Women Workers in Rural Areas of Meerut district, Uttar Pradesh: Gender Discrimination, Working Conditions and Health

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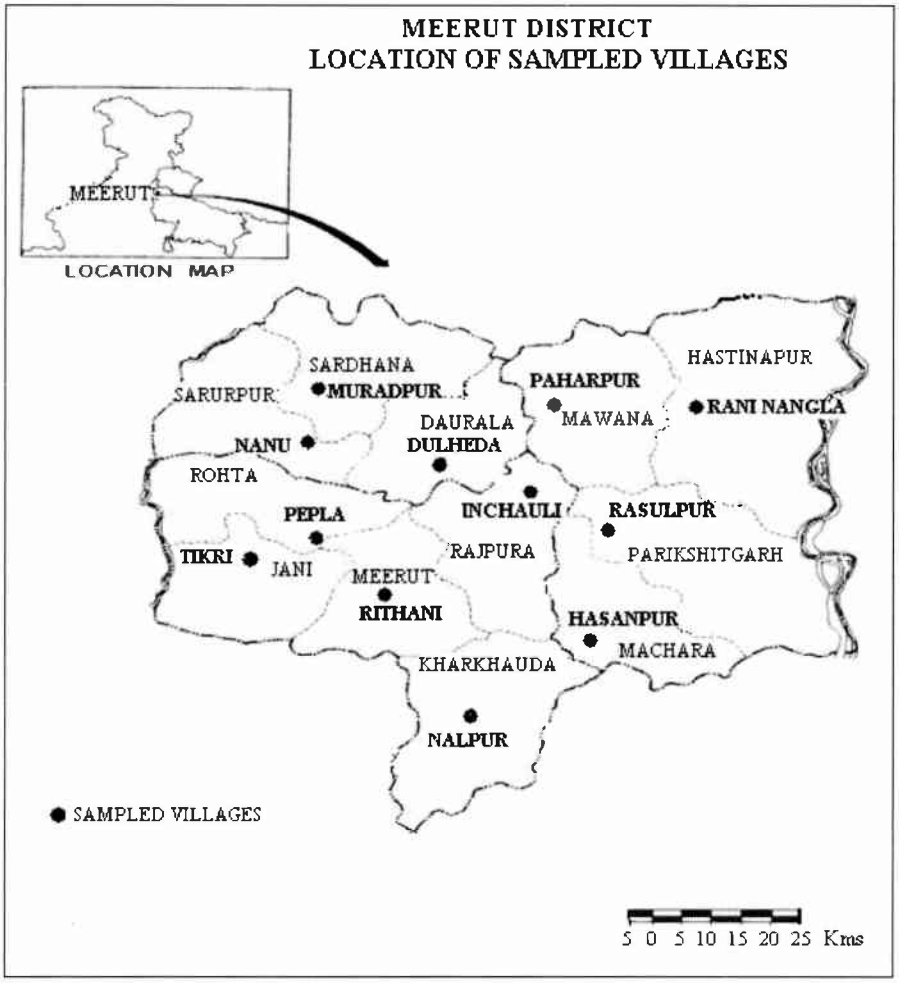
Abstract

The present study aims to analyze the gender sensitivity in the status of women workers, working conditions and health in the rural areas of Meerut district of Uttar Pradesh. Meerut district has been chosen as the study area because it is one of the agriculturally advanced district of Uttar Pradesh. The study is based on the primary data collected through field work of 300 rural women workers with the help of questionnaire. The results reveal that in spite of various schemes promulgated by Government to uplift the socio-economic status of women, the situation remains the same. Most of the women workers under study belonged to depressed scheduled and backward castes and suffered from a double discrimination both being women and belonging to oppressed castes. They are living under abject poverty and subhuman conditions which made them vulnerable to economic exploitation. They do not have proper houses to live in. They lack the basic facilities of pure drinking water, sanitation and health care facilities. They are paid less wages than prescribed by the rules and have to work for long hours. Their husbands do not help in their household chores and instead often they take away their hard-earned wages for liquor consumption and gambling. The health of sampled women workers is at constant risk due to living in unhygienic home environment and is further harmed by occupational hazards. In the light of gender sensitive analysis, the study suggested the measures for the improvement of women worker's status in the study area.

Keywords: Gender Discrimination, Gender sensitive analysis, Socio-economic status, Health, Wages, Meerut District, Uttar Pradesh.

Introduction

Women constitute almost half of the population of India. Around 81 per cent of the total women population of the country lives in rural areas and out of 31 million women workforce of the country about 20 million live in rural areas. The status of women is closely related to the economic position which in turn depends upon their access to productive resources and opportunities for participation in economic activities. By choice or of necessity, women have assumed increasingly roles in household, national and international economies (Rothboock, S et al, 2001) but the reality of women's lives remains invisible to men and women alike and this invisibility persists at all levels beginning with the family to the nation (Swayam, 2011, Sharma, P, 2006). Of the total women work force, over 90 per cent work in the unorganized sector. More than two-thirds of the population of India is dependent on agriculture. Though Green Revolution technologies enhanced agricultural productivity, they also widened economic disparities and deepened gender discrimination in community life (Thresia, C.U, 2004). The introduction of capital intensive technologies in the agricultural sector has had differential impact on



men and women and women have been adversely affected due to lack of access to technology.

The women work participation rate has increased overall from 19.7 per cent in 1981 to 25.6 per cent in 2011(Census of India, 2011).This participation, however, has been largely distress induced and has compelled women to take up jobs which offer very poor wages and no social security (Padma, 2004). Although most women in India work and contribute to the economy in one form or another, much of their work is not documented or accounted for in official statistics. Women plough fields and harvest crops while working on farms; women weave and make handicrafts while working in household industries; women sell food and gather wood while working in the informal sector. Apart from this their contribution is in no way lesser in forestry and construction (Singh A.L and Sajjad, H, 1998). Additionally, women are traditionally responsible for the daily household chores

(e.g., cooking, fetching water, and looking after children). Still sprawling inequalities persist in their access to education, health care, physical and financial resources and opportunities in the political, economic, social and cultural spheres. Their plight by and large is pathetic (Satnam, K, 1991). The health of women workers today is at constant risk due to unhygienic environment at work place, unsafe home surroundings and living conditions, unsafe drinking water, lack of sanitation, fuel wood shortages, environmental degradation and mechanization of agriculture (Sajjad, H and Singh, A.L, 2008).

India's economy has witnessed substantial transformations since the country's independence but till now the conditions of rural women workers have not been upgraded on a scale they deserve. The Constitution of India guarantees equality of sexes and grants special favors to women and this can be found in Article 14, Article 15 and Article 42 (Vyas, Girija, 2011).The Government of India promulgated various schemes in order to raise the socio-economic status of women but the situation remains the same. The basic objective of the study was to examine the gender inequalities in socio-economic and health status.

Materials and Methods

The study was conducted in one of the agriculturally advanced districts of Western Uttar Pradesh, Meerut district. The district forms a part of Upper Ganga Yamuna *Doab* (Inter-riverine plain) and spreads from 28^0 54' to 29^0 15' north latitudes and 77^0 78' longitudes. The total population of the district is nearly 3.4 million. The women population is 1.6 million. The district has recorded a population growth of 15.9 per cent during 2001-2011(Census of India, 2001, 2011). The district has 25.4 per cent main workers. Of the total main workers, 24.9 per cent are cultivators, 9.0 per cent are agricultural labourers, 4.4 per cent are household industry workers and 61.7 per cent are other workers (engaged in livestock, forestry, fishing, hunting, plantation of orchards, mining and quarrying, etc). The schedule caste and schedule tribe population is 18.4 per cent. The sex ratio in the district is 885. The literacy rate is 74.8 per cent. The literacy rate among women (65.69 per cent) is lower than the male literacy rate (83.0 per cent). The average family size in the district is 6.5. The size of family is large in the rural areas (District Census Hand Book, Meerut, 2010). Agriculture is the mainstay of the economy of the district where more than 75.0 per cent population is directly or indirectly dependent upon agriculture.

The data for the study was collected through field work with the help of questionnaire during 2010-11. Meerut district is divided into 12 blocks. From every block, 1 village was selected randomly (Fig.1). From each selected village, 10 households of women workers were sampled. So the study is based on 120 households of rural women workers. Sufficient care was taken to get the relevant information regarding their status and the assurance was given to the respondents that their names will not be disclosed. A questionnaire was designed in a manner that it was communicable to the respondents. The author has also held discussion with men workers, head of the households and Government officials. The secondary data was collected from Census of India, District Census Handbook, Panchayat office, Primary Health Center, etc.

Discussion

Most of the rural women workers belong to the landless class and the poorest in India belong to landless labourer's category. Their main source of employment is wage labour. Their poverty in their households force them to take up hazardous occupations at lower wage rates. The rural women are adversely affected by poverty as compared to men. They are discriminated on both the grounds-being poor and being a woman while strategies and programmes for development had largely overlooked the question of gender equity. Projects aiming to reduce poverty view the poor rural women as the recipient of benefits of development, instead of active participant and still poor rural women have the least access to basic needs such as food, health and education. Of the total 120 sampled households, there were 300 women workers. Of the total sampled rural women workers, 155 women workers belonged to Scheduled castes, 92 women workers were from other backward castes and 53 women workers belonged to upper castes. Caste discrimination in the socio-cultural life in the village is not yet been completely wiped out. Even today, Upper caste Hindus and the OBCs would not eat food cooked in SC families. Lower caste people are addressed by their caste names. The lower social status of SCs in terms of land ownership, education, employment, and living standards still continues and acts as barrier to social upward mobility. Most of them still lead lives mired in poverty and illiteracy and poor health (Thresia, C.U, 2004).

Social status of rural women workers

Data regarding various aspects of the social status like age-wise distribution, marital status, caste-wise distribution, family size, education, housing conditions, food consumption, drinking water condition, occupational and environmental health problems and health care facilities were collected through field surveys and discussed.

Age-wise distribution of the sampled rural women workers shows that 68.0 per cent women workers belonged to the age-groups ranging between 14 and 43 years. This analysis shows that most of the women workers were in the active age- groups. It further shows that the women work from an early age just to supplement the meager income of the family. This work hampers their personality and deprives them from education and leaves little opportunities for free physical growth and mind. It is disheartening to note that even the elderly women are also working in different sectors (Table 1, 1). Personal investigations reveal that the large number of the dependents in the family and hence deprivation compels them to work for their subsistence. The distribution of women workers of different age groups among the different castes shows that the percentage of young women in the age group of 14-23 years was higher among the SCs (30.3 per cent) than the OBCs (22.8 per cent) and upper castes (20.7 per cent). This is due to better status of BCs and upper castes than the SCs and the younger women belonging to other backward castes and upper castes do not work in economic activities before marriage due to some religious factors. Moreover in scheduled caste families the women in the early age-group start to work to supplement their family income.

Most of the sampled women workers (47 Per cent) were unmarried and 45 per cent were married. Only 7 per cent women were

Table 1: Age-Wise Distribution, Marital Status, Family Size and Educational Status of the Sampled Women Workers in Meerut District

1. Age-Wise Distribution

Age-groups	Communities							
	Scheduled Castes N = 155	Rank	Other Backward Castes N = 92	Rank	Upper castes N = 53	Rank	Total N = 300	Rank
	1	2	3	4	5	6	7	8
14-23	47 (30.3)	1	21 (22.8)	2	11 (20.7)	3	79 (26.3)	1
24-33	35 (22.7)	2	27 (29.3)	1	16 (30.1)	1	78 (26.0)	2
34-43	26 (16.8)	3	15 (16.3)	3	06 (11.3)	5	47 (15.7)	3
44-53	19 (12.2)	5	14 (15.2)	4	12 (22.6)	2	45 (15.0)	4
54-63	22 (14.1)	4	13 (14.1)	5	08 (15.3)	4	43 (14.3)	5
64-73	06 (3.9)	6	02 (2.2)	6	-	-	08 (2.7)	6

2. Marital Status

Marital status	1	2	3	4	5	6	7	8
Married	97 (62.6)	1	26 (28.3)	2	12 (22.6)	2	135 (45.0)	2
Unmarried	41 (26.4)	2	61 (66.3)	1	41 (77.4)	1	143 (47.7)	1
Widower	17 (11.0)	3	05 (5.4)	3	-	-	22 (7.3)	3

3. Family Size

Family size	1	2	3	4	5	6	7	8
1-5	58 (37.4)	2	39 (42.4)	2	26 (49.0)	2	123 (41.0)	2
6-10	73 (47.1)	1	53 (57.6)	1	27 (51.0)	1	153 (51.0)	1
11-15	24 (15.5)	3	-		-		24 (8.0)	3

4. Educational Status

Education	1	2	3	4	5	6	7	8
Illiterate	70 (45.1)	1	42 (45.6)	1	19 (35.9)	1	131 (43.7)	1
Primary	28 (18.1)	3	15 (16.3)	3	12 (22.7)	3	55 (18.3)	3
VIII-standard								
High-school	35 (22.6)	2	26 (28.3)	2	18 (33.9)	2	79 (26.3)	2
	22 (14.2)	4	09 (9.8)	4	04 (7.5)	4	35 (11.7)	4

Source: Based on Field Survey (2010-11). Note: Figures in parentheses indicate percentages

divorcee (Table 1, 2). Among scheduled castes, majority of women workers were married. Born in poverty and oppressed by various social constraints, women often look for solace in married life. But, given the patriarchal structure of the family and the society, a married woman become tends to become victim of ill-treatment, violence, and deprivation. Despite the fact that, marriage is supposed to provide women with a sense of security and status which unmarried women do not have, the

majority of married women in our sample (which constitute 45 percent) reported that they have not received emotional or economic support from their spouses or the other male members of their households. Stressful relations in the household between husband and wife have their adverse impact on children. In such households, children do not receive love, care, and they remain neglected. The practice of early marriage of girls is still present among low castes. The average age at the time of marriage was 15 years while most of the backward castes and upper castes women workers were unmarried. Dowry payment has become a universal practice in the village only in recent times. Marriage imposes various covert and overt demands on the bride's family which invariably drown that family in debts. The demands include gold ornaments, money, gifts, dress, kitchen utensils and furniture, the amounts varying according to the economic status of the bride's family. The dowry system has posed a serious problem to the parents, who can not afford rich dowry which haunts and disturbs them day and night. Their pretty daughters who can not take with them rich dowry have to wait for long for marriage and where their eyes lying in utter helplessness fall on their parents they have a strong realization of guilt and they consider themselves to be a burden on them. What a painful situation it is? Two serious threats come to surface because of this evil dowry system. Firstly, the dowry system comes in the way of marriage settlement. Consequently, the good looking young girls because of lack of rich dowry do not get suitable match and become average. Secondly, if some how or the other they get married, they on the pretext of poor dowry are tortured.

The sampled women workers had very large family size. Since they got married at early age so they had more children. Besides, children are considered to be the economic assets in their families. More children mean more helping hands to supplement family's meager income. Most of the sampled women live in joint families. Their families constituted young children, adult but non-working unmarried girls and boys, aged parents and other relatives. Nearly half of the sampled rural women workers had family size constituting 6-10 members. Among different caste groups, the pattern is found to the same (Table 1, 4). Large family size and more number of dependents in the family have compelled them to work in low wage labour market for long hours at the cost of their physical, mental and social development.

Gender disparity in education is influenced by the lack of educational facilities and cultural norms, which hold that girls are only 'born to marry' and therefore, addressing the needs of the women child could be the key to achieving a more equitable status and meaningful role for women in the long run. The educational status of the sampled rural women workers was not encouraging as an overwhelming proportion is illiterate (43.7 per cent) and had not attended school. Another 26.3 per cent women were educated up to VIII standard, nearly 18 per cent were educated up to primary level and were drop outs while only 11 per cent were educated up to high school, but often this is not necessarily indicative of higher levels of literacy. Similar pattern is observed among all the castes (Table 1, 5). Low levels of education in a situation of extremely limited employment opportunities are major constraints on

Table 2: Type of House, Source of Drinking Water, Sanitation, Source of Light and Fuel Used in the Kitchen of the Sampled Rural Women Workers in Meerut District

1. Type of Kitchen

Type of House	Communities							
	Scheduled Castes N = 155	Rank	Other Back-ward Castes N = 92	Rank	Upper Castes N = 53	Rank	Total N = 300	Rank
	1	2	3	4	5	6	7	8
Katcha	93 (60.0)	1	30 (32.6)	2	10 (18.9)	2	133(44.3)	1
Pucca	12 (7.8)	4	17 (18.6)	3	07 (13.2)	3	36 (12.0)	4
Semi-Pucca	23 (14.8)	3	34 (36.9)	1	31 (58.5)	1	88 (29.3)	2
Katcha &Thatched	27 (17.4)	2	11 (11.9)	4	05 (9.4)	4	43 (14.4)	3

2. Source of Drinking Water

Source of drinking water	1	2	3	4	5	6	7	8
Public	141(91.0)	1	51(55.4)	1	37(69.8)	1	229(76.3)	1
Private	14 (9.0)	2	41(44.6)	2	16(30.2)	2	71(23.7)	2

3. Availability of Latrine

Type of latrine	1	2	3	4	5	6	7	8
Pit	29(18.7)	2	51(55.4)	1	22(41.5)	2	102(34.0)	2
Open ground	112(72.3)	1	18(19.6)	3	-		130(43.3)	1
Septic tank	14(9.0)	3	23(25.0)	2	31(58.5)	1	68(22.7)	3

4. Source of Light

Source of light	1	2	3	4	5	6	7	8
Electricity	30(19.3)	2	13(14.1)	2	14(26.4)	2	57(19.0)	2
Kerosene oil	125(80.7)	1	79(85.9)	1	39(73.6)	1	243(81.0)	1

5. Fuel Used in the Kitchen

Fuel used in the kitchen	1	2	3	4	5	6	7	8
L.P.G	06 (3.9)	4	17(18.5)	3	24(45.3)	1	47 (15.7)	4
Kerosene oil	43(27.8)	3	32(34.8)	1	09(17.0)	3	84 (28.0)	2
Wood	45(29.0)	2	13(14.1)	4	-		58 (19.3)	3
Cow dung	61(39.3)	1	30(32.6)	2	20(37.7)	2	111(37.0)	1

Source: Based on Field Survey (2010-11). Note: Figures in parentheses indicate percentages

securing employment in non-agricultural activities, particularly for women. India's constitution guarantees free primary free primary school education for both boys and girls up to 14 years age. This goal has been repeatedly reconfirmed but primary education in India is not universalized (National Commission on Women, 1993).

Living Standards

The sampled rural women workers household's were characterized by unhygienic conditions, inadequate sanitary and drinking water facilities. Proper shelter is prerequisite for healthy life because it enhances the performances of the residents in their domestic and economic conditions.

(Edelman and Mitra, 2006). About 44 per cent of the sampled women workers had *katcha* houses (A *kutcha* structure is one which has both walls and roofs made of materials such as unburnt bricks, bamboo, mud grass, leaves, reeds and or thatch, etc). Only 12.0 per cent women workers were living in the *pucca* houses (A pucca structure is one whose walls and roofs are at least made of materials such as cement , concrete, oven burnt bricks, stone and stone blocks, junk board, titles, timber, galvanized or corrugated iron sheets, asbestos, cement sheets, etc). About 29 per cent women workers were living in the semi-*pucca* houses (A semi-pucca structure is one which could not treated as wholly concrete or wholly muddy) and 14 per cent in *katcha* (muddy house) and thatched houses. All these houses were overcrowded and poor both in terms of structure and ventilation, thus inviting various diseases and infections. A vast majority of scheduled caste women workers had *katcha* houses while most of the backward castes and upper castes were having semi-pucca houses (Table 2, 1). Thus it can be inferred that the scheduled caste women had poor socio-economic status than the backward and upper castes women. An adequate supply of easily accessible, potable water is essential for household's welfare and a prerequisite to good hygiene and sanitation. Inadequate water supply facilities and poor sanitation conditions can have a deleterious impact on household outcomes (Kumar, S. K., et al, 2003).

Data regarding water supply conditions of the sampled women workers is presented in Table 2, 2. It reveals that most of the women workers were using water from government hand pumps and they have to stand in long queues for the irregular and erratic public water supply. The major responsibility of fetching water is on women. Only 23.7 per cent women workers used their own hand pumps for water. The hand pumps which are installed in their houses are generally not bored very deeply with the result the water which is pumped up is not clean; sometimes dirty, muddy water comes out. They do not have proper storage facilities. The water is kept in open buckets or containers sometimes for days. Water storage becomes necessary during the summer months because of scarcity. During the rainy and summer seasons, diarrhea, cholera, typhoid and gastro-enteritis occur and all are caused by the use of contaminated water. Field survey revealed that the sanitation conditions of the sampled women workers were worst in terms of access to basic facility of latrines. About 43 per cent sampled women workers defecate in the open. Nearly 34 per cent women used pit while only 22.7 per cent were having septic tanks. An overwhelming majority (71.0 per cent) of the scheduled castes women defecated in the open while more than half of the total backward castes women were having pits in their houses. The upper castes women were having better latrine facilities compared to scheduled castes and backward castes women (Table 2, 3). Non-availability of adequate latrine facilities for a vast majority of the sample households is indicative of their poor socio-economic background. Yet, it has to be seen also in the context of lack of access to adequate water supply facilities and other measures for their proper upkeep. About 81 per cent women workers had no access to electricity and they used kerosene oil for lighting. Most of the scheduled castes, backward castes and upper castes were not having access

Table 3: Pattern of Employment, Duration of Work, Wage Rates and Monthly Income of the Sampled Rural Women Workers in Meerut `District

1. Employment								
Employment	Communities							
	Scheduled Castes N = 155 1	Rank 2	Other Backward Castes N = 92 3		Upper Castes N = 53 5	Rank 6	Total N = 300 7	Rank 8
Wage-paid employment (i) Agricultural labour (ii) Non-agricultural labour Self–employment (i) Animal Husbandry (ii) Others	 125 (80.6) 30 (19.3) - -	 1 2 - -	 63(68.5) 29(31.5) - -	 1 2 - -	 - - 22 (41.5) 31 (58.5)	 - 1 2		 1 2 4 3
2. Duration of work done								
Duration of work (in hours)	1	2	3	4	5	6	7	8
6-8 9-11 12-14	43(27.8) 87(56.1) 25(16.1)	2 1 3	32(34.8) 54(58.7) 06(6.5)	2 1 3	28(52.9) 25(47.1) -	1 2 -		1 2 3
3. Wage rates								
Wage /Daily Income (in Rupees)	1	2	3	4	5	6	7	8
50-70 71-90 91-110	106(68.4) 28(18.1) 21(13.5)	1 2 3	69(75.0) 15(16.3) 08 (8.7)	1 2 3	24(45.3) 19(35.8) 10(18.9)	1 2 3		1 2 3
4. Monthly Income								
Income (in Rupees)	Scheduled Castes	Rank	Other Backward Castes		Upper Castes	Rank	Total	Rank
	1	2	3	4	5	6	7	8
1 1500-2000 2001-2005 2501-3000	97(62.6) 44(28.4) 14 (9.0)	1 2 3	16(17.4) 52(56.5) 24(26.1)	3 1 2	12(22.6) 13(24.5) 28(52.9)	3 2 1		1 2 3

Source: Based on field survey (2010-11). Note: Figures in parentheses indicate percentages

to electricity (Table 2, 4). The fuel used in the kitchen by the sampled women workers was inferior and not suitable for their health. Most of the women workers used cow dung cake for cooking food. The use of cow dung cake creates air pollution and depletion of biomass which otherwise could be used for biogas and compost manure. Nearly 28 per cent women workers used kerosene oil for cooking purposes. They also used wood

which they collect from the jungles. Only 15 per cent women workers were managed to use LPG for cooking food in the kitchen. Most of the scheduled caste women used cow dung cake, most of the backward caste women used kerosene oil and most of the upper castes women used LPG as fuel for cooking purposes (Table 2, 5).

Economic status of women workers

Agriculture is the main source of employment for both men and women in rural India but, employment opportunities in the agricultural sector are decreasing quite rapidly due to changes in land use and cropping patterns associated with commercialization of agriculture. There is a distinct gender division of labour within the agricultural sector in the study area and gender discriminatory practices are evident not only in allocation of types of work and rates of wages but in timings of work as well. Mechanization of agriculture confined male labour to mechanical operations like using tractor or spraying insecticides. Tedious manual activities such as transplanting of seedling, weeding, harvesting, transporting harvest, threshing, drying of hay, etc are wholly or mainly done by women. Field survey reveals that 70 per cent sampled women workers were engaged in the agricultural sector. Majority of the scheduled caste women and backward caste women were employed in the agricultural sector while most of the upper caste women were self employed (Table 3, 1). In the agricultural sector women were doing sowing, harvesting, interculture, threshing, winnowing, weeding and transplanting the crops. Since there is heavy pressure on agriculture, women have to seek alternative employment opportunities for subsistence for a major part of the year. These women were engaged in weaving, pot making, basket making and construction. By the work they perform, it is clear that they are not employed all the year round. On an average they get employment only for two to three months. Nearly 41 per cent upper caste women were engaged in animal husbandry and 58 per cent were self employed.

Women work for long time than men. Nearly half of the sampled women workers worked for 6-8 hours per day, 40 per cent worked for 9-11 hours and 10 per cent worked for even more than 12 hours per day (Table 3, 2). Among the different caste groups, most of the scheduled and backward caste women work for long hours (9-11 hours per day) while most of the upper caste women worked for 6-8 hours per day. It is due to nature of work they perform. In spite of working for long hours in performing different tasks, their work is neglected and they are discriminated by paying low wages. In addition to lack of access to adequate number of working days, gender discrimination in wage rates makes women's position more vulnerable. Women get only half the wage rate of men. Most of the women earned wages ranging between Rs. 50-70 while men earned Rs 150 per day. The upper caste women do not work on wages and were self employed. Their daily income was calculated on the basis of their occupation. They were engaged in small business, self employment ventures and animal husbandry.

Field investigations revealed the various causes for this discrimination. On the demand side there is social prejudice which results in the employer's assumption of existence of difference in performance.

Women do not migrate to distant places for better work and wages. Their domestic responsibilities restrict them to seek employment within limited geographical area (Singh, A.L and Sajjad, H, 1998). Their poor economic conditions make them more vulnerable to discrimination. The respondents reported they do not get any help from their men in the discharge of domestic responsibilities such as cooking, fetching water, washing clothes, cleaning floors or caring of children. There is no difference in this regard even in the upper caste and better off families among them.

Under-employment compounded with the gender discriminatory practices in employment including wage differentials, results in low earnings of women. An overwhelming majority of the sampled women workers had monthly income ranging between Rs. 1500-2000. There existed wide variation in the income among caste groups. The scheduled caste women were having monthly income ranging between Rs, 1500-2000, the backward caste women had monthly income ranging between Rs. 2001-2500 while the upper caste women had higher income as compared to scheduled and backward caste women (Table 3, 4). Even this meager income is not spent on household consumption. The respondents reported that the wages received by the women are given to their husbands who are the decision makers in the family. In some cases the day wage earned by women is spoiled in alcohol by the husband. Furthermore, their family size is large and they have to feed large number of dependents in the family, they have nothing to spend on themselves and their condition remains pathetic.

India has made rapid strides in agricultural production since 1960 and contributed a great deal in solving the food problem and making the country self sufficient in food but unless every person has a job, bringing him a steady income to have sufficient food, how can we gloat

Table 4: Weekly Protein Rich Food Consumption among the Sampled Rural Women Workers in Meerut District

Food consumption	Communities								
	Scheduled castes N = 155			Other Backward castes N = 92			Upper castes N = 53		
	A	O	N	A	O	N	A	O	N
Fruits	-	147	08	-	56	36	28	25	-
	(0.0)	(94.9)	(5.1)	(0.0)	(60.9)	(39.1)	(52.9)	(47.1)	-
Meat	-	82	73	12	47	33	-	-	-
	(0.0)	(53.0)	(47.0)	(13.0)	(51.0)	(36.0)	-	-	-
Fish	-	29	126	-	71	21	-	-	-
	(0.0)	(18.7)	(81.3)	(0.0)	(77.1)	(22.9)	-	-	-
Milk	38	81	36	28	52	12	38	15	-
	(24.5)	(52.2)	(23.3)	(30.4)	(56.5)	(13.1)	(71.7)	(28.3)	-
Egg	22	95	38	26	52	14	-	-	-
	(14.2)	(61.3)	(24.5)	(28.3)	(56.5)	(15.2)	-	-	-

Source: Based on field survey (2010-11). A-Always, O-Occasionally, N-Never
Note: Figures in parentheses indicate percentages

Table 5: Health Problems and Health Care Facilities of the Sampled Rural Women Workers in Meerut District

Occupational health problems	Communities					
	Scheduled Castes N = 155	Rank	Other Backward Castes N = 92	Rank	Upper Castes N = 53	Rank
	1	2	3	4	5	6
Skin problem	96.0	1	63.0	2	15.0	3
Back bone pain	75.0	2	45.0	3	77.0	1
Joint pain	68.0	3	82.0	1	55.0	2
Ulcer	41.0	4	25.0	4	7.0	4
1. Occupational Health Problems (In percentage)						
Environmental health problems	1	2	3	4	5	6
2. Environmental Health Problems						
Malaria	92.0	1	70.0	1	63.0	1
Jaundice	56.0	5	46.0	4	54.0	2
Typhoid	32.0	7	17.0	7	12.0	6
Diarrhea	74.0	3	44.0	5	51.0	3
Dysentery	83.0	2	67.0	2	45.0	4
Respiratory problem	42.0	6	37.0	6	33.0	6
Parasitical- Infestation	65.0	4	51.0	3	-	-
Health care facilities availed	1	2	3	4	5	6
3. Health Care Facilities Availed						
Private doctors	36	2	42	1	34	1
Govt. Doctors	84	1	19	2	11	2
Hakeem	12	4	05	4	08	3
Vaidh	23	3	26	3	-	-

Source: Based on field survey (2010-11).

over higher food production and buffer stocks as a proud achievement because scarcity amidst plenty will remain and even grow with the soaring population (Singh, A.L et al, 1996). Still, more than half of Indian children under five years of age are moderately or severely malnourished, 30 percent of newborns are significantly underweight and 60 percent of Indian women are anemic and such manifestations of malnutrition are certainly unacceptable (Measham and Chaterjee 1999). According to Swaminathan (1982), good nutrition is a function of both economy and education and as revealed by Ronzio (2004), women are usually vulnerable to malnutrition for both social and biological reasons, throughout their life cycle.

Due to the income inequality, it is obvious that the consumption pattern for most of the respondents has been just to consume without concern about the

nutrients and health issues. With the list comprising foods socially acceptable, the implication is that most of the respondents would be consuming other foods less socially acceptable. A close perusal of table 3 shows that most of the women workers occasionally consumed fruits, meat, fish, milk and egg.

Nearly 81 per cent Scheduled caste women never consumed fish and another 47.0 per cent never afforded meat. Most of these women workers occasionally consumed fruits, meat, milk and egg. Among backward caste women, most of them consumed protein rich food occasionally. The pattern of food consumption was slightly better in the case of upper caste women as some of them have always consumed fruits and milk (Table 4). The upper caste women do not consume fish, egg and meat due to religious factors. Thus, it can be concluded from these findings that the women were not food secure since food security entails access to food both in quantity and quality at all times. Women workers, despite often being the substantial providers and sustainers of the family, are all the more deprived due to low wage rates and limited access to food, arising out of the unequal power relations in the family and the society. SC households are more impoverished than the other castes. Group discussions with the women reveal that according to the socio-cultural practices in vogue, women have to provide a major portion of the available food in the household to men (and male children) and are to be served first. In many households, women go without food or subsist on rice water. General deprivation combined with the gender inequities endangers women's health.

Health status of women workers

Women workers in rural areas have a high incidence of injuries and diseases and are insufficiently reached by health services (Forastieri, V, 2001). Heavy work during crop cultivation and harvesting can have a high incidence of still-births, premature births and death of the child or the mother. Rural women workers are caught in a vicious cycle of low productivity, low income, under nutrition and infectious diseases leading to lower work capacity. Low level of literacy, poor sanitation and lack of public amenities further contribute to ill health. The status of women in a society is largely affected by the cultural beliefs wherein dependence on and obedience to men is considered traditional and sacred Male child is preferred and the birth of girl is unwelcome and consequently the women submit to multiple pregnancies till a male child is born. This adversely affects the health of mothers. Further, girl child gets minimum nutrition, poor education and poor access to health care facilities.

Women are, especially in agricultural areas, expected to perform hard physical labour, both within and outside the household. They are at a constant risk of health hazards due to the area in which they live and work, their living conditions and the type of work they do in the rural areas. The women workers are exposed to all kinds of hazards and they suffer from various diseases.

Field survey revealed that 75 per cent scheduled caste women were suffered from back bone pain, 68 per cent from joint pain, 96 per cent from skin problem and 41 per cent from ulcer. Since most of the scheduled caste and other backward caste women work

in the agricultural sector and are exposed to different pesticides and thus having skin problem. Among other backward castes, 82 per cent reported of having joint pain. The upper caste women suffered from back bone pain and joint pain (Table 5, 1). The higher incidence of chronic skeletal muscular and postural health problems such as joint pain and back pain is the result of repetitive work and postures. The environmentally related disease profile of the sampled women workers shows that Malaria, dysentery, typhoid, jaundice, diarrhea, respiratory problem and parasitical infestation were the common problem among women workers (Table 5, 2).

These diseases were the manifestation of water logging of sullage around and inside the house. Heaps of garbage was lying open in house uncollected. The unhygienic conditions attract vectors- mosquitoes, flies, cockroaches, rates, fleas, bugs, ticks, mites, etc. A bacterium thrives in the warm moist conditions. Rotting garbage spreads malaria, amoebiasis, dysentery, diarrhea, etc. Contaminated water contains virus which causes jaundice and typhoid. Stagnant sewage is a breeding ground for mosquitoes. The use of biomass fuels such as wood, dung, agricultural waste and kerosene oil is the principle cause of indoor air pollution. The smoke from biomass fuels is a complex mixture of aerosols which contain significant amount of carbon mono oxide, suspended particulate matter, hydrocarbons and nitrogen oxides. Inhaling of this smoke poses the risk of chronic respiratory disorder (Envis- NIOH, 2004). Parasitical problem is caused due to defecate in the open.

The pattern of utilization of medical care facilities reveals that majority of the scheduled caste women (84 per cent) depend on government hospitals but they are not provided any facility in these hospitals like availability of doctors especially consultants, medicines and testing facilities. The high degree of dependence on the public health care system is due to the poor economic status of these women. About 36 per cent of scheduled caste women consulted the private doctors but they could not afford the medicine prescribed by the private doctors and further they charged high consultation fee. The respondents disclosed that they do not go frequently to the private doctors. In some cases, they use the same prescription if they again happen to suffer the same illness. They also depend on the unani medicine. Nearly 23 per cent of them rely on *Vaidh* and 12 per cent depend on *Hakim* (Ayurvedic doctors). The main reason to consult these doctors is that these doctors themselves provide medicines at lower prices. But it is not always that the patients got relief from their ailments but it was also reported that some times they fall sicker after taking their medicines and ultimately they have to depend on the public hospitals. Most of the other backward caste and upper caste women consulted the private doctors (Table 5, 3). This reflects that they have better economic conditions than the scheduled caste women. They consult the private doctors due to inefficiency and lack of quality of government hospitals while the scheduled caste women have no option other than the government hospitals despite the inefficiency and mal-functioning of the government hospitals.

CONCLUSION

The study analyzed the social, economic and health issues of rural women workers in one of the agriculturally advanced districts

of western Uttar Pradesh, India. Relatively greater poverty and depressed castes made women workers more vulnerable to economic exploitation. The women worker households' backwardness was reflected in low levels of housing facilities. There was lack of drainage, toilet and drinking water, electricity and kitchen facilities and the houses of women's workers were characterized by dirt and filth with garbage pilfered everywhere. The shift from subsistence to a market economy has resulted in a dramatic negative impact on women workers. Not only this, women's work is rarely recognized and they are paid low wages. The women workers are at constant risks of health due to living in abject poverty and working in hazardous activities. The lack of opportunities in social life coupled with virtual absence of any role in leading the decision-making bodies of trade unions made the women workers vulnerable in the political and all other fronts.

Every effort must be made to develop and implement relevant strategies designed to improve social, economic and health status of women. Poverty is eating the fabric of the country and whatever is to be done, should be done to redress the situation of the people below the poverty line without delay. Steps are needed like expansion and diversification of the economy by investing capital in agriculture and rural infrastructure which may generate farm and non- farm employment. Education and training will go a long way in achieving the goal and help in raising the status of women, enable them to develop this potential as independent and enhance their skill. There must be decentralization of small scale and cottage industries by establishing sugar mills, flour mills, food processing units in the rural areas itself for securing better economic gains. Emphasis must be made on implementation of Minimum wages, equal remuneration and other existing laws regarding their social security.

Women must be trained in the areas of health, nutrition, and child care. They must also be provided with basic facilities of health care, drinking water, sanitation, etc. Another important area is to increase the reservation of seats for women in the legislation bodies by the government of India. Though the governments, both at the centre and in the states have taken various steps to address the issue of empowerment of women but it has not made any real dent in the progress. Laws must be enforced effectively for the removal of gender bias in the labour market, the work place and in the family. However, nothing can be achieved unless and until we change the attitude of the people towards the discrimination of women in the society in general and in the family in particular.

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