Role Of Middle Aged Women In Sanitation

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Abstract:

The word Hygiene is a noun that describes the practices and other conditions related to health, cleanliness, and prevention of diseases. According to the World Health Organization (WHO), "Hygiene refers to conditions and practices that help to maintain health and prevent the spread of diseases. Hygiene is a series of practices including Home, Hospital, and Outside Environment. It is broadly categorized into personal, environmental, domestic, and food. The word is synonymous with cleanliness, healthiness, wellness, and wholeness. According to WHO, Water, Sanitation, and Hygiene (WASH) is an integral phenomenon for every living being. During the SARS-CoV-2 pandemic period, Sanitation Workers were addressed as Unsung Heroes, and also in some places, the household women offered ARTI (religious practice in praise of the act) as a mark of respect to show their Dignified Nobel Work recognizing the value of cleaning work. This paper will discuss Sanitation Workers, their Life, and their Reflection. It is a descriptive narrative and evidence-based.

Keywords: Hygiene, Sanitation, and Narratives.

Introduction:

Will anyone forget the use of sanitizer during the past and existing pandemic period? The word sanitizer is a substance used to make something clean and hygienic. Whenever one speaks about sanitation other related terms like water, hygiene, and other cleanliness viewpoint come automatically. WASH, Water, sanitation, and hygiene is a Health Topic introduced by WHO jointly associated with UNICEF as Millennium Development Goal (MDG). Documents disclose that Sanitation and Drinking-water are fundamentals. Safely managed drinking water services, and safely managed sanitation services should be provided and taken care of by the people chosen system. In India, neonatal mortality still exists due to inadequate water, sanitation, and hygiene. WHO WASH strategy explains how WHO will expand its impact through the introduction of various innovative advancements. Kelli Hughes (January

11, 2021) in The Borgen Project speaks that Water, sanitation, and hygiene (WASH) is a public issue in India. (Information source, borgenproject.org). Launched in 2014, the Swachh Bharat Mission (SMB) of India has seen great success in recent years in improving the health and sanitation of India's people. USAID (The United States Agency for International Development) in India, aims for healthier urban communities and increased access to safe drinking water and sanitation services to India's poor and underserved communities. USAID partnered with the Government of India and Google Maps public toilets on Google Maps. To date, more than 60,000 public toilets have been mapped in over 2,900 cities.

WASH implementation in Pondicherry was through a Non-Governmental Organisation named Gramalaya. Sustainable Sanitation Promotion supported by ORACLE for 4th phase (2019-20). Gramalaya has been focusing on the WASHMAN concept – Water, Sanitation, personal hygiene, Menstrual Hygiene Management, and Nutrition. (Information source www.gramalaya.org).

From the above references, one can clearly understand how important hygiene and related concepts are. In this paper, the authors from Hospital Sector, Medical Research Institute, and the Faculty from the Education Department will present evidence-based qualitative research from the Sanitation department, especially women working in sanitation and cleaning. Their pros and cons related to work will be detailed. A qualitative approach using Hennie R Boeije (2010) and Catherine Kohler Riessman (2008) was used for analysis. Riessman (2008), has given four analysis forms namely thematic analysis, structural analysis, dialogic/performance analysis, and visual analysis. Naturalistic Observation, Controlled Observations, and Participant Observations by Dr. Saul McLeod, (2015).

Aim of the study:

To understand the economic standard of sanitation department staff, especially the cleaning worker.

Occupational Hazard Encountered.

Difficulties faced during working hours.

Safety measures followed if any.

Their willingness and work commitment.

Review of literature:

The topic chosen is the significance of hygiene and aims to understand the sanitation workers' environment. It also tries to focus on sustainable development goals and ways to combat inequality. The researcher used **Hennie R Boeije.** (2010) analysis which finds the true meaning of the problem, its flexibility, and finding qualitative analysis. The sanitary workers described in the following paragraph have also been analyzed based on their day-to-day worrisome situations, honesty towards work, and holdings. There is limited study about sanitary workers and hence it is important to study their job and needs for a safe work environment. Research

on Occupational health outcomes among sanitary workers has concluded that women are at health risk and elevated occupational risks. It also concludes that further exploration is required in low-income countries. Indian hospitals too need to pay attention to this area.

Sample:

Two samples were selected whom were women employed in cleaning work from morning till evening. Cleaning work included floor cleaning, wall cleaning, washing the bathroom, and restroom, dusting, cleaning cobwebs, or whatever work was assigned then and now.

Data collection method:

Observation, in-depth interview, and general questionnaire

Data Analysis Method:

Case X: A woman is engaged in cleaning work which includes cleaning, mopping, clearing cobwebs, washing the floors, cleaning the bathroom, restroom, etc. she does this job for the past 10 years continuously. She has a **sense of pride** in this work since she does it without complaint. Also, she included the word HOME and said that she does the work **As, in her HOME**. Hence, we can submit **honest content** and there is **no exaggeration** in her pattern of work admitted.

Case X, had a **melancholic feeling** when she admitted that if she **doesn't work** there will be **no food** for her at home. She has to **come to work by walking** since there is no bus facility for that distance. The economic factor of the family must be below the poverty line as she admitted that her family depends on her income.

Case X, has continuous work from morning 8:00 AM to evening 3:30 PM which is physical and with Half an Hour break in between. But at times when they are not well the work is shared by other colleagues.

Case X, has skin problems like itching since work involves chemicals. The issue was addressed and proper personal protective equipment was provided.

Similar findings were reported by author Durairaj Rajan (2016) and has published the same in The Journal of Indian Management and Strategy. 21(4):38

Case Y: This sanitary worker works in a tertiary care hospital and comes from a low income group. Her husband was an alcoholic but stopped drinking after health issues and stayed at home. She is a 49 year old woman with three adult girls.

Case Y, reports to work morning 7:00 am and completes work by evening 3:30 pm. She will be assigned with 2 department cleaning work and washing the floor every week. Also washing patient toilets and staff toilets twice a day. Cleaning the corridor twice in a day included.

Case Y, every day before the out-patient department opens, has to clean the hospital open area and in the afternoon dispose of the waste in the designated area. She has worked in this hospital for 15 long years and has worked in body disposal during COVID-19 times.

Case Y, gets trained by HOSPITAL WASTE MANAGEMENT TEAM from time to time and handles segregation, containment and disposal of hazardous, hospital generated, infectious waste.

Findings and Discussion:

Work is Worshipped. Sense of Dedication is completely Submitted. There is work-related Physical Exhaustion but it was not established or exaggerated. An occupational health hazard is identified by the researchers but it is a hidden area when discussed on whole. Most of the low economy population.

From the above two cases, one can understand how much work they do to keep the environment clean. They are also skilled labourers when it comes to learning how to clean.

A similar study was discussed by authors **Dr Lourdes Poobala Rayen and T. Juliet Nisee** (2017) in **IJTSRD on** the nature of work, working conditions, and providing safety measures.

Most of these workers are outsourced by contractors. There is no clear-cut idea about their salary statements and how much they pay for insurance and provident funds. They don't have paid leave and pay is deducted if they take leave. A long-term family pension or insurance payback money scheme like in LIC can be introduced. Occupational health screening can be introduced from time to time. Since most of them are women, a special economic upliftment program can be taken into consideration.

Conclusions:

Whatever kind of cleaning work it has become synonymous with women. Gender equity, training programs, entertainment programs can be considered. Empirical evidence has been highlighted by the researchers, being considerate, and standing with their problem should be the understanding of their employer. It should not be for mere name-sake but to get involved in their resolution.

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 $Kelli Hughes JANUARY 11,2021 \underline{https://borgenproject.org/wash-advancements-in-india/\#: \sim: text = Water \% \ 2C\% \ 20 sanitation \% \ 20 and \% \ 20 hygiene \% \ 20$

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