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Sociology

STATUS OF SANITARY WORKERS IN NALLAGOUNDAMPATTY VILLAGE PANCHAYAT IN OMALUR TALUK OF SALEM DISTRICT IN TAMIL NADU: A CASE STUDY ANALYSIS

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Sanitation is one of the essential aspects of everyone's life. Sanitation ensures the people to stay healthy and happy. Similarly sanitation is also ensuring one aspects of quality life of the people. In order to provide good sanitation the central and state governments are allocating huge amount of money in their budget. For providing adequate sanitation facility to the people the government appoints the sanitary workers in every village, town, city and corporation. Because of their important role during COVID-19 pandemic, they are treated as front line workers like doctors, nurses and other medical personnel. The present paper aims to understand the status of sanitary workers in Nallagoundampatty village panchayat in Omalur taluk. The results show that the sanitary workers are getting poor reputation from the people in general.

KEYWORDS: Sanitary work, Public Perception and Cleanliness

Introduction

Sanitation workers serve a vital role in every society. They are doing wonderful job by cleaning their allotted places and by doing these type activities they are helping the entire nation to be clean and neat. Through their activities they are not clean the entire nation but their activities also able to control various diseases and illness. Their work include garbage collecting sewer cleaning, drainage cleaning, faecal sludge handling, public toilet cleaning, latrine cleaning, school toilet cleaning, railway track cleaning, sewage treatment plant work and domestic work. The sanitary workers face many difficulties during work because of various factors that creates severe psychological and health issues because of their unhygienic working environment. The working conditions of the sanitary workers have remained virtually unchanged for over a century. Using only a stick broom and a small tin plate, the sanitary workers clear all the waste materials from public places or other containers, which they then carry and dispose in the dumping grounds and disposal sites. A few, however, are provided with wheelbarrows or carts by the municipal authorities. Apart from the social atrocities that these workers face, they are also exposed to certain health problems by virtue of their occupation. These health hazards include exposure to harmful gases, cardiovascular degeneration, musculoskeletal disorders, infections, skin problems and respiratory system problems.

Meena and Priyanka (2020) mentioned that the sanitary workers in the corporate area are sweeping the street and cleaning the drains and they are exposed to infectious diseases and hazardous chemicals and sharp objects while working. At the same time the sanitary workers have no recognition in the society and their livelihood is very backward.

Rajavel (2015) found that majority of the respondents don't have knowledge about schemes of sanitary workers and they don't know about sanitary workers policy. Exactly three-fifth of the respondents (60%) are facing discrimination based on gender and around two-third of the respondents (67%) are having skin diseases.

Rayen and Nisee (2017) stated that majority of the permanent sanitary workers (76.3 %) and 58.1 per cent of the temporary sanitary workers strongly agree that they have provided instruments facilities for doing their work.

In India, for the past eight or nine years sanitation has been a key focus area of the government. For the sanitation and its related work, the government has been spent several thousand crores rupees. The present study is going to analyses about the status of the respondents, to find out the health conditions of sanitary workers in their village life and also to understand the challenges facing in their work.

Methods

The universe of the study is people who are all working in sanitary workers, in Nallangoundampatti village panchayat, in this study the researchers have chosen five respondents as it's the nature of the case study. This study aims to bring out the details of financial status of the respondents, to find out the status of sanitary workers in their village life and also to understand the challenges facing in their work.

Nallagoundampatti is a Village panchayt in Omalur Block in Salem District of Tamil Nadu State, India. It is located 16 KM towards west from District headquarters Salem and 326 KM from State capital Chennai. Nallagoundampatti is surrounded by Salem Block towards East, Taramangalam Block towards west, Kadaiyampatty Block towards North and Mecheri Block towards west. Nallagoundampatti village panchayat consist of seven village hamlets namely Old Nallagoundampatti, pudu nallagoundampatti, Ad colony, Govindan kattu valavu, Meganna goundar valavu, Muniappan koil vattam and Pachiyannan goundar valavu.

RESULTS

Case Study: 1

The respondent name is Sumathi (Name Changed) with 40 years old and and working as a sanitary worker in Nallangoundampatty village. She has 4 children, all of them studied in Government schools and their name was Priya (23), Sakthi (18), Divya (16) and Kavya (13). Her husband name is Chinna Durai, lived in a nuclear family with 7 members. She has own concrete house but none other land ownership. Before coming to this job, she was a daily worker, afterwards She was a MGNREGA labourer, in that time she got salary of 6,000 rupees per month. Ambika, a social worker of this village, taken the respondent into this job. Though her first month salary was 2,000 rupees and now she is getting 3,600 per month. She has 5 years of experience in this job. Eight months before, her daughter got married. This salary was not much enough for her.

Her main work was the collection of Waste products from every family and she feels uncomfortable with this job. People of this village are not separate (bio degradable, non-bio degradable) their waste materials. In rainy season, it was uneasy to handle those materials. It feels very worst condition. She has been working upto 1 pm for everyday and she attended all meeting related to sanitation. In COVID pandemic, she hasn't affected and she injected 2 vaccinations in the Nallangoundampatty government school. In the pandemic situation, she has some unhealthy conditions (blood vomit) due to spreading of the bleaching powder in this village. She went to the Kannan private hospital, Omalur. She admitted for one day and spends 1000 rupees.

Case Study: 2

The name of the respondent is Mrs. Suriya (Name Changed) with 35 years of old and she is working as sanitary worker in Nallangoundampatty village. She is living in nuclear family. Her husband name is Mahendran with the age of 40 and they have 3 children named as Pratap (19), Sowmiya (17), Gokul Prasath (14). Her husband is going for daily wage worker. All of them studied at Nallangoundampatty Government school. Pratap is studying in Government school. If she had any health issues, they had been visited the Muthunayakampatty private hospital.

During the COVID – 19 pandemics she presented all the day and she put the bleaching powder in all houses. Due to that, she was suffering from ulcer and she visited hospital and got treatment doctor provided tablets for 10 days and glucose. No support from government and village side to all sanitary workers. She had own house and no land. Before she entered into this job she was worked as MGNREGA laborer. At that time, she got 6,000 rupees as salary and her first month of salary was 2,500. Now she was currently got 3,600 rupees. Totally her family earned 65,000 rupees per annum. Recently, she got 500 rupees with sweet for Diwali bonus given by village president. She lived in a good family with unwanted words due to this job. She has not affected any other diseases and she vaccinated 2 injections. She worked for 1 pm every day after she done all her household works. She attended all meeting and got some tea and snacks. She and Mrs. Sambu separate the waste materials into bio degradable and non-bio degradable things. Degradable things were either composting or fired and those plastic materials were sent to other places for recycling process. She hated her job but still she continues.

Case Study: 3

The respondent name is Mrs.Indira (Name Changed), 50 years of old. She is an illiterate and she is a sanitation worker and she is a 2nd person of this sanitation work. She is working for past 10 years of her experience. She have savings bank account in SBI. She has no land and she has own house. She is living in the moulding house (15 years before) with 6 members in their family and she has two children named as Balamurugan (38), Navamani (37). Both of them studied only 12th standard in government school. Her husband name is Mr. Maaran with an age of 55 and he is working an electrician.

They are living in a joint family and her first son is working in courier job and he got married. She is attending all the meeting conducted by panchayat union. She vaccinated with two injections. She is cleaning the drainages in this village till 1 pm. At some time from morning 6 am to 2 pm she is doing sanitation work. At the time of pandemic, gloves, mask, hand sanitizer, coats and some other handling instruments were provided. She feels uncomfortable with her job and also she says that others are respecting her. At the time of rainy season difficult to bring the waste materials. Her first month salary was 2,000 rupees with two sarees, now she is getting 4,380 rupees per month. She got Diwali bonus with some sweets and she attend all the meetings. She done all the works given by village panchayat. She doesn't get any infections due to this work but she has some hand, hip and back pains. She is taking medicine in Muthunayakampatty hospital. She has debt of 10,000 rupees.

Case Study: 4

The respondent name is Mrs.Ramani (Name Changed) with 57 years of old. She is living in new colony of Nallangoundampatty village. She is working as a sanitation worker in Nallangoundampatty village. She is living in nuclear family with a tiled house and she had two sons named Raja (35), Ramachandran (32). Her husband name is Mr. Kovindhraj (60), he is suffering from wound on his leg because of dog bites him. Her first son studied upto 10th standard and her second son studied upto 9th standard.

She attended all meetings and she was not comfortable with her job. Though she was affected by COVID pandemic diseases she was admitted in Karuppur government hospital. Before knowing about the virus she was unaware about the disease, at first she checked in private hospital. For this she spent Rs. 10,000 and nobody take care of her at that time. She was literally affected mentally and physically. She had a debt of 2,00,000 rupees.

Later she got 2 vaccinations in Nallangoundampatty government school. She has a 10 years of experience and she has got coat, gloves, mask, cap, hand sanitizer and other things. Initially, she got 2,500 rupees now she is getting 3,600 rupees per month by account (SBI). She also got bonus with some sweets from president during Diwali festival. She is suffering from low blood pressure, cold and fever due to this work. She have a small throat stone so she is going to have a surgery in later days. She really feels the inseparable waste materials giving by families in this village. She has been either working for 8am to 2 pm or 6 am to 3 pm.

Case Study: 5

The name of the respondent is Mrs.Vasugi (Name Changed) with an age of 47 years old. She is an illiterate person and working as a sanitation worker in Nallangoundampatty village. She is living in

nuclear family with a moulding house (difficult to live). She has no other land facilities, only she have own house. Her husband name is Mr. Durai (52) and they have 3 children named as Divya (33), Dinesh (31), Vinoth (29). All of then studied at Nallangoundampatty village and those children completed only SSLC. She and her husband lived in a separate house. She vaccinated only one injection. She visits hospital at Muthunayakampatti private hospital for her illness.

Before she entered into this job, she worked in garment exporting company. But the bus travel was difficult to her. For this reason, she quit the job. Along with the sanitation work, she was buying waste materials and separated all the materials and she deposited in the place of graveyard in Nallagoundampatty village. She has taken leave for 1 and half years for her son's marriage. Her first month of the salary was Rs. 2,000, now she was getting Rs. 3,600 and she got Diwali bonus of Rs. 500. She has been working all the day upto 1pm. She is used to attend all the meetings and at the pandemic period 2 coats, mask and gloves were provided by the government. She got some infections on both legs due to cleaning activities. Now and she is suffering by fever. She took medicine in Muthunayakampatty private hospital. She got some medicines for 3 days, ointment and syrup.

CONCLUSION

In this study about 6 respondents from Nallangoundampatti panchayat village were interviewed and the researcher found that 75 percentage of the people chosen their profession on their own interest. Majority of the problems were highly difficult and it is curable. All the respondents were married. Similarly all the respondents were in financial debt. Majority of the respondents get very good support from their families and they have freedom to demand and opinion. Every sanitation worker faces very high rate of sterns. Both the men and women workers face same rate of sterns. They do not get sufficient leaves. Sometimes the public mistreat to the workers. The situation of the sanitation workers changed to a great extent but still they face some problems.

SUGGESTIONS

- 1. The government should provide promotion to the sanitary workers based on their experience.
- 2. The supporting mechanisms should be worked out more efficiently. More such mechanisms for improving their mental and physical health should be introduced by Governmental plans.
- 3. The government should consider them as a government employee.
- 4. They should be given proper training for continuing sterns and managing dual role efficiency.
- 5. They should have more freedom on their work place.

LIMITATIONS OF THE STUDY

The findings and conclusion of the present research are based on the five case histories of the sanitary workers and that too from Nallagoundampatty village panchayat. In order to generalize the findings and conclusion of the present study and that should be based on the number samples which would represent from larger geographical area.

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