

# THE HEALTH CONDITIONS OF FARM LABOURERS

In the following section, **CRITICAL HEALTH** focuses on the position of farmworkers.

Farmworkers are one of the largest and most exploited sections of the labour force in South Africa, and face a variety of occupational diseases and injuries due to poor working conditions. Similarly, poor living conditions expose them to a variety of health problems.

The first article in this section looks at the kinds of conditions farm labourers are forced to live and work under. It shows how these conditions are related to the health problems experienced in farming communities.

It also looks at the position of farmworkers under South African law.

In the second section, **CRITICAL HEALTH** talks to Dr Prakash Vallabh, of the Health Workers Association, on the Jacksonsdrift Clinic project.

He points to the problems that people living on farms in the Jacksonsdrift area experience, and the difficulties involved in trying to set up a viable health service there.

Most importantly, it points to the advantages of setting up a comprehensive and alternative, community-based health service.

## THE POSITION OF FARMWORKERS

**"It's camouflaged slave labour"**

Farm labourers are trapped by a variety of laws to remain on white farms. They have little control over the conditions under which they work, and few prospects of changing those conditions. This is due to their disadvantaged position under the law and their difficulty in joining trade unions.

Most of the time farmworkers remain "out of sight and out of mind" of the public eye. Occasionally, newspaper articles or research highlight the daily experience of living and working conditions, which are often sub-human.





Women and children are paid less than men for doing the same work

# LIVING CONDITIONS AND THEIR EFFECT ON HEALTH

## General health problems

The health, general welfare and safety of farmworkers cannot be separated from their living and working conditions.

While it is possible to differentiate between general health problems arising from poor living conditions, and occupational diseases and health hazards arising from poor working conditions, the two are interrelated and often reinforce each other.

The health implications of inadequate living conditions and conditions of service, are many and varied.

## Poor wages

Firstly, farmworkers in South Africa receive extremely low cash wages. Despite the provision of housing, rations and land (in some cases), the overall wage structure remains inadequate. Some farm labourers receive no cash wages at all or amounts as low as R6.00 a month. Others receive an average of R25.00 to R45.00 a month. (Farm Labour Report 1982).

Further, women and children are paid less than men for doing the same work, while casual or seasonal labourers are paid at lower rates than workers employed full-time.

The lower salaries in particular do not even enable workers to supplement inadequate rations. Malnutrition is thus rife amongst farm workers and their families. As a result, children particularly are susceptible to measles, chest infections and gastro-enteritis.

Often the reason given for the payment of low wages is that workers receive payment in kind. Yet research has revealed that over the last twenty years, farm workers have seen a drop in the value of their wages and thus in their living conditions generally.

One of the major reasons for this decline in living conditions has been the abolition of squatting and labour tenancy on white farms. This has made the farmworker totally dependent on the wages paid by the farmer.

## Employment conditions

Similarly, with respect to hours of work, annual leave and sick leave, the worker is at the mercy of the farmer's goodwill. There is no common law right to public holidays, sickpay or leave pay, nor is there a legal limit to the farmworker's working hours.

The common practice appears to be dawn-to-dusk with an hour off for breakfast and lunch respectively. However, because there are no regulations, the farmworker



is open to abuses by the farmer. It has been found that some workers may work 70 hours in one week.

Annual leave and public holidays are regarded by most farmers as privileges and not rights. There are no legal provisions regulating this.

Most farmworkers are compelled to work when they are sick, or have to forfeit part of their wages for not being at work while ill.

It is not surprising therefore, that many farmworkers suffer from psychosomatic diseases resulting from excessive stress, exhaustion and monotony.

## Housing

Another reason farmers give for paying low wages is that they provide housing for their workers. However, the quality of housing is extremely poor.

While conditions on farms may vary, the general picture is one of overcrowding, poor ventilation and inadequate sanitation. Toilets, washing facilities and running water are often not provided.

One farmer, commenting on his labourers' living conditions, said: "... they prefer to live in these conditions. They are happy. To you and me they are shocking. This is absolute filth as far as we are concerned. Our conscience does worry us sometimes, but we have bigger problems, like finance" (Sunday Tribune, 12/11/78).



**Farmers fail to ensure regular medical check-ups and immunisation for children**



## Water supply and sanitation

The health implications of such conditions are many and obvious. In 1980, a study of farm labour accommodation facilities on 20 farms, found that the water supply came directly from a natural source (dam, borehole, river). In no case was the water purified, processed, monitored, screened or subjected to any form of surveillance. In only 5 of the 20 cases was water piped directly from the source to the point of supply, where it was available on tap. On the remaining 15 farms the water was carried from the source to the point of supply.

Under such circumstances water can easily become contaminated, either from seepage or from human and animal excreta. This is especially likely to occur where farming settlements are located on the banks of rivers or dams and where there are inadequate sewerage facilities. The lack of adequate facilities results in personal ablutions, washing of clothes and recreation taking place in the communal drinking water supply.

Bacteria which thrive on such conditions are those of cholera and typhoid - diseases already reaching epidemic proportions in South Africa. Other diseases which spread through contaminated water and through insects which breed in it, are malaria and trachoma. These diseases spread rapidly through farming communities.

## WORKING CONDITIONS AND THEIR EFFECT ON THE HEALTH AND SAFETY OF FARMWORKERS

"The right to work productively in a safe and healthy environment is a fundamental human right. Work should not be a source of misery and disease" (Farm Labour Report, 1982).

Recent trends in agricultural development have led to an increase in mechanisation and an increase in the use of chemical substances.

There is little research into the various agricultural health hazards, and how to minimize them. At the same time, there are no measures to enforce the use of adequate machine guards, masks and protective clothing. As a result, farmworkers are exposed to a variety of occupational injuries and diseases.

An estimated 300 farm workers die each year and approximately 2 000 are permanently disabled (Farm Labour Report, 1982). Accidents on machinery such as harvester, threshers and reapers are largely due to a lack of adequate training in the use of the machinery, and inadequate safety guards and protective clothing.

## Chemicals

The increasing use of fertilisers, weed killers, insecticides and other chemical substances, expose farmworkers to the toxic effects of such substances. The effects can range from dizziness and nausea to brain damage and even death.

As is the case with machinery, there is little or no procedure for monitoring the safe use of chemicals.



A report in *The Star* (22/9/80) notes that "With respect to pesticides there is the strictest control to manufacturer and even to seller - but when it gets to the farm, the road is open ...".

In *The Rand Daily Mail* (20/2/85) a professor of pharmacology was quoted as saying "Deadly pesticides are being used on farms with criminal carelessness".

Further, it was noted by an official from the Poison Information Centre that "...South Africa's death rate from agricultural poisoning is at least 20 times higher than in the US or Europe" (RDM 21/2/85). This was found to be linked to the use of unskilled labour and the reluctance to follow preventative and safety precautions in handling powerful poisons.



**Farmworkers are trapped by a variety of laws to remain on white farms**

## Other health hazards

In addition, there are a variety of diseases associated with the handling of animals by humans. Examples of these diseases are anthrax, glands, rabies, malta fever and tetanus. Despite the prevalence of such diseases in agriculture, very few are listed in the schedule attached to the Workmen's Compensation Act as compensatable diseases.

Other examples of diseases are those caused by agricultural dusts such as chronic bronchitis and emphyzema. Excessive noise may result in total or partial deafness. Illness and even death, associated with the temperature extremes under which workers are forced to labour, are not uncommon occurrences in the lives of farmworkers.

Assault and abuse is widespread, particularly in the case of child labour. Numerous press reports have highlighted case histories of brutalities inflicted by farmers as "punishment" on workers. Clearly, assault can be regarded as one of the health hazards for workers.

## Compensation

Farmworkers have only recently been brought within the scope of The Workmen's Compensation Act. While they are legally entitled to claim compensation from the state, their common law right to sue the farmer for damages is severely limited. Further, because of the extremely low wages paid to farmworkers, compensation which is calculated as part of the wage, is negligible.

## Inadequate Health Services

One of the biggest factors leading to disease and death of adults and children working on farms, is the lack of rural clinics and adequate health services. Farmers generally show a lack of concern for the health and welfare of their workers.

Where services do exist, the low wages and lack of transport prevent most people from using them. Failure to ensure regular medical check-ups and immunisation programmes for children, perpetuates the cycle of ill-health in many of South Africa's farming communities.

## The position of farmworkers under the law

The question arises as to how such conditions are allowed to exist. The key to understanding this is to look very broadly at the position of farmworkers under the law.

Historically, farmworkers have largely been excluded from South Africa's industrial relations legislation. They have been specifically excluded from the many acts which set out minimum health and working conditions, such as The Labour Relations Act; Wage Act; Minimum Conditions of Employment Bill.

Legislation which has been introduced over the last decade or so to protect the wages and working conditions of industrial workers, has not been applied to farm labourers.



## **The state's response to conditions of farmworkers**

In 1982 the National Manpower Commission was appointed by the Minister of Manpower, to look into the conditions of farm labourers and domestic workers.

*The commission called for interested groups around the country, who had recommendations to make regarding the position of farmworkers, to submit information.*

Amongst several detailed submissions was the Farm Labour Report. This detailed a multitude of abuses in the system controlling farm labour and made recommendations to the commission.

The most interesting aspect of this commission is that nothing has come of it, despite its initiation four years ago.

The possibility of re-examining the legal position of farm workers was received with hostility by farmers' organisations. The following quote suggests that the state has bowed to the interests of the farmers: "The object of the investigation", stated the minister, "was to protect agriculture from malicious attacks ... and to report on the particular problems with which agriculture is burdened in relation to the availability and stability of a sufficient number of workers." (Farm Labour and the Law, 1984).

## **The need for organisation**

Farmworkers are not legally prevented from joining trade unions. However, their biggest constraint is victimisation. There is no law preventing the victimisation of farmworkers by farmers.

Unless farm workers are able to organise effectively, improved living and working conditions will remain remote.

The best watchdog of farmworker interests are farmworkers themselves.

### **General recommendations for farmworkers**

- Wages be competitive with other sectors
- Security on the farms for workers and their families, whilst economically active and in retirement
- Decent housing
- Compulsory education for workers' children
- Incentives in the form of grazing rights and available land
- Social security and welfare grants commensurate with workers in other sectors
- The right to free association and collective bargaining
- Enforceable written contracts

(Farm Labour Report, 1982, p4)



## **Recommendations regarding general health care**

- Existing regulations dealing with the provision of sanitation, washing facilities, and running water be properly enforced
- That there be minimum conditions of service for farmworkers including provisions for sick leave and maternity leave
- That existing health regulations be extended so as to make employers part responsible for:
  - \*Regular dental and medical check-ups and immunisation of their employees and dependents
  - \*Transport to and from clinics and hospitals
  - \*Maintaining basic first-aid facilities on each farm
- That the Department of Health and the Department of Manpower liaise with regard to extending primary health care services and subsidising medical clinics in these areas.

(Farm Labour Report, 1982, p25)

## **The following sources were used in the above article:**

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6. Selected newspaper articles