

**IDENTIFY THE HEALTH PROBLEMS AMONG GARLAND MAKING WOMEN****Author :Mrs.U.PalaniyammalM.sc(N) \*****Ph.D Research scholar****Department of Community Health Nursing****Vinayaka Mission's Annapoorana College of Nursing, Salem****(Vinayaka Mission's Research Foundation-Deemed to be University)****ABSTRACT**

A descriptive cross sectional survey approach was undertaken to identify the health problems among garland making women in veerapandi village , Salem". 102 were selected by purposive sampling technique and data were collected by using open ended questionnaire and physical assessment . The findings reveals that highest (29.6%) of women were in middle age group, most (90.2%) of them were from nuclear family and all (100%) the women were belongs to Hindu religion. More or less similar (56.9%) percentage of them were making garlands for 4-8 hrs, had 1-5 years of experience (56.9%), and hrs at a stretch to make garlands for 2-3 hrs (58.8%),

Health problems of garland making women reveals that most of them 93.1% had low back pain, 68,6% joint pain, 51% headache, 34.3% eye ache, 13.7% skin rashes, 11.8% constipation, 59% had stress. Based on the procedures carried out reported that 16.7% of them had finger tremors, 13.7% skin rashes, 5.9% visual impairment, 2.9% breathing difficulty and around 2% hypo and hypertension, skin soreness, swelling of joints in finger.

Key words: Garland making, Health problems,

**Introduction**

According to Joint Committee of WHO and slo (1950), souptional health in all occupations should be (1) care and improve the physical, mental and social well being of the workers (ii) prevent bindeness to health including those which occur due to workers (it) protect the workers engaged in occupation, Work place hazards are too common every where. There is need for research and action, a) to reduce the environmental health hazards of poverty. b) to guide economic development in ways that produce healthy environment for the public and workers as well as economic being (Rahman et al., 2001),

## Need for the study

Garland making is a ring (or) circlet of flowers, bought, or leaves worn on the head, placed on memorial or hung a decoration and it is a curling or circular form of flowers (John, 2004).

In India 45% of women's involved in Garland making work, 10% of women involved in Bouquet making work, and 17% of them women are florist, 12% of women involved in flowers making work (Annue Merrill Ingram, 2000), Colombia is the second largest flower expert in the world, 60% of all flowers sold in the US come from Colombia and the US consumers spend over 18 billion annually for flowers (Oosted, 2003),

International Labor Rights found that more than 66% of Ecuadorian Flower workers were plagued by work related health problems such as skin rashes, respiratory problem and eye problems due to toxic pesticides and fungicides and also found that "Flower workers experience higher than average rates of premature birth, congenital malformations and miscarriages" (Belle, 2007).

Employment hazards of garland making women may have adverse effects on pregnancy prolonged sitting, irregular working hours etc, all have been reported to be associated with several adverse outcomes (Banner Jee, 2001).

Nearly 2/3 of Colombian flower workers experience health problems such as headache, nausea, impaired vision, asthma, dizziness, conjunctivitis, skin rashes, stillbirths, miscarriage and congenital deformities (Oosted, 2003). In India 55% of garland makers experience health problems such as skin rashes, Asthma, impaired vision back pain, neurological problems (cervical and shoulder pain), joint pain in hands, miscarriage, still birth (Thankappan, 2002).

## Statement of the Problem

"A study to identify the health problems among garland making women in Veerapandi village", Salem.

## Objectives

To

- Identify the health problems of the garland making women
- Compare the health problems of the garland making women with their demographic variables.

## REVIEW OF LITERATURE

The literature of the present study are reviewed under the following sub heading

- Meaning of the garland making.
- Incidence and Prevalence of garland makers health problems

- Health problems due to garland making.
- Complication of garland makers health problems.
- Management of garland making health problems.
- Nurses role to prevention of garland makers health problem

## **RESEARCH METHODS AND MATERIALS**

**Research approach:** A descriptive study design was used for the study

**Research design:** Cross sectional survey approach was used for the study

**Setting of the study:** The study was conducted in veerapandi village

**Population:** All the garland making women those who are residing in veerapandi village

**Sampling Technique:** Purposive sampling technique was used for the present study.

**Sample Size:** The sample consists of 102 women. Who all are involved in garland making.

### **Inclusion criteria**

The study was limited to the women who were

- involved in garland making
- available during data collection
- willing to participate under the study
- able to understand and speak Tamil

### **Description of the tool**

The questionnaire of two sections

**Section - A :**The demographic characteristics such as age, , types of family, working hours, hours at stretch to work.

**Section – B** open ended questionnaire related to garland making health problems

**Section – C :** Physical examination and eye test.

### **Data collection procedure**

Prior to data collection written permission was obtained from the Panchayat leader. Informed consent was taken from garland making women and self instruction was given to the women and purpose of the interview technique was explained to them.

## RESULT

**Tab.No:4.2.1 Distribution of garland making women according to their physical health problem**

S.No	Health problems	Number	Percentage
1.	Low back pain	95	93.1
2.	Joint pain	70	68.6
3.	Headache	52	51.0
4.	Eye ache	35	34.3
5.	Skin rashes	14	13.7
6.	Constipation	12	11.8
7.	Stress	06	5.90

Distribution of garland making women according to their physical health problem related to garland making shows that highest (93.1%) of women had low back pain, whereas 68.6% of them had joint pain and 51% of them had headache, 30.3% of them had eye ache, 13.7% of them had skin rashes, 11.8% had constipation and only 5.9% of them had stress (Tab. No. 4.2.1).

It seems that back pain and joint pain were most common health problems under the study.

## CONCLUSION

From the findings of the study it can be concluded that most of the garland making women were in middle age group in nuclear family from Hindu religion highest percentage (59.4%) of them were for working 4-8 hrs per day 60% of them were had 1-5 years of working experience an less than 59% of them were making garland for 2-3 hrs at a stretch Health problems reveals that most (93.1%) of the women had low back pain. 68.6% had joint pain, 51% headache, 34.3% eye ache, 13.7% skin rashes, 11.8% constipation, 6.0% stress. Based on the procedure carried out reported those 16.7% tremors. 13.7% skin rashes. 5.9% Visual impairment, less than 5% similar (3%, 2%) of them had hypo and hypertension skin soreness, swelling of the joints and breathing difficulty. Highest 57% of them were affected with skin problems in 41-50 years and all the women were from nuclear family. Highest (33.5%) percentage had low back pain from Hindu religion, around 60% of them had low back pain (58.9%), headache (51.9%), joint pain (55.7%) working for 5-8 hours per day. Highest 63.5% of them had headache 1-5 years. All the women had stress due to hours at a stretch make the garland.

## RECOMMENDATIONS

- Similar study can be conducted for large and diverse sample to generalize the findings

- A comparative study on garland making men and women conducted to identify the health problems
- A comparative study will be conducted on garland making women in rural and urban setting

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