
WORK RELATED HEALTH ISSUES FACED BY WOMEN IN INDIA

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ABSTRACT

Background of the study: The occupational health scenario has undergone an enormous growth to develop rapid industrialisation. Women's participation in the labour force plays an important role and contribution to economic productivity. The occupational health and safety policies covering women workers and their work condition should be more effective for the growth of Indian economic development.

Study purposes: This paper reviews the major research works on occupational health hazards of working women in India. The various studies covered major hazards like textile industries, constructions, leather industries, bank sectors and call center based on the occupational point of view. Only a few studies focused on occupational health hazards like violence and sexual harassment of working women.

Main findings: The present paper describes the various hazards affect the women workers and their health safety measures. In the study the availability and accessibility of employment for women results the good indicator of economic and social inclusion. The women workers have faced the problems like poor working environments, unfair labour practices, low wages, and occupational hazard exposure.

Conclusion: In a country like India, there is more population of women workers, only legislations can act as the guidelines. Safety and health at work are important matters and should be given the consideration in policies at all levels.

Keywords: Unorganised sector, Women workers, Occupational stress and health problems, health hazards, safety and health.

INTRODUCTION

The labor forces participation of women plays an important role and contribution to economic productivity, women health and safety policies should cover the women workers and their work condition should be more effective for the growth of Indian economic development. Women workers have sexual and physical abuses in occupation [24]. Women workers suffer physical and mental health problems. Occupational hazards affect the health of the working women and that make the women to marginal workers with lower wage [20]. Occupational industrial work hazards are more in which the globalization and rapid industrial growth decreased due to the problem of occupational health related issues [22]. Even though there is more occupational health hazards are studied on the working women, they lack the knowledge about the occupational safety measures and health hazards in working places. So, therefore this paper is mainly focused on causes of occupational health problems of working women and their safety health measures.

EMPLOYMENT TRENDS

The women work forces participation rate in India is 25.63 percent in 2001. When it is compared to the 1991 year the improvement percent is noted as 22.27. The work Participation of rural women in 2001 was 30.79 percent which is high when it is compared to urban areas with 11.88 percent. Women work participation is mainly involved in the cultivation and as agricultural labourers in rural areas. In urban areas 80 percent of women workers are working in the unorganized sector such as industrial workers, construction and household.

Women participation rates are less when it is compared to male participations. Overall employment rates participation women are half the level to men participations. To look into the range of women participation rate (WPR) range are observed between 50-55 percent from 43rd

round (1987-88) to 68th NSSO round (2011-12). Therefore female participation rates range from 22-29 percent and male remains more or less stable in the entire period. Female work participation rate (WPR) has declined from 28.5 percent in 43rd round (1987-88) to 21.9 percent in the NSSO 68th round (2011-12) [15].

OCCUPATIONAL HEALTH PROBLEMS

Occupational health problems like respiratory problems among the textile women workers have the risk factor of health hazards [5]. Most of the Indian workers are illiterate and they do not aware about the impact of health education the ill effects of work and the remedial measures [23]. Climate changes to heat temperatures increase more stress on physical work productivity loss and affect the health problems causing social, economic, environment and technical aspects

to the problem among the constructional women workers [11]. The incidence of fatal occupational injuries increases the minority of women workers with a certain risk of occupational health hazards. An occupational injury at the individual and community levels has to develop to preventive such incidences of occupational health problems [13]. The working environment affects the working performance of the women workers and causes physical and psychological health problems. The unsafe condition to the women works creates more stress and affects the mental health of the workers [24]. A majority of women workers has physical problems in the construction area and work-place injuries, musculoskeletal disorders, respiratory diseases, skin diseases and ophthalmic disorders and mostly behavioral problems in females are the worst occupational health hazards [4].

The women working environment are unsafe to safety things and increases of health risk are more. Such as poor working environments, unsafe labor practices, low wages and occupational health hazard exposure are the causes of occupational health problems [10]. There is a high occupational health problem and with different types of occupational disorders in nerve and respiratory disorder, injuries, eyesight problems, skin problems are occupational problems seen in handicraft industries [12]. Diseases and injuries are more among the women involved in construction workers, high level of health hazards and risk factors are more [2]. Occupational Health such as Physical and Mental Health Problems are seen in women workers in the Call Center Industries in India. The most common Physical Health Problems result in musculoskeletal problems in which 61% of Women experienced the symptoms over the past seven days. Other Physical health problems are Eye, Ear and Throat related health Problems in which it is seen more in women call center workers as compared to men workers in a call center [21].

OCCUPATIONAL STRESS AMONG WOMEN

Woman workers health lacks the safety at working environment due to inadequate health care, legislation, and policy. Occupational unsafe exposures affect the reproductive health of woman physically and mentally. Some of the worst condition such as heavy workload, work risk creates a stress among the occupational [19]. Occupational stress has higher stress than other personality types and it has lower organization commitment comparing other personality types. Women of high occupational stress have a lower organizational commitment and are more willing to leave the job [7].

Occupational stress are mostly seen in bank sector industry that result in poor working conditions in work shifts, lack of participation in decision-making and poor relationship is the outcome [8]

and the same result has been found that stress among the female working in the bank has more psychological health problems [9].

IMPORTANCE OF OCCUPATIONAL HEALTH HAZARDS

The level of occupational health and safety hazards measures are not standard in the current trend for women in safety and health hazards. Increasing awareness of occupational standards will improve the economic growth of India [18]. Occupational safety health is essential for the developing industry level and safety communities for positive safety culture in the industry. It brings the changes in hazards and risk to tackle a hazardous problem in industries [1]. Medical laboratory technicians working in multi-specialty hospitals have less awareness about the occupational hazards and safety measures knowledge is poor [16]. Violence's against women is the regular practice and most of the urban woman living in urban are unaware. The violence affects the workplace, impaired job performances and loss of experienced employee. Strengthening of laws on violence can make awareness and safety for women [3]. The majority of stress among working women cannot be avoided but it can be managed by techniques like yoga, meditation, listening to music, reading books [6].

HEALTH AND SAFETY FOR WOMEN

Women workers give low priority and awareness towards the Occupational Safety Health because the work is consider more to be important than the safety in the occupational atmosphere. This is because workers give important to their family members same to the working field. In such case, many family members who are working in the informal sectors were exposed more to work-related risks. It is more difficult to diagnosis the occupational diseases in the formal sector and it is impossible in the informal sectors also. The impact of Occupational Safety Health hazard for women workers would also consider as the difficult problem. In consider to the paid workers, the participations of the women are in household jobs such as washing, cooking, cleaning and taking care of children. In such situations the working hours of the women holds a pressure and stress causing the physical and psychological health problems.

Thus, the occupational health scenario has undergone an enormous growth to develop rapid industrialization. Inadequate attention to the developing women contribution to the society bespeaks the women and the work participation contributes the economic growth [14]. If the health statuses of women work force participation lack the attention on the safety and measures towards the health and safety the overall productivity of the country is at crisis.

THE REGULATIONS FOR OCCUPATIONAL SAFETY AND HEALTH

The regulation on occupational safety and health includes the safety measures practices to the workers are taken into considerations. The regulations are followed in the favour of the workers benefit, its starts from the safety to the wealth of the every individual worker who is involved in each and every part of their work force participation.

(a) Labour and Employment in safety and health

It particularly focuses on the occupational safety and health in all the industries. Both the state and the central government are involved in the process and it acts as a liaison between International Labour Organization (IOL) and other countries through the ministry of labour and employment. The work place safety and health is focused on the environment at national level. It mainly focused on the reduction incidence of work related injuries, diseases, natural or man-made disaster and loss of other national assets. Community awareness regarding safety environment, health at workplace are also covered.

(b) Occupational Health and Safety Management Systems

The occupation hazards and safety approach on the identifying the risk hazards and control of risks in the organization are focused in the management system. This standard provides the information on significant health hazards and the risks protection to the employees and health and safety of the industrial organization. Each Organization has obtained license according to this standard [17].

(c) National Safety and Council of India (NSCI)

It promotes safety consciousness among workers to prevent accidents, minimize danger and safety, educational information data are also guided in this National safety and council of India (NSCI). It provides safety in road transportation, construction and health infrastructure in small scale and medium scale sectors.

(d) India and International Labour Organisation (ILO)

The safety and the occupational environment for women workers is focused in various things such as workers fundamental rights, worker's safety protection, social security to women, labour welfare to workers, occupational safety, women & child labour, migrant labour etc.

(e) National Legislations on Occupational Safety and Health (OHS)

It focuses on safety health to employee at work places in respective of 4 sectors such as factories, docks, mining and construction sectors. In this sector, it approaches specific details on injuries and specific operations at the working areas.

(f) Building and other Construction Workers Act 1996

It aims to provide the safety, health and wealth conditions to the workers. This act helps the workers in the occupational health related hazards.

DISCUSSION

The women work participation and the employment status of the women change their autonomous conditions in the society. Women lack there safety, protection and other problems are still does not come to exist in the working environment. Such problems in the working places create issues in women's health. Even the policies and the programs implemented by the government are inactive in which there is no awareness seen in the women workers. The conditions are not to be blamed but it should have to be in active with strict practices of rules and regulations. The industries have to take the serious actions to stop such issues. Occupational safety and health are considered to be important aspect for the progress of the country and to improve the economic condition of the nation.

CONCLUSION

New technologies and developments at the workplace should focus on the growing mechanization and industrialization in the country and such growth will give rise to new developments on occupational and work-related injuries. The changes in working populations call for new strategies and program to inspect the safety and health hazards in occupation areas. Even though the government play their contribution to the safety and health related hazards for the women workers, there are still injuries, accidents and other health related issues does not come to exist. To reduce such health related issues the government should do a needful policies and the significant programs for the workers to have a good health promotions in all levels of working places.

REFERENCES

1. Abhishek Gupta MBA, P. H. D. (2013). Safety and occupational health: Challenges & opportunities in emerging economies. *International Journal of Physical and Social Sciences*, 3(7), 77.

2. Bharara, K., Sandhu, P., & Sidhu, M. (2012). Issues of occupational health and injuries among unskilled female labourers in construction industry: A scenario of Punjab State. *Studies on Home and Community Science*, 6(1), 1-6.
3. Dey, S. (2016). Impact of violence against women at workplace in Jharkhand. *Global journal for research analysis*, 4(12).
4. Gupta, A., & Gokhale, R. M. (2016). Assessment of Health Problems among Construction Workers in an Urban Area. *International Journal of Scientific Research*, 5(5).
5. Jaiswal, A. (2011). A study of the occupational health functions among female textile workers. *International Journal of Sociology and Anthropology*, 3(3), 109.
6. Kalaiselvi. A. (2016). Work Related Stress among Working Women in Coimbatore City. *PARIPEX-Indian Journal of Research*, 5(5).
7. Khodabakhshi, M. (2013). Predicting occupational stress for women working in the bank with assessment of their organizational commitment and personality type. *Procedia-Social and Behavioral Sciences*, 84, 1859-1863.
8. Krithika, R. A., & Robinson, M. (2016). A Study on Occupational Stress among the Women Employees in Banking Sector at Trichy District. *International Journal for Innovative Research in Science and Technology*, 2(11), 817-820.
9. Kulkarni, V. S. (2016). Statistical Analysis of Occupational Stress of Working Women of three Districts in Karnataka State-A Case Study. *Indian Journal of Applied Research*, 6(7).
10. Lu, J. L. (2011). Occupational health and safety of women workers: viewed in the light of labor regulations. *Journal of International Women's Studies*, 12(1), 68.
11. Lundgren, K., Kuklane, K., Gao, C., & Holmer, I. (2013). Effects of heat stress on working populations when facing climate change. *Industrial health*, 51(1), 3-15.
12. Meena, M. L., Dangayach, G. S., & Bhardwaj, A. (2012). Occupational risk factor of workers in the handicraft industry: a short review. *International Journal of Research in Engineering and Technology*, 1(3), 194-196.
13. Mekkodathil, A., El-Menyar, A., & Al-Thani, H. (2016). Occupational injuries in workers from different ethnicities. *International journal of critical illness and injury science*, 6(1), 25.

14. NAG, A., VYAS, H., & NAG, P. (2016). Occupational health scenario of Indian informal sector. *Industrial health*, (0).
15. National Sample Survey Organization. 2011-12. Employment-Unemployment Situation in India, Round 68th, Report No. 537 – I and II, National Sample Survey Organization, Ministry of Statistics and Program Implementation, Government of India, New Delhi.
16. Rajan, D. (2015). Awareness about occupational hazards: A comparative study. *Pranjana*, 18(1), 1.
17. Safety, Health and Environment at Work Place. www.labour.nic.in/policies/safety-health-and-environment-work-place.
18. Sahu, M. (2016). Development of Law Relating to Factories in India. *BRICS Law Journal*, *Forthcoming*.
19. Shoaib, M., Khan, S., & Ashraf, A. (2011). Occupational Risk Factors Associated with Reproductive Health of Working Women: A Case Study of University of Gujarat. *Academic Research International*, 1(2), 292.
20. Srinivasan, S., & Ilango, P. (2013). Occupational health problems of women migrant workers in Thogamalai, Karur District, Tamil Nadu, India. *International Research Journal of Social Sciences*, 2(2), 1-7.
21. Subbarayalu, A. V. (2013). Occupational health problems of call center workers in India: A cross sectional study focusing on gender differences. *Journal of Management*, 1(2), 63-70.
22. Thenguzhali, T., & Veerachamy, P. (2015). Occupational Health Hazards of Women Construction Workers: A Critical Survey of the Literature. *Language in India*, 15(8).
23. Tiwary, G., & Gangopadhyay, P. K. (2011). A review on the occupational health and social security of unorganized workers in the construction industry. *Indian journal of occupational and environmental medicine*, 15(1), 18.