

OCCUPATIONAL HEALTH RISK OF CONSTRUCTION WORKERS: A SAMPLE BASED STUDY

G. BISWAS, M. ALI, R. BHATTACHARYA

Department of Environmental Science, University of Kalyani, West Bengal 741235, India.

Accepted Date: 11/06/2016; Published Date: 27/06/2016

Abstract: Building construction workers are casual, poor and migratory. They are unaware about their health status. Due to wrong body postures and prolonged work, they suffer from Musculoskeletal disorder. A study is conducted to investigate the occupational health hazard on mason workers at different construction sites of Murshidabad and Nadia district of West Bengal. 124 working postures of four major construction activities i.e. brick carrying, cement mixing and carrying, mason work and roofing are analyzed by OWAS method. About 37.5%, 24.2%, 38.2% and 78% working postures related to brick carrying, cement mixing and carrying, mason work and roofing are fall in the action category 4 causing harmful effect on the musculoskeletal disorder. In addition environmental stress for working under open sky and socio economic conditions are responsible for their ill health. A modification of awkward body posture along with other preventive measures are suggested which will be beneficial to reduce their musculoskeletal pain.

Keywords: Construction workers, musculoskeletal disorder, BPD scale, OWAS method



PAPER-QR CODE

Corresponding Author: MR. G. BISWAS

Access Online On:

www.ijprbs.com

How to Cite This Article:

G. Biswas, IJPRBS, 2016; Volume 5(3): 129-141

INTRODUCTION

Building construction is badly needed for the development and industrial growth of a country. In India about 170 million workers are associated with construction industries. But most of them are unorganized and migratory in nature. They travel from one city to another for searching a job. Hence the relationship between employer and employee are casual. They are not enjoyed or aware about different security schemes ^[1-3].

Injury and illness rate of construction workers are significant among the major industries according to US Department of Labor^[4] and UK Government's Health and Safety Executive^[5].

In addition to daily work load they have to face environmental stresses because most of the time they have to work under open sky. Heat stress has significant impact on cardiovascular and thermoregulatory systems of the worker. They are not clothed properly and maintain work – rest cycle ^[6-8]. Therefore environmental stress may affect their efficiency.

Construction work related risk factors were first pointed out by Snook ^[9]. Award posture, repetitive action, working on elevated surfaces, manual handling of raw materials etc are the major factors for the mason workers. Musculoskeletal disorder is one of the occupational problems of the construction workers causing reduced productivity and poor living quality ^[10].

Many scientists and researchers have reported about different occupational health hazards among construction workers ^[11-20]. Due to very low cost of manpower in developing countries, manual handling of different objects are seen almost every construction site which caused most of the industrial injuries ^[21].

METHODOLOGY

Study area:

Murshidabad district of West Bengal is situated in the eastern part of India, is 182 km away by road from the state capital Kolkata. It is located on the left bank of the river Ganga and separated into two distinct halves by the river Bhagirathi. It has a population of 71, 02, 430 according to 2011 census with covering area of 5341 square km which makes it the 9th most population district in India. This district has a male-female ration 957:1000 with 67.53% literacy rate. This region lies under the tropical wet and dry climate according to Koppen Climate Classification. The annual temperature ranges from 12°C to 40 °C with a mean temperature of 27 °C. Most of people of this district belong to lower socio-economic classes and it is now under the Backward Regions Grant Fund Programme (BRGF) as Murshidabad marked as one of the 250 most backward districts of India ^[22]. Most people of this region are engaged in agricultural activities, metal and brass work, Silk woven activities and construction works.



Nadia district of West Bengal is about 112km away from the city Kolkata and it is surrounded by Bangladesh, North 24 Parganas and Hooghly districts, Bardhaman and Murshidabad to the East South, West and North respectively. The population of Nadia district is about 5,168,488 according to the 2011 census. This district has a male-female ration 1000:938. Moreover the line of cancer 23½°N is passing through this district. So the climate of Nadia district is characterized by hot summer; high humidity all the year round and well distributed rainfall during the south west monsoon season having on an average 125 rainy days. The cold season is from about the end of November to the end of February. Most people of this region are engaged in agricultural and handloom related works.

Subject selection:

The survey is conducted at different building construction sites of Murshidabad and Nadia district in West Bengal. Four construction jobs i.e. (i) Brick carrying, (ii) Sand-Cement mixing and carrying, (iii) Mason work and (iv) Roofing of 100 mason workers are selected for video recording and posture analysis.

Physical and physiological parameters:

Height and weight of the construction workers are measured by an anthropmeter and weighing machine respectively and Body Mass Index (BMI) of the workers is calculated by using the following formula ^[23]:

Body Mass Index (BMI) = Weight (kg)/ Height (m²)



Body Part Discomfort Scale:

Figure 1: Pain Assessment Tools of different body parts

Discomfort or amount of pain feeling of the workers is measured by Body Parts Discomfort (BPD) scale proposed by Jacquelin *et. al.* (1994) ^[24] as shown in Fig. 1. It is a 10 point visual analog scale ranges from one to ten where one indicates slight pain or discomfortibility, five marks as medium pain and 10 shows very severe pain.

Working Postures:

Working postures are analyzed using OWAS method with the help of video recording process ^[25-27]. Then each task is taken at 10 second interval freeze frame video and posture codes are noted. Four main task of construction activity are selected for the posture analysis. Sample working postures of construction workers are given in Table 1.

Work	Photograph	Stick Diagram	Work	Photograph	Stick Diagram
Brick carryin g	OWAS 2,2,4,3=4		Brick work	Owas 3,1,5,1=4	R
	OWAS 2,1,4,1=3			OWAS 2,1,4,1=3	OT
Sand- cement mixing and carryin g	OWAS 4,1,4,1=4		Roof work		
	Owas 2,1,4,1=3		7	OWAS 2,1,4,1=3	\mathcal{I}

Table 1: Working postures and action category for four construction tasks

RESULTS AND DISCUSSION

Physical characteristics of the workers are presented in Table 2. From the survey it is observed that 11% mason workers have age below 30 years. 68% belong to mid age group i.e. 30 to 45 years and the rest are above 45 yrs. Workers are mainly the only earning member of the family. 62% have to maintain a family more than six members having monthly income about Rs. 500 per head. 96% of the workers live in slum area but most of them (85%) have normal BMI.

Parameters	Mean±SD	Ranges
Age (years)	38.7±6.4	20-50
Height (m)	1.65±0.08	1.48-1.82
Weight (kg)	63.4±4.5	52-72
ВМІ	23.3±1.7	18.4-28.3

Table 2: Physical parameters of the construction workers

Total 124 frequently maintain working postures of four main construction activities are analyzed by OWAS method and frequency distribution of the detailed codes are represented in Table 3. It is seen that most frequent brick carrying posture codes for back and arm are 4 (37.5%) and 1 (54.2%) whereas most frequent leg and load codes are 4 (squatting with knees bent) and 1 (weight handled <10 kg) respectively. In case of sand-cement mixing and carrying, the frequently maintain back code is 2 (39.4%) i.e., back is bent forward or backward followed by most harmful back code 4 (30.3%). In this process, both arms are below shoulder level during most working postures with squatting legs with both knees bent (45.5%) and load handled is <10 kg (69.7%). Back code 4 (32.3%) is obtained most frequently during brick work activity whereas 50% squatting leg postures (with both knees bent) are also seen. In the roof working process, most of the workers (69.7%) maintain their back as bent and twisted position with both arms below the shoulder level (54.5%). Almost all the workers (94%) in roof working process maintaining their legs as squatting with bent knees position whereas in 33.3% cases they need to handled load between 10-20 kg. Average OWAS codes for back, arm, leg and load are presented in Table 4 and it is observed that highest average back and leg code score are found during roof work and sand-cement mixing carrying activities. Brick carrying process

OWAS codes	Brick carrying	Sand-cement mixing and	Brick work	ork Roof work		
	(n=24)	carrying	(n=34)	(n=33)		
		(n=33)				
Back						
1	5(20.8%)	8(24.2%)	7(20.6%)	2(6.1%)		
2	7(29.2%)	13(39.4%)	7(20.6%)	8(24.2%)		
3	3(12.5%)	2(6.1%)	9(26.5%)	0		
4	9(37.5%)	10(30.3%)	11(32.3%)	23(69.7%)		
Arm						
1	13(54.2%)	21(63.6%)	31(91.2%)	18(54.5%)		
2	4(16.7%)	4(12.1%)	3(8.8%)	9(27.3%)		
3	7(29.1%)	8(24.2%)	0	6(18.2%)		
Leg						
1	0	0	0	0		
2	4 (16.6%)	10(30.3%)	10(29.4%)	1(3.0%)		
3	1(4.2%)	0	0	0		
4	15(62.5%)	15(45.5%)	17(50.0%)	31(94.0%)		
5	1(4.2%)	1(3.0%)	4(11.8%)	0		
6	0	0	1(2.9%)	0		
7	3(12.5%)	7(21.2%)	2(5.9%)	1(3.0%)		
Load						
1	14(58.3%)	23(69.7%)	34(100%)	22(66.7%)		
2	2(8.3%)	10(30.3%)	0	11(33.3%)		
3	8(33.3%)	0	0	0		

Table 3: Frequency distribution of construction postures

Shows the highest mean arm code scores with highest load handled scores. Figure 2 illustrates the frequency distribution of OWAS action category during four main processes of construction work. It is noted that 29.2%, 27.3%, 20.6% and 37.5%, 24.2%, 38.2% working postures of brick carrying, sand-cement mixing and brick work respectively are fall in the action category 3 and 4 which indicates these postures have distinct to extreme harmful effect on the musculoskeletal system of construction workers. As most of the roof works are done in squatting position, it is observed that 78.8% roof working postures are fall in the most severe action category 4. 23% and 45% postures of total construction work are also falling in

OWAS codes	Brick carrying (n=24)	Sand-cement carrying (n=33)	mixing	and	Brick work (n=34)	Roof work (n=33)
Back (1 – 4)	2.66	2.42			2.70	3.33
Arm (1 – 3)	1.75	1.60			1.08	1.63
Leg (1 – 7)	4.04	4.06			3.76	4.03
Load/force (1 - 3)	1.75	1.30			1.0	1.33

Table 4: Average OWAS codes for construction processes

The AC3 and AC4 (Fig. 3) indicating workers' wrong and harmful working postures in this sector. In general, the workers have to engage in their masonry work for more than 8 hrs per day with an interval of lunch break at about 13:00 hrs (IST). The work generally starts from 09:00 hrs (IST) and continues even after 18:00 hrs (IST) to complete the task for that day.

The prolonged working hours for days together give rise to musculoskeletal disorder and pain. Regarding the intensity of pain about 48% feel moderate pain provided they worked more than twenty years and belong to the age group above 45 years.



Figure 2: Frequency distribution of action category of different construction processes





CONCLUSIONS

33% brick carrying postures are found severe to very severe action category (3 and 4) due to workers' lifting high load with bent and twisted back and squatting leg positions. Bent and twisted back, both knees bent squatting leg position with raised arm makes 25% sand-cement mixing and carrying postures extremely harmful for the musculoskeletal system. More than 38% brick work postures are also found in OWAS action category 4 due to frequently maintain wrong back and leg positions. As 94% workers done the roof work in very harmful squatting with knees bent position and it is interesting to observed that about 79% roof working postures are fall in the most sever action category 4. It is found that about 45% working postures of whole construction process are in the OWAS action category 4, it suggests corrective measure should be taken immediately as these postures have extreme harmful effect on the



musculoskeletal system. Only 20.9% working postures are found as normal postures without harmful effect on the musculoskeletal system of the workers.

83% of the workers have experienced musculoskeletal related discomfort and pain after daylong hard work. It is noticed that workers having age about 30 years with less than five years experience have no musculoskeletal problem. Upper body pain is the major discomfort reported by 68% workers. Intensity of pain of ~48% workers fall in the range moderate to high according to BPD scale.

Sitting support in all types of squatting leg position in construction work has a positive feedback in lowering the risk of musculoskeletal disorders. It is observed that over Kalyani, Nadia more than 41% days of summer and 70% monsoon days are fall in discomfort zone. Therefore proper work-rest cycle and adequate fluid intake following ACGIH guidelines ^[28] and USARIEM ^[29] may help to overcome health problem related to environmental stress. In addition some modification of awkward body posture will be beneficial to reduce musculoskeletal pain as shown in Table 5.

Posture	C1	C2	С3	C4	C5	C6	С7	C8
Brick carrying	+		+	+		+	+	+
Sand-cement mixing	+		+				+	+
Brick work	+		+		+	+	+	+
Roof work	+	+	+		+	+	+	+

Table 5: Suggested Control measure to reduce health problems

C1 – Stop twisting of back, C2 – Use arm support, C3 – Stop squatting of legs, C4–Reduce of load, C5 – Use sitting support,C6- proper work rest cycle, C7- Fluid intake and C8 - Regular health check-up

ACKNOWLEDGEMENTS

Authors are thankful to the University Grants Commission, New Delhi and University of Kalyani for the financial support. Authors are also grateful to all the workers of the study for their active participation and co-operation.

REFERENCES:

1. Tiwary G, Gangopadhyay PK, Biswas S, Nayak K, Chatterjee MK, Chakraborty D and Mukjerjee S: Socio-economic status of workers of building construction industry, Ind. J. Occupa. Med., 2012; 16(2): 66-71.

2. Shah CK and Mehta H: Study of injuries among construction workers in Ahmedabad city, Gujarat, Ind. J. Pract. Doctors, 2009; 5: 6.

3. Maiti R: Workload assessment in building construction related activities in India, Appl. Ergon., 2008; 39(6): 754-765.

4. US Department of Labor: Occupational injuries and illnesses in the United States by industry, 1990. Bureau of Labor Statistics Bulletin 2399, US Department of Labor, Washington, DC, 1992.

5. Health and Safety Executive (HSE), Health and Safety Highlights 2002/2003, National Statistical Publications, London, 2003.

6. Epstein Y and Moran DS: Thermal comfort and heat stress indices, Industrial health, 2006; 44: 388-398.

7. Bhattacharya R, Biswas G, Guha R, Pal S and Dey SS: On the variation of summer thermal stress over Kolkata from 1995 to 2009, Vayumondal, 2010; 36: 16-21.

8. Bhattacharya R, Pal S, Biswas G, Karmakar S and Banik R: An estimation of heat stress in tropics, Int. J. Eng. Sci. Tech., 2012; 4: 4302-4307.

9. Snook SH: Low back pain in industry, symposium on idiopathic low back pain. In: A.A. White and S.L. Gordon, Editors, Mosby Company, St. Louis, 1982; 23–38

10. Kee D and Karwowski W: A comparison of three observational techniques for assessing postural loads in industry, Int. J. Occup. Safety Ergon., 2007; 13(1): 3-14.

11. Stubbs DA and Nicholson AS: Manual handling and back injuries in the construction industry: an investigation, Journal of Occupational Accidents, 1978; 2: 179 – 190.

12. Wickström G: Symptoms and signs of degenerative back disease in concrete reinforcement workers, Scand. J. Work Environ. Health, 1978; 4 (Suppl. 1): 54–58.

13. Damlund M, Goth S, Hasle P and Munk K: Low back pain and early retirement in Danish semi-skilled construction workers, Scand. J. Work Environ. Health, 1982; 8 (Suppl. 1): 100–104.

14. Grandjean E: Occupational health aspects of construction workers. World Health Organization (WHO), Geneva, 1983.

15. Burdorf A, Govaert G and Elders E: Postural load and back pain of workers in the manufacturing of prefabricated concrete elements, Ergonomics, 1991; 34: 909–918.

16. Sorock GS, Smith EO and Goldoft M: Fatal occupational injuries in the New Jersey construction industry, 1983–1989, J. Occup. Med., 1993; 35: 916–921.

17. Sillanpaa J, Lappalainen J, Kaukianen A, Viljanen M and Laippala P: Decreasing the physical work- load of construction work with the use of four auxiliary handling devices, Int. J. Ind. Ergon., 1999; 24(2): 211–222.

18. Vedder J and Siemers M: Accidents and safety in the construction industry. Procee. of the XVth Triennial Congress of the International Ergonomics Association, Seoul, Korea, 2003; 6: 19–22.

19. Chi C, Chang T and Ting H: Accident patterns and prevention measures for fatal occupational falls in the construction industry, Appl. Ergon., 2005; 36 (4): 391–400.

20. Haslam RA, Hide SA, Gibb AGF, Gyi DE, Pavitt T, Atkinson S and Duff AR: Contributing factors in construction accidents, Appl. Ergon., 2005; 36 (4): 401–415.

21. Singh R: Indian labour statistics. Ministry of Labour, Government of Maharashtra, Industries, Energy and Labour Department, Mantralaya, Mumbai, India, 2000.

22. Ministry of Panchayati Raj: A Note on the Backward Regions Grant Fund Programme. National Institute of Rural Development, 8th September 2009.

23. Key A, Fidanza F and Karnoven MJ: Indices of relative weight and obesity, J. Chronic. Dis., 1972; 25: 329-343.

24. Jacquelin LR, Drury G and Richard LB: A field methodology for the control of musculoskeletal injuries, Appl. Ergon., 1994; 25: 3-16.

25. Karhu O, Kansi P and Kuorinka I: Corrective working postures in industry: a practical method for analysis, Applied Ergonomics, 1977; 8: 199–201.

26. Kant I, Notermans JHV and Borm PJA: Observations of working postures in garages using the OVKO Working posture Analysis System and consequent workload reduction recommendations, Ergonomics, 1990; 33: 209–220.

27. Paquet VL, Punnett L and Buchholz B: Validity of fixed-interval observations for postural assessment in construction work, Applied Ergonomics, 2001; 32: 215–224.

28. ACGIH: TLVs and BELs. Threshold limit values for chemical substances and physical agents and biological exposure indices, ACGIH Signature Publications, Cincinnati, 168-176, 2004.

29. USARIEM: Heat injury prevention programme, Appendix 1: Commander's, senior NCO's and instructor's guide to risk management of heat casualties, 2005; (http://www.usariem.army.mil/HealthInjury.htm)