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CHILD LABOUR IN TOBACCO INDUUSTRIES AND ITS IMPACTS ON THEIR HEALTH

(A CASE STUDY OF DISTRICT SAWABI & MARDAN)

Akhtar Ali*

Prof. Dr. Naushad**

Sharifuddin***

Asad Jan***

ABSTRACT

The present study was carried out in Sawabi and Mardan districts. The major objectives were to examine the socio-economic profile of the respondents and impacts of Tobacco on their health. Purposively four villages from Sawabi and two villages from Mardan districts were selected. However 150 respondents on random basis were chosen from these villages. Through interview schedule data were collected and descriptive statistics were used for data analyses. After analysis it was found that 96% respondents' income level were below the poverty line and have joined the job in tobacco industries for their family supports. The remaining 03% reported dropped out from schooling due to teacher punishment while 01% lack of interest. The impact on their health was also recorded. Throat, respiratory, skin and cancer diseases were found more sever than the other diseases in the study area. The result of the study recommended, to launch developmental programs in the project area by government, to alleviate poverty and improve socio-economic condition of the target population for their family support. More hospitals and trained doctors are also required for health services in the study area.

Key Words:- Reasons, Child labour, Industries, Environments, Effects and Health

^{*} Assistant Professor, Department of Rural Sociology, The University of Agriculture Peshawar, KPK, Pakistan.

^{**} Dean Faculty of Behavioral Sciences, Islamia College Peshawar, KPK, Pakistan.

^{***} M.Phil Scholar, Department of Rural Sociology, The University of Agriculture Peshawar, KPK, Pakistan.

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INTRODUCTION

Tobacco is a cash crop of khyber Pakhtunkhwa. There two types of tobacco are grown i.e. 1) Desi and 2) Flue Curved Virgina (FCV). The FCV after harvesting is processed and cured locally in the nearest area of the production sites. Private owners set the Tobacco barns where the leaves of FCV are cured through steaming with use of fire wood before sending in the market.

Small children are employed to tie up the FCV leaves with long wooden sticks which are hanged in the Tobacco Barns for curing. This environment is quite hazardous for the children because of the wet and warm steam and also the most poisonous smell of the Tobacco leaves. Such type of situation directly affect the respiratory tract of the children and cause a variety of respiratory tract diseases, heart problem, skin or chest cancer, allergies, throat and skin diseases.

Child labour refers to the employment of children at regular and sustained basis in a country. Many countries and international organization have considered exploitative and illegal (Laura, 2002). In many developed countries, it is considered inappropriate or exploitative when a child works below a certain ages (UNHCR, 2006).

Child labor laws in the United States set the minimum age for work 16 years without parents' consent (United States Department of Labor, 2010). Child labour has been found a serious problem of the developing world (Assefa et.all, 1988),

The international community has not realized the root cause of child employment and imposed harsh economic sanctions which have destroyed Pakistan's economy where majority children are working below the 16 age (<u>Tabassum</u> & <u>Baig</u>, 2002). The total number of children in 5-14 age group in Pakistan was figured out 40 million. Out of which, active children was 8.3%, boys 73%, while 27% girls however 58.6% were found in Punjab (Pakistan Child Labor Survey, 1996). According to world bank the incidence of child labour decreased from 25 to 10 percent between 1960 and 2003 in the world (Norberg, 2007) while in 2004 the total child labour in the world was 218 million (ILO, 2006).

The economic indicators of KPK are below than other provinces and consider poorest in the country. The Province's achievements in health and education are also below the national average widespread poverty line, particularly in the rural areas. Estimated per capita income in KPK was only 60 % of the national average (Economic Report KPK, 2005). The basic cause of child labour in developing countries is considered to be poverty; (Levy, 1985;). However children are often prompted to work by their parents (Syed *et al.* 199). Uneducated or poorly educated parents are another cause of child labour. There is an inverse relationship between parental education and supply of child labour.

According to the Constitution of Islamic Republic of Pakistan 1973, "No child below the age of fourteen shall be engaged in any factory or mine or in any other hazardous employment." Also, "all forms of forced labour and traffic in human beings are prohibited." The government of Pakistan has passed two legislations, viz. the Employment of Children Act, 1991 and the Bonded labour System (Abolition) Act, 1992. These contain punitive clauses for commission of offenses under the Acts. The Factories Act 1934 does not allow the employment of children under fifteen and even adolescents among fifteen to seventeen in the hazardous occupations specified in the rules framed under the Act (Dr. Muhammad Khalid, 2003). The present study major objectives are:- i. to investigate the reasons of child labour in tobacco industries. ii) examine environment effect on children health.iii) Suggestion and recommendation for further policy implementation

MATERIALS AND METHODS

This section highlights the methodology used for analyzing the problem under study. Purposively four villages namely Asmila, Charbagh, Tarakai and Dagi in district Sawabi while two villages Toru and Rustum from Mardan district were selected and 150 respondents on random basis were chosen from the sampled villages. Through interview schedule data were collected and descriptive statistics used for data analyses.

RESULT AND DISCUSSION

Table-I Parent Occupations of the sampled respondent in the project area

| Fathers occupation | Freq. | Percentage % | Mother occupation | Frequency | Percentage |
|--------------------|-------|--------------|-------------------|-----------|------------|
| | | | | | % |
| Government | 2 | 1.34 | House wives | 145 | 96.67 |



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| Semi Government | 1 | 0.67 | Domestic wives | 5 | 3.34 |
|----------------------|-----|-------|----------------|-----|------|
| Private | 26 | 17.34 | Any other | 0 | 0 |
| Shop keeper | 7 | 4.67 | | | |
| Labour | 34 | 22.67 | | | |
| Agricultural laborer | 79 | 52.67 | | | |
| Any other | 1 | 0.67 | | | |
| Total | 150 | 100 | Total | 150 | 100 |

Table.I shows the parent occupation of the sampled respondents in the project area In father occupation the government sector cover 1.34%, semi government o.67%, Private 17.34%, Shop keeping 4.67%, labour 22.67%, Agriculture 52.67% which equal to half of the other sectors and any other cover only 0,67%. So agriculture fulfills the highest share in all other sector of the economy in the project area of the sampled respondents while semi government and any other sector coverage is less than the rest of the occupation. In mother occupation majority are working in their house while 3% working in other people houses and earn the money for their families

Table.II Average Monthly Income of the the sampled respondents in the project area.

| Sr.No | Income level | Number | % |
|-------|-----------------|--------|-----|
| 1 | Up to Rs.5000 | 03 | 02 |
| 2 | 5001-10000 | 40 | 27 |
| 3 | 10001-15000 | 87 | 58 |
| 4 | 15001 and above | 20 | 13 |
| 5 | Total | 150 | 100 |

Table-II reveals the average monthly income of the sampled respondent of the project area. Up to Rs.5000 income level group the total share of the respondents is 2%, 5001-10000 27%, 10001-15000 is 58% however 15001 and above income level group the coverage of the sampled respondents is 13 %. So 15001-above is more than the rest income level group in the table because majority children are working in tobacco industries which support their families and earn money.

Table.III Average Monthly Expenditure of the Household of the sampled respondents in the project area

| Sr.No | Expenditure level | Number | % |
|-------|-------------------|--------|-----|
| 1 | Up to Rs.5000 | 03 | 02 |
| 2 | 5001-10000 | 40 | 27 |
| 3 | 10001-15000 | 87 | 58 |
| 4 | 15001 and above | 20 | 13 |
| 5 | Total | 150 | 100 |

Table –III indicate the average monthly expenditure of the household of the sampled respondents in the study area. Up to Rs.5000 share is 2%, 5001-10000 27%, 10001-15000 coverage of the sampled respondents is 58% 15001and above is only 13%. The table shows that the sampled respondents do not save the money while they all spent on daily consumption. Saving is also compulsory for the multiplication of investment. Their education level is very low, so they do not think for their future to get out from vicious circle of poverty for ever. However they always send their children as child labor to industries for their families supports instead of going to school.

Table. IV House Structure of the sampled respondents in the project area

| Sr.No | Particular item | Number | % |
|-------|-----------------|--------|-----|
| 1 | Pacca | 31 | 21 |
| 2 | Semi Pucca | 18 | 12 |
| 3 | Katcha | 101 | 67 |
| 4 | Total | 150 | 100 |

Table-IV explains the house structure of the sampled respondents in the project area. According to table 21% sampled respondent house structure is Pacca, 12% Semi Pacca and 67% is katcha. So the data show that people saving is low to construct pacca houses for their families. Only few people house in the project is pacca and semi pacca while majority respondent houses are katacha. The main reason is poverty which blocks all their developmental activities for their go ahead to become rich in societies. The government have launched so many developmental programs in the project area while influential and elite of the area use the programs for their uplift while poor people have no access to those programs.

Table. V Reasons of child labor of sampled respondents in the Project area

| Sr.No | Particular items | Number | Percentage |
|-------|-------------------------|--------|------------|
| 1 | Poverty | 144 | 96 |
| 2 | Drop out from schooling | 04 | 03 |
| 3 | Lack of interest | 02 | 01 |
| 4 | Any other | 00 | 00 |
| 5 | Total | 150 | 100 |

Table-V describes reasons of child labour of the sampled respondent in the project area. According to table 96% respondents consider poverty the main reason of child labour in the project area, 3% shows drop out from schooling while 1 % indicates lack of interest. However poverty is the main reason of child labour of the sampled respondents, in the study area. Without finance no activity is possible for development of a country. Poor people have no finance, so instead of schooling they send their children to industries for supporting their families.

Table. VI Children Drop out in the class of the sampled respondents in the project area

| Sr.No | Class | Number | % |
|-------|-----------|--------|-----|
| 1 | Primary | 98 | 65 |
| 2 | Middle | 48 | 32 |
| 3 | Any other | 04 | 03 |
| 4 | Total | 150 | 100 |

Table-VI indicate children drop out in the class of the sampled respondent in the project area. According to table in primary class number of students was 98 while in middle class the number is 48 and in other classes the number of the student is 4. However in primary class 50 students were dropped out, while in middle 44 and in other class only 4 students left in the class. The main reason of the drop out is poverty, punishment of the teacher and lack of interest. Majority student were found below the poverty line in the project area while some students claim the punishment of the teacher and lack of interest. The poor people can not afford the expenditures of the school because they are below the poverty line and their income level is low and poor can not reach to top for ever.

Table..VII Common diseases endangering health of the sampled respondents in project area..

| Sr,No | Particular items | Number | % |
|-------|----------------------|--------|-----|
| 1 | Throat infection | 49 | 33 |
| 2 | Respiratory diseases | 86 | 57 |
| 3 | Skin diseases | 05 | 03 |
| 4 | Cancer | 02 | 01 |
| 5 | T.B | 08 | 06 |
| 6 | Any other | 00 | 00 |
| 7 | Total | 150 | 100 |

Table-VII shows common diseases endangering health of the sampled respondents in the project area. According to table 33% claim throat infection, 57%, respiratory diseases, 3% indicate skin diseases and only 1 and 6% claim cancer and T.B respectively. The respiratory diseases infection was sever than the other diseases. The main reason is tobacco leafs which give some smell which enter into lung and damage the tissues and create the problem of respiratory diseases which latter on convert into cancer which is very dangerous for health.

CONCLUSION AND RECOMENDATIONS

After study it was concluded that poverty, drop out from schooling and lack of interest is the main reason for child labor in the project area. The children are interested in getting education while due to lack of finance they leave their schooling. For their families support join the jobs in tobacco industries, to fulfill the requirement of their living. When they work their, the environment is unfavorable for child health's, So different diseases attack on them and affect their health which also affect the life expectancy of child labor. The study recommends the following recommendations for future policy implementation:-

➤ It is essential for the government to launch livelihood programs in the project area, to raise the income level of the people, to reduce poverty in the study area, to solve the child labor problems.



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- ➤ To provide free education in the project area, to increase literacy rate in the study area.
- ➤ Undertaking the comprehensive national studies on the situation of child labour.
- ➤ Government should take steps towards the elimination of 12 hours working for children.
- ➤ It is necessary for government to provide trained teacher to project area school, to decrease the percentage of drop out of children.
- There should be a proper check and balance of government on industrialist is necessary, to provide amenities of life to worker.
- Improve the child labor legislation and develop effective implementing mechanisms.
- Establish technical training institutions for working children
- It is necessary to increase the number of hospitals in the project area, to provide health facilities to child labour, to control the diseases in the project area.

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