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Analysing the Working Conditions of
Sanitation Workers with Special Reference to
Urban Slum Dwellers in a Post COVID-19
Reality

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Abstract

In this research paper, the researchers aim to construct, deconstruct and ultimately reconstruct the existing sanitation framework of India, with special emphasis on sanitation workers from urban slums and the working conditions in which the sanitation sector- public, private, informal- operates. The entirety of this research paper is deliberately set in the social context of the coronavirus pandemic, with an eye to review the existing socio-economic norms and legislation, identify the vacuums- both institutional and non-institutional- in the prevailing sanitation paradigm and accordingly suggest modifications and corrections in the same to ensure a smooth, inclusive transition to the COVID-19-appropriate sanitation conventions that must be undertaken at all levels of national governance. The paper draws considerable attention to the nuances of manual scavenging. This research paper is structured such that after examining the formal relevant legislation, we develop the contextual layout- political, economic, social, technological, environmental, legal- of the working conditions of Indian sanitation workers. We then proceed to assessing the landscape of urban slum dwellings in similar parameters and consequently, aim to understand the complexities that the pandemic adds to the prevailing normative model. Using this fundamental information, this research paper seeks to make policy recommendations accordingly. The spirit of emancipation remains the driving force throughout.

1.0 Introduction

The term Sanitation Workers refers to all people—employed or otherwise— responsible for cleaning, maintaining, operating, or emptying a sanitation technology at any step of the sanitation chain (figure 1.1). (World Bank et al., 2019)

A study conducted by Dalberg Associates in 2018, estimated 5 million sanitation workers in various urban locations across India. They were categorised into nine broad types of sanitation workers identified along the sanitation value chain, including those engaged in cleaning sewers, cleaning latrines, faecal sludge handling, railway cleaning, work in waste treatment plants, community and public toilet cleaning, school toilet cleaning, sweeping and drain cleaning, and domestic work. (WaterAid, 2019)

Sanitation workers provide an invaluable service that many of us notice only when confronted with locked, blocked, or filthy toilets; overflowing septic tanks, or beaches contaminated with sewage. These workers are vital to the proper functioning of the sanitation systems that underpin daily life. Sanitation workers provide an essential public service but often at the cost of their dignity, safety, health, and living conditions. They are some of the most vulnerable workers. They are far too often invisible, unquantified, and ostracized, and many of the challenges they face stem from this fundamental lack of acknowledgement. (World Bank et al., 2019)

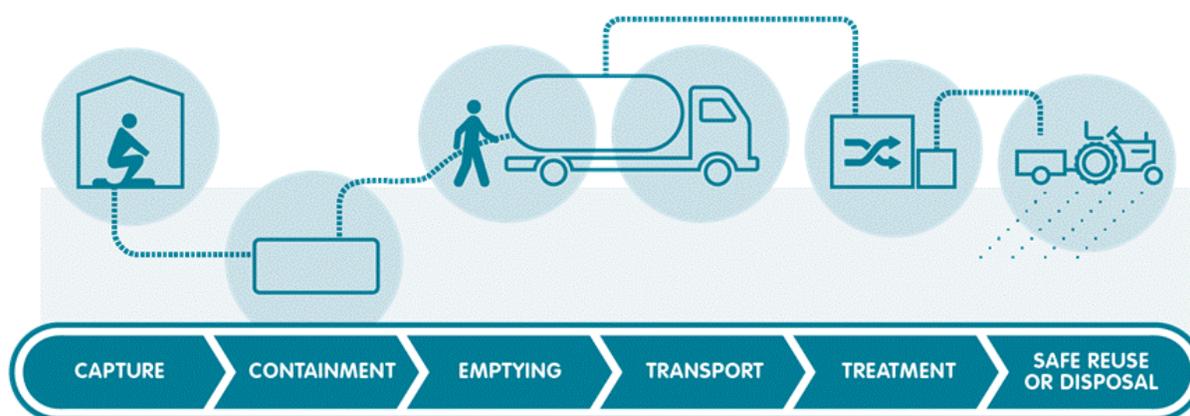


Figure1.1

(Sanitation Value Chain, 2017)

A considerable multitude of policies and laws are formally in place for the betterment of our sanitation paradigm, and the personal and professional upliftment of sanitation workers in India. These include The Prohibition of Employment as Manual Scavengers and their Rehabilitation Act of 2013 and The Swachh Bharat Abhiyaan- but the situation remains dire. This paper reviews these policies in the next section to analyse and identify the persisting loopholes- if any- in the existing legal and political framework.

The scale of the problems in our chosen field of research is unprecedented, and the available database is abysmal. To be able to recommend policy frameworks and concrete steps for the

upliftment of sanitation workers, it is essential to assiduously dissect the eclectic complications these workers face. To this end, this paper in the coming sections includes a Political, Economic, Social, Technological, Environmental and Legal (PESTEL) analysis on the same.

Dr. Martin Luther King Jr. may have said it the best: “No work is insignificant. All labour that uplifts humanity has dignity and importance and should be undertaken with painstaking excellence.”

By studying the working conditions of sanitation workers, this paper analyses if and how the society has failed in abiding by this motto.

Research has been conducted in the past on sanitation workers. However, this paper is fundamentally different from its predecessors as it analyses the meteoric impact the coronavirus pandemic has had on the lives of sanitation workers in India, affecting particularly the ones belonging to the urban slums. The pandemic is an added complexity to the caste, class and economic interweb network of predicaments faced by sanitation workers.

It is to be noted that while coronavirus has provided researchers a new tangent to look at the plight of sanitation workers, it has also limited access to primary data. Due to the contagiousness of the coronavirus and government guidelines, it was not feasible to collect primary data through interviews or surveys. Thus, this paper essentially relies on the available secondary data. Nonetheless, diligent efforts have been made to include all aspects which fall under the ambit of our chosen field of research.

2.0 Review of Policies and Existing Frameworks

As mentioned earlier, it only makes sense to evaluate the existing governmental policies, guidelines, and formal regulations- national and international- before making recommendations that target the betterment of sanitation workers in India. To this end, we will look at The Prohibition of Employment as Manual Scavengers and their Rehabilitation Act of 2013, followed by a brief insight into the ruling party’s landmark Swachh Bharat Abhiyaan- a country-wide sanitation and cleanliness drive, and lastly, a few international recommendations as introduced

by the World Health Organization. This will not just bring to light the existing legal sanitation model in India, but will also help us develop a general context for assessing whether the sanitation sector is professionalized, and what loopholes and lacunae, if any, must be filled to bridge the gaps that exist.

The Prohibition of Employment as Manual Scavengers and their Rehabilitation Act of 2013 is, by legal definition, ‘An Act to provide for the prohibition of employment as manual scavengers, rehabilitation of manual scavengers and their families, and for matters connected therewith or incidental thereto.’ (*THE PROHIBITION OF EMPLOYMENT AS MANUAL SCAVENGERS AND THEIR REHABILITATION ACT, 2013*, 2013) The provisions of this Act override, and are in effect, despite the inconsistencies that it may bear with the Employment of Manual Scavengers and Construction of Dry Latrines (Prohibition) Act, 1993 and other relevant laws or the provisions as mentioned in other laws. Largely, at face value, this Act deems the practice of Manual Scavenging illegal. It recognizes insanitary latrines as a major root of manual scavenging and acknowledges the institutionally casteist origins of the discriminatory practice of manual scavenging. It abolishes the employment of manual scavengers, open defecation, construction of insanitary latrines, and entails the conversion of all existing insanitary latrines into sanitary latrines. It also elucidates rehabilitation efforts for the manual scavengers. However, under the garb of mandatory provision of protective equipment, it renders ways to legitimize manual scavenging. This criterion is left unfulfilled and this unfulfillment is left conveniently unchecked.

The Act defines Insanitary Latrine as ‘a latrine which requires human excreta to be cleaned or otherwise handled manually, either in situ, or in an open drain or pit into which the excreta is discharged or flushed out before the excreta decomposes.’ (*THE PROHIBITION OF EMPLOYMENT AS MANUAL SCAVENGERS AND THEIR REHABILITATION ACT, 2013*, 2013) It must be noted that water flush latrines in railway passenger coaches are excluded, when cleaned with protective gear in place. This is a yawning loophole- for the railway sector is one of the largest contributors to the nation’s faecal waste and the sector’s frail pace and attempts to modernize the sanitation system do not match the urgency or need of the situation.

It must be noted that the Act highlights that if protective gear is provided, manual scavenging is not deemed hazardous, and thus, is legal. It necessitates the provision of protective equipment to all sanitation workers. However, this is a loophole- the Act's emphasis on protective equipment is rendered futile because the Act does not define what 'protective equipment' entails, per se. A separate set of rules does exist, and it lists the protective equipment required, but these are hardly provided. This clause encourages hazardous entry into manholes, and thus, is counterproductive.

The Act also requires the municipality, in the case of urban areas, and the panchayat, in the case of rural areas, to conduct a survey of manual scavengers, in order to develop a trusted database of the employed manual scavengers which will serve to aid the rehabilitation and reemployment process. The appropriate government is to appoint inspectors for all relevant work. This again, is another loophole- recognition of manual scavengers is at the behest of local governance, the inspectors so appointed are likely to not be held accountable by higher authorities; the caste prejudices that exist come into play- perhaps these inspectors are not inclined to help shatter this casteist structure in the first place. The official statistics, in consequence, might be highly underplayed. It is a deplorable reality that manual scavenging cannot be separated from the caste context in which it presently- and historically- thrives. The local government itself employs manual scavengers by way of private contractors, as elucidated by National Convenor, Safai Karamchari Andolan, Mr. Bezwada Wilson. (*Loopholes in the Prohibition of Employment as Manual Scavengers & Their Rehabilitation Act, 2013, 2016, 03:15–05:21*)

The Act's rehabilitation efforts are appalling- onetime cash assistance of Rs. 40,000, loans upto Rs. 15,00,000 at concessional rate of interest and scholarship schemes for their children. One time assistance does little to shatter years- even generations- of societal marginalization. (The Hindu, 2020) Moreover, it allows the relevant government to exempt any area within the concerned government's ambit from any provision of the law for a period of six months at a time- this flexibility is a potential loophole, for it is the employers/governments that are required to ensure the conversion of insanitary latrines into sanitary latrines, and other relevant changes as mentioned in the act. This is a work-shirking mechanism.

Swachh Bharat Abhiyaan is frequently criticized for the national drive's obsessive preoccupation with publicity and construction of toilets. While the drive's funds have been heavily channelized into the construction of public sanitary toilets, the biting truth remains that due to lack of awareness, dearth of constant water supply and flooding, these toilets are rendered unusable and thus, open defecation is still prevalent, especially in urban slums. This only accentuates manual scavenging. Often, the toilets constructed as part of the Swachh Bharat Mission are not connected to the sewage system, which worsens the problem. Moreover, the mission negates- rather, invalidates- the casteist nature of the nation's sanitation paradigm by refusing to even address it. Undoubtedly, the drive has caught international attention, but sanitation workers are pushed to the margins. The situation has only worsened- In 2017, official records accounted for 13,000 workers engaged in manual scavenging. In 2018, an inter-ministerial task force counted up to 53,236 people involved in manual scavenging. (Correspondent, 2018)

There is a constant pressure- especially on the poorest, who need toilets the most- to construct toilets, so that regions may be declared Open Defecation Free under the Swachh Bharat Abhiyaan. Lower-level government officials rush to meet toilet-building targets. Once targets are met, all further betterment initiatives are stopped. The government provides cash assistance of INR 12,000 for the construction of sanitary latrines in households- one per ration card holder- but this money often does not come in at all in lieu of the multi-levelled red tapism that takes place. Construction of larger pit latrines amounts to more than the sum given in the first place. Many toilets are abandoned because smaller pit latrines induce the casteist fear of impurity and pollution associated with defecation, as they need frequent emptying. This 'pressure' often takes the form of abuse- officials shame those who defecate in the open, and photos of the same are circulated to 'reproach' them. More often than not, those from Scheduled Castes and Tribes are at the receiving end- especially in rural areas. (Ghose, 2017)

A gaping problem is the government's tendency to equate Open Defecation Free areas with the number of toilets constructed there, while ignoring if the toilets are used at all- which they aren't. (Lalwani, 2019) The Swachh Bharat Abhiyaan has sought refuge in the removal of filth from the

public eye, relying on facts, figures are paperwork that often does not mirror the ground reality. The mission does entail sweeping- except, a lot of the mess goes under the rug.

This claim is supported by a report by the World Health Organization (WHO), which emphasizes that efforts to prohibit manual emptying (for example, in India and Senegal), have not necessarily curtailed the practice but instead have forced it underground. It also elucidates how manual scavengers claim to have been paid in food and kind rather than money. The report focuses on the provision of protective equipment, and more so on Personal Protective Equipment (PPE)- it must be noted that for sanitation workers, PPE kits were a pre-Corona requirement already; the pandemic only makes the availability and provision of PPE a necessity- an urgency. The report highlights that in India, permanent employees in the sanitation sector are better paid than their informal counterparts, who received as much as three times the salary of the informal sector employees. (World Bank et al., 2019)

3.0 PESTEL Analysis of the Problems Faced by Sanitation Workers

Political Factors

The Bharatiya Janata Party, the ruling party of India, mentioned in their 2019 manifesto the following- “We will make adequate provisions for personal safety equipment and accelerate the adoption of mechanized cleaning to ensure occupational health and safety for Safai Karamcharis.”. However, the provisions remain far from adequate. The other major national political parties like the INC and CPI, who base their entire political agenda on the emancipation of the minorities and the marginalised, did not even mention the plight of *safai karamcharis* (sanitation workers) in their manifestos. The sad reality is that in India, the lives of sanitation workers are merely tools in the murky waters of politics, which are used to wield power and further power-hungry political motives. The case study mentioned elaborates on the same.

Case Study: During his visit of the Kumbh Mela in February 2019, Prime Minister Narendra Modi washed the feet of five sanitary workers, including two women, — hailing them as ‘karma yogis’ — and then wiped them dry to express his gratitude for their service and lauded their role in maintaining cleanliness in Kumbh Mela campus. (Dixit, 2019) A day after Prime Minister Narendra Modi washed the feet of five sanitation workers at Prayagraj, hundreds of sanitation

workers gathered on Parliament Street under the banner of the Aadi Dharm Samaaj to slam his government's failure to take concrete steps to end manual scavenging and better the lives of sanitation workers. "What is the point of washing feet when his government has failed to stop those feet from entering sewers? When it has failed to give even one paisa in compensation to those who have died in the sewers?" asked Darshan Rattan Ravan, the leader of the group. Swaraj India president Yogendra Yadav, who addressed the protesters, laid out their demands to political parties. "All manifestos for the 2019 Lok Sabha polls must include the promise to implement the Supreme Court's orders and the anti-manual scavenging laws, to end all human entry into sewers within one year, to regularise all sanitation jobs by ending contract work in the sector within five years and to develop a national consensus on sub quotas for the castes engaged in such work," said Mr. Yadav. (Correspondent, 2019)

This shows that there is a gaping lack of political importance for sanitation workers. This political vacuum renders substantial and concrete change in the sector a distant dream.

Economic Factors

Sanitation workers face economic and financial problems on an unprecedented scale. The wages that most of them earn fall below the minimum wage and a significant portion of their earnings exhausts in travelling to their allocated worksites. The situation is worse for contractual sanitation workers, who face job insecurity and have even lesser wages. They are inhumanely exploited.

On the macro level, the economy bears the brunt of poor sanitation. A study report published collectively by LIXIL, WaterAid and Oxford Economics mentioned that on a national level, in terms of total cost with regards to poor sanitation, India suffers by far the most, with US\$106.7 billion wiped off from the GDP in 2015- almost half of the total global losses- and 5.2% of the nation's GDP. India tops with huge losses in both total US\$ economic losses and as a percentage of the GDP. (Oxford Economics et al., 2016)

While talking about the economics involved in sanitation work, it is to be mentioned that the stakeholders in this field- the contractors of sanitation workers- to this day resort to manual

scavenging as it is cheaper than mechanised sanitation. Due to helpless social and economic circumstances, manual scavengers agree to work at minimal wages.

Social Factors

The stigmatization that comes with sanitation work is magnified by the caste system, and aided by class divides, this ensnares the sanitation workers in a web of absolute ostracism. This compounds the limitations on social mobility that workers face and often results in intergenerational discrimination, where children of sanitation workers often struggle to escape the vicious cycle of limited opportunities and sanitation work. (World Bank et al., 2019)

Another complication is that it is quite common for sanitation workers to resort to inebriation to numb their senses before entering sewers and pits. This significantly increases the risk of accidents, and in the longer run, this may lead to substance abuse, addiction and health hazards. (Aizenman, 2019)

Women sanitation workers face heightened vulnerability. Intersectionality comes into play here. It is defined as “the complex, cumulative manner in which the effects of different forms of discrimination combine, overlap, or intersect”. To deconstruct this idea, it essentially means that discrimination does not exist in a bubble – different kinds of prejudice can be amplified in different ways when put together. (*WHAT DOES INTERSECTIONAL FEMINISM ACTUALLY MEAN?*, 2018) Some of the issues women face are- differential wages, unsafe working environment, lack of protective gear, specific health issues because of inaccessible toilets in urban areas and non-payment of salary during maternity leave. (*India’s Sanitation Workers Seek Immediate Help From The Government*, 2020)

Case Study; Bengaluru’s KR Puram Area, 2017: In Bengaluru's KR Puram area, women sanitation workers and garbage collectors -- called *pourakarmikas* – had not been paid their salaries by the contractor who hired them on behalf of the Bruhat Bengaluru Mahanagara Palike (BBMP) for at least three months. When the women protested and demanded that he pay them their money, he not only abused them with casteist slurs but also sexually harassed them by taking his pants off in their presence and threatening to rape them. He allegedly said, “Your

wages are in my pants, come and take it.” Enraged, the women complained to their union. On hearing their plight, the union filed complaints with the BBMP Sexual Harassment Committee and the Karnataka Social Welfare Department. But even impending legal trouble did not deter the brazen contractor from further harassing the women. When he heard of the complaint, on Thursday, the contractor, Nagesh, allegedly again threatened the workers with the help of local goons. (Kokra, 2017)

This elucidates the deplorable social conditions of Indian sanitation workers.

Technological Factors

Technological problems faced by sanitation workers in India include lack of adequate operating equipment, gloves, masks and PPE kits and other protective equipment. Due to the unavailability of these basic technical amenities to sanitation workers, the sanitation workers have to enter sewers and work in dangerous environments with no protection, often in shorts or a loincloth, either barefoot or in unsteady slippers.

On the other hand, patterns show that technology can help in the elimination of manual scavenging by providing efficient replacements for manual sanitation workers. The lack of such a replacement, which is also economically feasible, has led to the continuation of manual scavenging even though official policies and laws exist to eliminate it.

Environmental Factors

In this section, we will deconstruct the health hazards posed by the immediate work environment of sanitation workers. The environmental hazards faced by sanitation workers are massive. These include coming into direct or close contact with faecal sludge, wastewater; the operating equipment used in emptying, conveyance, and treatment of faecal sludge and wastewater; and working in confined and often dangerous spaces. Toxic gases, such as ammonia, carbon monoxide and sulphur dioxide in septic tanks and sewers have hazardous- even fatal- impacts on these workers. Sanitation workers who are not protected by adequate health and safety measures risk injury, infection, disease, mental health issues, and death. The reported physical and medical conditions directly associated with sanitation work include headaches, dizziness, fever, fatigue, asthma, gastroenteritis, cholera, typhoid, hepatitis, polio, cryptosporidiosis, schistosomiasis, eye

and skin burn and other skin irritation, musculoskeletal disorders (including back pain), puncture wounds and cuts, blunt force, trauma and fatality. (World Bank et al., 2019) Every so often, the latrine pits collapse. The worker will be inside the pit emptying it, and the separating wall can cave in.(Aizenman, 2019) It is estimated that three sanitation workers die every five days in India. (WaterAid, 2019)

Legal Factors

Legislation has not been of much help to sanitation workers. Laws and acts related to sanitation workers have been analysed in the previous section. To give a brief, The Government of India enacted the Employment of Manual Scavengers and Construction of Dry Latrines (Prohibition) Act in 1993. However, it took four years to notify it in the Gazette of India (1997), and the majority of the states enacted it only by 2000. Evidence shows that in more than 20 years of its existence, not a single government official has been convicted for allowing this practice to continue.

Similar is the situation with the new legislation titled the Prohibition of Employment as Manual Scavengers and Their Rehabilitation Act, 2013 or the MS Act, 2013. The legislation views the provision of protective gear to the workers and observance of safety precautions as an alternative to mechanisation. According to the Act, those using protective gear and devices as may be notified by the central government would not come under the definition of a manual scavenger, which too looks like an escape clause that leads to continuing deployment of workers for manual scavenging. (Gatade, 2015) The Swachh Bharat Abhiyan, too, hasn't been directly beneficial to sanitation workers.

It is important to point out that with all the loopholes that exist at all stages of these policies, there are positive and concrete steps in the direction of better conditions for sanitation workers mentioned in these laws and acts too. Sadly, all of them seem to have had nearly no effect, due to inefficient implementation and little action that would serve as a deterrent for violators.

3.0 The Impact of the Coronavirus Pandemic

Sanitation workers are one of the most affected groups by this pandemic. The nature of their work fundamentally makes them more susceptible to the virus. The lack of protective gear just adds to this vulnerability.

In Maharashtra, the state with the highest number of COVID-19 cases, sanitation workers from Mumbai reported that they had not received any PPEs from the authorities. Meanwhile, in central Delhi, sanitation workers who work in hospitals are particularly apprehensive about their health as they clean COVID-19 bio-medical waste such as discarded face masks, used gloves, etc., without adequate protective gear. Whenever they ask for PPEs, the authorities tell them that there is a dearth of PPE kits. Despite the risk of contracting COVID-19, the workers say they have no choice. No other jobs are available to them. (Bisht, 2020)

The coronavirus threat is not limited to the workplace. Sanitation workers reside mostly in informal settlements or slums with high population density. The inherent nature of urban slum dwellings (notified, recognized and identified), including the prevailing sanitation and hygiene paradigms, unorganized housing patterns, abysmal levels of financial, medical and food security, dearth of basic civic amenities and daily-wage type prevalent economic landscape makes this housing system particularly susceptible to contagion. According to the 2011 Census, the largest number of Slum Enumeration Blocks were registered in the state of Maharashtra, and these were as many as 21,359. It must be noted that the latest official data is practically a decade old and considering the land scarcity our nation has faced as of late, it is likely that urban slums have only increased in strength since. If this information is deemed analogous with the available data about the state-wise spread of the novel coronavirus, we can notice that Maharashtra exhibits the maximum number of coronavirus cases (at the time of this research project)- 3,10,455 in totality. While this entire figure cannot be traced to slum dwellings, it is a known fact that population density and living standards are factors that impact contagion of the coronavirus. A serological survey conducted by the Indian Council of Medical Research (ICMR) underscores that the coronavirus risk is 1.09 times higher in urban areas than in rural areas. It is 1.89 times higher in urban slums- almost the double. This knowledge highlights a hard-hitting truth- coronavirus is as much a class problem as it is a question of science. To comprehend fully the vulnerability of

slums to the novel coronavirus, one must understand the prevailing socio-economic ecosystem here.

The housing landscape in the typical Indian slum features narrow lanes, dearth of potable water supply, open drains and garbage piles, shared community toilets, naked brick houses with tinned roofs and little to no ventilation arrangements- these are usually single bedroomed structures, wherein the room is as small as 8 feet by 8 feet in dimension, and it is not uncommon for up to 6 or 7 people to share this living space. The Census of 2011 reveals that 44.8% of all slum households have only one room, and 25.1% of slum households have 4 family members. This figure is followed by 6 to 8 family members, at 22.2%. Government directions and corona-appropriate behavior, such as social distancing norms, are next to impossible to emulate in such a dense housing condition. Tinned roofs add to the inconvenience- ventilation arrangements are pitiable, and the residents eventually find themselves out in the open for fresh air. Most of the urban slum dwellers are daily wage earners employed in high-contact activities, such as construction work, domestic help, and sanitation. This triggers a constant stream of movement in and out of slum dwellings, thus enhancing the risk of contagion. Added to this is the fear and stigma of having to be forcefully admitted to isolation chambers, and the lack of awareness and education in slum dwellings only accentuates this all-consuming paranoia. The slum dwellers are thus ensnared in cyclical insecurity- social, economic, psychological, and medical, and this only adds to the coronavirus paranoia.

4.0 Recommendations

Having analyzed the main socio-economic-political context, factors and policy measures in place, we can safely assume that we can make recommendations to better the working condition of sanitation workers in the post-coronavirus reality that awaits us. At the most basic level, it is fundamental that sanitation workers are treated like health workers, more so in the current global scenario- when their professional work is identical to that of doctors in purpose.

1. Coronavirus-appropriate training must be meted to all sanitation workers. This includes institutional- public and private- initiatives to impart biological knowledge about the

virus, the symptoms, ways to protect oneself against the virus, how to mitigate its spread and the like. Emphasis on important relevant terminology- for instance, the terms ‘quarantine’ and ‘isolation’ and their implications- is important. This can also take the form of an awareness campaign that is strategically designed to appeal to the target audience in question. It is vital to take into account the sanitation-work context of the situation at hand. Heavy dissemination of this information in urban slums is important.

2. Standardization of operational procedures and occupational technical training is highly recommended. This again, should take form in a coronavirus context, especially with respect to the collection, transportation, and disposal of bio-medical waste and the dead bodies of persons who died of the coronavirus.
3. Technological advancements, especially those that minimize human contact with waste must be introduced in the sanitation sector. This will also automatically entail the upgradation of the training curriculum with respect to new machinery and technology, as introduced. The aim should be to eliminate the need of humans to enter sewers- this technological gap must be filled.
4. The caste and class context of sanitation work in India must be acknowledged by institutions. The Swachh Bharat Abhiyaan must initiate dialogue in this regard. It must be formally acknowledged that manual scavenging is a social problem. Betterment initiatives may include advertisement campaigns by the government regarding the same, holding those in power- especially at the local level- accountable when casteism is perpetrated institutionally or when community ostracization or stigmatization is left unacknowledged by authorities and perpetrators go unpunished. Legal literacy campaigns must be undertaken by the State. A specific vertical of the Swachh Bharat Abhiyaan dedicated to inquiry into caste and class issues faced by sanitation workers could be started to this end. An evidence base of all casteist stigmatization of sanitation workers should be built.
5. Betterment efforts with regard to the nation’s sanitation infrastructure must make headway. This includes ensuring all toilets are sanitary latrines with a running supply of clean water, especially those in the railway sector, which is the major contributor to the

nation's faecal waste. Sewage systems must be reworked and all pipelines must be checked regularly as part of maintenance efforts. More than anything, individuals should be educated to make use of toilets- initiatives to launch awareness programs by local authorities will throttle the battle against open defecation.

6. Registries of all sanitation workers must be maintained- a stricter check must be imposed on lower-level officials to ensure accuracy and transparency in the records so maintained.
7. Municipalities must ensure that no manual scavengers are employed- contractual labour must end. They must also ensure that all protective equipment, as mentioned in the rules as established by The Prohibition of Employment as Manual Scavengers and their Rehabilitation Act of 2013, is provided to all sanitation workers. Emphasis on PPE kits, gas detectors and oximeters is important.
8. Concentrated and intensive sanitization efforts in urban slum dwellings must be undertaken. These are to be supported by intensive coronavirus awareness campaigns and large-scale coronavirus swab tests. Containment efforts as undertaken in Dharavi slum, Mumbai, can serve as a stellar precedent in this regard. Health insurance coverage and regular health check ups to all sanitation workers, especially in a post-coronavirus reality is important.
9. The cash assistance of INR 12,000/- provided for toilet construction as part of the Swachh Bharat Abhiyaan must be increased to enable the construction of better ventilated, larger pit latrines. Efforts must be taken to ensure that this sum reaches the grassroots on time.

5.0 Conclusion

The coronavirus pandemic has wreaked havoc on the existing healthcare and sanitation paradigm of the world. It has exposed the classist, casteist hollowness of the medical system. Undoubtedly, this global crisis will force us to transform our perceptions and modify our approaches to sanitation as a global community. However, not all are equally affected by the pandemic: the bridge between the haves and the have-nots has probably never been this wide. Those on the lower rungs of the socio-economic ladder were further pushed into marginalization due to unavailability of resources, lack of awareness, congested housing patterns, nature of work and

the like. Owing to their inherent, high-contact characteristics, healthcare professionals and urban slum dwellers are the worst affected groups. At the intersection of both these demographics lie public, private and informal sanitation workers. This renders them highly susceptible to the risk of contagion. Lacunae in this field of work are pre-existent: sanitation workers have historically faced caste and class ostracisation, marginalisation in the politico-legal sphere, financial insecurity and economic exploitation, physical and mental health hazards at workplace, gender-based discrimination, unrelenting, uncompromising nature of the employers and the like. Emancipatory efforts in the form of legislation, policies and official frameworks have been counterproductive- manual scavenging, though prohibited by law, persists and rehabilitation measures are half-hearted. The law is exclusionary and the loopholes that persist are escape clauses that legitimise poor working conditions, lack of provision of protective equipment and caste discrimination. The complex and multi-dimensional nature of the exploitation faced by sanitation workers will only accentuate in the wake of the coronavirus, and the unfortunate, ignorant social stigmatisation that comes with contracting the virus will find India's sanitation workers at a new juncture of possible exploitation and further marginalisation. It only makes sense- especially on the grounds of ethics and inclusivity- to address the urgency of the situation and the predicaments at hand, hold perpetrators accountable, acknowledge instances of institutional exploitation, fill the loopholes and gaps that exist and modify India's sanitation structure in preparation for the challenging post-pandemic reality that awaits the global community.

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