Precarious Work as a Determinant of Health in the Indian Informal Sector:

Unravelling Health and Work Linkages

Pallavi Joshi Lahari

Jawaharlal Nehru University,

New Delhi, India

Workshop on Occupational Health and Safety in Age of Digitalization

Session IV: Domestic and Informal Work

World of Work and Occupational Health: Current Scenario

- *New Forces of Change in the Work Realm*

Unions Power

Social protection

Regulatory accountability

Work fragmentation

Socio-economic disparity

Workforce diversification

- **Traditional OSH → *New Approaches* in OSH**

Precarious Work Construct in Occupational Health

- OSH need to engage into **social determinants perspective**

- **Account for** multidimensionality; quality, power relations, insecurity, depreviation and more

- **Discrete to sociological view** of work

- Responsive to **mental/psychological** health

- Dearth of research in **Developing nations**

Insecure Jobs

Precarious Employment

Unsupportive Entitlements

Vulnerable Employees
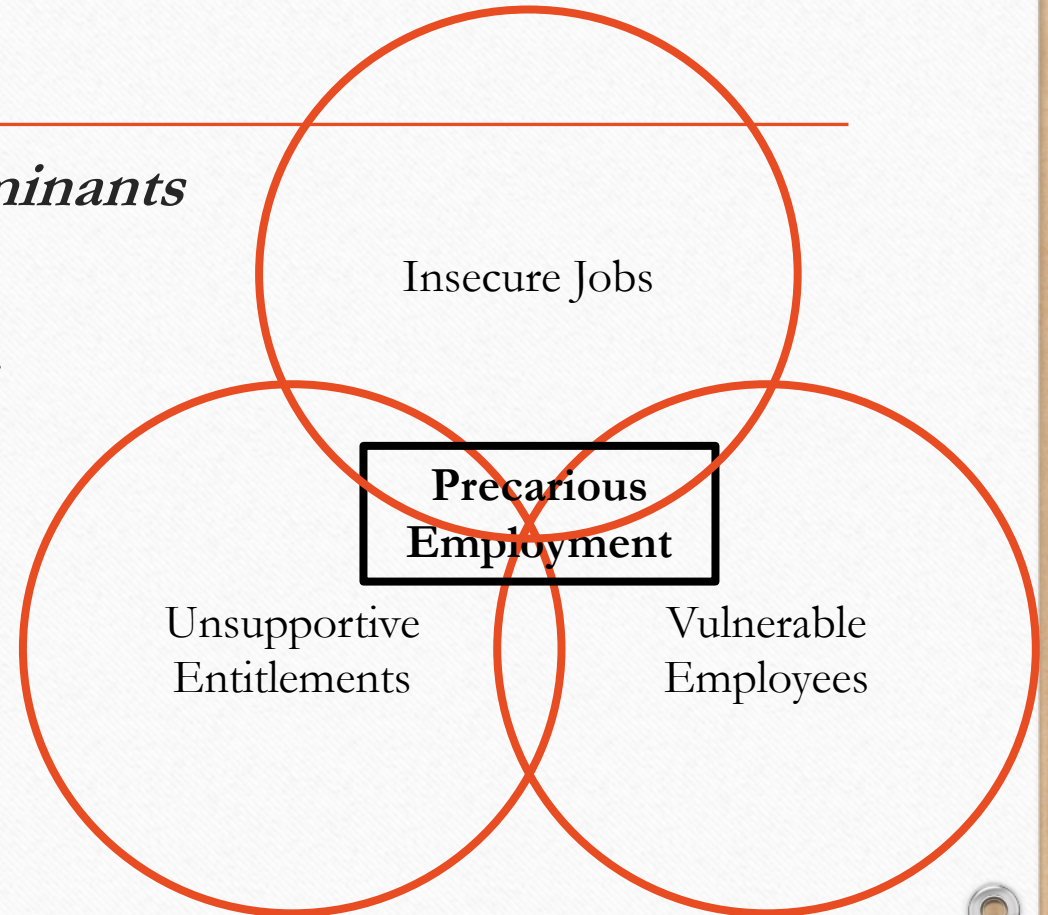
Informal Sector of Developing World: Challenges to OHS

- Sheer Size and Unregulated Nature

- Informal work ~Poverty~ Illiteracy: **Co-location**

- Large share of **home-based** work

- Social institutions of **caste and gender**

- Risk of both **traditional and emerging hazards**

- Deficit in **OHS Manpower** (58% FMO's, 59% SO's)

- Poor surveillance and datasets

The Case of Bidi Sector in India
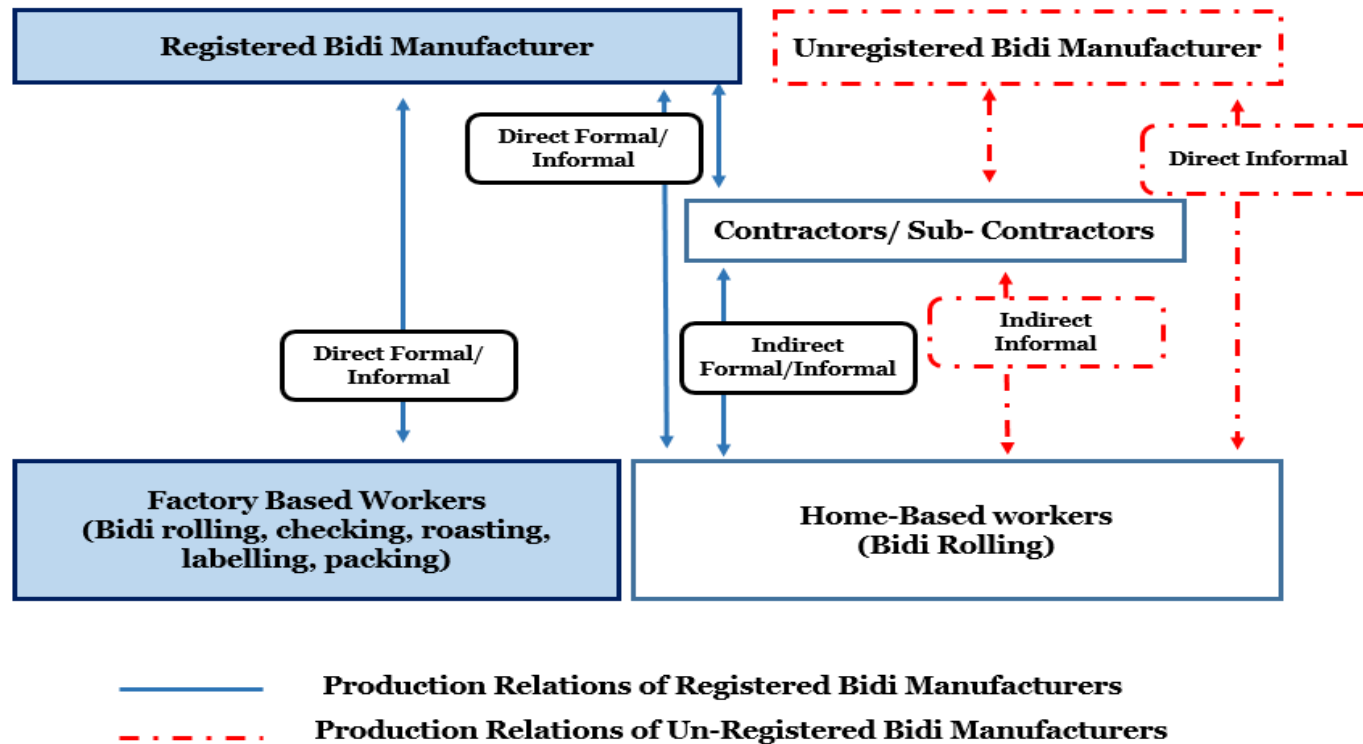
- Indigenous, crude handrolled tobacco

- Highest consumed smoke form, poor man's smok

- Unorganised, homebased, sub-contracted

- Concentration of Women, Children, Marginalised

- Health Risks long term tobacco exposure

- Weak Social Protection, High Toil~Low reward

Bidi Production Chain


```
Registered Bidi Manufacturer          Unregistered Bidi Manufacturer

          Direct Formal/                                    Direct Informal
          Informal

                         Contractors/ Sub- Contractors

   Direct Formal/          Indirect            Indirect
   Informal                Formal/Informal     Informal

Factory Based Workers          Home-Based workers
(Bidi rolling, checking, roasting,    (Bidi Rolling)
      labelling, packing)
```

——— Production Relations of Registered Bidi Manufacturers

—·—·— Production Relations of Un-Registered Bidi Manufacturers

Study Region: Bundelkhand,Madhya Pradesh

- **Largest Bidi producing region** , traditional occupation

- Production -**home-based**, through middlemen

- Industrially **backward region; conservative and feudal**

- **Mixed Methods** Primary Survey of 405 women; 261 **Bidi rollers** and 144 non Bidi rollers
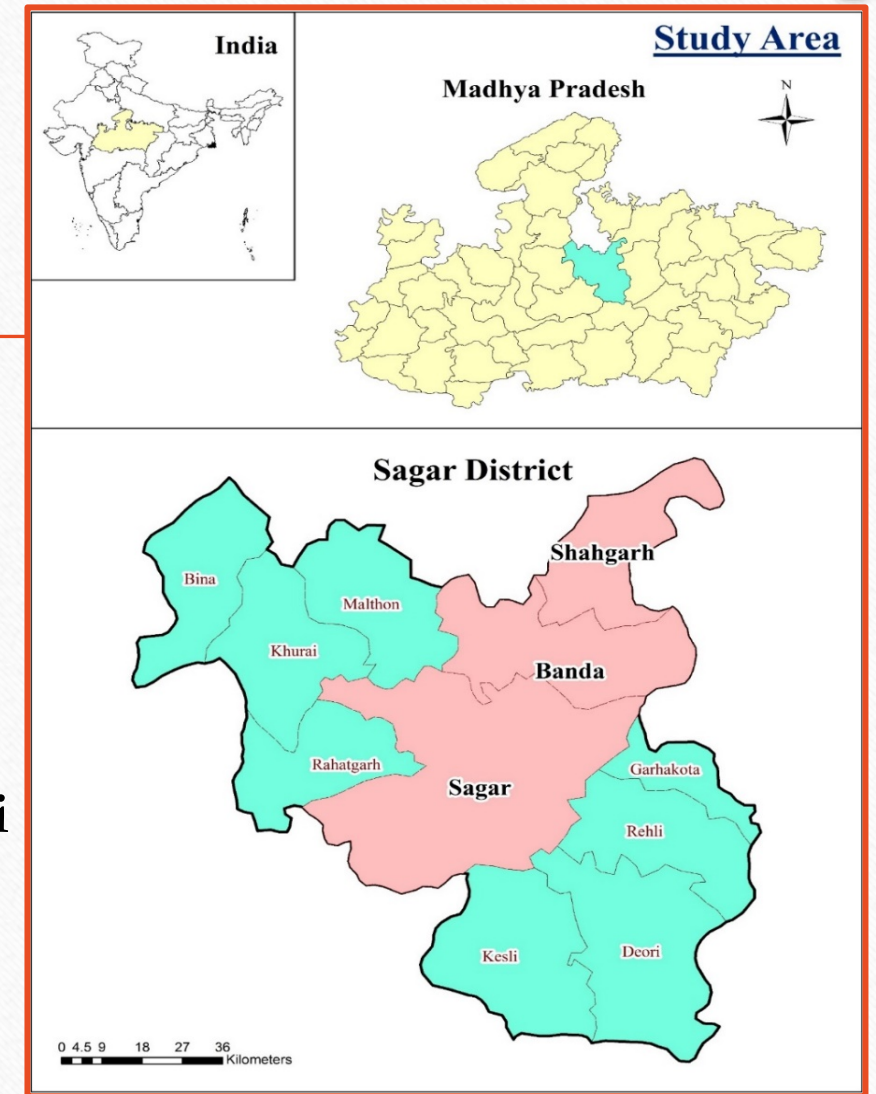
Research Gap in OHS Studies on Bidi Sector
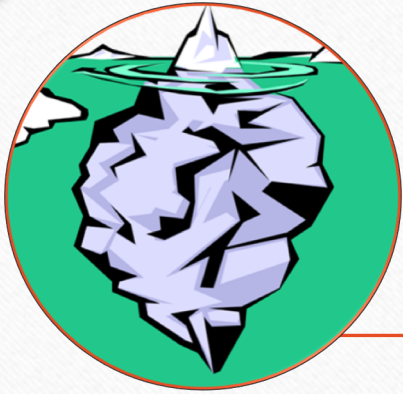
Known: Bidi Rolling as Health Hazard!

- Respiratory
- Dermatological
- Musculoskeletal

- Ocular
- Neural
- Gynaecological

Missing:

Holistic and Multidimensional View of Health and Work Sphere

Disease Status to Health Status

Disease Prevalence ➡️

Other Health Characteritics

- Musculoskeletal (RR=1.465 **)

- Eye Related (RR= 1.123**)

- Gynaecological (RR=1.049**)

- Gastric ailments (RR= 1.078**)

- **Chronic *(RR=1.539**)***

- **Frequent *(RR= 2.235**)***

- **Intense *(RR=1.336**)***

- **Poor self perception *(RR= 1.843**)***

- **Dissatisfaction *(88%)***

- **Presenteeism *(48%)***

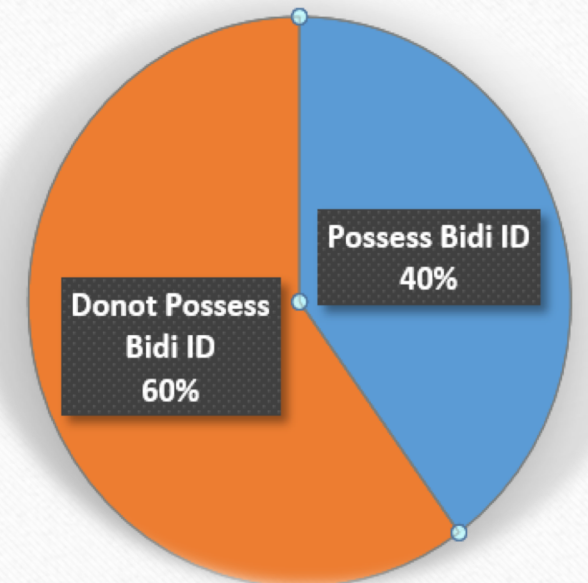- **Lack of Work Dignity *(70%)***

- **Pessimism *(75%)***

Determinants of Health Access

- Invisible Labour (65%)

- No Collective (92%)

- Illiteracy (57%)

- Unawareness about labour rights (93%)

- Weak Social Capital

- Role of Middlemen (85% cases no help)

- Gender Position (40% cards in name of husbands)

- Decision Making Power

Possess Bidi ID 40%

Donot Possess Bidi ID 60%

Pathways and Mechanisms

Health and Access Components

Precariousness Characteristics in Bidi Rolling Work

- Demographic Bias
- Physical Hazard
- Work Relations
- Powerlessness
- Aspirational Deficit
- Weak Social Capital
- Economic Peril

Poor Women of marginalised castes

Unregulated work and poor living conditions

Lack of social protection, Ill defined working hours, Seasonality, Lack of job security, Middlemen, Lack of established work relations

Cheap surplus labour, lack of alternate skills, disempowerment, incapacity to exercise rights, illiteracy, lack of bargaining power)

Lack of aspiration, Ambition, Promotion and self esteem

Networks, civil society, NGO's, media, rights, citizenship

Inadequate Wages, Poverty and Indebtedness

- Physiological
- Social
- Psychological
- Psycho-social
- Economic/ Monetary

Health Status

- Self Enablers
- State Enablers
- Institutional Enablers

Healthcare Access
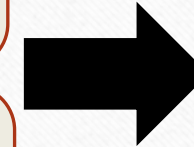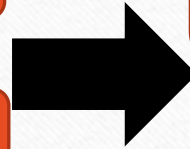
Capturing

* **Precariousness**
* **Health**
* **Health Access**

into Indices

Precarious Work, Health Status and Health Access Trends in Association

Dependent Variable	Independent Variable	Spearman Correlation Coefficient	Linear Regression Coefficient β
Illness Scores	Precariousness Illness Score	0.273***	0.232***
Health Accessibility Score	Precariousness Access Score	- 0.326***	- 0.412***

Health Access
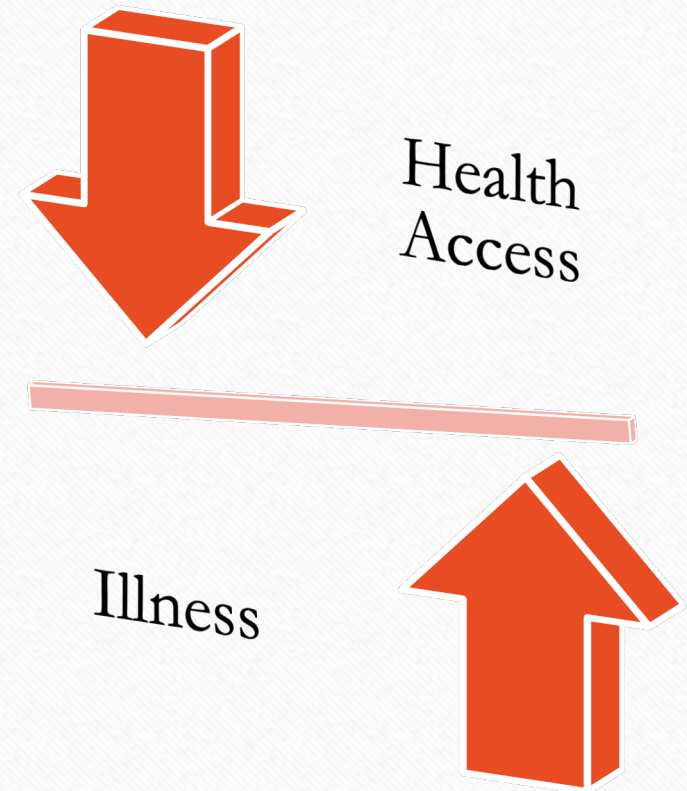
Illness

Precariousness Determinants of Illness Score

Grouped on the basis of	F	Sig.	t value	df.	Sig. (2 tailed)
Income through Bidi	.133	.716	.544	266	.587
Perception about respect	8.182	.004	-1.734	266	.084
Special information on hazard	1.306	.254	1.857	384	.064
Take adequate breaks	1.717	.191	3.000	266	.003
Aware about hazard	.211	.646	1.793	265	.074
Use protective gear or not	2.772	.097	-2.541	259	.012
Bidi activity alone or in a group	3.500	.062	2.086	265	.038
Separate room for Bidi Rolling	2.665	.104	-.034	266	.973
Number of Hours spent in rolling	1.855	.174	-1.976	265	.049
Engagement Years	2.050	.153	-3.579	266	.001

Precariousness Determinants of Access Scores

Grouped on the basis of	F	Sig.	t value	df.	Sig. (2 tailed)
Source of Work	2.871	.091	.021	259	.983
Posession of Bidi ID	6.186	.014	1.440	259	.151
Alternate skills possessed	.041	.841	3.336	259	.001
Monthly Income	.071	.897	3.751	259	.000
Monthly wage through Bidi	.138	.711	3.483	259	.001
Wage change wanted	.679	.411	1.142	259	.254
Attend gram sabha	3.823	.052	2.046	259	.042
Media awareness	3.127	.078	1.668	259	.096
Awareness health hazard	1.669	.198	.203	259	.839
Awareness equal remuneration	.000	.996	-.080	259	.936
Welfare benefits wanted	.139	.710	-.422	259	.673
Awareness collective bargaining	12.790	.000	2.615	259	.254
Money related decision making	.535	.465	2.160	259	.010
Rate of rejection of Bidi	.003	.958	1.797	259	.074
Choice of continuing work	.679	.411	1.142	259	.254
Help in getting ID card	6.943	.009	2.194	259	.029
Work earnings better without Sattedar	4.994	.026	1.652	259	.100

Key **TAKEAWAYS**
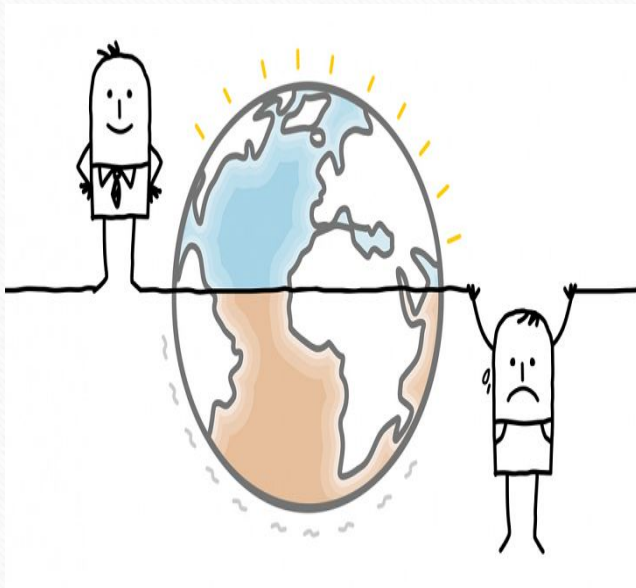
Learning:
Determinants of Health and Health Access are not linear

Future:
Methods to uncover multidimensionality in health determinants and understand pathways they take to affect health.

Contact: pallavi.j2207@gmail.com