

THE CONCEPT OF STAND AND WORK: AN IGNORED BUT SERIOUS HEALTH HAZARD

Lord Wasim Reza¹ and *Md. Asadullah²

¹*Social Entrepreneurship – Actions for Inclusive Development, New Delhi, India*

²*Department of Public Health, Manipal University, Karnataka, India*

**Author for Correspondence*

ABSTRACT

Growing corporate culture in India forces employee to 'stand and deliver'. It is believed that standing and receiving a customer is courteous. This stand and work culture is practised in malls, hotels, airlines, hospital and many other places, where standing is not required unlike police and army job. Long hour of standing leads to many short-term and long-term detrimental health consequences. These ill-health consequences range from discomfort, muscle fatigue, work related musculoskeletal disorder, chronic venous insufficiency, varicose vein, back pain, preterm birth and spontaneous abortion, birth defects, and carotid atherosclerosis. This paper aimed to assess the health consequences of prolonged standing. Focus group discussion was carried out with two employees during 2011-2012. The common health problems found in the study were fatigue, nocturnal leg cramp, headache, lack concentration, backache, body pain and joint pain. Other consequences included irritability, loss of social networking, insecure feeling for losing job were highlighted in results. A media campaign, health awareness, legislation against stand & work and medical benefit is necessary to curb the growing unethical practice.

Key Words: *Prolonged Standing, Stand and Deliver, Varicose Vein, Nocturnal Leg Cramp Development, A-45 Shaheen Bagh, Jamia Nagar, New Delhi, India*

INTRODUCTION

Post-liberalization and economic boom comes up with huge opportunity and employment for all social class in service industry. In this era shopping malls, fast-food chain etc. had grown to extent that we can find it at every corner. This corporate culture brought serious health risk in form of corporate discipline in employee's life. The discipline 'stand and deliver' indicates that the employees need to stand throughout his working hours that can be more than 8 hours. In United Kingdom almost 11 million workers deliver on their feet. Every year over 2 million sick days are lost due to lower limb ailment. About 200,000 people report lower limb ailment (Trade Union Congress, 2005). A worker is considered to be exposed to prolonged standing if he/she spent over fifty percent of the total working hours during full work shift in standing position (Halim and Umar, 2011). In cities like Delhi or Mumbai, one employee stands for almost 12 hours, considering 2-3 hours travelling and 8 hours of work. The current pace of urbanization and modernization is giving birth to these cultures in south Asia. This problem is further aggravated by poor transport system and infrastructure of cities in south Asia (World Health Organization, 2010).

The 1991 census of India, divides work force into two groups, main and marginal. Main workers include people who worked for 6 months or more in a year, and marginal workers include people who worked for a shorter period⁴. This short period may be an unpaid labourer in a farm etc. The workforce involved in unpaid farm work and family enterprise may be considered in either of two (Census of India Report, 1991). Main work force comprises of 78%, and 22% are in marginal workforce. Out of total main workforce, 77% are male and 23% are female (Census of India Report, 2001). In the formal sector women's percentage at lower status jobs like receptionist, secretaries, dental hygienist and childcare worker is more in the Global context. In India, the percentage participation of women in workforce has increased in the modern era. Their presence is visible in IT/BPO, retail, hospitality and manufacturing. The report by Times of India states that 37% of total BPO employees, 35% of total retail, 33% of hospitality and 20-25% in manufacturing, are women employee.

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The practice of long standing (forced) is carried by educated men and women of lower socio-economic class, in hotel and hospitality industry, shopping malls, retail shop floor and even in hospitals. Hospitals are believed to be God's abode, and Doctor is considered as the other form of God. These practices are carried out in these holy places. Majority of these places do not require standing. Workers of lower status jobs are more likely to stand as compared to higher stature job, without access to sitting arrangement.

Prolonged standing at work has been linked to serious health risk. The commonly associated risks are stress, fatigue and discomfort, swelling of legs, pain in shins, knees, thighs, hips, and lower back. 8 hours or more of standing leads to hypotension in initial days and hypertension in later stage of life. It also causes worsening of existing coronary heart disease. Increased risk of preterm birth, birth defect and spontaneous abortion has also been reported. The back pain-associated work is twice as common in standing workers as those who sit and work. Pain is never inconsequential; it is body's way of telling that something is going wrong. Varicose vein and Achilles tendonitis is the most common disease found in prolonged standee (Tüchsen *et al.*, 2000). The change in posture is associated with change in blood pressure. Standing posture leads to decreased pressure and increase in pulse rate by 10-50% (Dickinson, 1927). It also leads to decrease in blood volume. The decrease in blood supply to vital organs requires more work by the cardiac muscle (Lawrence, 2008). This leads to thickening of the cardiac wall leading to cardiac disease in prolonged standee (Lawrence, 2008). The long week of physically demanding work could lead to significant foetal growth reduction in terms of weight (Maureen, 1997). It is not only job task but hours of work may also be important for pregnant workers. (Epidemiology 1997; 8:530-536) These standing jobs also place impact on the psychological health of worker. The occupational activity like standing, lifting, and climbing can affect the pregnancy in third trimester. A modest decrease was seen for third trimester standing, with a mean adjusted birth weight about 30 gm lower in women standing 8 or more hours per day, compared to women standing fewer hours (Maureen *et al.*, 1997). The long exposure to stressful environment leads to mental health problems to a person (William and Ian, 1994).

The international and national regulations also advocate the work place safety in one or other form. India is signatory to Universal declaration of human rights, International covenant on economic, social and cultural rights and Montreal declaration. All these international regulations advocate the human rights and safety. Safety of human is of the prime concern for organization and nation. Universal declaration of human rights in article 23 says, "Everyone has the right to work, to freedom of choice employment, to just and favourable condition of work and protection against unemployment (United Nation, 1949). In the Article 7B of international covenant on economic, social and cultural rights (1976) advocates about safe and healthy working conditions (World Health Organization, 1976). Safety is a fundamental right and is essential for the attainment of health peace, justice and well being (Montreal Declaration, 2002). The Indian factory act 1948 also advocates for the health, safety and welfare of all workers. India is signatory to all of the international regulation and parliament, having its indigenous law in the form of Indian factory act – 1948. All of these laws defy unhealthy practices in the work place. Prolonged standing is also posing a serious threat to the health of worker and hence it should be in the ambit of law. The parliamentary bills for 'show girls' seat were placed on the table of parliament of England and Scotland in 19th century. Due to lack of proper scientific medical evidence, the bill was rejected in Scotland by the upper house which was opposed by Lord Salisbury (Nairne, 1899). The same bill was placed on the table of England before the parliament of England. The bill was passed and became a practical law. The bill was accepted in England by human grounds, although Lord Salisbury opposed here also, but failed. These workers usually receive the customer or security guard. A gender notion is also attached to this kind of work. Generally women workers are recruited at the reception and male workers as security guards, but now a day we also find females working as security guards. The workers at shop floor are also females in majority of the places.

The concept behind standing has rarely related with etiquette and politeness. This is obvious from the belief that says "Receiving the customer in standing posture shows courtesy and conveys the message of availability and sitting in presence of customer reflect rudeness" (Professor Karen Messing, University of

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Quebec and Montreal). On the contrary, doctors and lawyers who are having higher social stature receive their customer in sitting posture. In this case our society does not notice rudeness and turns a blind eye. The job is same with different standards. This contradiction is a reflection of the concept of hierarchy prevalent in work settings and it may be classified as one form of slavery. Dr. Arthur Edis called to end “slavery in the west end” in his letter to *Times* 7th November 1878, with the warning of dire health consequences for London’s Shop assistant for their constant standing. *Lancet* in 1880 called this cruelty to women in it editorial (Cruelty to women (*Lancet*), 1980). These workers as are always at non-negotiable position in corporate sector. They are having risk of losing their job, especially when it comes to semiskilled or unskilled, therefore, they never raised their voices in corporate setting they do not have unions which can bargain on their behalf. In India, standing was never treated as an occupational hazard. If standing is required, then there should be regulation enforced by Government to protect the human resources. Stand and Deliver is associated with serious health Hazard on the productivity of Human beings.

MATERIALS AND METHODS

The finding presented is based on observation; interview and complaints registered by us from March 2011 to January 2012 in shopping malls, hospitals, hotels on shop floor staff, front desk staff, security personnel, food chain and janitor personnel, especially women employees in Delhi and Mumbai. The data is qualitative in nature. Focus group discussion with two workers was conducted who were forced to stand for longer duration during the office hours. The help of previous medical research was taken to know the health impact of prolonged standing.

Observation at Work Place

During the morning hours the employees did not show any signs of tiredness, their psychological state and response was receptive and they interacted and helped easily. In the peak hours or in rush they behave in unavailability and look tired. The front desk employees stand on one leg for some time and then shift to other and this continue for their entire working hours. This shifting of the body load is more frequent in the employees who wear high heels or other fancy shoes. They also lean towards any object for support like wall or desk. These people try to walk in their limited space. The janitorial employees sit on the floor or take support against a wall in free time. The behaviour of employees at retail shops is also similar. They take support of any object such as racks to stand or walk around. The workers of food chain are standing with the support of the table in-front of them. Security employees do not have any support in and around their working area. In this case they use their fire arm to get support. The common tendency was visible in the entire employees of all sectors, “They show attention when manager or any senior employee comes.” In the hospital where we carried out ethnographic study, employees of front desk showed attention when manager or doctor was present in and around, during that period they did not show any tiredness and showed their 100% availability. This reflects, standing is not a choice, but is forced on them.

Interview

We got two employees to interview, one in Delhi and other in Mumbai. Both the employees were females. The employee from Delhi was a 24 year old, unmarried woman, working with a reputed hospital in Delhi as a front desk assistant. We conducted a detailed study on this employee with regular follow-up. The work duration was 8.5 hours in standing with the gap of 30mins. Here in table no. 1, the daily work schedule of the employee is given, although sometimes it is 11:30 to 8:00 PM or even later.

She worked 8 hours 10 minutes in a standing position. Apart from this, she walked for 1 hour to her residence and cooked for almost one hour in standing position (morning and evening). In total she spent almost 11:10 hours in standing. She was also in hurry during lunch break to reach the work station as soon as possible, because of intense work load. The shortage of staff added stress to her and other colleagues.

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Table1. Shows the Working Schedule of respondents

Time	Purpose	Posture	Duration
Just before 8:00AM	Change of dress	Standing	10 Min
8:00 AM to 11 AM	Work	Standing	3 hour
11:00AM to 11:10AM	Tea Break	Sitting	10 min
11:10AM to 1:30PM	Work	Standing	2 Hour 20 min
1:30PM-2:00PM	Lunch Break	Sitting	30 Min
2:00PM – 4:30 PM	Work	Standing	2 hour 30 min
After 4:430	Change of dress	Standing	10 min

This girl was quite cheerful and well-behaved. She was motivated to do something in her life. She loved to interact with people and help them. In contrast her mood was completely reversed when she came home after long and tiresome office hours. She was not able to read and write anything because of tiredness and fatigue. Sometime she missed dinner due to tiredness. Her behaviour was completely changed after work. She did not talk to anyone in proper manner, even with her family members and friends. Post work, she showed anger and irritation towards everyone. Due to this behaviour many of her friends avoided meeting or socializing with her. She stated *“Standing long day is killing me and my behaviour. I am under huge mental and psychological trauma,”* This factor was adding to her psychological stress. She complained about muscular fatigue and cramps in legs. Due to pain in sole and ankle joint she purchased flat sole shoe. She also complained about headache and back pain continuously for many days. She was addicted to NSAIDs like ibuprofen, to combat the headache and body pain. She also faced more difficulty during her menstrual period. During this period, she was not able to stand for longer duration and she missed the work and went for unpaid leave. She generally missed 3-4 days of work apart from Sunday and sum holiday in a month. According to her she did not enjoy the work as well. She stated, *“I’m doing work just to gain experience, pass my time and will switch to better place soon.”* According to her high rate of attrition was there which lead many people to quit their jobs as soon as possible. When asked why were they working in such inhuman and terrible conditions? She replied they were not having job opportunities and options to shift or change to other jobs. They were forced to work due to some constraints like poor financial condition of family and also to relinquish the dependency on parents and family. They did not have union to oppose this inhuman behaviour of the organization and demand or employees rights. The organization did not provide work on rotation basis, which is crucial for a tiresome job. When asked about the health consequences of prolonged standing? She denied and stated that the employer did not tell them about the health consequences of the job, either orally or in written. The informed consent was not obtained from the employee during the recruitment process however a medical examination was carried out for the fitness to the job. She stated *“We can’t do anything and we have to work, because there is so much competition for a job”*.

The other interviewee is a working girl in a shopping mall in Mumbai. She said she keeps on standing from 12:00PM to 8:30PM to deliver her services at the shop floor. She got tired and was not able to carry out any household activity at home. Her dress and shoes were also adding to her problem. She complained about headache, body pain, fatigue and muscular cramp in legs. She said *“I get so tired after work that i am not able to do any household work and go to sleep as soon as i reach home”*. She also suffered from pain in sole and ankle joint as well as other joints. She also complained that they did not get rotation during work and did not have any object or support to relax in the less busy hours at the mall. She took 2-3 unplanned leave in a month to get rid of her tiresome job. She was not aware of the health problems due to prolonged standing.

The interviewed employees had common problems in general. They were belonged to poor or lower middle income group. They were under stress of job insecurity and were lacking opportunity in market.

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They were not aware of the health consequences of prolonged standing. They did not have union to raise and support their voice against the corporate monopoly.

We asked a manager of a shopping mall to provide sitting arrangement to security guards, women workers around lift and also asked the other shop owners about the sitting arrangement. They were not available to comment. We wrote a complaint to the manager asking for sitting arrangement. After 2-3 days we got his response that these employees were getting rotation at times. Ironically, this response was baseless.

DISCUSSION

The people who work in standing position are either from low socio-economic background or from middle class in some sophisticated places like hospitals, hotels etc. The employees of these places are job insecure and or have limited opportunity.

The people who belong to lower socio-economic strata are usually unskilled and ample replacement is available, such as security guards, shop floor staff or Janitor staffs. They are receiving less salary, not able to take appropriate diet and are living in unhygienic places like slums. The other group of people belong to lower middle class. They are graduate as well as skilled labour. These people deliver work in hospitals or hotels. They are having less opportunity and high competition. These employees want to switch over to better places, but they cannot do so because of limited opportunity and high supply of manpower in the industry.

The Universal Declaration of Human rights in article 23, "Everyone has right to work, to free of choice of employment, to just and favourable condition of work and protection against unemployment." This article emphasizes on the favourable conditions of work and protection against unemployment. Since our working environment ranges widely from factory floor to service industry, it is required to take the service industry in the ambit of occupational hazard and human rights and a regulation should be formed to provide safe working conditions. The Montreal Declaration 2002 where India is one of the signatory clearly advocates that "safety is fundamental right and it is essential for the attainment of health peace, justice and well being." The safety and healthy working condition are also advocated by International Covenant on economic, social and cultural rights, 1976. The Indian Factory act, 1948, which comes under the purview of Ministry of labour also states in chapter II, 'for reasonably practicable, the health, safety and welfare of all workers who are at work in the factory'. It also advocates ensuring the safety, and absence of risks to health. The organization comes under the ambit of Indian factory act, where minimum 10 people work under the roof with power and 20 people in case of hand-operated industry. Hospital and hotel is also a place where more than 10 people work to deliver the services. The Indian factory act talks more about the manufacturing places. Shopping malls, food chains, hotels and hospitals are places where services are provided by manpower to the customer. Hence, there should be a law to ensure safety of the workers in these sectors and protect the employee's rights.

Mental health has not been considered in the factory act, 1948. Posture related standing (forced) for longer duration aggravates stress, and impinges psychological effect on the worker. Standing for longer duration is causing fatigue, muscular cramp, joint pain etc. to workers. The physical health of an employee is quite compromised in "stand and deliver." Prolonged standing increases the risk of varicose veins. Women are one of the vulnerable groups affected by prolonged standing, pregnant women being more prone to miscarriage and delivering low birth weight babies. They also face difficulty during menstrual period, and standing for longer duration makes their life a nightmare in this period. The persistent stress levels also expose them to serious health threats like cardiac disease. The congestive heart failure is increased when the women are suffering from anaemia. It is wide known fact that anaemia is prevalent among Indian females¹⁹. The stress due to prolonged standing and anaemia doubles burden on their life. After menopause, a woman goes under several hormonal changes, which add to their stress. Osteoporosis is widely seen among the women after menopause⁹. The constant injury due to standing is adding factor in osteoporosis of the joints. This results in knee joint problem. All these diseases increase

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the morbidity of female workers as well as that of males. This morbidity is more critical for women's health as the Indian society is under the blight of gender discrimination.

'Stand and deliver' is more related to cultural and social class related activities, rather than desired. Standing was never a part of our culture. Receiving customer in standing posture shows courtesy and availability, while sitting in front of customer or senior manager reflect rudeness. This is true for the employee who works at lower stature jobs. It is evident that doctors and lawyers receive their client (customer) in sitting posture everywhere across the globe. Are they do not show rudeness to their clients/customer? No, our society does not consider it as rudeness, but when the same activity is carried out by workers of lower stature jobs, it is treated as rudeness. This rudeness may be detrimental to their physical as well as psychological health. Our society does not bother about it because we still carry our age old social-class culture. This prolonged standing (forced) of the workers by the employer (Master) is just a matter of class. This class culture in modern age only shows the burden of slavery to the lower socio-economic workers. This is a form of slavery, which can be addressed as neo-slavery.

The employee of this category is not able to bear the treatment costs of diseases like congestive heart failure, knee joint problem or varicose veins. These workers are not permanent and they can work only till their healthy body allows. They do not have the access to the treatment of serious and, other chronic diseases. These diseases increase the morbidity among the workers and they become a burden on their family as well as on nation.

The corporate world denies the existence of labour union in their premises. The non-existence of any union is adding in the suppression of the voices of marginalized labour force. These workers are always at non-negotiable position with the risk of lay off. Their non-negotiability is a boon for corporate word and is adding atrocities in the name of discipline. This is high time that the Government of India comes up with legal solution for the prolonged standing.

Suggestions

1. Standing should not be mandatory but should be left on the choice of individual employee.
2. Women should not be made to stand for longer duration and should be given options.
3. A chair with suitable height may be provided for sitting.
4. Informed medical consent should be practised before hiring.
5. An awareness campaign should be there to address the health hazards of prolonged standing.
6. A legislation should be enforced to curb the detrimental health effects practised by corporate
7. If standing is required for the employee, then it should be on rotation basis, and should not exceed 30% of the total work duration.

Rights-based approach along with strict regulation is required to curb this inhuman trend in India as well as across the globe, especially for women. We are not advocating only sitting arrangement, but we emphasize that standing should not be forced. The standing (forceful) is associated with the slavery and social hierarchy. Standing for respect is expected from the people of lower of social stature or those works on socially inferior stature job like reception, security guard etc. This is also associated with corporate work culture hierarchy. The cultural legitimacy and work culture hierarchy should be denied to preserve the health of people who are forced to deliver on feet. This will protect the health of people on one hand and increase the efficiency on the other, which will contribute the in the productivity of nation.

Limitations

The limitation of the study was that it was based on response of two participants. A detailed study is required to assess the social factors and behaviour changes of worker in prolonged standing. A study on the stress levels and its impact on the health of women employees (who work for more than 8 hours a day) are required.

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