

# A Study on Health Problems among Women Migrant Construction Workers

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**Abstract:** Labour migration is an important and necessary livelihood strategy for millions of individual and households throughout India. Migration has become a way of life to many, who are unskilled and semi skilled and find difficult to get better jobs within their natives and locality. Most of the poor people migrating to cities and towns join one or another informal sector activity either in wage employment or self-employment. The unorganized sector, now being referred as informal economy at global forums, is understood to be outside the world of regular, stable and protected employment which means that the workers in this economy are not recognized, regulated or protected by the existing legal and regulatory frameworks. Construction is a fundamental, integral part of economic development and provides many of the materials benefit of progress: housing, schools, hospitals, transport, infrastructure, irrigation schemes, power stations, industrial plant, etc. The generation of largest scale employment is a significant aspect of construction work for both male and female workers. Construction workers are unskilled and illiterate workers, which make them very vulnerable to exploitation. The main occupational health problems in the construction industry are back injuries from carrying heavy loads, respiratory disease from inhaling dust, musculoskeletal disorders, noise-induced hearing loss and skin problems. With this background the present study is been carried out in order to examine the health problems among migrant women workers of sample size 110 employed in construction sectors in India with special concentration on Coimbatore region of Tamil Nadu.

**Key Words:** Migrant, labour, construction, women, health.

## 1. INTRODUCTION:

Migration is global phenomenon. The term migration is so broad that it lends to various connotations and interpretations which are due to the differences in the nature, scope or purpose of the study or discussion. Sociologists have emphasized social and cultural consequences of migration. While geographers have laid stress on the time, distance and significance of migration, economists gave importance to the economic aspects of migration. Dictionaries generally refer to migration as a change in the residence from one place to another. Uneven economic development, inter-regional disparity and differences in living standards between socio-economic groups are some the important reasons responsible for migration. Avenues of better employment and higher wages serve as pull factors, where as non-availability of employment opportunities in backward regions drought and scarcity conditions are push factors.

Migration is a universal phenomenon and it is not of recent origin (Gill, 1998, Chand *et al.*, 1998, Naik *et al.*, 2009, Chakraborty and Kuri, 2008, Awasthi, 2010). Man was moving here and there in search of good environment and settlement without any interruption since from the first day of human appearance on this planet. Migration makes the human beings to think and lead a normal and problem free life, depending upon the previous experiences of human living in different parts (Singh and Kaur, 2007, Halemani and Shashikala, 2009, Naik *et al.*, 2009, Lamani, 2009). From the demographic point of view, migration is one of the three basic components of population growth of any area, the others being fertility, mortality. But, whereas both fertility and mortality operate within the biological framework, migration does not. It influences size, composition and distribution of population. More importantly, migration influences the social, political and economic life of the people (Singh, 1998). Through migration, people move from a permanent place of residence to another more or less permanent one for a substantial period of time (Singh and Kaur, 2007).

Migration from different states to other states in India has now become so rampant that its impact is felt in every aspect of life. Migration has become a way of life to many, who are unskilled and semi skilled and find difficult to get better jobs within their natives and locality. Most of the poor people migrating to cities and towns join one or another informal sector activity either in wage employment or self-employment. Mobility of labour takes place when workers in source areas lack appropriate options of employment and livelihood and there is expectation of improvement in standard of living through a continuous source of employment in the area where they intend to migrate, in terms of increased income and more participation in employment (Lall, Selod and Shalizi, 2006).

Construction industry is now becoming a way of entering a city for the rural migrants (Khuntia 2005). As a result, majority of the workers in the construction industry are migrants. The construction industry has a long tradition

of employing migrant labour. During the process of economic development, work in construction provides a traditional point of entry to the labour force for migrant workers from the countryside. Construction work is often the only significant alternative to farm labour for those without any particular skill or education and it has special importance for the landless. Construction industry is labor intensive in India, because labor is cheap and available in abundance. Shah and Mehta (2009) classify three types of migrant construction workers on the basis of their level of skill. The first is skilled construction workers such as bricklayers, masons, reinforced concrete workers, tile and roof layers, plasterers, supervisors, foremen, carpenters, plumbers, blacksmiths and electricians. The second category is semi-skilled workers like white washers, pipe layers and construction workers not elsewhere classified. The third is unskilled workers consisting of loader and un-loaders. Laskar and Murty(2004) reported that every `10 million investments made on construction project will be able to provide employment to 22,000 unskilled man-days, 23,000 skilled or semi-skilled man-days and 9,000 managerial and technical worldwide.

Women are almost unskilled labourers and they face serious problems related to work, viz., wage discrimination, gender and sexual harassment, unhealthy job relationship, lower wages; despite these, construction industry over whelmingly attracts female workers. Their skills are never upgraded as they are allowed to perform only certain types of work and usually they assist the male work force. India is one of the fastest growing economies of the world. There are several policies adopted by Government of India for the development of infrastructure for the country's economic development. Construction industry is the key for the success of the globalization of Indian economy .Construction sector is providing employment to 7% of total world employment. Today Indian construction industry employs about 31 million people and creates assets worth over Rs 200,000 million ( GOI, 2008) annually.

So far as women construction workers are concerned their conditions is even worse. Women construction workers may carry single loads of up to 51 KG, far more than the weight limit recommended by occupation safety and health standards for women. They also tend to carry heavier loads when they have to climb up a job site and in repetition of this takes a toll on the women, and their bodies. Of these, female workers represent a small, unknown number, but now they are increasingly working in urban projects. The problems of women worker is still not addressed adequately both by law makers and the employer.

## 2. OBJECTIVE:

The following are the main objectives of the study,

- To examine the socio-economic and demographic background of the study.
- To find out the wage of the women construction workers.
- To see the reason for migration among the migrant women workers.
- To analyze the health problems faced by the respondents.

## 3. REVIEW OF LITERATURE:

A survey was conducted by SEWA (2000) to study the socio-economic aspects of the lives of construction workers and to accelerate the process of organizing women construction workers of Ahmedabad. Out of 125 women workers surveyed, all the women workers were engaged in unskilled jobs. The average daily wages of the female workers were found to be substantially lower than the male workers. The incidence of physical strain during work was more in the case of women workers. About 51 percent of the women workers reported that they had sustained physical injuries during on-site work, while the incidence of injuries was much lower in the case of male workers. About 54.4 percent of the women surveyed, agreed that they were not provided with any basic amenities except drinking water on the sites, while 48 percent male workers confirmed about the inadequacy of basic amenities on the work site.

Examining the social security for the workers in the informal construction sector, Vanitha.B (2003) observed that women construction workers are generally engaged in less skilled jobs. There exists gender biased wage differential. Most of these workers face health problems due to occupational hazards and low calorie intake. Hence the study illustrates the need to develop strategic and comprehensive labour policy to solve the problems of poverty, unemployment and inequity.

Ram Lakhani (2004) made a study on the "Occupational Health of Women Construction Workers in the Unorganised Sector". One thousand and fifty-two workers were selected by stratified random sampling, medically examined and subject to relevant interviews, examinations and investigations. Over three-fourths of the women and almost all men reported working for 10 to 12 hours daily. A majority of the women reported headaches and backaches, as well as pain in the limbs. They had no social security or other workers' benefits. Respiratory, eye and skin disorders and noise-induced hearing loss (NIHL) were found to be prevalent amongst workers exposed to hazards like dust, noise, heat and cold, non-ionizing radiation, and exposure to dry cement, glass and adhesives, tar and paint. About 76 per cent of women reported gender-specific work stress factors, such as sex discrimination, and balancing work and family demands, above and beyond the impact of general job stressors such as job overload and skill underutilization. Discriminatory barriers to financial and career advancement were found to be linked to recurrent physical and psychological symptoms and more frequent visits to the doctor among women workers

#### 4. DATA AND METHODOLOGY:

A random sampling method was used to collect information from the women migrant construction workers in the district of Coimbatore. A questionnaire was framed with question needed for the study and through personal interview method the data was collected. About 75 respondents were enquired for the study in the time period from July 2016 to December 2016. The data that were collected was analyzed using simple average and percentage method, Garret`s ranking scale and SPSS software.

#### 5. RESULTS:

##### Socio-economic background of the respondents

The socio-economic background of the respondents is very much necessary to understand the background of their life. With this background the selected women migrant workers were asked questions related to their age, education, marital status and type of family. And the following tables shows the result of the finding.

##### Age of the selected migrant women workers

**Table 1**

Age of the respondent	Percentage
Less than 20	05
20-29 years	67
30-39 years	13
40-49 years	6
50 and above	9
Total	100

Source: (Primary Data 2016)

The above table reveals that a majority of the women workers around 67 percent are from the age group of 20-29 years it is been followed by 13percent of the study population from 30-39 years of age and very minimum number of age group falls in the category of less than 20 years, 40-49 years and 50 and above years of age.

##### Education

**Table 2**

Education	Frequency
Illiterate	52
Primary	21
Secondary	02
Total	75

Source: (Primary Data 2016)

The Table-2 shows the educational qualification of the selected sample respondents around 52 members are illiterate and 21 members have undergone primary education its been followed by 02 members who have undergone secondary education. The study finds that no women migrant workers have undergone higher secondary education.

##### Marital status

**Table-3**

Items	Numbers
Married	64
Unmarried	10
Divorce	00
Widow	01
Total	75

Source: (Primary Data 2016)

Table 3 discuss information on the migrant women construction workers marital status and 64 numbers that is a majority of the population are married and 10 members are unmarried and only one widow worker was found in the study area. And it is to be noted that no divorce ladies were found.

##### Type of Family

**Table -4**

Type	Percentage
Joint family	62
Nuclear family	13
Total	100

Source: (Primary Data 2016)

The above table depicts that a majority of 62% of the study population are belonging to joint family type and only 13 percent of the population are belonging to the nuclear type family.

## Wage of the respondent

**Table 5**

Type of Wage	Numbers
Daily wage	25
Weekly wage	35
Monthly wage	15
Total	75

Source: (Primary Data 2016)

Wage is an important factor that is needed for the economic condition of the labours. And in case of unorganized workers the periodicity of the wage allocation is needed to examine their level of exploitation. In the study area a majority of 35 members reported that they get their wages weekly and 25 members stated that they get wages daily and only 15 members are getting their wages monthly.

## Reason for Migration

**Table 6**

Reason	Number
For Marriage	40
For better livelihood	15
For high income	12
Natural calamities	08
Total	75

Source: (Primary Data 2016)

In case of migrant workers the reason for migration is needed to be noted. And in the study area 40 members reported that they have migrated after their marriage. And 15 members reported that they have migrated for better livelihood and 12 members reported that they have migrated for getting high income and only 08 percent reported that they have migrated due to some natural calamities.

## Health Problems

**Table 7**

Problems	Rank
Respiratory Problems	2
Backbone Problems	4
Blood pressure	5
Menstrual Problem	1
Head pain, leg pain, joint pain and others	3

Source: (Primary Data 2016)

Sample respondents were asked to rank their health problems they face due to their working conditions in five scale ranking procedure. And the highest rank (I<sup>st</sup> rank) is assigned to Menstrual Problems as they carry heavy loads every day it is severely affecting their menstrual cycle. II<sup>nd</sup> rank is been assigned to respiratory problems, as they work in heavy dust area dealing with sand, cement and bricks. The III<sup>rd</sup> rank is given to the problems such as head pain, leg pain, joint pain etc. rank IV is given to backbone problems and rank V is assigned to blood pressure.

## Awareness on social security measures

**Table 8**

Social security measure	Yes	No	Total
Existence of trade unions	00	00	75
Union benefits	00	00	75
Insurance	53	22	75
Accidents	21	54	75
Compensation	20	55	75
Child education	68	07	75
Welfare activities	04	71	75
Pension	01	74	75

Source: (Primary Data 2016)

The above table shows that among the total respondents surveyed none of the respondents are aware about the existence of trade unions or union benefits. Around 53 percent of the respondents reported that they are aware about the insurance policy whereas they all have registered for the State Chief Minister Medic Claim Policy and 21 of them are having awareness on the accidents measure and 20 of them are aware about the compensation measures available.

A majority of the group is having knowledge on the child education system that is been prevailing in the state and very less members are having awareness on the welfare activities and pension scheme available.

## 6. CONCLUSION:

The above study has found that a majority of the respondents fall in the age group of 20-29 years of age and most of them that is 52 are illiterate and 64 are married and most of them are found in living in joint family. Most of the sample populations are receiving their wages through weekly wage type. And their reason for migration is being marriage and the main health problems faced by the migrant women worker are menstrual problem. Most of the respondents are unaware about the social security measures available to them. So there is action to be taken by the authorities in providing adequate information on the social security measures to all the women workers.

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