SHORT COMMUNICATION

Health Problems Faced by Female Farm Workers in Rural Areas of Tehsil Dera Ghazi Khan: A Sociological Investigation

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ABSTRACT

Women are the backbone of agricultural workforce in all over the world. Pakistani women play an important role in agricultural production. Women covers about 43% of the agricultural labor force generally, therefore women become the cause of development of the countries. But this segment is failing in many parts of the several countries because women, who are commonly an important resource in agriculture and the rural economy, face health problems that decrease their outputs. To find out the socio-economic characteristics of the farm working women as well as the health problems faced by them during on-going farm activities along with the factors which accelerate poor health of farm working women and to give some suggestions to maintain their health in working day, a sample of 160 farm workers females were selected through multistage sampling technique and were interviewed from the rural areas of Tehsil Dera Ghazi Khan. Univariate (frequency distribution and percentage) and Bivariate analysis (Chi square and Gamma Statistics) was carried out. A great majority (90.6%) faced the health problems in last season. A huge majority (95.6%) of the respondents faced the problem of work load; (socio economic stress) physical injuries/sickness (60.0%); mental diseases (95.7%); pesticides related health troubles (93.8%), and asthma (78.8%). Highly significant association was found between uses of pesticide vs health problem. Although most of the females were young, illiterate and working as tenants living with hand to mouth. They were working for economic support of their family so were in socio-economic and mental stress and were also facing physical and reproductive health problems. There is need of full awareness about taking of healthy diet for better health and decrease mental stress among the rural female farm workers. Trainings about health safety measures and nutrition education or medical system should be provided to them through health personnel and social reformers so that they perform their on-farm activities in better way and play positive role in agriculture sector for socio-economic up-lifting at domestic and national level.

Key words: Health problems, female farm activities, socio-economic and mental stress, farm related health issues.

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INTRODUCTION

In developing countries, women are involved in agricultural activities and play a role in the development

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of socio-economic conditions. However due to low socio-economic status, early marriages, young maternal age and little prenatal care, risk to life of mothers and children have increased^{11,15} and major proportion of female workers stayed in developing countries. Pakistan is a developing country and its females are back bone of agricultural development⁴. Nearly 45% population of Pakistan was employed in this sector in 2012⁹ that has slightly increased (45.1%) in which 75.4% females are involved in agriculture sectors¹⁰. Mostly women are economically reliant on men³. The health troubles among agrarian women were a most important issue ¹³. Women have lot of issues as health care, limited living situation, language and cultural barriers^{11,14,15}. There were complex degrees of some common diseases among women farm workers^{13,5} and harmful diet is the probable cause. These diseases include heart disease, stroke, asthma, diabetes, fatness and hypertension⁵ as

well as have ached from bronchitis, stomachache, constipation, diarrhea, conjunctivitis, dandruff, scale bonds on teeth of skin diseases ¹³. Reproductive diseases i.e. back pain fever, heavy bleeding, irregular menses, miscarriages and some other diseases like rheumatism, swelling on different body parts etc. ¹³. There were uncountable troubles including infective diseases, like biological and pesticides related infections, dermatitis, tension, musculoskeletal disorders, painful injuries, reproductive health problems, toothache wounds, unsatisfactory self-protection, tumor, poor children health, and social and mental health problems ^{11,15}.

The objectives of the study are following:

- 1. To investigate the health problems faced by working women during on-going farm activities along with their socio-economic characteristics and also find out the factors which accelerate poor health of farm working women.
- 2. To give some suggestions to maintain their health in working days.

MATERIALS & METHODS

Present study was designed in 2014 to investigate the health problems faced by farm working women in the rural areas of tehsil D. G. Khan. Multistage sampling technique was used for the selection of 160 respondents. At first stage, four rural union councils out of nineteen rural union councils were selected through simple random sampling technique, at second stage, eight villages were selected (two from each Union Council) conveniently from these union councils and at third stage, again with the help of convenient sampling technique respondents were selected (20 from each selected village). Interview schedule was designed in line with the objectives of study. To collect the data from respondents, survey was conducted in 2014 and collected data was analyzed by statistical package for social sciences (SPSS) and univariate and bivariate analysis were made.

RESULTS

Table 1 show that a large majority (90.6%) of the respondents faced health troubles to great extent in last two seasons while 60% faced physical injuries/sickness. Less than half (33.1%) faced reproductive health problems and only 6.9% faced mental diseases where as 99.4% of the respondents marked to great extent that on farm activities became the causes of health problems while huge majority (92.5%) of the respondents reported to great extent that off-farm activities were the cause of health problems while 95.6% of the respondents marked to great extent that socio-economic stress was the cause of health problem

whereas 93.8% of the respondents faced a great extent of pesticide related health problems during their farm activities.

Data related to health problem during pregnancy in Table 1 depicts that 38.7% of the respondents faced weakness during pregnancy, 20.0% reported miscarriage, 20.0% faced jaundice problem, 12.5% beared blood pressure problem, and 8.8% reported that they did not experience any health problem during pregnancy. Table 1 also indicates that 51.9% of the respondents said that they faced a great extent of mental diseases whereas 78.8% reported that they faced to great extent of mental stress while more than three-fourth (78.8%) of the respondents faced to great extent the asthma problem due to involvement in pesticides activities while 76.9 percent of the respondents faced to great extent cough due to pesticide.

DISCUSSION

Rural women constitute the most important work force in our economy. A good number of economically active women are engaged in major activities in agricultural sector. Study showed that majority of the women suffered from a lot of serious health problems¹⁵, as well as social and financial problems. Mental disorders are important co-morbidities of physical illness and if left untreated they may contribute to suicide and affect the financial capacity of an individual or family to effectively address other health problems. Farm working women were facing many physical injuries and sickness due to a lot of work in the farm. They not only participate in agricultural related activities but there is no doubt that females farm worker also participate in the off-farm activities such as washing clothes, cooking, stitching, fire wood's collection, child caring, embroidery and etc. Due to heavy burden of work, women were facing the health troubles. According to Gerrior et al. ⁸ 60% of the respondents were physically inactive. Aggerwal et al. 1 reported 80% female farm workers faced the health troubles in last two seasons & 76% of the respondents were facing the financial problems that became the cause of socio economic stress. Pesticides are one of the hazards to which farm workers are exposed during the course of their farm related activities. The pesticide illnesses during farm related activities occur in female farm workers. Carbonates and inorganic compounds became the causes of serious illness. Such as skin or eyes infection and extensive female worker poisoning⁷. Findings of present study are very close to the findings of Aslam et al.² that 90.3% of the respondents are used pesticides sprays during their farm related activities. Kevin et al, ¹² said that physical labor of the female farm worker

Table 1: Percentage distribution of the respondents according to their faced health status and Health Problems

decording to their raced hearth status as		
Health troubles in last two seasons	Freq.	%
To great extent	145	90.6
To some extant	11	6.9
Not at all	4	2.5
Total	160	100.0
Health issues you have faced		
Physical Injuries/sickness	96	60.0
Mental diseases	11	6.9
Reproductive health problems	53	33.1
Total	160	100.0
On farm activities		
To great extent	159	99.4
To some extant	1	0.6
Not at all	0	0.0
Total	160	100.0
Off farm activities	100	100.0
To great extent	148	92.5
To some extant	12	7.5
Not at all	0	0
Total	160	100.0
101111	100	100.0
Socio economic stress	1.52	05.6
To great extent	153	95.6
To some extant	5	3.1
Not at all	2	1.3
Total	160	100.0
Pesticides related health troubles		
To great extent	150	93.8
To some extant	8	5.0
Not at all	2	1.2
Total	160	100.0
Health problems during pregnancy		
No experience	14	8.8
Blood pressure problem	20	12.5
Jaundice	32	20.0
Miscarriage	32	20.0
Weakness	62	38.7
Total	160	100.0
Mental diseases		
To great extent	83	51.9
To some extant	70	43.8
Not at all	7	4.3
Total	160	100.0
Mentally stress		
To great extent	126	78.8
To some extant	30	18.8
Not at all	4	2.4
Total	160	100.0
	1 200	1000

Asthma		
To great extent	126	78.8
To some extant	34	21.2
Not at all	0	0.00
Total	160	100.0
Cough		
To great extent	123	76.9
To some extant	35	21.9
Not at all	2	1.2
Total	160	100.0

Table 2: Association between uses of pesticide and health problems

	Use of Pesticide $x^2 = 50.377**, (p = 0.000), y = 0.688, (p = 0.246)**=highly significant$			
Health problems during farm activities	To great extent	To some extant	Not at all	Total
To great extent	143	8	0	151
	89.4%	5%	0%	94.4
To some extant	6	0	1	7
	3.8%	0%	0.6%	4.4%
Not at all	1	0	1	2
	0.6%	0%	0.6%	1.2%
Total	150	8	2	160
10111	93.8	5%	1.2%	100%

can become the cause of risk factor not only for impulsive abortion, but also for low birth weight and untimely birth of the infant. More work during pregnancy, can also become the cause of problem which includes five parameters: posture, working with a machine, physical effort, mental stress, and general environmental stress. Each item is scored as high, or low, and the sum of the five scores can be used to predict the risk that a woman may have a premature or low birth weight baby. Low birth weight is also related to chemical work exposures, and use of pesticides. Different types of human diseases like eye infection, asthma, skin allergy, cholera, bronchitis, cough, and diarrhea were faced by the respondents due to the agricultural production activities⁷. Same kind of human diseases were prevailing in the study area. Due to socio economic stress and work burden a lot of female farm workers face the mental disorders. Gerrior et al⁸ concluded in their studies that older women are particularly at risk for depression and other mental disorders as they often live alone as widows or care for inactivate husband as a family member, have parallel medical conditions and poorer health and tend to be economically disadvantaged.

CONCLUSION

Rural women actively participate in agricultural activities⁴. They work in the field full day which becomes the main cause of health troubles for women. Mostly rural community used "Totkas" system & also prefers the Hakims as compare to doctors for treatment. Mostly areas were not facilitated with health facilities i.e. doctors, in some areas there were dispensaries. Women were performing farms; off-farm and home activities without caring their health that affects their health badly. Following steps need to be taken to enhance their agricultural productivity and to protect their health during farm activities.

Government should conduct workshops, seminars and awareness programs where the farm women are aquatinted with the modern cost effective agricultural techniques & frame some policies that should base on public private partnership/as local community based which benefits and encourage them to spread the agricultural activities. They should be taught about the new knowledge, skills and new techniques for food processing and food preservation of various fruits, vegetables and livestock products; applying different aspects of pesticide applications as well as full awareness about taking of healthy diet in way of education or media system through health & technical personnel.

Lack of education in rural areas affects the development of women. So the education system should improve for women. Girls' schools and colleges should be provided in rural areas and where these educational facilities are existing, there is need to control them (monitoring and supervision) so that these institutions can perform their tasks properly and efficiently.

REFERENCES

- Aggarwal H, Sharma S, Sharma R. A study of agricultural activities performed by rural women and problems faced by them in Jammu District of J&K States. Int J Sci Res Pub 2013; 3:1-3.
- Aslam M, Ali T, Zafar MI, Ahmad M. Training needs of fruit growers regarding pesticide use for sustainable environmental health in Punjab. Pak J Agr Sci 2007; 44:511-8.

- Bhutta RN, Haider J. Effects of economic dependency on decision making power of women in rural areas of Tehsil Dera Ghazi Khan. Int J Acad Res Bus Soc Sci 2013; 3:203-24.
- 4. Butt TM, Hassan ZY, Mehmood K, Muhammad S. Role of rural women in agricultural development and their constraints. J Agric Soc Sci; 6:53-6.
- Cason KL, Snyder A, Jensen L. The health and nutrition of Hispanic migrant and seasonal farm workers. The Center for Rural Pennsylvania, 2004; 200 North Third St., Suite 600, Harrisburg, PA 17101, Pennsylvania.
- 6. Das R, Steege A, Baron S, Beckman J, Harrison R. Pesticide-related illness among migrant farm workers in the United States. Int J Occup Env Health 2001; 7:303-12.
- 7. Frohlich EK, Niebuhr FK, Schrader L, Oester H. What are alternative systems for poultry? A paper presented at 30th poultry science Symposium September 7-9, 2011. University of Strathclyde, Glasgow.
- 8. Gerrior SA, Crocoll C, Hayhoe C, Wysocki J. Challenges and opportunities impacting the mental health of rural women. J Rural Comm Psychol 2002; 11:1-9.
- 9. Govt. of Pakistan 2011. Pakistan economic survey 2010-11. Economic advisor's wing, finance division, Govt. of Pakistan, Islamabad p. 1-166.
- Govt. of Pakistan 2013. Pakistan economic survey 2012-2013. Economic advisor's wing, finance division, Govt. of Pakistan, Islamabad.
- 11. Hansen E, Donohoe M. Health issues of migrant and seasonal farm workers. J Health Care Poor Underserved 2003; 14:153-64.
- 12. Kevin JB, Lopes JE, Spencer K, Hecke S. Rural women's health. National rural health association policy brief 2013, 4501, College Blvd, #225, Leawood, KS 66211-1921. http://www.ruralhealthweb.org/
- 13. Sharma RK, Dhawan S. Health problems of rural women. Health and Population Perspectives and Issues; 1986; 9:18-25.
- 14. Tarar MA, Akhtar S, Zafar MI, Muhammad S. Perceptions, attitudes and practices about reproductive health among young females in Faisalabad District, Pakistan. Prof Med J 2015; 22:81-99.
- Tarar MA, Akhtar S, Khan YN, Akhtar M, Zafar MI, Hussain N. Knowledge and attitude; STIs, HIV, AIDS, RTIS, breast cancer & reproductive health among young females in Faisalabad District, Pakistan. Prof Med J 2015; 22:690-704.

