



DYING FOR A LIVING: A STUDY ON THE SCAVENGERS FROM SOCIO-ECONOMIC AND PSYCHOLOGICAL PERSPECTIVES

¹P.Lekha

Research Scholar

Reg No: 18211171052019

PG & Research Department of History

Rani Anna Govt College for Women

Tirunelveli-8

²Dr.A.Theeba

Research Supervisor

Head & Associate Professor

PG & Research Department of History

Rani Anna Govt College for Women

Tirunelveli-8

(Affiliated to Manonmaniam Sundaranar University, Abishekapatti, Tirunelveli – 627 412)

2882

ABSTRACT

Cleanliness fits into the category of healthcare that is precautionary. Good hygiene encompasses cleaning up, gutter cleaning, and the disposal of trash, sludge, and animal carcasses. Prevention is always preferable to treatment, so improving overall hygiene in populated regions of metropolitan areas can be beneficial. All these are carried out by sanitation workers. These scavengers should also be given fair treatment like other employees. Inequality and ostracising in the workplace and in their personal circle highlight the fact that more welfare measures must be taken for rights-based advancement. The standard of living will undoubtedly improve when sanitary employees receive necessary precautions, frequent health checkups, use machines instead of human hands in the cleaning process, and are educated about the welfare schemes of governments. Governmental and non-governmental NGOs must show interest in the service and development of these scavengers. The present study highlights these issues.

Key Words: Sanitation Workers, Socio-Economic, Psychological Conditions

DOI Number: 10.48047/nq.2022.20.22.NQ10281

NeuroQuantology 2022; 20(22): 2882-2886

Introduction

This paper examines the growth of sanitation workers and the effects on their wellness, protection, and monetary reward. It

eISSN 1303-5150

also addresses the daily activities and lifestyle of sanitary employees, their incomes, and the sanitary employees' requirements in the constitutional amendment. Every individual can

www.neuroquantology.com



be addressed as a sanitary worker when he or she never fails to flush the lavatory and properly dispose of the waste. But scavengers in reality not only do the previously mentioned tasks alone, but their duties also include emptying sewer pipes, cleaning the drainage system, maintaining public restrooms, handling various types of waste, operating pumping stations, and operating waste-treatment facilities (Brown, 1987). These tasks hold a high risk rate, but most sanitary employees are generally unnoticed and unvalued. Sanitation workers provide pivotal support to respective regions by gathering trash and transporting it to dumping sites or other appropriate disposal systems (Chellamma, 2015). A sanitation worker needs to be in good health so that he can mount heaps, handle hefty garbage cans, and empty big trucks. The work is strenuous physically because sanitary employees frequently lift large objects and perform their duties in all types of weather. That is a significant danger of injury inherent to this profession because of risky physical activities and a lack of machinery aids (Jennifer, 2005). They have to be the frontline workers during natural and man-made disasters because they assist with rescue operations and hygiene.

Background of the Study

Oza's (2022) analysis offers hints that sanitation workers have heightened professional exposure to an array of illnesses. The report by Nigam (2020) identifies important aspects of sanitation employees' occupation and labour environment. It is unavoidable that caste has a significant impact on how sanitation employees are treated and how they improve. This, together with the variety of tasks that sanitation employees were required to perform throughout the terrible COVID-19 pandemic, reveals more serious structural issues (Gayathri, Sathya, & 2020). According to a study, their practise of disposing of garbage in an unclean manner makes them susceptible to several health hazards. (Gomathi & Kamala, 2020) discovered that the sanitation employees' lack

of understanding is causing them to pay less attention to their own health and the precautions to be followed in doing this job. It is necessary to increase employees' understanding of medical care management, safeguarding against serious illnesses, and risk reduction. (Ihalagedara & Pinnawala, 2015) revealed the existence of a shortage of workers, a significant rate of absenteeism and recurrent expulsions, recklessness, and issues with sanitation and security appliances as among the study's significant difficulties. The causes of the difficulties that were discovered were working part-time jobs, temporary employment, limited resources and care services, a poor educational background, power and influence, and labourers' personal issues.

Problems faced by scavengers

The core component of the system for managing waste is the sanitary workforce, yet the majority of them work in terrible conditions without having social protection or protective equipment. There are five million sanitary employees in India who keep the streets, sewage systems, and common restrooms hygienic (Kannolath, 2019). They frequently run the risk of developing chronic ailments due to their frequent exposure to harmful gases and toxic excrement. In addition to the economic recession, the COVID-19 pandemic has indeed made scavengers flee their homes (Ravikant Kisana & Nioshi Shah, 2021). Since they must sanitise the city and hospital when the entire city population is under lockdown. In order to protect the people, sanitation workers have to risk their lives, and they are not provided with holidays or days off because of the adversity of the disease. To protect their families from getting infected by them and for the welfare of society, they choose to stay away from their homes.

Psychological Issues

The sanitation employees are suffering from an abundance of psychological issues due to their excessive schedule, including mental anguish and sadness. The inability to respond to

2883



the workplace, a decreased level of job contentment, high rates of unemployment, poor workplace connections, a communication breakdown, negative symptoms, playing double roles in the personal and professional lives, and sexual abuse of female workers at work are the causes of psychiatric issues (Chokhandre & Kashyap, 2017).

Health Issues

Sanitary employees are more likely to have specific health complications. Physical injuries like fractures, digestive problems, neuromuscular problems, breathing difficulties, skin-related problems, eye infections, and diseases like cholera, E. coli diarrhoea, cryptosporidiosis, giardiasis, hepatitis A, hepatitis B, leptospirosis, salmonellosis, typhoid fever, and tetanus constitute the most common physical health problems (Patil & Kamble, 2017).

Occupational hazards

When maintaining sewage systems or sewer systems, sanitary employees are subject to a variety of workplace hazards, including burns from flammable gases, exposure to chemicals, diseases from microbial pathogens, and damages from direct exposure to chemicals (Tiwari, 2008).

Economic Issues

Inadequate hygiene results in monetary losses from the immediate expenses involved in treating ailments connected to cleanliness as well as lost money from decreased productivity or project delays. A number of the most disadvantaged people are those in the sanitation industry. They frequently work in an unregulated segment of the country with few basic employee rights or safeguards. They continue to be unnoticed, uncounted, ignored, and shunned (Priyanka & Meena, 2020).

Stigma, discrimination, and indignity

Together with severe medical hazards, the community of scavengers experiences humiliation and prejudice, which robs people of their respect. The majority of sanitation workers are members of the former

untouchable caste in Hinduism or former lower castes who converted to other religions to avoid injustice and degrading treatment. Instead of using metal plates, hotels serve their customers water and food on disposable plastic utensils. In order to prevent them from being touched by people or brooms used by garbage collectors, kids are smuggled alongside their parents when they cross roadways. Sanitary employees encounter prejudice in public places like shrines, drinking fountains, and religious festivals, as well as when using cabs and other vehicles. These individuals frequently encounter insults, disrespect, and hatred in the course of their daily interactions. Smoking and drinking were recommended as ways to alleviate most diseases and were seen as ways to aid in dangerous employment. This is arguably the most prominent health concern, and any effort to combat alcoholism would also need to consider the social effects of caste-based occupations. So, it is still a difficult challenge for them to remove caste obstacles to attain selection and liberty of work.

Lack of identity proof and documentation

Sanitary employees continue to exist with no official identity and are thus hired as de-notified or no dignity workers with hardly any official records, thus protecting employers from any kind of ethical consequences resulting from security infractions. Moreover, numerous employees endure labour violations, but they are powerless to register complaints since they lack official identification. Moreover, benefits from the scheme are not available without certification. It is odd that there is no accurate data on the numerical value of official and temporary employees doing sanitary services. The government does not maintain records of the total count of sanitation employees in the nation, primarily due to conceptual issues.

Steps taken to tackle the menace of manual scavenging

In India, during the past seven to eight years, government programmes have placed a strong emphasis on sanitation.

2884



The prohibition of employment as manual scavengers and their rehabilitation

(Amendment Bill, 2020.

- It intends to fully automate sewage cleaning, introduce measures for "on-site" prevention, and pay hand scavengers in the event of sewer fatalities.
- The 2013 Ban on Work as Manual Scavengers and Their Rehabilitation Act will be amended.
- The cabinet has not yet given its permission.

The prohibition of employment as manual scavengers and their Rehabilitation Act, 2013:

- The 2013 Act, which replaces the 1993 Act, forbids all hand excrement clearing of unhygienic lavatories, drainage channels, or ditches in addition to the restrictions on pit latrines.

The Building and Maintenance of Insanitary Latrines Act of 2013:

- It forbids the building or management of unhygienic restrooms and the employment of anyone to perform these tasks with bare hands therein, in addition to risky sewage and clogged drain emptying.
- It also establishes a legal obligation to offer individuals who rely on manual scavenging instead of machines better opportunities and other forms of support as restitution for historical oppression and degrading treatment.

Prevention of Atrocities Act:

- In 1989, when the Prevention of Atrocities Act was incorporated to protect sanitary employees, the Scheduled Caste made up over 90% of those recruited as manual scavengers.
- This served as a significant turning point in the liberation of manual laborers from predetermined traditional jobs.

Safaimitra Suraksha Challenge:

- On November 19, 2020, International Toilet Day, the Ministry of Housing and Urban Affairs officially unveiled it.

- The government issued this "challenge" across all states to automate sewage cleaning by April 2021. In the event that a person must access a septic system due to an inevitable catastrophe, appropriate safety equipment, such as ventilators, must be made available.

"Swachhta Abhiyan App":

- It was created to locate and collect location history statistics from manual scavengers and unsanitary lavatories so that they can be substituted by hygienic lavatories and provide a respectful life to these workers.

Conclusion

The majority of Dalit community employees employed in sanitation have assimilated the dangerous character of the job as normal (Kumar, 2020). This has shown itself in the political system's indifference towards the wider problems of cleanliness, workplace health and safety, and the liberation of a disadvantaged caste. This study also indicates how their poor societal and monetary position influenced their opinions of things like not being able to receive social services, being taken advantage of by agencies, and physical hazards. The stigmatisation of sanitary employees has become so severe that their role in ensuring cleanliness, stopping the transmission of infectious diseases, and protecting public health has never been officially recognised. Implementing safety protocols at work, conducting employee medical care vigilance and investigations, and making laws designating dangerous working conditions and work-related medical conditions as reportable and substitutable are all important steps in realising the medical rights of these marginalised employees. The prolonged role of social equity, which is a fundamental right, would be ramped up by the offering of medical services to workers and their households through particular financial assistance and connections to medical services like the Workers' State Insurance Plan.

References



- [1] Brown P. (1987). Popular epidemiology: Community response to toxic waste-induced disease in Woburn, Massachusetts. *Sci Technol Human Values*. 78–85.
- [2] Chellamma P, Sudhiraj, Arya Vijayakumar, (2015). Morbidity profile of scavengers in Thrissur corporation, Kerala, Retrieved <https://www.researchgate.net/publication/290213148>.
- [3] Chokhandre P, Kashyap GC. (2017). Assessment of Psychological Well-being of Waste-pickers of Mumbai. *Asian J Epidemiol*. 10(3):138–143. [[Google Scholar](#)]
- [4] Gomathi, P., & Kamala, K. (2020). Threatening health impacts and challenging life of scavengers. *Journal of Evolution of Medical and Dental Sciences*, 9(41), 3055-3062.
- [5] Ihalagedara, M., & Pinnawala, M. (2015). Problems related to sanitary labours in solid waste management: A case study in Matale municipal council. *ACEPS 2015*, 155.
- [6] Jennifer (2005). Status and role perception of middle class women. New Delhi : Puja Publishers.
- [7] Kannolath, R. B. (2019). A lens to understand sanitation workers and their health status in India. *Journal of Pharmacy Practice and Community Medicine*, 5(2).
- [8] Kumar, A. (2020). Dalit, labour and stigma against waste work: A question of dignity and self respect. *PalArch's Journal of Archaeology of Egypt/Egyptology*, 17(9), 10228-10237.
- [9] Nigam, D. D., & Dubey, S. (2020). Condition of sanitation workers in India: A survey during COVID-19 and lockdown. *Independent Study Report*.
- [10] Oza, H. H., Lee, M. G., Boisson, S., Pega, F., Medlicott, K., & Clasen, T. (2022). Occupational health outcomes among sanitation workers: A systematic review and meta-analysis. *International Journal of Hygiene and Environmental Health*, 240, 113907.
- [11] Patil P, Kamble R. (2017). Occupational health hazards in scavengers of Chandrapur City, Central India. *Intl J Environ*. 6(3), 15-24.
- [12] Priyanka, T., & Meena, G. (2020). A study on socio economic status of scavengers. *European Journal of Molecular & Clinical Medicine*, 7(3), 5527-5532.
- [13] Ravikant Kisana & Nioshi Shah (2021) 'No one understands what we go through': self-identification of health risks by women sanitation workers in Pune, India during the COVID-19 pandemic, *Gender & Development*, 29:1, 35-54, DOI: [10.1080/13552074.2021.1885217](https://doi.org/10.1080/13552074.2021.1885217)
- [14] Sakthivel, P., M. Nirmalkumar, & Akshayaa Benjamin, 'Rights of sanitation workers in India', in Philippe Cullet, Sujith Koonan, and Lovleen Bhullar (eds), *The Right to Sanitation in India: Critical Perspectives* (Delhi, 2019; Online edn, Oxford Academic, 17 Apr. 2019), <https://doi.org/10.1093/oso/9780199489855.003.0013>, accessed 26 Mar. 2023.
- [15] Sathya, J., & Gayathri, J. (2020). A study on health conditions of scavengers in Salem corporation. *Ecology. Environ Conserv*, 26(1), 121-124.
- [16] Tiwari, R. R. (2008). Occupational health hazards in sewage and scavengers. *Indian journal of occupational and environmental medicine*, 12(3), 112.

2886

