
AN ANALYSIS OF THE BEEDI AND CIGAR WORKERS (CONDITIONS OF EMPLOYMENT) ACT, 1966 AND SOCIAL TRANSFORMATION

Hrideja Shah, Attorney

ABSTRACT:

This paper delves into the Beedi and Cigar Workers Act that was passed as a law by the Indian government in 1966. While the act was enacted to protect the rights of vulnerable beedi workers, a study of the Act and would reveal that the social transformation aimed has not been achieved. This paper examines how the Act has failed to achieve those intended goals due to inadequate mechanisms, the unorganized nature of the industry and lack of awareness amongst the workers. The conclusion has been drawn based on the analysis of the reasons behind the Act's enactment, the sections, and the current state of the workers in beedi industry.

Introduction

Law has always been looked at as one of the most important instruments that could bring about social change. In this paper, I will be discussing the social transformation that Parliament sought to bring about while enacting the Beedi and Cigar workers Act, 1966. Beedi and Cigars are type of tobacco products commonly consumed in India. As per a WHO study in 2022, India was named as the second largest consumer of tobacco products.¹ Beedi Manufacturing is one of the most traditional and largely domestic industries in India.² The Beedi industry employs over 4.9 million people, which is extremely unorganized as a sector. Further, Beedi workers constitute one of the most vulnerable sections of the country's workforce. It is spread over several states of India and number of beedi workers has been increasing ever since the beginning of the increase in number of beedi smoking people. The first part of the paper will bring about the reason why this act was enacted. The second part will deal with whether this act has been able to bring about that social transformation, it intended. The third part will conclude tying the knots of the paper and highlighting the impact of the act on economic and social conditions of beedi workers.

Part I

Beedi Industry is an unorganized industry mostly found in rural areas. The Beedi and Cigar Workers Act (hereinafter referred to as "the act") was enacted in 1966 by the Central Government in response to a beedi worker's movement that came about in early 1960's in Tamil Nadu.³ There were several other movements by beedi workers such as the movement by beedi workers in West Bengal in 1960's. However, it was not that successful.⁴ It has been stated that beedi industry face the most serious health hazards. Beedi workers spent their lives constantly inhaling tobacco dust due to which there were high rate of those workers suffering from Asthma and other lung disorders. Central government enacted this act to regulate the working conditions of beedi rollers/workers. The act provides for coverage regarding daily hours of

¹ World Health Organization, 'Bidi Rolling is an Occupational Health Hazard: WHO Study' (12 December 2022) <https://www.who.int/india/news/detail/12-12-2022-bidi-rolling-is-an-occupational-health-hazard--who-study> [accessed 5 April 2023]

² D. Rajasekhar and G. Sreedhar, Changing Face of Beedi Industry: A Study in Karnataka, 37 *Econ. & Pol. Wkly.* 4023-4028 (2002)

³ THE SMALL HANDS OF SLAVERY Bonded Child Labor in India Human Rights Watch Children's Rights Project Human Rights Watch/Asia, India. Available at: <https://www.hrw.org/reports/1996/India3.htm> (Accessed: April 5, 2023).

⁴ Rina Agarwala, *Informal Labor, Formal Politics, and Dignified Discontent in India* 119 (Cambridge Univ. Press 2013)

work, weekly rest, leave with wages, maternity leave, benefits, and welfare amenities such as drinking water, toilet facilities, canteen, etc.⁵ It can be said that by enacting this act, the parliament intended to make the working conditions affecting the health of the beedi workers better. Part II will look at whether the act has been able to bring about this social transformation, it intended.

Part II

It has been clear that the reason behind enacting the act was for the welfare of beedi and cigar workers and to make their working conditions better. In this part, I will be discussing as to how this act has failed to bring about the social transformation it intended. My first argument will be a critique as to how the health-related sections such as cleanliness, ventilation and drinking water do not cover more than 70% of the beedi workers since beedi industry is pre-dominantly a home-based industry. Furthermore, this industry has 90% of women workforce. The act fails to take into consideration the specific interventions to be taken for women and how these can be further integrated with existing public programs. My second argument is based on few studies which state that even after the laws enacted, beedi workers still face health issues and die of diseases cause of rolling beedi's every year.

The Act has several provisions that safeguard the interests of beedi workers. There are several requirements such as employers need to obtain a license from the state government, the total number of works that can be employed in one unit. However, this covers industrial workers working in the beedi industry. For example, Section 2(j) of the Act defines the term industrial premises. Section 8 to 14 of the Act are working conditions (i.e., health) related sections. According to the act, an *“Industrial premises” means any place or premises (not being a private dwelling house), including the precincts thereof, in which or in any part of which any industry or manufacturing process connected with the making of beedi or cigar or both is being, or is ordinarily, carried on with or without the aid of power.*⁶ Hence, as per the definition, Industrial premise does not include a private dwelling house. Although the term worker includes home workers as well, in practice these provisions apply only to the factory/common shed workers. All the health-related sections are only focused on how the employer in an industrial premise should regulate good working conditions. As stated earlier, beedi

⁵ Pankaj Tiwari and Dr. Namrata Parashar, Socio-economic Conditions of Female Beedi Workers in Allahabad District: A Case Study, New Man Int'l J. of Multidisciplinary Stud. (ISSN: 2348-1390)

⁶ The Beedi and Cigar Workers (Conditions of Employment Act), 1966, § 2(j)

rolling is largely a home-based industry, with 90% women working. The act fails to look at the segment of beedi workers working from home in sections 8 to 14.

In the beedi industry, Women compose a very high percentage of labour force. Most women workers are home-based workers instead of worker working in an industrial premise. The All-India Bidi, Tobacco and Cigar Workers Federation revealed in one of their interviews that up to 90% of the roughly 5.5 million bidi rollers are female, with the government estimating up to a quarter are children.⁷ For home-based female beedi workers, there still exists a danger of severe health issues. The Act further requires that all beedi employers provide basic facilities to the beedi workers such as adequate lighting, ventilation, sanitation, protective equipment such as gloves and masks. All these facilities would reduce the exposure they have from the hazardous chemical. According to recent study, regarding safety measures, only **43 women (82.7%)** wash hand after beedi making.⁸ None of them wear masks or gloves. They were not aware of these safety measures. Almost none were aware benefits provided for them under various laws.⁹ There is no cleanliness standards followed for home-based workers that need to be followed for an industrial premise. Another example as to how the act has failed is that according to section 10 of the Act, the **industrial premise** should not be overcrowded. Section 10 reads as: “(1) No room in any industrial premises shall be overcrowded to an extent injurious to the health of the persons employed therein; (2) Without prejudice to the generality of sub-section (1), there shall be in any work room of such premises at least four and a quarter cubic meters of space for every person employed therein, and for the purposes of this sub-section, no account shall be taken of any space which is more than three meters above the level of the floor of the work room.”

However, a recent study stated that the home-based workers spend more than required working hours blending or rolling tobacco in unhygienic and overcrowded places having no or little facilities for drinking water, toilet, washing or even first aid.¹⁰ Another similar study stated that overcrowding was seen in almost all the houses. Adequate lighting and ventilation were

⁷ Indian Bidi Industry Risks the Health of Smokers and Bidi Workers Too," Medindia (last visited April 5, 2023), <https://www.medindia.net/news/indian-bidi-industry-risks-the-health-of-smokers-and-bidi-workers-too-148426-1.htm#ixzz48jZmewJH>

⁸ Rupali V. Sabale, Shobha S. Kowli, and Padmaja H. Chowdhary, working condition and health hazards in beedi rollers residing in the urban slums of Mumbai, Indian J. Occup. Environ. Med. 16(2) 72–74 (2012).

⁹ Ibid,

¹⁰ S. Srinivasan & P. Ilango, Occupational Health Problems Faced by Female Beedi Workers at Khajamalai, Trichy District, Tamil Nadu, 3 Int'l J. Sci. & Res. Pub. 1 (2013)

only observed in only **17.31% and 25%** of the houses respectively.¹¹ This shows that the essence of the act is minimum because of no implementation of health-related sections for home-based workers. However, it is not only the home based beedi workers who face health issues.¹²

My second argument relates to all the health-related issues that all beedi workers are currently facing. This will depict the fact that the act has failed to bring about transformation, it intended. A study carried out in 2010 studied health problems faced by beedi rollers in Bihar. The study found that **more than 70%** of the beedi rollers suffered from eye, gastrointestinal and nervous problems while more than 50% of the respondents suffered from respiratory problems such as throat burning and cough. This was caused mostly due to tobacco dust. More than **75% of the respondents** faced osteological problems such as back and knee pain and shoulder pain caused due to sitting in the same posture for a long period of time.¹³ The study also found that the miscarriage rate was higher in beedi rolling group. There were adverse effects of tobacco dust on women during pregnancy.

Since 90% of the beedi industry consists of female workers, a study by R. Sabale in 2015 found out about the health hazards that women face through clinical examination. On clinical examination, **75% of women** questioned were found to be anemic. Three women out of the 52 (fifty-two) had leukoplakia on buccal mucosa. Other findings included ailments such as fingertip thickening, pharyngitis, lower respiratory tract infection and dental caries.¹⁴ It has been stated that women working in the beedi industry face severe health hazards such as cancer, back pain, eyesight issues. A prolonged exposure of tobacco each day has led to generate nausea, chest pain and nose bleeds. Furthermore, out of the 52 women questioned, **only 4 women** were somewhat aware of health threats of beedi rolling such as it causes cancer, tuberculosis, weight loss and backache. The other remaining women were not aware about the ill effects of their occupation. Furthermore, around **67.3% of the women** had not taken treatment for the health issue they faced and continued working. One more study, based on a socio-economic survey, depicted that bidi rollers have minimum access to health facilities, often suffer posture-related problems and complain of pulmonary diseases caused by inhaling

¹¹ Supra note 8

¹² Jeril Tom & Sandra Sajan Francis, Occupational Health Risks of Beedi Rollers Reinvestigated: Issues and Evidence, Int'l J. Pharm. Med. & Bio. Sc. 2, 78 (2013)

¹³ Shahla Yasmin, Basri Afroz, Bushra Hyat, and Doris D'Souza, Occupational Health Hazards in Women Beedi Rollers in Bihar, India, Bull Environ Contam Toxicol (2010) 85:87-91

¹⁴ Supra note 8

nicotine. The report further states that there is lack of basic infrastructure.¹⁵ The act was enacted to bring in good working conditions. However, there have been several newspaper articles which talk about the misery faced by beedi workers. There have been reports where children who continued their family's job of rolling beedi's also faced severe health issues.¹⁶

From the above studies mentioned, it can be stated that the Act has failed to bring about the social transformation it intended. There still exist several health hazards in the beedi industry.

Part III

In my opinion, the law enacted has failed to achieve the social transformation it intended to. The purpose of the act was to regulate working conditions for beedi and cigar workers. Firstly, it has regulated the working conditions for beedi rollers working in industrial premises but has failed to consider the *home-based workers*. Home based beedi workers constitute almost 90% of the Beedi industry, yet the act fails to acknowledge their working conditions. The home-based nature of this industry makes it difficult to implement these laws because all health-related sections are for industrial premises which exclude private dwelling house. Secondly, even though there are working conditions for industry-based workers, they still face health issues. After several years of enacting the law, there still exists a danger to the health of the workers especially women and children. One of the newspaper articles quoted: "*Laws enacted in the 1960s and 70s to improve the welfare of workers only encouraged manufacturers to fragment production into smaller units to escape regulation with the added benefit of tax exemption for producers who report output of fewer than two million beedis a year.*"¹⁷ Even though the laws were meant for the welfare of the workers, there has been minimal change. The manufacturers have found a loophole which is being used for their own advantage. Most manufacturers would ask their agents to start the process of beedi rolling at home which helps them escape the need to comply with the laws. Though the act discussed above, seeks to protect the rights of Beedi workers and improve their working conditions, the provisions of the Act are not implemented. The social activists need to take up this cause for the Beedi workers and fight

¹⁵ 72% of Bidi Workers in Murshidabad Are Women: Study, Infochange India (May 7, 2010), <http://infochangeindia.org/livelihoods/news/72-of-bidi-workers-in-murshidabad-are-women-study.html> (last visited April 3, 2023)

¹⁶ Beedi Workers in Orissa Destined with Never Ending Misereries, Orissa Diary (May 23, 2013), <http://orissadiary.com/CurrentNews.asp?id=29588>

¹⁷ Supra note 7

for their Rights for better implementation of this Act.