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IMPACT OF ENVIRONMENT ON WOMEN HEALTH IN SANGLI DISTRICT (MAHARASHTRA)

Smt. A. B. Kamble¹, Dr. L. B. Tonape² and Dr. A. D. Gade³

¹Research Student, Dept. of Geography, Y.C.M. Karmala, Solapur.

² Associate Prof., & H.O.D. Dept. of Geography, Y.C.M. Karmala, Solapur.

³Asst. Prof., Dept. of Geography, D.R. Mane College, Kagal, Kolhapur.

ABSTRACT:

Present research paper looks into the impact of environment on women health in Sangli district. The impacts of environment on women health have multi dimensions. These impacts are both positive as well as negative in nature. The impact of environment on women health has been broadly classified into four categories viz. impact of air pollution on women health, impact of water pollution on women health, impact of pesticides as well as cleaning agents on women health and impact of occupational hazards on women health.



KEYWORDS: Women Health, Environment, Pollution, Pesticides.

INTRODUCTION

Life expectancy of women is comparatively more than that of men in India. However, longer lives are not necessarily healthy lives. There are certain conditions which only women can experience. It is significantly negatively affects on the women life such as pregnancy and childbirth are not diseases but it is biological as well as social processes which carry high health risk and required high health care. Some health challenges affect both women and men, but have a greater or different impact on women and so require

responses that are tailored specifically to women's needs.

So far the researcher has elaborated the women population growth in Sangli district, their socio-economic background, government health care policy, accessibility of health care facility in rural and urban area especially in the context of women and status of women health.

The impact of environment on women health has been broadly classified into four categories viz. impact of air pollution on women health, impact of water pollution on women health, impact of pesticides as well as cleaning agents on women health and impact of occupational hazards on women health.

OBJECTIVES

Now as per as the objectives of the present research is concern, it is essential to study the impact of environment on women health .

STUDY REGION:

In view of this the study region selected for present investigation is the Health status of women in Sangli district of Maharashtra State as a geography unit. Sangli district is having most favorable location in Maharashtra state. Sangli district is located into western part of Maharashtra between 16^o 45' to 17^o 33'N latitude and 73^o42' E to 75^o41' E longitude. Sangli district covers an area of 8572 Km² and it has population of 2820575 as per

2011 census.

DATABASE AND METHODOLOGY

The present study based on the primary data of women health and necessary statistical tools such as percentile and pie chart were applied for data processing purpose.

Impact of Environment on Women Health

The impacts of environment on women health have multi dimensions. These impacts are both positive as well as negative in nature. For example, rural women who daily works in the farm receives pure oxygen which is positive factor to her, however working in high temperature is affects negatively on her health in form of skin irritation, eye irritations and dehydrations. Similarly, women who daily works in agriculture sector benefited with the clean environment of the farm and due to hard work she may be face the issue of body pain and headache due to direct contact with sunlight. Thus, in short environmental impacts on women health are positive as well as negative in nature. However, the extent of negative impact is more than that of positive impact due to increase in level of pollution. The environmental impact on women health has been classified in to four heads namely, impact of air pollution on women health, impact of water pollution on women health, impact of cleaning agents and pesticides on women health and impact of occupation Hazards on women health. Let's see one by one.

Indoor Air Pollution and women Health

The women who used tradition fuel for cooking like cow dung and agriculture waste are directly, more closely and frequently contacted with the air pollution which is considered as indoor air pollution. The family member who smokes cigarette or bidi also contributes to indoor air pollution. The indoor air pollution creates health hazards to all family members and specially more in case of women.

Outdoor Air Pollution and Women Health

The women who always travel for work in urban area came under the direct contact of outdoor air pollution. The high carbon dioxide emission in urban area due to vehicular, dust and factories are the principal causes of outdoor air pollution. In fact, the risk of health due to polluted air is more in urban areas than that of rural area. The table 5.1 indicates polluted air caused health issue of Asthma of sample women in Sangli district.

Table No .1. Polluted Air Caused Health Issue of Asthma of Sample Women in Sangli District

Tehsils	Rural	Urban	Total
Shirala	0	3	3
Walwa	2	2	4
Palus	1	1	2
Kadegaon	0	1	1
Khanpur	0	1	1
Atpadi	1	3	4
Tasgaon	3	1	4
Miraj	0	2	2
KavatheMahankal	1	3	4
Jath	0	0	0
Total	8	17	25

Source: Based on Field Work

It has been evidence from the table no 1 that there are total 25 Asthma cases observed in Sangli district, out of which four each cases observed in KavatheMahankal, Tasgaon, Atpadi and Walwa tehsil. It means that out of the total 25 cases 16 are observed in just 4 tehsils namely Kavathemahankal,

Tasgaon, Atpadi and Walwa which indicates high polluted air quality in these tehsils. The 3 cases of asthma have been observed in Shirala tehsil and 1 case each tehsil has been observed in Kadegaon and Khanapur.

In rural area total 8 cases of Asthma have been observed in study region, out of which three are found in Tasgaon, 1 in Kavathemahankal, 1 in Palus and 2 in Walwa tehsil. There are total 17 cases of Asthma have been observed in urban area of Sangli district, out of which 3 are observed in Kavathemahankal, 2 in Miraj, 1 in Tasgaon, 3 in Atpadi, 1 in Khanapur, 1 in Palus and 2 in Walwa tehsil.

Table No. 2. Polluted Air Caused Health Issue of Birthing Problem

Tehsils	Rural	Urban	Total
Shirala	0	1	1
Walwa	0	1	1
Palus	1	0	1
Kadegaon	0	0	0
Khanapur	0	0	0
Atpadi	0	2	2
Tasgaon	0	0	0
Miraj	0	0	0
KavatheMahankal	1	1	2
Jath	0	2	2
Total	2	7	9

Source: Based on Field Work

It has been seen from the table no 2 that there are total 9 cases of birthing problem observed in study region out of which 2 are observed in urban area of Jath tehsil, 2 in urban area of Atpadi tehsil. The 3 cases of birthing problem are observed in Shirala, Walwa and Palus tehsil. The remaining two cases are observed in Kavathemahankal tehsil.

Impact of Water Pollution on Women Health

Water pollution is the contamination of water bodies, usually as a result of human activities. Water bodies include for example lakes, rivers, oceans, aquifers and groundwater. Water pollution results when contaminants are introduced into the natural environment. For example, releasing inadequately treated wastewater into natural water bodies can lead to degradation of aquatic ecosystems. In turn, this can lead to public health problems for people living downstream. They may use the same polluted river water for drinking or bathing or irrigation. Water pollution is the leading worldwide cause of death and disease, e.g. due to water-borne diseases².

So far in the spatial analysis of diseases in chapter fourth researcher has elaborated the number of water born diseases in study region. The analysis of lead poisoning is remains to analyze that have been presented in table 3.

Lead poisoning is caused due to consumption of water contaminated with lead, often coming from old pipes as well as surface water pollution. This disease is particularly harmful to children and can cause a number of health problems, including organ damage, nervous system disorders, anaemia, high blood pressure, kidney disease and problems with the reproductive system³.

It has been clear from the table 3 that there are total 51 cases of lead poisoning observed in the study region, out of which 27 are observed in rural area of Sangli district and remaining 24 cases observed in urban area. It has been evidence from the data that 8 cases of lead poisoning are observed in Palus tehsil and same numbers of cases are observed in Jath.

Table No. 3. Lead Poisoning among the Sample Respondents

Tehsils	Rural	Urban	Total
Shirala	4	2	6
Walwa	3	1	4
Palus	5	3	8
Kadegaon	2	4	6
Khanapur	0	2	2
Atpadi	0	4	4
Tasgaon	1	3	4
Miraj	4	2	6
KavatheMahankal	2	1	3
Jath	6	2	8
Total	27	24	51

Source: Based on Field Work

The 6 cases of lead poisoning are observed in Shirala tehsil, 4 in Walwa tehsil, 6 in Kadegaon tehsil 2 in Khanapur tehsil, 4 in Atpadi tehsil, 4 in Tasgaon tehsil, 6 in Miraj tehsil and 3 in Kavathemahankal tehsil. In short, more cases of lead poisoning are observed in rural area which indicates poor quality of drinking water and high level of water pollution in rural area.

Impact of Pesticides and Cleaning Agents on Women Health

Pesticides and cleaning agents are being used for pest control in and around the house by the family members. It is always in the form of gels, powders, liquids and influential chemicals used in the home and garden to clean surfaces and kill pests. Overexposure to the harmful chemicals in pesticides and cleaning agents can lead to Headaches, Dizziness, Nausea and weakness. There were only 3 cases observed of poisoning experience due to chemical and pesticides agents in study region out of which 1 is from Palus and remaining 2 are from Khanapur.

Impact of Occupational Hazards on Women Health

An occupational hazard is a risk at working place or hazards experienced at work place by the women labours. Occupational hazards can be classified as chemical hazards, biological hazards, psychosocial hazard and physical hazards. These hazards can be adversely impacted on labours within a short period of time or in a long term period. The short term hazards like physical injury while long term hazards like cancer and heart diseases. The chemical hazard means the risk with dangerous chemicals. Close contact to chemicals in the workplace can cause sharp or long-term harmful health impact. The biological hazards refers risk involves microorganism and toxins, i.e influenza is best example of biological hazards. The bits of snake, scorpion, insecticides and spiders are also considered in biological hazards. The biological hazards mostly occur when workers working at outdoor. Psychosocial hazards are affects on social life or psychological status of labour. It include occupational suffer exhaustion and occupational stress, which resulted into burnout.

Physical hazards are concern with the environment and labours health conditions. Noise pollution, vibration and its impact on health, extreme heat and cold, radiations and ergonomic hazards are the best examples of physical hazards at workplace. The table 4 is indicating the issue of occupational hazards faced by women labours in study region. It has been evidence from the data that around 43.75 per cent of the total working sample respondents of Shirala, 50 per cent of Walwa, 34.38 per cent of Palus, 53.13 per cent of Kadegaon and 56.25 per cent of Khanapur tehsil working sample respondents are facing some problems of occupational hazards at working place.

Table No. 4. Issue of Occupation Hazards

Sr. No	Tehsil	No Issue of Occupational Hazards	Having Issue of Occupational Hazards
1	Shirala	56.25	43.75
2	Walwa	50.00	50.00
3	Palus	65.63	34.38
4	Kadegaon	46.88	53.13
5	Khanpur	43.75	56.25
6	Atpadi	56.25	43.75
7	Tasgaon	59.38	40.63
8	Miraj	68.75	31.25
9	Kavathemahankal	59.38	40.63
10	Jath	50.00	50.00
	Total	55.63	44.38

Source: Based on Field Work

The 43.75 per cent, 40.63 per cent, 31.25 per cent, 40.63 per cent and 50 per cent of the total working sample respondents of the Atpadi, Tasgaon, Miraj, Kavathemahankal and Jath respectively are facing the issues of occupational hazards.

In short on an average 44.38 per cent of the total working sample respondents are facing the issue of occupational hazards. The data presented in table 5 and figure 1 reveals the fact that around 5.63 per cent of total working women are suffering from chemical hazards. The 8.45 per cent of total working women are suffering from biological hazards.

Table No. 5. Occupational Hazards of Working Women

Nature of Occupational Hazards	Total Working Women	Percentage
Chemical Hazards	8	5.63
Biological Hazards	12	8.45
Psychosocial Hazards,	15	10.56
Physical Hazards	18	12.68
No Occupational Hazards	89	62.68
Total	142	100.00

Source: Based on primary data

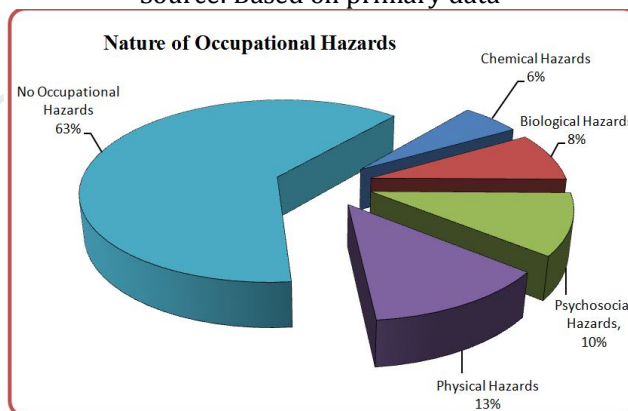


Fig.1

Likewise, 10.56 per cent of total working women are suffering from psychosocial hazards. Moreover, the 12.68 per cent of total working women are suffering from physical hazards in study region. The 62.68 per cent of total working women were reported that there were no occupational hazards at working place.

Table No. 6. Facilities Provided at Work Place

Facilities	Frequency	Percentage
First Aid Box	36	25.33
Bathroom	126	88.67
Toilet	95	66.66
Garden	5	3.33
Rest Room	31	21.67
Canteen	6	4.00
Water Purifier	48	34.00

Source: Based on field work

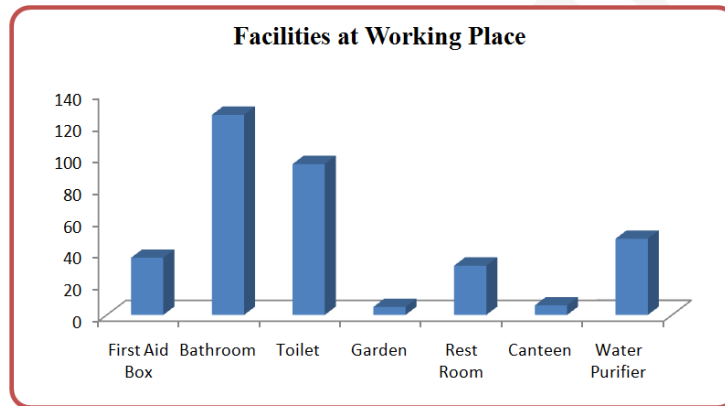


Fig.2

The table no 6 and fig. 2 highlight the facilities enjoyed by the women labours at the working place. It has been seen from the table 6 and figure 2 that only 25.33 per cent women labours reported that there is first aid box their working place. It indicates unawareness of the employees towards women health risk and its management. The 88.67 per cent respondents were reported that there is bathroom in their working place. The 66.66 per cent women were reported that toilet facility is available at working place. The 3.33 per cent women said that there is garden at their working place. The only 21.67 women labours were said that there is rest room for labours in their working place. The only 4 per cent respondents are reported that there is canteen facility made available in their working place. The only 34 per cent labours are said that there is water purifier in their working place.

CONCLUSION

The forgoing analysis clearly reveals that the impact of environment on women health is significantly adverse in Sangli district. Especially air born diseases such as asthma and birthing problem is more frequently observed in study region. The issues of water born diseases are also alarming in the study region. The present chapter has humbly attempted to highlight the various health problems as per their age group. It has been found that majority of the women family members are suffering from at least one disease which indicates poor health quality of their life.

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