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Impact of income and diet on the health of daily wage labrourers of tribal women in Ranchi district

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Abstract

As women Constitute half of its population and play crucial role in agriculture and livestock production, Household economy and labourer works including involvement in construction works besides performing their domestic chores and Reproductive functions. In view of all these India's first Prime Minister rightly said that "the condition of a nation by looking at the status of women." In earlier days' majority of Indian women were shy, illiterate, pessimistic and traditional and their traditional mind feels that being women they are subordinate in society and restricted themselves to household activity only. However, with the development of the country the status of the women changed in the society and they are at good positions in every industry from Government to hi-tech computer services and they are treated as equally to man in all aspects of industry. Not only in industry but also in agriculture and daily wage labour level female workers were performing several important activities. Contribution of female workers in daily wage labour including agriculture labour is roughly estimated to be 60 to 70 per cent. As a wife or a mother, a labourer woman takes and carries the decisions regarding development of family and home. Their average daily input work is not less than 14-16 hours. Hence labourer women have multiple responsibilities in and outside the home. It is estimated that 86 per cent of the total rural women performing many agricultural operations. Among them, 36 per cent have their own land and work in fields whereas around 50 per cent worked as labour. However, the changed social status of workers resulted in additional workload and stress for women resulting in poor health status.

Keywords: Tribal women, impact of income, diet, hereditary diseases health. capacity performance, family diagnosis of illness

Introduction

Woman plays an important role at home as well as in the society. They form a major part of our society. According to census (2011), out of total population of our country women were 652 million and out of that Jharkhand State 16.03 million women population. As women Constitute half of its population and play crucial role in agriculture and livestock production, Household economy and labourer works including involvement in construction works besides performing their domestic chores and Reproductive functions. In view of all these India's first Prime Minister rightly said that "the condition of a nation by looking at the status of women."

In earlier days' majority of Indian women were shy, illiterate, pessimistic and traditional and their traditional mind feels that being women they are subordinate in society and restricted themselves to household activity only. However, with the development of the country the status of the women changed in the society and they are at good positions in every industry from Government to hi-tech computer services and they are treated as equally to man in all aspects of industry. Not only in industry but also in agriculture and daily wage labour level female workers were performing several important activities. Contribution of female workers in daily wage labour including agriculture labour is roughly estimated to be 60 to 70 per cent. As a wife or a mother, a labourer woman takes and carries the decisions regarding development of family and home. Their average daily input work is not less than 14-16 hours. Hence labourer women have multiple responsibilities in and outside the home. It is estimated that 86 per cent of the total rural women performing many agricultural operations. Among them, 36 per cent have their own land and work in fields whereas around 50 per cent worked as labour. However, the changed social status of workers resulted in additional workload and stress for women resulting in poor health status.

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Review of Literature

Vijaya kumar. S, (2007) ^[5]: While discussing the social security schemes of workers especially in the Indian context, Vijayakumar.S99 discusses its existing structure, shortfalls and finally suggests a model in which an effective coverage with need based benefits could be possible. The Beedi workers welfare fund operated by the Central Government has wider network but has problems of coverage and benefits.

Chandrika, K.B. (2015) [7]: conducted a study on women labours working at Areca nut Waraki in Sirsi taluka, a Malnad region of Karnataka state, India. The total sample size of the respondents selected for the study was 80, between 18-60 years of age group. The health profile of the study population showed that, joint pain and back-ache were their common health problem, neck is the most common affected part followed by low back. Their other problem include 52.5 per cent of general weakness, 25 per cent of Acidity, 20 per cent of Headache, 40 per cent skin allergies were found. The work place and nature of work in which the labours spend more time exposed them to health hazards that contribute ill health. Musculoskeletal problems and cough were common among women above 35 years. The reasons for these problems were lack of proper rest, leisure and continuous work.

Ridhima Kapoor *et al.* 2015: Mundas, an indigenous tribal community in Jharkhand India, are surrounded by rich agroforestry resources, yet display high levels of malnutrition. Our study explored the food environment of Munda community, different IFs they accessed, levels of utilization of IFs in routine diets, their nutritional attributes and factors influencing IF consumption. A cross-sectional mixed-methods study was conducted in nine villages of Murhu and Torpa blocks in Khunti district, Jharkhand. Using focus group discussions and key informant interviews, we did free-listing of IFs known to the community.

Ministry of labour and employment, (2018): The undersigned is directed to say that the ministry of labour and Employment has prepared a preliminary draft on code on occupational safety, and health standard, health and working conditions welfare provision for the employes and leave and hours of work. "building worker" means a person who is employed to do any skilled, semi-skilled or unskilled, manual, technical or clerical work for hire or reward, whether the terms of employment be expressed or implied, in connection with any building or other construction work, but does not include any such person who is employed mainly in a managerial or supervisory or administrative capacity;

Jayanta Bumar Behera, (2019) [10]: The establishment of multinational companies and landing development programmes in tribal areas has been pulling as well as pushing factors inducing tribal families to migrate in different parts of central India. The study was conducted in tribal dominant areas of the State. The present paper describes the impact of migration on children of the migrant parents and also to understand the migration pattern of tribal population in Dindori district of Madhya Pradesh. The present study is also including women migrants from the tribal areas to the neighbour cities of the State. The findings of the study has utilized in putting forward various suggestions which can help the policy makers to undertake

various development and welfare interventions among these tribal groups.

Objectives

The objectives of present study are as follow: -

- To study the role of education and income on the health of daily wage tribal women labourers.
- To study the dietary pattern and health awareness of the women labourers
- To study the working conditions of the tribal women labourers engaged in construction work. Hypotheses
- Socio-economic condition and education effect the nutritional status of tribal women labourers.
- The dietary pattern and health awareness influence health of tribal women labourer.
- The working condition influences the health of the tribal women labourer.

Research Methodology

Data was collected from a sample of 100 women construction workers around construction sites found in the Ranchi town. Questionnaires were administered to willing participants. Response rate was maintained at 100% as the sampling design was designed to continuously visit construction sites until 100 willing participants were reached as the targeted sample. However, I have been recorded all attempted and failed access to sites in addition to sites that did not have women these had implications on the study. The implication on the study is apparent 5 sites out of 11 sites visited had no women as construction workers: suggesting a significant strained women participation in the construction sector. The data collected were tabulated into percentage and analysed. The questionnaire was divided into three sections. One section is for the demographic data of the sample. The other two sections profiling the workplace ergonomics of the sample proceeded from the anchor questions that sought to establish the health and safety status and also impact of the income in a diet of the sample prior to joining the construction sector and after engaging with the tasks of the construction workplace.

Data Collection

A purposive sampling method was used to collect information from the tribal women construction workers in the Ranchi district. A questionnaire was framed with question needed for the study and through personal interview method the data was collected. About 100 respondents were enquired for the study in the time period from August 2021 to February 2022. The data that were collected was analyzed using simple average and percentage method. Garret's ranking scale and SPSS software. But that time I only use percentage method.

Result

Socio-economic status of the respondents

The socio-economic status of the respondent is very much necessary to understand the background of their life. With this background the selected Tribal women worker were asked questions related to their age, education, marital status, and type of family, income of the family. And the following table shows the finding.

Table 1: Age of the selected Tribal women worker

Age of the respondent	Percentage
less than 20	4
20-29 years	56
30-39 years	29
40-48 years	11
Total	100

Source: (Primary Data 2020)

The above table reveals that a majority of the Tribal women workers around 56 percent are from the age group of 20-29 years it is been followed by 29 percent of the study population from 30-39 years of age and very minimum number of age group falls in the category of less than 20 years, and 11 percent are from 40-48 years of age.

Table 2: Education

Education	Percent
Uneducated	33
Up to Middle School	22
Up to high School	31
12 th Board	10
Graduation	04
Post-Graduation	00
Total	100

Source: (Primary Data 2020)

The Table-2 shows the educational qualification of the selected sample respondents around 33 percent are uneducated and 22 percent have undergone Up to middle School it's have been followed by 31 percent who have undergone Up to high School and 10 percent have undergone 12th Board who have undergone and 04 percent have undergone Graduation or no one have undergone Post-Graduation.

Table 3: Marital Status

Items	Number
Married	62
Unmarried	08
Divorce	00
Widow	30
Total	100

Source: (Primary Data 2020)

Table 3 discuss information on the Tribal women construction worker's marital status and 62 members that is a majority of the population are married and 08 members are unmarried and 30 only widow worker was found in the study area. And it is to be noted that no divorce ladies were found.

Table 4: Type of Family

Туре	Percentage
Joint Family	51
Nuclear Family	49
Total	100

Source: (Primary Data 2020)

The above table depicts that a majority of 57 percent of the study population are belonging to joint family type and only 49 percent of the population are belonging to the nuclear type family.

Table 5: Monthly Income of the Family.

Income of the Family	Percentage
3001-5000	22
5001-7000	37
7001-9000	41
Total	100

Source: (NFLMW National floor level minimum wages 2019)

Minimum wages are 180 INR/Day

The implications of these findings are that the inclusivity of the construction sector greatly impacts the inclusivity of the national economy. The construction sector contributes about 10% of the national GDP (Plascon, 2012). Wages is an important factor that is needed for the economic condition of the labours. The above Table 5 shows that 22 percent of workers that get their wages are of 3001-5000 and 37 percent stated that they get wages under 5001- 7000 and 41 percent of workers getting their wages under 7001-9000.

Table 6: Wages Sufficient for Daily Requirement

Sufficient income	Frequency
Yes	01
No	65
Partially	34
Total	100

Source: (Primary Data 2020)

From a sufficient for daily requirements the outcomes point of view 65 percent labourers are not satisfied their job. For those who were 34 percent of workers are partially satisfied her monthly income and 1 percent tribal women worker were satisfied her they getting monthly income. It is because hard work, low wages, long working hours, exploitation by male workers and contractors, harassment, lack of basic amenities at the workplace, hazards of working condition and discrimination of gender by various reasons etc .

Table 7: Health and Safety Outcomes Toilet facility

Toilet Facility	Percentage
Yes	14
No	86
Total	100

Source: (Primary Data 2020)

The above Table 7 shows that 86 percent of Tribal women labourers have no toilet facilities in their construction area. 14 percent respondent have said that toilet facilities in their construction area.

Table 8: Sources of Drinking Water

Water Facility	Percentage
Pipped in water	08
Pumped/Burwell	39
Supply Water	31
Both pumped/supply water	22
Total	100

Source: (Primary Data 2020)

The health and safety of women construction workers would be better concluded on from the viewpoint of men construction workers, construction sector management and the women construction sector to give balance and rigor to the study. The Table8 shows that among the total respondents surveyed said 08 percent of the Tribal women workers have pipped in source of drinking water. Around 22 percent of respondent reported that both pumped and supply water are used in their construction area for drinking. And 31 percent of respondent reported that they use supply of water for their drinking.

Table 9: Evaluate overall health

Overall Health Checkup	Percentage
Good	35
Mild	50
Moderate	15
Total	100

Source: (Primary Data 2020)

The Table- 9 shows the evaluation of overall health checkup of the selected respondents around 50 percent of mild person go for the health checkup and 35 percent are good for health and only 15 percent are moderately interested respondent goes for health checkup.

Table 11: Capacity performance

Performance	Percentage
Excellent	32
Good	43
Moderate	25
Severely	00
Completely	00
Total	100

Source: (Primary Data 2020)

The data presented in the above table revealed that capacity performance for tribal working women the respondent reported that 32 percent are excellent and 43 percent are good or 25 percent comes under moderate also several, completely no one can answer for the performance capacity.

Table 12: Family diagnosis of illness

Illness	Percentage
Yes	41
No	59
Total	100

Source: (Primary Data 2020)

The impact of ergonomics of the construction workplace is apparent in the massive shift of health outcomes from the point of employment up to the point of the field work of this study. 41 percent of the sample participants were family diagnosis of illnesses. And 59 percent of family were no diagnosis of illness.

Table 13: Monthly Checkup

Monthly checkup	Percentage
With or without diagnose to the doctor	10
Without Help	14
With some Help	42
Completely unable to take it	12
Other	22
Total	100

Source: (Primary Data 2020)

The Table 13 shows that tribal working women are 10 percent of respondent with or without diagnose to the doctor and 14 percent of respondent reported to without help they taken medicine. And 42 percent have said that with some

help for monthly checkup and 12 percent of total workers completely unable to take it the monthly checkup or the 22 others have said that gone for monthly checkup.

Table 14: Rate the local Hospital in your area

Rate the Hospital	Percentage			
Excellent	13			
Above average	19			
Average	65			
Below average	03			
Very poor	00			
Total	100			

Source: (Primary Data 2020)

The above table shows that among the total respondent surveyed the respondents are aware about the local hospital facilities and their benefits. Around 13 percent of respondent reported that excellent performance and help them her health problem and 19 percent above average and 65 percent has said that average performance to the local hospital. The 3 percent of respondent said to below average for hospital facilities.

Dietary Intake of respondents

The 24 hours' dietary recall method (Swami Nathan, 2006) was adopted for the present study in per day. The calculation for the nutrient intake was done with the help of "Nutritive value of Indian food" (c. gopalan 2006) and compared with recommended dietary allowance given by ICMR consumption frequency of food. The information related to dietary pattern. Frequency of consumption of food groups and nutrient intake with reference to protein, fat, carbohydrate, energy, iron, calcium, vitamin A, thiamin, riboflavin, was recommended. The dietary information taken from the respondents including menu, ingredient, and amounts used for the preparations of food.

Dietary intake of respondents was assessed by 24-hour diet recall method. Table 19, 20. Shows that nutrient intake of respondents was very poor in comparison to recommended dietary allowance. After simple statistical analysis it was very clear that consumption of nutrients regarding protein, fat, iron, calcium, was very low. Intake of nutrients like carbohydrate and thiamine were higher than RDA. And it will lead to deficiency diseases of specific nutrient.

Table 15: Food Pattern

Food Pattern	Percentages
Early morning	60
Breakfast	89
Mid-morning	00
Lunch	100
Evening	24
Dinner	100
Bed time	28

Source: (Primary Data 2020)

The above Table-19 shows 24hour dietary recall method. Eating habits do not always conform to current dietary guidelines further do have a great ecological impact. Thus, the habit of eating outside has become a common everyday practice in these surveyed area. In 89 percent respondent took breakfast and 100 percent respondent took lunch and 24 percent respondent has response to take evening snakes or 100 percent respondent took dinner and 28 percent respondent has taken bedtime milk.

Table 16: Food Consumption of Respondent

Food consumption	One Serving	Two Serving	Three Serving	Occasionally	Never	Some times	Weekly	Total 100	Percentage
	Daily								
Rice	00	87	13	00	00	00	00	100	100
Wheat	78	22	00	00	00	00	00	100	100
Ragi	11	00	00	47	30	08	04	100	100
Pulses	47	08	00	00	00	37	08	100	100
Vegetable	23	67	00	00	00	00	10	100	100
Root and tubers	54	46	00	00	00	00	00	100	100
Green leafy	06	00	00	00	00	51	43	100	100
Fruits	11	00	00	37	00	32	20	100	100
Milk	35	00	00	13	09	33	15	100	100
Fish / meat and meat products/ egg	00	00	00	38	00	06	56	100	100
Sugar / jaggery	13	26	00	00	08	53	00	100	100
Tea/ coffee	38	43	00	00	00	19	00	100	100

Source: (Primary Data 2020)

The Table- 20, consumption of Rice, 87 percent consumed twice daily and 13 percent were taken thrice in a daily diet. 00 percent were fund occasionally and 00 percent were some time, 00 percent were fund weekly consumed rice. Consumption of wheat were fund 78 percent were taken one serving in a day and 22 percent were taking twice in day.

Consumption of Ragi 11 percent were took one serving in a day. And 47 percent were taken occasionally, 30 percent were never taking ragi, 08 percent of respondent were taken some time. 04 percent were taken weekly consumed ragi. We all know that our very unequal society.

The gulf between the rich and poor in term of wealth and income is enormous, inequality is also very wide consumption of luxury goods. But is consumption of food to very unequal, after all there's limited to how much person can eat. Frequency of pulses among respondents, 100 percent out of 47 percent were daily, 08 percent twice in a day 37 percent were taken some time or 08 percent were taken weekly. Consumption of Vegetables, 23 percent were consumed one time in a day, 67 percent twice in a day or 10 percent weekly were consumed.

Consumption of Root and Tuber, 54 percent of respondent were consumed ones in a daily and 46 percent of respondent consumed twice in a daily diet.

Consumption of Green leafy vegetables, 06 percent were once a day and 51 percent sometimes or 43 percent were taken weekly consumed green leafy vegetable in their diet.

Frequency of Fruit out of 100 percent respondent, 11 percent were taken once in a daily or 37 percent were consumed occasionally and 32 percent of respondent sometime to take fruits. And 20 percent of respondent were taken weekly consumed fruits.

Frequency of Milk and Milk Products 35 percent daily, 13 percent occasionally or 09 percent were never taken milk when they have taken to milk some allergic problems were created. 33 percent of respondent were taken sometimes and 15 percent of respondent were consumed weekly milk and milk products.

In this table we can see that Non vegetarian 38 percent respondent prefer nonveg occasionally, 06 percent respondent were taken sometimes in a diet. And 56 percent of respondent were consumed weekly respectively.

Frequency of Tea and Coffee 38 percent of respondent were consumed tea once a day or 43 percent of respondent were taken twice in a day or 19 percent of respondent were consumed sometimes tea/coffee.

Conclusion and suggestion

The above study has found that a respondents fall in the age group 20-29 years of age. Most of them that is 33 percent

are uneducated and 62 percent are married and most of them are found in living in joint family. Most of the sample population are receiving their income through wages weekly or per day wage type. And their reason for working hard work and go to the construction side and also the main health problem faced by the women worker are menstrual problem and that time created the asthemic , respiratory problem or the consumed alcohol also faced lung or kidney problem. Most of the respondent were suffer from diseases because they don't know how to take here diet and also what should they take or not. Most of the respondent are unaware about the social security measures available to them. So there is action to be taken by the authorities in providing adequate information on the social measure to all the women workers.

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