



Assess the Health Hazards of the Chiffoniers in Lucknow City

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Abstract

Background: Chiffoniers are casual specialists who gather recyclable materials to win a little compensation on regular schedule. Their life and working conditions are amazingly troublesome. This paper inspected the wellbeing perils of the chiffonier working in dumping ground of slum areas. **Aim:** This purpose of this study was to assess the health problems of the chiffonier. **Methods:** This study collected data by interviewing 120 chiffoniers in Lucknow city. The health hazards were assessed using a self-made interview schedule. Snowball sampling was used to choose the data. **Results:** The study shows waste pickers suffer from physical health hazards. The purpose behind occupied with such sort of work is expected not having some other abilities and simple or day by day earnings. They faced problem redness of eyes; headache, back pain, skin infections, allergy cut and accidental injuries are very common among chiffoniers. **Conclusion:** The finding of the study, it can be concluded that chiffoniers face many working health hazards. Majority of the waste pickers frequently report physical health problems during the work. The chiffoniers suffer from several of health harms which seem related to their employment. Chiffoniers faced general problem identity crises, police and public abuses, poor health condition and no job security. Mostly chiffoniers faced different type's health problems at the workplace in daily life.

Keywords: Chiffonier, Daily Income, Health Problems, Informal Worker, Working Condition

1. Introduction

Chiffonier is term for somebody who gets by scrounging through decline in the lanes to gather material for rescue. They are casual laborers who gather recyclable materials to win a little pay on consistent schedule. India's blasting urbanization brings the issue squander the board. Chiffoniers play a significant, however typically unrecognized, job in the waste administration arrangement of Indian urban areas. They gather trash looking for recyclable things that can be offered to scrap trader (paper, plastic, tin and so on.) This action requires no aptitudes and is a wellspring of pay for a developing number of urban poor in the general public¹.

Chiffonier gathers around 10-20 kg of waste for each day. Chiffoniers are low quality of houses without running water or electricity facilities. They are subject to hand siphon water. The dumping grounds prompts

disintegration of water quality in encompassing territories and pollute the water. This includes to the unexpected frailty states of chiffoniers².

Health risk – The chiffoniers work in risky conditions. While moving around in the trash, looking for materials that can be exchanged, the waste pickers are presented to wide scope of wellbeing and security risks; going from diseases specialists and poisonous synthetics, the treatment of sharp or broken materials and genuine musculoskeletal strain. The ergonomic risks incorporate those accomplished in other manual materials dealing with occupations, including static or abnormal stances, physical endeavors, for example, lifting, stacking or pushing weighty loads, and tedious movements³.

Some female worked during the pregnancy time frame. There is no maternal office for female chiffoniers and new

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baby additionally passes on in unhygienic conditions. Female chiffoniers are not much aware about family planning. A large portion of man not enlisted their youngsters' in govt. schools. Just not many waste-pickers give instruction to their youngsters' just eighth level⁴.

1.1. Working Conditions of Chiffonier

Chiffoniers gain their vocation by gathering waste items from the trash mountain consistently and wouldn't fret living in unhygienic condition. Considerably under the difficult conditions, these clothes go out to the trash mountain day by day to gather squander on the grounds that they have no other alternative. The spot is the main wellspring of business for several chiffoniers. Other than insanitary environmental factors and persistent odor, what irritate individuals living close to landfill territories more are the unconstrained flames at the landfill set off by gases, for example, methane⁵.

1.2. Stigma and Harassment, Violence

Most waste picking movement is illegal or unpermitted, so chiffonier generally faces pestering by police and public authority. Additionally, there is across the board open disdain against chiffoniers because of their destitution and saw absence of cleanliness⁶.

1.3. Health Hazards Faced by Chiffoniers

Chiffonier originates from an extremely poor financial foundation. Some have gone to the city alone and rest on pathway or shacks alongside other road youngsters, while numerous connections with their families and are all things considered, all alone. Chiffonier is on amazingly risks occupation. The chiffoniers continually open themselves to the threat of mishaps, wounds and sickness through contacts with sharp material and toxic substances as they scourge with uncovered hands and at some point even exposed feet. It isn't just their workplace this is unhygienic and infection inclined, their living condition is similarly terrible. Chiffoniers were probably going to experience the ill effects of looseness of the bowels and skin diseases. Squander pickers being presented to a few sorts of wellbeing dangers they are additionally presented to danger of obnoxious attack and physical abuse by the society and police authority⁷.

They have high word related wellbeing chances incorporating hazard from contact with human fecal issue, paper that may have gotten soaked with poisonous

materials, bottles with substance buildups, metal holders with buildup pesticide and solvents, needles and bangles. The most ordinarily experienced maladies among chiffoniers are tuberculosis, bronchitis, asthma, pneumonia, diarrhea, parasites and hunger. Entryway to entryway assortment of waste to squander pickers isn't just made sure about their jobs however has additionally implied a more limited working day for a similar pay and a much cleaner workplace⁸.

The chiffoniers gather plastics, paper glass bottles, elastic materials and ferrous and non-ferrous metals from public holders and unloading destinations, which make their exercises dangerous. During their exercises, they are presented to different irresistible specialists just as to different poisonous substances which may reason for disease or disorder. Chiffoniers face social maltreatment from specific components of society which may prompt numerous social issues including the spread of sexuality communicated maladies or contaminations (HIV/AIDS). They additionally effectively get addictive propensities like biting tobacco or skillet masala and betel nuts, smoking, utilization of drink or liquor⁹.

Chiffonier are continually living in high hazard zone as they spend normal and dehumanizing movement in India. They regularly eat the foul food leftovers they find in trash receptacles or in the dumping ground. Using the dumping ground as a field the run the hazard to happen upon needles, utilized condoms, saline jugs, dirtied gloves and other emergency clinic squanders just as abundant of plastic and iron things. They experience the ill effects of numerous sorts' medical issues or infections:

- Respiratory problems (difficulty in breathing, cough, lung infections)
- worms' anemia
- Fever
- Cuts, or injury rashes
- Eyes related problems (redness of eyes, watering of eyes, eyes infections)
- Vomiting
- Allergy
- Skin allergy
- Itching
- Tetanus
- Malaria
- General body pain
- Back pain
- Vomiting
- Typhoid¹⁰

Objective: The authors of this research work aims to assess the health problem of chiffoniers during work.

2. Methodology

For successful study explanation of scientific methodology is necessary, as is directly indications towards the authenticity of the research of the study.

2.1. Locale of the Study

The areas of Lucknow were selected for the study as it as suitable for researcher to conduct the study. The data of chiffonier as collected from Indiranagar, Tedipullia (Alambagh) and Rajnikhand, Ruchikhand residential area of Lucknow.

2.2. Sampling Procedure

The sample for the investigation as comprised of 120 respondents. Snowball examining centers around inspecting strategies here the units that were explored depended on the judgment of the specialist. The fundamental objective of snowball testing as to concentrate on specific attributes of a populace that is of intrigue, which as best empowers to respond to explore questions.

2.3. Tools and Techniques

To carry out the present study, the following tools were used:-

A self-made interview schedule to collect general, specific and health related information about the respondents.

2.4. Methods of Data Collection

The data as collected through on in detail interview to bring out the required information from the chiffonier. Pretested interview schedule as used to collect general, specific information and health hazards related information. Data as collected using prepared interview schedule by a face to face interview. Chiffoniers were used as details information to get information about other chiffoniers.

3. Results and Discussions

Results in (Table 1) describes the distribution according of their age. Results show that respondents (12.5%) were of age group 20-30 years and more than (30.8%) ere of age group 30-40, (22.0%) ere of age group 40-50, (25.0%)ere of age 50-60 and only (9.2%) ere of age group above 60.

Results in (Table 2) describes the distribution of respondents according to general health problem. Results revealed that general health problem chiffoniers majority of (99.2%) this respondent say that they face identity crises as well as (100.0%) respondent say that they have

Table 1. Distribution of the respondents according to age N=120

S.N	Age	Frequency (%)
1.	20-30	15 (12.5)
2.	30-40	37(30.8)
3.	40-50	27 (22.5)
4.	50-60	30 (25.0)
5.	Above 60	11 (9.2)

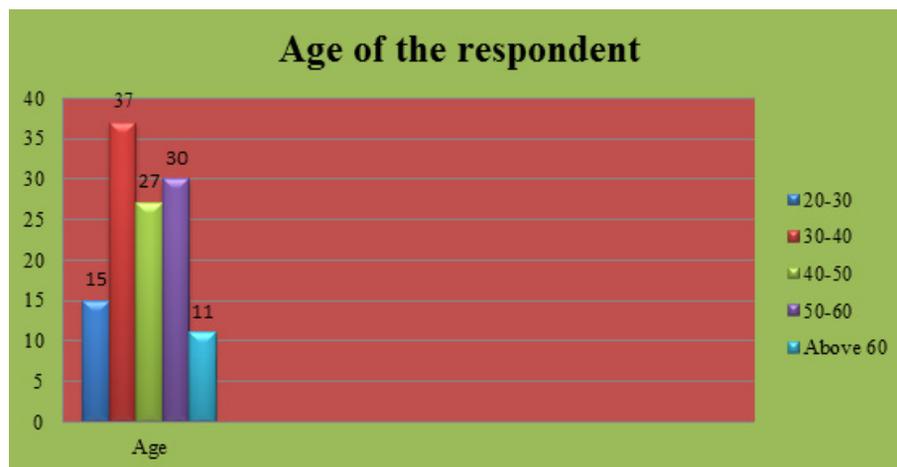


Figure 1. Age of the respondent.

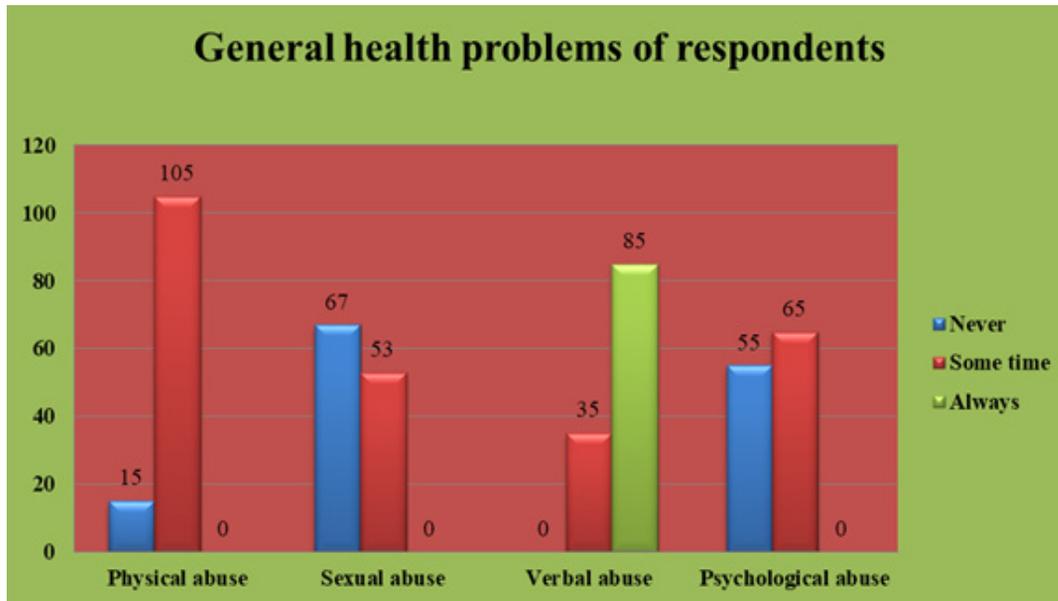


Figure 2. General health problems of respondents.

Table 2. Distribution of respondent basis on their general health problems N=120

Sl.N.	General health problems	No (%)	Yes (%)
1.	Identity crises	1(8)	119(99.2)
2.	Police and public harassment	30(25.0)	90(75.0)
3.	Exploitation by the kabaris	63(52.5)	57(47.5)
4.	Remain uneducated/ use of abusive language/drug peddlers	44(36.7)	76(63.3)
5.	Poor health condition	26(21.7)	94(78.3)
6.	No job security	0(0.0)	120(100.0)

no any job security and poor health condition (78.3%) and (75.0%) people respond they harasses by police and other public authority, remain uneducated/use of abusive language/drug peddlers it is problem of (63.3%) people (47.5%) respondents are exploited by kabaris.

Results in (Table 3) described the distribution of respondent's basis on faced abuses. Results show that majority of respondent facing some time physical abuse (87.5%) and respondent say that they face some time psychological abuse (54.2%), verbal abuse always faced (70.8%) and sometime sexual abuse faced (44.2%).

Results in (Table 4) describes the distribution of respondents according to their health hazards. Results show that health hazards of chiffoniers eyes related problem sometimes redness of eyes faced by (57.5%), watering of eyes

Table 3. Distribution of the respondents according to facing abuses N=120

Sl.N	Abuses	Responses		
		Never F (%)	Sometime F (%)	Always F (%)
1.	Physical abuse	15(12.5)	105(87.5)	0(0)
2.	Sexual abuse	67(55.8)	53(44.2)	0(0)
3.	Verbal abuse	0(0)	35(29.2)	85(70.8)
4.	Psychological abuse	55(45.8)	65(54.2)	0(0)

sometime faced by (31.7%), majority (75.8%) chiffoniers faced sometime eye infection problem, respiratory related problem mostly (82.5%) respondents sometime face difficulty in breathing (75.8%) suffering from cough but as well as (17.5%) always faced difficulty in breathing (13.3%) respondents always face cough, related to musculoskeletal problem 88.3% always faced pain in legs equally proportion (58.3%) respondents faced back pain and pain in neck (42.5%) respondents faced pain in finger followed by (34.2%) chiffoniers faced pain in shoulder followed by only (13.3%) chiffoniers faced pain in arms, skin related problem majority of the respondents (94.2%) some time faced skin allergy and (72.5%) respondent sometime faced skin infection but (26.7%) respondents always faced skin

Table 4. Distribution of the respondent's basis on their health hazards - N=120

1.	Eye related problem	Never (%)	Sometime (%)	Always (%)
	Redness of eyes	51(42.5)	69(57.5)	0(0.0)
	watering of eyes	67(55.8)	38(31.7)	15(12.5)
	Eye infections	29(24.2)	91(75.8)	0(0.0)
2.	Respiratory related problem			
	Difficulty in breathing	0(0.0)	99(82.5)	21(17.5)
	Cough	13(10.8)	91(75.8)	16(13.3)
3.	Musculoskeletal related problem			
	Back pain	0(0.0)	50(41.7)	70(58.3)
	Pain in legs	0(0.0)	14(11.7)	106(88.3)
	Pain in fingers	12(10.0)	57(47.5)	51(42.5)
	Pain in arms	0(0.0)	104(86.7)	16(13.3)
	Pain in shoulders	1(.8)	78(65.0)	41(34.2)
	Pain in neck	0(0.0)	50(41.7)	70(58.3)
	Allergy	7(5.8)	113(94.2)	0(0.0)
4.	Skin related problem			
	Skin allergy	6(5.0)	113(94.2)	1(.8)
	Skin infections	1(.8)	87(72.5)	32(26.7)
5.	Other problems			
	Headache	33(27.5)	33(27.5)	54(45.0)
	Tetanus	34(28.3)	86(71.7)	0(0.0)
	Cut and injuries	0 (0)	120(100.0)	0(0.0)
	Itching	2(1.7)	103(85.8)	15(12.5)
	General body pain	0(0.0)	49 (40.8)	71(59.2)
	Diarrhea	27(22.5)	93(77.5)	0 (0.0)
	Vomiting	12 (10.0)	10 (90.0)	0 (0.0)
	Malaria	19 (15.8)	101 (84.2)	0 (0.0)

infection related problem hen be talk about other problem like headache (45.0%) respondents always faced these type of problem and (12.5%) always faced itching (59.2%) people faced general body pain (77.5%) respondents sometime faced diarrhea (90.0%) sometime faced vomiting malaria faced by (84.2%) respondents (100.0%) respondents sometime faced cut and injuries (71.7%) chiffoniers some time faced tetanus problems.

Ho: There exists no significant difference between problem faced and age of respondents.

Table 5. Anova value between problems faced by respondents across age group

Categories problem faced/age group	Mean	df	F	Sign	Conclusion
20-30 years	4.4	119	182.903	.001	S
30-40-years	5.7				
40-50 years	5.7				
50-60years	3.0				
Above 60 years	2.9				

Results in (Table 5) showed that as $p < 0.001$, thus null hypothesis is rejected which means that problems faced varies according to age group. Mean value also depicted the same.

4. Conclusion

The current assessment needs to investigate the medical issues of chiffoniers in the slum areas of Lucknow city. Results revealed that chiffoniers work in risky conditions. when moving around in trash, searching for materials that can be exchanged, the chiffoniers are presented to a wide range of wellbeing and poisonous synthetic compounds, the treatment of sharp or broken materials and genuine musculoskeletal strain.

They suffer from different types of problem due to vulnerable condition the chiffoniers are likely to be harassed by police, public, la authority and any other kinds of abuses. They were faced different type health problem like headache, back pain, skin allergy, poor health condition and abusive language in daily life. For the most part chiffoniers were confronted cut injury/ accident, respiratory ailment and stomach issue, eye disease, skin contamination and musculoskeletal issues.

We identified the chiffonier in the Lucknow city were largely at risk as they directly exposed to highly infectious hospital wastes or other using dangerous waste products being dumped on the garbage disposal site. They were illiterate and they have no any other skill for choosing the other work so they were working the waste picking work and faced different type's health hazards and abuses during the work at the workplace.

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