# Women Workers in Informal Sector in India: Understanding the Occupational Vulnerability

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#### **Abstract**

Unorganised or informal sector constitutes a pivotal part of the Indian economy. More than 90 per cent of workforce and about 50 per cent of the national product are accounted for by the informal economy. A high proportion of socially and economically underprivileged sections of society are concentrated in the informal economic activities [1]. Informal employment is generally a larger source of employment for women than for men in the developing world. Other than in North Africa where 43 per cent of women workers are in informal employment, 60 per cent or more of women workers in the developing world are in informal employment(outside agriculture). In sub-Saharan Africa 84 per cent of women non-agricultural workers; in Latin America 58 per cent for women in comparison to 48 percent for men. In Asia, the proportion of women and men non-agricultural workers in informal employment is roughly equivalent to Women and Men in the Informal Economy [2]. The informal economy in India employs about 86 per cent of the country's work force and 91 per cent of its women workers [3]. Many of these women workers are primary earners for their families. Their earnings are necessary for sheer survival.

Low income women workers, especially in the informal sectorform one of the most vulnerable groups in the Indian economy. The reasons for their vulnerability are-(a) irregular work, (b) low economic status, (c) little or no bargaining power, (d) lack of control over earnings, (e) need to balance paid work with care for children and homework, (f) little or no access to institutional credit, training and information, and (g) lack of assets. Unequal gender relations play a very important role in defining their insecurities. Given their vulnerable status at home and at work, income generation alone may not improve the socio-economic status of women attached to the informal sector. Their economic empowerment needs to go along with political empowerment, which could improve their bargaining power both in household and at work. This means that organizing women workers in the informal economy could have beneficial impacts on their work and their life if such organizationcombines voices representation along with access to resources such as credit and information- a holistic strategy that provides political empowerment allied with economic empowerment. The present study aims at understanding the degree of vulnerability of the women workers in informal sector in India. Towards fulfilling the objective, a small study has been conducted in the State of Odisha, to find out the realities. Results suggest that a highly visible percentage of occupational group irrespective of their monthly average income, continue to face multiple constraints which otherwise compel them to live a life full of compromises.

**Keywords** – Informal Sector, Women Workers, Gender Discrimination, Migration, Degree of Vulnerability

## I. Introduction

A great majority of people in the developing nations are under the line of poverty. They are deprived of adequate access to the basic needs of life such health, education, housing, food, security, employment, justice and equality. Issues of sustainable livelihood, social and political participation of the vulnerable groups exists as the major problem in the developing nations. Governments have failed to guarantee people's right in the implementation level. People who belong to the vulnerable groups are unable to acquire and use their rights(Chatterjee&Sheoran 2007) [4]. Human right applies universally to all.

The process of identifying vulnerable groups within the health and human right generated from the pressing reality on the ground that stemed from the fact that there are certain groups who are vulnerable and marginalized lacking full enjoyment of a wide range of human rights, including rights to political participation, health and education. Vulnerability within the right to health framework means deprivation of certain individuals and groups whose rights have been violated from the exercising agency (Yamin, 2005)[5]. Certain groups in the society often encounter discriminatory treatment and need special attention to avoid potential exploitation. This population constitutes what is referred to as Vulnerable Groups. Vulnerable groups are disadvantaged as compared to others mainly on account of their reduced access to medical services and the underlying determinants of health such as safe and potable drinking water, nutrition, housing, sanitation etc. (Chatterjee&Sheoran 2007)[4].

Quality of employment has been one of the main concerns in labour market studies in developing countries. In India, the reported status of a worker as "employed" does not necessarily imply a reasonable level of earnings; nor does it reflect the status of living of workers. This is particularly evident from the fact that while the unemployment rate even by the highest estimate was 8.3%, the percentage of people below the poverty line was as high as 28% in 2004-05. It essentially implies that the problem in India is not only of unemployment but also of low productivity of work in which the poor are engaged. "Inclusive growth" being one of the central concerns of the growth process India is presently following, improving the quality of work and raising levels of living standards of workers occupy the central place in the overall growth process [6]. This will definitely open up avenues towards reducing the occupational vulnerability of informal women workers at large.

# II. Employment in the Informal Sector

An important aspect of quality of employment in India is the predominance of the informal sector. The size of the organised sector, characterised by higher earnings and job security is small, it accounted for less than 6% of the total employment in 2004-05. Around two-thirds of the total organised sector employment is in the public sector. Over the years, organised sector employment has grown more slowly than the total employment, reflecting the faster growth of employment in the unorganised sector. As a result, there has been increasing informalisation of employment over the years. This informalisation has been more pronounced in the case of female workers. As a whole, about 96% of female employment is in the unorganised sector as against about 91% of males. In urban areas, the percentage of unorganised sector workers is close to 65-70%. Not all of them are poor but crude estimates suggest that close to half of this number is in dire need of occupational up-scaling.

A large proportion of the workers engaged in the urban unorganised sector is migrants from rural areas with poor educational, training and skill background and are employed in low-paying, semi-skilled or unskilled jobs. The productivity and earning levels in most of the enterprises are low and do not often provide full time work to those engaged. For the employees, the working environment is not conducive; working hours are long and most of the conditions of decent employment (e.g. paid leave, pension, bonus, medical support and health insurance, maternity leave benefits, compensation against accident, etc.) are nearly non-existent. The past trends and all the available evidence suggest that the bulk of the growth in employment in future will come from the unorganised sector. It will be an important challenge to ensure that employment in this sector consists of jobs with safe conditions of work, decent and growing earnings and a measure of income and social security. Moreover, increasing the proportion of organised sector employment will be an important task to accomplish in the near future [6].

## III. Categories of Workers in the Informal Sector

Indian economy has preponderance of informal and unorganised sector both in terms of number of workers and enterprises. This segment of economy has inbuilt vulnerabilities, and the study of unorganised sector based on reliable data is important for informed decision making and addressing the problems faced [7]. The biggest problem with the informal sector in India is that here is no precise information about the total number of workers what to say of women engaged in this sector and also their respective ratios in various diversified occupations. The Report of the National Commission for Enterprises in the Unorganised Sector highlights the existence and qualification of unorganised or informal workers, defined as those who do not have employment security, work security and social security. This universe of informal workers now constitutes 92 per cent of the total workforce. Informal wage employment is comprised of employees of informal enterprises as well as various types of informal wage workers who work for formal enterprises, households, or who have no fixed employer.

The women workers in the informal sector work as piece rate workers, self-employed workers, paid workers in informal enterprises, unpaid workers in family business, casual workers without fixed employers, sub-contract workers limited to formal enterprises. Home-based workers and street vendors are two of the largest sub-groups of the informal workforce: home-based workers are numerous but street vendors are more visible of the two. Taken together they represent an estimated 10-25 per cent of the non-agricultural workforce in developing countries and over 5 per cent of the total workforce in developed countries (World Bank, 2000). On the basis of previous researches and other reports, following categories of women workers in the informal sector have been identified:

- 1. Rag Pickers:Rag Picker is a person who salvages reusable or recyclable materials thrown away by others to sell or for personal consumption. There are millions of waste pickers worldwide, predominantly in developing countries. Forms of rag picking have been practiced since antiquity, but modern traditions of waste picking took root during industrialisation in the nineteenth century. Over the past half-century, waste picking has expanded vastly in the developing world due to urbanisation. Over the past half century, in-country migration and increased fertility rates have caused the population of cities in the developing world to mushroom. The global population of urban dwellers is expected to double between 1987 and 2015, with 90% of this growth occurring in developing countries. Much of the new population has settled in urban slums and squatter settlements, which have expanded rapidly with no central planning. The United Nations Habitat Report found that nearly one billion people worldwide live in slums, about a third of the world's urban dwellers.
- 2. Domestic Workers: in 1977-78, there were some 1.68 million female domestic workers, while the number of male workers was only 0.62 million. With the rise of the middle class in India, domestic work has emerged as an important new occupation for migrant women and girls. Some 20 million people (mainly women and girls) migrate for domestic work to Mumbai, Delhi and other large cities from the eastern states of Bihar, Orissa, Chhattisgarh, Jharkhand, Assam and Mizoram (Social Alert quoted in SCF 2005). Roughly 20% of these workers are under the age of 14. A study of domestic workers in Delhi (Neetha 2004)[8] shows that although domestic work has brought higher incomes to many women and their families it is still far from decent work being characterised by long working hours, low wages and hardly any social security. Domestic workers are more vulnerable than other kinds of workers because they are not officially classified as workers at all and are therefore not covered by laws that apply to workers.
- **3.** Coolies:women coolies basically do the job of loading/unloading of packages being received at railway stations to warehouses and from warehouses/go downs to further distribution centres. Coolies do their job by lifting the packages upon their heads and compensated with 'par bag' price which is fixed by govt/private go down keepers.
- **4. Vendors**: this is the most scattered category, which includes women engaged in selling different types of commodities, like broomsticks, cane baskets, utensils, petty cosmetics, bangles, vegetables and those running roadside tea stalls, etc. Nearly 40% of total vendors are women and 30% of these women are the sole earning members in their families.
- 5. Beauticians: A large number of women are employed as beauticians. A large portion of the beauty saloons/parlours fall under the unorganised sector and are characterised by informal employment. According to a study on Human Resource and Skill Requirements in the Unorganised Sector: mapping of human resource skill gaps in India till 2022 carried out by National Skill Development Corporation, Mumbai, the demand for personal care/body care would drive the demand for beauticians. Those workers arefurther divided in two categories, those who are having their own body fitness centre and multi gyms attached to their dwelling places, those working as helpers to the main beauticians within tastefully decorated/air conditioned parlours. They provide services like dressing the hair, waxing the hands and legs, doing facials, dying the hair, make ups and Mehdi, threading the eyebrow and face etc.
- 6. Construction Labourers: the construction industry provides direct employment to at least 30 million workers in India (Chen 2007)[9] but recent expansions (before the economic crisis) has resulted in a higher number: trade unions estimate that there were roughly 40 million migrant construction workers in India in 2008 (Sarde 2008)[10]. Construction attracts both skilled workers (masons, carpenters) and unskilled workers and although there is some scope for upward mobility, poorer and lower caste/tribe migrants tend to remain in low-paid unskilled jobs. This is because of discrimination which deprives them of opportunities to gain skills. Women work mainly as unskilled workers.

7. Garment Workers: the garment industry is a sub-sector of the textile industry and also generates many jobs for migrant workers. India's readymade garment exports increased significantly as a share of total exports (12% or Rs 254,780 million in 2001-2). There were 1,001,000 garment workers in 2004 (Mezzadri 2008)[11]. Those women work with some big drapers, boutiques and stores. Here toothe same bias is evident. The women work as helpers to male/femaletailors (called as masters). These workers include those involved in knitting clothes/woollens.

# IV. The Survey

In order to get a deeper understanding of the phenomenon a field survey was conducted over a period of six months in the following carefully selected Municipalities and Notified Area Councils (NACs) of Odisha, which is one amongst the poorer States in India:(a) Balasore Municipality (District HQ) (b) Baripada Municipality (District HQ Mayurbhanj) (c) Bhadrak Municipality (District HQ) (d) Soro NAC and (e) Udala NAC.

In general, poorer states such as Bihar, Chhattisgarh, Jharkhand, Orissa and Uttar Pradesh have high proportion of workers engaged in casual work and very low proportion of regular employment. In contrast to this, developed states such as Maharashtra, Tamil Nadu, Punjab and Delhi have high proportion of regular employment (Table 1).

Table 1: Classification of Major States according to Percentage of Regular Employment to total Employment 2004-05

very low, less than 10%	Low, 10 to 15%	Medium, 15% to 20%	High, 20% and above
Bihar, Chhattisgarh, Jharkhand, Orissa, Uttar Pradesh	Rajasthan, Madhya Pradesh, Assam, Andhra Pradesh, Karnataka, Uttaranchal, Himachal Pradesh, West Bengal	Jammu and Kashmir, Gujarat, Kerala, Haryana	Maharashtra, Tamil Nadu, Punjab, Delhi,

Source: NSSO Survey, 2004-05, reproduced in Annual Report to the People on Employment, GOI, Min of Labour & Employment, 01 Jul, 2010.

In view of the above mentioned important reason, the study area has been delimited toOdisha, where most of the self-employed workers are engaged in subsistence agriculture leading to low levels of living.Lack of regular employment is also linked with the backwardness of region.Women workers engaged in various occupations, such as, rag picking, household work, construction work, garment making, beauticians and others were interviewed through semi structured questionnaire. These workers were interviewed on the following aspects of their occupation:

- ❖ Personal information, like religion and caste, age, marital status and age at marriage, education status & level of education, type of family, family size, education of father/husband, employment status of father/husband, education of children, number of married children, working status of children, migratory status, numbers of earning members in the family, family income, structure of payment, women's contribution to the total family income, expenditure, indebtedness, sources of debts and purpose of debts etc.
- Living and working conditions, like housing conditions, type of accommodation, type of house, number of living rooms, ventilation in the house, separate kitchen facility, water supply conditions. Overall sanitation conditions, drainage of water, household waste disposal, electricity provisioning, type of work, working hours, period of occupation, condition at work place and compulsion to work etc.
- ❖ Problems associated with the work, like problems at home front, conflict between household and paid work, treatment given by husband, attitude of other family members, sharing of earnings, participation in household decision making, domestic violence, attitude of employers, sexual harassment, heavy workload, low wages, leave arrangements, women's common illnesses, women's specific illnesses etc.

For collection of information semi-structured interview methods was adopted. These workers were contacted at their work place such as construction sites. The purpose was to have an exact view of the conditions of women workers engaged in various occupations. To survey the conditions of household workers, the group habitats only of these workers situated in the various parts of the cities were visited. In these habitats were found some petty retail traders as some of these poor women preferred to sell vegetables or run petty shops of miscellaneous goods near their residence instead of working in the households. The women traders sitting along the road side and selling variety of goods were also interviewed. It was not easy task to contact the beauticians as they never allow any male members into their parlours (work places), they could be reached only on personal requests wherever necessary. Women coolies were contacted with the cooperation of middlemen who provide them work.

A total of 500 workers were interviewed, including 132 rag pickers, 108 domestic workers, 79 coolies, 60 vendors, 56 beauticians, 42 construction labourers, 23 garment workers. Since the sample was theoretical and could not be used for the purpose of statistical analysis, information was also collected on the basis of unstructured interviews. Therefore qualitative analysis has been adopted to reach conclusions.

Table2: Profile of Women Workers in the Informal Sector

Sector/Group	Reasons for a particular Employment	Priority Issues	Wages	Organising Challenges
Rag Pickers	Economic compulsion, Unskilled, Drunkard/Non coopering Husbands, Only job available near residence	Health & Safety, End to exploitation by middlemen	Per Kilogram(Commission)	Competition among selves, fear of losing work, Not protected by labour law
Domestic Workers	Economic compulsion, Unskilled, Drunkard/Non coopering Husbands	Recognition as worker, better living conditions, protection against dismissal	Negotiable	Isolated & invisible in homes, Fear of employers & losing jobs, Not protected by labour laws
Coolies	Economic compulsion, Unskilled, Drunkard/Non coopering Husbands	Identifying employer, end to exploitation by middlemen	Contractual	Often in scattered location, dominated by men in sector, child care and home care
Vendors	Economic compulsion, find the pride in being self-employed,, Unskilled	Facilities-storage, shelter, toilet, water, protection against police, harassment, safety & security	Uncertain	Not regarded as workers by selves and others, No forums for bargaining
Beauticians	Find the pride of being self-employed, helping hand to husband, savings for children's higher education	Excessive overtime, lack of institutional support	Uncertain, Net Profit basis	Lack of time, child care and home care, health issues
Construction Labour	Economic compulsion, No other skills, Drunkard/non cooperating husband, No other options	Identifying employer, end to exploitation by middlemen	Daily wages	Often in scattered location, dominated by men in sector, child care and home care
Garment Workers	Economic compulsion, Can work at home	Living wage, right to organise, excessive overtime, security of employment	Work based(Commission)	Women workers are seen as "seasonal", "supplementary" wage earners, Harassment of trade unions

**Source: Based on Field Survey (2011-2012)** 

#### V. Findings

In India there are multiple socio-economic disadvantages that members of particular groups experience, which limits their access to service sector provisions likehealth, healthcare and education.

The task of identifying the vulnerable groups is not an easy one. Besides there are multiple and complex factors of vulnerability with different layers and more often than once it cannot be analysed in isolation. Basing upon the earlier derived findings (Chatterjee&Sheoran 2007) as regards to the fact that vulnerable groups are disadvantaged as compared to others mainly on account of their reduced access to medical services and the underlying determinants of health (safe and portable drinking water, nutrition, housing and sanitation). The present research findings are based on two significant determinants of vulnerability related to informal women occupation in India: (a) migration issue (b) structural factors.

# Vulnerability due to Migration

Inter-district and inter-state short term migrant workers are yet another less advantaged group in labour market working for a subsistence living. Different micro studies indicated that incidence of short term migration is particularly high from states such as Bihar, Orissa, Uttar Pradesh, Rajasthan, and Madhya Pradesh. Moreover, most of the studies also indicated that over the years incidence of such migration has increased giving significant rise to urban unorganised economy. A study by Kundu (2009)[12] notes that "all these are leading to rapid growth in urban population in several countries, most of the migrants being absorbed within informal economy".

This population is at high risk for diseases and faces reduced access to health services. In India, 14.4 million people migrated within the country for work purposes either to cities or areas with higher expected economic gains during the 2001 census period. Large numbers of migrants also work in the urban informal manufacturing construction, services or transport sectors and are employed as casual labourers, head loaders, rickshaw pullers and hawkers. The rapid change of residence due to casual nature of work excludes them from the preventive care and the working conditions in the informal work arrangements in the city debar them from access to adequate curative care (Chatterjee&Sheoran 2007). Women and child migrants are the most vulnerable. In the case of internal migration in India, women and children mostly migrate as associated migrants with the main decision to migrate being taken by the male of the household. As associated migrants, they suffer greater vulnerability due to reduced economic choices and lack of social support in the new area of destination. In the case of semi-skilled, low-skilled or unskilled women migrants, this can translate into their entry into the low paying, unorganized sector with high exposure to exploitation and abuse.

Table 3 represents the migratory status and migratory origin in respect of the study population. The data shows that 53 per cent out of the total sampled respondents have migrated to the city in search of employment and with a hope of enjoying better economic privileges in the urban informal sector. Further, out of total migrated population almost 52 per cent migrated from other districts followed by 33 per cent from the neighbouring states and 16 per cent from the adjoining locations of study areas. Amongst individual occupations, coolies and rag pickers have their highest representation in terms of being migrated (more than 90 per cent in both the cases) as compared to other occupations. Thus, in the light of thestatements mentioned hitherto, there is no exaggeration in accepting the reality that migration has brought enormous plights to the already deteriorated status of informal women workers thus making their socio economic conditions more vulnerable.

Table 3: Migratory Status & migratory Origin of Informal Women Workers (In Percentages)

	No of	07.000	Ologo Not	Number	Origin of Migration(in %age)				
Occupations	Respondent s	%age Migrated	%age Not Migrated	Migrated	Around the Study Area	Other Districts	Beyond the State		
Rag Pickers	132	93.18	6.82	123	13.82	15.45	70.73		
Domestic Workers	108	14.81	85.19	16	75	25	0		
Coolies	79	100	0	79	0	100	0		
Vendors	60	3.33	96.67	2	100	0	0		
Beauticians	56	1.79	98.21	1	0	100	0		
Construction Labour	42	100	0	42	21.43	78.57	0		
Garment Workers	23	8.7	91.3	2	0	50	50		
Total	500	53	47	265	15.09	51.7	33.21		

**Source: Based on Field Survey (2011-2012)** 

Further, the poor and unskilled migrant population on the other hand are destined to be excluded from the fabric of the host areas. For those migrantworkers, the intersection of human rights and migration is a negative one, with bad experiences throughout the migratory 'life cycle', in the areas of origin and destination. The intersection of health and human rights becomes even more complex when irregular or illegal migration clashes with the interest of the area of destination. Cases of exploitation of migrants by employers, smugglers or traffickers in such cases never meet justice. Those illegal migrants often live on the margins of society, trying to avoid contact with authorities and have little or no legal access to prevention and healthcare services. They face higher risks of exposure to unsafe living and working conditions. More often they do not approach the health system of the host areas for fear of their status being discovered.

Table No 5, adequately focuses light upon the deteriorated living conditions of informal women workers across the study areas. A highly visible percentage of women workers continue to face multiple constraints, that otherwise compels them to live a life full of compromises and most of their own access in terms of right to life is subsidized.

	ts	Poo	r Housin	g Condit	ions			Water &	& Sanita	tion Co	nditions		
Informal Sectors	Sampled Respondents	Kutcha House	Less than 2 rooms	Not Proper Ventilation	Cooki ng in Multi- purpos e Room	Average	Water source outside premise s	Toilet facilit y outsid e premi ses	Drain age does not exists	Road side	Dispos al around the house	In the drain	Average
Rag Pickers	132	100	53.79	100	37.88	72.92	100	100	100	1.52	98.48	0	66.67
Domestic Workers	108	82.41	49.07	82.41	60.09	68.52	99.07	85.19	35.19	10.19	54.63	35.19	53.24
Coolies	79	89.87	43.04	100	17.72	62.66	100	100	97.47	35.44	49.37	0	63.71
Vendors	60	30	25	65	18.33	34.58	55	73.33	38.33	41.67	23.33	10	40.27
Beauticians	56	0	1.79	0	0	0.44	0	0	14.29	0	23.21	0	6.25
Constructi on Labour	42	100	26.19	100	40.48	66.67	100	100	71.43	30.95	40.48	28.57	61.91
Garment Workers	23	13.04	4.35	39.13	34.78	22.83	86.96	82.61	8.7	30.43	21.74	0	38.41
Total	500	71	37.2	78	33	54.8	82.6	81.6	62	17.2	55.4	11.2	51.67

**Table 4: Informal Women Workers Living Conditions (In Percentage)** 

**Source: Based on Field Survey (2011-2012)** 

There is no fixed working hours of the informal women workers in the research area. Most of them reported having their working hours at their own convenience. Beauticians have their own working hours; vendors have been reported seen waiting for their clients until 10 pm at night in important locality, garment workers have their own timing depending upon their work loads. Domestic workers having their own workloads; decide how many household they shall visit. Rag pickers have no working hours. They work till their bags say no to them. Coolies have also no working hours as they work on contractual basis. There is no common working hours for all the women sampled respondents. They leave their dwellings at about 6 am and come back home almost at 9 pm.

Upon perusal of table 5.8 ventilates that almost 26 per cent respondents work for 1-4 hours, 46 per cent work for 5-8 hours, 26 per cent for 9-12 hours and nearly 2 per cent work for more than 12 hours. Even sometimes they are to work throughout the night on contractual basis if the work demands. Though laws prescribing working hours are there, they are not enforced. Further results from the present research have confirmed that there are lots of others barriers like attitude of employers, sexual harassment, and low wages, which continue to add further worries to their already aggravated vulnerable occupations.

Table5: Working Hour (Per Day) (In Percentages)

No. of Sampled Respondents	1 to 4	5 to 8	9-12	>12
500	25.8	46.2	26.4	1.6

**Source: Based on Field Survey (2011-2012)** 

The informal women workers most of them belonging to the low economic strata, are extremely vulnerable to ailments and diseases. Poor housing, and sanitation, lack of adequate and portable water supply; unhygienic surroundings of the living and working area are some of the factors that affect the health of the respondents. Table 6 shows some of the frequently reported common illnesses by women respondents. Most of them reported weakness (66 per cent), cough and cold (64 per cent), malaria (26 per cent), Skin diseases (37 per cent), gastric ulcer (5 per cent), worm (42 per cent) Jaundice (21 per cent). These diseases are the result of poor environmental conditions both at living and working place and bad dietary habits and malnutrition. Very few of them reported of occurrence of diseases related to high life styles like diabetes (1.4 per cent) and hypertension (6.2 per cent). Occupation wise prevalence and distribution of common illnesses are presented in the same table.

Table 6: Informal Women Workers having reported Common Illnesses (In Percentage)

Informal Sectors	Res pondents	&age of resp ill out of total resp in that sector	ı an	Diabet	Fever	Gastric Ulcer	Headache	Hypertension	Jaundice	Malaria	Piles	Restless	Skin Disease	TB	Typhoid	Weakness	Worm	Average
Rag Pkrs	125	94.7	75.76	0	75.76	9.09	45.45	0	60.61	68.18	45.45	83.33	75.76	22.73	37.88	94.7	68.8	50.86
DomWkrs	90	83.33	83.33	0	83.33	2.78	4.63	4.63	5.56	9.26	9.26	27.78	13.89	13.89	9.26	46.3	55.56	24.63
Colies	65	82.28	37.97	0	37.97	6.33	75.95	6.33	7.6	6.33	3.8	56.96	37.97	12.66	31.65	82.28	31.65	28.61
Vndor	40	66.67	66.67	3.33	66.67	0	20	20	5	2.5	5	25	20	0	5	50	5	19.61
		33.93																
Beauticians	19		28.57	3.57	12.5	1.79	21.43	17.86	0	1.79	3.57	26.79	3.57	0	1.79	33.93	0	10.48
		88.1																
Const. Lbrs	37		76.19	0	76.19	11.9	50	0	23.81	50	69.05	33.33	73.81	59.52	59.52	88.09	71.43	49.52
GrmtWrkrs	15	65	43.48	13.04	43.48	0	39.13	13.04	4.35	4.35	21.74	21.74	0	4.35	4.35	65.22	8.7	4.4
Total	391	78.2	63.6	1.4	61.8	5.2	35	6.2	21	25.8	22.2	45.8	37.2	16.2	22.8	66.2	41.8	31.48

Source: Based on Field Survey (2011-2012)

#### **Vulnerability due to Structural Discrimination**

Structural discrimination refers to rules, norms, generally accepted approaches and behaviours in institutions and other social structures that constitute obstacles for subordinate groups to the equal rights and opportunities possessed by dominant groups. Such discrimination may be visible or invisible, and it may be intentional or unintentional. Women workers in informal sector within the class of workers treated as inferiors, determined by structural factors to their social status and economically productive strata to which they belong to. In India, women workers in informal sector experience structural discrimination that impact their health and access to healthcare. Women workers face double discrimination being member of specific caste, class or ethnic group apart from experiencing gendered vulnerabilities. In India, early marriage and childbearing affects women's health adversely. About 28 per cent of girls in India get married below the legal age and experience pregnancy [13]. These have serious repercussions on the health of women.

A perusal of table 7 shows that most of the women workers reported of suffering from anaemia (15 per cent), PID (Pelvic Inflammatory Diseases, 5 per cent), UTI (Urinary Tract Infection, 53 per cent), DUB (Dysfunctional Uterine Bleeding, 9 per cent), Septic (8 per cent), backache (62 per cent), Infant Mortality (0.6 per cent), Prolapse (6 per cent). Very few reported suffering from breast cancer (0.6 per cent). Their ignorance regarding these diseases was mainly due to illiteracy and also because women workers never visit qualified doctors for regular check-ups. Occupation wise distribution of reported women specific illnesses is shown in the same table.

Table7: Informal Women Workers having Women Specific Illnesses(In Percentages)

Informal Sectors	No of sample respondents	No of sample respond ents having specific illness	%ge of d total resp in that sector having	DUB	PID	ITU	Backache	Septic	Anaemia	Infant Mortality	Prolapse	Breast Cancer	Average
Rag Pickers	132	95	71.97	13.64	4.55	71.97	70.45	6.06	23.48	0	7.58	0	21.97
Domestic Workers	108	80	74.07	13.89	4.63	74.07	55.56	6.48	9.26	0.93	5.56	0	18.93
Coolies	79	60	75.95	11.39	10.13	75.95	63.29	7.59	18.99	2.53	6.33	0	21.8
Vendors	60	40	66.67	0	5	25	66.67	11.67	13.33	0	6.67	0	14.26
Beautici ans	56	17	30.36	0	1.79	0	30.36	5.36	3.57	0	5.36	1.79	5.36
Constru		2.7	83.33										
ction Labour	42	35		4.76	4.76	35.71	83.33	14.29	11.9	0	2.38	0	17.46
Garment Workers	23	15	65.22	4.35	4.35	0	65.22	13.04	8.7	0	13.04	8.7	13.04
Total	500	342	68.4	9	5.2	53	62	8	14.6	0.6	6.4	0.6	17.71

**Source: Based on Field Survey (2011-2012)** 

Pregnancy can mean serious problems to many informal women workers because of their low socio-economic status, low intake of balanced diet, illiteracy and ignorance, social and traditional biases, consulting unqualified persons like dhai (midwife) no antenatal check-ups by qualified doctors etc. Table 8 shows that 60 per cent women workers reported of not going for antenatal check-ups. Monthly antenatal check-ups for them mean loss of the day's work and wage. Most deliveries and abortions are conducted at home bydhai(59 per cent). Due to this India have a high mortality rate and many women die due to pregnancy related causes. The major causes of maternal mortality were anaemia, haemorrhage, sepsis, obstructed labour, abortions etc.

Table 8: Antenatal Care and details of Institutional Delivery Pattern

	No of	Antenata	l Care	Delivery& Abortion Conducted by			
Informal Sectors	married Respondents	Yes	No	Doctors	Dhai	Relatives/Neighbours	
Rag Pickers	132	45.45	54.55	40.54	59.46	0	
<b>Domestic Workers</b>	90	28.89	71.11	28.71	63.37	7.92	
Coolies	60	20	80	21.52	78.48	0	
Vendors	55	38.18	61.82	52.38	47.62	0	
Beauticians	43	93.02	6.98	100	0	0	
<b>Construction Labour</b>	33	0	100	0	100	0	
<b>Garment Workers</b>	18	77.78	22.22	77.78	22.22	0	
Total	431	40.14	59.86	39.63	58.11	2.26	

**Source: Based on Field Survey (2011-2012)** 

## VI. Analysis and Discussion

Women workers in informer sector, on account of their poor and unhygienic living and working environment bear the inordinate share of health burden. There is no exaggeration in accepting the fact that women workers in informal sector are vulnerable. However an attempt has been made to group the informal women workers under three different heads according to the degree of vulnerability:(i) Most Vulnerable (ii) More Vulnerable (iii) Vulnerable.

This grouping has been made by analysing the level of poor living and working conditions and the level of health status as reported by the informal women respondents in the study area. The "most vulnerable group" comprises of those informal sectors whose constituent respondents satisfy the following two criterions simultaneously: (i) more than 60 per cent of them reported of having poor living and working conditions; (ii) more than 20 per cent of them reported of having poor health status. This group hence comprises of rag pickers, construction workers, coolies and Domestic Workers. The "more vulnerable" group comprises of those informal sectors whose constituent respondents satisfy the following two criterions simultaneously: (i) more than 30 per cent but less than 60 per cent of them reported of having poor living and working conditions; (ii) more than 8 but less than 20 per cent of them reported of having poor health status. This group hence comprises of Vendors and Garment Workers. The "vulnerable group" comprises of those informal sectors whose constituent respondents satisfy the following two criterions simultaneously. (i) more than 3 per cent but less than 30 per cent of them reported of having poor living and working conditions; (ii) more than 7 per cent but less than 8 per cent of them reported having poor health status. This group hence comprises of women beauticians only. Data for vulnerability analysis are presented in the following table:

 Table 9: Vulnerability of Informal WomenWorkers (In Percentage)

Category	Percentage of women workers	Informal Sectors			
I- Most Vulner	able	Rag Pickers,			
Poor Living & working conditions	>60	Construction Labourers, Coolies,			
Health Effects	>20	Domestic Workers			
II-More Vulner	rable				
Poor Living & Working Conditions	>30 but <60	Vendors, Garment Workers			
Health Effects	>8 but <20				
III-Vulnerable					
Poor Living and Working Conditions	>3 but <30	Beauticians			
Health Effects	>7 but <8				

**Source: Based on Field Survey (2011-2012)** 

# VII. Conclusion

Unorganised sector work is characterised by low wages that are often insufficient to meet minimum living standards including nutrition, long working hours, and hazardousworking conditions, lack of basic services such as first aid, drinking water and sanitation at the work sites. Findings show that poverty is a multidimensional concept implying not only lack of adequate income, but a host of other facts such as lack of choice, sense of powerlessness, vulnerability, and lack of assets, insecurity and social exclusion. In the light of the above considerations, the present study, across the cross cutting occupational response based on the findings, infers that socio-economic determinants like education, health and healthcare are descriptive about basic minimum access to development by the stakeholders irrespective of the type of occupation adopted by them. Contextually, we find that a highly visible percentage of women workers continue to live a life full of subsistence, compromises and most of their own access in terms of right to life is subsidized. The most important determining factor to such inaccess and denial primarily evolves out of poor literacy and lack of awareness resulting in self-exclusion from the mainstream opportunities.

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