



Occupational Health and Safety with Special Reference to Textile Industry

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ABSTRACT

This study examines the perspective of Occupational Health and Safety (OHS) in textile industries in Gujarat state of India. The concept of occupational Health and Safety in developing countries is limited and diseases and accidents at work remain one of the most appalling tragedies of the modern industrial age therefore the incidence of occupational diseases and injuries is high. No sufficient data about OHS are available in India because the majority of accidents are not reported to the Labour Department. India also has poor occupational safety and health legislation and infrastructure. The health and safety measures prescribed in most of the laws have not kept pace with the rapidly changing the biggest enterprises with the largest employed rate in India. Keeping in view the present study has been undertaken. The sample was consisted of six randomly selected textile units from the of the Gujarat State, India.

KEYWORDS:

The results showed that awareness regarding OHS measure is poor among workers as compared to the managers. The workers frequently suffered from various diseases such as itching, headache and respiratory problem. The available general facilities were satisfactory while technical facilities were inadequate. Most of the respondents did not receive any training for using technical facilities and where not familiar with procedure to be followed during emergencies. The workers were not satisfied by the available medical and hygiene facilities. The information level about the injurious chemical and their harmful effect was insufficient among workers. The control measures were available but were inadequate in majority of the enterprises. It is suggested that a complete training and awareness programme including legal and medical protection issues.

OHS AT A GLANCE

The workers health status in every country has an immediate and direct impact on the national economy. In textile mills exposure of workers to cotton dust causes serious health problems. After years of working in this environment, cotton workers can get a serious disease of lungs which is known as Byssinosis and brown lung disease. Saleema et al. (2007) Respiratory diseases associated with exposure to textile dust were first recognized amongst flax and hemp workers by Ramazzini in 1705. Demaret et al (2004) presented the facts in his article on the worker's Memorial Day 2004, that more people are killed during the work than wars. Each year about 270 million accidents are recorded out of which 350,000 are fatal. In developing countries just like India, the OHS situation is even graver because of many factors such as inadequate medical facilities and their illiterate workforce. There is a lack of reliable data on occupational accidents, deaths and injuries. Total economic losses due to occupational illnesses and injuries are enormous (Hogstedt and Pieris, 2000).

In India, as the majority of accidents are not reported to the Labor Department so there is no data available about occupational health and safety (OHS). Diseases and accidents are dreadful tragedy in the work place. As thousands of workers are routinely exposed to hazardous chemicals, therefore the incidence of occupational diseases and injuries are very high in India. The healthy workers are most productive and useful. The high accident rates, occupational diseases, and unhealthy working environments are the outcome of the introduction of hazards technologies in industry. Majority of workforce is illiterate and not familiar with the protective measures which should be adopted during their jobs. Most of the workforce is not prepared to cope with the hazards posed by manufacturing and industrial processes. The legislation regarding occupational health and safety is obsolete and needs revision. The country lacks the basic infrastructure and qualified personal for giving occupational health and safety services to the labor force. Therefore, a huge number of workers will be at risk if no future attempts are made to improve OH&S.

The rapid rate of changes in working life will also required increasing flexibility with the consideration of occupational health, hygiene, and

safety requirements at different workplaces (Leamon, 2001).

In the textile industry employees suffer from many diseases of eye, nose, ear, skin and throat. In printing and finishing departments the workers skin is effected by the chemicals used. The workers inhale cotton dust in the carding/winding section, through the ears, mouth and nose, causing different harmful diseases like lung cancer, skin and eye allergies. The yarn dust disperses in the air in the weaving section which affects the workers health and they suffer in different health problems. In mercerizing, folding, bleaching, warping and calendaring sections, the workers suffer from various psychological and physical diseases. For instance, in the folding and warping section, accidents occur because of the slippery floors, and the pressure of time. Often such accidents result in the permanently disability of the workforce. In many industries the workplaces of units don't meet the required standards as described in the factory act.

The use of proper lighting system is very essential in stitching units. This will better prevent our workforce against many eye diseases. Workplace environment are so unhealthy as a result workers suffer from allergies and skin diseases and rashes. The ventilation system of the stitching units of textile factories is creating many respiratory problems and diseases among the workers (Rana, 2005).

World Health Organization (WHO) contributes an idea that the workplace can be place where accidents & diseases are prevented and health is protected. Furthermore, workplace is capable of providing a surrounding for improvement or formation of good health. Healthy workers are industrious and lift up healthy families. Healthy worker plays a vital role to overcome poverty. The safe environments of workplaces contribute to develop sustainable development in country.

The use of chemicals in manufacturing and industrial processes has expanded considerably in recent years in both the industrialized and the developing countries. Massive occupational and environmental problems are faced resulting from the production and use, storage, transport, handling and disposal of chemicals. Currently, there are more than eight million known chemicals. About 100,000 chemicals are in chemicals enter the market every year (Hubner, 1999).

Health promotion is an essential part of the occupational health professional's mandate. Physicians, nurses, safety officers and health educators they will play different roles in workplace health promotion and should be trained accordingly e.g. the role of the occupational health nurse is to educate, screen and counsel workers, whereas that of an occupational hygienist is to assess the control of health hazards while keeping in touch with the development and progress of health promotion programs.

The term "enterprise safety managers" is not familiar in India. Only multinational companies have their own full time safety

managers, other is working without any safety manager. At present, the concept of workers' safety or human safety is virtually non-existent in this country. Nearly all of the safety personnel who are working in the so-called safety, health and environment departments are mainly concerned with the protection of site machines, in other words they are interested in the protection from economic loss rather than human loss (Pasha, 2003).

THEORETICAL ASPECTS OF STUDY FINDINGS

According to Karl Marx the capital is the social relationship between the buyers and sellers of labour power. The capitalist system is the social structure that emerges on the basis of that relationship. As an independent structure, capital (through the actors who operate in its behalf the bourgeoisie) exploits the workers, who were and are responsible for its creation. India, like many developing countries is undergoing a transitional phase in its economy. Globalization of world trade is bringing latest challenging in the field of OHS. The state owned enterprises and monopolies are being privatized. The object of industry owners was money making and workers were seen as a dispensable resource. The work place setting is the first line of protection for worker health and safety. Occupational health is no longer a risky mania, but rather a supervised and controlled part of any successful organization.

The research finding show that the all accidents cannot prevented and also cannot stopped the occupational illness but with the effective role of management the effect of these illness and accidents should be minimize. When a health matter develops, moreover as a result of illness or accident, the worker is covered by a health plan that is portion of the overall health care organization. These selected health care providers do further than just provide medical insurance, but are aware of the health and safety conditions of the owner as well as the worker. Careful follow up and record keeping of each health situation can offers ideas for improving the environment for others. Herzberg and McGregor, approaches are play an important role to maintain a good OHS situation in our industries. The work place surroundings are the initial line of protection for worker health and

safety. Regular supervision and auditing of the safety environments of the workplace is important. This supervision includes the individual member of staff. A health record can be kept on the employee as part of their other employment records. This procedure begins with a physical assessment suitable to the type of work that is going to be performed. It would be followed up by regular safety meetings stressing health linked matters such as safety gear and proper lifting systems.

CONCLUSION:

The key objectives of the research were to observe the factors effective OHS in textile sector. For this purpose a framework prepared which was based on the literature reviewed. This framework consisted of dependant, independent and background variables. The occupational health and safety deal as a dependent variable. The study found that there were different issues, which create hurdle to achieve an effective OHS system in textile industry. The study was conducted in State Gujarat.

At management level the occupational health and safety awareness was not very high. In spite of awareness the implementation of OHS services was poor. Majority of the industries had not adequate numbers of competent personals that carry out the OHS responsibilities. The formal audit and self inspection system was not effective in majority of enterprises. The available medical facilities on site were poor. Further more no vaccination plans and medical camps conducted in the majority of enterprises. The majority of the management did not recognize the significance of discussion to the workers at the policy making level.

At the workers level they were not aware about the significance of occupational health and safety. Chemical safety and physical hazards are frequently encountered in the industries. Further more the workers were not aware their legal rights. Workers were not entitled to any social security benefits, nor do they have any access to insurance or industrial compensation schemes. There was the shortage of technical facilities such as air checking and biological monitoring.

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