

**Concept Note: Occupational Health of Sanitation Workers Conclave**  
**CREA x IIHS**

Sanitation workers come into direct contact with human waste and exposure to harmful gases including hazards from biological and chemical agents. The nature of their work exposes them to a range of occupational health hazards such as long-term illness or disability as well as an unacceptably high chance of accidental death<sup>i</sup>. Evidence from India also indicates high prevalence rates of respiratory, dermatological, and eye problems, as well as musculoskeletal issues and injuries among sanitation workers.

Majority of sanitation workers are also **informally employed**, lacking any mandated contributions from employers and or essential documentation, such as Aadhar cards, which are crucial for accessing various services<sup>ii</sup>. This informal status exacerbates their vulnerabilities and limits their access to health care and other protections.

**Women** reportedly comprise over 95% of all manual scavengers in India and tend to be charged with cleaning human excreta from dry latrines as it is the lowest paid job<sup>iii</sup>. There is no emphasis given to include sexual and reproductive health support (menstrual hygiene management, antenatal care and institutional delivery), immunization and nutrition support for women sanitation workers in the country. **Mental health and disability-specific interventions** for sanitation workers in the country are also notably absent from public discourse.

In India, sanitation work is primarily carried out by specific **caste groups** who inherit the hazardous and stigmatized occupations further reinforcing the cycles of poverty, social stigma, and exclusion.

The Prohibition of Employment as Manual Scavengers and their Rehabilitation (**PEMSR) Act of 2013** mandates regular medical check-ups and vaccinations for sewage workers, covering respiratory health, skin injuries, and other occupational diseases. However, the enforcement of this act has been inadequate, failing to eradicate manual scavenging or ensure the safety and dignity of sanitation workers.<sup>iv</sup>

Despite the known risks, there needs to be more comprehensive data and research on the occupational health of sanitation workers, particularly those who are women and informally employed. The sanitation worker's community comprises a **diverse group** different from each other based on the nature of work, level of exposure, geographical context, and health needs. The **absence of studies** that detail the working conditions and health burdens of different worker groups highlights a critical need for more focused research.

The recent attempts to address the challenges faced by sanitation workers have limited scope, primarily focusing on providing compensation and minimal social security measures. While these efforts are important, they often fall short of addressing the structural issues (gender, caste and class) and systematic causes of occupational hazards and health risks faced by workers. There is a pressing need to shift the focus towards preventive measures which includes looking into the effectiveness of existing laws, the implementation of policies, inclusive monitoring mechanisms, and the exploring of systemic interventions.

Given the complexity of the issue and the significant gaps in existing research and understanding of these challenges, the need for a conclave on the occupational health of sanitation workers is both urgent and imperative. The event aims to apply an intersectional lens to bring caste, gender, and other perspectives into the discourse while discussing and highlighting the pressing health concerns of sanitation workers.

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<sup>i</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2796749/>

<sup>ii</sup> <https://haqdarshak.com/2023/08/24/unseen-and-unrecognised-the-indians-excluded-from-aadhaar/>

<sup>iii</sup> <https://gh.bmj.com/content/7/7/e008733>

<sup>iv</sup> <https://studentreview.hks.harvard.edu/statistical-invisibility-and-the-plight-of-indias-sanitation-workers-a-policy-perspective/>