

# Health hazard and occupational safety challenges for Unorganized sector workers in India

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## **ABSTRACT**

*The unorganized sector plays essential role in Indian economy in terms of employment generation and national domestic product. This sector carries 93 % of the total workforce, in which 79 % are poor and vulnerable section who work and live in contaminated condition and are affected with various chronic diseases. The affordability and accessibility of health services must be ensured for people as “Health is a Human Right”. Medical treatment is now beyond the reach of poor people who are working in the unorganized sector because of increasing costs. Health services are a big problematic issue for India, where a huge number of the population is living in the rural area below the line of poverty (BPL). The people and the Government of India have begun seeking various options for health financing to manage the arising problem of the cost of health care and changing the epidemiological pattern of disease. The research paper shows the issues of health care expenditure and related health problems of unorganized sector workers as well as the extent of utilizing schemes of health insurance are the integral aspects of the proposed research work.*

**KEYWORDS:** *Unorganized workers, Public Health Policies, Informal Sector, Health hazard*

## **1. INTRODUCTION**

Health is the important factor for each workers life. it is not only the basic need for a happy life, but also essential for increasing the productivity of workers in the organization or society. It shows socio-economic and security aspects of individual. The importance of Health can be understood by the saying “health is wealth”. The unorganized sector plays a vital role in employment generation and it has essential contribution in the economy of India and capital formation. Now, Indian economy is going through the liberalization and economic reform process.

The social security and health security or services are absent to the wide working people in many developing countries. Although the need to give social and health security is necessary for the poor and the other weaker section of the populace, even after many centuries of public health system and policies, there do not seem to be an effort to provide this for a large segment of the working force. Rather, a recent study shows that many developing countries go to show that the unorganized labor workforce is left to safeguard for itself, the maximum number of workers are coming to the platoon of the informal job market.

National health mission, national mental health program, ASHA, Ayushman Bharat, National rural health mission and national urban health mission are instilled by the union ministry of health and family welfare, these are the Public health initiatives that affect the general public in the unorganized sector. Many systems and programs have been set up in the urban and rural areas of India consisting of the government hospital, community health centers, sub-centers, and Primary Health centers. The Public health system throughout India is a composition of all organized activities which avoid disease, prevent from disease, promote health, increase life efficiency of people and to ensure well-being and betterment of all employed people, especially those working in unorganized sector and contribute 93 % of the total workforce (Sector, Report on conditions of work and promotion of livelihoods in the unorganised sector, 2007).

## 2. LITERATURE REVIEW

A study on “social protection for urban informal sector workers” analyze the social protection scale present in the urban unorganized sector workers. The objectives of study were to know the health condition and health securities of the workers in informal sector and relationship between employees and employers of willing to participate in insurance scheme. For the fulfillment of this study data were collected through stratified random sampling. This study shows that worker of urban informal sector has high degree of health insecurity (**Ambalavanan, V. and S. Madheswaran (2001)**). A research study about “Awareness of Health Insurance Benefits Availed Among Unorganized Engineering Workers”. According to the study of “Awareness of Health Insurance Benefits Availed Among Unorganized” Workers of unorganized sector who earns daily wages or self-employed are generally receive less returns on their labor. They work in poor physical environment; they are vulnerable in employment insecurity and hold no social protection against the basic risks of work and life (N.Padmasundari, 2016). The negative impact of weak health is on the workers engaged in the informal sector because of their poor living conditions. The workers of this research used to spend 15-20% of their monthly income and more than 20% of the workers family spending for the health services, shows the intensity of health facilities are burden for them. Success of these schemes may be accomplished with collective efforts of non-governmental and governmental organizations (Independent, 2020). The result of the study “Occupational Health of Women Construction Workers in the Unorganized Sector” summed up pervasiveness of different health hazards in the following chain: eyes, respiratory, musculoskeletal, skin, neurological, hearing and psychiatric. On the basis of these findings the study shows that as these hazard augment further control, measures and medical

surveillance are necessary in construction industry (Lakhani, Occupational Health of Women Construction Workers in the Unorganised Sector, 2004). Pradhan Mantri Jeevan Jyoti Bima Yojana focus to offer insurance facilities to the people of unorganized sector with the motto of “Jan-Dhan se Jan Suraksha”. Banking industry’s existing industry is well utilized Under Pradhan Mantri Jandhan Yojana. This scheme is attractive because of flexibility, easy and clear process and are highly reliable and economical term (Rajesh K. Yadav, 2016)

### **Objectives of the study**

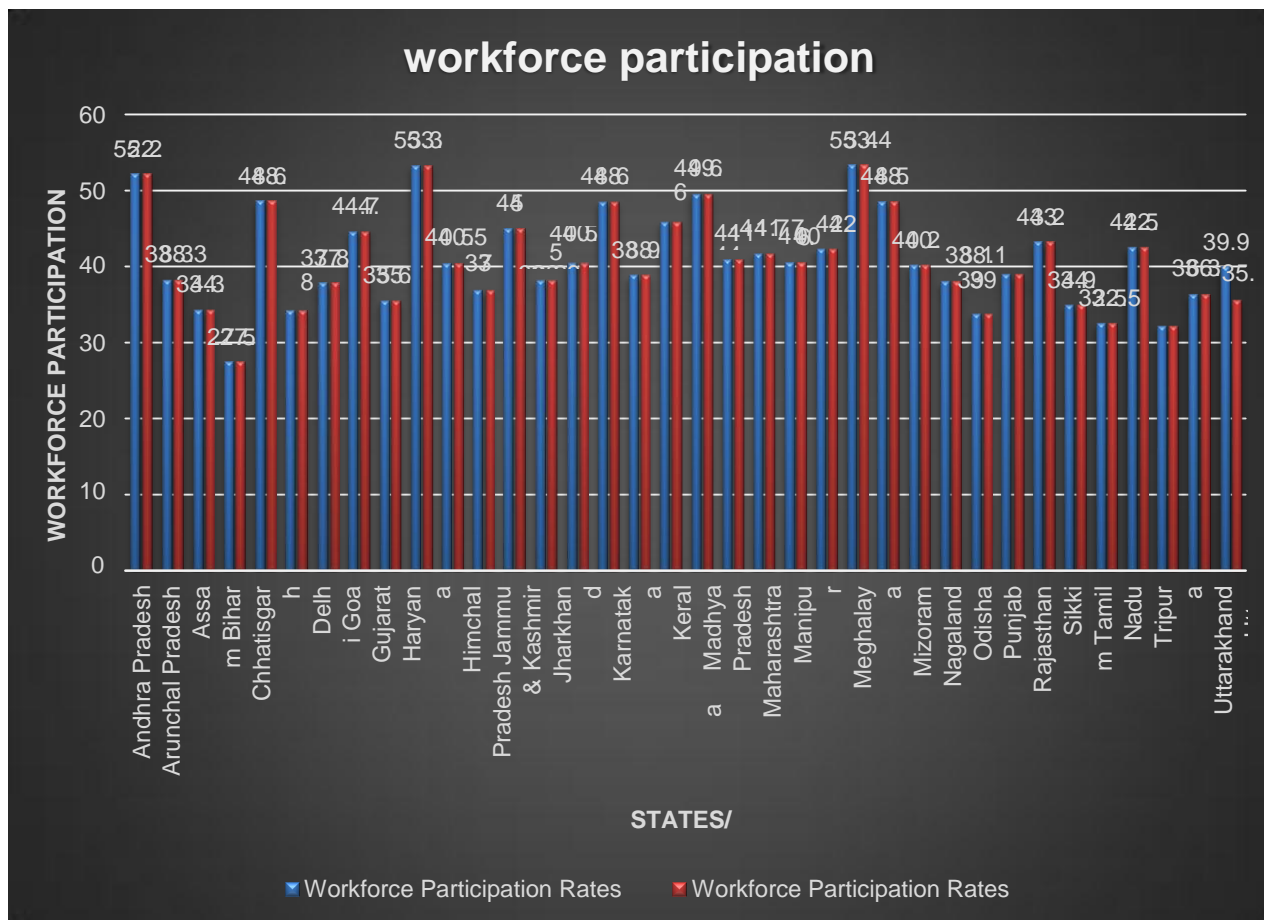
- To study the health insurance benefits
- To Identify the expenditure on health care and its burden on the workers
- To analyze health insurance schemes, plan which is implemented by government and other agencies for the unorganized sector workers.

### **The Workforce in Organized/ Unorganized Sector**

There is a profound impact of Public health policy on health status. A large number of India’s workforce is unorganized. According to the survey conducted by NSSO (National Sample Survey Office) and Ministry of Statistics and Programme Implementation on employment, 47.41 crore people were employed in 2011-2012, in which 82.7 % of the workforce around 39.14 crore persons were in unorganized sector (Employment, 2016).

## Workforce Participation Rate in the Urban and Rural region during 2011-2012 is enlisted state wise

Source: - NSS Report, 2011-12



## Construction Workers in The Unorganized Sector

Construction workers are facing different sorts of fatal health hazards in the job. Workers do not only cope with Primary hazard on her/his job but also may be claimed as a bystander of the hazard produced by worker adjacent or upwind. Hazards faced by workers in different trades are listed as below.

Occupations	Hazards
Brick masons	heavy loads, Cement dermatitis, awkward postures
Electricians	solder fumes, awkward posture, asbestos dust
Hard tile setters	awkward postures, dermatitis, Vapor from bonding agents
Carpenters	Wood dust, heavy loads, repetitive motion
Painters	Solvent vapors, paint additives, toxic metals in pigments

<b>Plumbers</b>	Lead fumes and particles, welding fumes
<b>Steamfitters</b>	Welding fumes, asbestos dust
<b>Insulation workers</b>	awkward postures, synthetic fibers, Asbestos
<b>Paving, and surfacing equipment operators</b>	Emissions of Asphalt, heat, gasoline and diesel engine exhaust
<b>Rail-track-laying equipment operators</b>	Heat, Silica dust
<b>Structural metal installers</b>	heavy loads, working at heights, Awkward postures
<b>Welder</b>	Emissions from welding
<b>Earth, rock, Drillers</b>	whole-body vibration, noise, Silica dust
<b>Excavating machine operators</b>	Noise, Silica dust, histoplasmosis, heat stress, whole-body vibration
<b>Highway construction workers</b>	diesel engine exhaust, heat, Asphalt emissions
<b>Truck equipment operators</b>	diesel engine exhaust, Whole-body vibration
<b>Building Demolition workers</b>	dust, Asbestos, noise, lead

(Lakhani, Occupational Health of Women Construction Workers in the Unorganised Sector, 2015) source

### **Health Hazard in Unorganized Sector**

Various health issues and safety hazards have been being faced by the workers of unorganized sector in India. Health safety and risk depends on the factory and industry of unorganized sector where huge number of people works. The physical incidence and health hazard differ industry to industry, sector to sector, place to place. In India, there are various sorts of sectors and factories with different processes. In general, these sectors do not provide protective accessory to the workers such as head protection, gloves, safety goggle, mask, corded foam etc. (Anveshi, 2013).

Frequent incidences of sickness, illness, and health problems are the major insecurities for the workforce in the unorganized sector, they need medical care, health policies and hospital facilities for themselves and their family. Despite the enlargement of the health sector and health facilities, sickness keeps remaining one of the most vulnerable causes of deprivation in the workforce in India. It has been distinctly recognized that public health policies and health insurance is one way of availing protection to people of the unorganized sector against the risk of expenditure on health leading to insecurity and poverty. However, efforts to provide health services in the past have coped troubles in both implementation and design. The penniless are neither able nor willing to take up health insurance or any other health services because of their high cost or unreachability or decrease in perceived benefits. Initiating, administering and Organizing health security and health insurance especially in the unorganized sector is also not an easy task.

The workers of the unorganized sector are involved in the occupation like Brick masons, Electricians, Hard tile setters, Carpenters, Painters, home-based workers, washermen, street

vendors, mid-day meal workers, landless laborer, agricultural workers, and other similar occupations.

### **Occupational safety and health (OSH) challenges India is facing**

Providing occupational safety and health is the big challenge in unorganized sector. There are essential need to fulfil in the sector like agriculture, small business, construction and service industry. These are unorganized sector which create jobs for a big number of workforces across the country. In order to assure the security and safety of health of workers. “The labor ministry is in the process of codifying the existing central labor laws into four labor codes, and one among these will be on safety, health and working conditions” (Singh, 2018).

### **Role of the DGFASLI (Directorate General of Factory Advice Service and Labor Institutes) in protecting workers from diseases and occupational accidents**

The professionals’ team of DGFASLI from different sectors, work for improvement in OSH (occupational safety and health) in factories, ports and docks. “They coordinate administration of Factories Act, 1948 and Rules, to enforce Dock Workers’ (Safety, Health & Welfare) Act, 1986 and Regulations 1990” (Singh, 2018). “DGFASLI also act as central repository of knowledge on Occupational safety and health (OSH) practices and organize training to create awareness on health issues and critical safety”.

### **Government of India perspective for ‘improving the safety and health of young workers**

There are distinct provisions for young labors in the Factories Act 1948 and prevention on children employment. This act asks about certification of fitness for adolescents and working hours. Before employment Medical examination is needed and routine medical tests are appreciated strongly. Indian Government strongly belief that without safe and healthy working surrounding economic and social justice can’t be accomplished. It is fundamental right for workers in organized or unorganized sector to get safe and healthy working place (Employment, The Factories Act, 1948, 1948).

The Unorganized Workers’ Social Security Act stipulated formulation of suitable welfare schemes for unorganized workers. Pradhan Mantri Jeevan Jyoti Bima Yojana and Pradhan Mantri Suraksha Bima Yojana provides a cover on life and disability to the workers of unorganized sector upon their eligibility.

Ayushman Bharat Scheme avails the health and maternity benefits and Recent Government launched PMSYM (Pradhan Mantri Shram Yogi Maandhan) to provide monthly pension of Rs. 3000 to the unorganized workers after attaining the age of 60 years.

Source: - [Ministry of Labour & Employment](#)

S. No.	Name of the Scheme	Number of Beneficiaries
1.	Pradhan Mantri Shram Yogi Maandhan (25.02.2020) (India G. o., Pradhan Mantri Shram Yogi Maan-dhan, 2020)	42,04,589
2.	PM Jeevan Jyoti Bima Yojana (26.02.2020) (India G. o., Transforming India, 2020)	6,67,00,000
3.	PM Suraksha Bima Yojana (26.02.2020) (India G. o., Transforming India, 2020)	17,85,00,000
4.	Atal Pension Yojana (as on 25.02.2020) (India G. o., Transforming India, 2020)	2,11,97,000
5.	Ayushman Bharat PM Jan Arogya Yojana (28.02.2020)	12,27,26,469
6.	Indira Gandhi National Old Age Pension Scheme (as on 31.04.2015)	2,10,33,674
7.	National Family Benefit Scheme (as on 31.04.2015)	1,80,592
8.	Janani Suraksha Yojana (as on 31.05.2016)	1,10,16,164
9.	Handloom Weavers'' Comprehensive Welfare Scheme (Mahatma Gandhi Bunkar Bima Yojana) (as on 30.10.2016)	79,475
10.	National Scheme for Welfare of Fishermen and Training and Extension (as on 31.03.2015)	52,34,799
11.	Aam Admi Bima Yojana (as on 31.03.2016)	4,51,07,984
12.	Rashtriya Swasthya Bima Yojana (as on 01.03.2020)	3,59,28,048

**Unorganized sector workers can take the benefit of PM-SYM (Pradhan Mantri Shram Yogi Maandhan)**

According to Labor Ministry, all informal sector workers whose age comes in the range of up to 40 years can subscribe the PM-SYM scheme, which encompass pension of Rs. 3000 minimums monthly. This scheme targeted to workers of unorganized sector to ensure old age

security who has up to Rs. 15,000 monthly income. This scheme will give an ensured pension to the person who have attained the age of 60 years on the monthly contribution during their working life, this scheme was introduced by Piyush Goyal FM (Finance Minister) in 2019-2020 Budget. This scheme has come into force since 15<sup>th</sup> Feb 2019. If the subscriber of this scheme dies during the period of pension receiving then in that case spouse of the subscriber will be entitled to get pension of 50% as family pension, only spouse of the subscriber is applicable for family pension. Till the date of 25/02/2020 the total enrollment in this scheme is 42,04,589 (India G. o., Pradhan Mantri Shram Yogi Maan-dhan, 2020)

### **Subscribers Contribution**

For subscribing this scheme person should be unorganized worker and Entry age group of this scheme is 18-40 years. The subscriber of PM-SYM is bound to contribute the specific amount of money from the age of subscription till 60 years and the same amount will be contributed by the central government. For example, if a person enrolls in the scheme at the age of 40 years then he/she is needed to contribute Rs. 200/- per month till the age of 60 and the same amount of money will be given by the central government (India G. o., Pradhan Mantri Shram Yogi Maan-dhan, 2020).

The government must avail comprehensive social and health security coverage to the unorganized sector workers for their old age security. While introducing 2019-2020 interim budget, “the Finance Minister Shri.Piyush Goyal pointed out that half of India’s GDP contributed by sweat and toil of 42 crore workers of unorganized sector who are working as Construction workers, agricultural workers, rickshaw puller, beedi workers, handloom workers and so on occupation” (Finance, 2019). Therefore, besides providing the health coverage under „Ayushman Bharat“, life and disability coverage under „Pradhan Mantri Jeevan Jyoti Bima Yojana” and „PM Suraksha Bima Yojana” The central Government introduced a mega pension policy “Pradhan Mantri Shram-Yogi Maandhan” for the unorganized sector.

### **Central Laws for Unorganized Sector Workers**

Some Central laws, which regulate conditions of work and workers in the unorganized sector fall into three groups

- The Equal Remuneration Act, 1976
- The Bonded Labor System (Abolition) Act, 1976

Second set (Laws which apply to some sections of the unorganized sector labor)

- Dangerous Machines (Regulation) Act, 1983
- The Employment of Manual Scavengers and Construction of Dry Latrines (Prohibition) Act, 1993 (Sector, Report on Conditions of Work and Promotion of livelihoods in the Unorganized Sector, 2007)
- Motor Transport Workers Act, 1961



Third set (Laws which can be extended to the Unorganized Sector) (Sector, Report on Conditions of Work and Promotion of livelihoods in the Unorganized Sector, 2007)

- The Beedi and Cigar Workers (Conditions of Employment) Act, 1966

### **International Labor Organization Conventions Ratified by India**

ILO is the only tripartite agency of U.N. Promotes internationally recognized human and labor rights. It brings all the employers, workers and governments of 187-member countries together for policies development, setting labor standard, and promoting quality of health, social justice and work labors. Social and Health justice is necessary (Organization, 2020).

Medical Examination of Young Person (Sea) Convention, 1921
Forced Labor Convention, 1930
Protection Against Accidents (Dockers) Convention (Revised), 1932
The Maternity Benefit Act, 1961
Night Work (Women) Convention (Revised), 1934,1948
Rural Workets <sup>o</sup> Organization Convention, 1975
Equality of Treatment (Social Security) Convention, 1962 Radiation Protection Convention, 1960
Abolition of Forced Labour, 1957

Source: (Sector, Report on Conditions of Work and Promotion of livelihoods in the Unorganized Sector, 2007)

The comprehensive ILO Convention 102 includes medical care, sickness benefit, unemployment benefit, old-age benefit, employment injury benefit, family benefit, fraternity benefit and invalidity benefit. Similar measures should be implemented to alleviate the misery of women in construction sector as advocated by the ILO (Lakhani, Occupational Health of Women Construction Workers in the Unorganised Sector, 2004).

Recommendations by the ILO include: (1). medical surveillance of all workers by occupational health physicians; (2). necessity of personal protective equipment to protect eye, skin, ears, respiratory system, and hands and feet; (3). in-depth studies to assess the magnitude of the problem of occupational health; and (4). training and education of workers to improve their living standards, health and hygiene.

### **ESIC and for unorganized sector workers**

The Employees' State Insurance Act, 1948 protect employees against the incidence of sickness, disablement, death, maternity problem and any employment injury to avail medical treatment for insured person and family. The ESI scheme implemented on the factories and other sectors viz. Shops, Hotels, Newspaper, Road Transport, Educational institution and Medical Institutions. Workers of these categories who are earning up to Rs. 15,000 per month are eligible to avail social security of ESI Act. Employees' State Insurance corporation has decided to increase the wages limit for betterment of employees under this Act from Rs.15,000 to Rs.21,000 (India N. P., 2020).

The ESIC (Employees' State Insurance Corporation) offer health insurance to more than 10 million employees of the organized sector and have Rs. 17,000 crores of corpus. 93% of Indian workforce are working only in the unorganized sector currently and they don't have proper reach to the socio and health benefits or they have little reach. Employees' State Insurance Corporation has an accord with the central government to roll out Rashtriya Swasthya Bima Yojana, through which employees and their family can be ensured for up to Rs. 30,000 a year and can avail travelling assistance and medical treatment (Handique, 2009).

This Act now cover 7.83 lakhs factories and other establishments throughout the country, covering around 2.13 crores insured persons. Now the total beneficiary stands over 8.28 crores. The corporation has set up 151 hospital and 42 hospital annexes yet for providing better services. Primary and out-patient medical services are provided through a network of about 1450/188 ESI dispensaries/AYUSH units, and 954 panel clinics (India N. P., 2020).

### **3. SUGGESTIONS**

Lack of health and security awareness schemes among the unorganized sector workers are the reason of not enrollment in the various scheme for the workers. Therefore, the officials of central and state government should start awareness program and campaign for the unorganized sector employees to make them feel and be health.

### **4. CONCLUSION**

Unorganized sector employees get very less returns of their work and they work in worst physical environment. They are highly sensible for insecurity in employment and are not getting socio-economic protection against the hazard in health, work and life. The benefits of Health insurance received by the workers comprise health insurance and ESI's facilities. Health insurance plays essential role to meet the health care and services among the unorganized workers.

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