

Vulnerability Mapping and Identification of Alternative Livelihood for Women Beedi Workers in Telangana

NLI Research Studies Series
No. 167/2024

Ellina Samantroy
Pragna Parande
Anamika Das



V.V. Giri National Labour Institute

Vulnerability Mapping and Identification of Alternative Livelihood for Women Beedi Workers in Telangana

Ellina Samantroy*

Pragna Parande**

Anamika Das***



V. V. Giri National Labour Institute

(Ministry of Labour & Employment, Govt. of India)

Sector – 24, Noida

* Fellow, V.V. Giri National Labour Institute

** Advisor, V.V. Giri National Labour Institute

*** Research Associate, V.V. Giri National Labour Institute



ISBN: 978-93-82902-26-3

Copyright © V.V. Giri National Labour Institute, Noida

No. of Copies : 100

Year of Publication : 2025

This document can be downloaded from the Institute's website at www.vvgnli.gov.in

Opinions expressed in the study are solely of the author and do not necessarily reflect the views of the Institute.

Printed and Published by V.V. Giri National Labour Institute, Sector-24, Noida-201301, U.P.

Printed at: Chandu Press, D-97, Shakarpur, Delhi-110092



Table of Content

	List of Tables	iv
	List of Figures	v
	List of Maps	vi
	Abbreviations	vii
	Preface	ix
	Message	x
	Acknowledgement	xi
S.No.	CHAPTER TITLES	PAGE No.
	Chapter 1 Introduction	1 - 11
1.1	Background of the study	1
1.2	Review of the Literature	5
1.3	Objectives	8
1.4	Research Methodology	8
1.5	Outline of the Study	11
	Chapter 2 Employment Trends and Informal Sector: Gender Differentials	12-17
2.1	Introduction	12
2.2	Trends in Formal and Informal Employment	12
2.3	An Overview of the Trends in Women's participation in the Workforce	13
2.4	State-wise analysis of Worker Population Ratio	14
2.5	Status of Women's Employment	16
2.6	Summing Up	17
	Chapter 3 Vulnerability Mapping of Beedi Workers in Telangana	18-37
3.1	Introduction	18
3.2	Socio-economic Conditions: Family Structure with Household Size	18
3.3	Working Conditions of beedi Workers	28
3.4	Health Issues of Beedi Workers and Lack of Health and Safety Training	34
3.5	Discussion	36
	Chapter 4 Legislative Provisions and Welfare Schemes for Beedi Workers in Telangana	38-55
4.1	Introduction	38
4.2	Labour Welfare Schemes for Beedi workers: Insights from the field	38
4.3	Skill Development Programme	48
4.4	Legislative Provisions and Prominent Judgements	51
4.5	Discussion	54
	Chapter 5 Alternative Livelihood Opportunities	56-58
5.1	Introduction	56
5.2	Alternative livelihood opportunities	56
5.3	Discussion	57
	Chapter 6 Conclusion and Policy Recommendations	59-66
	REFERENCES	66-71
	APPENDIX 1	72-78
	APPENDIX 2	79-80



List of Tables

Table Nos.	Titles	Page No.
2.1	Trends in Formal and Informal Employment	13
3.1	Lighting Sources Among Beedi Workers	22
3.2	Intergenerational Employment	30
3.3	Productivity of home-based beedi workers (per day)	31
3.4	District-wise average productivity of home-based beedi workers (per day)	31
3.5	Wages of Beedi rolling per day	32
3.6	Average time spent in paid and unpaid activities: Insights from Primary Time Use Survey	33
4.1	Overall Awareness Levels of Various Beedi Workers' Welfare Schemes among Beedi Workers	38
4.2	Budgetary Allocations and Expenditure under the Health Schemes in Telangana in last five years (in rupees)	40
4.3	Availability of Hospital for Beedi Workers	41
4.4	Budget Allocations and Expenditure under the Housing Schemes in Last Five Years	45
4.5	Number of Houses allocated in last five Years	45
4.6	Budget Allocations and Expenditure under the Financial Assistance for Education	47
4.7	Number of beneficiaries availed the Financial Assistance for Education in last five Years	48

List of Figures

Figure No.	Title	Page No.
1.1	Challenges for Women Workers in Beedi Industry	3
1.2	Four key areas	4
1.3	Sample size	9
1.4	State-wise Registered Beedi Workers (2022-23)	10
1.5	Dispensary-wise Number of Beedi workers in Telangana State (2022-23)	11
2.1	WPR (in per cent) in usual status (ps+ss) Age Group: 15 years & above (Female)	14
2.2	Status in Worker Population Ratio (WPR) (in percent) according to usual status (ps+ss) for each State/UT age group 15 years and above	15
2.3	Worker Population Ratio (WPR) by usual status (ps+ss) for each social group for persons of 15 years and above (Rural: Female)	16
2.4	Worker Population Ratio (WPR) by usual status (ps+ss) for each social group for persons of 15 years and above (Urban: Female)	16
2.5	Broad Employment Status 15 years and above (Female)	17
3.1	Distribution of Households by family size and family structure	19
3.2	Age of the children	19
3.3	Educational status of Beedi worker's children (self-reported by beedi workers)	20
3.4	Nature of House Accommodation with House Ownership	21
3.5	Cooking Sources of Beedi Workers	22
3.6	Sources of Drinking Water among Beedi Workers	22
3.7	Toilet Facilities among Beedi Workers	24
3.8	Household Assets Owned by Beedi Workers	25
3.9	Possession of Land	26
3.10	Beedi workers by Caste Composition	26
3.11	Marital Status of Beedi Workers	27
3.12	Educational Status of the Beedi Workers	27
3.13	Monthly Income of respondents' family	28
3.14	Beedi making: Initial age	29
3.15	Beedi making: Years of experience	29
3.16	Beedi as home-based employment: District-wise participation	32
3.17	Health Issues among Home-Based Beedi Workers (Self-reported)	35
4.1	Procedure to avail Health Scheme	40
4.2	Procedure to apply Financial Assistance Through National Scholarship Portal (NSP)	46
5.1	Alternative Livelihood Opportunities Suggested by Beedi Workers	56



List of Text Boxes

Text Box No.	Title	Page No.
3.1	Mission Bhagiratha: Overview and Implementation	23
3.2	Insights from FGDs	30
3.3	Insights from FGDs	33
3.4	Insights from FGDs	34
3.5	Insights from FGDs	35
3.6	Insights from FGDs	35
4.1	Challenges experienced in the implementation of welfare schemes- Insights from Key Informants Interviews (KIIs)	39
4.2	Health Care Facilities for Beedi Workers	39
4.3	Insights from Key Informants Interviews (KIIs)	40
4.4	Insights from Key Informants Interviews (KIIs)	41
4.5	Insights from Key Informants Interviews (KIIs)	42
4.6	Insights from Key Informants Interviews (KIIs), Kamareddy Dispensary	43
4.7	Insights from Key Informants Interviews (KIIs), Nizamabad Dispensary	43
4.8	Insights from Key Informants Interviews (KIIs), Nirmal Dispensary	43
4.9	Insights from Key Informants Interviews (KIIs)	44
4.10	Insights from Key Informants Interviews (KIIs)	45
4.11	Financial Assistance for Children of Beedi Workers	46
4.12	Challenges experienced in the implementation of Financial Assistance for Education - Insights from Key Informants Interviews (KIIs)	47
4.13	Success story of Children of Beedi Worker in Telangana	47
4.14	Insights from Key Informants Interviews (KIIs), LWO Hyderabad	48
4.15	Insights from Key Informants Interviews (KIIs), LWO Hyderabad	49
4.16	Challenges experienced in the implementation of skill development programmes for Beedi workers in Telangana- Insights from Key Informants Interviews (KIIs)	50
4.17	Skill Development Centres in Telangana	50
4.18	An Initiative by the Directorate General of Labour Welfare (DGLW)	50
5.1	Insights from FGDs	57
5.2	Insights from Key Informants Interviews (KIIs)	59

List of Map

Map No.	Title	Page No.
1.1	Location Map of Telangana State	10



List of Abbreviations

DBT:	Direct Benefit Transfer
FGDs:	Focus Group Discussions
ICLS:	International Conference of Labour Statisticians
ILO:	International Labour Organization
LFPR:	Labour Force Participation Rate
NSO:	National Statistical Office
NSP:	National Scholarship Portal
NSSO:	National Sample Survey Office
OBC:	Other Backward Caste
OSH:	Occupational Safety and Health
PFLS:	Periodic Labour Force Survey
PMAY:	Pradhan Mantri Awas Yojana
PMKVY:	Pradhan Mantri Kaushal Vikas Yojana
RIHS:	Revised Integrated Housing Scheme
SC:	Scheduled Caste
SPSS:	Statistical Package for the Social Sciences
VTP:	Vocational Training Providers
WHO:	World Health Organization
WPR:	Worker Population Ratio





Preface

Women's employment within the informal sector has remained central to policy discourses on women's economic empowerment and access to social security. Within the informal sector, the Beedi industry has played a significant role in ensuring employment for women across several regions of the country. The enduring tradition of beedi rolling as home based employment has remained central to the lives of many women workers creating essential employment opportunities for them. The Annual Report of the Ministry of Labour and Employment for the year 2022-2023 identifies Telangana as ranking third in India for the number of registered beedi workers, with approximately 458,040 individuals engaged in this sector. The contribution of women to this sector has been significant with a greater proportion of women being represented in this industry. This situation reflects not only the scale of the industry but also the socio-economic dependence of a significant population on this form of labour. The present study aims to shed light on the multifaceted socio-economic challenges faced by this important yet underrepresented segment of India's labour force.

The impetus for this study arises from the urgent need to systematically document and analyse the vulnerabilities of these women workers while critically examining the legislative and policy frameworks designed to protect their rights and welfare. This research adopts a rigorous methodological framework, integrating both qualitative and quantitative approaches to provide a nuanced understanding of the socio-economic conditions of women beedi workers in Telangana. The research design includes in-depth interviews, focus group discussions, and time-use surveys to capture the lived experiences of beedi workers, complemented by secondary data analysis to contextualise the findings within broader socio-economic trends.

The findings of this study are intended not only to inform policymakers and stakeholders but also to serve as a catalyst for further scholarly inquiry and advocacy. This research is situated at the intersection of labour studies, public health, and gender studies, and it contributes to multiple academic discourses while also offering practical recommendations for policy and practice. The study aims to assist policy makers interested in gender and development issues to implement targeted interventions towards promoting gender equality. It also envisions contributing towards promoting social justice that recognizes the dignity and rights of all workers, especially those who have been historically marginalised and undervalued.

I am sure that this study will be invaluable in guiding planners, policy makers, researchers, trade unions, civil society organisations and trade unions in working towards enhancing women's economic participation and ensuring access to social protection to women informal workers.

Dr. Arvind
Director General



Message

The socio-economic fabric of Telangana has long been interwoven with the struggles and resilience of home-based beedi workers, particularly women, who constitute the backbone of this informal industry. Having grown up in Telangana, I have witnessed firsthand the pervasive exploitation and marginalisation that define the lives of these workers—lives marked by economic precarity, health hazards, and systemic invisibility. Their toil, often concealed within the confines of their homes, remains undervalued and unprotected, despite the crucial role they play in sustaining their households and the larger economy.

This study, Vulnerability Mapping and Identification of Alternative Livelihood for Women Beedi Workers in Telangana, is a timely and rigorous attempt to bring to light the vulnerabilities and ground realities faced by these women. By systematically documenting their challenges and critically analysing the existing legislative and policy frameworks, the research aims to contribute not only to academic discourses but also to tangible policy reforms and programmatic interventions that can enhance their welfare and economic security.

My deep-rooted connection to Telangana, coupled with my proficiency in Telugu and an acute understanding of the historical and social challenges confronting beedi workers, has been instrumental in shaping this research. The ability to engage directly with workers in their language and cultural context has provided invaluable insights, ensuring that this study remains grounded in their lived realities rather than distant theoretical constructs.

My past experience as a Member of the National Commission for Protection of Child Rights also allowed me to understand the impact that home-based beedi work has on children from such families. The intergenerational consequences of this work—ranging from disrupted education to adverse health effects—underscore the urgency of identifying sustainable livelihood alternatives for women beedi workers.

It is my hope that this study serves as a catalyst for meaningful interventions, inspiring policymakers, researchers, and civil society to advocate for sustainable livelihoods, equitable labour protections, and improved health outcomes for women beedi workers in Telangana. Their struggles, resilience, and aspirations deserve to be acknowledged, and it is imperative that we work collectively to secure a future where their dignity and rights are upheld.

Pragna Parande
Advisor, VVGNI

Acknowledgements

We express our profound gratitude to those who have been instrumental in the successful completion of this work. First and foremost, we extend our deepest appreciation to Dr. Arvind, Director General of the V. V. Giri National Labour Institute for his unwavering support and insightful guidance throughout this project.

We are especially grateful to Ms. Sumita Dawra, IAS, Secretary (L & E); Shri Kamal Kishore Soan, IAS, AS & DGLW; Dr. Onkar Sharma, Chief Labour Commissioner; Shri K Shekar, DDGLW; Shri Niranjana Kumar, DWC(HQ), Shri Sandeep Kumar Chaurasia, Welfare Administrator (HQ) and other officers of the DGLW, Ministry of Labour and Employment, New Delhi for their encouragement and valuable inputs for enriching the study.

We extend our heartfelt thanks to Shri D. Srinivasulu, Welfare Commissioner, LWO Hyderabad, Shri Abhinav Tiwari, AWC, and Shri Bhemeswara Rao, Welfare Administrator, for their invaluable support throughout the study. The support of their department in terms of providing rich insights on the implementation of welfare schemes has been an invaluable contribution to the study.

We would like to express our sincere gratitude to the members of the Research Advisory Group at the Centre for Gender and Labour, VVGNI; Dr. Ratna Sudarshan, Ms. Chitra Chopra, and Prof. Renuka Singh for their valuable comments and suggestions during the proposal presentation, which greatly contributed to the enrichment of this study. We also express our sincere gratitude to Dr. M.M. Rehman, Former Faculty at VVGNI for his unwavering support.

We are thankful to Dr. Rupesh, SMO, Central Hospital, Nampally; Dr. Mahender, SMO, Sircilla dispensary, Dr. Srikanth, SMO, Nizamabad; Dr. Shruthi, GDMO, Kamareddy dispensary, Dr. Mahesh Babu, GDMO, Nirmal dispensary and other nursing officers and staff for sparing their valuable time and providing insights for the study.

We are thankful to Shri B. Surendran, Organizing Secretary of Bharatiya Mazdoor Sangh (BMS), for his insightful contributions. Special thanks to Dr Priyanka Chatterjee for her constant support in providing data inputs to enrich the study. We extend our heartfelt gratitude to Chetana Conscience of Women for their support. We specially thank Ms. Vani Manoraj, Senior Analyst at the Advisor's Office & Managing Director of Chetana Conscience of Women, for her invaluable contributions to this study. Her efforts in conceptualising the study, supporting the research implementation, and facilitating access to key experts were instrumental to the success of this study. We also sincerely thank Smt. Jyoti Mujumdar, President of Chetana Conscience of Women, for her insightful guidance and support throughout the study.

We are also immensely thankful to Mrs. Kusum Balooni, Computer Operator at VVGNI, for her invaluable support and efficiency in managing the data and ensuring that our work progressed smoothly. Her assistance in handling complex data processing tasks was crucial in meeting our research objectives. Her contribution played a pivotal role in the successful completion of this project, and we are sincerely grateful for her support.

Our gratitude extends to Field Investigators Mrs. T. Sinduja, Mr. Bhadri Gopi, and Mr. Naveen Kalyan for their constant support in conducting the fieldwork effectively. Their persistent efforts and professionalism ensured that the data collection process was carried out smoothly



and efficiently, often under challenging conditions. The insights and information they gathered were fundamental to the integrity and success of our research.

We would like to acknowledge Mr. Ankit Kumar, Intern at VVGNI, for his invaluable contribution in summarising the legal cases of beedi workers, which greatly supported the development of this study.

Our Special thanks to Dr. Manoj Jatav, Fellow at VVGNI, and Shri Amitav Khuntia, Associate Fellow at VVGNI, for their support during the study.

Our Special thanks to Shri S. K. Verma, Assistant Library and Information Officer at VVGNI, for his exceptional support in collecting relevant literature and providing necessary documents. We also thank Dr. Sanghamitra Jana Chatterjee, Assistant Librarian at Vina Mazumdar Memorial Library (CWDS) and Librarian of Nehru Memorial Museum and Library (Teen Murti) for their support in collecting literature. Additionally, we appreciate the efforts of the Administrative Officer, Assistant Administrative Officer and Accounts officer for the smooth facilitation of this study. We also express heartfelt thanks to Mrs. Nidhi Agarwal, Stenographer at VVGNI for her technical support contributed in value addition to this study.

Lastly, the support provided by Mr. Rajesh Karn, Publication Section has been indispensable in bringing this report to its final shape.



Chapter 1 : Introduction

1.1. Background of the Study

Beedi workers in India represent a significant part of the country's labour force situated within the informal economy. They engage in the manual production of beedis, which are traditional hand-rolled cigarettes mostly produced by women workers. In India, beedi-making has a longstanding tradition and is one of the primary sources of employment for women in the unorganised sector. However, the situation of women in the informal economy in India is both complex and critical. A report by the International Labour Organization (ILO) highlighted that about 82 percent of working women in India are concentrated in the informal sector in various occupations such as domestic work, home-based work, waste picking, construction, and street vending (ILO, 2018). The e-Shram national database indicates that women constitute 52.80 percent of the registered unorganised workers, translating to at least 151 million women working in India's Informal sector¹. This high participation rate underscores the vital role of women in this sector and their overall contribution to the economy. Employment in the informal sector is often not by choice but out of necessity, reflecting a lack of employment opportunities in the formal economy. This situation is particularly true for women, who face additional challenges due to gender biases and insecurity. A report by IWWAGE-ISST in 2021 pointed out that women in the informal sector are engaged in low-paying jobs as compared to men and are constrained to continue in this sector due to lack of better employment opportunities elsewhere².

Beedi workers form a significant part of the informal sector, with home-based beedi rollers being part of the informal employment lacking protection and alternative livelihood options. In June 2015, the International Labour Conference adopted the Transition from the Informal to the Formal Economy Recommendation (No. 204), the first international labour standard focusing on the informal economy in its entirety. That same year, the United Nations adopted the 2030 Agenda for Sustainable Development, which included the transition to formality in the targets for Sustainable Development Goal 8. These two milestones represent significant global progress in the approach to formalisation, particularly by providing guidance on the process. India's international commitment mandates the protection of women in the labour market, especially women in informal employment such as beedi workers.

The discourse on informality has evolved over a period of time with Keith Hart's conceptualisation of the 'informal sector' in 1971 based on formal and informal income opportunities, whether waged or self-employment (Hart, 1973). Later, the International Labour Organization (ILO) developed a conceptual framework and guidelines for collecting statistics on the informal sector, presenting it as a resolution at the 15th International Conference of Labour Statisticians (ICLS) in 1993 (ILO, 2018). The definition of the informal sector put forward was based on the legal status of the enterprise. The ILO recommended an international statistical definition of informal employment to complement the informal sector definition under the 17th ICLS guidelines in 2003 (ILO, 2003). The definition of employment in the informal sector

¹ Dey, S. (2023, March). *India must protect the 150 million women in the informal sector*. The Diplomat. Retrieved from <https://thediplomat.com/2023/03/india-must-protect-the-150-million-women-in-the-informal-sector/>

² Initiative for What Works to Advance Women and Girls in the Economy (IWWAGE). (2022). *Women and work: How India fared in 2021*. Retrieved from: <https://iwwage.org/wp-content/uploads/2022/01/Women-and-Work-How-India-Fared-in-2021.pdf>



and informal employment are different from each other where the former is enterprise-based and the latter job-based. Employment in the informal sector is defined in terms of the characteristics of the worker's place of work, while informal employment is related to the employment relationship and social protection associated with the job of the worker (ILO, 2019). Informal jobs are defined as those not subject to national labour legislation, income taxation, social protection, or entitlement to certain employment benefits such as severance pay and paid annual leave (Husmanns, 2004).

However, informal employment is based on a broad conceptual framework, encompassing workers in the informal sector; those in unincorporated private enterprises owned by individuals or households engaged in the sale and production of goods and services, operated on a proprietary or partnership basis with less than 10 total workers, as well as domestic workers, contributing family workers, casual day labourers, and workers in the formal sector with no social security benefits provided by the employer (ILO, 2019).

Informality exists in all countries, regardless of socio-economic development, but is more prevalent in developing countries. The ILO reports that over 60 percent of the world's employed population earns their livelihoods in the informal economy, with the share of informal employment in India being 88.2 percent of the country's total employment (ILO, 2018). Workers in the informal economy are often deprived of decent working conditions (Chant & Pedwell, 2008). Most enter the informal economy not by choice but due to a lack of opportunities in the formal economy and the absence of other means of livelihood (ILO, 2018). Women in the informal economy often find themselves as the weakest links in global value chains (Chant & Pedwell, 2008; Chakravarty et al., 2006). The level of informality is inversely proportional to an individual's economic status, with a higher number of persons in informal employment found in poorer communities. Gender discrimination in the informal labour market is severe, with women informal workers receiving less than half the income of their male counterparts (Chant & Pedwell, 2008).

Within the informal sector, Beedi workers are in vulnerable employment with greater engagement of women and children in Beedi rolling. Evidence in the literature suggests that the conditions experienced by these workers, both historically and presently, have been characterised as less than conducive (Srinivasan, 2012). Beedi making has a longstanding tradition for several women workers located within the informal sector. Beedis are manually crafted, unfiltered cigarettes. Each Beedi comprises approximately 0.2 grams of processed sun-dried tobacco flakes, which are meticulously rolled within a tendu leaf or temburni leaf and subsequently secured using cotton thread. The tobacco used in Beedis differs from that used in conventional cigarettes (Ansari & Raj, 2015).

Some studies have reflected on the challenges faced by beedi workers in the country with regard to income levels, working conditions, health, lack of access to social security³, etc. The engagement of girl children, particularly at an early age, involves initial tasks of folding of Beedi ends and tying of threads, as their small and nimble fingers are ideal for such tasks,

³ "Social Security" means the measures of protection afforded to employees, unorganised workers, gig workers and platform workers to ensure access to health care and to provide income security, particularly in cases of old age, unemployment, sickness, invalidity, work injury, maternity or loss of a breadwinner by means of rights conferred on them and schemes framed, under the Code on Social Security, 2020. Government of India. (2020). The Code on Social Security, 2020. Ministry of Law and Justice. Retrieved from: <https://labour.gov.in/>

especially for the precise folding of the open end of the Beedi inwards (Prasad and Prasad, 1985; Gopal, 2000).

Women engaged in the Beedi industry face unique challenges, as documented in the available literature, such as low wages and exploitation. The compensation for Beedi rolling is typically based on piece rates, which are often very low for home-based beedi workers. This leads to long working hours to earn a subsistence income⁴. According to the ILO (2003), continuous exposure to tobacco and the physical strain of rolling beedis can result in serious health issues, including respiratory problems and musculoskeletal disorders. Despite these risks, women in this sector often lack access to healthcare and occupational health protections.

Furthermore, beedi workers generally do not benefit from the legal protections provided to formal employees, such as minimum wage laws, health and safety regulations, or social security benefits. In addition to the lack of legal safeguards, women in the beedi industry often face social stigma due to the nature of their work, compounded by gender biases that contribute to further exploitation and inequality, particularly in terms of wages and working conditions. The challenges these women face are further exacerbated by the dual burden of balancing their economic activities with domestic responsibilities, leading to additional stress and health complications⁵.

Figure 1.1: Challenges for Women Workers in Beedi Industry



(Source: Authors representation derived from literature)

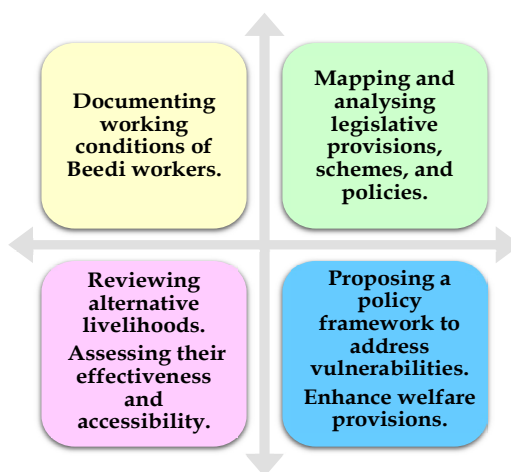
⁴ British Safety Council India. (2023). *Beedi workers: A tale of exploitation*. Retrieved from: <https://www.britsafe.in/safety-management-news/2023/beedi-workers-a-tale-of-exploitation>

⁵ International Labour Organization. (2003). *Beedi sector in India: A note*. Retrieved from: https://www.ilo.org/sites/default/files/wcmsp5/groups/public/@asia/@ro-bangkok/@sro-new_delhi/documents/projectdocumentation/wcms_125466.pdf

The broader theoretical perspective for the study is derived from existing discourses on gender and social protection⁶ within the informal sector. Women are subject to several vulnerabilities in the form of life cycle risks. Women's ability to participate in paid work differs across societies where women have disproportionate responsibility for unpaid work and gender inequalities within the households. Also, the intersectionality of gender with social class shape the livelihood choices and opportunities they are able to pursue (Kabeer, 2024). Keeping in view, the vulnerabilities of women across regions, the approaches to social protection need to address social risks and vulnerabilities at the level of individual, household and community (Homes and Jones, 2013). The discourse on 'transformative' social protection approaches envisages a greater role of the State in promoting income support along with promoting investments in human capital including education, health, community level infrastructure etc (Devereux and Sabates Wheeler, 2004). However, in the present study the term "social protection" and "social security" are used interchangeably.

In this background, the present study aims to investigate the working conditions and vulnerabilities of beedi workers in Telangana state. The research is centred around four key areas: first, it seeks to meticulously document the working conditions of beedi workers, scrutinising their economic, health, and other vulnerabilities, as well as the consequent impact on their livelihoods. This exploration is critical in the backdrop of the beedi industry's predominance in the informal sector, where most of its workforce includes women and children working under challenging conditions. Simultaneously, the study maps and critically analyse the various legislative provisions, schemes, and policies related to beedi workers in Telangana.

Figure 1.2: Four Key Areas



(Source: Authors Own representation.)

⁶ Naila Kabeer, a prominent social economist, defines social protection as "all interventions from public, private, voluntary organizations, and informal networks that support communities, households, and individuals in their efforts to prevent, manage, and overcome the hazards and vulnerabilities associated with their working and living conditions." This definition highlights the multi-dimensional and inclusive nature of social protection, which encompasses various actors beyond the state and acknowledges the importance of informal mechanisms.

Kabeer's approach emphasises not only protective measures but also preventive and transformative aspects of social protection, which aim to reduce inequality and foster empowerment, particularly among marginalised groups. Retrieved from: Kabeer, N. (2014). *Gender & Social Protection Strategies in the Informal Economy*. India: Taylor & Francis.



In the context of national and global efforts to reduce tobacco production and consumption, the research also reviewed the alternative livelihoods provided to beedi workers. The analysis includes assessing the effectiveness and accessibility of alternative livelihood opportunities for these workers. Finally, the study aims to propose a policy framework that addresses the identified vulnerabilities of beedi workers, strengthening welfare provisions and promoting the well-being of these workers.

1.2 Review of the Literature

Overview of the Beedi Industry- Indian Scenario

India is the second largest consumer of Tobacco products, with 267 million adults using smoking or smokeless forms of tobacco, leading to over 1.35 million deaths per year (Tom et al., 2013; GoI, 2017). The Beedi industry is estimated to employ about 4.9 million workers, predominantly in the unorganised sector⁷, with the gradual disappearance of the factory system and the rise of a wide-scale contractual arrangement, most of the workers have shifted to home-based work within the unorganised sector. This process has increased the involvement of women and child labour in beedi rolling activity. Some of the studies estimated that about 90-96 percent of the beedi-making population is women (Sudarshan & Kaur, 1999; Chauhan, 2001). Further, Women and children constitute 90 percent of the workforce, valued for their proficiency in rolling beedis, whereas men are typically employed in factory systems (Rustagi et al., 2001). The policies and legislative provisions for the welfare of beedi workers need to be strengthened to promote their welfare. Considering the health concerns and exploitative work conditions associated with beedi rolling, some studies have reflected on promoting alternative sources of livelihood for beedi workers (Rajasekhar & Sreedhar, 2002; Supase et al., 2020).

Beedi manufacturing takes place in almost all the major states of India, such as Madhya Pradesh, Maharashtra, Gujarat, Tamil Nadu, Andhra Pradesh, West Bengal, Orissa, Uttar Pradesh, Rajasthan, Bihar, Kerala, and Karnataka. The cultivation of beedi tobacco is mainly concentrated in Gujarat, Karnataka, and Maharashtra, although it is also grown to some extent in Orissa and Andhra Pradesh. The bulk of the beedi wrapper leaves (tendu leaves) are grown in Madhya Pradesh, Orissa, Maharashtra, Andhra Pradesh, and Bihar. Madhya Pradesh, the largest producer of tendu leaves in India, is one of the first states where beedi manufacturing began in 1902 in Jabalpur district (Verma & Rahman, 2005).

Initially, the beedi industry was predominantly in the organised sector but gradually shifted to the unorganised sector. This transition was attributed to stringent government regulations in the organised sector and tax liberalisation in the unorganised sector (Mangasuli & Sherkhane, 2016). The beedi industry exhibits variations in capital investment, size, employment patterns, and the composition of workers, including gender and children (Rustagi et al., 2009). Employment types within the industry vary, including full-time, part-time, and contractual workers. In 2005-2006, the beedi sector accounted for about 0.9 percent of total employment in India, engaging 4.16 million workers, with 3.42 million in full-time work and 0.74 million part-time (Nandi et al., 2015). The majority of employment in the beedi industry comes from the unregistered sector, a proportion that has remained relatively constant over the years (Arora et al., 2020).

⁷ Derived from, Lok Sabha Unstarred Question No 4357, 2021.



The participation of women in India's labour force has been notably low in recent years, with only 29.4 percent of women (aged 15-59) partaking in the labour force in 2021-22, compared to 29.8 percent in the previous year (PFLS July 2021-June 2022). Despite this, women's participation in certain industries, such as the beedi industry, is higher due to gender-segregated employment and the overarching responsibilities of domestic care falling primarily on women. The Time Use Survey 2019 of the National Statistical Office (NSO) highlighted that women's participation in domestic activities had been 81.2 percent while men had lesser participation in domestic activities at 26.1 percent as compared to women who spend an average of nearly five hours daily on domestic activities, while men spend only about an hour and a half (GoI, 2019).

In Telangana, the beedi sector is widespread, with nearly seven lakh workers employed by major beedi industries, over 90 percent of whom are women (Rupavath, 2018). However, issues such as poor wages, exploitation by middlemen, lack of social security, and serious health problems plague these workers. The Government of Telangana has taken several initiatives, such as increasing the minimum wage and launching the Jeevana Bruthi scheme, but there have been implementation challenges and restrictive conditions (Rupavath, 2018). Women beedi rollers face several health issues due to the direct inhalation of tobacco flakes and dust. Despite awareness of the occupational hazards, many continue in this line of work due to poverty and the unavailability of other job opportunities (Kawale et al., 2019; Palande, 2019).

The evidence from the literature provides a contextual background about the beedi industry in general, thereby unravelling the scope of delving deeply into the region-specific challenges associated with the life of beedi workers located in the State of Telangana. The objectives of the study are aligned with the need to develop a comprehensive understanding of the dynamics of the beedi industry in the region and the socioeconomic factors influencing the lives of its workers.

Vulnerability Mapping - Socio-Economic Context

The socio-economic landscape of the beedi industry, as highlighted in recent studies, reveals a grim reality of low wages, low remuneration for the number of beedis rolled, insufficient raw materials, lack of infrastructural facilities, lack of legal protection and social security for women workers (Iti, 2018; ILO, 2003; Varma & Rehman, 2005; Chauhan et al., 2014). This lack of formal regulation contributes significantly to the economic vulnerability and exploitation of workers. Some studies by Mallick & Satpathy (2021) and Ansari and Raj (2015) highlighted the systemic pattern of economic exploitation within India's unorganised beedi sector. Furthermore, Reddy's (2016) empirical investigation in Andhra Pradesh vividly illustrated the socio-economic challenges faced by women in this industry. Harriss-White and Heyer (2012) study highlighted the educational and skill levels of beedi rollers are very low, and finding alternatives are difficult without improving their skill levels. Additionally, the exploitation by contractors, as revealed in the piece rate system of payment, further worsens their economic hardships (Iti, 2018).

Although the main beedi manufacturers do not officially hire children to roll beedis, the practice of subcontracting work to home-based workers, who are paid based on the number of beedis they roll, often results in the involvement of children. As a result, children end up assisting their families in the beedi rolling process, which may include tasks such as cutting



tendu leaves, tying threads to the rolled beedis, and folding the tips of the beedis, regardless of their school attendance.

Health Challenges among Beedi Workers

Health issues among women beedi workers have always been of significant concern within the larger discourse on occupational safety and health. Beedi workers suffer several occupational health problems such as neck and lower back pain, abdominal pain, eye problems, burning in the throat, cough, asthma, tuberculosis, osteological problems and bronchitis (Panneer 2019; Mishra 2014; Basu et al. 2018; Singh et al. 2014). The health consequences extend beyond users to those involved in the manufacturing process, with workers suffering from a range of issues such as postural problems, respiratory disorders, and other health complications due to constant exposure to tobacco dust (ILO, 2003; Iti, 2018). The involvement of children, especially girls, in beedi rolling activities due to the piece rate system of payment further complicates the health consequences of beedi, which are not confined to its users only but extend to those involved in the overall beedi manufacturing process (Yasmin et al., 2010). Beedi rolling activity requires constant use of fingers and sitting down on the floor with legs spread continuously for long hours, which results in tremendous pain in the vertebral column. Similarly, the workers reported health problems like numbness in the hands, back, neck, and joint pains, fatigue in the arms and numbness in fingers (Iti, 2018). As noted in the International Labour Organization (ILO) 2003 report, beedi workers suffer from postural problems (neck and lower back pains), abdominal pain, eye problems, burning sensation in the throat, cough, asthma, T.B., bronchitis, excessive bleeding during menstruation, irregular and painful menstrual cycles, leucorrhea, anaemia, anaemic body aches, dizziness from constant exposure to tobacco dust.

Alternative Employment and Income Opportunities

Alternative livelihoods are recognised as a key supply reduction strategy under the World Health Organization Framework Convention on Tobacco Control (WHO FCTC). Articles 17 and 18 of the convention specifically address the need for 'provision of support for economically viable alternative activities' and emphasise the 'protection of the environment and the health of individuals.' These provisions highlight the importance of transitioning tobacco-dependent communities towards sustainable economic alternatives while safeguarding both human health and environmental integrity⁸. Reduction in the supply of tobacco may not act as a deterrent for beedi rollers as they are dependent on tobacco for their livelihood; however, alternatives can be explored to improve their health and economic condition.

The potential for transitioning women beedi workers to safer and more sustainable occupations is crucial. Some of the studies by Rajasekhar and Sreedhar (2002) and Painoli and Nagar (2012) explored alternative employment avenues, suggesting pathways for economic empowerment and improved working conditions. However, a significant gap in awareness and training for alternative livelihoods exists. A recent study showed that out of over 5.5 million registered beedi workers in India, only a fraction were trained under a skill development program, and even fewer transitioned to alternate livelihoods (Kumar et al., 2021).

⁸ World Health Organization. (2005). *WHO Framework Convention on Tobacco Control*. Retrieved from: <https://fctc.who.int/who-fctc/overview>



There is no denying the fact that the absence of adequate research on vulnerability mapping in Telangana limits our understanding of the specific challenges associated with Beedi workers particularly with respect to socio-economic and health-related vulnerabilities. Vulnerability mapping encompasses the identification and analysis of the myriad risks and challenges encountered by beedi workers, including occupational health hazards, economic instability, and social marginalisation. Prolonged exposure to tobacco and poor working conditions exposes beedi workers to a multitude of health risks, thereby underscoring the urgency of addressing these issues.

Given that many beedi workers rely exclusively on beedi-making as their primary source of income, it is crucial to recognise that this income is often irregular and insufficient to meet their basic needs. Additionally, there is a pressing need to delve into the economic conditions of these workers, which necessitates examining their income levels, debt burdens, and access to financial resources. In this context, the present research aims to provide valuable insights into the diversification of livelihood options for beedi workers, ultimately contributing to their overall well-being and socioeconomic empowerment. It is also imperative to develop an understanding of existing welfare schemes of the government aimed at promoting healthcare, housing, financial assistance for education etc for identification of challenges in implementation of these schemes and informing policy towards strengthening the same.

1.3. Objectives

Based on the comprehensive literature review, the research objectives of the current study are outlined as follows:

- To document the working conditions of Beedi workers in Telangana and examine their economic, health and other vulnerabilities while assessing their impact on the Beedi workers' livelihood.
- To map and review the coverage of various legislative provisions, schemes, and policies related to Beedi workers in Telangana.
- To review alternative livelihood opportunities provided to Beedi workers.
- To suggest a policy framework that can address the prevailing vulnerabilities and enhance the welfare of the Beedi workers while supporting alternative livelihood options.

1.4 Research Methodology

The study is based on both qualitative and quantitative research methods. The qualitative aspect of the research involved primary data collection through semi-structured, in-depth interviews with Beedi workers, supplemented by open-ended checklists, focus group discussions (FGDs), Time diary⁹ and observational techniques. This approach is crucial for understanding the nuanced experiences and perspectives of beedi workers, particularly considering the severe exploitation, hazardous working conditions, and health consequences (Pande, 2022). The quantitative facet included close-ended questions about the household and socio-economic conditions. The survey period for primary data collection was from January to May 2024.

⁹ Time use surveys are quantitative summaries of time spent in various activities in a 24-hour time-period. These surveys provide a detailed description of activities carried out by men and women on a daily or weekly basis, in any region or across the world.

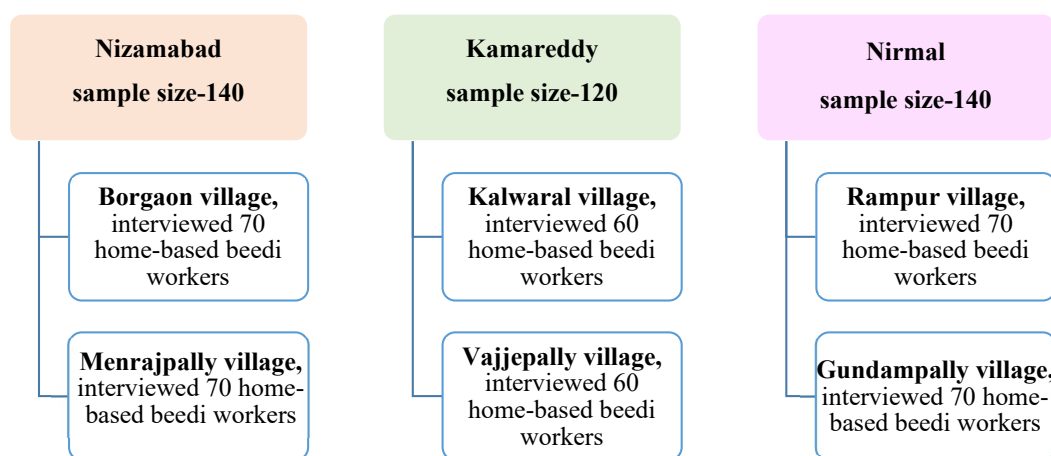
The study also included secondary data from various government reports and legal documents to contextualise the problem and make the arguments substantial. Secondary sources, such as the Periodic Labour-force Survey (PLFS) of the NSSO and different academic articles, are included to provide a broader understanding of the socio-economic conditions of beedi workers.

Data Collection Procedure

A purposive sampling technique was used for the selection of three districts; Nizamabad, Kamareddy, and Nirmal owing to their significant concentrations of beedi workers. As per secondary data, the Nizamabad and Kamareddy districts have the highest number of registered Beedi workers in Telangana (GoI, 2023). Within these districts, six villages were chosen using a random sampling technique: Borgaon and Mantrajpally from Nizamabad, Kalwaral and Vajjepally from Kamareddy, and Rampur and Gundampally from Nirmal district. These villages were identified through consultations with the Gram Sarpanch of each village. Subsequently, a random sampling technique was applied to select households of beedi workers within these villages. A total of 400 women beedi workers aged between 15 and 59 years were interviewed for the study.

Qualitative data was collected through in-depth focus group discussions (FGDs) with beedi workers. In each village, six FGDs were held, with six to seven participants in each group. In total, 37 beedi workers, aged 15 to 59 and predominantly with 11 to 30 years of experience, participated in the FGDs. The discussions were conducted in the local language, i.e. Telugu. The key topics covered in the FGDs included personal experiences in beedi rolling, income, social challenges, health problems, alternative livelihood options, and government policies and expectations.

Figure 1.3: Sample size



(Source: Authors Own representation.)

Key Informant interviews (KIIs), including government officials, and labour union members, were interviewed at various stages to provide a comprehensive view of the industry.

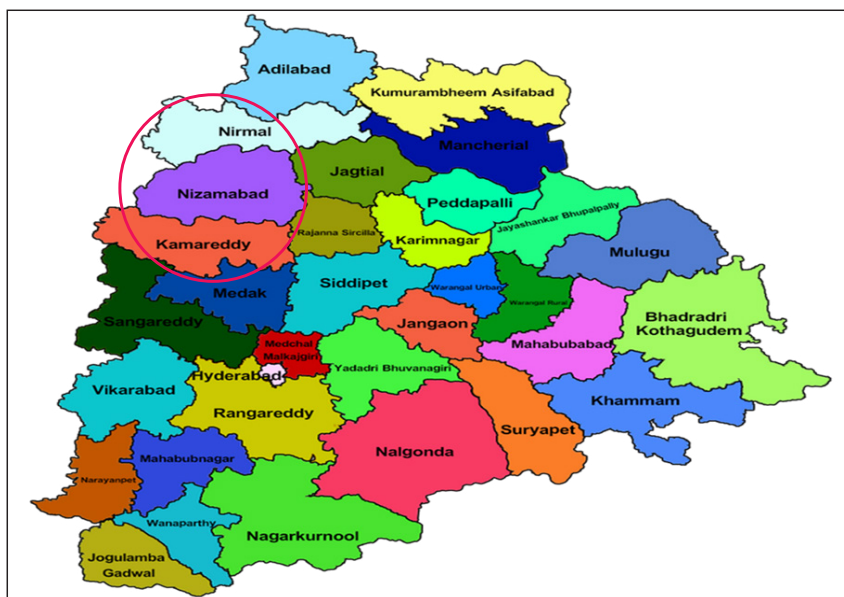
Study Area

The selection of Telangana State for this study is underpinned by its significant role in the Beedi industry. Figure 1.4 discusses the distribution of registered beedi workers across various

Indian states. It has been observed that regions like Kolkata in West Bengal, Tirunelveli in Tamil Nadu, Hyderabad in Andhra Pradesh/Telangana, and Jabalpur in Madhya Pradesh have the highest registered beedi workers in comparison to other states.

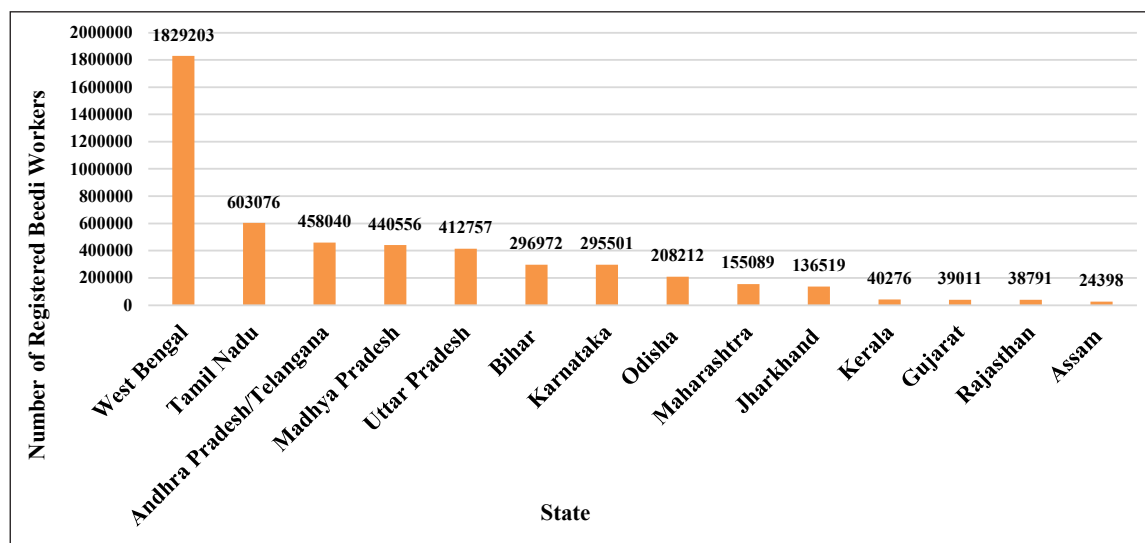
The data indicates that West Bengal, particularly the Kolkata region, accounts for the highest number of registered beedi workers, totalling 1,829,203. This is followed by Tamil Nadu's Tirunelveli region with 603,076 workers and the Hyderabad region spanning Andhra Pradesh and Telangana with 458,040 workers. Madhya Pradesh's Jabalpur region also shows a significant number of beedi workers, i.e., 440,556 during 2022-23.

Map 1.1: Location Map of Telangana State



(Source: <https://www.mapsofindia.com/maps/telangana/>)

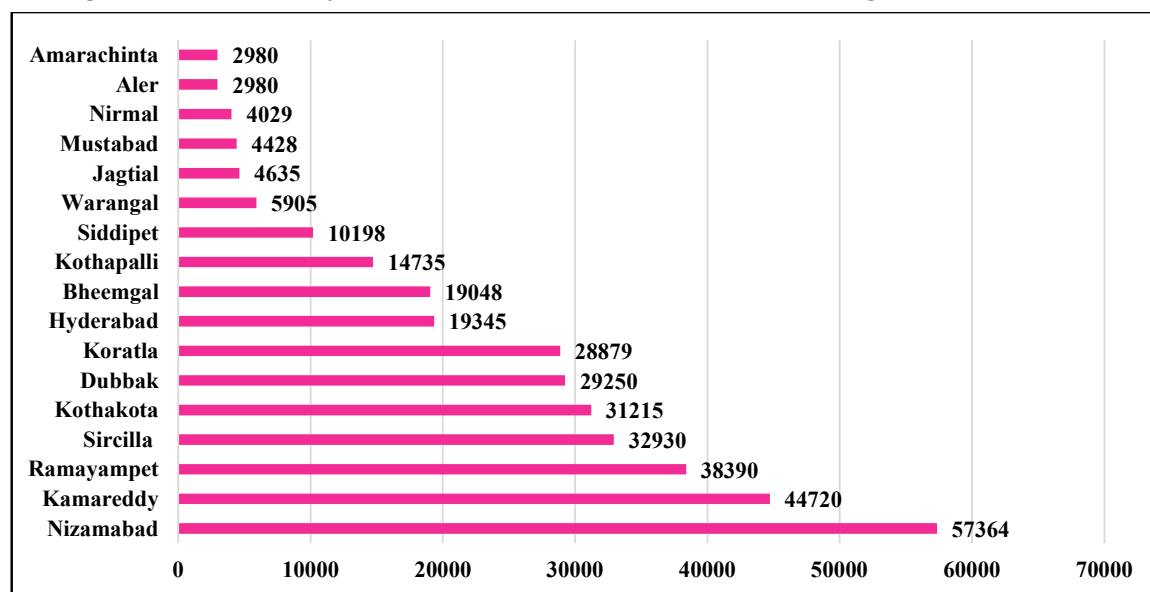
Figure 1.4: State-wise Registered Beedi Workers (2022-23)



(Source: Ministry of Labour and Employment, Annual Report-2022-2023).

There is a notable disparity in the number of registered Beedi workers across various dispensaries in Telangana, with Nizamabad and Kamareddy registering the highest number of workers during 2022-23 (Fig 1.5).

Figure 1.5: Dispensary-wise Number of Beedi workers in Telangana State (2022-23)



(Source: Directorate General Labour Welfare, Ministry of Labour and Employment, Government of India.)

1.5 Outline of the Study

The second chapter provides an analysis of employment trends in India, particularly focusing on the formal and informal sectors with gender differentials. It also discusses the trends in female workforce participation (WPR) with an analysis of participation rates in different States.

The third chapter provides an in-depth investigation into the socio-economic and household characteristics of beedi workers in Telangana. It assesses their working conditions, health issues, and other vulnerabilities, with a particular focus on the unique challenges faced by home-based beedi workers.

The fourth chapter examines the legislative framework and welfare schemes that are available to beedi workers in Telangana. The chapter also attempts to review the existing implementation mechanism of the welfare schemes while assessing their role in addressing the concerns related to education, health, housing and overall well-being of beedi workers.

The fifth chapter explores the alternative livelihood opportunities available to beedi workers. It discusses various initiatives and programmes of the government aimed at providing sustainable employment alternatives and tries to understand the perception of beedi workers on alternative livelihood.

The final chapter summarises the key findings of the study and provides policy recommendations aimed at improving the conditions of beedi workers.



Chapter 2 : Employment Trends And Informal Sector: Gender Differentials

2.1 Introduction

Women in the country are primarily concentrated in the informal sector, engaged in low-paying jobs, particularly self-employment, piece-rated work, casual work, domestic work, and home-based work. The National Commission for Enterprises in the Unorganised Sector (NCEUS) has defined the informal or unorganised sector, characterising it as encompassing all unregistered private enterprises owned by individuals or households. These enterprises are engaged in the production and sale of goods and services and operate either as sole proprietorships or partnerships with a workforce of at most ten employees (NCEUS, 2007).¹⁰ The concentration of women in the informal sector often restricts them from access to regular social protection (Samantroy, 2021). The COVID-19 pandemic has exacerbated existing inequalities in the labour market, with women workers being the worst affected due to their concentration in these low-paying jobs. Significant livelihood losses were noted, especially in sectors like retail trade, accommodation, food services, and manufacturing, which were hardest hit by the pandemic (Samantroy, 2022). An ILO study highlighted that the majority of job losses and declining working hours were seen in these sectors. Additionally, post-support labour income losses were relatively larger for self-employed, low-paid, and low-skilled women, indicating a risk of uneven recovery and greater inequality (ILO, 2021).¹¹

In this context, the present chapter provides an overview of women's workforce participation trends vis a vis their location in the informal sector, uncovering the challenges they face in participating in the labour force and outlining recent developments. Despite slow progress, India has seen a rise in women's employment in recent years, most of it attributed to various government initiatives. The chapter relies on evidence from various Periodic Labour Force Surveys (PLFS) rounds¹². The usual activity status (principal and subsidiary status) for the age group 15 years and above is considered for analysis, with unit-level data drawn accordingly. The following section provides an overview of employment trends for women, their concentration in sectoral employment, employment status, social groups and employment, and women's work participation across different States.

2.2 Trends in Formal and Informal Employment (2017-2023)

As per the PLFS data, this analysis examines the trends in formal and informal employment among male and female workers in rural and urban areas from the years 2017-18 to 2022-23. Formal employment refers to jobs with official contracts, regulated by laws and entitled to benefits such as social security, health insurance, and pensions. In contrast, informal employment refers to jobs without official contracts, often lacking benefits and security.

¹⁰ National Commission for Enterprises in the Unorganised Sector. (2007). Report on conditions of work and promotion of livelihoods in the unorganised sector. Government of India. Retrieved from: https://dcmsme.gov.in/Condition_of_workers_sep_2007.pdf

¹¹ International Labour Organization. (2021). *ILO monitor: COVID-19 and the world of work. Seventh edition: Updated estimates and analysis*. Retrieved from: https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/briefingnote/wcms_767028.pdf

¹² Ministry of Statistics and Programme Implementation. (2023). *Periodic Labour Force Survey (PLFS)*. Government of India. Retrieved from: <https://microdata.gov.in/nada43/index.php/catalog/PLFS>

Table 2.1 Trends in Formal and Informal Employment

Worker	Male		Female	
	Formal	Informal	Formal	Informal
2022-23				
Rural	11.6	88.3	9.5	90.5
Urban	33.5	66.5	33.5	66.5
Rural + Urban	19.5	80.5	15.4	84.6
2021-22				
Rural	12.5	87.5	11.6	88.5
Urban	33.1	66.9	34.8	65.2
Rural + Urban	19.9	80.1	17.6	82.5
2020-21				
Rural	10.9	89.1	10.4	89.6
Urban	31.3	68.7	32.3	67.7
Rural + Urban	18.5	81.5	16.1	83.9
2019-20				
Rural	9.9	90.1	9.8	90.2
Urban	31.0	69.0	33.9	66.1
Rural + Urban	17.9	82.1	16.8	83.2
2018-19				
Rural	10.7	89.3	11.3	88.7
Urban	32.3	67.7	34.8	65.2
Rural + Urban	18.3	81.7	18.0	82.0
2017-18				
Rural	10.8	89.2	10.7	89.3
Urban	30.2	69.8	35.6	64.5
Rural + Urban	17.6	82.4	17.9	82.1

(Source: Periodic Labour Force Survey of India in various rounds.)

The above (Table 2.1) reflects on an increase in informal employment for women workers by 2.5 percent during 2017-18 and 2022-23. On the other hand, there has been a decrease in formal employment for women by 2.5 percent. However, there are significant rural-urban differentials with regard to informal employment for women, with a greater concentration of informality evident in rural areas, i.e. 90.5 percent and 66.5 percent in urban areas during 2022-23. With regard to the concentration of men in informal employment, it was observed that 80.5 percent of men were engaged in the informal sector, while 19.5 percent were in the formal sector during 2022-23. The increasing concentration of workers in the informal sector, along with a lack of standard employer-employee relationships, regular contracts, and social security, leads to precarious employment conditions.

2.3 An Overview of the trends in Women's participation in the workforce

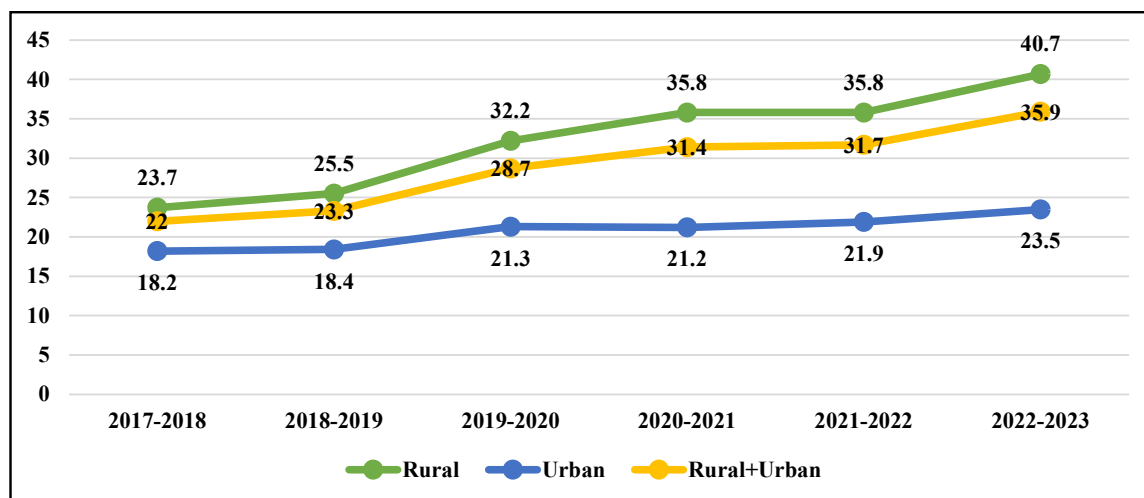
The Worker Population Ratio (WPR)¹³ or women's work participation has increased by 13.9 percentage points in the last couple of years as reported by the PLFS by usual status¹⁴ (principal and subsidiary status). The WPR for women (15 years and above) was reported as 22 percent

¹³ Worker Population Ratio is the percentage of people employed in the total population (MoSPI, 2023).

¹⁴ **Usual Status (ps+ss):** This combines the principal status (ps) and subsidiary status (ss) of workers. Principal status refers to the activity status of a person during the majority of the last 365 days, while subsidiary status accounts for additional economic activities performed during the same period (MoSPI, 2023).

in 2017-18, which increased to 35.9 percent in 2022-23, thereby reflecting an improvement in women's participation in the workforce (Fig 2.1). Further, the rural estimate shows that WPR has increased significantly by 17 percentage points from 23.7 percent in 2017-18 to 40.7 percent in 2022-23. In urban areas, the increase was from 18.2 percent in 2017-18 to 23.5 percent in 2022-23. However, the increase in WPR has been mostly attributed to an increase in women's self-employment, which is discussed in the section below.

Figure 2.1: WPR (in per cent) in usual status (ps+ss) Age Group: 15 years & above (Female)



(Source: Periodic Labour Force Survey of India in various rounds)

2.4 State-wise analysis of Worker Population Ratio

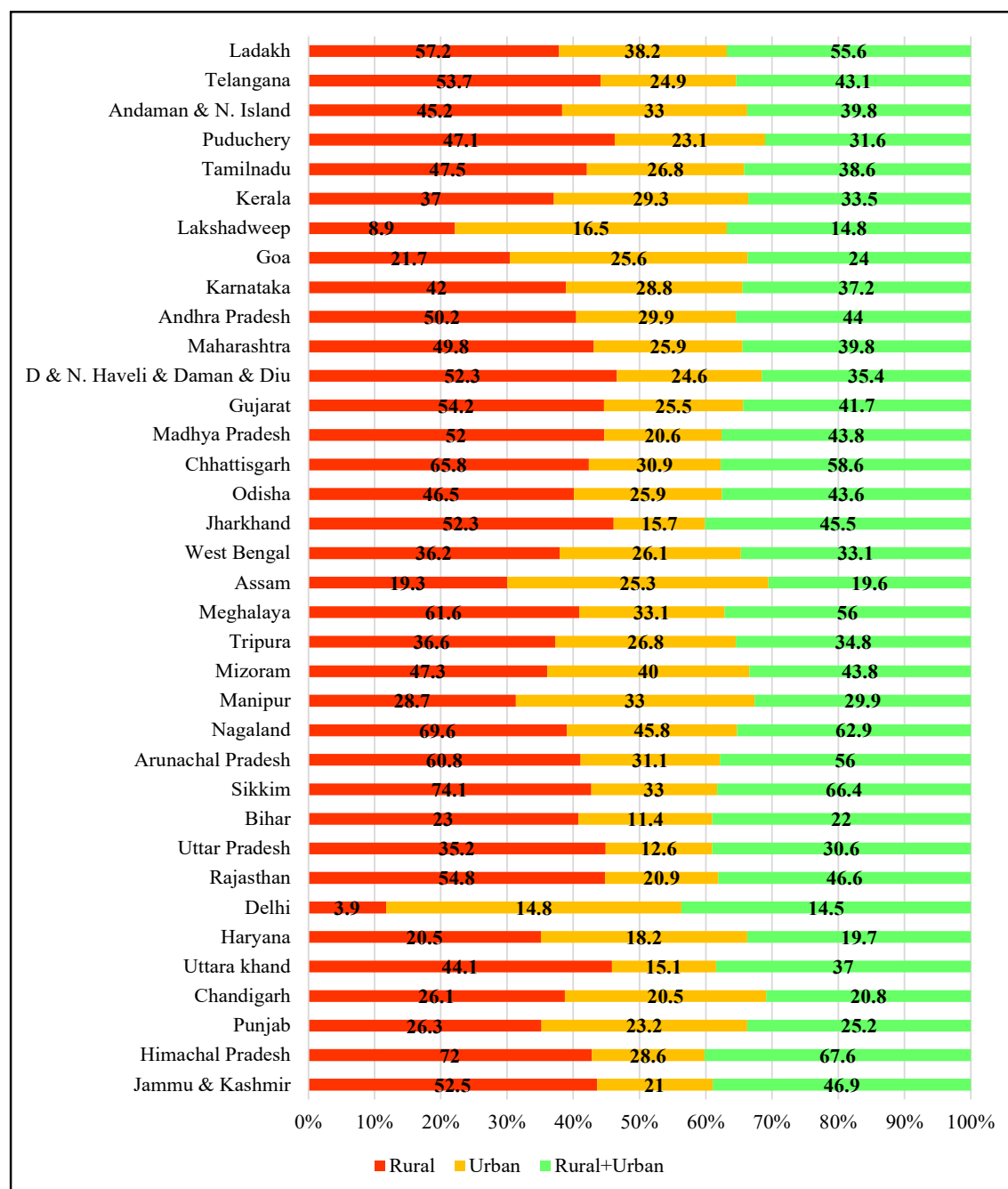
As reported by the PLFS 2022-23, several states have made significant contributions to increasing female employment. States with the highest WPR for women include Himachal Pradesh (67.6 percent), Sikkim (66.4 percent), Nagaland (62.9 percent), Chhattisgarh (58.6 percent), Meghalaya, and Arunachal Pradesh (both at 56 percent). On the other hand, some States with the lowest WPR are primarily located in the northeastern and northern regions, with Assam (19.6 percent), Haryana (19.7 percent), Bihar (22 percent), Punjab (25.2 percent), and Goa (24 percent) reporting the lowest participation rates. In the context of Telangana, the WPR is comparatively higher at 43.3 percent reflecting increasing participation. Despite lower WPR in certain states, there has been an overall improvement in female work participation across the PLFS years (Fig: 2.2).

This calls for a reflection on successful practices in these states that have effectively promoted women's employment. Identifying and replicating these strategies could contribute to further improving women's workforce participation, even in regions where it remains low.

The figure below (2.3 and 2.4) represents the WPR for each social group among females aged 15 years and above in both rural and urban areas. WPR women in ST, SC and OBC categories have been greater than the 'others' category in both rural and urban areas during 2022-23. The WPR for ST women was reported as 62.2 percent in rural areas, while it was 34.8 percent in urban areas. In the context of SCs and OBCs, WPR in rural areas has remained almost the same at 42 percent while in urban areas, SC women have shown greater participation at 27.3

percent while for OBC women, it was 23 percent. The increase in WPR has been attributed to women working as own account workers¹⁵ and unpaid helpers¹⁶, which is discussed below.

Figure 2.2: Status in Worker Population Ratio (WPR) (in percent) according to usual status (ps+ss) for each State/UT age group 15 years and above

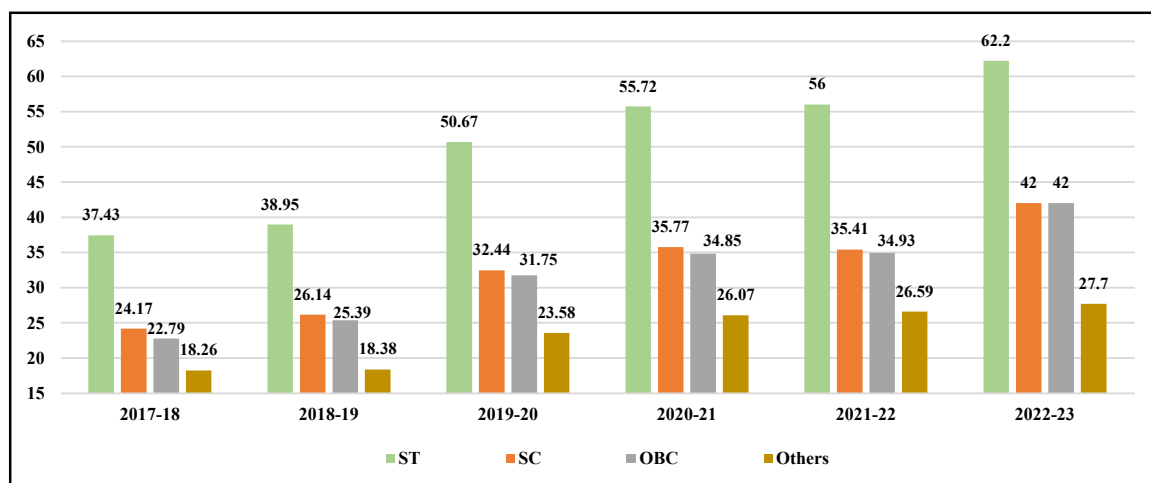


(Source: Periodic Labour Force Survey of India, 2022-2023)

¹⁵ Own-account workers are those who have their own informal sector enterprises (PLFS, 2022-23).

¹⁶ Unpaid helpers typically are individuals working on family enterprises but not being paid for their labour (PLFS, 2022-23).

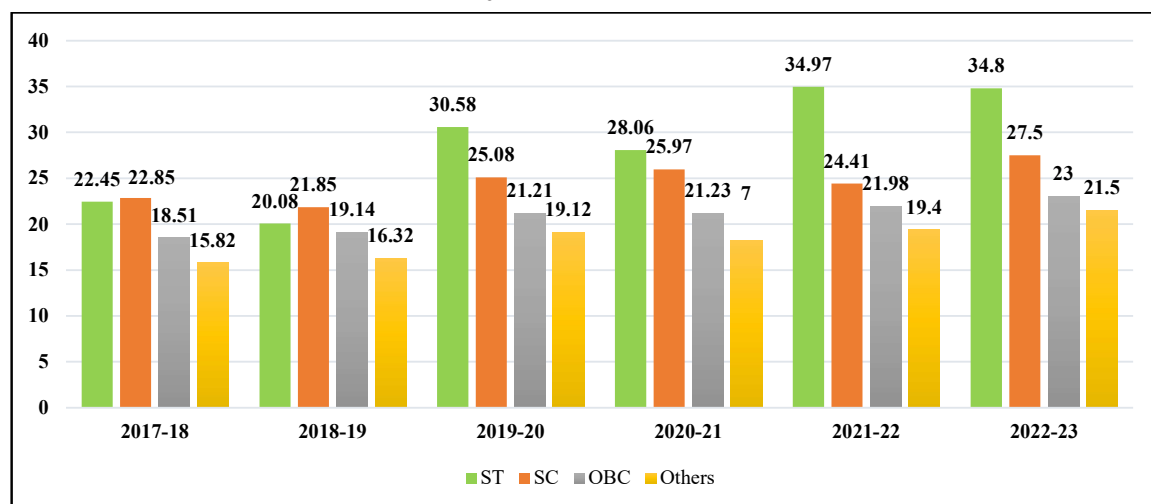
Figure 2.3: Worker Population Ratio (WPR) by usual status (ps+ss) for each social group for persons of 15 years and above (Rural: Female)



(Source: Periodic Labour Force Survey of India in various rounds)

It was also evident that the concentration of women in self-employment has been higher in rural areas (71 percent) while it was 40.3 percent in urban areas. As far as the rural and urban trends are concerned, the rural areas have witnessed a rising trend in the share of self-employed women by 13 percent from 57.68 percent in 2017-18 to 71 percent in 2022-23. However, urban areas have also witnessed an increasing trend (5.6 percent) in the share of self-employed women from 34.7 percent in 2017-18 to 40.3 percent in 2022-23.

Figure 2.4: Worker Population Ratio (WPR) by usual status (ps+ss) for each social group for persons of 15 years and above (Urban: Female)



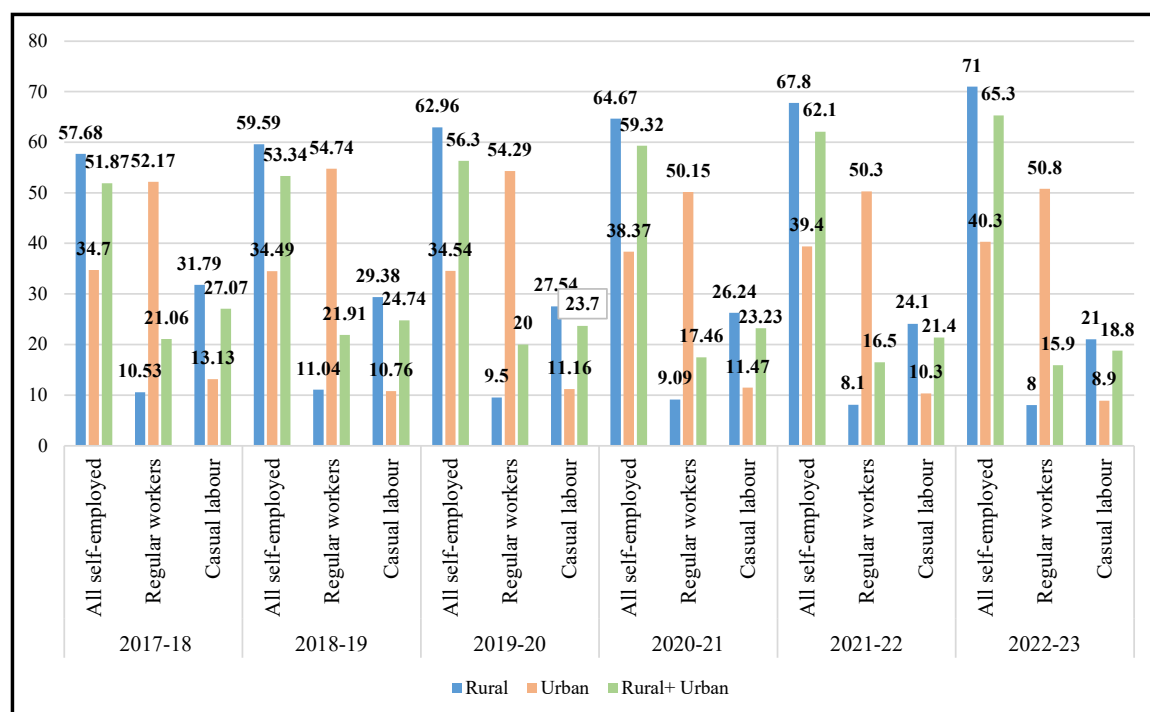
(Source: Periodic Labour Force Survey of India in various rounds)

2.5 Status of Women's Employment

The trends in women's concentration in employment by broad employment status reflect on increasing self-employment for women over the PLFS years. There has been an increase in overall self-employment by 9.5 percentage points during 2017-18 and 2022-23 (Fig 2.5). On the

contrary, regular employment for women declined by 5.1 percent during the same period. However, casual employment for women has also declined by 8.9 percent during 2017-18 and 2022-23.

Figure 2.5: Broad Employment Status 15 years and above (Female)



(Source: Periodic Labour Force Survey of India in various rounds)

2.6 Summing Up

Informality has remained a significant challenge for women workers, particularly those from marginalised communities. Data from the Periodic Labour Force Survey (PLFS) illustrates a disproportionate participation of women from Scheduled Tribes (ST), Scheduled Castes (SC), and Other Backward Classes (OBC) in informal employment. This suggests that, for women from these marginalised groups, employment is driven by economic necessity rather than choice, as they are often compelled to enter the labour market to meet the basic needs of their households.

The primary survey conducted for this study, as elaborated in the third chapter, further supports these findings. The survey reveals a notable concentration of women from the OBC and SC communities engaged in the beedi sector. This observation aligns with the broader trend identified in the PLFS data, underscoring the intersectionality of gender, caste, and economic compulsion in determining employment patterns. Women from these marginalised groups frequently find themselves in low-wage, labour-intensive occupations such as beedi rolling, characterised by poor working conditions, limited legal protection, and minimal social security benefits.

These trends highlight the urgent need for targeted policies and interventions that improve working conditions, extend social protections, and offer viable alternative livelihoods for women in the informal economy, particularly those from marginalised sections of society.



Chapter 3 : Vulnerability Mapping of Beedi Workers in Telangana

3.1 Introduction

Women workers in the beedi industry have several challenges and vulnerabilities such as lower socio-economic status, poor working conditions, poor health due to long exposure to tobacco dust, limited access to skill development opportunities and the burden of unpaid domestic and care work etc. Some studies have revealed that these challenges are exacerbated by systemic issues within the sector, such as low wages, inadequate compensation for the number of beedis rolled, and inconsistent access to raw materials (Iti, 2018; ILO, 2003; Verma & Rahman, 2005). Additionally, the challenge of unpaid work further intensifies their socio-economic vulnerability, as many women are compelled to engage in beedi rolling while simultaneously managing household responsibilities (Reddy et al., 2010; Ansari and Raj, 2015). Moreover, health problems resulting from poor working conditions and exposure to hazardous materials are widespread. Nevertheless, legal protections and social security benefits are largely non-existent, leaving these workers with little recourse against their exploitation (Mallick & Satpathy, 2021). Despite official bans, the involvement of children in the production process, driven by the subcontracting system, further deepens the socio-economic vulnerability of these households.

In this context, the present chapter aims to investigate the household characteristics, socio-economic conditions, working conditions, health issues, and other vulnerabilities experienced by beedi workers in Telangana. However, the intention is to highlight the challenges and concerns affecting home-based beedi workers' well-being. The following section provides an assessment of the household and socio-economic conditions of beedi rollers. Subsequently, the chapter examines working conditions, health concerns and other vulnerabilities experienced by beedi workers. The chapter also analyses how socio-economic and health vulnerabilities impact the well-being of beedi workers in Telangana state.

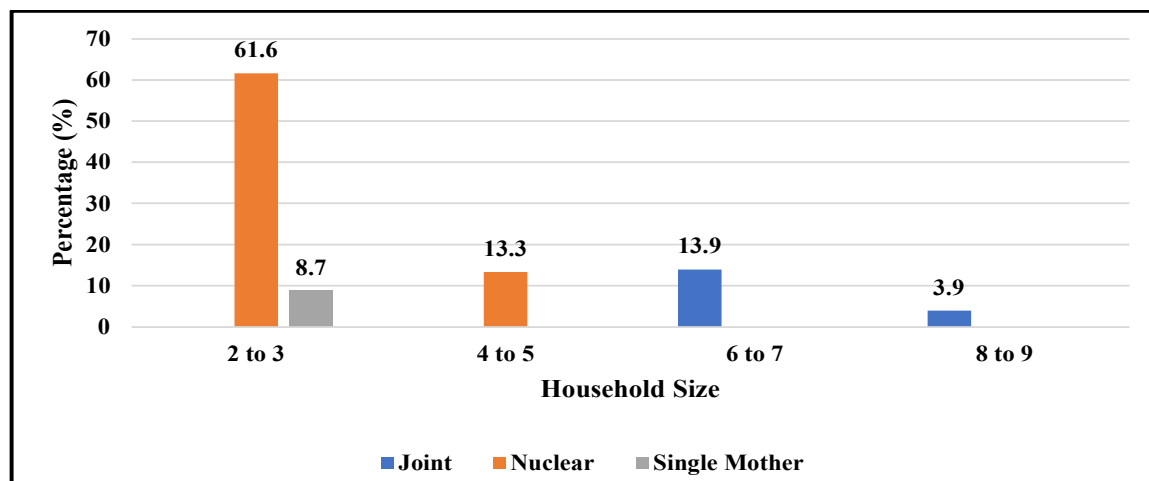
3.2 Socio-economic Conditions : Family Structure with Household Size

The insights from the primary survey revealed that the majority (74.9 percent) of beedi workers had a nuclear family structure¹⁷ and had a household size comprising of 2-5 members. On the other hand, 17.8 percent of beedi workers were residing in a joint family¹⁸ comprising of 6-9 members in their families. It was also revealed that 8.7 percent of households were headed by women beedi workers who had a household size of 2 to 3 members (Fig 3.1). It was evident that the majority of beedi workers' had a nuclear family structure. Further, the size of the households were in concurrence with 2011 census data which showed that 70.11 percent of the population in rural India belonged to nuclear families (Census of India, 2011).

¹⁷ Nuclear family is a small family where the husband, wife, and their children live under one roof (Census of India, 2011).

¹⁸ Joint family is a large family where the husband, wife, mother-in-law, and father-in-law, brother-in-law, sister-in-law, and their children live under one roof and who eat food cooked on one hearth. (Census of India, 2011).

Figure 3.1: Distribution of Households by family size and family structure



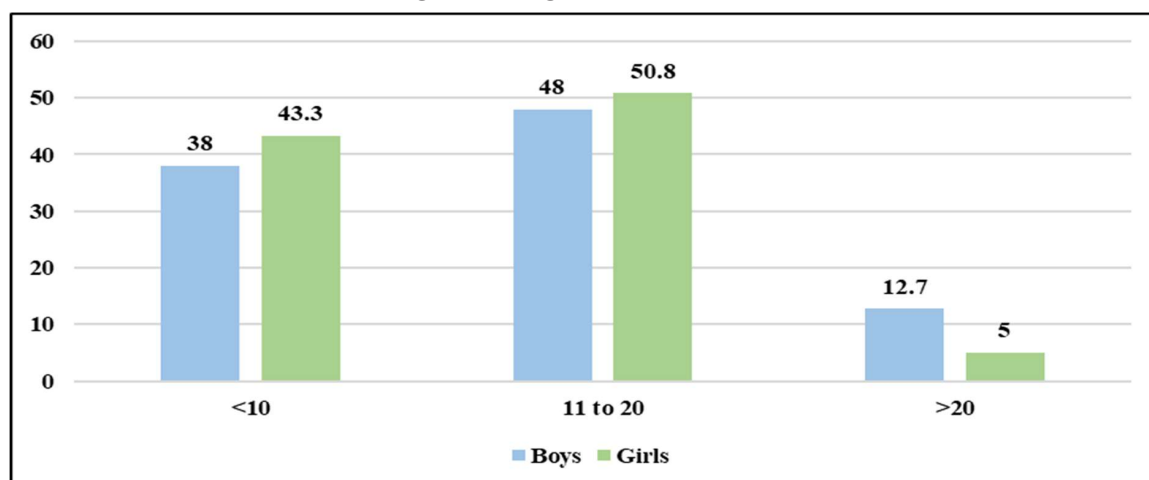
(Source: Primary data collected from Telangana state, January-May 2024)

(a) Children of Beedi Workers

It was revealed that the majority of beedi workers (95.5 percent) had children, with most families having at least two children. Notably, A significant proportion of these children were between 11-20 years of age (Fig 3.2) Within this age group, there were a greater number of girls (50.8 percent) as compared to boys (48 percent). A similar trend persisted in the age group of less than 10 years comprising a greater percentage of girls (43.3 per cent) as compared to boys (38 per cent). On the other hand, the age group of persons greater than 20 years had more boys (12.7 percent) than girls (5 percent).

With regard to the educational status of beedi workers' children, it was revealed that almost all children were literate either going to schools or colleges in their respective localities. It was evident that at the primary level (I-V) and middle school (VI-IX) levels, the participation of girls was relatively greater as compared to boys (Fig 3.3).

Figure 3.2 Age of the children*



Note : *Self-reported by Beedi workers

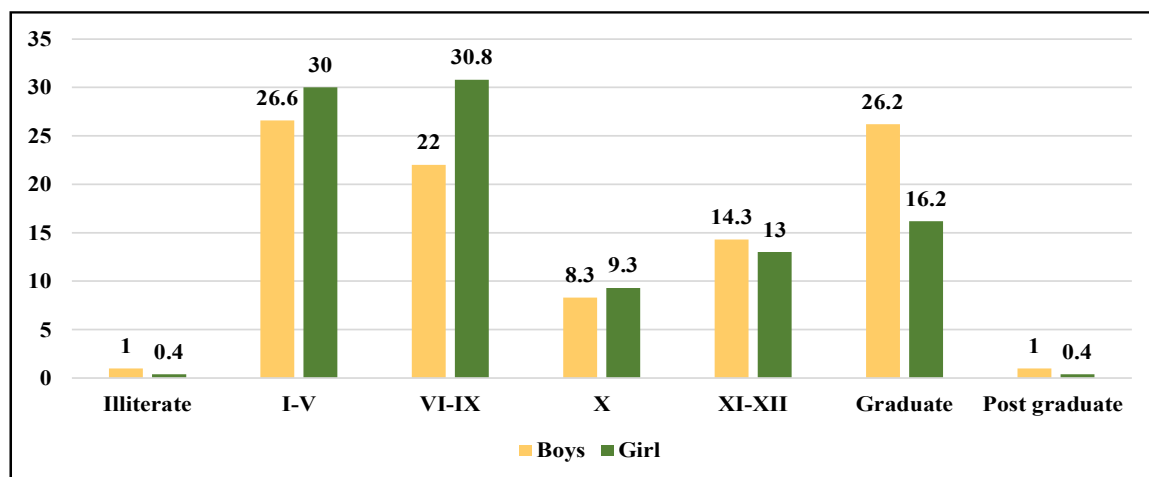
(Source: Primary data collected from Telangana state, January-May 2024)

For instance, 30.8 percent of girls had completed middle school as compared to 22.0 percent of boys at the same level. As the level of education progresses, the gender gap widens significantly. Only 13.0 percent of girls complete higher secondary education (XI-XII) as compared to 14.3 percent of boys and the disparity becomes even more pronounced at the graduate level, where only 16.2 percent of girls attain a degree as compared to 26.2 percent of boys. Hence, boys have an average of nine years of schooling, while girls have eight years of schooling.

It is apparent that gender disparity becomes prominent with higher levels of education. The participation of girl children in higher education is primarily low due to deeply entrenched socio-cultural and economic norms. From a very young age, the majority of girls were taught beedi rolling by their mothers or grandmothers for supplementing to family income while studying in schools. It was revealed during the primary survey that, their early skill acquisition often results in early marriage, where they continue beedi-rolling in their marital homes to support household finances. The emphasis on immediate economic contribution coupled with socio-economic pressures reduces the perceived value of higher education thereby perpetuating their entrapment in the cycle of beedi work.

Some of the studies have highlighted that women and children, particularly girls, are frequently preferred for beedi rolling due to perceived natural and inherent skills. The involvement of women in this occupation has been linked to factors such as the ease with which the skill can be learned, the manual nature of the work, and the ability to perform it at home (Nair, 1990; Pande, 2000; Karunanidhi, 1997). The Child Labour (Prohibition and Regulation) Amendment Act 2016 excludes children who help in family and family enterprise¹⁹ and this loophole creates the scope for employment of children in many home-based activities. The labour department officials have difficulties in taking any action against the employers/contractors who claim that they have given work to only the adult members²⁰.

Figure 3.3 Educational status of Beedi worker's children (self-reported by beedi workers)



(Source: Primary data collected from Telangana state, January-May, 2024)

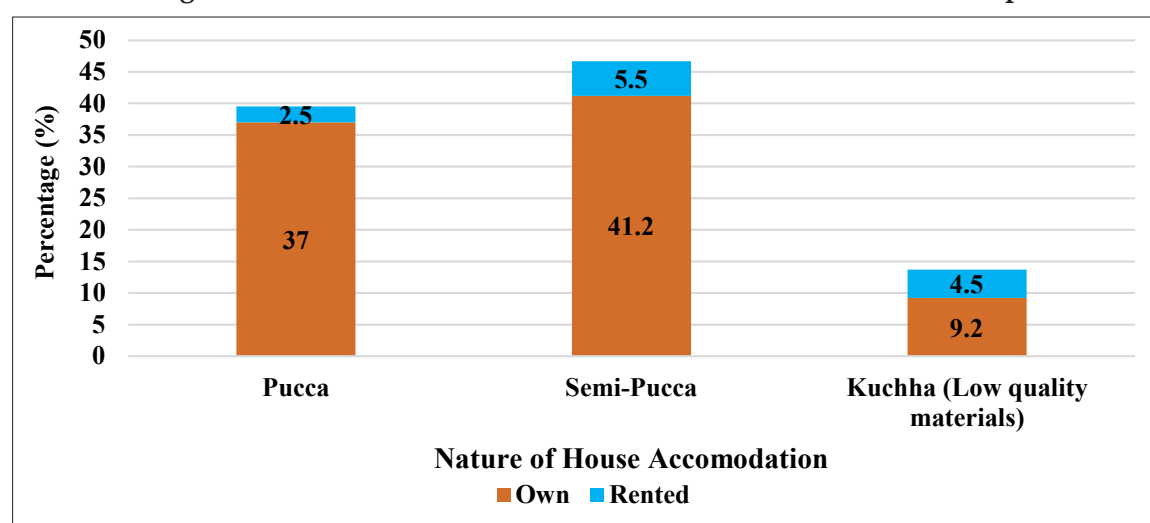
¹⁹ Ministry of Labour and Employment, Government of India. (2016). The Child Labour (Prohibition and Regulation) Amendment Act, 2016. Retrieved from: https://labour.gov.in/sites/default/files/the_child_labour_prohibition_and_regulation_amendment_act_2016_0.pdf

²⁰ British Safety Council India. (2023). *Beedi workers: A tale of exploitation*. Retrieved from: <https://www.britsafe.in/safety-management-news/2023/beedi-workers-a-tale-of-exploitation>

(b) Nature of House Accommodation with House Ownership

The majority of beedi workers who had own accommodation, lived in Semi-Pucca houses²¹ (41.2 percent) which did not include a separate kitchen. While 37 percent of beedi workers had Pucca houses²² and 9.2 percent had Kuchha houses²³ (Fig 3.4). Conversely, a smaller proportion of beedi workers who resided in rented accommodations lived in Semi-Pucca houses (5.5 percent) and Kuchha houses (4.5 percent). While only 2.5 percent lived in Pucca houses. Overall 58.8 percent of beedi workers reported that they did not have separate kitchens in their households. A previous study had revealed that most of the beedi workers lived in a single small room where they not only roll beedis but also cook and sleep (Nakkeeran et al., 2010).

Figure 3.4 Nature of House Accommodation with House Ownership



(Source: Primary data collected from Telangana state, January-May 2024)

(c) Cooking and Lighting Sources of Beedi Workers

The primary source of cooking for beedi workers is an important indicator of their household conditions. It was revealed that a greater percentage of beedi workers (97.3 percent) had LPG/ natural gas connections (through Pradhan Mantri Ujjwala Yojana²⁴) in their households, while only 2.7 percent relied on cow dung (Fig 3.5).

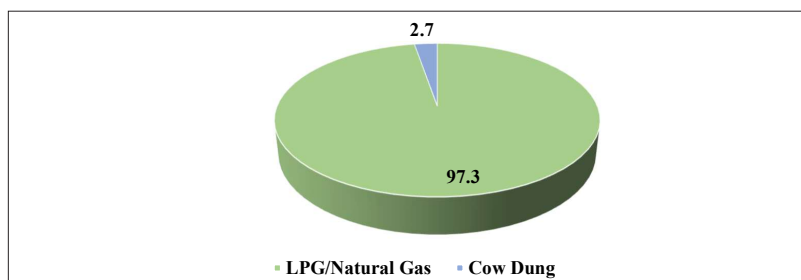
²¹ Semi-Pucca houses made with partly low-quality and high-quality materials (Census of India, 2011).

²² Pucca Houses made with high-quality permanent materials such as burnt bricks, cement Bricks, stones, G.I./Metal/ Asbestos sheets, and Concrete. Including the floor, roof, and exterior walls (Census of India, 2011).

²³ Kuchha Houses are made from low-quality materials such as mud, thatch, bamboo, plastic/polythene, etc. (Census of India, 2011).

²⁴ Pradhan Mantri Ujjwala Yojana (PMUY) was introduced in Telangana on Dr. B.R. Ambedkar's birth anniversary at Suryapet. The launch was led by Dharmendra Pradhan, the Minister of Petroleum & Natural Gas and Skill Development & Entrepreneurship, with the presence of MP Shri Bandaru Dattatreya. During the event, LPG connections under PMUY were distributed to women beneficiaries from below poverty line (BPL) households by the dignitaries on stage. Retrieved from: <https://pib.gov.in/PressReleaseIframePage.aspx?PRID=1529161>

Figure 3.5 Cooking Sources of Beedi Workers



(Source: Primary data collected from Telangana state, January-May 2024)

Similarly, majority of beedi workers (99.3 percent) had electricity as their primary lighting source while only 0.5 percent beedi workers had solar panels and 0.3 percent workers used kerosene oil in their households (Table 3.1).

Table 3.1 Lighting Sources Among Beedi Workers

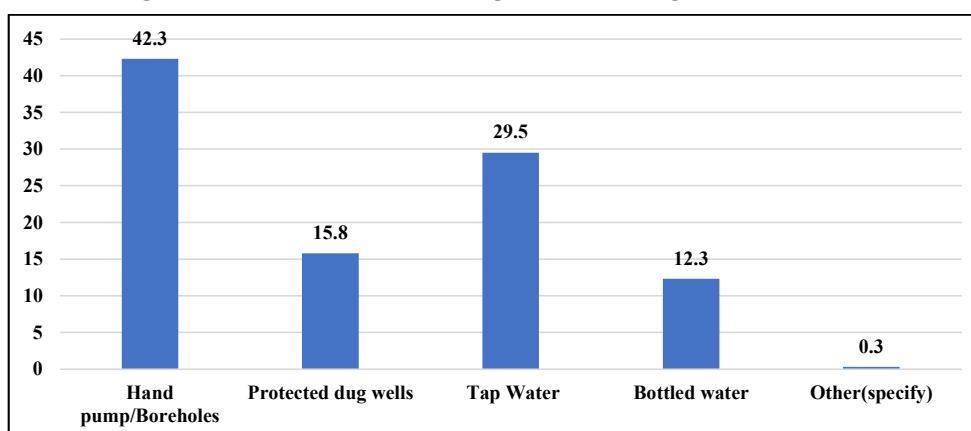
Source of Lighting	Number of Respondents	Percentage (%)
Electricity	397	99.3
Kerosene oil	1	0.3
Solar power	2	0.5
Total	400	100.0

(Source: Primary data collected from Telangana state January-May 2024)

(d) Drinking Water Sources among Beedi Workers

Drinking water is also vital for human survival. As clearly evident in the data (Fig 3.6), the majority of beedi workers (42.3 percent) households used Hand pumps/Boreholes water for cooking, drinking, and other household chores. While 29.5 percent of beedi workers used tap water, (through the Mission Bhagiratha Scheme, *see Text Box 3.1*), 15.8 percent used protected dug wells, 12.3 percent used bottled water and only 0.3 percent used other water sources for drinking purposes and household chores in the study area (Fig 3.6). Hence, almost all beedi workers had access to safe drinking water. The findings corroborate with one study found that 80 percent of beedi worker households had access to safe drinking water in Andhra Pradesh (Rout et al., 2017).

Figure 3.6 Sources of Drinking Water among Beedi Workers



(Source: Primary data collected from Telangana state January-May, 2024)

Text Box: 3.1

Mission Bhagiratha: Overview and Implementation

Mission Bhagiratha is a crucial initiative by the Government of Telangana aimed at providing safe and sustainable drinking water to every household in the state. This document provides a detailed overview of the project's objectives, implementation strategies, technical feasibility, and budgetary allocations.

Background and Objectives: Mission Bhagiratha, named after the mythological King Bhagiratha, addresses the critical issue of drinking water scarcity across Telangana. The project was envisioned by Chief Minister Kalvakuntla Chandrasekhar Rao, who originally designed the “Siddipet Comprehensive Drinking Water Scheme” in 1998. The primary objectives of Mission Bhagiratha include:

1. Providing Safe Drinking Water: Ensuring every household in Telangana has access to protected, purified drinking water.
2. Addressing Water Scarcity: Mitigating the effects of drought and fluorosis, particularly in affected districts like Nalgonda.
3. Ensuring Equal Access: Providing water to all households irrespective of caste, religion, or socio-economic status.

Implementation Strategy: The project is segmented into multiple phases and divisions to ensure comprehensive coverage and efficient management:

1. Water Source and Distribution
 - Water is sourced from the Godavari (53.68 TMC) and Krishna (32.43 TMC) rivers.
 - Extensive infrastructure, including 1.30 lakh kilometres of pipelines, has been laid out to connect 24,000 villages and 65 towns.
2. Technical Feasibility and Design
 - The Central Government's Water and Power Consultancy Services (WAPCOS) examined the project's Detailed Project Report (DPR), quality control, and technical feasibility.
 - Expert consultation from institutions like the Indian Institute of Science and international experts ensured robust design and modelling.
3. **Infrastructure Development:** The project includes 150 water purification plants, 62 pumping stations, and 35,573 overhead service reservoirs. Advanced technology from Bharat Heavy Electricals Limited (BHEL) was employed for electric motors and pumping systems.
4. Budget Allocation
 - The Telangana Government allocated a substantial budget of ₹42,791 crores.
 - Specific budgetary provisions were made in the state budgets of 2016-17 (₹36,976 crores) and 2018 (₹1,081 crores).
5. Legal and Administrative Framework
 - Over 13,000 permissions were obtained from various governmental departments.
 - The Telangana Drinking Water Supply Corporation was established to oversee project execution.

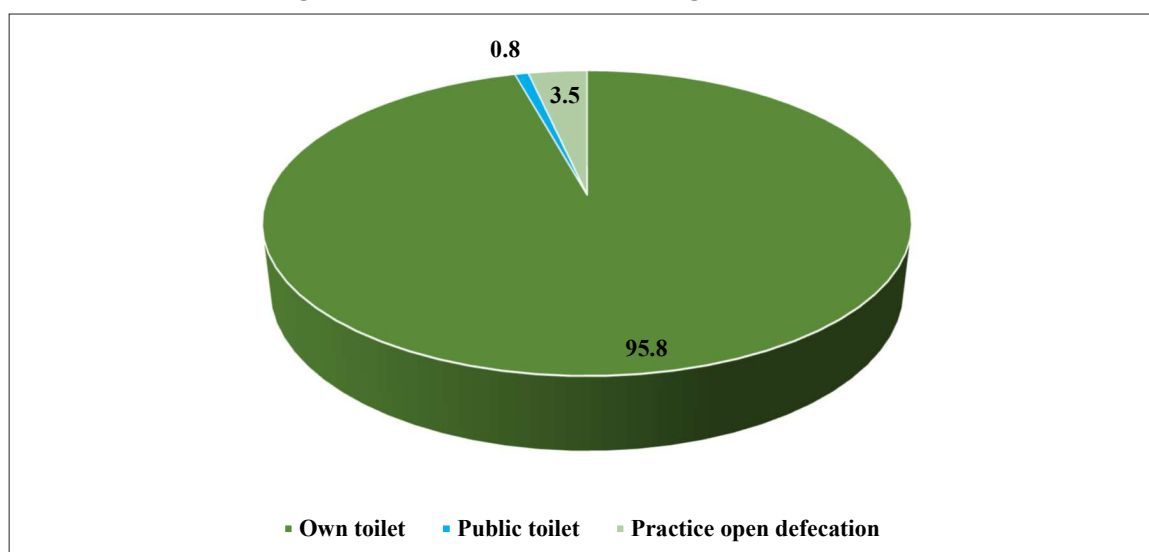
Achievements and Future Plans: Mission Bhagiratha successfully delivered safe drinking water to households across Telangana, setting a precedent as the first state in India to achieve such comprehensive coverage in 2019. The project's success was acknowledged by the Union Minister for Water Resources, Gajendra Singh Shekhawat, in the Rajya Sabha. Mission Bhagiratha represents a monumental effort by the Telangana Government to resolve the longstanding issue of water scarcity and ensure equitable access to clean drinking water for all its residents. The project's implementation showcases a blend of visionary leadership, technical excellence, and robust administrative support.

Source: Mission Bhagiratha Intra Division office, Nirmal District. <https://nirmal.telangana.gov.in/>

(e) Toilet Facilities among Beedi Workers

The availability and access to better toilet facilities has remained one of the most important indicators of health and hygiene in households. The primary survey revealed that the majority of beedi workers, i.e., 95.8 percent, had toilet facilities in their own house, followed by 3.5 percent of beedi workers' practised open defecation and 0.8 per cent of respondents used public toilets (Fig 3.7). Hence, the higher percentage of households with toilet facilities reflected the progress made by the Government of Telangana in achieving the status of an "Open Defecation Free" State. The State government, through Panchayat Raj and Rural Development (PR&RD) and Sanitation Department, has played a pivotal role in implementing the Swachh Bharat Mission. This commitment has been evident in the development of infrastructure, public engagement, human resource capacity, and enhanced accountability, contributing to a cleaner and healthier environment for residents²⁵.

Figure 3.7: Toilet Facilities among Beedi Workers



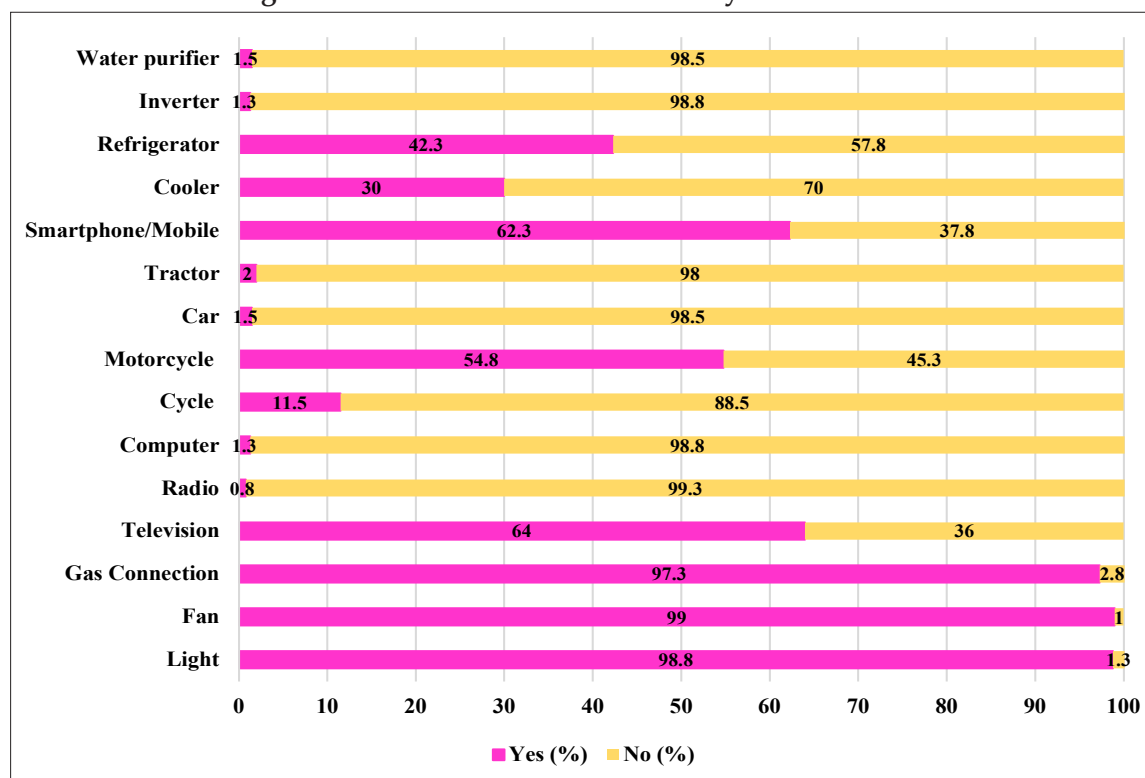
(Source: Primary data collected from Telangana state January-May, 2024)

(f) Household Assets Owned by Beedi Workers

With regard to household assets owned by beedi workers, it was observed that 99 percent of respondents had lights and fans in their households and 97.3 percent of respondents had gas connection (Fig 3.6). While a greater percentage of households owned electronic gadgets like televisions (64 percent), smartphones (62.3 percent), refrigerators (42.3 percent), cooler (30 percent) etc., 54.8 percent of respondents' families had a motorcycle. However, other amenities like water purifiers, inverters, computers, radios etc., were possessed by less than 2 percent of beedi workers (Fig 3.8).

²⁵ Government of Telangana. (2018). Swachh Bharat Mission (Gramin), Telangana: About us. Retrieved September 29, 2024, from <https://sbmgramin.telangana.gov.in/SwachhTelangana/RWShOmePage/AboutUs.aspx>

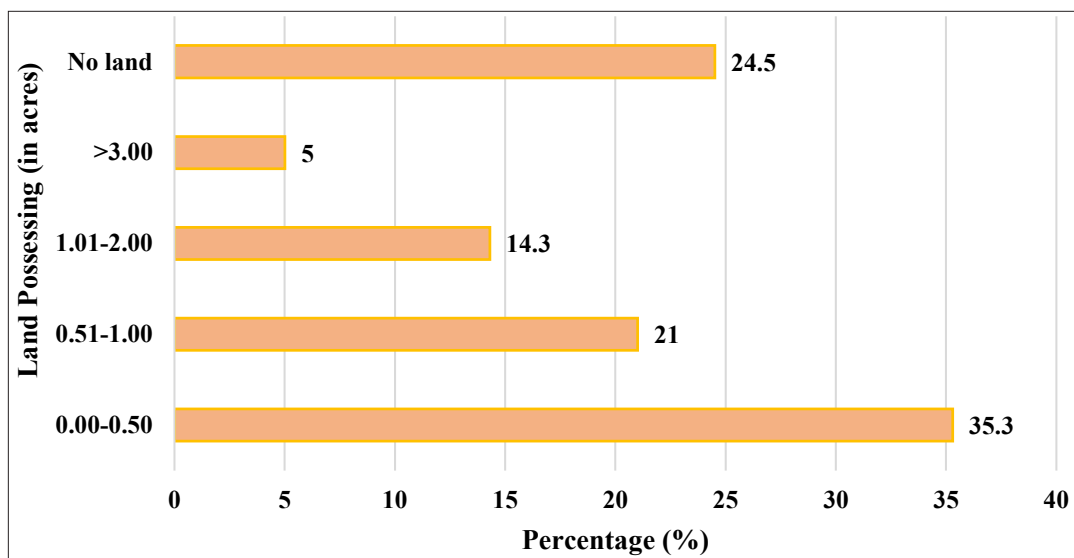
Figure 3.8 Household Assets Owned by Beedi Workers



(Source: Primary data collected from Telangana state January-May, 2024)

(g) Possession of Land

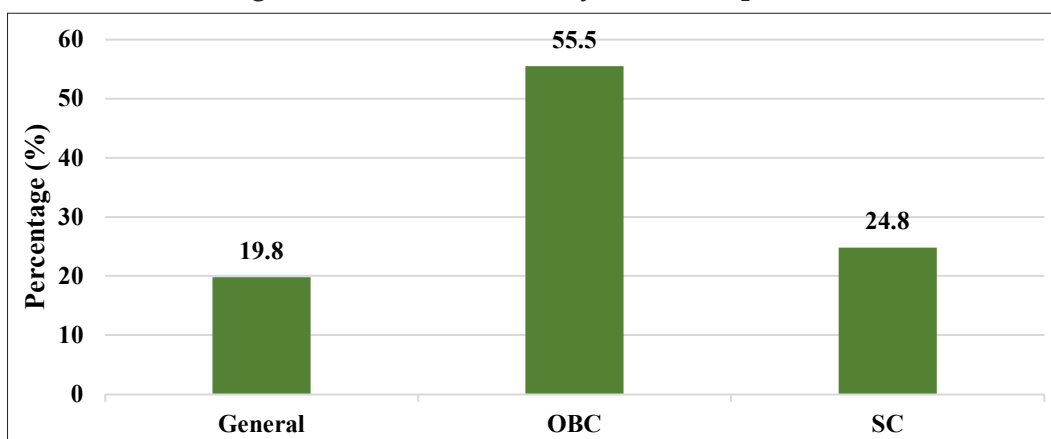
The data presented in Figure 3.7 illustrated the distribution of land possession among respondents, categorised by the amount of land they own. It was evident that the highest proportion of beedi workers (35.3 percent) possess between 0.00 and 0.50 acres of land and 24.5 percent of respondents did not own any land. Those who own between 0.51 and 1.00 acres constitute 21 percent of the sample. A smaller percentage, 14.3 percent, possessed land between 1.01 and 2.00 acres. However, only 5 percent of the respondents owned more than 3.00 acres of land. On the other hand, 24.5 percent of beedi workers did not own any land. This distribution indicates a trend where the majority of respondents possess either tiny plots of land or none at all, with relatively very few respondents owned larger plots (Fig 3.9). Some of the studies found that more than 80 percent of beedi workers in Andhra Pradesh did not own land due to which the majority of beedi-rolling households lived below the poverty line (BPL). The poverty rates for these households were found to be 18.2 percent in rural areas and 26.4 percent in urban areas, which is notably higher than the overall poverty estimates for Andhra Pradesh, where 10.96 percent of the rural population and 5.81 percent of the urban population live below the poverty line (GoI, 2013; Rout et al., 2017).

Figure 3.9 Possession of Land


(Source: Primary data collected from Telangana state January-May, 2024)

(h) Social Composition of Beedi Workers

The study revealed that 94.5 percent of beedi workers were from the Hindu community and 5.2 percent were from the Muslim community (Appendix No 1). With regard to social group composition, 55.5 percent of the beedi workers belonged to the Other Backward Caste (OBC) category, while 24.8 percent were from the Scheduled Caste (SC) category and 19.8 percent were from the General Caste (Gen) category. The data revealed that beedi workers were predominantly from OBC and SC Hindu communities (Fig 3.10). However, a recent study had also reflected on the religious diversity among beedi workers with a greater percentage of beedi workers from Hindu communities followed by Muslim and Christian communities. Also, the beedi workers were mostly from the OBC category (AFDC, 2020)²⁶.

Figure 3.10 Beedi workers by Caste Composition


(Source: Primary data collected from Telangana state January-May, 2024)

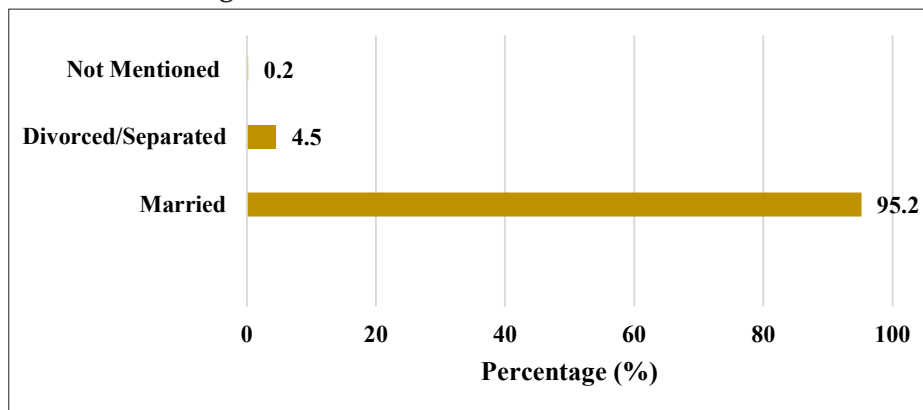
²⁶ AFDC, AF Development Care. (2020). Knowledge gap in existing research on India's women beedi rollers and alternative livelihood options.

Retrieved from: https://afdc.in/listing_detail.php?programme=17

(i) Marital Status of Beedi Workers

The primary survey revealed that the majority of beedi workers in the age group of 15-59 years were married (95.2 percent) and only 4.5 percent of beedi workers were either divorced or separated. However, a smaller proportion did not prefer to disclose their marital status (Fig 3.11).

Figure 3.11 Marital Status of Beedi Workers

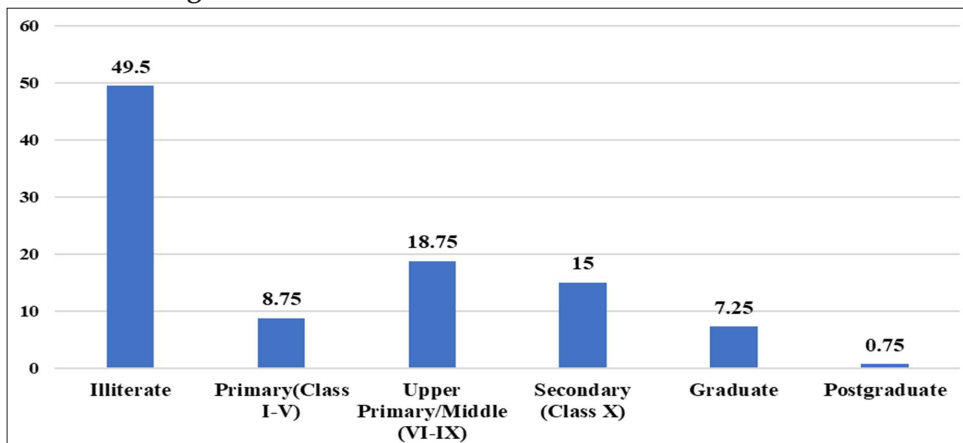


(Source: Primary data collected from Telangana State, January-May, 2024)

(j) Educational Status of the Beedi Workers

It was revealed that a significant proportion of beedi workers (49.5 percent) were found to be illiterate. Among those who had received formal education, 8.75 percent had completed primary school (Classes I-V), 18.75 percent had completed middle school (Classes VI-IX), and 15 percent had completed secondary education (Class X). A smaller proportion (7.25 percent) had completed graduate-level education, and only 0.75 percent had completed postgraduate studies. The mean years of schooling among respondents was 4.38 years, which is considerably lower than the national average (Fig 3.12). The data indicates that a significant portion of the beedi workers lack formal education, with nearly half being illiterate. Educational attainment at higher levels has markedly declined, very few having attained graduate or postgraduate degrees. The study is corroborated with similar findings of the study, found that half of the beedi workers was either illiterate or educated only up to the primary level (Rout et al., 2017).

Figure 3.12 Educational Status of the Beedi Workers



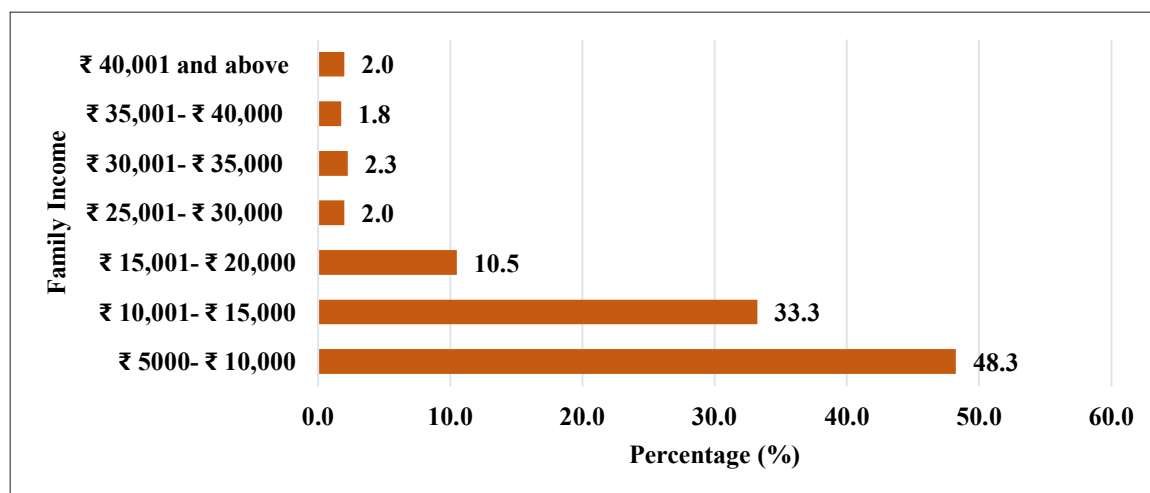
(Source: Primary data collected from Telangana state, January-May 2024)

(k) Monthly Income of respondents' family

The analysis of monthly family income among beedi workers provides critical insights into their economic status. Nearly half of the respondents (48.3 percent) reported a monthly family income between ₹5,000 and ₹10,000, followed by 33.3 percent with an income of ₹10,001 to ₹15,000. A smaller proportion (10.5 percent) earned between ₹15,001 and ₹20,000. Only a minority (2.3 percent) earned between ₹15,001 and ₹20,000. Only a minority (2.3 percent) reported incomes between ₹30,001 and ₹35,000, while 2 percent of respondents fell into the ₹25,001–₹30,000 and ₹40,001-and-above income brackets. These findings underscore that the majority of beedi workers belong to lower-income groups, with only a small percentage earning higher incomes (Fig 3.13).

Additionally, 1.8 percent of respondents reported family incomes between ₹35,001 and ₹40,000. The low income of beedi workers reflect on the urgent need for initiatives aimed at improving the livelihoods and financial well-being of beedi workers. Such efforts could include creating access to better employment opportunities, providing skill development programmes, and establishing financial support systems to uplift their economic conditions.

Figure 3.13 Monthly Income of respondents' family

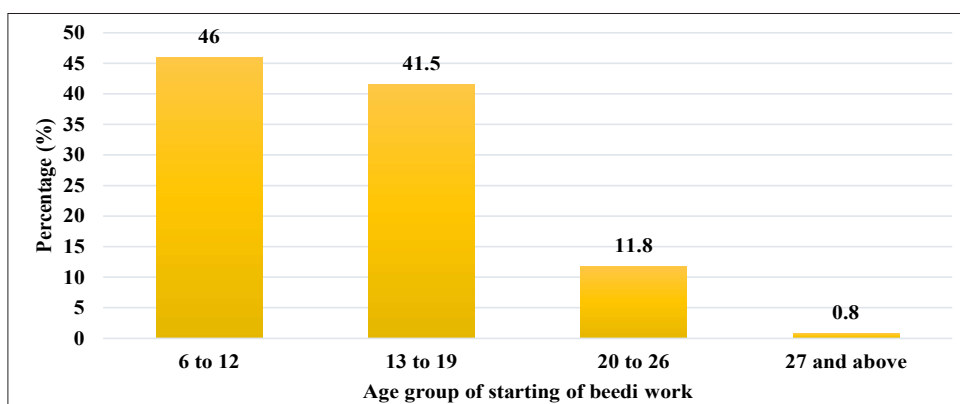


(Source: Primary data collected from Telangana state, January-May 2024)

3.3. Working Conditions of beedi Workers

(a) Initial age of beedi making

The age at work is essential to understand about the gendered vulnerabilities of girl children who contribute beedi rolling as a part of their engagement in household activities. The primary survey revealed that a significant proportion of respondents (46 percent) began working during 6 - 12 years of age, mostly being girl children. This early entry into the workforce suggests a high prevalence of child labour within the beedi industry, raising concerns about the long-term educational and developmental opportunities available to these workers (Fig 3.14).

Figure 3.14 Beedi making: Initial age


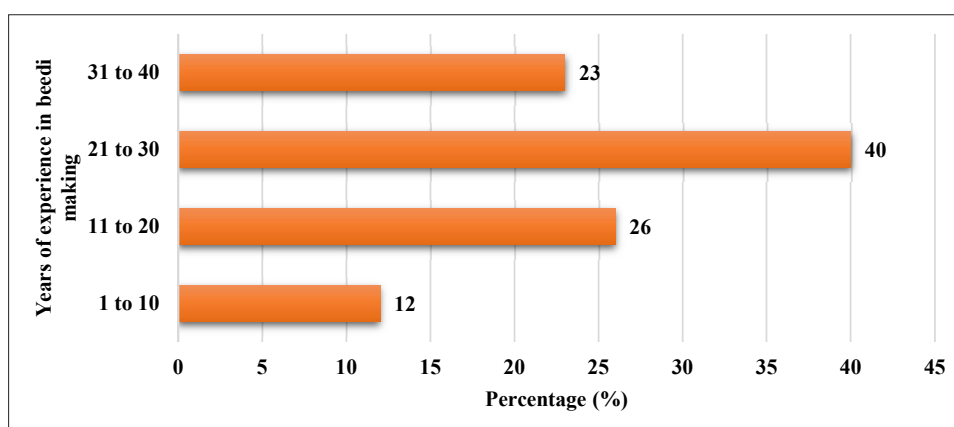
(Source: Primary data collected from Telangana state, January-May 2024)

Furthermore, 41.5 percent of respondents started working between 13-19 years, a crucial period for education and skill development. Early entry into the workforce during this time is often driven by socio-economic pressures and the need to contribute to household income. Only 11.8 percent of beedi workers began working between the ages of 20 and 26, and a mere 0.8percent started after the age of 27 years. These figures suggest that entering the beedi industry at a later age is uncommon, likely due to the physical demands of the work and the established patterns of early entry.

The data reveal a pervasive trend of early entry into the beedi industry, often during childhood and adolescence. This finding underscores the need for targeted policies and programmes aimed at supporting the educational and developmental needs of young individuals in the beedi industry, to facilitate their transition to safer and more sustainable livelihoods.

(b) Beedi making: Years of experience

With regard to years of experience in the beedi industry, it was evident that a greater proportion of workers (40 percent) had 21 to 30 years of experience in the industry, making them highly experienced workers. This was followed by 26 percent of beedi workers who had 11 to 20 years of experience, and 23 percent who had an experience between 31 to 40 years. However, a smaller proportion (12 percent) had 1 to 10 years of experience (Fig 3.15).

Figure 3.15 Beedi making: Years of experience


(Source: Primary data collected from Telangana state, January-May 2024)

This distribution of experience underscores the long-term engagement of workers in beedi-making, reflecting the economic dependency on this occupation. The persistence of beedi-making as a long-term employment option is largely due to limited alternative livelihood opportunities in rural areas, as well as the necessity for a stable income. The data indicated that many workers remain in the industry well into their later years, which may reflect a lack of retirement options and ongoing economic need.

(c) Inter-generational employment

Inter-generational employment in the beedi industry remains a critical issue. The practice of beedi-making is passed down from one generation to the next, perpetuating cycles of poverty and vulnerability. Children, particularly girls, are vulnerable to this practice, with many being involved in beedi rolling from a young age. Women play a central role in this cycle, teaching their children to roll beedis, thereby embedding them in the same hazardous occupation. This intergenerational transmission of skills highlights the deeply entrenched nature of beedi work within families, particularly among women, who often pass down this trade to younger generations. This practice deprives children of educational opportunities and exposes them to the same occupational hazards their parents face, thus continuing the cycle of exploitation and poverty.

The findings revealed that 50 percent of beedi workers were the first generation in their families to engage in beedi-making as a profession, while 41 percent were second-generation beedi workers. Interestingly, 9 percent of the respondents identified themselves as third-generation beedi workers (Table 3.2). An interesting aspect of beedi making as a gender specific employment has been the transfer of skills and learning of beedi making from their mothers or grandmothers. As one of the Beedi workers narrated:

Text Box 3.2: Insights from FGDs

“When I was ten years old, I learned beedi making. It was a common work in my family. My sister and I learned by observing our mother’s work. We would sit next to her while she made beedis. We used to clean and cut tendu leaves and make beedis together. And since then, I have been making beedis to support my family.”

(25-year-old female Beedi Worker from Borgaon village, FDG, Nizamabad District)

(Source: Primary data collected from Telangana state, January-May 2024).

Table 3.2: Intergenerational Employment

Intergenerational Employment	Percentage (%)
First Generation	50
Second Generation	41
Third Generation	9

(Source: Primary data collected from Telangana state, January-May, 2024)

(d) Productivity of home-based beedi workers (per day)

The productivity of home-based beedi workers is measured by the number of beedis rolled per day which has been analysed based on the evidence derived from primary data. The analysis focuses on the average number of beedis rolled per day. The data

indicated that the maximum of 1200 beedis were rolled in a day while a minimum of 200 beedis rolled per day. On an average, the beedi workers rolled 731 beedis per day. This average provides a central measure of daily productivity and reflects the typical workload managed by beedi workers.

The relatively high average suggests that many workers operate at a high productivity level, likely driven by the need to maximise earnings in a piece-rate payment system. This system, where workers are paid based on the number of beedis rolled, encourages higher productivity to secure sufficient daily income. The data not only reveals the capacity for high output among workers but also reflects on significant disparities in their productivity, deplorable working conditions and excessive overwork not commensurate with the wages paid to them (Table 3.3).

Table 3.3: Productivity of home-based beedi workers (per day)

Number of Respondents	Minimum number of rolled beedi (per day)	Maximum number of rolled beedi (per day)	Average number of rolled beedi (per day)
400	200	1200	731

(Source: Primary data collected from Telangana state, January-May, 2024)

When comparing productivity across districts, significant variations were also found across the three districts. For example, in Nirmal district, workers demonstrated the highest daily productivity, rolling an average of 790 beedis per day. This heightened productivity is likely due to increased work pressure and incentives. While workers in Nizamabad roll an average of 751 beedis per day, which also reflects high productivity, possibly driven by similar factors as in Nirmal (Table 3.4).

Table 3.4 District-wise average productivity of home-based beedi workers (per day)

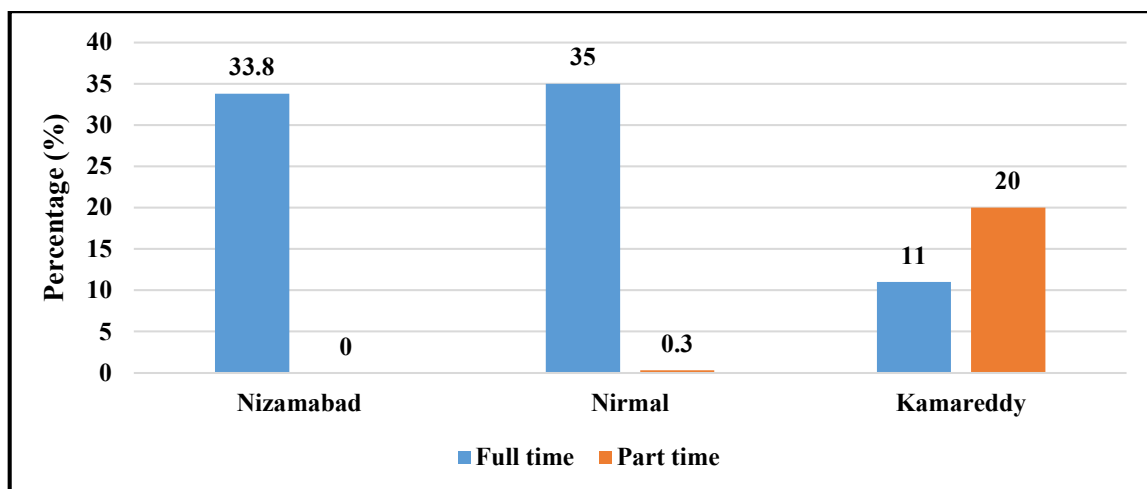
Name of the District	Average number of Beedi Rolled
Nizamabad	751
Nirmal	790
Kamareddy	641
Total	731

(Source: Primary data collected from Telangana state, January-May 2024)

In contrast, workers in Kamareddy roll an average of 641 beedis per day, the lowest among the three districts. This lower productivity rate in Kamareddy is directly attributed to workers being involved in other agricultural activities in which they juggle their time between beedi rolling and farming (Fig 3.16).

The district-wise analysis indicated that the productivity of beedi workers is influenced by various factors including opportunities for livelihood diversification in local areas which is an addition to their existing income received from beedi rolling. This was evident mostly in the Kamareddy district where beedi workers were engaged in agricultural activities on a seasonal basis.

Figure 3.16 Beedi as home-based employment: District-wise participation



(Source: Primary data collected from Telangana state, January-May 2024)

(e) Wages for beedi rolling per day

The survey data revealed that the majority of beedi rollers (62.75 percent) earn between ₹151 and ₹200 per day while 37 percent were earning between ₹201 and ₹250 per day. This wage distribution indicates that most beedi rollers' daily earnings fall within the mid-range of ₹151 to ₹200 (Table 3.5). As per the Government of Telangana's fixation of minimum wages and Variable Dearness Allowance (VDA) set in 2020, the minimum wage for rolling 1,000 beedis per day under the *Gharkhata system*²⁷ should be ₹272 per day.

Table 3.5: Wages of Beedi rolling per day

Wages for Beedi rolling per day	Frequency	Percentage
₹100 -₹150	1	0.25
₹151-₹200	251	62.75
₹201-₹250	148	37
Total	400	100

(Source: Primary data collected from Telangana state, January-May 2024)

It was revealed that beedi workers were often not paid the mandated minimum wage rates as prescribed by the State government thereby leading to significant wage disparities and contributing to their overall economic vulnerability. This shortfall in wages has been a long-standing issue, with many beedi workers continuing to live below the poverty line despite government regulations (GoI, 1996).

(f) Unpaid Domestic and Care Work

Women's participation in unpaid domestic and care work has always remained a challenge for women to continue in regular employment and choosing informal, part-time or home

²⁷ TeamLease RegTech. (n.d.). *Telangana Labour Department fixes the minimum rates of wages and VDA - I*. Retrieved from: <https://www.teamleaseregtech.com/updates/article/9945/telangana-labour-department-fixes-the-minimum-rates-of-wages-and-vda-i/>

based employment. The primary Time use survey conducted for the study revealed that beedi workers spend 17 hours in paid and unpaid domestic activities. The Table 3.6 below illustrates that the participation rate in employment-related activities was 100 percent, with beedi workers dedicating an average of 581 minutes (approximately 10 hours) to beedi making. This was followed by 99.5 percent participation rate in unpaid domestic services for households and families, with workers spending an average of 292 minutes (approximately 5 hours) on these activities. Additionally, 17 percent of the participants reported spending an average of 98 minutes (approximately 2 hours) on unpaid caregiving services for household and family members (Table 3.6). The number of hours spent in paid and unpaid work is much in line with the findings of the National Time Use Survey 2019 which had revealed that women in the 15-59 age group spend 5.2 hours in unpaid domestic work and 2.3 hours in unpaid care giving activities (GoI, 2019).

**Table 3.6 Average time spent in paid and unpaid activities:
Insights from Primary Time Use Survey**

Major Activities	Participation Rate (Percentage)	Average time in Minutes (Hours)
Average time in Unpaid domestic services for household and family members	99.5	292 minutes (5 hours)
Average time in unpaid caregiving services for household and family members	17.0	98 minutes (2 hours)
Employment related activities	100	581 minutes (10 hours)

(Source: Primary data collected from Telangana state, January-May 2024)

These findings reflect on the significant workload that beedi workers manage, as they engage in both paid and unpaid domestic responsibilities. The beedi workers often perform these roles simultaneously along with beedi rolling. Many of these women may not perceive their unpaid domestic and caregiving work as “work” in the traditional sense but rather as an integral part of their daily responsibilities. Studies have shown that women often prefer home-based work such as beedi rolling as it allows them to balance employment with domestic duties (Ansari & Raj, 2015).

Women beedi workers bear a dual responsibility, balancing paid work in the beedi industry with unpaid caregiving for children and elderly family members. This dual burden influences their economic choices and limits their opportunities. Many women expressed interest in skills training, such as tailoring or incense stick making, but preferred these programmes to be offered near their homes due to household and childcare responsibilities. As one of the beedi workers narrated,

Text Box 3.3: Insights from FGDs

“I juggle beedi-making with taking care of my children. I am interested in learning tailoring and prefer to stay close to home due to my young children. If a factory or other employment opportunities were available in our village, I would gladly take them up.”

(28-year-old Beedi Worker from Rampur village, FGD, Nirmal District)

(Source: Primary data collected from Telangana state, January-May 2024).



This narrative illustrates how limited employment opportunities, cultural restrictions, and financial burdens related to commuting restrict women's ability to pursue alternative livelihoods. Many women remain trapped in beedi work due to the lack of accessible employment and the economic necessity of working from home:

Text Box 3.4: Insights from FGDs

"There are no other job opportunities in our village, and women in our family are not allowed to work outside. Even if I wanted to do any work other than making beedis, my family would not permit me to go out, as travelling to other places for work incurs additional expenses. Therefore, I chose beedi making as the only occupation. I make beedis while taking care of my family."

(42-year-old Beedi Worker from Borgaon Village, FGD, Nizamabad District)

(Source: Primary data collected from Telangana state, January-May 2024).

These findings highlight how unpaid care responsibilities, cultural restrictions, and economic constraints shape the work choices of women in the beedi industry. The lack of local employment and skills training opportunities, combined with economic and cultural barriers, forces many women to remain in low-income occupations like beedi making.

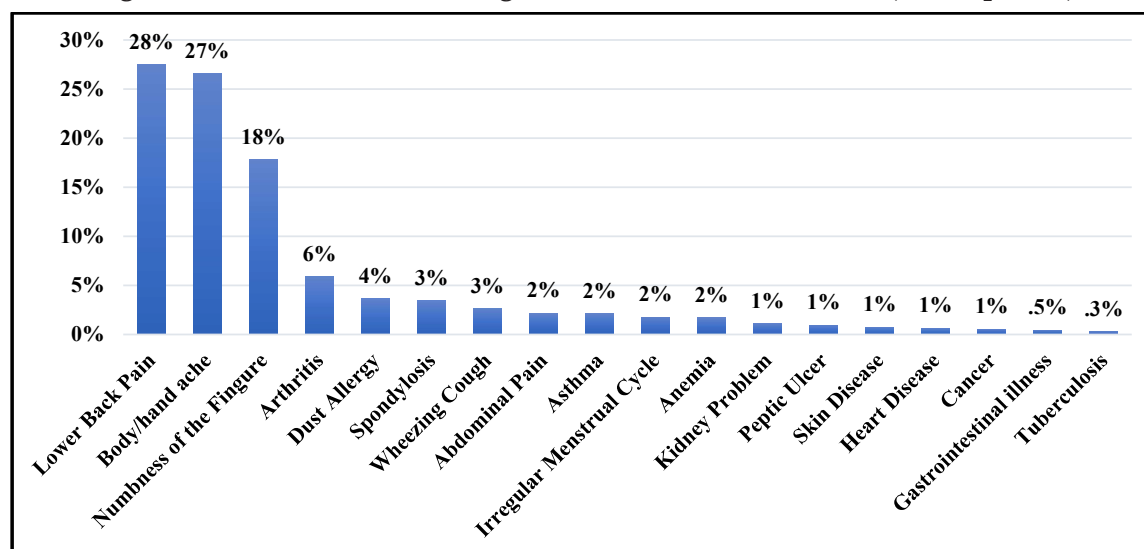
3.4 Health Issues of Beedi Workers and Lack of Health and Safety Training

Beedi workers were exposed to various occupational health risks due to the nature of their work. The most prevalent health issue reported was lower back pain, affecting 27.5 percent of beedi workers. This was likely caused by the prolonged sitting and bending posture required during beedi rolling. Body and hand aches were reported by 27 percent of workers, due to the repetitive nature of the work that involves continuous hand movements. Numbness of the fingers, reported by 18 percent of beedi workers, was another common issue linked to repetitive strain from manual beedi rolling. Arthritis, reported by 6 percent of the workers, was indicative of the joint strain caused by the repetitive motions involved in beedi-making. Dust allergy, reported by 4 percent of workers, stems from prolonged exposure to tobacco dust. Respiratory issues, such as wheezing cough, affected 2.6 percent of beedi workers and were also linked to this exposure.

Other health issues included spondylosis, reported by 3 percent of workers, due to their constant bending posture during beedi rolling. A small percentage of workers (2 percent) reported abdominal pain and irregular menstrual cycles, highlights the broader negative effects on women's health. More severe health conditions, including kidney disease, heart disease, and cancer, were reported by 1 percent of respondents, reflecting the long-term risks associated with exposure to hazardous materials in the beedi-making environment (Fig 3.17).

These findings reflected that the significant occupational health risks faced by beedi workers. Many of these health issues are caused by the repetitive, manual nature of beedi rolling, as well as prolonged exposure to tobacco dust.

Figure: 3.17 Health Issues among Home-Based Beedi Workers (Self-reported)



(Source: Primary data collected from Telangana state, January-May 2024).

Health issues are widespread among beedi workers, which includes severe back pain, eye strain, sinus problems, and frequent headaches, caused by prolonged exposure to tobacco and the physical demands of beedi rolling. Musculoskeletal disorders are prevalent due to the repetitive nature of beedi rolling, involving continuous hand movements and poor postural support.

Text Box 3.5: Insights from FGDs

"I am having severe lower back pain due to the constant sitting in bending posture, and exposure to tobacco dust has caused sinus problems, leading to frequent sneezing. Upon consulting a doctor, I was advised to undergo sinus surgery; when any family member falls ill, we avoid government hospitals due to neglect and lack of proper care and often resort to private hospitals, which are financially burdensome. Despite these difficulties, I continue working with Beedis due to financial instability."

(28-year-old female Beedi Worker from Rampur village, FGD, Nirmal District)

Source: Primary data collected from Telangana state, January-May 2024).

Despite these pervasive health issues, only 3.3 percent of workers reported receiving health and safety training, typically provided by employers. The lack of training and the absence of protective gear, such as masks and gloves, exacerbate the health risks faced by workers.

Text Box 3.6: Insights from FGDs

"I have been suffering from cancer for the past five years and need to visit a hospital every three months for treatment. In Nizamabad government hospital lacks of proper facilities, so I travel to Hyderabad for treatment, which costs Rs. 10,000 every three months. I use arogyasri health care card, that to cover 50 percent of these expenses. We need a government hospital in our village with adequate healthcare services."

(54 years old Beedi worker from Mantrajpally village, FGD, Nizamabad District)

Source: Primary data collected from Telangana state, January-May 2024).



The qualitative and quantitative findings highlighted a pronounced deficiency in protective gear, such as masks and gloves, which are crucial for reducing exposure to harmful substances. The absence of Occupational Safety and Health (OSH) measures has significantly contributed to the high prevalence of health issues among beedi workers, exacerbating their vulnerability to occupational hazards. This lack of training and protective measures exacerbates the health risks faced by beedi workers, corroborating findings by Roy et al. (2014) on the inadequate implementation of health and safety standards in the informal sector.

3.5 Discussion

The study on vulnerability mapping of Beedi workers in Telangana highlights significant challenges such as, lower socio-economic conditions, low-income levels, paid and unpaid work responsibilities compounded by a high prevalence of work-related health problems, underscore the urgent need for targeted policy interventions and health initiatives to improve the welfare of beedi workers. A significant portion of beedi worker families earn low incomes, with 48.3 percent of families earning between ₹5,000 and ₹10,000, and 33.3 percent earning between ₹10,001 and ₹15,000. These figures reflect a workforce largely living below or just above the poverty line, aligning with previous studies that highlighted the economic vulnerabilities of informal sector workers (ILO, 2018; Bonnet et al., 2019).

The economic situation of beedi workers is dire, with many households classified as poor due to their low earning potential. Minimum wages in the sector are significantly below the required level to lift families above the poverty line. This perpetuates a cycle of poverty, restricting access to essential services such as healthcare and education, which further exacerbates their vulnerability. This highlights the critical need for stronger enforcement of wage laws and better mechanisms to ensure that beedi workers receive fair compensation. These efforts could involve better wage monitoring systems, empowerment through worker unions and government support to address the wage disparities within the beedi industry.

On average, beedi workers roll about 731 beedis per day, which reflects the intense manual labour involved in this occupation. Compounding this is the substantial unpaid domestic and care work they undertake, amounting to approximately seven hours daily. The dual burden of paid and unpaid work places immense strain on their physical and mental well-being, leading to chronic fatigue and health issues.

The inter-generational aspect of beedi-making further underscores this reliance as beedi making skills and beedi as a source of employment are percolated to the younger generation within families, leading to prolonged engagement in the industry. The findings also highlighted both overwork and underemployment within this population, raising concerns about worker welfare. Supportive measures, such as standardising work conditions and enhancing productivity sustainably are required to address these issues.

The low-income levels among beedi workers are compounded by the high prevalence of health problems. The data indicated that the majority of beedi workers suffered from work-related health issues, with conditions such as lower back pain, body/hand aches, and numbness in fingers being particularly prevalent. Some of the studies on health issues of beedi workers have documented the high incidence of musculoskeletal disorders among beedi workers due to the repetitive and ergonomically poor nature of their work (Reddy et al. 2010; ILO, 2003; Iti, 2018). Moreover, the high prevalence of health issues among beedi workers calls for immediate



health interventions. Regular health screenings, improved access to medical facilities, and mandatory health and safety training are critical steps to address these challenges. The World Health Organization (WHO, 2015) has emphasized the importance of providing occupational health services to informal workers, suggesting that such measures are vital in reducing the health burden on beedi workers.

In conclusion, These findings align with existing studies, which emphasizes the need for comprehensive strategies to address the socio-economic and health needs of informal sector workers. Through a combination of improved wages, social security benefits, access to healthcare, and better working conditions, it is possible to enhance the quality of life for beedi workers and break the cycle of poverty and vulnerability that defines their work.

Chapter 4: Legislative Provisions and Welfare Schemes for Beedi Workers in Telangana

4.1 Introduction

The Central and State Governments have implemented various legislations and policies to regulate working conditions and provide social security benefits to beedi workers across various regions of India. The Ministry of Labour and Employment (MoLE), through the Directorate General of Labour Welfare (DGLW)²⁸ implements Labour Welfare Scheme having its three components²⁹ namely, (i) Housing (ii) Health and (iii) Education for the welfare of Beedi, Cine and Non-Coal mine workers. These schemes for beedi workers are critical for safeguarding their rights and ensuring their welfare. All three schemes have been merged under a single umbrella and renamed as “Labour Welfare Scheme”. These three Welfare Schemes have been run by eighteen (18) Offices of Welfare Commissioners (Central)³⁰ which are Sub-ordinate offices of the Ministry of Labour & Employment. Therefore, this chapter specifically focuses on the Labour Welfare Schemes to provide an overview of the effectiveness of these schemes over the last five years in Telangana State.

4.2. Labour Welfare Schemes for Beedi workers : Insights from the field

The findings of the study revealed that a greater proportion (12.3 percent) of beedi workers were aware of the housing scheme of the Ministry of Labour and Employment. While 3.5 percent of beedi workers were aware of the Financial Assistance for Education to Beedi workers’ children. It was also evident that awareness on health scheme was lacking amongst 3.3 percent of beedi workers (Table 4.1).

Hence, the data highlighted a critical issue i.e. the low level of awareness regarding welfare schemes among beedi workers in Telangana state. Similar findings were observed in a study done in West Bengal, which showed that awareness regarding welfare schemes available for beedi workers from the government was poor, with only 11.9 percent being aware about the benefits. In comparison, 88.1 percent had no awareness regarding the benefits (Das, Moitra & Bhor, 2013). Another study carried out in the urban slums of Mumbai also supports the same, where findings suggested that among 52 beedi workers, none was aware of the benefits available for them (Chowdhary, Kowli, & Sabale, 2012).

Table 4.1: Overall Awareness Levels of Various Beedi Workers’ Welfare Schemes among Beedi Workers

Awareness on Beedi Workers’ Welfare Schemes	Percentage
Health Scheme	3.3
Housing Scheme	12.3
Financial Assistance for Education to Beedi workers’ children	3.5

(Source: Primary data collected from Telangana state, January-May 2024)

²⁸ Director General Labour Welfare (labour welfare organisation) is dealing with matters concerning policy and legislation related to workers in the unorganised sector and administration of welfare funds for specified categories of workers, through eighteen Labour Welfare Organisations (LWO) regions headed by welfare commissioners across India who implement the welfare schemes made under the welfare funds.

²⁹ Labour Welfare scheme caters to the Beedi/ Cine/ Iron, Manganese, Chrome/ Limestone & Dolomite/ Mica Mine workers. Only those workers registered with the respective LWOs are eligible under these schemes.

³⁰ The name of Eighteen regions or offices of Welfare Commissioners are Ahmedabad, Ajmer, Lucknow, Bengaluru, Bhubaneswar, Chandigarh, Chennai, Dehradun, Guwahati, Hyderabad, Jabalpur, Thiruvananthapuram, Kolkata, Nagpur, Patna, Ranchi, Raipur, and Srinagar (GoI, 2024).

Text Box 4.1 Challenges experienced in the implementation of welfare schemes- Insights from Key Informants Interviews (KIIs)

“The Beedi workers in Telangana mainly constitute women and are spread over in various Beedi clusters. Due to the non-availability of vehicle and Driver, conducting mobile health camps is hampering very much, in each dispensary mobile jurisdiction are fixed up to a radius of 20 Km from Static dispensary, in the absence driver & vehicle campaigning towards various health benefits and schemes has become a difficult task now a days. Due to stoppage of issuing ID card to non-PF workers, some workers are finding difficulty in availing benefits from LWO. Further in addition to OPD services, the health units are required to upgrade by providing pathological facilities also. Due to retirement of paramedical staff, all dispensaries are functioning with single staff only. With the Skeleton Staff it is finding exceedingly difficult to provide quality services. Due to disturbance of mobile services the linkage between workers and Dispensaries in creating awareness and campaign on various social security schemes of Government of India is not reaching in full shape.”

(Source: data collected from LWO Hyderabad, September 2024)

(a) Health Scheme

‘Health Care’ is one of the most important components of development and is crucial for measuring Human Development. Hence, the provision of healthcare facilities is one of the important components in the Welfare Scheme. The objective of this scheme is to provide health care to more than 50 lakh poor and illiterate Beedi workers and their family members. The health facility is provided through a network of 10 hospitals and 277 dispensaries across the various States (GoI, 2023). In the case of critical illnesses, there is a provision to reimburse the expenditure for specialised treatment taken in Government recognised Hospitals, such as Cancer, Tuberculosis, Heart Diseases, Kidney Transplantation, Hernia, Appendectomy, Ulcer Gynaecological diseases and prostate diseases.

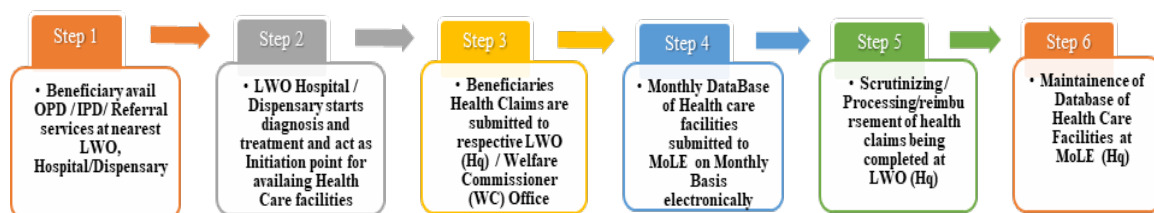
Text Box 4.2: Health Care Facilities for Beedi Workers

Health Scheme	Salient Features
Cancer	Reimbursement of expenditure up to Rs. 7,50,000/- on treatment, medicines and diet charges incurred by workers or their dependents.
Tuberculosis	Reservation of beds in T.B. Hospitals and domiciliary treatment for workers. Subsistence allowance of Rs. 750/- to Rs. 1000/- p.m. is granted as per the advice of the treating physician.
Heart Diseases	Reimbursement of expenditure up to Rs. 1,30,000/- to workers.
Kidney Transplantation	Reimbursement of expenditure up to Rs. 2,00,000/- to workers.
Hernia, Appendectomy, Ulcer Gynaecological diseases and Prostate diseases	Reimbursement of expenditure up to Rs. 30,000/- to workers and their dependents.

(Source: Directorate General Labour Welfare, Ministry of Labour and Employment, Government of India.)

Figure 4.1: Procedure to avail Health Scheme

The procedure to avail health scheme is as follows:



(Source: Directorate General Labour Welfare, Ministry of Labour and Employment, Government of India.)

Table 4.2: Budgetary Allocations and Expenditure under the Health Schemes in Telangana in last five years (in rupees)

Years	Budget Allocation	Expenditure	Number of beneficiaries/ patients treated
2019-20	20,50,0000	17,883,000	184414
2020-21	28,350,000	23,025,000	159809
2021-22	21,050,000	20,486,857	171978
2022-23	26,605,000	12,720,000	156401
2023-24	25,600,000	17,053,321	138477

(Source: Data collected from Labour Welfare Organisation Hyderabad, September 2024)

The analysis of budgetary allocation, expenditure, and the number of beneficiaries treated under the healthcare schemes over the last five years highlighted significant fluctuations. In 2019-20 and 2020-21, there was substantial budgetary allocation at ₹20.5 million and ₹28.35 million, respectively indicating an increased financial support from the government during these years. Both years saw efficient utilisation of funds, with ₹17.88 million spent in 2019-20 and ₹23.03 million in 2020-21 on health scheme (Table 4.2). However, though there has been an increase in budgetary allocation, the expenditure and the number of beneficiaries treated was not in consonance with the increased budget. The discrepancy reported in the expenditure and patient treated may be due to operational or administrative constraints despite relatively stable funding by the government. The consistent reduction in the number of beneficiaries treated from 184,414 in 2019-20 to 138,477 in 2023-24 is a concerning trend that reflects on reduced funding and expenditure that appear to be directly correlated with the extension of health services provided to beedi workers.

Text Box 4.3: Insights from Key Informants Interviews (KIIs)

"The budget allotted for health scheme is utilized to the maximum extent. However, as some of the suppliers could not deliver medicines & bills in time so there is unspent budget in few Years."

(Source: Data collected from LWO Hyderabad, September 2024)

Availability of Hospital for Beedi Workers in Telangana State

With regard to the availability of hospital for beedi workers, it was revealed that, in Telangana state, only one hospital was available for beedi workers under the Beedi workers welfare scheme. The Central Hospital in Nampally Venulawada mandal, situated in the Rajanna Sircilla district, serves as a pivotal healthcare facility for beedi workers.

Table 4.3: Availability of Hospital for Beedi Workers

Name of Hospital in District of Telangana	Number of appointed staffs	Number of beds available
Central Hospital, Nampally Venulawada mandal Rajanna Sircilla district, Free accommodation provided by State Government ³¹	5 staff & Outsourcing staff on need basis	15

(Source: Data collected from Labour Welfare Organisation Hyderabad July, 2024)

Currently, the hospital was equipped with 15 beds and essential amenities such as water, toilets, electricity, and fans, ensuring a basic level of comfort and care for patients. The staffing comprises one senior medical officer and one nursing officer, with additional outsourcing staff employed as needed. This indicates a lower number of permanent personnel than previously reported, reflecting the resource constraints faced by the facility. The dispensary operates from four rooms, one of which is used to store lab equipment and beds that were once in use (see appendix no. 2) Presently, only one room was primarily in use, while accommodating a doctor and a staff nurse (Table 4.3).

Text Box 4.4: Insights from Key Informants Interviews (KIIs)

"The hospital is a part of the state government primary school, that included an Anganwadi centre, and four rooms had been allocated for the hospital. One of these rooms is used to store all the lab equipment and beds. Presently, only one room is primarily in use, which accommodates a doctor and a staff nurse. The hospital is located far from the city, which makes it difficult for many people to access the facilities. However, due to lack of proper infrastructure only outpatient services, mainly medicines for minor health issues (headaches, back pains, colds, and coughs) are provided to beedi workers.

Although a special place has been allotted for the dispensary hospital, construction has not yet begun, and the exact location of this site has not been disclosed. There have been no mobile medical units for the past decade. As a result, workers and their families need to visit the dispensary for their healthcare needs. Unavailability of mobile medical units creates significant difficulties for beedi workers who have to travel long distances to the hospital. Several challenges, including the remote location of the central hospital, lack of proper transportation, insufficient staff (only a doctor and nursing officer), the absence of mobile medical units, unused equipment for blood tests and patient beds are now kept in storage."

(Senior Medical Officer, Central Hospital, Nampally, Sircilla District)

(Source: Primary data collected from Telangana state, July 2024).

The remote location of the hospital poses significant challenges for accessibility, exacerbated by the absence of mobile medical units and proper transportation. The lack of mobile medical units has been a significant issue as there have been no such units for the past decade due to the unavailability of suitable vehicles and drivers. This absence of mobile medical units' forces workers and their families to travel long distances to the dispensary for their healthcare needs. This situation is further complicated by the fact that the dispensary services are limited to OPD treatment, with severe cases being referred to government hospitals due to the inadequate

³¹ The State Government has allotted land of 11.21 acres and a compound wall was constructed. Presently, the Hospital is functioning as dispensary with OPD services in a new school building provided in District administration.



capacity of the dispensary to handle serious medical cases. Additionally, equipment for blood tests and extra beds are kept in storage due to space constraints and the limited operational scope of the dispensary.

In terms of healthcare services, the dispensary provided basic care for health issues common among beedi workers, such as neck pain, lower back pain, leg cramps, blood pressure issues, diabetic issues, joint pain, eye problems, coughs, colds, and skin itches caused by their sedentary work. Free medicines were provided not only to the workers but also to their family members and children over five years of age. Beedi workers visited the dispensary/hospital once a month or once a week, depending on their needs.

On the basis of data received from the labour department on the number of beedi workers who have been benefited from health schemes (covering conditions such as heart disease, kidney ailments, cancer, minor diseases, and subsistence allowances for tuberculosis) it was found that none of the workers had received any benefits in the last five years due to lack of infrastructural support.

This has an impact on the maternity benefits which were earlier provided to beedi workers are no longer available and the workers have access only to the outpatient department (OPD). With regard to availability of medicine, it was found that there was a lack of availability of tuberculosis medications and patients were referred to government hospitals for treatment. Referral services to other hospitals remains a challenge for beedi workers as they have limited access to these hospitals. The number of patients treated over the last five years has significantly declined, indicating that the facilities and services provided by the Labour Welfare Organisation (LWO) hospitals and dispensaries were inadequate. On the contrary, it was observed that beneficiaries appear to be seeking better healthcare services elsewhere, such as in state hospitals, dispensaries or through other central government health schemes like Ayushman Bharat.

The current operational status of the dispensary, the limited staff and resources, and the significant infrastructural and logistical challenges underscore the need for continued support and improvements to adequately meet the healthcare needs of this vulnerable population. Despite the efforts made, the hospital faces several challenges in providing quality health care thereby reflecting on the need for improvement in infrastructure, better staffing and comprehensive healthcare facilities to improve the health services provided to beedi workers and their families.

Text Box 4.5: Insights from Key Informants Interviews (KIIs)

“The dispensaries located at Beedi concentrated areas are the key functionary in implementation of all activities of LWO. The Full strength functioning with vehicle is a main requirement for proper functioning of the health activity. The health units required to upgraded by providing pathological facilities in the absence diagnostic procedures, treatment based on indicators is being provided’ The facilities in health units are required to be upgraded to the present-day demands tie up with ESIC can be explored for rendering pathological services.”

(Source: data collected from LWO Hyderabad, September 2024)

District wise health care challenges

The Kamareddy dispensary faced similar challenges, such as shortage of essential medical staff. Also, there has been a vacancy for the position of Staff Nurse for an extended period, and

the lack of lab technicians restricts the provisioning of comprehensive healthcare services, including diagnostics to the beedi workers. It was found that the dispensary was operating in a private building without adequate infrastructure. The dispensary lacked certain facilities like the availability of medical labs, essential medicines for certain diseases etc that limited the scope of the dispensary for treatment of complex health issues.

Text Box 4.6: Insights from Key Informants Interviews (KIIs), Kamareddy Dispensary

The dispensary currently operates in a private building. In the future, we hope to have a separate government building constructed for the dispensary. There are several challenges, including shortage of Staff, lab technicians and the lack of various medicines. Additionally, there are no mobile medical units.

(Senior Pharmacist, Kamareddy Medical Dispensary)

(Source: Primary data collected from Telangana state, July 2024).

The officials also mentioned that Kamareddy dispensary had no mobile medical units or vehicles to reach out to beedi workers who might face difficulty in accessing the dispensary. This significantly limits the outreach and accessibility of healthcare services for beedi workers who live in remote areas and are not able to visit the dispensary frequently. Due to the lack of lab facilities and specialised medical equipment, many patients requiring comprehensive treatment are referred to government hospitals. This creates an additional burden on both the healthcare providers and the patients, as it leads to delays in treatment for more serious health concerns. Further, there are challenges in procuring sufficient medicines for serious illnesses and diseases like tuberculosis and patients are referred to government hospitals.

Text Box 4.7: Insights from Key Informants Interviews (KIIs), Nizamabad Dispensary

"The main challenge is the absence of a dedicated doctor. Only a pharmacist and a multi-task worker manage the dispensary. The visiting doctor comes once a week. There is also a shortage of medicines, making it difficult to address various health problems effectively. Despite that, approximately 22,000 to 30,000 workers have benefited from the health schemes in the past five years."

(Visiting Doctor, Nizamabad Dispensary)

(Source: Primary data collected from Telangana state, July 2024).

Similarly, in the Nizamabad dispensary there has been an absence of a full-time doctor and the dispensary is being managed by a pharmacist and a multi-task worker. The doctor visits once a week which restricts the capacity of the dispensary to offer consistent and timely medical care.

Text Box 4.8: Insights from Key Informants Interviews (KIIs), Nirmal Dispensary

"There are no mobile medical units currently in operation. Although there is a vehicle available, it has been out of use for 20 years due to being under repair. Only OPD treatment is currently provided."

(General Duty Medical Officer (GDMO), Nirmal Dispensary)

(Source: Primary data collected from Telangana state, July 2024).

The shortage of medicines in Nizamabad has mirrored the issues in Kamareddy, making it difficult to effectively treat common ailments among beedi workers such as diabetes, joint pain, back pain, and vitamin deficiencies. The lack of mobile medical units in Nizamabad,



Kamareddy and Nirmal district also highlighted the ineffective implementation of healthcare schemes intended for beedi workers.

Text Box 4.9: Insights from Key Informants Interviews (KIIs)

“In view of the introduction of GST, and further repeal of Beedi workers welfare cess of Act 1976, there is no data available with LWO’s regarding collection of any tax in the form of GST. For justified projection of any initiatives towards recruitment, purchase of vehicles, starting hospital services in full-fledged form enhancement of facilities in existing dispensaries requires positive Revenue Balances. The infrastructure and manpower requirements are affected due to non-reflection of LWO revenue. Even if some tax levied in the form of GST, the actual figures of revenue are not available with LWO’S. In the absence surplus revenue, the recruitment of paramedical staff, the proposal of new vehicles for dispensaries, the full-fledged functioning of Hospital, upgradation of facilities for dispensaries are not materializing.”

(Source: data collected from LWO Hyderabad, September 2024)

(b) Housing Scheme

Housing Scheme for beedi workers was implemented for the construction of a house. The scheme was revised in the year 2016. Revised Integrated Housing Scheme (RIHS)³² - 2016 was introduced w.e.f. 22/03/2016 to provide subsidy of Rs. 1,50,000/- (per beneficiary) in three (03) instalments at 25:60:15 ratio i.e., Rs. 37,500/-, Rs. 90,000/- and Rs. 22,500/- respectively to Beedi Workers for construction of pucca houses. The scheme has been converged with Pradhan Mantri Awas Yojana (PMAY) and all Welfare Commissioners were directed on 25/09/2018 not to issue new sanction of 1st installment under RIHS and send the pending applications to the concerned Blocks or Urban Local Bodies (ULBs) for sanction under PMAY.

Budgetary allocation and Expenditure of Housing scheme for Beedi workers: Insights from the field

The analysis of budgetary allocation and expenditure for housing schemes for beedi workers in Telangana over the last five years shows significant variability. During 2019-20 and 2020-21, there were substantial budgetary allocations i.e. ₹81,22,500 and ₹1,45,12,500, respectively – both fully utilised, indicating efficient implementation during these years. However, from 2021-22 onwards, the budgetary allocation and expenditures have declined sharply (Table 4.4.) This sharp decline reflects on a drastic reduction in financial support for the housing scheme thereby raising concern about the sustainability of the scheme and the prioritisation of housing needs of beedi workers.

The reduction in budget allocation correlates with the significant decline in the number of houses allocated and completed. In 2019-20, 91 houses were allocated and 232 were completed, while in 2020-21, 255 houses were allocated. However, by 2022-23, only 4 houses were allocated, and this further decreased to only 2 houses in 2023-24. The decreasing budget reflects on significant administrative challenges related to allocation and expenditure and raises critical concerns about the future of housing provisions for beedi workers (Table 4.4).

³² GoI, Government of India (2019, December 11). Revised Integrated Housing Scheme for Beedi and Non-Beedi Workers. Retrieved from: <https://pib.gov.in/PressReleasePage.aspx?PRID=1593412>

Table 4.4: Budget Allocations and Expenditure under the Housing Schemes in Last Five Years

Years	Budget Allocation	Expenditure
2019-20	81,22,500	81,22,500
2020-21	1,45,12,500	1,45,12,500
2021-22	50,25,000	50,25,000
2022-23	90,000	90,000
2023-24	45,000	45,000

Source: Data collected from Labour Welfare Organisation, Hyderabad (July, 2024)

In the existing Housing Scheme of the government, 245 houses were sanctioned under the Revised Integrated Housing Scheme (RIHS) 2016 while 232 have been completed, indicating delays in implementation. Additionally, the initiation of subsidy recovery from 13 beneficiaries' points to potential inefficiencies in fund distribution or use. Despite the merger of the RIHS into the Pradhan Mantri Awas Yojana (PMAY), there is no available data showing that beedi workers are receiving their housing entitlements under PMAY. This lack of information further complicates the assessment of whether beedi workers are benefiting from government housing schemes as intended or there has been underreporting on the accessibility of the scheme (Table 4.5).

Table 4.5: Number of Houses allocated in last five Years

Years	Number of Houses allocated (I, II, III instalments)	Number of Houses Completed
2019-20	91	232 ³³
2020-21	255	
2021-22	96	
2022-23	4	
2023-24	2	

Source: Data collected from Labour Welfare Organisation, Hyderabad (July, 2024)

The decline in housing support for beedi workers highlights significant gaps in policy execution and raises questions about the efficacy of welfare schemes in addressing the housing needs of vulnerable workers.

Text Box 4.10: Insights from Key Informants Interviews (KIIs)

“The RIHS 2016 launched by ministry has been covered with PMJAY (u/R) respectively. So far Government of Telangana has not implemented PMJAY (R) in Telangana. As soon the scheme is implemented in Telangana the beneficiary will be available to Beedi workers also.”

(Source: Data collected from Labour Welfare Organisation Hyderabad, September 2024)

(c) Financial Assistance for Education

One of the most important schemes of the Beedi Workers Welfare Fund is the Financial Assistance for Education to Beedi workers' children. Under this scheme, the children of beedi workers who are attending schools, colleges, and universities are provided scholarships in

³³ 245 houses sanctioned under RIHS 2016 and 232 houses completed recovery of subsidy initiated in respect of 13 beneficiaries (LWO Hyderabad Jul^y, 2024).

various categories ranging from Rs.1000/- to Rs.25000/- for both boys and girls. The benefits under the scheme are being transferred through Direct Benefit Transfer (DBT) system and the applications under this scheme are invited and processed through the National Scholarship Portal³⁴ (NSP). Every year, more than one lakh applications are received in the NSP portal for the above-mentioned scholarship.

Text Box 4.11: Financial Assistance for Children of Beedi Workers

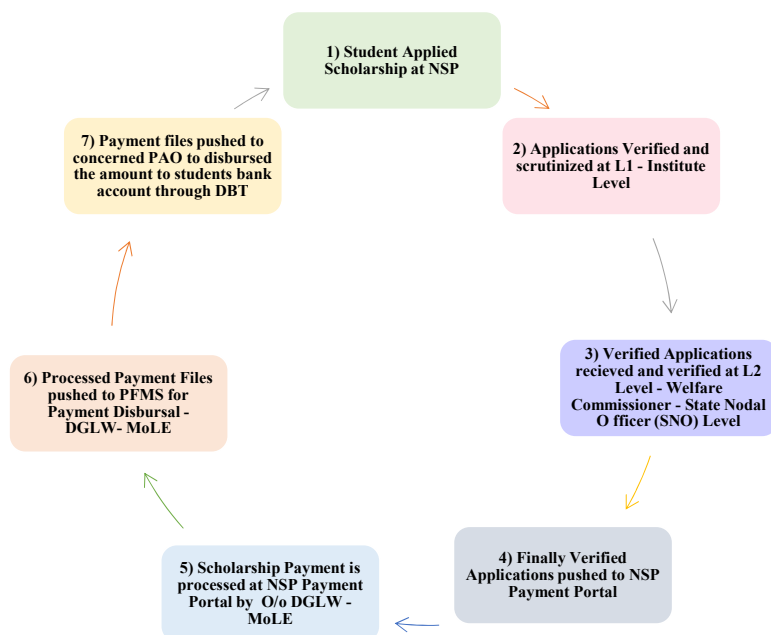
Educational Standards	Scholarship Amount in Rs. Per annum per student w.e.f. 2022-23
	Both girls and boys
I to IV (for purchase of dress/books etc.)	1000
V to VIII	1500
IX to X	2000
Class XI & XII	3000
ITI	6000
Polytechnic	6000
Degree Course (Including B.Sc.-Agri)	6000
Professional Courses (BE/MBBS/MBA)	25000

Note: *Students promoted to the next class are eligible to apply for the scholarship.

(Source: Directorate General Labour Welfare, Ministry of Labour and Employment, Government of India.)

Figure 4.2: Procedure to apply Financial Assistance Through National Scholarship Portal (NSP)

The steps involved in NSP are as follows:



(Source: Directorate General Labour Welfare, Ministry of Labour and Employment, Government of India.)

³⁴ Retrieved From: <https://scholarships.gov.in/>

The budgetary allocation towards financial assistance for education has significantly increased over the five-year period. During 2019-20, ₹1,21,42,910 was allocated which later increased to ₹5,38,86,000 in 2023-24. This upward trend in allocation reflects the growing emphasis of the government on supporting education of the children of beedi workers. (Table 4.6).

However, the data shows a gap in 2020-21 where there was no budgetary allocated for providing educational assistance. This lapse may be attributed to administrative delays or disruptions potentially linked to the COVID-19 pandemic. Despite this gap, the programme appears to have regained momentum in subsequent years, with over ₹5 crore allocated in the most recent year.

With regard to the number of beneficiaries receiving educational assistance, some fluctuations were evident particularly during 2019-20, 10,985 children received financial aid, but in 2020-21, no beneficiaries were recorded, likely due to the absence of a budgetary allocation during this period.

Text Box 4.12 Challenges experienced in the implementation of Financial Assistance for Education - Insights from Key Informants Interviews (KIIs)

"As per the instructions of ministry towards issue of district level Task Force Committee has not materialized at ground level and this has halted the issue of ID cards to non-PF workers by LWO's ID cards, non- PF workers unable apply to scholarship schemes. The income limit under the schemes is fixed at beneficiary applying scholarship with annual income found not eligible under the scheme. Rs. 10,000/- p.m, as many beyond 1,20,000- and are found not eligible under the scheme."

(Source: Data collected from Labour Welfare Organisation Hyderabad, September 2024)

Table 4.6: Budget Allocations and Expenditure under the Financial Assistance for Education

Years	Budget Allocation	Expenditure
2019-20	1,21,42,910	1,21,42,910
2020-21	0	0
2021-22	2,52,85,000	2,52,85,000
2022-23	3,04,81,020	3,04,81,020
2023-24	5,38,86,000	5,38,86,000

Source: Data collected from Labour Welfare Organisation, Hyderabad (July, 2024)

However, there was an increase in the number of children receiving the assistance for education during 2021-22 (17,240 beneficiaries) to 18,451 in 2022-23, before decreasing to 14,835 in 2023-24. While these figures show a substantial increase in educational support compared to earlier years, the recent decline in beneficiaries, despite the increased budget, raises questions about the efficiency and outreach of the programme (Table 4.7).

Text Box 4.13: Success story of Children of Beedi Worker in Telangana

"Recently, a Beedi worker's son from Karimnagar, Telangana, Shri Nandala Sai Kiran, has cleared UPSC IAS 2023 and secured AIR 27. This organization has already felicitated the said Officer."

(Source: Data collected from Labour Welfare Organisation Hyderabad, September 2024)

Table 4.7: Number of beneficiaries availed the Financial Assistance for Education in last five Years

Years	Number of Children got benefitted
2019-20	10985
2020-21	0
2021-22	17240
2022-23	18451
2023-24	14835

Remarks:- Gender wise data not available in the payment portal.

(Source: Data collected from Labour Welfare Organisation, Hyderabad, July, 2024)

Text Box 4.14: Insights from Key Informants Interviews (KIIs), LWO Hyderabad

"We run a scholarship scheme for Beedi workers' children, from class 1 to postgraduate levels, with payments made through the National Scholarship Portal and Direct Benefit Transfer. Last year (2022-23), 18451 beneficiaries received payments amounting to ₹3.5 crores. However, the income limit for eligibility is ₹1,20,000, which is lower than other ministry schemes, making it difficult for many to apply."

(Welfare administrator, Labour Welfare Organization, Hyderabad)

(Source: Data collected from Labour Welfare Organisation Hyderabad, April 2024)

4.3 Skill Development Programme

The Ministry of Labour and Employment(MoLE) in collaboration with National Skill Development Corporation(NSDC) and Ministry of Skill Development and Entrepreneurship (MoSDE) have been providing Skill Development training to the Beedi Workers and their dependents to engage them in alternative jobs in all 17 Labour Welfare Regions. Total of 7262 beneficiaries have availed the Skill Development Training till December 2021 out of which 2746 beneficiaries have been provided placement in alternate jobs. Further, a joint committee of the officials of MoLE, MoSDE and NSDC has also formulated the 'Healthy Option' special project for promotion of alternative occupations through skill development of Beedi Workers and their dependents under Pradhan Mantri Kaushal Vikas Yojana (PMKVY) (2016-2020). 'Healthy Option' special project has been forwarded to all the Welfare Commissioners to provide inputs for incorporation in the project.

The salient features of the programme include the following:

- Payment of Stipend to the registered Beedi worker to compensate him for loss of wages suffered while the worker attended the training.
- Travel expenses of the trainee, whether the worker or his/her dependent to cover the cost of travel from the place of residence to the Vocational Training Providers (VTP) and back. Support for Lodging & boarding expenses in case the worker or his dependent is required to stay away from his residence for attending the training.
- Training to beedi rollers and their dependents to be provided in VTPs approved under the Skill Development Programme being implemented by the Central/ State Govt.
- Certification under the Skill Development Programme being implemented by the Central/ State Govt. having national validity for the skill certified there under.

- Placement and tracking of trainees to ensure that they sustain alternative employment after the training. Payment of final installment of stipend made conditional upon successful placement and tracking.
- All payments are to be made directly to the trainees through online transactions, i.e. Direct Benefit Transfer (DBT), to ensure the financial inclusion of the beedi rollers.

Number of skill development programmes organised for beedi workers and their dependents

The data on skill development programmes presents a concerning trend. From 2019 to 2023, no formal records of beedi workers completing skill training have been reported in Telangana, reflecting a lack of participation in these programmes (Table 4.8). This is despite efforts by the Labour Welfare Organisation to encourage workers and their dependents to join training initiatives through schemes such as the Pradhan Mantri Kaushal Vikas Yojana (PMKVY) and the Deen Dayal Upadhyaya Grameen Kaushalya Yojana (DDU-GKY).

The low participation in skill training, especially among women beedi workers, can be attributed to several factors, including the workers' social status, family obligations, age, and the geographical distance to training centres. Many beedi workers are Gharkhata workers (home-based), who prefer to remain in familiar environments due to their domestic responsibilities. Additionally, the reluctance of dependents to accept employment outside their local areas further limits the success of skill development efforts. The women Beedi Workers who are habituated to work at home as Gharkhata workers are not inclined to avail these skill training due to various factors of age, social status, family conditions, distance located skill centres, etc.

Table 4.8: Skill Development Programmes for Beedi Workers in Telangana

Years	Skill Development programmes
2019-2023	This region has encouraged Beedi workers and their dependents to join various skill development programmes organised by PMKVY, DDUKVY, Banks and other institutions.

(Source: Data collected from Labour Welfare Organisation, Hyderabad July, 2024)

Text Box 4.15: Insights from Key Informants Interviews (KIIs), LWO Hyderabad

"In recent years, our skill development activities have declined. Many Beedi workers, particularly women, prefer working from home and are not keen on travelling to training centres. While some dependents have received training, finding employment for them remains a challenge. Workers' mobility is limited due to family responsibilities, and there are few local job opportunities available after training."

(Welfare administrator, Labour Welfare Organization, Hyderabad)

(Source: Primary data collected from Telangana state, July 2024).

While the region reported that 300 dependents had joined training, the lack of placements for these individuals highlights the challenges in creating sustainable employment opportunities. This gap suggests that even when training is provided, it does not necessarily translate into employment, underscoring the need for more localised and flexible skill training and placement options to better cater to the needs of beedi workers and their families.



Text Box 4.16 Challenges experienced in the implementation of skill development programmes for Beedi workers in Telangana- Insights from Key Informants Interviews (KIIs)

“Beedi workers are not inclined to avail skill facilities at distance places due to factors like education, family issues, social & other matters etc. Skill development programmes can be successful if skill desired field suiting to local demands is met locally.”

(Source: Data collected from Labour Welfare Organisation Hyderabad, September 2024)

The above discussion has highlighted several challenges in the implementation of welfare schemes for beedi workers in Telangana. While the housing scheme initially saw high levels of budget allocation and utilisation, it has faced significant setbacks in recent years, reflecting on both reduced funding and lower housing allocations. The education assistance programme, although showing a positive trend in budgetary support, also faces challenges in consistent beneficiary outreach. The skill development programmes, though promoted, suffer from low participation rates and minimal impact in terms of employment outcomes.

Text Box 4.17: Skill Development Centres in Telangana

- Telangana State Women’s Cooperative Development Organization, Durgabai Mahila Shisu Vikasa Kendram³⁵, and Rainbow Computer Institute³⁶ is located 20 km from Rampur village and 28 km from Gundampally village. Previously, courses were offered in tailoring, and basic computer training, but none of these courses were currently available. At present, they are offering an ANM course to Scheduled castes students.
- Free training and placement assistance under Pradhan Mantri Kaushal Vikas Yojana (PMKVY) and National Skill Development Corporation (NSDC), known as Pradhan Mantri Kaushal Kendra³⁷ training centre situated in Nizamabad, This centre is 15 kilometre distance from the Borgaon village and 13 km from Mantraipally village. They provide various technical courses in Nizamabad on Customer Relationship Management (CRM) Domestic Non Voice, Telecom Technician (IOT Device/System), Application Developer (Mob/Web), Field Technician- Computing & Peripherals.

(Source: Data collected from Telangana state, January-May 2024).

Overall, these findings underscore the need for more robust outreach, better targeting of beneficiaries, and flexible, localised programme designs that consider the specific socio-economic conditions of beedi workers. Without addressing these implementation gaps, the potential benefits of these welfare schemes will continue to be underutilised.

Text Box 4.18 An Initiative by the Directorate General of Labour Welfare (DGLW)

The Directorate General of Labour Welfare (DGLW), under the Ministry of Labour and Employment, constituted a committee on 30th April 2024 to formulate comprehensive standards on Occupational Safety and Health (OSH) for Beedi and Cigar workers, which aims to deliberate on improving workplace ventilation to mitigate the adverse effects of tobacco dust and fumes, mandating the use of masks and gloves to minimise occupational health risks, ensuring ergonomic seating arrangements to reduce physical strain, and distributing illustrated pictorial manuals to enhance awareness and compliance with safety protocols.

(Source: Directorate General Labour Welfare, Ministry of Labour and Employment, Government of India.)

³⁵ Government of Telangana. (2024). *Durgabai Mahila Shisu Vikasa Kendram*. Nizamabad District. Retrieved from: [https://nizamabad.telangana.gov.in/durgabai-mahila-shisu-vikasa-kendram​::contentReference\[oaicite:0\]{index=0}](https://nizamabad.telangana.gov.in/durgabai-mahila-shisu-vikasa-kendram​::contentReference[oaicite:0]{index=0})

³⁶ <http://www.manabadi.co.in/T/881/RAINBOW>

³⁷ <https://synchroserve.com/>



4.4 Legislative Provisions and Prominent Judgements

The Beedi and Cigar Workers (Conditions of Employment) Act, 1966

The provisions of the Factories Act, 1948, were intended to protect workers in the beedi industries. However, employers circumvented these regulations by breaking larger units into smaller ones to avoid falling under the Act's jurisdiction. Given that much of the work in this industry is performed through contractors who distribute tasks to private homes, the employer-employee relationship defined in the Factories Act could not be established, rendering its welfare measures largely ineffective. Consequently, the Beedi and Cigar Workers (Conditions of Employment) Act, 1966, was enacted to regulate the working conditions of workers in beedi and cigar establishments and to protect them from exploitation. This Act includes various welfare provisions such as overtime wages, working hours, weekly rest, first aid, paid leave, rest intervals, cleanliness, drinking water, toilet facilities, proper ventilation, canteens, and crèches for children under six years old. These crèches must be well-lit, ventilated, and maintained in a sanitary condition, supervised by women trained in childcare.

Under this Act, anyone intending to designate a premise as an industrial premise must obtain written permission from the competent authority, ensuring the suitability of the premise for manufacturing beedi or cigars. The Act also prohibits the employment of children in any industrial premises and restricts the working hours for women and young persons to between 6 am and 7 pm. Although the Act's definition of "employee" includes those who are provided with raw materials to produce beedis or cigars at home, in practice, it predominantly applies to factory-based workers, as many workers are not registered.

Furthermore, the Act permits the wetting or cutting of beedi or tobacco leaves outside the industrial premises, provided an entry is made in the prescribed form. However, the Act does not apply to self-employed individuals working in private dwelling houses or to those who manufacture with the assistance of family members, provided they are not employees of an employer to whom the Act applies. This loophole has led manufacturers to shift from factory-based to home-based production to evade regulatory norms. The act is now subsumed under the OSH Code 2020 .

However, it is an important piece of legislation and has been instrumental in protecting the rights of the beedi workers working in industrial settings. Some of the prominent court judgements in favour of beedi workers were pronounced due to the existence of the available legal provisions including The Beedi and Cigar Workers (Conditions of Employment) Act, 1966, The Industrial Disputes Act, 1947, The Employees Provident Fund and Miscellaneous Provisions Act, 1952 (EPF Act) etc.

Some Prominent Court Judgements

- (a) **Janab S. Ahmed Hussain And Sons, three vs Secretary United Beedi Workers' Union³⁸, Air 1959 Mad 221**

Brief facts of the case

The petitioner herein was Janab S. Ahmed Hussain And Sons, a beedi manufacturing company. The respondent was the Secretary of the United Beedi Workers' Union, representing the

³⁸ Janab S. Ahmed Hussain and Sons v. Secretary United Beedi Workers' Union, (1958). Madras High Court. <https://indiankanoon.org/doc/1430883/>



interests of beedi workers. The case concerned beedi workers who worked from their homes. These workers would receive raw materials from the company and roll beedis at home. After completing the beedis, workers would return the finished products to the company. The company provided raw materials such as tobacco, tendu leaves, and thread to the workers. Workers were typically given targets or quotas to meet. Payment was usually made based on the number of beedis rolled.

Key issues

1. Whether beedi workers working from home are considered “employees” under labour laws?
2. The applicability of the Industrial Disputes Act to home-based beedi workers.

Judgment

The High Court ruled in favor of the beedi workers, holding that Home-based beedi workers can be considered “employees” under labor laws. Moreover, The Industrial Disputes Act, 1947 is applicable to these workers. The court recognized the employer-employee relationship between the company and home-based workers. It also emphasized that the mode of work (at home vs. in a factory) does not negate the employment relationship. The judgment acknowledged the need to protect the rights of workers in the informal sector. This case was an important precedent in Indian labour law, extending labour protections to home-based workers in the beedi industry. It paved the way for recognizing rights of workers in similar informal sectors.

(c) Gujarat Bidhi Karkhana Owners Vs. Union Of India, (1971) GLR690³⁹

Brief facts of the case

This is a landmark judgement of the late 90's in favour of the beedi and cigar workers to say the least. The case addressed the contentious issue of labor rights in India's beedi (hand-rolled cigarette) industry. Beedi manufacturing is a significant cottage industry in India, employing millions of workers, many of whom work from home. There was no dispute that all these employers are employing workers for the manufacture of beedi either on their premises or they employ home-workers. The existing employment in the present cases is not through contract labour but those provisions are challenged as the Act covers within its scope even the contract labour which would be getting the same conditions of employment as prescribed by the Act. The case also set a precedent for extending labour laws to other informal sectors with similar working conditions.

Legal issues

1. The primary challenge was against the constitutional validity of the Beedi and Cigar Workers (Conditions of Employment) Act, 1966.
2. The petitioners (beedi manufacturers) argued that the Act infringed upon their fundamental right to conduct business under Article 19(1)(g) of the Indian Constitution.
3. The case raised questions about the definition of “employee” and whether home-based workers could be considered employees under the Act.

³⁹ Gujarat Beedi Karkhana Owners' Association v. Union of India, (1970). Supreme Court of India. <https://indiankanoon.org/doc/1978860/>



4. It also addressed the broader issue of state intervention in labour practices, particularly in informal sectors.

Judgement

The Supreme Court gave a landmark judgement wherein it upheld the Act's constitutionality, stating that it was a reasonable restriction on the right to conduct business, aimed at protecting worker welfare. The Court also expanded the definition of "employee" to include home-based workers. This was crucial as it brought a large number of previously unprotected workers under the Act's purview. Moreover, The Court dismissed the claim that the Act would lead to the industry's closure. It emphasized that business interests cannot override the basic human rights and dignity of workers. The judgment also highlighted the exploitative conditions in the beedi industry, particularly affecting women and children. It stressed the state's duty to protect vulnerable workers. At the end, The Court issued directives for the effective implementation of the Act, including the provision of identity cards to workers and maintenance of employment records. This landmark ruling ensured that home-based beedi workers were entitled to benefits like minimum wages, maternity benefits, and provident fund.

- (c) **M/S S.K. Nasiruddin Beedi Merchant Vs Central Provident Fund Commissioner⁴⁰, AIR 2001 Supreme Court 850**

Brief facts of the case

The appellant in this case is a manufacturer of beedis (hand-rolled cigarettes) in India. The Employees Provident Fund and Miscellaneous Provisions Act, 1952 (EPF Act) was initially extended to cover the beedi industry, including home workers engaged through contractors. In January 1977, the appellant received a formal notice about coverage under the Act, effective from July 1976. The appellant challenged the applicability of the Act to home workers engaged through contractors in various legal proceedings. Meanwhile, the Provident Fund Commissioner determined the amount due from the appellant (Rs. 66,84,930.50) for the period July 1977 to August 1986 and also, Issued another demand for Rs. 28,72,383.85 on December 18, 1989. The appellant challenged these demands in two more writ petitions. The Hon'ble Supreme Court disposed of the SLP on August 22, 1989, directing that the issues be decided in the pending High Court proceedings. This complex series of legal proceedings spanned several years and involved multiple courts, highlighting the contentious nature of extending provident fund coverage to home workers in the beedi industry.

Key issues

1. Applicability of Employees Provident Fund Act to home workers engaged through contractors in beedi manufacturing.
2. Employer's liability for retrospective payment of employees' contribution to provident fund.

Judgement

The Hon'ble Supreme court held that the Act is applicable to home workers engaged through contractors in beedi manufacturing, as previously established in *Mangalore Ganesh Beedi Works v. Union of India* and *P.M. Patel & Sons v. Union of India*. Moreover, it was also held that the

⁴⁰ M/S S.K. Nasiruddin Beedi Merchant Limited v. Central Provident Fund Commissioner, (2001). Supreme Court of India. <https://indiankanoon.org/doc/1178541/>



Employer is liable for retrospective payment of both employer and employee. District Exhibitors Association Muzaffarnagar case distinguished, as it dealt with retrospective application of the Scheme. Employer's argument about inability to deduct from wages rejected, as they had opportunity to do so from 1985 onward. The appeal was dismissed and the decision of the High court was upheld by the Supreme Court.

(d) Manager, Vidarbha Tobacco Product Vs Fulwantabai Ishwardas Meshram (Smt.)⁴¹, 1995 (4) BOM CR 565

Brief facts of the case

Herein, Multiple beedi workers filed appeals under Section 31(2) of the Beedi and Cigar Workers Act, 1966, challenging their termination. Employers and contractors denied employing these workers. Hence, The Assistant Commissioner of Labour ruled in favour of the workers in these appeals. Employers then filed writ petitions challenging the constitutional validity of certain provisions of the Act. What is to be noted here is that Smt. Fulwantabai claimed she was terminated after a labour officer's inquiry. Tarachand Codaru Kalsarpe challenged his termination as a harawala (beedi basket carrier) after 15 years of service. Smt. Sushilabai Sukhdas Gajbhiye claimed she had been rolling beedis using her ill husband's wage card and was terminated after his death. Employers raised issues about the timeliness and format of appeals filed by workers. The court examined the validity of the Assistant Commissioner's decisions in light of evidence presented.

Key issues

1. Constitutional validity of certain provisions of the Beedi and Cigar Workers (Conditions of Employment) Act, 1966
2. Termination of beedi workers' employment.
3. Applicability of the Act to home-based workers and those employed through contractors

Judgement

The court appears to have upheld the decisions of the Assistant Commissioner of Labour in favour of the workers, finding no reason to interfere with the orders passed. This case highlighted the ongoing disputes in the beedi industry regarding employment status, particularly for home-based workers and those engaged through contractors. It also underscores the importance of the Beedi and Cigar Workers Act in protecting workers' rights in this sector.

4.5 Discussion

This chapter has critically examined the legislative provisions and welfare schemes for beedi workers in Telangana, highlighting challenges in awareness, implementation, and effectiveness. The findings reveal a significant gap in the dissemination of information about welfare programmes, with only 3.3 percent of beedi workers aware of health-related schemes, 12.3 percent aware of housing schemes, and 3.5 percent aware of educational assistance. These low levels of awareness, despite the hazardous nature of beedi work, have led to the underutilisation of vital services, exacerbating the vulnerability of workers.

⁴¹ Manager, Vidarbha Tobacco Product (P) Ltd. v. Fulwantabai Ishwardas Meshram, (1995). Bombay High Court. <https://indiankanoon.org/doc/1978860/>

This limited awareness in Telangana is consistent with national trends. Studies conducted in West Bengal (Das, Moitra & Bhor, 2013) and Mumbai (Chowdhary, Kowli & Sabale, 2012) similarly found that most beedi workers were unaware of the welfare schemes intended for their benefit. These systemic issues reflect broader failures in communication and outreach programmes thereby hindering the impact of these government programmes.

The health infrastructure for beedi workers is particularly inadequate. The Central Hospital in Nampally Venulawada Mandal, a key facility for this population, suffers from operational constraints, including understaffing, limited resources, and poor accessibility due to the absence of mobile medical units. Although funds are allocated for healthcare, the declining number of beneficiaries treated over recent years suggests inefficiencies in service delivery. The suspension of critical provisions, such as financial aid for serious illnesses and maternity benefits, further highlights the diminishing effectiveness of health schemes for beedi workers.

The housing scheme, merged with the Pradhan Mantri Awas Yojana (PMAY) in 2016, has also faced considerable delays. Despite initial success in 2019-20 and 2020-21, when a substantial number of houses were allocated and completed, the programme has since stagnated. The drastic reduction in allocations and completions in 2022-23 and 2023-24 points to administrative and budgetary challenges. The lack of recorded data on beedi workers' inclusion under the PMAY further complicates the assessment of housing entitlements for this group. These trends raise concerns about the sustainability and effectiveness of housing schemes for beedi workers in Telangana.

The financial assistance for education, despite increasing budget allocations in recent years, has been hindered by low awareness, as only 3.5 percent of beedi workers were informed of the scheme. Although significant funding is available through the Direct Benefit Transfer (DBT) system, the inconsistent utilisation of educational support raises concerns about the programme's outreach and effectiveness. The gap in budgetary allocation in 2020-21 further signals administrative issues that need to be addressed to ensure continuous support for beedi workers' children.

The legislative framework, specifically the Beedi and Cigar Workers (Conditions of Employment) Act, 1966, provides critical protections for factory-based workers but fails to fully account for the needs of home-based beedi workers, who constitute a large portion of the workforce. Although the Janab S. Ahmed Hussain & Sons v. United Beedi Workers' Union case extended labour protections to home-based workers, enforcement remains weak, leaving many workers outside the purview of formal labour protections.

In conclusion, the welfare schemes and legislative provisions for beedi workers in Telangana suffer from low awareness, inconsistent implementation, and infrastructural deficiencies. Despite the efforts of the government, a clear disconnect between policy and practice remains, particularly in healthcare and housing schemes. To address these gaps, there is an urgent need for enhanced outreach, better service delivery, and more comprehensive legislative protections, particularly for home-based workers. Strengthening these areas is essential to ensure that beedi workers in Telangana can fully benefit from the welfare provisions designed to protect their rights and well-being.

Chapter 5 : Alternative Livelihood Opportunities

5.1 Introduction

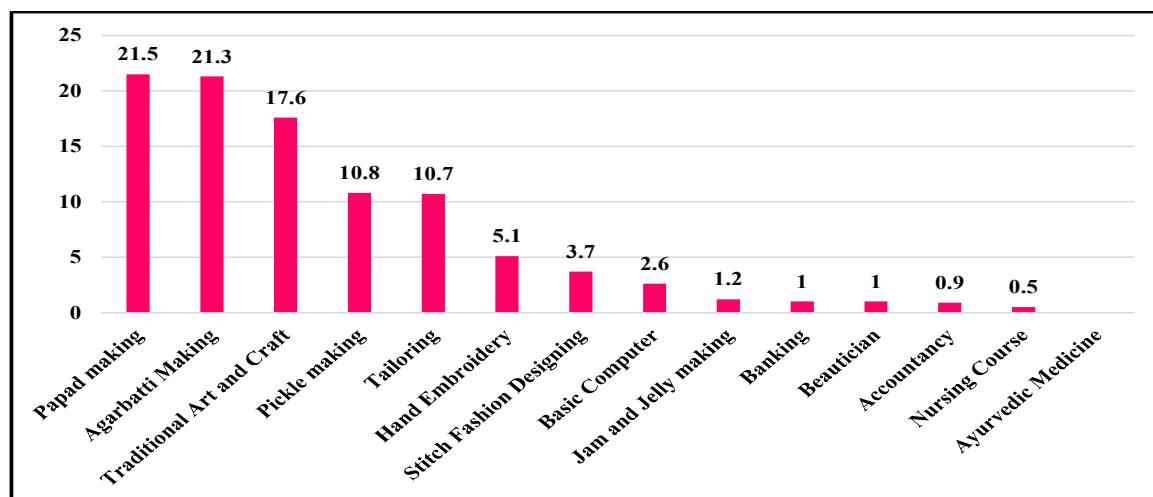
Beedi work being a labour-intensive and often exploitative industry, there is a pressing need to provide workers with sustainable and viable employment alternatives. As per the Government of India report (2019), out of 5,586,623 registered beedi workers in India, only 3620 beedi workers were trained under the skill development programme and 461 beedi workers shifted to alternate livelihoods⁴². The shifting of beedi workers from beedi rolling to alternative jobs has remained a challenge and there is a need for appropriate intervention of the government to provide economically sustainable alternatives and continued support till they get established in the new job (Kumar et al., 2021). In this context, the present chapter explores the alternative livelihood opportunities available to beedi workers, focusing on their preferences for different types of skills and vocations.

5.2 Alternative livelihood opportunities

The analysis of alternative livelihood opportunities among beedi workers revealed a strong inclination towards traditional and craft-based occupations, as highlighted by the workers themselves. The most preferred alternative livelihood that emerged from the primary survey was papad making (21.5 percent) which was followed by Agarbatti making with 21.3 percent of the workers expressing their interest in the same. These choices indicated a clear preference for home-based work that was aligned to their existing skills and prevalence of socio-cultural norms that institutionalise home based employment for women.

The other preferences on alternative livelihood were traditional Arts and Crafts (17.6 percent), pickle making (10.8 percent), tailoring (10.7 percent), hand embroidery (5.1 percent) etc thereby reflecting on craft-based work emerging as a preferred choice for women. However, some of the beedi workers were interested in technical courses like learning basic computer skills, banking, accountancy, nursing etc (Fig 5.1). The insights derived from the field through Focussed group discussions with the beedi workers provided a more nuanced understanding about their preferences and choices for alternative livelihood. There is no denying the fact that women's preferences and choices for employment are often shaped by socio-cultural norms and the burden of household responsibilities.

Figure 5.1: Alternative Livelihood Opportunities Suggested by Beedi Workers



(Source: Primary data collected from Telangana state, January-May 2024)

⁴² details to see <https://pib.gov.in/Pressreleaseshare.aspx?PRID=1579735>

Text Box 5.1: Insights from FGDs

“I am interested in learning tailoring, agarbatti making and prefer to stay close to home due to my young children. If a factory or other employment opportunities were available in our village, I would gladly take them up.”

(28 years old Beedi Worker, FGD Nirmal District)

(Source: Primary data collected from Telangana state, January-May 2024)

The above narrative derived from interaction with beedi workers reflects on the challenges experienced by women with regard to household domestic and caring responsibilities that compel them to choose employment within or near their houses. Further, the beedi workers were interested in alternative livelihood opportunities based on their traditional skills that were imbibed from their families.

Text Box 5.2: Insights from Key Informants Interviews (KIIs)

“The State & Central Govt. are working in the Anti-Tobacco Campaign and alternative livelihood opportunities. But there has been lack of clarity on the available alternate livelihood opportunities under different schemes of the government.

Some experiments were done in this direction by the government but there is a need for greater intervention by the Ministry of Skill Development and Entrepreneurship and Ministry of Labour & Employment in this direction.

My recommendation is that the Government needs to first provide alternative employment and then ban Beedi making.”

(Member, Bhartiya Mazdoor Sangh)

5.3 Discussion

The analysis of alternative livelihood opportunities among beedi workers demonstrates a clear preference for traditional, craft-based occupations, such as papad making, agarbatti production, and traditional arts and crafts. This preference was identified in the study, where it was observed that modern skills like computer training and banking were less favoured. Some of the studies in this area by the Voluntary Health Association of India highlighted that many workers would prefer to shift towards professions such as tailoring and food processing, contingent on access to training and financial support (VHAI, 2010). As discussed above 10.7 percent of beedi workers had preferred tailoring to be an alternative livelihood option for them.

Furthermore, the preference for food production-related skills, such as papad making and pickle production as evident from the primary survey was also reported in another study that revealed that high levels of illiteracy and low skill levels among beedi workers acted as barriers for transitioning to more modern, technology-driven professions ((Jones & Efroymson, 2011). Also, the Self Employed Women’s Association in West Bengal (SEWA) had introduced training programmes in computer skills and tailoring for the children of beedi workers in West Bengal and other regions. These programmes were extended to the children of beedi workers. The significant interest in traditional trades like tailoring suggests that targeted training programmes could facilitate the workers’ transition to more stable livelihoods (SEWA, 2012). Some other studies by the ILO on women beedi rollers in Mangalore and Sagar revealed that there was a significant interest in traditional livelihood like food processing, papad making, pickle production, poultry farming, tailoring etc (ILO, 2003)

Despite these preferences, it is evident that the beedi industry continues to exploit workers due to their lack of viable alternatives. The analysis indicates a significant skills gap between the workers’ existing



abilities and the demands of modern economic sectors, which resonates with the conclusions drawn by earlier studies. This suggests that future interventions aimed at transitioning beedi workers into alternative livelihoods need to focus on enhancing traditional skills while introducing modern training programmes in alignment with local market needs and the workers' capacities.

Therefore, it is evident from the above analysis that targeted governmental intervention for promoting alternative livelihood opportunities will be critical in enabling beedi workers to transition to alternative livelihoods. Interventions such as skill training, financial assistance, market linkages for traditional and craft-based occupations and promotion of technical skills for more sustainable employment opportunities could be created for beedi workers.



Chapter 6 : Conclusion and Policy Recommendations

The present study has comprehensively discussed challenges, vulnerabilities alongwith alternative livelihood opportunities for beedi workers. Evidence derived from the primary survey has revealed that beedi workers often face various challenges such as low wages, poor working conditions, lack of social security, and significant health risks due to the nature of their work. The previous chapters address the vulnerabilities of beedi workers, welfare measures and alternative livelihood opportunities for beedi workers in Telangana state. In this regard, the second chapter critically examines the patterns of women's employment within the informal sector thereby locating beedi rolling within the informal sector and reveals reliance of women on informal, low-wage jobs. Most women employed in beedi rolling are within home based settings with lack of employment protection and extremely limited access to social security. Gender disparities in employment were prominent with women facing greater economic vulnerability as compared to men. The analysis indicates that systemic inequalities, compounded by the effects of the COVID-19 pandemic, have further marginalised women, leading to a fragile recovery in the labour market. This calls for more robust and gender-sensitive labour policies to integrate women into formal employment opportunities. The third chapter provides an in-depth vulnerability mapping of beedi workers, revealing significant socio-economic challenges. It has revealed that most beedi workers live below the poverty line with incomes insufficient to meet basic household needs. The analysis uncovers chronic health issues caused by the hazardous working conditions, particularly exposure to tobacco dust. Additionally, the perpetuation of child labour and intergenerational reliance on beedi-making pushes families into cycles of poverty. These findings suggest that there is a need for targeted interventions such as improved wage structures and access to healthcare for addressing the persisting vulnerabilities of these workers. The chapter emphasises the need for policies that address both the immediate health and economic needs of workers and long-term social mobility through education and skill development.

The fourth chapter provides an overview of the legislative framework and welfare schemes formulated to support beedi workers by the government. Despite the existence of various welfare provisions, the analysis reveals that there has been significant gaps in the implementation of these schemes. Awareness and utilisation of budget on welfare schemes remain low, particularly schemes related to health and housing. The chapter emphasises on the inefficacy of outreach mechanisms of these schemes with only a small proportion of workers benefiting from the available schemes. Such a situation reiterates the need for an overhaul of the implementation process, advocating for more effective communication, streamlined access to benefits, and stronger enforcement of existing laws to ensure beedi workers are not left vulnerable to exploitation and poor health outcomes.

The fifth chapter analyses the alternative livelihood options suggested by beedi workers themselves, revealing a clear preference for traditional, low-skill occupations such as papad making, agarbatti production, and traditional arts and crafts. These preferences suggest that many beedi workers feel more comfortable transitioning into familiar, craft-based occupations rather than embracing technical and vocational training. The analysis also reveals that technical skills such as computer training, banking etc have lesser appeal among beedi workers, highlighting the need for greater awareness and access to such skills.



The following section delves into the policy interventions required to improve the socio-economic and health conditions of beedi workers, especially home-based women beedi workers. It explores a range of policy measures designed to provide economic security, improve access to healthcare, raise awareness about welfare schemes, and reduce the burden of unpaid work, especially for women. The economic interventions discussed include the need to increase wages in line with living costs and provide comprehensive social security benefits. Additionally, improving working conditions and regulating work hours are vital to preventing exploitation and ensuring workers' well-being. It also provides a strategy for strengthening welfare schemes for beedi workers.

Policy Recommendations

The following are some of the recommendations that have emerged from the study:

Wages

There is a need to implement policies to ensure fair wages, eliminate exploitative practices in the beedi industry, and ensure that all workers (especially home-based beedi workers) receive provident fund benefits and pensions to provide long-term financial security. The present study revealed that beedi workers were not paid the mandated minimum wage rates as prescribed by the State government of Telangana, resulting in significant wage disparities and exacerbating their economic vulnerability.

Working Conditions

There is also a need to improve the working conditions of beedi workers, such as regulating the working hours of beedi workers to prevent exploitation, especially for home-based workers. Ensuring that workplaces (including homes) are equipped with safe working conditions, adequate ventilation, and ergonomic tools to avoid occupational health hazards and protect workers' health and well-being. Further, the provisions for improving the conditions of home based beedi workers can be made through certain regulatory changes like classification of beedi work as a hazardous process under the Occupational Safety and Working Conditions Code 2020 (Tyagi et al, 2023)

Housing and Basic Amenities

The provision of adequate housing and essential services is critical for improving the overall well-being of beedi workers and their families. Many beedi workers lived in semi-pucca and substandard conditions of houses and the majority did not have a separate kitchen in their households which exacerbated health issues and increased their vulnerability. There is a need for Government and relevant agencies to work towards providing affordable and decent housing with separate kitchen, ensuring that workers have access to clean drinking water, proper sanitation facilities and reliable electricity. These basic amenities are fundamental to improving living standards, reducing disease transmission and fostering a healthier environment which in turn can enhance productivity and overall quality of life.

Improvement in Health infrastructure

The analysis highlighted the need for improved healthcare support to address the prevalent health issues among beedi workers. The high percentage of workers experiencing health problems, coupled with limited access to medical facilities, underscores the necessity for comprehensive health benefits and better working conditions. Establishing accessible medical



facilities, distributing health cards to beedi workers and implementing health awareness programmes can ensure better management of health issues. Also, there is a need to improve ergonomics by implementing interventions to reduce strain and improve posture during beedi rolling, provision of providing masks, gloves and other protective gears through health schemes is important.

Budgetary Allocation and Infrastructure Development

The analysis of budgetary allocation, expenditure, and the number of beneficiaries treated under healthcare schemes for beedi workers over the last five years has highlighted significant fluctuations, with funds not being effectively utilised. To address this issue, it is recommended that fixed budgetary allocation to be established so that financial resources are efficiently utilised into healthcare services. The lack of mobile medical units has been identified as a key issue, which limits access to healthcare, particularly for workers in remote areas. It is suggested that, there is a need to provide vehicles, and drivers to essential healthcare services, to improve accessibility. The Central Hospital in Nampally, which is the only hospital available for beedi workers in Telangana, has been found to be under-resourced, with limited capacity and a lack of services such as inpatient care. It is recommended that the infrastructure of this hospital need to be upgraded, bed capacity expanded, and diagnostic tools provided to improve the quality of care. Staffing shortages have also been highlighted, with three dispensaries as well as in Central Hospital, there is lacking full-time doctors and essential staffs. It has been recommended that permanent healthcare staff, including doctors, nurses, and lab technicians, need to be recruited to provide consistent care, and that the reliance on outsourced staff be reduced. Additionally, shortages of essential medicines, such as those for tuberculosis and diabetes, along with a lack of diagnostic equipment, have been reported. Ensuring a regular supply of medicines and equipping healthcare centres with diagnostic tools has been suggested as a solution to reduce referrals to distant hospitals and enable more comprehensive care at local facilities. The discontinuation of maternity benefits for beedi workers has been noted, limiting access to maternal and child healthcare. It has been recommended that these benefits be reinstated and integrated into healthcare services to address the specific health needs of female workers. The lack of awareness among many workers regarding available healthcare services has been highlighted, leading to the suggestion that outreach and awareness programmes be developed to inform workers about their entitlements. Due to the limited services at Labour Welfare Organisation (LWO) hospitals and dispensaries, many workers have been referred to government hospitals for specialised care. therefore, there is a need to strengthening collaborations between LWO and other government or private hospitals to streamline these referrals and ensure timely treatment to beedi workers.

Statistics on Beedi workers

There is limited data with regard to capturing of home based beedi workers in the national employment surveys. The PLFS surveys cover beedi industry under the head 'tobacco' industry which includes *Manufacture of tobacco products* as per 3 digit National Industrial Classification (NIC) but it does not provide a comprehensive picture on home based beedi rolling. However, a module on *location of workplace* in the PLFS schedule (for example -the question on location of workplace includes own dwelling unit, structure attached to own dwelling unit and open area adjacent to own dwelling) provides information on overall home based employment including various types of home based employment. However, there is a limitation with the



disaggregation of home based beedi rolling from this data set (GoI, 2023). Therefore, there is a need for inclusion of various categories of home based employment in the PLFS schedule for further research and policy related interventions.

Skilling and Alternative Livelihood Opportunities

There is a need to develop local employment opportunities such as establishing local businesses and training centres through Gram Panchayats to provide alternative employment livelihood opportunities to beedi workers. There is a need for expanding skill development programmes, particularly vocational training tailored to the local context and needs. Taking into consideration the local economic context and available resources, studies need to be conducted to explore potential opportunities in sectors such as agriculture, small-scale industries, service-based occupations or any other prominent sector specific to the region.

Reduction in Unpaid Work

It was evident beedi workers spend a considerable amount of their time in unpaid work which they combine with beedi rolling. Also, their availability for skill training and alternative livelihood opportunities is largely associated with their time spent in unpaid and care work. In this regard, there is a need for policy intervention on reduction in unpaid and care work of beedi workers. Such interventions include investments in infrastructure (including care infrastructure), improving access to clean energy, water supply and transportation. These initiatives will contribute in reduction in time spent in water collection, household chores, child care etc and shall promote women's participation in income-generating activities. As the present study found that, the Telangana Government has played a crucial role by investing in clean water infrastructure, like Mission Bhagiratha scheme, in improving access to safe water, directly impacting the health and daily living conditions of these workers. These efforts collectively contribute to reducing the time burden of household chores and unpaid care work, thereby promoting greater participation of women in the workforce.

Early Childhood Care and Elderly Care Provisions

Ensuring access to affordable childcare and elderly care services will help reduce the burden of caregiving on women beedi workers, allowing them more time to pursue livelihood opportunities and improve their productivity. The role of early childhood care institutions and promoting secondary and higher education of children through scholarships, stipends etc is critical for reducing caring responsibilities and discouraging children from getting engaged in home based beedi rolling along with their mothers. Also, the need for provisions for elderly care is important to address the challenges before women beedi workers on elderly care. However, the effective implementation of these policies will contribute in significantly improving the socio-economic conditions of beedi workers.

Awareness Campaigns

There is a pressing need to enhance the dissemination of information on a larger scale by respective government officials of the Labour Welfare Organisation (LWO). Such initiatives can be undertaken by engaging community leaders, civil society organisations and panchayat members to spread awareness about health and safety as well as the availability and benefits of various welfare schemes (such as health, educational assistance, and housing) for the beedi workers. Such information needs to be disseminated through local languages and in formats that are easy to understand. Television and social media are effective channels for



raising awareness as the study found that 64 percent of Beedi workers owned televisions, and 62.3 percent had access to mobile phones. These platforms can be utilised to disseminate information to the beedi workers effectively.

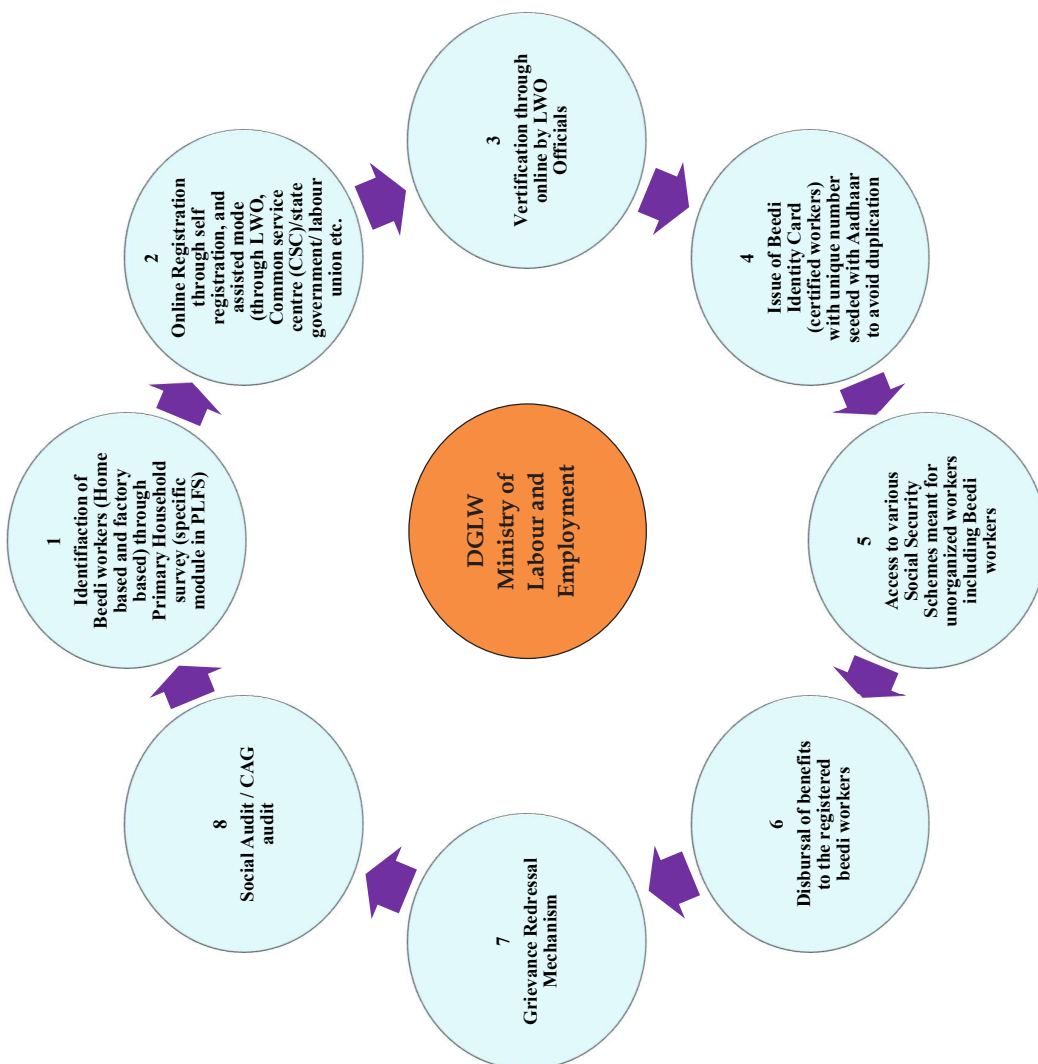
Awareness programmes on occupational health and safety issues can be undertaken which may include information about the occupational hazards of beedi rolling and the preventive measures to be taken including the use of protective gear. There is a need to expand health and safety training programmes incorporating technological interventions such as visual or pictorial explanations that can educate and sensitise workers on the importance of using protective gear, gloves, masks etc, adopting proper sitting postures, following safe work practices etc.

Strengthening Welfare Schemes for Beedi Workers :Model for implementation

The model below has been developed by the authors which can be used by the government as a mechanism for strengthening of welfare schemes for beedi workers. The model proposes a step-by-step approach right from identification, registration of beedi workers to implementation of social security benefits and the development of a monitoring mechanism. The entire process of registration for issuing a beedi workers ID card and access to the labour welfare scheme (Health, Housing and Financial Assistance for education) and disbursement of its benefits to the registered beedi worker need to be digitalised through a unified and integrated **online portal**.

The model below is designed to ensure that beedi workers, both home-based and factory-based are adequately identified, registered, and provided with access to welfare schemes aimed at improving their socio-economic conditions. The step-by-step approach provided in the model aims to streamline the delivery of benefits and services, while ensuring transparency, efficiency, and accountability. The following processes are involved in the effective implementation of the schemes.

Mechanism for Strengthening Welfare Schemes for Beedi Workers (Home-based and Factory-Based)



Source: Authors own representation.

1. Identification of Beedi Workers

The process begins with the identification of beedi workers through a Primary Household Survey which can be captured by introduction of a module on beedi workers in the schedule of the PLFS survey or can be an independent survey. The survey can cover both home-based and factory-based beedi workers collecting essential information about their employment and personal details. The aim is to develop a comprehensive database of workers who are eligible for welfare schemes.

2. Online Registration (Self and Assisted)

After the workers are identified through the survey they can be encouraged to register themselves online. There are two modes of registration:

- Self-registration: where workers directly submit their information through an online platform.
- Assisted registration: where workers receive help from various stakeholders such as the Labour Welfare Organisation (LWO), Common Service Centres (CSC), state government authorities, labour unions, civil society organisations, Gram Panchayats, or NGOs for helping them with the registration process. This ensures that even those with limited digital literacy or access are registered.

3. Verification by LWO Officials

After registration, the information submitted by the workers can be verified by Labour Welfare Organisation (LWO) officials through an online process. This step is critical to confirm the authenticity of the information provided ensuring that only registered workers are granted access to welfare schemes.

4. Issuance of certified Beedi Identity Card

Following successful verification, a certified *Beedi Identity Card* can be issued to the worker. Each card can be assigned with a unique number and is required to be seeded with the worker's Aadhaar number to avoid duplication and fraud. This step ensures that benefits are provided only to eligible individuals and that the system remains transparent.

5. Access to Social Security Schemes

After acquiring the Beedi Identity Card, workers are given access to various social security schemes designed for unorganised workers. These schemes may provide healthcare, education for workers' children, housing, pensions, and other forms of financial or welfare support to the workers. By providing direct access to these schemes, the mechanism seeks to improve the living and working conditions of beedi workers. Further, the workers can be linked to the E-shram portal⁴⁶ of the Ministry of Labour and Employment which is a national database for all unorganised workers.

6. Disbursal of Benefits

Once the workers have access to the schemes, the disbursal of benefits can be done directly to the eligible beedi workers. This process ensures that the funds and services reach the intended beneficiaries, bypassing any potential for intermediaries to interfere. Direct disbursal also reduces delays and improves the efficiency of the welfare mechanism.

⁴⁶ <https://eshram.gov.in/>



7. Grievance Redressal Mechanism

To address any concerns or issues faced by the workers during registration, verification, or disbursal of benefits, a Grievance Redressal Mechanism can be developed. This mechanism ensures that workers can voice their grievances and that these are resolved in a timely and transparent manner.

8. Social Audit

To ensure the entire process is accountable and transparent, a Social Audit can be conducted. This audit assesses the effectiveness and fairness of the process, ensuring that resources are utilised properly and the objectives of the welfare schemes are met.

This mechanism represents a structured, transparent, and inclusive approach to strengthening welfare schemes for beedi workers. By addressing key areas such as identification, verification, benefit distribution, grievance redressal and auditing, the system ensures that welfare benefits are delivered effectively to those in need, thereby reducing the vulnerabilities and improving the overall livelihood of beedi workers.

References

- Ansari, M. S., & Raj, A. (2015). Socio-economic status of women beedi workers in Bundelkhand region of Uttar Pradesh: An empirical analysis. *UTMS Journal of Economics*, 6(1), 53–66.
- Arora, M. (2020). The Indian beedi industry: Trends in employment and wage differentials. In I. R. Tarang Sharma (Ed.), *Frontiers in Public Health*, 8, Article 572638. <https://doi.org/10.3389/fpubh.2020.572638>
- Babu, B. V., Kar, S. K., & Jena, P. K. (2008). Health problems of beedi workers and their socio-economic conditions. *Journal of Public Health Policy*, 29(2), 197-202. <https://doi.org/10.1057/jphp.2008.5>
- Basu, G., Sarkar, D., Pal, R., Roy, S. K., & Dasgupta, R. (2018). Morbidity audit of women beedi workers in an urban fringe of West Bengal, India. *Journal of Clinical & Diagnostic Research*, 12(3), 1–5. <https://doi.org/10.7860/JCDR/2018/31226.11265>
- Bonnet, F., Vanek, J., & Chen, M. (2019). *Women and men in the informal economy: A statistical brief*. Women in Informal Employment: Globalizing and Organizing (WIEGO). <https://www.wiego.org>
- Chakravarty, S. R., & D'Ambrosio, C. (2006). The measurement of social exclusion. *Review of Income and Wealth*, 52(3), 377-398. <https://doi.org/10.1111/j.1475-4991.2006.00202.x>
- Chandramouli, C. M. (2011). *Provisional population totals*. Office of the Registrar General & Census Commissioner, India.
- Chant, S., & Pedwell, C. (2008). *Women, gender, and the informal economy: An assessment of ILO research and suggested ways forward*. International Labour Organization. https://www.ilo.org/wcmsp5/groups/public/---dgreports/---gender/documents/publication/wcms_091228.pdf
- Chauhan, D. Y. (2001). History and Struggles of Beedi Workers in India. *History and Struggles of Beedi Workers in India*. N.M. Joshi Institute, New Delhi on behalf of All India Trade Union Congress (AITUC).

- Chauhan, P. S., Tomer, S., & Rehman, M. M. (2014). *A study of welfare measures for beedi workers in Bangalore and Hyderabad regions* (Research Study No. 110/2014). V.V. Giri National Labour Institute. <https://www.vvgnli.org>
- Chowdhary, P. H., Kowli, S. S., & Sabale, R. V. (2012). Working conditions and health hazards in beedi rollers residing in the urban slums of Mumbai. *Indian Journal of Occupational and Environmental Medicine*, 16 (1), 72-74. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3617511/>
- Das, J., Moitra, S., & Bhor, M. (2013). Health mapping of women and children biri binders of district Bankura, West Bengal, India. *International Journal of Emerging Technology and Advanced Engineering*, 3(12), 138-144.
- Devereux, S., & Sabates-Wheeler, R. (2004). *Transformative social protection* (IDS Working Paper No. 232). Institute of Development Studies. <https://www.ids.ac.uk/publications/transformative-social-protection>
- Florence Bonnet, J. V. (2019). *Women and Men in the Informal Economy: A Statistical Brief*. Women in Informal Employment Globalizing and organizing.
- GoI, Government of India, Planning Commission (2013). *Press note on poverty estimates, 2011-12*. <https://www.niti.gov.in/sites/default/files/2020-05/press-note-poverty-2011-12-23-08-16.pdf>
- GoI, Government of India. (1996). *Report on socio-economic conditions of women workers in selected beedi units in India (1994-95)*. Labour Bureau, Ministry of Labour, Chandigarh/Shimla.
- GoI, Government of India. (2017). *Global Adult Tobacco Survey: India 2016-17 Report*. <http://www.indiaenvironmentportal.org.in/content/456113/global-adult-tobacco-survey-india-2016-17-report/>
- GoI, Government of India. (2019). *Time Use in India 2019*. National Statistical Office. New Delhi: Ministry of Statistics and Programme Implementation.
- GoI, Government of India. (2023). *Annual Report*. New Delhi: Ministry of Labour & Employment. https://labour.gov.in/sites/default/files/ar_2022_23_english.pdf
- Gopal, M. (2000). Health of women workers in the beedi industry. *Medico Friends Circle Bulletin*, (268-269), Jan-Feb. Retrieved from <http://www.mfcindia.org/mfcpdfs/MFC268-269.pdf>
- Harriss-White, B., & Heyer, J. (2012). *The comparative political economy of development: Africa and South Asia*. Taylor & Francis Group. https://www.researchgate.net/publication/257928536Stigma_and_Regions_of_Accumulation_Mapping_Dalit_and_Adivasi_Capital_in_the_1990s
- Hart, K. H. (1973, March). Informal Income Opportunities and Urban Employment in Ghana. *The Journal of Modern African Studies*, 11(01), 61-89. doi: 10.1017/S0022278X00008089 <https://www.who.int/publications-detail/improving-ccupational-health-services-for-informal-sector-workers>
- Holmes, R., & Jones, N. (2013). *Gender and Social Protection in the Developing World: Beyond Mothers and Safety Nets*. London: Zed Books Ltd. Retrieved November 14, 2024, from <http://dx.doi.org/10.5040/9781350220300>.
- Husmanns, R. (2004, Feb 2-4). Defining and measuring informal employment. *Statistical definition of informal employment: Guidelines endorsed by the Seventeenth International*



- Conference of Labour Statisticians (2003), 1-16. New Delhi: Bureau of Statistics International Labour Office.
- ILO. (1993). *Resolution concerning statistics of employment in the informal sector, adopted by the Fifteenth International Conference of Labour Statisticians*. Geneva: International Labour office.
- ILO. (2003). *ILO's Pilot Action Project for Beedi Women Workers in India*. Geneva: Switzerland.
- ILO. (2018). *Revision of the resolution concerning statistics of employment in the informal sector and the 17th ICLS guidelines regarding the statistical definition of informal employment*. 20th International Conference of Labour Statisticians, Geneva: International Labour office.
- ILO. (2018). *Women and men in the informal economy: A statistical picture* (3rd ed.). Geneva, Switzerland. https://www.ilo.org/global/publications/books/WCMS_626831/lang-en/index.htm
- ILO. (2019). Definitions of informal economy, informal sector and informal employment. In *Tackling Vulnerability in the Informal Economy*. OECD Publishing, Paris. <https://doi.org/10.1787/103bf23e-en>
- Iti, B. P. (2018). Beedi Industry in Murshidabad District of West Bengal: An Empirical Study. *Business Studies*, XXXIX, No. 1 & 2.
- John, R. M., Rao, R. K., Rao, M. G., Moore, J., Deshpande, R. S., Sengupta, J., Selvaraj, S., Chaloupka, F. J., & Jha, P. (2010). *The economics of tobacco and tobacco taxation in India*. International Union Against Tuberculosis and Lung Disease. https://assets.tobaccofreekids.org/global/pdfs/en/India_tobacco_taxes_report_en.pdf
- Jones, L., & Efroymson, D. (2011). Making the tobacco and poverty link: Results from research for advocacy projects in Africa, Asia, and Latin America. *Healthbridge Foundation of Canada*. Ottawa.
- Kabeer, N. (2024). Social protection, livelihoods and 'structural gaps': Impact assessment as stories of social change. *LSE Public Policy Review*, 3(2), 1-13. <https://doi.org/10.31389/lseppr.101>
- Karunanidhi, G. (1997). Health risks of beedi making. *Social Welfare*, 44(30), 9-11.
- Kaup, S., & Anantha, N. (2017). Occupational exposure to unburnt tobacco and potential risk of toxic optic neuropathy: A cross-sectional study among beedi rollers in selected rural areas of coastal Karnataka. *PLOS ONE*, 12(11).
- Kawale, S. N., Shinde, A. M., & Shinde, S. P. (2019). Cross-sectional study of health problems in female bidi rollers in Telangana, India. *Public Health Review: International Journal of Public Health Research*, 6(6), 219-223. <https://doi.org/10.17511/ijphr.2019.i6.02>
- Khader, J. A., Hameed, A. I. S., & Siddik, M. M. (2022). Socio-economic conditions of beedi workers with reference to Melapalayam Town (Tirunelveli District) in Tamil Nadu. *PNR Journal*, 13(S08), Article 133. <https://doi.org/10.47750/pnr.2022.13.S08.133>
- Kouser Banu K, S. R. (2014). Pulmonary Functions among Beedi Rolling Workers of South India - A Cross Sectional Study. *International Journal of Biomedical And Advance Research*, 05 (01), 31-34. doi:10.7439/ijbar.
- Kumar, P., Kamath, A., Nayak, R., Kulkarni, M. M., Kamath, V. G., Mullapudi, S., & Bhagawath, R. (2021). Beedi rollers' perception toward alternative means of livelihood amid economic



- benefits. *Indian Journal of Community Medicine*, 46(2), 268-272. https://doi.org/10.4103/ijcm.IJCM_629_20
- Leung, A. K. (2020). The Transition from the Informal to the Formal Economy in Africa. *Background paper for the Global Employment Policy Review Chapter 5 "The transition to formality: Comparing policy approaches in Africa, Asia and Latin America*.
- Mallick, J., & Satpathy, S. (2021). Estimation of women beedi workers in India and their socio-economic condition. *Indian Journal of Labour Economics*, 64(6). <https://doi.org/10.1007/s41027-021-00320-2>
- Mangasuli, V., & Sherkhane, M. (2016, November). Utilization pattern of social welfare schemes among women beedi workers in comparison with non-beedi workers. *International Journal of Community Medicine and Public Health*, 3(11). <http://dx.doi.org/10.18203/2394-6040.ijcmph20163948>
- Manjula, A., Leonard, M., Anna, S., KS, P., & Jayaram, S. (2012). Study of morbidity pattern of female Beedi workers in the urban field practice area of Mangalore, Southern India. *International Journal of A J Institute of Medical Sciences*, 1(1), 41-46.
- Mazumdar, I. (2018). *Homebased Work in 21st Century India*. New Delhi: Centre For Women's Development Studies.
- Md. Rahmatullah, S. S. (2022). Socio Legal Protection Of Beedi Workers Under Labour Welfare Legislations In India: An Assessment. *Journal of Pharmaceutical Negative Results*, 13(5), 2269-2276. doi:10.47750/pnr.2022.13.S05.356
- Ministry of Statistics and Programme Implementation. (2023). *Periodic Labour Force Survey (PLFS)*. New Delhi: National Sample Survey Office.
- Mishra, D. K. (2014). Nimble fingers on beedis: Problems of girl child labour in Sambalpur and Jharsuguda. *Indian Journal of Gender Studies*, 21(1), 135-144. <https://doi.org/10.1177/0971521513511203>
- Monika Arora, P. D. (2018). Employment and wages in the bidi industry in India: a gender-focused analysis. doi:10.18332/tid/84587
- Nag, A., & Nag, P. K. (2004). Musculoskeletal disorders among beedi workers. *Human Factors and Ergonomics in Manufacturing & Service Industries*, 14(1), 23-34. <https://doi.org/10.1002/hfm.10049>
- Nair, R. G. (1990). Child pledging in beedi industry. *Social Welfare*, 37(4), 15-16.
- Nakkeeran, S., & Bharathi, P. S. (2010). *A study on occupational health hazards among women beedi rollers in Tamilnadu, India* (MPRA Paper No. 27278). Munich Personal RePEc Archive. <https://mpra.ub.uni-muenchen.de/27278/>
- Nandi, A., Ashok, A., Guindon, G., Chaloupka, F., & Jha, P. (2015). Estimates of the economic contributions of the bidi manufacturing industry in India. *Tobacco Control*, 24(4), 369-375. <http://dx.doi.org/10.1136/tobaccocontrol-2013-051404>
- Office of the Registrar General & Census Commissioner, India. (2011). *Census of India 2011*. Ministry of Home Affairs, Government of India.
- Painoli, G. K., & Nagar, D. (2012). Employment to women in the Indian beedi industry: An opportunity or threat? A case study of Nizamabad district. *International Journal of Research in Commerce, IT & Management*, 2(2).



- Palande, P. J. (2019). *A study on socio-economic and health problems of women beedi rollers in Sangamner and Akole blocks of Ahmednagar district* (Doctoral dissertation, Tilak Maharashtra Vidyapeeth, Pune).
- Pande, R. (1999). Structural violence and women's health: The bidi industry of India. Paper presented at the *Global Symposium on Violence and Health*, October 12–15, Kobe, Japan.
- Pande, R. (2022). *Women's work in the unorganized sector: Issues of exploitation and globalisation in the beedi industry*. Routledge India.
- Panneer, S. (2019). Health and Safety of Women Workers in Informal Sector: Evidences from Construction and Beedi Rolling Works in India. In S. Panneer, & S. A. Panneer (Ed.), *Health, Safety and Well-Being of Workers in the Informal Sector in India: Lessons for Emerging Economies* (pp. 61-75). Singapore: Springer Singapore . doi:10.1007/978-981-13-8421-9_6
- Prasad, K. V. E., & Prasad, A. (1985). *Beedi workers of central India: A study of production process and working and living conditions*. New Delhi: National Labour Institute.
- Qasim, F., & Daniel, S. (2021). Analysis of understanding level of government welfare schemes: Among beedi workers of unorganized sector. *Research Ambition: An International Multidisciplinary e-Journal*, 6(1), Article 05.
- Raj, M. S. (2014). Socio-Economic Status Of Women Beedi Workers In Bundelkhand Region of Uttar Pradesh: An Empirical Analysis. *Journal of Economics*(6), 53–66.
- Rajasekhar, D., & Sreedhar, G. (2002). Alternative employment opportunities for women beedi workers: A study in Dakshina Kannada district of Karnataka. *Journal of Rural Development*, 21(94), 449–480
- Reddy, K. S., Gupta, P. C., & Ramachandran, V. (2010). Mortality study of women beedi workers in rural India. *International Journal of Epidemiology*, 39(6), 1519-1527. <https://doi.org/10.1093/ije/dyq138>
- Rout S. K., A. (2014). Taxation of smokeless tobacco in India. *Health Economics, Indian Institute of Public Health (IIPH)*, 51 , 1-5. doi:10.4103/0019-509X.147420
- Rout, S. K., Narayana, K. V., Sahu, K. S., Selvaraj, S., Chatterjee, M., & Arora, M. (2017). Poverty and health status of beedi workers in Andhra Pradesh. *Economic and Political Weekly*, 52(10), 54–59. <http://www.jstor.org/stable/26695527>
- Roy, A., Robins, T. G., & Lantz, P. M. (2014). Health and work conditions of beedi rollers in India. *Journal of Occupational Health*, 56(2), 127-137. <https://doi.org/10.1539/joh.13-0186-FS>
- Rupavath, P. (2018, November 30). Telangana polls: Paid Rs 173/day, beedi workers feel betrayed by successive governments. *NewsClick*. <https://www.newsclick.in/telangana-polls-paid-rs-173day-beedi-workers-feel-betrayed-successive-governments>
- Rustagi, P. (2008). Rural Child Labour Markets in India: Nature of Child Work Participation and Role of the Family. *Working paper NO. 45*.
- Rustagi, P., Srivastave, P., Bhardwaj, P., Saha, M., Vyas, A., & Shree, M. (2009). *Survey of studies on beedi industry with special emphasis on women and child labour*. CWDS Research Team.
- Samantroy, E. (2021). *Participation of women in labour force* (Research Studies Series No. 146/2021). V.V. Giri National Labour Institute. <https://www.vvgnli.gov.in>



- Samantroy, E. (2022). *Women's work in India and COVID-19: Insights from the labour force surveys and emerging challenges. Sociology of COVID-19 pandemic in India* (pp. 134-157).
- Sanjay Dawn, D. S. (2022). Beedi Industry: A Study of the Jangipur Sub-division in the district of Murshidabad, West Bengal. *International Journal Of Research Culture Society*, 06(05). doi:10.2017/IJRCS/202205013
- SEWA. (2012). SEWA in West Bengal | Sewa Bharat. SEWA Bharat. <http://sewabharat.org/across-india/sewa-in-west-bengal/>
- Shekhar Grover, T. A. (2020). Tobacco Use Among the Youth in India: Evidence From Global Adult Tobacco Survey-2 (2016-2017). *Sage Publications.com*, 13: 1-7. doi:10.1177/1179173X20927397
- Shree, P. R. (2016). *Survey of Studies on Beedi Industry with Special Emphasis on Women and Child Labour*. CWDS.
- Singh, J. K., Rana, S. V. S., & Mishra, N. (2014). Occupational health problems amongst women beedi rollers in Jhansi, Bundelkhand region, Uttar Pradesh. *Journal of Ecophysiology and Occupational Health*, 14(1), 17-22.
- Sinha, R. M. (2011). *Making Home-Based Work Visible: A Review of Evidence from South Asia*. WIEGO Urban Policies Research Report Series.
- Srinivasan, D. I. (2012 , December). A Study On The Socio - Economic Conditions Of Female Beedi Workers At Khajamalai, In Trichirapalli, Tamil Nadu. *International Journal of Innovative Research & Development*, 1(11), 295-305.
- Sudarshan, R., & Kaur, R. (1999). The tobacco industry and women's employment: Old concerns and new imperatives. *The Indian Journal of Labour Economics*, 42(4), 675-685.
- Supase, A. S., Oswal, K., Mukherjee, K., Singh, A., & Chaturvedi, P. (2020). Alternative livelihood for bidi workers: A study based on primary research on home-based bidi rollers of Solapur city of Maharashtra. *International Journal of Community Medicine and Public Health*, 7(11), 4402-4409.
- Tom, J., & Francis, S. S. (2013). Occupational health risks of beedi rollers reinvestigated: Issues and evidence. *International Journal of Pharma Medicine and Biological Sciences*, 2(4), 28-33.
- Tyagi, J., Beri, D., Ingale, S., Sinha, P., & Bhaumik, S. (2023). Occupational health hazards of bidi workers and their families in India: A scoping review. *BMJ Global Health*, 8(11), <https://doi.org/10.1136/bmjgh-2023-012413>
- Varma, U. K., & Rehman, M. M. (2005). *Tobacco, tendu leaf, and beedi workers in India: Problems and prospects*. Shipra.
- VHAI, Voluntary Health Association of India. (2010). *At the crossroads of life and livelihood: The economics, poverty and working conditions of people employed in the tobacco industry in India*. Voluntary Health Association of India.
- WHO, World Health Organization. (2015). *Improving occupational health services for informal sector workers*.

Appendix 1

Table: 1 State-wise registered Beedi workers

Name of State/UT	Number of Registered Beedi Workers
West Bengal	1829203
Tamil Nadu	603076
Andhra Pradesh/Telangana	458040
Madhya Pradesh	440556
Uttar Pradesh	412757
Bihar	296972
Karnataka	295501
Odisha	208212
Maharashtra	155089
Jharkhand	136519
Kerala	40276
Gujarat	39011
Rajasthan	38791
Assam	24398
Chhattisgarh	3893

(Source: Ministry of Labour and Employment, Annual Report-2022-2023).

Table: 2 Dispensary-wise Number of Beedi workers in Telangana State (2022-23)

Name of the Dispensary	No. of registered Beedi worker
Aler	2980
Amarachinta	2980
Bheemgal	19048
Dubbak	29250
Hyderabad	19345
Jagtial	4635
Kamareddy	44720
Koratla	28879
Kothakota	31215
Kothapalli	14735
Mustabad	4428
Nirmal	4029
Nizamabad	57364
Ramayampet	38390
Siddipet	10198
Sircilla	32930
Warangal	5905

Source: Directorate General Labour Welfare, Ministry of Labour and Employment, Government of India

Table 3: WPR (in per cent) in usual status (ps+ss) Age Group: 15 years & above

WPR	Rural			Urban			Rural+ Urban		
	Male	Female	Persons	Male	Female	Persons	Male	Female	Persons
2017-2018	72	23.7	48.01	69.3	18.2	43.9	71.2	22	46.8
2018-2019	72.2	25.5	48.9	68.6	18.4	43.9	71	23.3	47.3
2019-2020	74.4	32.2	53.3	69.9	21.3	45.8	73	28.7	50.9
2020-2021	75.1	35.8	55.1	70.0	21.2	45.6	73.5	31.4	52.2
2021-2022	75.3	35.8	55.6	70.0	21.9	46.6	73.8	31.7	52.9
2022-2023	78.0	40.7	59.4	71.0	23.5	47.7	76.0	35.9	56.0

Source: Periodic Labour Force Survey of India in various rounds

Table 4: Status in Employment 15 years and above

	Rural			Urban			Rural+ Urban		
	Male	Female	Persons	Male	Female	Persons	Male	Female	Persons
2017-18									
All self-employed	57.82	57.68	57.79	39.22	34.7	38.3	52.3	51.87	52.19
Regular workers	13.96	10.53	13.13	45.72	52.17	47.04	23.4	21.06	22.86
Casual labour	28.22	31.79	29.09	15.05	13.13	14.66	24.31	27.07	24.95
2018-19									
All self-employed	57.39	59.59	57.96	38.67	34.49	37.8	51.63	53.34	52.04
Regular workers	14.27	11.04	13.43	47.18	54.74	48.74	24.41	21.91	23.8
Casual labour	28.34	29.38	28.61	14.15	10.76	13.46	23.96	24.74	24.16
2019-20									
All self-employed	58.43	62.96	59.79	38.7	34.54	37.75	52.36	56.3	53.48
Regular workers	13.8	9.5	12.51	47.19	54.29	48.82	24.07	20	22.92
Casual labour	27.77	27.54	27.7	14.11	11.16	13.43	23.57	23.7	23.6
2020-21									
All self-employed	59.63	64.67	61.24	39.84	38.37	39.51	53.9	59.32	55.5
Regular workers	13.59	9.09	12.15	45.3	50.15	46.41	22.77	17.46	21.19
Casual labour	26.79	26.24	26.6	14.86	11.47	14.08	23.33	23.23	23.3
2021-22									
All self-employed	58.6	67.8	61.47	39.5	39.4	39.5	53.2	62.1	55.78
Regular workers	14.7	8.1	12.57	46.2	50.3	47.14	23.6	16.5	21.53
Casual labour	26.8	24.1	25.96	14.3	10.3	13.38	23.2	21.4	22.69
2022-23									
All self-employed	58.8	71.0	63.0	39.3	40.3	39.6	53.5	65.3	57.3
Regular workers	14.4	8.0	12.2	47.1	50.8	48.0	23.2	15.9	20.9
Casual labour	26.9	21.0	24.9	13.6	8.9	12.5	23.3	18.8	21.8

Source: Periodic Labour Force Survey of India in various rounds

Table 5: Status in Worker Population Ratio (WPR) (in per cent) according to usual status (ps+ss) for each State/UT age group 15 years and above

State	Rural			Urban			Rural + Urban		
	Male	Female	Persons	Male	Female	Persons	Male	Female	Persons
Jammu & Kashmir	75.6	52.5	64.2	68.2	21	45.4	74.2	46.9	60.7
Himachal Pradesh	81.1	72	76.5	72.7	28.6	49.9	80.3	67.6	73.8
Punjab	74.7	26.3	50.8	73.3	23.2	49.2	74.2	25.2	50.2
Chandigarh	88.3	26.1	57.1	68.3	20.5	45.1	69.2	20.8	45.6
Uttarakhand	70.7	44.1	57.1	68.6	15.1	43.2	70.1	37	53.5
Haryana	68.1	20.5	44.8	68.4	18.2	45.3	68.2	19.7	45
Delhi	65.7	3.9	35.7	73.3	14.8	46.1	73.1	14.5	45.8
Rajasthan	72.4	54.8	63.6	66.2	20.9	44.6	70.8	46.6	58.8
Uttar Pradesh	79.3	35.2	57	69.8	12.6	42	77.2	30.6	53.9
Bihar	72	23	47.8	63.2	11.4	38.7	71.2	22	47
Sikkim	81.5	74.1	77.9	79	33	58.8	80.9	66.4	74
Arunachal Pradesh	74.5	60.8	67.9	66.7	31.1	49.1	73.3	56	64.9
Nagaland	79.3	69.6	74.7	65.5	45.8	56	75.4	62.9	69.4
Manipur	69.3	28.7	49.2	62.1	33	47.7	67.2	29.9	48.7
Mizoram	68.1	47.3	58.2	63.6	40	51.8	66	43.8	55.2
Tripura	74.2	36.6	55.6	71.3	26.8	48.5	73.7	34.8	54.3
Meghalaya	78.5	61.6	69.9	65.3	33.1	47.5	76.3	56	65.8
Assam	89.7	19.3	54.7	72.9	25.3	49.2	88.9	19.6	54.5
West Bengal	81	36.2	58.6	74.3	26.1	50.3	79	33.1	56.1
Jharkhand	79.5	52.3	65.6	65.6	15.7	40.9	76.8	45.5	60.9
Odisha	75.5	46.5	60.7	68.8	25.9	48.3	74.4	43.6	58.9
Chhattisgarh	83.2	65.8	74.7	73	30.9	51.6	81.2	58.6	70.1
Madhya Pradesh	84.8	52	69	73.6	20.6	47.6	82	43.8	63.4
Gujarat	83.3	54.2	68.9	76.9	25.5	52.1	80.4	41.7	61.5
D & N. Haveli & Daman & Diu	85.6	52.3	70.1	89.2	24.6	62	88	35.4	65
Maharashtra	76.1	49.8	63.2	72.8	25.9	50	74.7	39.8	57.6
Andhra Pradesh	75.9	50.2	62.8	69.2	29.9	48.9	73.9	44	58.6
Karnataka	75.9	42	59	69.8	28.8	49.8	73.6	37.2	55.6
Goa	65.5	21.7	42.4	67.6	25.6	47	66.8	24	45.1
Lakshadweep	78.8	8.9	40.3	57.4	16.5	34.1	62.3	14.8	35.5
Kerala	72.6	37	53.4	67.5	29.3	47.2	70.2	33.5	50.5
Tamilnadu	72.4	47.5	59.6	70.1	26.8	48.3	71.4	38.6	54.7
Puducherry	74.9	47.1	60.2	68.2	23.1	43.6	70.7	31.6	49.6
Andaman & N. Island	81.2	45.2	64	76.4	33	55	79.1	39.8	60
Telangana	74.7	53.7	64.2	67.8	24.9	46.8	72.1	43.1	57.7
Ladakh	57.8	57.2	57.5	63.1	38.2	52	58.3	55.6	57
Total	78	40.7	59.4	71	23.5	47.7	76	35.9	56

Source: Periodic Labour Force Survey of India, 2022-2023

Table 6: Worker Population Ratio (WPR) by usual status (ps+ss) for each social group for persons of 15 years and above

Gender	Rural				Urban				Rural + Urban			
	ST	SC	OBC	Others	ST	SC	OBC	Others	ST	SC	OBC	Others
2022-23												
Male	83.3	76.7	76.5	79.5	69.9	73.6	71.2	69.8	81.8	76.0	74.9	75.8
Female	62.2	42.0	42.0	27.7	34.8	27.5	23.0	21.5	59.3	38.7	36.7	25.4
2021-22												
Male	80.94	76.19	74.6	72.74	71.97	72.02	71.33	68.55	79.89	75.23	73.65	70.94
Female	56	35.41	34.93	26.59	34.97	24.41	21.98	19.4	53.6	32.99	31.22	23.57
2020-21												
Male	78.78	75.19	73.22	73.35	70.97	71.81	70.35	67.81	77.87	74.41	72.37	70.96
Female	55.72	35.77	34.85	26.07	28.06	25.97	21.23	18.28	52.5	33.46	30.84	22.75
2019-20												
Male	78.55	74.47	74.58	72.03	70.05	71.78	70.53	68.46	77.5	73.85	73.32	70.4
Female	50.67	32.44	31.75	23.58	30.58	25.08	21.21	19.12	48.22	30.74	28.5	21.58
2018-19												
Male	76.97	72.78	71.37	70.83	66.26	69.56	68.95	68.04	75.8	72.06	70.61	69.55
Female	38.95	26.14	25.39	18.38	20.08	21.85	19.14	16.32	36.76	25.17	23.47	17.46
2017-18												
Male	76.84	72.65	71.54	69.94	68.06	70.82	70.4	67.8	75.8	72.24	71.21	69.02
Female	37.43	24.17	22.79	18.26	22.45	22.85	18.51	15.82	35.67	23.87	21.53	17.22

Source: Periodic Labour Force Survey of India in various rounds

Table 7: Distribution of Households by family size and family structure

Family structure	Family Size (%)			
	2 to 3	4 to 5	6 to 7	8 to 9
Joint	0	0	13.9	3.9
Nuclear	61.6	13.3	0	0
Single Mother	8.7	0	0	0

(Source: Primary data collected from Telangana state, January-May 2024)

Table 8: Nature of House Accommodation with House Ownership

House Ownership	Type of house (%)		
	Pucca	Semi-Pucca	Kuchha (Low quality materials)
Own	37.0	41.2	9.2
Rented	2.5	5.5	4.5

(Source: Primary data collected from Telangana state, January-May 2024)

Table 9: Sources of Cooking among Beedi Workers

Source of Cooking	Number of Respondents	Percentage (%)
Electricity	103	25.8
LPG/Natural Gas	295	73.8
Cow Dung	2	0.6
Total	400	100.0

(Source: Primary data collected from Telangana state, January-May 2024)

Table 10: Separate Kitchen among Beedi Workers

Any Separate kitchen	Frequency	Percentage (%)
No	235	58.8
Yes	165	41.3
Total	400	100

(Source: Primary data collected from Telangana state, January-May 2024)

Table 11: Sources of Drinking Water among Beedi Workers

Source of Drinking Water	Number of Respondents	Percentage (%)
Hand pump/Boreholes	169	42.3
Protected dug wells	63	15.8
Tap Water	118	29.5
Bottled water	49	12.3
Other (specify)	1	0.3
Total	400	100

(Source: Primary data collected from Telangana state, January-May 2024)

Table 12: Toilet Facilities among Beedi Workers

Source of Toilet Facilities	Number of Respondents	Percentage (%)
Own toilet	383	95.8
Public toilet	3	0.8
Practice open defecation	14	3.5
Total	400	100.0

(Source: Primary data collected from Telangana state, January-May 2024)

Table 13: Household Assets Owned by Beedi Workers

Household Assets	Yes (%)	No (%)
Light	98.8	1.3
Fan	99	1
Gas Connection	97.3	2.8
Television	64	36
Radio	0.8	99.3
Computer	1.3	98.8
Cycle	11.5	88.5
Motorcycle	54.8	45.3
Car	1.5	98.5

Household Assets	Yes (%)	No (%)
Tractor	2	98
Smartphone/Mobile	62.3	37.8
Cooler	30	70
Refrigerator	42.3	57.8
Inverter	1.3	98.8
Water purifier	1.5	98.5

(Source: Primary data collected from Telangana state, January-May 2024)

Table 14: Social Composition of Beedi Workers

Religion	No. of Respondents	Percentage (%)
Hindu	378	94.5
Muslim	22	5.5
Total	400	100.0

(Source: Primary data collected from Telangana state, January-May 2024)

Table 15: Marital Status of Beedi Workers

Marital Status	Age of the Respondent (%)
	15-59
Married	95.2
Divorced/Separated	4.5
Not Mentioned	0.2

(Source: Primary data collected from Telangana state, January-May 2024)

Table 16: Educational Status of the Beedi Workers

Education	No. of Respondent	No. of Respondent (%)
Illiterate	198	49.5
Primary (Class I-V)	35	8.75
Upper Primary/Middle (VI-IX)	75	18.75
Secondary (Class X)	60	15
Higher Secondary (Class XII)	0	0
Graduate	29	7.25
Postgraduate	3	0.75

(Source: Primary data collected from Telangana state, January-May 2024)

Table 17: Monthly Income of respondents' family

Total Family Income	Number of Respondent	Percentage (%)
₹ 5000- ₹ 10,000	193	48.3
₹ 10,001- ₹ 15,000	133	33.3
₹ 15,001- ₹ 20,000	42	10.5
₹ 25,001- ₹ 30,000	8	2.0
₹ 30,001- ₹ 35,000	9	2.3
₹ 35,001- ₹ 40,000	7	1.8
₹ 40,001 and above	8	2.0

(Source: Primary data collected from Telangana state, January-May 2024)

Table 18: Initial age of Beedi making

Initial age of Beedi Making	Respondents Age (15-59)
6-12	184 (46.0)
13-19	166 (41.5)
20-26	47 (11.8)
27-59	3 (0.8)
Total	400 (100)

(Source: Primary data collected from Telangana state, January-May 2024)

Table 19: Beedi making: Years of experience

Years of Beedi Making	Frequency	Percentage
1-10	48	12.0
11-20	104	26.0
21-30	158	39.5
31-40	90	22.5
Total	400	100.0

(Source: Primary data collected from Telangana state, January-May 2024)

Table 20: Beedi as home-based employment: District-wise participation

District	Involvement in Beedi rolling work		Total
	Full time	Part time	
Nizamabad	135 (33.8)	0	135 (33.8)
Nirmal	140 (35)	1 (0.3)	141 (35.3)
Kamareddy	44 (11)	80 (20.0)	124 (31.0)

(Source: Primary data collected from Telangana state, January-May 2024)

Table 21: Health Issues among Home-Based Beedi Workers (Self-reported)

Health Issues	Percentage
Lower Back Pain	27.5
Body/hand ache	26.6
Numbness of the Figure	17.8
Arthritis	5.9
Dust Allergy	3.6
Spondylosis	3.5
Wheezing Cough	2.6
Abdominal Pain	2.1
Asthma	2.1
Irregular Menstrual Cycle	1.8
Anaemia	1.7
Kidney Problem	1.1
Peptic Ulcer	.9
Skin Disease	.7
Heart Disease	.7
Cancer	.6
Gastrointestinal illness	.5
Tuberculosis	.3

(Source: Primary data collected from Telangana state, January-May 2024)

Appendix 2

Photographs to show the present conditions of Central Hospital, and available amenities

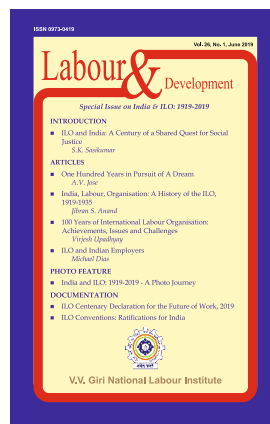




(Source: Photographs collected from Central Hospital (beedi workers hospital), Nampally, Telangana, July 2024)

LABOUR & DEVELOPMENT

Labour & Development is a biannual journal published by the V.V. Giri National Labour Institute, a premier Institute of labour studies. The Journal is dedicated to advancing the understanding of various aspects of labour through theoretical analysis and empirical investigations. The Journal publishes articles of high academic quality in the field of labour and related areas with emphasis on economic, social, historical as well as legal aspects and also publishes research notes and book reviews on them particularly in the context of developing countries.



ANNUAL SUBSCRIPTION RATES

India	Individual	₹ 150.00
	Institutional	₹ 250.00
Foreign	Individual	US \$ 15
	Institutional	US \$ 25

Modes of Payment:

a. Online Payment

Name of the Payee	:	V.V. Giri National Labour Institute
Name of the Bank	:	Indian Overseas Bank
Bank Branch	:	Nithari Branch, Sector-31, Noida, Uttar Pradesh
Bank Account Number:	:	059702000001131
Type of Bank Account :	:	Current Account
IFSC Code	:	IOBA0000597
MICR Code of Bank	:	110020029

or

b. By DD in favour of V.V. Giri National Labour Institute payable at Noida

For all editorial/business correspondence, please contact:

Editor

Labour & Development

V.V. Giri National Labour Institute

Sector-24, Noida-201 301, U.P., India

E-mail: labouranddevelopmentvvgnli@gmail.com

ISBN: 978-93-82902-26-3



V.V. Giri National Labour Institute is a premier institution involved in research, training, education, publication and consultancy on labour and related issues. Set up in 1974, the Institute is an autonomous body of the Ministry of Labour and Employment, Government of India. It is committed to establishing labour and labour relations as a central feature in the development agenda through :

- Disseminating knowledge, skills and attitudes to major social partners and stakeholders concerned with labour and employment;
- Addressing issues of transformations in the world of work;
- Undertaking research studies and training interventions of world class standards; and
- Building understanding and partnerships with globally respected institutions involved with labour.



V.V. Giri National Labour Institute

(An Autonomous Body of Ministry of Labour and Employment, Government of India)

Sector 24, NOIDA-201301

Uttar Pradesh, India

Website: www.vvgnli.gov.in