



A STUDY ON CLEANLINESS AND IT`S CONDITION IN PLANTATIONS OF KODAGU DISTRICT

Mr. Lokesh Bharani M N*

Research Scholar, Department Of Studies In Social Work, Manasagangothri, University Of Mysore, Mysuru. *Corresponding Author

Prof. R. Shivappa

Associate Professor And The Chairman, Department of Studies In Social Work, Manasagangothri, University Of Mysore, Mysuru.

ABSTRACT

Mahatma Gandhi was first person in India who emphasized on cleanliness and sanitation as an integral part of living. He was aware of the pathetic situation of Indian rural people at that time and he dreamt of a clean India. The present paper tries to examine the condition of hygiene and sanitation in plantations of Kodagu District, Karnataka. Facilities provided to maintain hygiene, importance given to sanitation, level of cleanliness, labourers' self-hygiene and general awareness and perception about cleanliness have been taken into account while arriving at the findings of the study. From the study, it is found that the labourers are educationally lagging behind, hygiene and sanitation facilities are not adequate. And it leads them to suffer from a number of health problems. Primary data is collected for the study, an interview schedule was the tool used to collect the primary data. Four plantations have been surveyed by Random Sampling Method. Secondary information has also been collected from different sources.

KEYWORDS : Swach Bharath, Cleanliness, Hygiene and Sanitation.

INTRODUCTION

"Cleanliness is next to Godliness".

"Sanitation is more important than Independence".

~ Mahatma Gandhi

Mahatma Gandhi was first person in India who emphasized on cleanliness and sanitation as an integral part of living. He was aware of the pathetic situation of Indian rural people at that time and he dreamt of a clean India. Unfortunately, India is still remained as a joke regarding to toilets. To change this picture, Indian government started a campaign in 2nd October 2014.

Sanitation and neatness play an important role in everybody's life. It is important as it prevents dangerous diseases like Dengue, typhoid, hepatitis, and other diseases caused by mosquito bite, etc. Diseases like Jaundice, Cholera, Ascariasis, Leptospirosis, Ringworm, Scabies, Schistosomiasis, Trachoma, etc. can be spread due to eating contaminated food, drinking contaminated water or living in an unhygienic condition.

Plantation industry in Karnataka has a significant role in providing major employment sources to the people including tribal living in hill areas. Coffee, Tea, Pepper, Cardamom, and Rubber Plantation are the Major Plantation Crops of Kodagu district.

Plantation worker means a person employed in a plantation for hire or reward, whether directly or through any agency, to do any work, skilled, unskilled, manual or clerical, having wages less than Rs. 750/- p.m., but does not include – medical officer, managerial staff and temporary workers employed in any work relating to construction, repair, maintenance of roads, bridge, etc. Plantations constitute the most labour enterprise in comparison with general agriculture and manufacturing industries.

The present study tries to find out the condition of hygiene and sanitation in plantations of Kodagu District, Karnataka. Facilities provided to maintain hygiene, importance given to sanitation, level of cleanliness, labourers' self-hygiene and general awareness and perception about cleanliness have been given importance in the study.

OBJECTIVES

The objectives of the study are as follows:

- To find out the clean and sanitary condition in the

plantations.

- To find out the level of awareness in labourers about cleanliness.
- To know about self-hygiene of labourers.
- To suggest measures for cleanliness in plantation.

METHODOLOGY

The study is conducted with the help of an interview schedule prepared with the questions on housing conditions, latrines and urinals available to the workers, source of drinking water, health problems of the workers, and so on.

Total 144 workers from four different plantations were selected for the study by using Random Sampling Method. Other required information has also been collected by interacting with field officials, supervisors and the plantations' management.

Secondary data on the subject has been collected from books, journals and the Internet.

The collected data has been analyzed and to interpret the findings of the study, appropriate statistical methods and techniques are used.

ANALYSIS AND DISCUSSION

The status of health and hygiene of plantation workers are depended by the social and economic facilities available to them, such as wages, housing facilities, etc., by the health facilities available in the plantations, etc.

Educational qualification

	Illiterate	Primary	High school	PUC	Total
Male	29 38.15	29 38.15	18 23.68	-- 00	76
Female	40 58.82	19 27.94	08 11.76	1 1.47	68
Total	69 47.91	48 33.33	26 18.05	1 0.69	144

Source: Primary Survey, 2017

Most of the workers of plantations are not highly educated, many of them are illiterate. It is seen that the male workers are comparatively more educated than the woman workers.

Nature of work: More than half of the respondents from the surveyed plantations are permanent workers. Both permanent and temporary workers are regular workers. In the time of harvesting, workers, for coffee plucking, will be supplied from

various arrangements, they stay for three to four months, pick coffee and pepper and go back. They are not included in the study.

The surveyed workers are engaged in various types of work, as manuring, pruning, pesticide spraying, weeding, scuffing, swabbing, etc.

Income: The surveyed temporary and permanent workers earn Rs. 316/- per day, female workers have the same wage. Permanent employees will be given the wages for 12 government holidays; temporary employees will be given for 5 government holidays. Annually, in the month of April, it will be given with bonus.

Housing: The permanent employees are provided with quarters which are generally called as line houses. 20 temporary employees stay in line houses, rest stay outside for rent house or own house.

These line houses are tile houses with cement flooring, separate kitchen. Water and electricity are connected with the houses. Bore well is the source of drinking water.

Health facilities: Readily available medical and emergency services help in giving prompt medicine and treatment to the workers. All the four surveyed plantations have no hospital inside the plantations. All sick workers are dependent to the nearby government hospitals. When the workers of the surveyed plantations fall sick, they usually visit the doctors and pharmacists available in nearby hospitals. And the workers use to visit traditional doctors who prescribe traditional medicine. In the time of any emergency health issues, workers will be provided vehicle facilities in night time to reach nearby hospitals.

Sanitation facilities: For every two houses there will be only one toilet room (pit latrines) and one bath room, people of the both houses share the same common toilet and bath room. Responsibility of cleaning and maintaining the toilet rooms is not taken by the planter. All the 144(100%) workers use toilet rooms. Open defecation is not in practice.

Drainage system in the labour lines is poor and sullage water pass out of the houses through narrow drains cut in the ground in all four plantations. Overflow of water into the nearby areas creates breeding grounds for mosquitoes and germs.

Hygiene: Hygiene influences the health of a population. The surveyed respondents (100%) brush their teeth daily. They use tooth brushes (100%). Using of twigs of trees to brush their teeth was in practice decades before, not now. Around 20 per cent of the male workers of the plantations smoke and/or chew tobacco while 30 per cent surveyed female worker chew either betel or tobacco which is injurious to health.

They (100%) wash their face daily, have bath daily at evening. They (100%) can afford to use soap regularly for washing purpose. More than 60 per cent of the workers drink boiled water to ward off water-borne diseases.

Suggestions

Some suggestions for improving the conditions of cleanliness and hygiene of the plantation workers as stated below:

- Income of both permanent and temporary workers should be increased so that they can lead comfortable and hygienic lifestyles and invest more in health and education.
- Separate latrine and bath room for each house should be provided.
- Drainage system should be improved.
- The workers should be made aware of the importance of the health benefits of drinking safe drinking water, of using mosquito nets while sleeping, of keeping their

surroundings clean and free from dirt and stagnant water.

- Spraying and fumigating the residential areas with insecticide from time to time will reduce the number of mosquitoes and flies.
- The plantations workers' health should be promoted by providing information and making them aware of health issues and encouraging them to make physiological, mental and social choices that improve their health.
- Health awareness camps and facilities for periodic health check up of the employees should be provided.

CONCLUSION

The study has revealed that the workers have a long way to go to achieve complete hygiene and cleanliness.

Providing economic benefits will help in boosting the morale of the workers thereby improving their health and hygienic conditions.

The present health status of the gardens can be improved through better hygienic practices, environmental sanitation, creating health awareness and nutritional intervention and overall improvement of socio-economic conditions of the population.

Under the Plantation Labour Act, 1951, employers are required to provide housing, latrines, drinking water, and free medical treatment to the workers. Although some of the above benefits are available to the workers of the two surveyed tea estates, some of them are not applicable in the case of temporary workers who constitute a considerable proportion in the surveyed plantations. The planters have to be more sensitive to the health and hygienic needs of the workers so that there is an overall improvement in health, thereby achieving the objects of the Swach Bharath to the greatest possible extent.

REFERENCES

1. Baroowah, G. P., 2006: The Legend, Life and Livelihood of India, Guwahati, india, LBS Publications, 75-77.
2. Bhadra, R. K., 1997: Social Dimensions of Health of Tea Plantation Workers in India, Dibrugarh, India, N.L. Publishers, 84-97.
3. ILO/WHO, 1995: Occupational safety and Health.
4. Willam Clowes and Sons, 2-21. IGNOU, 2009: Human Resource Management MPA-014, New Delhi, India : Berry Art Press, 283-288.