



ISSN: 0975-833X

Available online at <http://www.journalcra.com>

International Journal of Current Research
Vol. 9, Issue, 12, pp.62049-62050, December, 2017

INTERNATIONAL JOURNAL
OF CURRENT RESEARCH

RESEARCH ARTICLE

IDENTIFY THE HEALTH PROBLEMS AMONG HANDLOOM WEAVERS

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ARTICLE INFO

Article History:

Received 28th September, 2017
Received in revised form
20th October, 2017
Accepted 11th November, 2017
Published online 25th December, 2017

Key words:

Knowledge on
Handloom weavers.

ABSTRACT

A descriptive cross sectional survey approach study was conducted to Identify the health problems among handloom weavers in ChinnaSeeragapadi, Salem. Data were collected from 30 handloom weavers by purposive sampling technique. It can be concluded that majority of the handloom weavers have the health problems.

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Citation: Prof. S. Parimala, S. 2017. "Identify the health problems among handloom weavers", *International Journal of Current Research*, 9, (12), 62049-62050.

INTRODUCTION

"I see God in every thread that I draw on the spinning wheel"

-Mahatma Gandhi

Handloom Industry is the second largest industry next to agriculture providing livelihood to millions of weavers in India. Handloom sector plays a very important role in the country's economy. Handloom weaving in India is an inherited art where weavers learn to weave from their ancestors and thus this craft is practiced widely in rural areas and is providing employment to a wide section of rural artisans (National Handloom welfare Society). According to National handlooms census of India (2013-2014) report stated that more than 43 lakhs handloom weavers in our India. In Tamilnadu 9 lakhs handloom weavers are there among them 1.5 lakhs handloom weavers in Salem district. Paramasivan (2015) conducted a cross sectional study in Salem district to assess the level of Knowledge regarding prevention of health problems of handloom workers. The study reveals that only 10% of the workers had knowledge regarding health problems and 4% of them had had knowledge regarding prevention of health problems.

Statement of Problem: A Study to Identify the health problems among handloom weavers in selected area, Salem.

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Objective

- To identify the health problems of weavers.

Literature review: Study has been arranged in following headings.

- Introduction
- Health problems of handloom weavers such as Respiratory problems, Musculo skeletal problems, Eye problems, Ear problems, Neurological problems.

METHODS AND MATERIALS

Research Approach and Research Design: A descriptive study design with cross sectional survey approach.

Setting of the Study: Chinna Seeragapadi Salem.

Population: Hand looming weavers residing in chinnaSeeragapadi Salem.

Sampling Technique: Purposive sampling technique.

Sample Size: 30 Hand looming weavers who are residing in ChinnaSeeragapadi.

Data collection Procedure: Semi structured interview schedule.

Table 1. Area wise analysis of Handloom weavers according to their health problems

Sl.No	Area	Maximum score	Mean	Standard deviation	Mean%
1	Respiratory problem	11	4.2	22.23	38%
2	Musculo skeletal problem	7	4.2	22.41	60%
3	Eye problem	5	2.5	13.6	50%
4	Ear problem	4	2.1	11.11	52.5
5	Neurological problem	6	3.13	16.5	52%
	Over all	33	16.23	85.95	54%

Description of the tool

Section A: Deals with demographic data of handloom weavers. It consists of 7 items which seek information about the demographic characteristics. Such as age, sex, religion, education, family monthly income, type of the family and food habit.

Section B: Closed ended questionnaire was used to identify the health problems among handloom weavers. It includes 2 responses yes and no.

Methods of data Collection

Data collection procedure

- Permission was obtained
- Prior to interview self introduction and purpose of interview were clearly explained to each weavers to obtain maximum co-operation & consent from them.
- Data was collected around 5-6 weavers per day. Average time spent for each sample was 20-30 minutes.

Planned Data Analysis

The collected data was analyzed by using descriptive statistics.

Analysis and Interpretation

Major findings revealed that highest percentage (45%) of handloom weavers were in the age group of 41-50 years among them (58%) of them were males.

Highest percentage (45%) of handloom weaver had primary education, 72% of them were belongs to nuclear family and 99% of them were Hindus. Highest percentage (48%) of handloom weavers family monthly income was between Rs. 6,000 – 8,000 and (90%) of them had mixed diet. Area wise analysis of health problems among handloom weavers shows that the highest mean score (4.2 ± 22.41) which was 60% for the area “Musculo skeletal problem” and the lowest mean score (2.1 ± 11.11) which was 52.5% for the area “Ear problem”. However the mean score (4.2 ± 22.23) which was 38% for the area of “Respiratory problem” and the mean score (3.13 ± 16.5) which was 52% for the area of “Neurological problem”. Further the mean score (2.5 ± 13.6) which was 50% for the area of “Eye problem”. Overall mean score (16.2 ± 85.95) which was 54% of them had health problems (Fig.4.2.1)

Conclusion

In the present study it can be concluded that Handloom weavers had health problems. Hence it can be interpreted that the investigator need to assess the handloom weavers knowledge on practice toward the prevention of their health problems.

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