

A study on the Sanitation Workers of Aligarh city during Covid-19

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Abstract

The Covid-19 pandemic has severely impacted the lives of sanitation workers in almost every spheres. Unlike other professionals who worked in a more sanitized environment, these workers were exposed to higher risk of potential infection due to lack of precautionary measures to handle the virus. Improper guidance and lack of support has made their condition more pathetic and deplorable. The pandemic not only magnified their occupational and health hazards but also exposed them to higher risk of vulnerability by putting their life at risk. Despite being identified as frontline Covid warriors yet they are fighting from bottom for their identity and recognition.

The paper aims to study the problems faced by sanitation workers during Covid-19 pandemic. It further focuses on experiences of sanitation workers during the Covid-19 pandemic. Mixed method approach was used for the study. The study was conducted on 50 sanitation workers of Aligarh city using snowball sampling. The result focuses on their working conditions, their social life and economic conditions.

Keywords: Covid-19, exposed, sanitation workers, vulnerability.

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I. Introduction

Due to the unprecedented growth of Covid-19, when nationwide lockdowns were imposed to curb the spread of virus, there were strict orders from the Indian Government to remain safely cushioned in our homes. But there were certain groups of people who don't fall under the category of these orders as their work was under the category of essential services. They were labelled as 'Frontline Warriors' by the Government of India. Though the essential service providers like doctors and other health professionals were appreciated and recognised globally as Corona Warriors. However, the sanitation personnel, who were also working at the frontlines in the war against the disease by keeping cities clean, have not received due attention despite their significant contributions (Salve,2020). These workers were working silently and effortlessly by making our cities clean and hygienic.

It is estimated that there are five million sanitation workers in India and these five million workers were send to deal this battle of Pandemic without any training, preparation and safety equipment's. These workers were fighting from the bottom day and night without any complain. The Pandemic was accompanying an unexpected and unprecedented health risks with this wave. Absence of proper vaccines, less information about the virus and continuous deaths has created a havoc and panic among the people. It has burdened the health system of almost every country. India being the worst sufferer. This wave has affected numerous lives from which no one was left behind, even the sanitation workers. The COVID-19 pandemic has exposed and exacerbated the existing vulnerabilities of the sanitation workforce – their hazardous working conditions, low incomes and lack of support (Water Aid,2021). These workers were already working in unsafe working conditions, low pay scale, stigmatised caste system and this pandemic has only added to their complexities. Most sanitation workers have no choice but to continue work, despite the risk of COVID-19 to themselves and their families. Missing work for illness or fear of illness is not possible because it could leave their families to starve for several days (Patwary,2021).

During this sudden Covid-19 outbreak, they were not provided any protective equipment and training to handle the virus. Without any protective equipment, workers are exposed to various infection, illness, injuries and even death. Several incidents of infections and deaths amongst sanitation workers were reported, but the government remained silent and blindfolded.

1.1 What is Sanitation Work?

Sanitation Work is an act of cleaning and maintaining hygienic conditions in our society. It deals with garbage, wastes, rubbish, dirt trashes, excreta's and many more. As per the World Health Organization (WHO), 'sanitation work' includes *emptying toilets, pits and septic tanks; entering manholes and sewers to fix or unblock them; transporting faecal waste; working treatment plants; as well as cleaning public toilets or defecation around homes and businesses*. These type of work is mostly performed by a group of people called 'sanitation workers'. They are the people who operate sewage treatment plants, clear out sewers, empty latrine pits and septic tanks and transport faecal sludge (Water Aid,2021).

Sanitation work is an old age task and it has been assigned to a particular group of people who falls below the lowest of caste hierarchy. Historically, the occupation of sanitation work is intrinsically integrated with the caste system. This link earmarks sanitation as the sole concern of just one caste – the Dalits, and among them Valmiki's (PRIA,2019). It is a stigmatised caste based occupation where one group is responsible for cleaning while the other group enjoying the privileges of being born in upper caste. All the types of cleaning work is expected to be performed by this particular community only.

II. Research Methodology

A mixed method approach was used for this descriptive study. The study population was Sanitation Workers employed by Aligarh Municipal Corporation. For this purpose, snowball sampling was used. A sample of 50 respondents was used in the study. Quantitative data was collected through interview schedule method while Qualitative data was collected through In-depth interviews.

2.1 Objective:

1. To study the working condition of sanitation workers.
2. To study the challenges faced by sanitation workers during the Covid-19 pandemic.

III. Results

2.1 Socio-Demographic profile of the study population

A total of 50 Sanitation Workers were considered during this study. In this study, both male(80%) and female(20%) respondents were taken. The respondents mostly belong to Hindu (96%) religion, while only few were Muslim (4%). Majority(96%) of the respondents belongs to Scheduled Caste while only few were from other caste. The Sanitation Workers belonging to Scheduled Castes were all from Valmiki sub-caste. It was also found that 28% of the respondents belong to the age group of 18-30 years, 40% of the respondents belong to the age group of 31-42 years, 24% of the respondents belong to the age group of 43-54 years while only 8% of the respondents were above 55 years.

Table 3.1.1 shows distribution of respondents on the basis of Gender

Gender	Frequency	Percentage
Male	40	80
Female	10	20
Total	50	100

Table 3.1.2 shows distribution of respondents on the basis of Religion

Religion	Frequency	Percentage
Hindu	48	96
Muslim	2	4

Table 3.1.3 shows distribution of respondents on the basis of Caste

Caste	Frequency	Percentage
Scheduled Caste	48	96
OBC	1	2
General	1	2

Table 3.1.4 shows distribution of respondents on the basis of Age

Age Group	Frequency	Percentage
18-30 years	14	28
31-42 years	20	40
43-54 years	12	24
Above 55 years	4	8

2.2 Nature of Employment

In Aligarh city, it was found that most of the sanitation workers were Ad hoc(samvida) workers which constitute about 48% of the total respondent while only few were Permanent workers comprising about 12% of the total population. A significant proportion of the workers were on contractual(theke) basis which constitute about 40% of the total respondents.

Table 3.2 shows distribution of respondents on the basis of nature of employment

Employment Nature	Frequency	Percentage
Permanent	6	12
Ad-hoc	24	48
Contractual	20	40

3.3 Number of working hours in a day

Most of the sanitation workers of Aligarh city were working for eight hours in total. But they were working in two shifts. First shift of 4 hour was in the morning 6:00 a.m to 10 a.m while other shift was 2:00 pm to 6:00 pm.

Table 3.3 shows distribution of respondents on the basis of Working Hours

Number of Hours	Frequency	Percentage
8	50	100

3.4 Income per Month

It was observed that majority(52%) of the sanitation worker's salary was less than Rs,10,000. These workers were mostly contractual. 36% of the respondents salary was in the range of Rs 20,001-Rs 30,000 while only few workers(12%) salaries was above Rs 30,001.

Table 3.4 shows distribution of respondents on the basis of Income/Month

Monthly Income	Frequency	Percentage
Less than Rs 10,000	26	52
Rs. 10,001-Rs. 20,000	-	-
Rs. 20,001- Rs. 30,000	18	36
Above Rs.30,001	6	12

3.5 Timely payment of Wages during Covid-19

It was found that majority(88%) of the sanitation workers received salaries on time during Covid-19. While only few(12%) of the respondents didn't get their salaries on time during Covid-19. It was observed that during Covid period, these workers' salaries were mostly on time without any delay. Before, pandemic their salaries were often delayed for months but during Covid-19, it was mostly on time. One thing Covid did good to them is ensuring timely payment of their wages.

Table 3.5 shows distribution of respondents on the basis of whether sanitation workers got their salaries on time during Covid-19

Response	Frequency	Percentage
Yes	44	88
No	6	12

3.6 Do you think your work was hazardous during covid-19?

It was found that almost all the sanitation workers felt unsafe during Covid-19. They think that their work was extremely hazardous during Covid-19.

Table 3.6 shows distribution of respondents on the basis of nature of work during Covid-19

Response	Frequency	Percentage
Safe	-	-
Hazardous	50	100

3.7 Safety measures provided during Covid-19

It was observed that 96% of the respondents received masks, 88% of the respondents got sanitizer, 78% of the respondents got soaps, 86% of them got gloves while only 18% of the workers got other items. But these materials were provided only one or two times. After, that they didn't get any safety equipment's during Covid-19.

Table 3.7 shows distribution of respondents on the basis of safety measures provided during Covid-19 (Multiple Responses were allowed)

Safety equipment's	Yes	No
Masks	48(96%)	2(4%)
Sanitizer	44(88%)	6(12%)
Soaps	39(78%)	11(22%)
Gloves	43(86%)	7(14%)
Others	9(18%)	41(82%)

3.8 Free medical check-up/treatment during Covid-19

It was found that majority (92%) of the sanitation workers were not provided any free medical treatment or check-up during pandemic. Only (8%) of the respondents said that they have got free medical check-up by their employer during the pandemic.

Table 3.8 shows distribution of respondents on the basis of provision of free medical check-up/treatment

Response	Frequency	Percentage
Yes	4	8
No	46	92

3.9 Whether discriminated during Covid-19 by the community members?

The study revealed that majority (98%) of the respondents have faced discrimination by the community member during the Corona period while only 2% of the workers didn't face discrimination by the community members.

Table 3.9 shows distribution of respondents on the basis of whether discriminated by the community members during Covid-19

Discriminated	Frequency	Percentage
Yes	49	98
No	1	2

3.10 Did you get infected by the Covid-19 virus?

Majority of the sanitation workers which constitute about 92% didn't get infected by the virus. They believed that corona didn't exist, so they never got their tests done. So, even if they have contracted the virus, they never knew. Only 8% of the workers when got tested after becoming ill, they came to know that they are infected with virus.

Table 3.10 shows distribution of respondents on the basis of whether they got infected by the Covid-19 virus

Infected	Frequency	Percentage
Yes	4	8
No	46	92

IV. Discussion

In Aligarh city, most of the sanitation workers found were male workers working as sweepers, garbage collectors, cleaning of sewers, septic or drains and others. While only few sanitation workers were female mostly working as street sweepers. It shows dominance of one particular gender i.e. male in this profession. This dominance is mainly due to as male worker can perform wide varieties of duties while female workers were only engaged in sweeping. These workers mostly belong to the Hindu religion and from Hindu religion, all the workers were from one particular caste i.e. Scheduled Caste. It clearly embarks that, this profession is still dominated by low caste Hindus. It is the only profession where their entry is easy and don't face any competition by other caste members.

As these workers were mostly on Ad-hoc or contractual basis, it has further lead to exploitation of these workers. There is huge disparity in the monthly income of these workers as permanent workers were getting salary of more than Rs 30,000. Ad-hoc workers were getting salary of Rs 21,000 while contractual workers were getting least. Their salary was less than Rs 10,000. There was huge difference of wages between these workers for the same category of work. However, during Covid-19, their salaries were mostly on time.

With lots of chaos and abrupt emergence of Covid wave, the sanitation workers were the worst sufferers of the pandemic. With no protection or unawareness about the severity of virus, they were left alone in this battle. Though masks, sanitizers, gloves, soaps were provided by the government but it was only 1-2 times. After that they didn't get any mask or other safety equipment's. Lack of PPE kits has made their work more difficult. As the Covid period extended, their situation was like a nightmare. They have to manage their work as

well as their health also. No medical treatment or free check-up by their employer or Government has put their life at risk. In spite of knowing the hazardous nature of their work, they were helpless because they can't sit at home and leave their work. They have families whom they have to feed. After falling ill, most of the sanitation workers didn't preferred to get Covid tested as their was fear that who will bear the cost of the treatment. There was no support by their employers to bear that cost. Those who fell ill and got infected by the virus have to bear their own cost of treatment. No body came for their help and they have to manage on their own.

V. Conclusion

Though sanitation workers were glorified as Covid warriors during the pandemic but in reality their situation was beyond our imagination. For them nothing was changed and the Covid has only added to their complexities. Lack of medical facility, unawareness about the virus, lack of safety equipment's and discrimination has only magnified their problem. They were fighting single-handedly without any protection to keep our cities clean and hygienic.

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