Occupational Health Hazard of tea garden workers: A voice of the workers of three Tea Estate of Siva sagar District of Assam

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Abstract:

Health is the real wealth of the human civilization. A good health makes a good person, a good person lead to make a good family and good family may able to form a good nation. Health is directly related to the socio economic status of every society. Occupational health directly related to the State economy. The tea industry is the one of the most labour oriented industry in India. The tea garden workers are still considered as most vulnerable section of the society. This study endeavors to expose the tea garden working environment based on the three Tea Estate of Sivasagar district of Assam. The tea garden workers health status is much below of the State average. This study try to analyze the reason behind the situation. Moreover, this study will try to divulges the percentage of the workers who has suffering occupational health hazard during last five years. Along with that this study notify the preventive measures has taken by the tea garden authority and what kind of govt. policies and planning's are required in that working condition which will be helpful for resolved the problems.

Key Words: Occupational health, tea garden, workers, hazard

Introduction

Tea is the pivotal resource to impart a unique identity to Assam in the world scenario. Tea is considered as one of the healthy drinks. Tea gives a fresh mood to the people.

Hence, majority of the people start their day with a cup of tea. In lieu of tea as a beverage, many ornamental words and glittering epithets have been used. Tea consists in most of the important ingredients like caffeine, protein, vitamins etc. Therefore it helps to reduces mental worries and gives refreshment of the users (Singh, et al 2006). The Tea industry of Assam is said to be the backbone of Assam Economy. The Tea Industry in India is about 180 years old. Tea holds the top position among the different factors that significantly contribute to the economy of Assam which provides a huge portion to the NSDP of the state. The tea industry is an important identity for Assam, which gained recognition of this state in India and worldwide. On the other hand, tea industry and tea garden labourers are the two sides of one coin where both complements to each other. In Assam, this tea garden laborer not only contributes a sizable chunk of the population in the state but also plays a significant role in the tea production of the state, which in turn contributes towards the economy of the state. Thus, the development of the tea industry of Assam is directly or indirectly dependent on the tea garden labourers. But, the social and economic condition of this community is still backward, as compared to the other communities of the state (Saikia B., 2008). They are one of the most backward and exploited community in Assam for decades due to the continuous exploitation by tea estate management and negligence from the government. The level of education, Health and sanitation, housing condition, nutrition, per capita income etc. of this community are significantly poor.

Health issues are very common amongst the humankind. But women suffer different health issues than men. In tea gardens, women workers are worst suffers of their occupational health hazards. Since they give equal effort on their household work as well as tea garden works, hence they have less time to care for their own health. The physical health status of the tea garden workers are different rest of other common people. The ill-suited living conditions, poor sanitations and workloads are some of the main factors of their physical hazards. Our government has under taken different types of health schemes which concerns women health. But due to lack of awareness and education among the tea garden women have no idea about that governmental schemes. And also they have no idea about the importance of good health for better work. Tea garden workers are poorest, vulnerable to all kind of disease. In fact, anyone who has seen their living condition then they can hardly deny their inhuman living condition and only they can imagine that how much they are exploited by their management and authority. The health status of the workers of the gardens has always been a debatable concern in the government. The government of India has introduced different acts and

policies over the years to uplift the working, living conditions and the health conditions of the tea garden workers. These acts were incorporated to ensure safety and protection of workers during work hours, provide a safe environment for work, provide medical benefits, the proper wage for the basic maintenance of life etc.

Review of literature

Sharma (2005), Boruah (1995) and Bhadra (1985) arguesthat living condition is responsible for poor health status of tea garden workers. And they also highlight the relations between socio economic conditions and health issues. Financial condition, food habits, living condition, social organization and cultural values etc.which are the obstacle of implementations of scientific health practices. They Also suggested that special attention is needed to study health behaviour of the tea garden labourers (Sahoo. et al: 2011). Their housing condition is also responsible for poor health status. The casual workers lives in own mud houses on the other hand permanent workers quarters provided by the management. (Borgohain:2013). And it is clearly seen that casual workers are live in ill-suited living conditions than permanent workers.

Sivram (1994) studied the difference between the occupational and non-occupational health standards of women pluckers identified the problems like strain on the neck and cervical spine from carrying tea baskets, abrasions to the hands, lack of protection for the toes and more importantly, the ill effect anaemia as factors are some of the health issues of women workers. Hariharan and Siva Kumar (2014) stated that the most of the female labourers were not aware of the medical facilities which had to be provided by the management. Hence a huge number of victims suffered from water borne and air borne diseases and also from malnutrition. The authors suggest that the management take measures in reducing health issues of the tea garden workers in order to make the work efficient and standardized (Samarsinghe: 1993).

Analysis

According to World Health Organisation" Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." Good health create a good mind There are different types of hazards i.e. biological, chemical, physical, psycho-

social, ergonomics, environmental hazards etc. The tea garden workers specially faced chemical and biological hazards.

Table 1.1: Different kinds of technical hazards faced the female workers during working hours

| Sl.No | Technical hazards | Frequency | % |
|-------|-------------------------|-----------|-----|
| 1 | Small Cuts | 80 | 80 |
| 2 | Major cuts | 20 | 20 |
| 3 | Sprain | - | - |
| 4 | Foreign body in the eye | - | - |
| 5 | Others | - | - |
| Total | | 100 | 100 |

The table 1.1 reveals that out of the total 100 respondents, 80(80%) respondents are faced small cuts and 20(20%) were suffered major cuts and nobody suffered another kind of technical hazards.

It is clearly seen that most of the workers are suffering with small cuts and they also state that the tea garden management take immediate initiative of this kind of incidents. During the field work it is observed that the tea garden hospital distance is minimum 1 K.M and maximum 5 K.M. In this Tea Estate there are two hospitals and one dispensary.

Chemical Hazards

Nutrition is very much important for living beings either it may be a human or a plant. In the tea garden there are lots of pesticides use as nutrition for the well growth of the plants. The pesticides are very harmful for human body. The uses pesticides are i.e., the tea garden workers are not aware on chemical hazards.

Table 1.2: Awareness of wearing mask and globs due to working

| Sl. No | Responses | Respondents |
|--------|-----------|-------------|
| | | |

| - | 1 | - · · J | 1 | 0 0 - |
|---|---|----------------|---------|-------|
| | | | Numbers | % |
| ŀ | 1 | Yes | 14 | 14% |
| Ī | 2 | No | 86 | 86% |
| Ī | | Total | 100 | 100% |

Table 1.2 reveals that out of the total 100 respondents only 14(14%) workers are wearing mask and globs during the work. Maximum number of the respondents is unaware of harmfulness of chemicals. The number is 86(86%).

It is clearly seen that most of the workers are unaware of the chemical hazards and harmfulness of the chemicals which they use as pesticides of the gardens. They don't know the importance of wearing mask and globs during the work.

Biological Hazards:

Biological health hazards include bacteria, viruses, parasites and moulds or fungi. They can pose a threat to human health when they are inhaled, eaten or come in contact with skin. They can cause illness such as food poisoning, tetanus respiratory infections or parasite infection. Most of the tea garden workers face different kind of biological hazards within their working hours. The tea garden workers suffering different kind of biological hazards.

In this Tea Estate the workers have experienced with snake bite, insects bite etc. Most of the workers have been working last ten years. That is why they are experienced with this kind of hazards.

HEALTH EXPENDITURE OF THE TEA GARDEN WORKERS

The tea garden worker is one of the labour intensive segments of the informal sector. Most of the tea garden workers belong to lower income groups without having proper education on their health and wellness. They manage their all of the expenditures within a small budget.

Table 1.3: Yearly health expenditure of the respondent

| Sl. No | Yearly health | Perm | anent | Cas | ual | Contr | actual |
|--------|----------------------|------|-------|------|-----|-------|--------|
| | expenditure (in Rs.) | Nos. | % | Nos. | % | Nos. | % |
| 1 | 0 | 40 | 80 | 15 | 60 | 20 | 80 |
| 2 | 100-300 | - | - | - | - | - | - |
| 3 | 300-500 | - | - | 3 | 12 | 5 | 20 |
| 4 | 500-700 | - | - | 2 | 8 | - | - |
| 5 | 700-900 | - | - | - | - | - | - |
| 6 | 900-1100 | - | - | - | - | - | - |
| 7 | 1100-above | 10 | 20 | - | - | - | - |
| | Total | | 100 | 25 | 100 | 25 | 100 |

The table 1.3 is evident that 40(80%) of the respondents never bear single one rupee for their health in a year. They completely depend on their garden hospital for their health problems. And only 10(20%) number of the respondents health expenditure was in above 1100. They not only depends on garden hospital. They concern of their health issues in comparison to other. And among the respondents of casual workers, 15(60%) numbers of them are also completely depends on tea garden hospital in common health issues. And 20(80%) numbers of the contractual workers never expense a single rupee on their health in a month.

It is clearly seen that majority of permanent workers completely depends on tea garden hospital for their health issues. They get all the health facilities from their garden authority. A large number of the workers yearly income is very low. Majority of the female workers are very poor, because she is the sole earner of her family. That is why they never gone to a doctor only if serious illness occurs. They considered fever, stomach pain, headache and some of the other workers prefer folk healer instead of medical practitioner. It is not only the reason of lack of awareness. They cannot afford doctor. Some kind of diseases i.e fever,

cough, stomach pain, dysentery etc. they considered as normal and they purchase medicine

from the pharmacy by telling them their weakness.

SANITATION FACILITIES IN PLUCKING SITES

Regarding the habit of defecation, it has been noted elsewhere that the people do

not seem to be conscious of maintaining a healthy habit. Though the Assam Plantation

Labour Rules, 1956, have the provision of toilet for the tea garden workers, this has not been

fully implemented in the plantation under investigation. As a matter of fact, as noted earlier

there are different clauses regarding the various social security benefits, especially those with

regard to health and hygiene, in the Assam Plantation Labour Act, 1951 The details

environmental sanitation and hygiene of their surroundings are collected mainly through

prolonged personal observation during the entire field work.

There is no sanitation facility in plantation areas of Borsillah, Borbam and Tiphook Tea

Estate. There are 60% women are working in plucking sectors. Female workers face lot of

problems during their menstruation days. Especially girls are stated that the non-availability

ofsanitation facilities at theplantations. They face lot problems during menstruation. They

also said that the sanitation facilities are only available in the factories.

During the field work it is observed that the highest recruitment of women

workers in plucking sector. And the non-availability of sanitation facilities poses serious

questions on female health. And it is clearly indicate the lack of concern of the tea garden

authorities on the health of the tea garden female worker. Proper sanitation facilities are

integral part of women's health. The absence of which may subject women to getting

infected by diseases like Urinary Tract Infection (UTI). The studies on UTI have shown that

infection may lead to severe health hazards (urinary burning, fever, and others) amongst

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women. (Saikia, 2017)

Shortage of medicinal product the permanent workers are fully

satisfied their facilities in context of medical. They get all kind facilities. They got referral services up to outside of the region. But the tea garden casual workers face lot of medical problem in comparison to permanent workers. The tea garden authority provides all kind of health facilities for the tea garden.

Table 1.4: Line wise distribution of the bathroom and toilet facility in Borsillah Tea

Estate

| Sl. No | Name of the line | Toilet facility | Bathroom |
|--------|------------------|-----------------|----------|
| 1 | Line no 1 | 59 | 9 |
| 2 | Line no 2 | 97 | 8 |
| 3 | Line no 3 | 73 | 4 |
| 4 | Line no 4 | 65 | - |
| 5 | Line no 5 | 38 | 3 |
| 6 | Line no 6 | 32 | - |
| 7 | Line no 7 | 6 | - |
| 8 | Staff | 11 | 11 |
| Total | | 381 | 60 |

Table 1.4 reveals that line wise distribution of the bathroom and toil facility in Borsillah Tea Estate. It is clearly seen that the toilet and bathroom facility is not satisfactorily provided by the tea garden authority in Borsillah Tea Estate. Especially the bathroom facility was not properly provided by the tea garden authority. Against of the 381 toilet there are only 60 bathrooms.

MATERNAL HEALTH

The Millennium Development Goals (MDGs) intended to reduce maternal mortality ratio (MMR) By around three quarters -560 in 1990to around 140 during 2015. But

India failed to reached this number by a huge margin as the current Maternal Mortality

Ration(MMR) stands.

The maternal deaths are the only result of the delay in decision making and low

priority on maternity.

In this regards The A.N.M of Borsillah Tea Estate response,

"Hiding pregnancy is very common among the tea garden female workers as they

fear of losing their jobs and ultimately a source of income. This leads to the continuous

hardship of plucking tea leaves while they carry the next generation of tea workers in their

womb."

It is clear that the female workers are not aware and concern on their pregnancy.

Most of workers have no idea about any kind of pregnancy check source. Most of the

workers did not know about their pregnancy till three four months. And those who know they

hide their pregnancy because they do not afford to loss their job. That why they going to

plucking and most of the miscarriage cases are happened. And it is very risky for maternal

health also. So, it is clearly seen that job insecurity play most important role for maternal

health. If management ensure about their job security, then they may be get importance on

their health.

According to the WHO recommended patient doctor ratio is 1: 1000. But in

Borsillah Tea Estate ratio is1:2000. There are two hospitals and one dispensary in Borsillah

Tea Estate. Both hospitals have doctor. But in the dispensary only two nurses and one

compounder are there. But during the field work only one doctor was present there. Newly

appointed doctor was not joined that time. So, this ratio is evident of the poor health status of

the workers of the Borsillah Tea Estate.

CONCLUSION

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The tea garden community is marginalised section in our society. They are socially economically and culturally backward section in our society. Due to lack of education, awareness and isolated from the outer world etc. are the main reason of their poor health condition. In Borsillah Tea Estate the workers are suffering different kind of hazards i.e., technical hazards, biological hazards, chemical hazards etc. Among this hazards chemical hazard is mostly suffered by male workers, those who deals with pesticides.

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