	Shoulder pain	30 (42.86%)
4	Backache	35(50%)
5	Pain in palm + Stiffness of hand joints	32 (45.71%)
6	Obesity	5(7.14%)
7	Knee pain+ Pain in calf muscles	30 (42.86%)
8	Breathing problem and chest pain	25 (35.71%)
9	Hearing problem	10 (14.29%)

Occupational health hazards related to weaving Alka goel & Isha tyagi (international journal of applied mathematics & statistical sciences (ijamss) vol.1, issue 1 August 2012 22-28, iaset).

Above study showed that backache, pain in palms, stiffness of hands joints, shoulder pain and knee pain and pain in calf muscles are the major occupational health risks among the weavers industry.

### Rags Pickers:

Rag pickers play a vital role but their work is not recognised by the State and the People. We can also say that they are the real hero of the Clean India Mission (Swaccha Bharat Abhiyan). Urban developments without the existence of rag pickers are like life without breath. Rag pickers are important and integrated part of the metro cities. We see rag pickers in urban and metro cities. The main function of the rag pickers is to collect the recyclable material. Life of rag pickers and working environment is very difficult. Rag picking consider as one of the unhygienic and hazardous profession. To examine the occupational health risks and working condition of the rag pickers a study has been done by the multi authors under the title of "Occupational and Environmental Hazards (Physical and Mental) among Rag Pickers in Mumbai Slums: A Cross-Sectional Study". These Authors are Balu Natha Mote, Suhas Balasaheb Kadam, Shrikant Kishorroa Kalaskar, Bharat Shivaji Thakare, Ambadas Suresh Adhav and Thirumugam Muthuvel. Metro cities of India like Mumbai, Delhi, Kolkata, Chennai, Bangalore etc. The above mentioned study shows that most of the workers are suffering from various occupational health risks such as dog biting and cat biting is very common in this occupation. Redness of eyes, tuberculosis, skin infections, asthma, backache, body ache headache is the most common occupational health diseases.

### Rickshaw Pullers

Rickshaw pullers work for long hours without taking rest. People who are engaged in rickshaw pulling addicted to alcoholism. Rickshaw puller does not take proper nutrition so they frequently fall ill and it leads to extra economic burden apart from occupational health hazards. They work for approximately 8 to 9 hours a day irrespective of weather conditions (Begum & Sen, 2004). Due to extreme poverty rickshaw pullers are not able to afford their health needs such as medicines and proper treatment (Carrin et al., 1999). Rickshaw pullers take medicines from pharmacy so generally they do not want to consult doctors i.e. they avoid Doctor for treatment unless extremely necessary (Ali, 2013). It is also seen that some of them take loan for medical treatment (Nandhi, 2011). Author reviewed this study "Health and Social Security Needs of Rickshaw Pullers in Ranchi" this study has been done by multi Authors and they are Anant Kumar, Joe Thomas, Sonal S. Wadhwa, Aprajita Mishra & Smita Dasgupta in 2016. This study reveals the various issues and problems of Rickshaw pullers associated with their socio-economic and health risks. Study reveals that rickshaw pullers are marginalised and deprived. They are victim of social system and deprived from all the rights such as social and health security. This study shows that majority of the rickshaw pullers are suffering from occupational health risks and victim of vicious cycle of poverty.

### Tea Garden Workers

India is one of the largest producer and consumer of tea. Assam is famous for tea production because of it produces around 60 percent of the India's contribution of tea. Tea industry is considered an important agro-industry of India. Mr. Parijat Borgohain examined the occupational health risks and problems at workplace under the title of "Occupational Health hazards faced by the Tea Garden workers of Hajua Tea Estate of Sibsagar District and Marangi Tea Estate of Golaghat District in Assam". This study divided the occupational health risks into the following headings such as Physical hazards, Chemical hazards, Mechanical hazards, Biological Hazards and Psychosocial hazards. Under physical hazards garden tea workers reported that they work in a high temperature and low temperature, work in noise place, work in a low light etc. and these all factors leads to occupational

hazards at a workplace. Under the Chemical hazards tea workers are suffering from Ulcers, Eczema, and dermatitis. Under the Mechanical hazards most of the workers are suffering from some specific occupational health hazards such as cuts in body parts, injuries and sprains. Under the biological hazards majority of the workers claimed that they are suffering from occupational health problems like insect bite, fungal infections and malaria. Under the Psychosocial hazards most of the tea workers are facing the occupational health problems such as pay recognition, status, prospectus of promotion etc.

### Silk Workers

Sericulture is agro based industry and it play a vital role to enhance the rural economy of India. India is not only largest producer of silk in the world but it also largest consumer of silk all over the world. Telangana, Andhra Pradesh and Karnataka states are top in producing the silk in India. There are mainly five forms of Silk and India is the only country of the world that produces all five forms of the Silk. An important study has been done under the “A Study on Health Problems faced by Workers in Silk Industry” by the Mr. Kuntamalla Sujatha and Janga Sathish. This study shows the different forms of occupational health risks in different phases starting from cultivation of mulberry and non-mulberry food plants, rearing of different silkworms, grain ages (where eggs are produced), reeling of filament, twisting, weaving, printing and dyeing. Silk workers face the health risks like skin allergies, ocular inflammation, facial swelling and back ache during stress and strain due to weaving, headache. Irritation of eyes and many more health risks while working at workplace. Workers engaged in silk industry have to take safety in each and every steps of producing the silk.

### Beedi Workers

Many studies have been done on health issues of male and female Beedi workers. Majority of the beedi workers comes under unorganised sector. Beedi work considers one of the most occupational risks. Men and women have similar kind of occupational health risks; here Author is mentioning one study done by the M. Gopal who studied especially lives of women workers (JNU). M. Gopal discussed about various Occupational health risks such as aches, body pain, stomach related pains, headache, burning of eyes, pain in legs or fingers, breathlessness and so on. Beedi workers inhale dust particles while rapping beedi, work continuously for a long hour, work in a same posture etc.

Majority of the Beedi workers do not avail health security because of they are engaged in informal sector. Majority of the beedi workers are illiterate so they are not aware about their rights so do not raise against their health exploitation.

Symptom Groups	Symptoms Described
Aches and pain related to beedi work	Backache, neck ache, headache, burning of eyes , pain in legs, numbness of fingers
Coughs	Exposure to tobacco
Giddiness	Giddiness, breathlessness
Stomach related pains	Stomach pains, cramps, gas, spasmodic pains leading to diarrhoea
Others	Piles, urinary burning, white discharge, palpitation, wheezing, fevers, worry ,joint pains and swelling

Source: Gopal, M (1997): Labour Process and its Impact on the Lives of Women Workers, Jawaharlal Nehru University, New Delhi.

### Building and other Construction Workers

Construction work project employed informal labour and majority of the workers are illiterate and unskilled so they are not aware about their rights. Construction work is one of the stable and fast growing industries all over the world and it constitute 7.5% of total workforce in India. Construction work is a second large informal sector after agriculture, although majority of the workers comes under unorganised sector so labour legislations does not apply on construction workers. . A study done on the occupational health risks of construction by Thayyil Jayakrishnan, Bina Thomas, Bhaskar Rao and Biju under the title of study “Occupational health problems of construction workers in India” (International Journal of Medicine and Public Health, Oct-Dec 2013 | Vol. 3 | Issue 4). As per the above quoted study here Author is discussing about some of the major health risks of the Building and other construction workers which are as follows. Eye problem occurred by the allergy to irritants thermal injury and infections. Cement can cause ophthalmic problems due to direct contact. So here it can be said that Eye problem is very common facing by the construction workers. Muscle Skelton injuries risk is very high due to the nature of work and working condition. Generally construction sites are very unhygienic so large number of workers suffers from jaundice. Due to the polluted dusty environment majority of the construction workers has lung and respiratory health risks. Other occupational health risks are like due to the prevalence of water and vector borne diseases, respiratory, dermatological and eye problems, injury and high risk behaviours were reported to be high among unskilled and semiskilled construction workers.

## Leather Workers

Chromium is used in leather industry which is used as a basic tanning pigment which affects the health of the workers. Health risk is prevalence in this industry too. Many studies have been done to know the basic health problems of the workers of the leather industries. Many types of chemicals used in different states of tannery operations which include lime, disinfectants, bleaching agents and dyes. So workers are in high occupational health risks in leather industries.

To study the occupational health risks of the leather workers a study have been done with the title of "Occupational health risks among the workers Occupational health risks among the workers employed in leather tanneries at Kanpur". This study has been done by three Authors Subodh Kumar Rastogi, Amit Pandey and Sachin Tripathi. This study explicitly discussed about the various occupational health hazards or risks such as respiratory illness, lung congestion, throat irritation, asthma etc. most of the workers engaged in leather industry is suffering from one or more than one occupational disease.

## Transportation

People working in transportation sector play an important role in our daily life. We need transport when we go to office, during emergency, in marriage ceremony or many other important events of life. Under the title of "Occupational health scenario of Indian informal sector" Anjali Nag, Heer Vyas and Pranab Nag studied on the issues and problems of occupational health risks of the workers engaged in informal sectors. Author tried to reveals the occupational health risks associated to transport workers in this study. Transportation involves a long hour of driving with exposure of dust, noise and so on. Long and continues working hours without rest or interval of rest lead to injury and accident.

## Sewage and Sanitary Workers

An estimated 1.2 million scavengers are in the country working in cleaning work. Apart from the social atrocities they are suffering from various diseases arises from their occupation. They are exposed to certain health risks by virtue of their working condition. Working conditions of sewage and sanitary workers are very risky towards their health. Sewage and sanitary workers while cleaning sewage they open the old drain and go inside. The sewage and sanitary workers are commonly exposed to gases like hydrogen disulphide, methane, ammonia and carbon monoxide. It is very important point that mixture of hydrogen sulphide and air in the explosive range may explode violently. These gases are very harmful to health and sometimes it caused death. Many studies have been done has been done to examine the health risks of the sewage and sanitary workers. An important study has been done by Mr. Rajnarayan R. Tiwari under the title of "occupational health hazards in sewage and sanitary workers". This study reveals many facts associated to occupational health risks of sewage and sanitary workers. Infection is very common while cleaning sewage it causes due to cuts the body part, scratches or penetrating wounds. Other infections are caused by the some personal habit like sharing of foods, hand to mouth contacts, smoking, drinking, clean the face and hands with common towels. This study also someother occupational health hazards such as Leptospirosis (occupational disease affecting people coming in contacts with animals and their discharges), Hepatitis, Helicobacter Pylori (Gastric cancer), skin problem, respiratory problem etc.

## Laundry Worker

People engaged in laundry faces many health problems arises from their occupation. Working condition of laundry work is not suitable for the workers. While work in this occupation worker faces various hazards in different phases of laundry work. People engaged in laundry work also comes under various occupational health risks and if they ignore it may lead to the occupational diseases. A study has been done by the M. Shashi Kumar, B. Ramakrishna Goudand Bobby Joseph to examine the occupational health risks and safety facing by the laundry workers in hospital under the title of "A Study of Occupational Health and Safety measures in the Laundry Department of a Private tertiary care teaching hospital, Bengaluru". Each and every phases of washing the dirty cloths Laundry workers face various occupational health hazards due to the working conditions of the work such as while washing the dirty cloth laundry workers washes manually vomiting, blooded and infected cloths. Laundry workers under the health risks suffering fromskin problem, allergy and many other occupational hazards. Laundry workers while washing the dirty clothes, they use soaps and workplace where they work is highly wetted so workers may slip and it may lead occupational hazards. Laundry workers work continuously for long hours in a same posture which may lead to body pain, headache, back ache and other occupational hazards. While washing clothes workers uses soaps and using soap for washing clothes for long hours may lead to skin problem or allergy which is very harmful to health.

## Discussion and suggestions

After analysis of various literatures it can be said that workers engaged in unorganised/informal sector are suffering from various occupational health hazards. Apart from various social securities they are also deprived from various health securities. All the workers who are engaged in unorganised sector are suffering from one or more than one occupational health hazards such as headache, backache, pain in body, hepatitis, lung infection, asthma, respiratory problems, skin infections, allergy, burning of eye and so on. List of occupational health risks are very long but more important point is that these all occupational health risks are arises from working condition or nature of work or environment of the work. Unorganised workers work in a pathetic condition and the employer do not provide then health securities like gloves, shoes, mask, and normal temperature of the work. These all the health risks are very common to the workers engaged in unorganised sector and generally workers do not questions about the malpractice of the employer because of if they raise against this issues they may lose their job. Job security is also an important

issue in this sector and no one wants to leave his/her job. Many studies have been proved that in some cases unorganised workers died due to the occupational hazards arising from their work or working condition so we can say that they are victims of the system. There are various factors which are associated with occupational health risks and people still work in a pathetic condition due to the high rate of unemployment, underemployment, illiteracy, due to unskilled or semi-skilled etc.

It is the responsibility of the State to enhance the working conditions of the labourers. Constitution of India under directive principles of State Policy has given the guidelines to the State to enhance the working conditions of the labour class. Article 43 of the Directive Principles of State Policy says that the State shall make a provision or secure by suitable laws or legislations and ensure a decent standard of life, living wages and suitable conditions of work. There is a special Act for the welfare of the unorganised workers i.e. Unorganised Workers Social Security Act but this Act is not implemented strongly neither by the Government or by the employer. State has to take it seriously about the occupational health risks of the Unorganised Workers which may arise from their working conditions. State has to not only monitor the working conditions of the people who are engaged in informal/unorganised sectors but also provide the free health facilities to all the workers engaged in unorganised work.

## Conclusions

Health and Occupation is interlinked or associated with each other and it cannot be separated from each other. So workers who are engaged in hazardous work they have to take precautions before going to work. From the findings of this study we can infer that workers engaged in the informal sector are vulnerable to occupational health hazards. Workers included in the informal sector are most deprived and discriminated. Informal workers include as daily wage labourer, the domestic worker, the worker engaged in small shops, street vendors workers, workers engaged in home based work, agricultural workers who have no land, workers of construction work etc. All of these poor are exploited by the Capitalist community in form of more working hours with fewer payments, unsafe working environment, the difference between male and female workers, no support during illness, using child labour etc. More or less majority of the Unorganised labourers irrespective of their sector they are suffering from common occupational health hazards such as headache, backache, eye burning, asthma, lung infection, respiratory problem, pain in body, legs, hands etc.

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