

**AWARENESS OF OCCUPATIONAL ILLNESS AND HEALTH
HAZARDS WITH SPECIAL REFERENCE TO WOMEN EMPLOYEES
IN THE SPINNING INDUSTRY**



ABSTRACT

Women have access to a vibrant and varied labor market. The many threats to women's health in the workplace remain poorly distinguished. The current problem in spinning mills is not an isolated event, and everyone must recognize this. Like other places, this community has a significant lack of trust. The public is unaware of the risks to their health since employees lack knowledge and self-assurance. The owner and the workers clearly understand both parties and the economy. Over the past two decades, the spinning mill sector has made great strides. There have been several obstacles that the industry has had to overcome to maintain its competitive edge. Most of the industry's core labor comprises women, who deserve recognition and help to improve their situation. Success in the cotton sector is impossible without protecting the rights of low-income women who labor in it. This investigation focused on the health and well-being of women who worked in the spinning mills in the Namakkal District.

Keywords : Hazards, Health, Economy, Occupational Illness, Spinning Industry.

Introduction

The Tamil Nadu textile industry's occupational health and safety (OHS) concerns were analyzed via worker interviews and checklists. The sector can deal with dangers if it works with the company's upper management. Much of the organization's top brass is oblivious regarding health and safety. Textile workers also suffer from a lack of OHS education and awareness. In this setting, it is challenging to implement effective measures for risk management and worker safety education.

Review of Literature

The textile business faces various mechanical, physical, chemical, ergonomic, and physiological dangers. Byssinosis is a disease that affects cotton. Workers experience conditions like asthma and chronic respiratory system inflammation accompany symptoms like tight chest tightness and trouble breathing. There is an overpopulation of employees in these sectors, inadequate ventilation and lighting, broken down machinery, and an absence of PPE training and awareness (PPE). For a country to prosper, everyone should have access to quality education. The training teaches workers their legal rights, proper social behavior, and medical benefits.

Their illiteracy rates are high. Workers' awareness of the significance of OHS was low. OHS is not something that is deemed or implemented by the firm. Indicators for preventing accidents, maintaining cleanliness, and ensuring safety are some issues that must be resolved (Nazia Malik et al., 2010). The corporation should set noise controls to maintain a manageable noise level both within and outside the building (Hafiz Danish Ashraf et al., 2009). Workers' health is vital to assuring quality and productivity. Working in noisy environments presents the most significant risk to workers' hearing. The well-being of the staff members is crucial for product integrity and presentation (Ahmad, 2001). Leading causes of noise in textile and spinning industries are lousy design, overloading, and old gear (James, 2009). Industry after industry has recognized noise pollution as a severe problem because it disrupts peace and safety (Iqbal SM

C. HAMSAVENI

Ph.D Research Scholar, Department of Business Administration, Arignar Anna Govt. Arts College, Namakkal, Tamilnadu, India.

Dr. D. KANCHANA

Assistant Professor and HOD, Department of Business Administration, Arignar Anna Govt. Arts College, Namakkal, Tamilnadu, India.

et al., 2007). Musculoskeletal diseases have been exacerbated by extended operating hours, excessive hoisting, and a lack of safety procedures (Tiwari et al., 2012).

Occupational illness and Health Hazards

Despite a growing body of literature, it is challenging to identify a regular pattern of elevated risk among female workers due to occupational illness. Symptoms of asthma, emphysema, and other respiratory diseases can be traced back to work environments. Some have proposed that we should pay more attention to these “pre-disease” symptoms. Tampering contended that “a demand for the recognized disease may be too early” in women’s workplace health studies. If doctors treat the most common forms of lung disease, they may miss the women with unusual symptoms and new illnesses.

Poverty, low production, and poor health due to work dangers are all directly impacted by local mechanization. Worker protection policies and practices are often ineffective or insufficient because of cultural, environmental, and economic factors. Occupational illnesses are common among textile mill workers in third-world nations because of their exposure to potentially harmful chemicals. Because of this, the workplace must be initiative-taking rather than reactive to these symptoms.

Cotton dust can create various respiratory problems for workers in the spinning industry, making breathing difficult and threatening workers’ health. While severe mistakes are unusual, little disasters like being pricked by a needle happen too often. Employees’ health must be considered considering the whole scope of their employment. Female workers often must cope with additional time demands, such as cooking for the family, long commutes, and skipping meals. Their low earnings (less than Rs. 400 per day) and the resulting poor food significantly impact their health, as do work-related ailments caused by supervisor abuse, the monotony of their professions, and daily risks.

Research Objectives

1. To examine awareness of occupational diseases of women employees of spinning mills.

2. To find out hazards in textiles and inform the accurate control measures.
3. To arrive at suitable policy recommendations to promote women employees’ economic and health status in general and Namakkal district spinning mill units.

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Hypothesis

A hypothesis is a statement about reality. Gathering information from a select few people allows for evaluating potential solutions (Chawla. D & Sondhi. N 2011). To paraphrase George A. Lundberg, “hypotheses” are unproven theoretical generalizations. Even if the ideas are based on nothing more than speculation or made-up information, they might nonetheless pave the way for more study or action.

The research hypotheses of the study are as under.

- ❖ There is no difference in awareness of the women employees on Occupational Disease in Spinning mills.
- ❖ There is a significant relationship between the endogenous and Exogenous variables taken for the study.

Research Methodology

Study area

The Namakkal region of Tamil Nadu was the site of the study’s spinning mills. This area is divided into eight taluks for administrative purposes. It is how taluks are organized. Seventeen of the country’s most crucial spinning mills were chosen randomly for this study.

Data Collection technique

The sample has to be sanctioned by management to be considered for inclusion. The 383 workers were selected using a stratified random selection process. Information was gathered via a questionnaire during a personal interview. The average time spent on each worker to collect data was between five and ten minutes.

Analysis and Discussions

Age and Awareness of Occupational Diseases among Women Employees in Spinning Mills

Every business will experience a correlation between age and occupational disorders. Historically, people assumed that death from old age was only due to that. However, calls to recognize aging as a treatable disease are becoming more relevant and hotly debated as life expectancy rises and people strive to stay healthy in their old age as long as possible (so-called healthy aging). It is despite the lack of a universally accepted set of aging biomarkers and the lack of clarity surrounding the time of transition to disease.

The ages of women working in spinning mills have been divided into ages: 18–25, 26–35, 36–45, 46–55, and 55+. Table 1 displays the breakdown of a representative sample of female workers in spinning mills according to their age and their knowledge of the dangers they face in the job.

Table 1
Age and Awareness of Occupational Diseases among Women Employees in Spinning Mills (Two-Way Table)

Age	Awareness of Occupational Diseases			Total
	Low	Medium	High	
18 – 25 years	43 -37.70%	78 -41.50%	27 -33.30%	148 -38.60%
26 – 35 years	19 -16.70%	41 -21.80%	13 -16.00%	73 -19.10%
36 – 45 years	19 -16.70%	27 -14.40%	15 -18.50%	61 -15.90%
46 – 55 years	15 -15.10%	21 -11.20%	12 -14.80%	48 -12.50%
Above 55 years	18 -15.80%	21 -11.20%	14 -17.30%	53 -13.80%
Total	114 -100%	188 -100%	81 -100%	383 -100%

Table 1 highlights the correlation between the ages of the sample women working in spinning mills and their knowledge of occupational diseases; the highest levels of awareness was recorded among those between the ages of 18 and 25, while those between the ages of 46 and 55 had the least. Women employees between 18 and 25 had the most significant rate of medium knowledge of occupational illnesses in the spinning mill (41.5%), while those over 55 had the lowest (11.2%). Women

respondents working in the spinning mill between the ages of 18 and 25 had the most insufficient knowledge of occupational disorders (15.1%). In comparison, those working in the mill between the ages of 46 and 55 had the highest awareness (37.7%).

Marital Status and Awareness of Occupational Diseases among Women Employees in Spinning Mills

Marriage is a public, legal, and constant declaration of love between two people. Marriage is the union of two individuals in a partnership that is supposed to continue until death but is frequently terminated due to divorce. Seven or eight decades together is long, and many may change during that span. As we age, our bodies and personalities will inevitably shift, and our romantic feelings for one another will fluctuate. Single, married, widowed, and divorced women workers in spinning mills have all been categorized. Table 2 displays the results of a survey administered to a representative sample of female workers in spinning mills, stratifying them according to marital status and knowledge about occupational disorders.

Table 2
Marital Status and Awareness of Occupational Diseases Marital Status and Awareness of Occupational Diseases among Women Employees in Spinning Mills (Two-Way Table)

Marital Status	Awareness of occupational diseases			Total
	Low	Medium	High	
Single	31 -33.70%	112 -50.40%	22 -31.90%	165 -43.10%
Married	24 -26.10%	46 -20.70%	20 -29.10%	90 -23.50%
Widow	24 -26.10%	33 -14.90%	15 -21.70%	72 -18.80%
Divorced	13 -14.10%	31 -14.00%	12 -17.40%	56 -14.60%
Total	92 -100.00%	222 -100.00%	69 -100.00%	383 -100.00%

Table 2 highlights the correlation between marital status and workers' knowledge of occupational hazards in the spinning industry, finding that the highest rates of

knowledge about these dangers were recorded among single women and the lowest among divorced women.

The percentage of single women workers with a medium understanding of occupational illnesses in the spinning mill was 50.4%. In contrast, the rate of divorced women and workers with similar awareness was just 14.0%.

Educational Status and Awareness of Occupational Diseases Among Women Employees in Spinning Mills

Educating women opens the doors for them both professionally and economically. Constitutions in nearly all democracies, including India, protects both women’s and men’s rights equally. The right to primary education has been established. Guaranteeing women’s rights also ensures the long-term health of our society. The government and other non-governmental groups have launched numerous initiatives to increase women’s education access. For the sake of literacy initiatives, women are being prioritized. The uniqueness of who she was as a person will never be forgotten. Now she can access books and educate herself on her legal options. Her dignity and autonomy would not be violated. If we adopt a holistic approach to female education, we can significantly enhance the lives and circumstances of women. This research categorizes the education levels of women working in spinning mills into four groups: no formal education, elementary/secondary education, postsecondary education, and technical education.

Table 3 highlights the correlation between the educational level of the sample women working in spinning mills and their awareness of occupational diseases. The highest level of understanding was found among women with a high school education (46.9%), while the lowest level was among women with technical training (7.6%).

Among women workers in spinning mills, 42.2% of those with a high school education or less had a medium knowledge of occupational illnesses. In contrast, only 10.6% of those with technical training or above had such a perception. Finally, the percentage of women workers with poor occupational awareness in the spinning mill was highest among those with a bachelor’s degree (33.4%) and lowest among those with technical degrees (9.7%). We used chi-square to evaluate the hypotheses on the correlation between the education level of the women in a sample and their knowledge of occupational illnesses in spinning mills:

The results showed that within the sample group of women workers, those who were divorced had the lowest rate of poor knowledge of occupational illnesses in the spinning mill (14.1%). In comparison, unmarried women had the highest rate (33.7%).

Conclusion

Those working in the spinning industry, particularly women, are at risk for developing occupational diseases and injuries, as shown in the research. Compared to other potential dangers, such as noise and dust, light and heavy lifting, fire, and electrical shocks, the maximum RPN poses a greater risk to employees. Because of this, immediate measures are required to lessen the potential harm to employees’ health and safety. Focusing on the need for occupational health awareness is more important than repeating the dangers of chemicals in the workplace.

Table 3

Educational Status and Awareness of Occupational Diseases among Women Employees in Spinning Mills (Two-Way Table)

Educa tional Status	Awareness of Occupational Diseases			Total
	Low	Medium	High	
Illiterate	31	112	22	165
	-33.70%	-50.40%	-31.90%	-43.10%
School	24	46	20	90
	-26.10%	-20.70%	-29.10%	-23.50%
Collegiate	24	33	15	72
	-26.10%	-14.90%	-21.70%	-18.80%
Technical	13	31	12	56
	-14.10%	-14.00%	-17.40%	-14.60%
Total	92	222	69	383
	-100%	-100%	-100%	-100%

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