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Health problems faced by female-headed farm women's of Eastern Plain of U.P.

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Abstract

Women play an important role in the agriculture and rural economy of all developing countries. They play the double role of housewife and breadwinner and play an important role in agriculture. The purpose of this study was to assess the health problems of the female-headed farm women. This study collected data by interviewing 360 female-headed farm women in U.P. The health hazards were assessed using a self-made interview schedule. Simple random sampling was used to choose the data. The study shows that female-headed farm women suffer from physical health hazards. They faced problems with redness of the eyes, eye infections, difficulty in breathing, lung infection, back pain, shoulder pain, pain in the legs, skin allergies, skin infections, skin ailments and other problems – headache, tetanus, cut and accidental injuries are very common for women farmers from the finding of the study, it can be concluded that farm women faced types type of working health hazards. The majority of the women farmers frequently report that about physical health problems during the work at farm. Farm women faced general health problems like poor health conditions, anaemia, and iron or vitamin deficiency. Mostly female-headed women farmers faced different type's health problems at the working place in daily life.

Keywords: Agriculture farming, health problems, physical hazards, working condition

Introduction

Women in India play a major role in shaping the economy of the country (Verma R., et al. 2019)^[4]. Agriculture plays an important role in human employment in India. It ranks fourth in the world. Women farmers play the double role of housewife and breadwinner and play an important role in agriculture. Many female farmers are not only engaged in farming as farm helpers but also engaged in farming vegetables, poultry, livestock, seed collecting, selling milk, vegetables and fruits, etc. Their activities usually include growing crops, raising animals, processing and preparing food, working in agriculture or other rural jobs to earn money, collecting fuel and water, participating in business and commerce, caring for children, elderly parents and other family members, and take good care of their homes (Shekhar et al., 2019) ^[5]. She performs the most laborious and physically taxing jobs in homes, farms, and animal care facilities. It is a truth that rural women work in agriculture in addition to their domestic responsibilities (Praveen et al., 2005)^[2]. Rural women farmers are also responsible for dung collection by making dung cakes, which also brings additional income to poor families. Clearly, women farmers play a dominant role in livestock production and management (Jayasheela G 2015)^[1]. The occupational health problems may be mainly due to two reasons, i.e. the use of harmful chemicals in the occupation and the biochemical and posture demand of the workplace leading the musculoskeletal problems (Dwivedi P et al., 2013)^[3]. Women farmers are important economic agents in India, particularly in the context of poverty. Their labour plays a key role in the survival of millions of families (Sunitha NH et al., 2018) ^[6]. There were complex degrees of some common diseases among women farm workers and a harmful diet is the portable cause. These diseases include heart disease, stroke, asthma, diabetes hypertension, back pain, skin diseases constipation, diarrhoea etc. (Warraich et al., 2016) [7].

Methodology

Locale of the study

The district of U.P. were selected for the study as it was suitable for researcher to conduct the study. The data of female-headed farm women's was collected from Sultanpur, Ayodhya, Amethi of U.P. I have selected 3 blocks of every district Sultanpur (Baldiray, Sadar, Jaisighpur), Ayodhya (Sohawal, Bikapur, Milkipur) and Amethi (Gaurigunj, Tiloi, Amethi). I was selected 15 villages of every district, 5 villages of every block and 8 respondents selected of every village.

Sampling procedure

The sample for the investigation was comprised of 360 respondents. Simple random sampling was used for select the study area and samples. The questionnaire collected demographic information, including age, education qualification, marital status, annual income, health problems etc. It also collected health information on a range of farming work.

Tools and techniques

To carry out the present study, the following tools were used:-A self-made interview schedule to collect general, specific and health-related information about the respondents.

Methods of the Data Collection

The data as collected through on in detail interviews to bring out the required information from the female-headed women farmers. The pretested interview schedule is used to collect general, specific information and health problems/hazards related information. Data was collected using self- prepared interview schedule by a face interview. The statistical tool used for the purpose of the analysis of this study is simple percentage technique and ranking techniques.

Result and Discussion

Results in Table 1 described the distribution of respondents based on their age. Results show that respondents (12.8%) were of the age group 20-30 years and More than (37.2%) were of the age group 30-40, (33.1%) were of age group 40-50, and only (16.9%) were of age group above 50.

Table 1: Distribution of respondents on the basis of their age	;,
N=360	

C N	Categories of age	Respondents		
S.N.		Frequency	Percentage	
1.	20-30	46	12.8	
2.	30-40	134	37.2	
3.	40-50	119	33.1	
4.	Above 50	61	16.9	
	Total	360	100.0	

Table 2: Distribution of respondents on the basis of their education qualification, N=360

S.N.	Categories of Education	Respondents	
9.IN.		Frequency	Percentage
1.	Illiterate	113	31.4
2.	Only read	5	1.4
3.	Only write(signature)	86	23.9
4.	Both read and write	47	13.1
5.	Have primary education	54	15.0
6.	More than primary education	36	10.0
7.	Graduation	14	3.9
8.	Post-graduation	5	1.4
	Total	360	100.0

Results in Table 2 show that the education status of femaleheaded farm women's (31.4%) farm women's were illiterate (23.9%) farm women's were can write and able to make the signature, (15.0%) farm women's were have primary education, (13.1%) farm women's were both read and write, (10.0%) farm women's were have more than primary education, (3.9%) farm women's were graduated, (1.4%) farm women's were only read and only (1.4%) farm women's were post graduated.

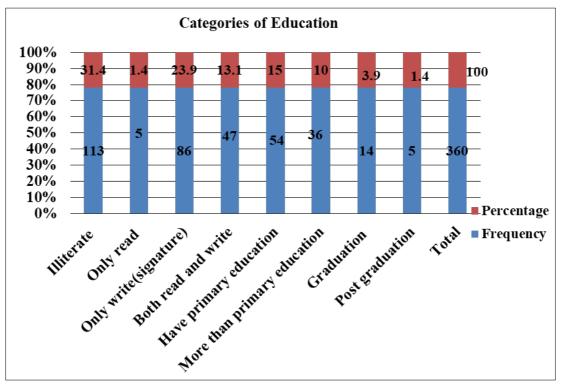


Fig 1: Education qualifications of the respondents ~101~

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 Table 3: Distribution of the respondents on the basis of marital status, N=360

S.N.	Marital Status	Respondents		
		Frequency	Percent	
1.	Single/Unmarried	9	2.5	
2.	Married	216	60.0	
3.	Widow	91	25.3	
4.	Divorced	44	12.2	
	Total	360	100.0	

Table 4 describes the distribution of respondents on the basis of their marital status. Results found that the majority of the respondents were married (60.0%) and (25.3%) respondents were widows and (12.2%) respondents were divorced only (2.5%) respondents were unmarried.

 Table 4: Distribution of the respondents on the basis of annual income, N=360

S.N.	Housing Pattern	Respondents		
		Frequency	Percentage	
1.	Kaccha	120	33.3	
2.	Pakka	87	24.2	
3.	Mixed	121	33.6	
4.	Kaccha &Pkka both	32	8.9	
5.	Total	360	100.0	

The results and discussion presented in the excerpt provide information about the housing patterns of the respondents in a study. The respondents were classified into four categories: Kaccha, Pakka, Mixed, and both (Kaccha and Pakka). According to Table 4, the housing patterns were analyzed and presented in ascending order. The breakdown of housing patterns is as follows: Kaccha (33.3%) Pakka (24.2%) Mixed: (33.6%) Kaccha and Pakka both: (8.9%) The table also indicates that a total of 360 respondents participated in the study. The author suggests that the housing patterns of the respondents were good based on the percentages in each category. The highest percentage was observed in the Mixed category (33.6%), followed closely by Kaccha (33.3%). The Pakka category accounted for (24.2%) of the respondents, while a smaller proportion (8.9%) indicated that their housing pattern was a combination of both Kaccha and Pakka. It's important to note that these findings are specific to the study being discussed. The distribution of housing patterns and the assessment of their quality are based on the data collected for this particular research. Further analysis and interpretation of the data would be required to make more general conclusions or to compare these findings with other studies or populations.

Table 5: Distribution of the respondents on the basis of working experience in farming, N=360

S.N.	Working experience in farming	Respo	Respondents	
9.IN.		Frequency	Percentage	
1.	Less than 5 years	27	7.5	
2.	5-10 years	99	27.5	
3.	10-15 years	128	35.6	
4.	More than 10 years	108	29.4	
	Total	360	100.0	

The results presented in Table 5 on Working Experience in Farming are as follows: Less than 5 years": Among the respondents, 27 individuals (7.5%) reported having less than 5 years of working experience in farming.5-10 years": A total of 99 respondents (27.5%) reported having 5-10 years of working experience in farming. 10-15 years": The majority of the respondents, 128 individuals (35.6%), reported having 10-15 years of working experience in farming. More than 10 years": Lastly, 108 respondents (29.4%) reported having more than 10 years of working experience in farming. The distribution of working experience in farming indicates that a significant portion of the surveyed population has gained considerable experience in the agricultural sector. The highest percentage of respondents falls into the category of 10-15 years of experience, suggesting a substantial number of individuals with a relatively long history of engagement in farming activities. The discussion could focus on the implications of this working experience in terms of knowledge and expertise acquired over time. It could explore the potential impact of experience on farming practices, decision-making, and productivity. Furthermore, it could analyze the relationship between working experience and the adoption of modern agricultural techniques or technologies. Additionally, the discussion may delve into the challenges and opportunities associated with varying levels of working experience, such as the need for continuous skill development and the potential for mentorship or knowledge transfer among farmers with different levels of experience. Overall, the working experience in farming depicted in the table provides insights into the collective expertise of the surveyed population and sets the foundation for understanding their perspectives and practices in the agricultural domain.

 Table 6: Distribution of the respondents on the basis of annual income

S.N.	The annual income of the family	Respondents		
9.IN.	(In Rs.)	Frequency	Percentage	
1.	Less than 10,000	54	15.0	
2.	20,000- 30,000	114	31.7	
3.	40,000-50,000	116	32.2	
4.	Above 50,000	76	21.1	
	Total	360	100.0	

TTable5 revealed that major city of the respondents earned (32.2%) between 40,000- 50,000 per year, some of the respondents earned (31.7%) between- 20,000-30,000 rupees per year, and (21.1%) respondents earned above 50,000 per year, only (15%) respondents earned less than 10,000 per year.

S.N.	Health Problems	Never F (%)	Rarely F (%)	Sometimes F (%)	Always F (%)
1.			Eye related		.
a.	Redness of eyes	62(17.2)	47(13.1)	184(51.1)	67(18.6)
b.	Watering of eyes	39(10.8)	43(11.9)	158(43.9)	12033.3)
с.	The low vision of the eyes	62(17.2)	55(15.3)	164(45.6)	79(21.9)
d.	Eye infections	23(6.4)	66(18.3)	179(49.7)	92(25.6)
2.		Resp	iratory related		·
a.	Difficulty in breathing	0(0.0)	55(15.3)	138(38.3)	167(46.4)
b.	Cough	23(6.4)	114(31.7)	155(43.1)	68(18.9)
с.	Asthma	239(66.4)	89(24.7)	23(6.4)	9(2.5)
d.	Lung infection	46(12.8)	140(38.9)	129(35.9)	45(12.5)
3.		Musculoske	letal related proble	ems	
a.	Back pain	0(0.0)	43(11.9)	137(38.1)	180(50.0)
b.	Pain in legs	0(0.0)	34(9.4)	144(40.0)	182(50.6)
с.	Pain in fingers	48(13.3)	120(33.3)	121(33.6)	71(19.7)
d.	Pain in shoulders	24(6.7)	89(24.7)	151(41.9)	96(26.7)
e.	Pain in arms	28(7.8)	112(31.1)	143(39.7)	77(21.4)
f.	Pain in neck	26(7.2)	110(30.6)	114(31.7)	110(30.6)
g.	Allergy	34(9.4)	106(29.4)	129(35.8)	91(25.3)
4.			elated problems		
a.	Skin allergy	41(11.4)	74(20.6)	134(37.2)	111(30.8)
b.	Skin ailments	23(6.4)	49(13.6)	154(42.8)	134(37.2)
с.	Skin infections	32(8.9)	79(21.9)	141(39.2)	108(30.0)
5.			her problems		
a.	Headache	17(4.7)	67(18.6)	171(47.5)	105(29.2)
b.	Tetanus	63(17.5)	109(30.3)	137(38.1)	51(14.2)
с.	Cut and injuries	0(0.0)	42(11.7)	171(47.5)	147(40.8)
d.	Itching	23(6.4)	73(20.3)	161(44.7)	103(28.6)
e.	Stomach pain	83(23.1)	106(29.4)	149(41.4)	22(6.1)
f.	Jaundice	148(41.1)	75(20.8)	126(35.0)	11(3.1)
g.	General body pain	0(0.0)	11(3.1)	124(34.4)	225(62.5)
h.	Chest pain	111(30.8)	107(29.7)	102(28.3)	40(11.1)
i.	Diarrhoea	95(26.4)	100(27.8)	151(41.9)	14(3.9)
j.	Vomiting	123(34.2)	122(33.9)	77(21.4)	38(10.6)
k.	Fungal infections	13(3.6)	65(18.1)	139(38.6)	143(39.7)
1.	Malaria	125(34.7)	129(35.8)	89(24.7)	17(4.7)
j.	Fatigue	0(0.0)	35(9.7)	147(40.8)	178(49.4)

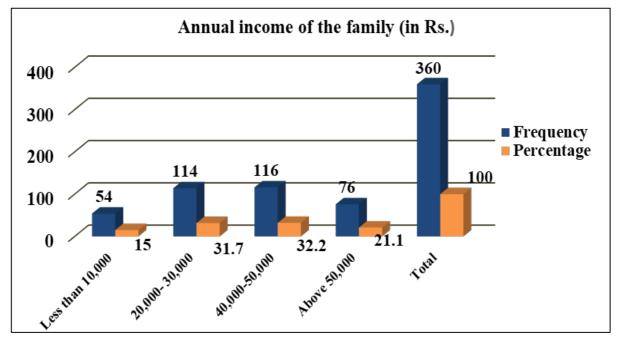


Fig 2: Annual income of respondents

Table No 7 presents the health problems faced by farm women during work. The table includes different health problems categorized into specific areas, along with the frequency of occurrence reported by the respondents. The frequency is indicated by the number of respondents (F) and the percentage of respondents (F %). Let's analyze the table by considering each category:-

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1. Eye-related problems: Redness of eyes: Most respondents reported experiencing redness of eyes occasionally sometimes 51.1%, while a significant number reported it always (18.6%).Watering of eyes: Similar to redness, watering of eyes was also reported as occasional sometimes by the majority of respondents (43.9%), with a substantial number experiencing it always (33.3%) Low vision of eyes: A significant portion of respondents reported occasional sometimes low vision of eyes (45.6%), while a considerable number experienced it always (21.9%).Eye infections: Eye infections were reported frequently, with 49.7% of respondents experiencing them occasionally sometimes and 25.6% experiencing them always.

2. Respiratory-related problems: Difficulty in breathing: The majority of respondent report that difficulty in breathing, with none reporting it never. However, (46.4%) of respondents experienced it always. Cough: Coughing was reported frequently, with (43.1%) of respondents experiencing it occasionally sometimes and (31.7%) experiencing it always. Asthma: The majority of respondents did not report asthma, with 66.4% never experiencing it. However, (24.7%) of respondents reported having asthma occasionally sometimes. Lung infection: Lung infections were reported frequently, with 38.9% of respondents experiencing them occasionally sometimes and (35.9%) experiencing them always.

3. Musculoskeletal-related problems: The respondents reported various musculoskeletal problems, including back pain: majority of the women farmers revealed that (50.0%) of respondents faced it always and (38.1%) of respondents faced it sometimes and only (11.9%) faced it rarely. Pain in legsmajority of the respondents (50.6%) faced it always, (40.0%) of respondents faced it sometime and (9.4%) respondents faced it rarely. Pain in fingers- respondents revealed that about pain in fingers only (33.3 %) rarely. Pain in shoulders: the majority of the respondents faced pain in the shoulder (41.9%) sometimes and only (26.7%) always. Pain in arms: majority of the respondents faced pain in arms (39.7%) sometimes and (31.2%) rarely. Pain in the neck: most of the respondents revealed that (32.7%) faced it sometimes and (30.6%) faced it always and rarely. Allergy: some of the respondents suffered from allergy (35.8%) sometimes, (25.3%) always and only a few respondents (29.4%) faced it rarely. The frequency and percentage of occurrence varied across these problems, with occasional sometimes reports being the most common.

4. Skin-related problems: Skin allergies: The majority of the respondents report that about skin allergy (37.2%) sometimes, 30.8%) always and only (20.6%) faced it rarely. Skin ailments: the majority of the respondents were report that about skin ailments (42.8%) sometimes, (37.2%) always and only (13.6%) rarely. Skin infection: About skin infection (39.2%) sometimes (30.0%) always and (21.2%) rarely were reported by the respondents. The frequency of occurrence varied, with occasional sometimes reports being the most common.

5. Other problems: The respondents reported various other health problems, such as headache: the majority of the respondents reported about a headache (47.5%) sometimes, (29.2%) always and (18.6%) rarely. Tetanus: some of the respondents reported about tetanus (38.1%) sometimes,

(30.3%) rarely and only a few (14.2%) faced it always. Cut and injuries: The majority of the respondents reported about cuts and injuries (47.5%) sometimes, (40.8%) always and (11.7%) rarely. Itching: Most of the respondents revealed about itching (44.7%) sometimes, (28.6%) always and (20.3%) faced it rarely. Stomach pain: (41.4%) of respondents sometimes faced stomach pain and only (29.4%) faced it rarely. Jaundice: Only (35.0%) of respondents sometimes suffered from jaundice. General body pain: pain is an unpleasant feeling in the body that causes physical discomfort. Everyone experiences and expresses pain differently. Over time, not getting sleep can lead to exhaustion. Over time work and lack of sleep also affects the body's ability to repair tissues and cells. When the body does not have sufficient time to repair and recuperate, a person may experiences aches and pain more frequently, majority of the women farmers revealed that (62.5%) always and (34.4%)sometimes suffered from general body pain in daily work. Chest pain, diarrhoea, vomiting, fungal infections, malariarelated problems and their results were the same for respondents. Fatigue: the majority of the respondents reported about fatigue in daily work (49.4%) always, (40.8%) sometimes and only (9.7%) rarely. In summary, the table provides insights into the health problems faced by farm women during work. It indicates that eye-related, respiratoryrelated, musculoskeletal -related, skin-related, and various other health problems are prevalent among farm women, with varying degrees of frequency and severity. These findings highlight the importance of addressing and mitigating these health issues to ensure the well-being of farm women in their work environments.

Conclusion

The current assessment needs to investigate the physical issues of the female-headed women farmers in the eastern plain of U.P. Results revealed that women farmers work in risky conditions, they suffer from different types of problems due to poor health conditions, and unhygienic workplaces. The majority of the women farmers were faced different types of health problems like headaches, back pain, pain in legs, pain in the shoulder, skin allergy, skin infections, lung infections, difficulty in breathing, redness of eyes, eyes infections cut and accidental injuries, musculoskeletal problems, reproductive disorders, pesticide poisoning, dermal and respiratory allergies etc. It was concluded that the majority of the women farmers reported a high incidence of health hazards. The majority of the women farmers were illiterate and they have no any other skill for choosing the other work so they faced different type's health hazards during the work at the farm. Farm women lead a highly anxious life as they are involved in multiple roles- to make their life more comfortable and happier.

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