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POURAKARMIKAS IN INDIA: ANALYSIS OF SOCIAL, OCCUPATIONAL AND HEALTH STATUS

Social Science

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ABSTRACT

In India, the maintenance of clean environment has become challenge and many of the civic workers or 'Pourakarmikas' are working under Municipal Corporations of different towns and cities. Though all these are grouped under 'Pourakarmikas', their work is slightly different as they include sweeping roads, cleaning toilets, cleaning septic tanks, disposal of human and animal excreta, collecting and transporting garbage, etc. Due to their occupations and occupation based castes, they are neglected, exploited, discriminated and even alienated in society. As they are engaged in cleaning occupations of different types, they are suffering from many of the health problems. The paper described the social, occupational and health status of Pourakarmikas at the national level.

KEYWORDS:

Introduction:

The term 'Pourakarmika' is used to denote 'Civic Workers' working in Municipalities of towns and cities and their work is to maintain cleanliness of cities and towns by sweeping roads, cleaning toilets, disposal of human and animal excreta, collecting and transporting garbage, etc. Basically, this occupation was historically reserved for the Shudras and due to such occupations, these Shudras or Dalits were deprived, discriminated, exploited and even alienated from mainstream of the society. Still, many of them are also facing untouchability in society. Civic workers form the backbone of the civic cleaning system of any society. Civic workers perform a valuable service to their communities collecting garbage and removing it to proper disposal areas such as dumps or landfills. They go by many names: garbage man, trash man, scavengers. A sanitation worker must be physically fit, so he can quickly climb in and out of large trucks and lift heavy trash containers. The job is physically demanding. Sanitation workers routinely lift heavy objects and work in all weather conditions. There is also a significant injury risk associated with the job. During natural and manmade disasters, sanitation workers participate in emergency response and cleanup (Sophia and Pavithra, 2017). In India we have nearly 1.2 million sanitation workers. In a developing country, like India, with limited resources, most of the cleaning process in urban localities remains manual (Chellamma, et al, 2015).

Occupations of Civic Workers (Pourakarmikas):

The obnoxious and inhuman occupation of manually removing night soil and filth using their hand is called 'manual scavenging'. The occupation has remained intact with the Dalit communities dictated and forced upon by the caste- system. The forms of manual scavenging and cleaning of human excreta have changed over the period of time both in rural and urban areas. However, the practice of inhuman and derogatory occupation of manual scavenging continues under different forms and manner. In order to operate and maintain the increased underground sewer systems a neo – breed of manual scavengers of Municipal Waste Water Workers or Sewer Workers are begin to arousing in Indian Municipalities" and other local bodies'. These sewer workers are being utilised in removal of clogged gutters, storm water drains, sewer manholes and septic tanks etc., Owing to the urbanization in India, numerous manifolds of sewer workers are getting arising lively and their occupation is in doldrums (Meenakshi Sundaram, 2012).

Manual scavengers are the most excluded and exploited communities among Dalits. They are the lowest in Hindu caste hierarchy and therefore suffer manifold social exclusion at the hand of caste Hindu and state's functionaries like the municipal officials, police, railways and defence. They are found in almost all cities of India---cleaning, sweeping the streets and manually engage in carrying out nightsoil. Women are the worst victims as they constitute more than eighty per cent of work force of manual scavengers. Apart from social stigma, work of scavenging is lowly paid, it causes health problems and many manual scavengers have died during cleaning up the sewage. As per the annual report of the Ministry Social Justice and Empowerment (Government of India 2009), there are 7, 70,338 manual scavengers and their dependents in India.

The practice of manual scavenging in India dates back to ancient time. According to contents of sacred scriptures and other literature, scavenging by some specific caste of India exist since the beginning of civilization. One of the fifteen duties of slaves enumerated in Naradiya Samhita was of manual scavenging. This continues during the Buddhist and Mauraya period also. In India, Jahangir built a public toilet at Alwar, 120 km away from Delhi for 100 families in 1556 AD. Not much documentary evidence exists about its maintenance. Scholars have suggested that the Mughal women with purdah required enclosed toilets that needed to be scavenged. It is pointed out that the bhangis share some of the clan names with Rajputs and propose that the bhangis are descendants of those captured in wars. There are many legends about the origin of bhangis, who have traditionally served as manual scavengers. One of them, associated with Lal Beg bhangis describes the origin of bhangis from Mehtar. Municipal records from 1870 show that, the British organized municipalities in India which built roads, parks, public toilets etc. The British administrators organized systems for removing the night soil and employed bhangis (Karthikeyan, et al, 2014).

Health Risks of Municipal Civic Workers:

Life expectancy amongst civic workers is low. Many develop asthma, skin infections and tuberculosis on the job. Hundreds reportedly die from the work each year. According to the Mumbai based research organization Tata Institute of Social Sciences (TISS), 80% of the manual scavengers die before they turn 60 because of health problems. TISS says in Mumbai alone, an average of 20 sewer workers die each month from accidents, suffocation or exposure to toxic gases (Karthikeyan, et al, 2014).

A survey conducted by the Safai Karmachari Andolan (SKA), besides being an inhuman relic of the past, has taken over 1327 lives in the past couple of years. According to data from the survey, Tamil Nadu has recorded around 250 manual scavenging deaths during the last two decades, out of which close to one-third or 84 deaths were in and around Chennai. The Tata Institute of Social Sciences, an educational and research organization, found that 80% of the workers die before age 60 because of work-related health problems. In Mumbai, an average of 20 sewer workers dies each month from accidents, suffocation or exposure to toxic gases, according to the study found. More than 95% of sewer workers are members of India's lowest social class, the Dalits, once known as 'untouchables', according to the government's figures. According to Harnam Singh, the chairman of the Delhi Safai Karamchari Commission, (Delhi Cleaners Commission) almost 70 per cent of the manual scavengers die on the job. An estimated 61 sewer divers have died in last six months alone. Total 28 workers have died in the city since May 2014. But social workers estimate that around 100 sewer workers die every year across India. Due to manual scavenging, 06 Pourakarmikas were died in 2013-14,

03 were died in 2014-15, 11 Pourakarmikas were died in the year 2015-16 and so far in 2016-17, totally 04 manual scavengers were died in Karnataka (Kamalesh Kumar, et al, 2016).

During their work, the sanitation workers exposed to hydrogen sulfide, is a flammable gas, which burns with a blue flame, giving rise to sulphur dioxide, a highly irritating gas with a characteristic odor. Mixtures of hydrogen sulfide and air in the explosive range may explode violently. Even at low concentrations, hydrogen sulfide has an irritant action on the eyes and the respiratory tract. Intoxication may be hyperacute, acute, subacute or chronic. Hydrogen sulfide enters the body through the respiratory system and is rapidly oxidized to form compounds of low toxicity. There are no accumulation phenomena and elimination occurs through the intestine, urine and the expired air. In cases of slight poisoning, following exposure from 10 to 500 ppm, a headache may last several hours, pain in the legs may be felt and, rarely, there may be loss of consciousness.

Osteoarthritic changes and intervertebral disc herniation are the common spinal abnormalities reported in these workers. There are also prevalence of spinal troubles (i.e., neck, upper back and lower back pain) among Municipal workers. Leptospirosis is an important occupational disease affecting people coming in contact with animals and their discharges. The occurrence of infection in ones workplaces is linked to the environment to which the worker is exposed and the adaptability of the organism in that working environment. Rodents usually abound in underground sewers and are carriers of leptospira. The urine of rodents and other animals present in that area is likely to contaminate these sewers. Leptospira are excreted in the urine of the infected animals. Thus, sewer workers are at a potential risk of leptospirosis (Tiwari, 2008).

Hepatitis A (HA) virus is the most frequently occurring vaccine-preventable disease. Although generally self limiting, acute hepatitis A is associated with substantial morbidity and related economic burden. Few studies reported an increased HAV antibody titer among sewage workers, whereas other studies suggest that workers in the solid waste industry may only theoretically be at an increased risk of acquiring infectious diseases occupationally.

An increased risk for gastric cancer among sewage workers has been described in several studies. During the last decade, the bacterium Helicobacter pylori has emerged as one important risk factor for gastric cancer and is now considered a Class-I Carcinogen by the International Agency for Research on Cancer. Similarly, Dermatitis is a non-infective disease. It results from irritation to mineral oil and tar. An outbreak of cases of airborne irritant contact dermatitis has been reported among incinerator workers employed in a sewage treatment facility.

Conclusion:

The civic workers have different types depending on the nature of work and mainly they include manual scavengers, sanitary workers, garbage cleaners, road sweepers, etc. Of course, manual scavenging is banned by law in 1993, still there is manual scavenging at different parts of country. Still, the estimates shows that, there are 1.3 million manual scavengers are working and they are members of lower castes and as such, face enormous discrimination in society and are disadvantaged because they are manual scavengers who clean human excreta. The challenge of rehabilitation is urgent, and requires a comprehensive approach that moves beyond expanding income generation or providing loans, to focus on various aspects crucial to secure the future of the next generation of liberated manual scavengers.

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