CHAPTER VII

DISCUSSION AND CONCLUSION
On the basis of the findings from our study there are some crucial debates on development, poverty and health, to which we can contribute. However, before doing that we would first like to highlight the main differences that emerge between the developed and backward blocks of the study area.

Our study shows that a majority of agricultural labourers are drawn exclusively from lower castes i.e., scheduled castes and scheduled tribes.

First of all, the proportion of agricultural labourers among total main workers is found to be relatively high in both the study villages of the advanced block compared to both the study villages of the backward block. Secondly, across the study villages, the participation of women in comparison to men in agricultural labour is found to be low. However, the proportion of female agricultural labourers is relatively higher in both the villages of the advanced block than in both the villages of the backward block. In the villages of the backward block the literacy among women is almost nil. The incidence of landless agricultural labour
households in both the villages of the advanced block is higher than in the villages of the backward block. The proportion of agricultural labour household leasing in land is relatively small in both the villages of the advanced block, compared to both the villages of the backward block.

While daily wage labourers constitute the bulk of agricultural labourers, the proportion of attached/annual contract labourers is very small. Nevertheless, the proportion of attached labour is relatively high in both the villages of the advanced block compared to both the villages of the backward block. The incidence of semi-attached labourers who are employed as ploughmen is relatively high in both the villages of the backward block. Though considerable number of agricultural labourers take up subsidiary occupation to supplement their income, their proportion is relatively small in both the villages of the advanced block compared to both the villages of the backward block. The difference is an indicator of the greater need for regular labour in advanced block among peasant. Average land holding among agricultural households is smaller than the average holding of the marginal farmers.
It is undeniable that total food production in India has increased since its independence. There has been extensive discussion on slow transformation of the Indian agricultural economy and the current trends.

Against the substantial achievement in terms of food production, there has been some adverse consequences. As Utha Patnaik (1991) pointed out, at one level, the green revolution has been regionally concentrated in particular states in northern India i.e. Punjab, Haryana and Uttar Pradesh and some irrigated districts of other states; and at another level, higher degree of concentration of investment in green revolution techniques while benefiting a minority of emerging capitalist farmers, has failed to have a trickle down effect to benefit the rural poor who are in majority.

As the data reveal, the agrarian structure in our study villages is characterized by extreme concentration of landed property, with a small minority of households who own a major share of cultivable land, and a majority owning a minor share. Besides a significant proportion of rural households are found to be landless.
The prevalence of landlessness and the skewed nature of distribution of land have certain negative consequences for the rural employment. The struggle for survival becomes acute and compels some of the rural workers to enter into an agrarian wage labour market.

The demand for labour in agriculture is irregular and inadequate. Both alaga / upuri mulia who are the daily wage labourers and halaparia / langalia who are semi-attached labourers are vulnerable in terms of employment opportunities within agriculture. The situation is more vulnerable in the study villages of the backward block. Nonetheless, labourers from study villages irrespective of this agricultural development seek employment outside agriculture in the study villages. The most important non-agricultural activity in terms of both the extent of employment opportunities and levels of earnings, is earthmoving. It is ironic to point out that those who are not young and energetic are unable to take advantage of such work.

The lack of work within agriculture is not sufficiently
counterbalanced by the demand for the labour in the non-agricultural sector. As a result, beginning of early September to early November remains the most slack period in both the categories of the study villages. As a result, many are forced to migrate to urban areas during the period to seek work.

A halaparia / langalia, a semi-attached labourer, who is in principle employed under a contract for part of the year does not have any security of work even during the contract period. They continue to work with the same employer beyond the contract period, however, on a 'beck and call' basis. Though he is paid on a daily basis, but unlike that of daily wage-labourers there is no enhanced wage-rate during the peak period.

On the other hand, the annual contract labourers, i.e, both baramasia and sarimulia / petabhatua who work under one year contract remain unfree for the whole year, and cannot supplement their earnings by working elsewhere.

Eventhough, a Petabhatua / sarimulia goes back to his house, unlike a baramasia, the working hours for him is
irregular and longer. The daily wage labourers are sometimes required to work at a stretch without any rest break. They remain under threat of losing their wages if the work is abandoned due to bad weather. Further these daily wage labourers are not paid as per the official minimum. Moreover, disparity in the wages remains a fact in terms of gender classification. Women are paid less as compared to men.

Hence, it is one of the major findings that despite variations in the conditions of employment of different categories of agricultural labourers, they have a central commonality. This is the economic insecurity which underlies all their efforts and non-efforts. The differences do not alter the fact that this section of the people remains vulnerable throughout the year in varying degrees. What is pertinent is the finding that this is true for the villages from both the backward and the developed blocks.

Barring few exceptions at the two extremes majority of the agricultural households in the study villages both from advanced and the backward blocks represent a homogeneous
class in terms of quality of life. The food they eat, the clothes they wear and the type of house they live in are of a standard that is detrimental to the health of these people.

The income of the agricultural labourers being so meagre, it is the necessity to subsist that guides their expenditure, and there is hardly any problem of preference as regards goods and services on which money should be spent. From the meagre income it becomes very hard to meet the bare necessities of life, i.e., food, clothing and shelter. The major portion of their income is spent on food. But their food hardly includes any substantial amount of pulses, vegetables and meat etc. For these people while availability of food means availability of rice (as of everyone else in the study villages), there is always deficit in their food intake when the situation is otherwise normal. For these people, less work means less food. Whenever there is a crisis/ceremony, they are forced to eat less or quite often go without it. When these people do not get enough to eat all round the year, it is not difficult to imagine the quality of their diet.
The consumption of pulses is really negligible. Hiking price of cooking oil affects the consumption level to the extent that in the majority of such households, the daily consumption of cooking oil is very-very low. Keeping chicken is a common activity among these people. Some households rear one or several goats, or perhaps a milch cow. In fact, not surprisingly, a chicken or a goat or milk from a cow is not for their own consumption but to supplement their income. Hardly once in a year, they may afford to have some goat meat or poultry. The possibility of balanced diet never occurs in their life.

The agricultural labourers’ growing inability to maintain themselves and their families with their meagre earnings is of a degree that even clothing for themselves and for their families sometimes becomes an impossible task. In case of men to remain bare chested and bare-foot is not an unusual sight. The only clothing for many is a loin cloth tied up short. In rare cases, some of them wear a torn shirt or a vest which they even take off before starting work in the field. Women wraps themselves in sari; no
blouse no petti coat, nothing else. It becomes difficult on their part to manage with single sari during monsoon. The children in such households roam around halfnaked. Even during winter, the entire family sleep on a mat covered with a low quality quilt made by sewing up tattered rags. Due to their inability to provide adequate clothes to their children, sometimes, they make sacrifice. Sprayer operators do not wear any protective clothes but wear the same clothes as other workers.

On the whole, the houses the agricultural labourers live in, are almost fragile, dilapidated and small thatched huts needing immediate repair. Repair of the houses is almost beyond their affordability. Moreover, these houses lack proper ventilation as the windows are too small to let adequate light-to come. In many cases, houses lack proper doors which further adds to their woes during the winter. As almost entire family sleep on the floor they are always at a risk of insect bite. The rooms which are generally very small not only accommodate several members at a time but also provide shelter to hens and goats which are kept inside at night to avoid theft. One can imagine the hygienic
condition of the room they live in. Their inability to rethatch the house every year cause them hardship during monsoon. The unthatched part experiences seepage of rainwater. These people spend their night occupying a corner which is atleast partly free from water drops. While in summer there is a scarcity of drinking water, during monsoon water becomes unsafe for drinking purpose. Water with all impurities join underground water and pose a serious health hazards to the people. Most of the houses are located in areas with very poor drainage. Life during monsoon becomes hell for these people. Animal excreta further adds to it. As a result, the entire area, surrounding their houses becomes a breeding ground for mosquitoes. These labourers use public places for defecation. The women folk generally go for defecation early in the morning while it is still dark and thus being vulnerable to snake bite and other insect bites. Children of such households crap often in front of the houses or along the roads. The situation becomes awful in the monsoon when the entire area is water-logged and creates serious health hazards for these poor people.

Thus the overall paradigm that depends upon growth, does not necessarily promise improved conditions of
livelihood for all. An important aspect of the dominant development paradigm is a notion of welfare where health is seen as an outcome of medical care and "preventive" interventions.

With the emergence of welfarism and the notion of equity and the focus on distributive, justice, health too was redefined and was regarded as an outcome of fulfilment of basic needs in the new paradigm of development.

Our data question both as it emphasises not only the close link between stunted development, poverty and health but also highlights the importance of social structures.

In most of our study villages the major proportion of agricultural labourers are drawn exclusively from lower castes - Scheduled Castes (SCs) and scheduled Tribes (STs), though it encompasses the widest range of castes/categories. Moreover, it is also found that these labourers represent a class i.e. a lower homogeneous economic group, where access, availability and acceptability are restricted along with basic need fulfilment and where equity can only be a function of
While assessing agricultural labourers' opinions on the range of illnesses they experience, it became clear that the agricultural labourers assess their illnesses as an economic problem which can be called the "diseases of poverty". It is this knowledge that underlines non-action rather than ignorance. The nature of work in agriculture is not only strenuous but also hazardous for the health of the labourers. There are many symptoms which take long to appear, and it is sometimes difficult to relate some health problems related to the occupation. Agricultural labour involves long hours of hard work under the hot sun and in the hours of rain falling in torrents. The almost entire process of agriculture has a hazardous implication for the health of the labourers. To begin with, ploughing under the scorching sun, which requires strenuous application, particularly of the wrist and shoulder, leads to frequent occurrence of muscular sprain and resultant swelling and pain in the wrists and shoulder. During transplantation and weeding, working in the slushy fields and knee-deep water often causes them some sort of fungal infection on the
fingers (of the hands as well as the toes) and in some cases there are complaints of severe body rashes. In addition to it, there is another problem associated with working in water -- injuries caused by sail bite. Manual reaping with sickle exposes them to frequent injuries of fingers and palm leading, quiet often, to severe bleeding or infected wounds. In the last phase of agricultural operation, both the methods of manual threshing cause health problems such as injuries. While beating the paddy sheaves against a wooden log on the threshing floor, to separate the paddy grain, which requires heavy force, the workers often develop shoulder sprain and pain. Even in the second method where labourers revolve round a wooden pillar along with the bullocks for several hours at a stretch, without any break, often they feel dizziness and headache. Further, any break in the rhythm can result in the stepping of bullocks on the foot of the labourers causing severe injuries or a fall.

Agricultural labour households thus carry heavy disease burden. They suffer from both general and work related health problems. Their economic and social situation
generates conditions which are conducive to ill-health and also hamper access to services.

Agricultural labour households usually do not go to the practitioners or seek assistance from public sector facilities. Measures that they take for the cure are associated with the degree of suffering, accessibility to the health services and above all their economic condition. When they are unable to perform the physical labour then they are forced to seek help. These people continue to work as long as they can during their sickness. They are even found to be working as soon as they get symptomatic relief. All of them are unable to procure medicines as prescribed by the doctor for the required period. Once they get symptomatic relief, they generally stop taking the medicines because of their inability to continue paying over a long period of time. As they invest incrementally, their cure is also never complete. The disease lingers and becomes a part of their life. They hardly get medicines from the health centre, and the available ones hardly cure their illness. Besides, the timing of health centres does not suit them as it clashes with timings of their work.
The categorisation of illness in terms of major and minor as practised in medical literature remains irrelevant for agricultural labourers. What matters to them is the length of the period during which a labourer is prevented from going to work owing to illness, and the money spent on the treatment. It does not however imply that they are unaware of minor problems.

The popular understanding that the 'poor illiterates' do not understand the causes of disease in highly questionable. The people are very conscious of the impact of working and living conditions on health. On the other hand, despite facing perpetual illness, they conceptualise illness as only that which hampers work. Thus, for them, the implications of serious and prolonged illness is much more crucial than implications of work on health. The central focus being survival for which ability to work is central and not one's physical well being.

Unlike the social scientists who emphasised socio-cultural factors in the disease such as Mckim Marriot (1955), Morris Carstairs (1955) C.M.F. Mathews (1979) and
others. Our data helps us argue that health culture and health conditions of the very poor are best understood when contextualised within the specificity of their economic and social conditions. We have argued that the present model of development actually creates its poor and that the conditions of the poorest across developed and backward blocks in our study area are essentially the same. Lastly we have argued that the most crucial constraining factor in health is not cultural practices and lack of knowledge but the constraints imposed on the poor by the economic and social structures in which they have to live and function.