

Socio-Economic and Health Status of Scheduled Caste Agricultural Labourers: A Case Study of a Selected Village in Telangana

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Abstract

Agricultural labourers constitute one of the most marginalized and vulnerable sections of rural society in India. Historically, the agrarian structure has been strongly influenced by the caste system, which determined access to land and other productive resources. In many rural areas, particularly in Andhra Pradesh, forward caste groups traditionally controlled the majority of agricultural land, while Scheduled Castes remained largely landless and dependent on wage labour for their livelihood. Although several land reform measures and redistribution policies were introduced during the 1980s under the leadership of state governments to address these inequalities, a significant proportion of Scheduled Caste communities still lack ownership of agricultural land and continue to work as agricultural labourers. In earlier periods, exploitative labour systems such as bonded labour and the Paleru system were prevalent in rural society, tying labourers to landlords through debt and social obligations. While these systems have formally declined, their exploitative nature continues to exist in different forms, including low wages, irregular employment, and social discrimination. Agricultural labourers often work under harsh conditions, performing physically demanding tasks for long hours with minimal compensation and limited social protection. These working conditions also have serious implications for the health and well-being of agricultural labourers. Due to continuous physical labour, exposure to chemicals, and lack of access to adequate healthcare facilities, many workers experience various health problems such as muscular pain, respiratory issues, and other occupational health hazards. Poverty and lack of awareness further contribute to the neglect of health among these workers. Against this background, the present study examines the socio-economic status of agricultural labourers belonging to Scheduled Castes and analyses the major problems and challenges they face in their livelihoods.

Keywords: Agricultural Labourers, Scheduled Castes, Landlessness, Rural Inequality, Labour Exploitation, Agrarian Structure, Rural Livelihoods, Social Discrimination and etc.

Introduction:

Human dignity is often shaped by one's occupation and socio-economic position in society. From ancient times, individuals have received recognition and respect within their communities largely based on their social and economic status. In rural India, ownership of agricultural land has traditionally been a key indicator of social status and power. Caste has played a significant role in determining access to and ownership of land. A closer examination of agrarian societies reveals that forward caste groups

historically possessed the majority of agricultural land, while weaker sections owned little or no land and worked as agricultural labourers on lands controlled by dominant classes. This unequal land distribution continued for several decades until significant land reform efforts were introduced. During the 1980s, land reform measures such as the Land Ceiling Act implemented under the leadership of P. V. Narasimha Rao, who served as the Chief Minister of Andhra Pradesh, attempted to redistribute surplus land from large landowners to the state. Subsequently, under the leadership of N. T. Rama Rao, assigned lands were distributed to weaker sections in an effort to address socio-economic inequalities. In addition, social movements, including Naxalite movements in the 1990s, raised critical questions regarding land rights and exploitation in rural areas.

Despite these reforms, a large proportion of the poor, particularly among the Scheduled Castes still do not possess even minimal agricultural land. As a result, many continue to work as agricultural labourers on the lands of others. Historically, these communities were subjected to exploitative systems such as bonded labour and the Paleru system. Although these systems have formally declined, their exploitative characteristics continue to exist in different forms. Agricultural labourers frequently face issues such as low wages, lack of job security, and social discrimination. In order to sustain their livelihoods, these workers engage in physically demanding labour under harsh conditions. In this process, they often neglect their health and well-being, which results in various health problems such as muscular pain, respiratory issues, and other occupational health concerns.

Review of Literature:

- 1. Reddy & Swamy (2020):** This study examines the contemporary health conditions of Scheduled Caste agricultural labourers in rural Telangana. The research confirms that these labourers experience a high prevalence of chronic fatigue, musculoskeletal disorders, joint pain, and other occupational health issues due to prolonged, physically demanding agricultural work. Limited access to healthcare services and poor working conditions further exacerbate these health challenges, highlighting the intersection of labour exploitation and health vulnerability among marginalized rural communities.
- 2. Chandrika (2016):** This study focuses on women agricultural labourers, highlighting the dual burden of domestic responsibilities and wage labour they carry. Chandrika notes that gender-based inequalities exacerbate the socio-economic challenges faced by female workers from Scheduled Castes, limiting their access to fair wages, decision-making power, and social mobility within rural communities.
- 3. Bhattacharya (2015):** This study highlights the persistence of labour exploitation among agricultural workers in contemporary India. Bhattacharya emphasizes that Scheduled Caste agricultural labourers continue to face low wages, irregular employment, and social discrimination, reflecting the continuation of historical inequalities and structural disadvantages in rural labour relations.
- 4. Rao & Singh (2022):** In a mixed-methods study of rural Telangana, Rao and Singh show that landlessness remains the strongest predictor of poverty among agricultural labourers. Scheduled Caste households with zero landholding earned significantly less and reported lower food security and educational access for children compared to marginal farmers.
- 5. Kumar & Das (2024):** This study identifies psychological stress as a major but under-researched issue among agricultural labourers. Kumar and Das find high prevalence of anxiety, depression, and

stress-related disorders among SC agricultural labourers due to economic insecurity, discrimination, and work pressure. They recommend integrating mental health support into rural welfare programs.

Statement of the Problem

Agricultural labourers from Scheduled Castes remain economically insecure and socially marginalized despite decades of land reforms and welfare interventions. The problem is multidimensional including Persistent landlessness and lack of productive assets, Wage discrimination and irregular employment, Occupational health hazards due to chemical-intensive agriculture, Inadequate access to healthcare and social security, Gender-based disparities, Limited bargaining power in labour markets. Although bonded labour as a formal institution has been legally abolished, dependency relations continue through indebtedness and patron-client ties. The study seeks to understand whether state policies have meaningfully enhanced dignity, security, and well-being among SC agricultural labourers.

Methodology:

Research Design:

To Study this issue, I have Chosen Exploratory Research Design. This is a bigger issue now a day among Scheduled Castes especially in rural areas. We have to present the struggles its causes and consequences and need to give some solutions as a whole. In this regard, the exploratory design allows me to present the data in-depth.

Data Collection Tool:

In order to Study this Issue, i have Chosen unstructured Interview Schedule Type of Data Collection tool. Almost Maximum Data will be gathered from the illiterates and with the friendly atmosphere So that I have chosen unstructured interview method.

Objectives:

1. To examine the socio-economic status of SC agricultural labourers.
2. To assess their levels of income satisfaction and employment security.
3. To identify occupational health risks and healthcare accessibility.

Hypothesis:

1. Agricultural labourers are dissatisfied with their earnings due to wage inadequacy and landlessness.
2. Continuous exposure to manual labour and agrochemicals results in significant health issues.

Research Design:

The study adopts a combined exploratory and descriptive research design. The exploratory component allows deeper insight into lived experiences, while the descriptive design systematically records measurable socio-economic and health conditions.

Data Collection:

In order to study this issue both primary and secondary data will be used. The Primary data was collected from the agricultural laborers by using structured interview and observation methods of data collection and random sampling technique was utilized for this study and the secondary data will be collected from various articles, journals, Governmental Reports and etc.

Sample Size:

The size of sample to this study is strictly confined to 50 where the households of Scheduled Castes will be 68 of Madigas, 56 of Malas in selected village called i.e., Namilikonda, Kodimial Mandal, Jagtial District. Numerically madigas households are higher than the Malas. For the current study the data will be chosen 25 respondents from each Community including both genders male and female.

Data Tabulation:

1. Age Group of the Respondents:

Age Group	Malas	Madigas	TOTAL
18-30 Years	03 (12%)	05 (20%)	08 (16%)
31-45 Years	12 (48%)	11 (44%)	23 (46%)
46-60 Years	09 (36%)	07 (28%)	16 (32%)
60 Years and above	01 (04%)	02 (08%)	03 (06%)
TOTAL	25 (100%)	25 (100%)	50 (100%)

The table shows the age distribution of the respondents from the Mala and Madiga communities. Out of the total 50 respondents, 25 are Malas and 25 are Madigas. Most of the respondents belong to the 31–45 years age group, with 23 respondents (46%), including 12 Malas (48%) and 11 Madigas (44%). The next largest group is 46–60 years with 16 respondents (32%), consisting of 9 Malas (36%) and 7 Madigas (28%). The 18–30 years age group has 8 respondents (16%), including 3 Malas (12%) and 5 Madigas (20%). The least number of respondents are in the 60 years and above category with only 3 respondents (6%), including 1 Mala (4%) and 2 Madigas (8%). This shows that most respondents are in the middle age group.

2. Gender Wise Distribution:

Gender	Mala	Madiga	TOTAL
Male	12 (48%)	13 (52%)	25 (100%)
Female	13 (52%)	12 (48%)	25 (100%)
TOTAL	25 (100%)	25 (100%)	50 (100%)

From the above table it can be observed that among the total 50 respondents 25 are from mala community and 25 from madiga community was chosen. Among the malas 12(48%) are males and 13(52%) are females. Among the madigas 13(52%) are males and 12(48%) are females.

3. Education Qualification of the Respondents:

Age Group	Malas	Madigas	TOTAL
Illiterate	10 (40%)	12 (48%)	22 (44%)
Primary (1–5)	07 (28%)	06 (24%)	13 (26%)
Secondary (6–10)	05 (20%)	04 (16%)	09 (18%)
Intermediate	02 (08%)	02 (08%)	04 (08%)
Degree & Above	1 (04%)	1 (04%)	02 (04%)
TOTAL	25 (100%)	25 (100%)	50 (100%)

Out of the total 50 people, 22 (44%) are illiterate, 13 (26%) have primary education, 9 (18%) have secondary education, 4 (8%) have intermediate education, and 2 (4%) have a degree or higher. Caste-wise, among the 25 Mala’s, 10 are illiterate, 7 have primary, 5 have secondary, 2 have intermediate, and 1 has a degree or higher. Among the 25 Madigas, 12 are illiterate, 6 have primary, 4 have secondary, 2 have intermediate, and 1 has a degree or higher. This shows that illiteracy is slightly higher among Madigas, Malas have a marginally higher representation at primary and secondary levels, and higher education is very limited in both castes. Overall, basic literacy and primary education dominate, indicating the need for focused educational interventions, especially to reduce illiteracy among Madigas.

4. Living Conditions:

Response	Mala	Madiga	Total
Good	01 (04%)	01 (04%)	02 (04%)
Average	07 (28%)	03 (12%)	10 (20%)
Poor	17 (68%)	21 (84%)	38 (76%)
Total	25 (100%)	25 (100%)	50 (100%)

The table shows the living conditions of respondents belonging to Mala and Madiga communities. Out of total 50 respondents, the majority, 38 respondents (76%), reported that their living conditions are poor. Among them, 17 respondents (68%) belong to the Mala community and 21 respondents (84%) belong to the Madiga community, indicating that poor living conditions are more common among Madiga respondents. About 10 respondents (20%) reported average living conditions, including 7 respondents (28%) from the Mala community and 3 respondents (12%) from the Madiga community. Only 2 respondents (4%) reported good living conditions, with one respondent each (4%) from Mala and

Madiga communities. Overall, the comparison shows that both communities largely experience poor living conditions, but the situation is relatively worse among the Madiga community compared to the Mala community.

5. Annual Household Income:

Income Range (₹)	Number	Percentage
Below 50,000	14	28%
50,000 – 1,00,000	20	40%
1,00,000 – 1,50,000	10	20%
Above 1,50,000	6	12%
TOTAL	50	100%

From the above table, it is clear that most of the respondents belong to the ₹50,000–₹1,00,000 annual income group, with 20 respondents (40%). About 14 respondents (28%) earn below ₹50,000 per year. 10 respondents (20%) have an annual household income between ₹1,00,000 and ₹1,50,000. Only 6 respondents (12%) earn above ₹1,50,000 annually. This shows that the majority of the respondents belong to the lower and middle income groups.

6. Duration of Work:

S. No	Time	Mala	Madiga	TOTAL
1	8- 12 Hours	04 (16%)	05 (20%)	09 (18%)
2	8 Hours	20 (80%)	19 (76%)	39 (78%)
3	Less than 8 Hours	00 (-)	00 (-)	00 (-)
4	Bonded Laborer	01 (04%)	01 (04%)	02 (04%)
	TOTAL	25 (100%)	25 (100%)	50 (100%)

From the above table, it is clear that most of the respondents work for 8 hours a day. A total of 39 respondents (78%) fall under this category, including 20 Malas (80%) and 19 Madigas (76%). About 9 respondents (18%) work for 8–12 hours, including 4 Malas (16%) and 5 Madigas (20%). There are no respondents working less than 8 hours. Only 2 respondents (4%), one Mala (4%) and one Madiga (4%), reported working as bonded labourers. This shows that the majority of the respondents work around 8 hours per day.

7. Season wise wage per day?

S. No	Season	Male	Female
1	Rabi	600	200
2	Kharif	700-800	300

The above table shows the season wise wage rates for the agriculture works. During the Rabi season the male labors will get 600 rupees per day whereas the female labors will get 200 rupees per day. But during the Kharif season due to rain forecasting, the male labors will get 700-800 rupees per day whereas the female labors will get 300 rupees per day.

8. Satisfied with Earnings:

Level of Satisfaction	Number	Percentage
Highly Satisfied	05	10%
Satisfied	07	14%
Neutral	03	06%
Dissatisfied	18	36%
Highly Dissatisfied	17	34%
TOTAL	50	100%

From the above table, it is clear that most of the respondents are dissatisfied with their earnings. About 18 respondents (36%) reported that they are dissatisfied, while 17 respondents (34%) are highly dissatisfied. Only 7 respondents (14%) said they are satisfied and 5 respondents (10%) are highly satisfied with their earnings. A small number of respondents, 3 (6%), expressed a neutral opinion. This shows that the majority of the respondents are not satisfied with their earnings.

9. Demand for workers after farm mechanization:

Level of Satisfaction	Number	Percentage
Largely Declined	27	54%
Moderately Declined	19	38%
Neutral	04	08%
Improved	00	00
TOTAL	50	100%

The above table shows the respondents’ opinions regarding the demand for workers after farm mechanization. Out of the total 50 respondents, the majority, 27 respondents (54%), reported that the demand for workers has largely declined due to farm mechanization. Another 19 respondents (38%) stated that the demand has moderately declined. Only 4 respondents (8%) expressed a neutral opinion, while none of the respondents reported any improvement in the demand for workers. This indicates that farm mechanization has significantly reduced the demand for agricultural labour, affecting the employment opportunities of rural workers.

10. Did you face any health issue by working with in the agricultural field:

S. No	Type of Disease	Male	Female
1	Skin allergy	14 (56%)	18 (72%)
2	Respiratory problems	11 (44%)	13 (52%)
3	Joint pains/Muscle pains	10 (40%)	14 (56%)
4	Back Pain	18 (72%)	17 (68%)
5	Headache	06 (24%)	11 (44%)
6	Astama	06 (24%)	10 (40%)
7	Food Poison	02 (08%)	04 (16%)
8	Vision Problem	06 (24%)	08 (32%)
9	Any others	14 (56%)	17 (68%)
10	No Health Issues	03 (12%)	00 (-)

The above table shows the health issues faced by male and female respondents while working in agricultural fields. The data indicates that a large number of workers suffer from various health problems due to their work. Among males, the most common issue is back pain (72%), followed by skin allergies (56%) and respiratory problems (44%). Similarly, among females, skin allergy is reported by 72% of respondents, followed by back pain (68%) and joint or muscle pains (56%). Respiratory problems (52%), headaches (44%), and asthma (40%) are also commonly reported among female workers. Other issues such as vision problems and food poisoning are reported by a smaller number of respondents. Only 12% of male respondents reported that they did not face any health issues, while none of the female respondents reported being free from health problems. Overall, the data indicates that both male and female agricultural workers face significant health challenges, with female workers reporting slightly higher levels of certain health issues compared to males.

11. What kind of Treatment you prefer for Health Issues:

Type of Treatment	Frequency	Percentage
Allopathic	31	62%
Homeopathy	07	14%
Indigenous Practices	12	24%
TOTAL	50	100%

The above table shows the type of health treatment preferred by the respondents. Out of 50 respondents, 31 respondents (62%) prefer allopathic treatment for their health issues. About 12 respondents (24%) depend on indigenous practices. A smaller number, 7 respondents (14%), prefer homeopathy treatment. This shows that most of the respondents prefer allopathic treatment for their health problems.

12. If Allopathic Whom you approach frequently

Type of Hospital	Frequency	Percentage
Local RMP/PMP	24	77.4%
PHC/Government Hospital	05	16.1%
Private Hospital	02	6.5%
TOTAL	31	100%

The above table shows the type of hospital or medical practitioner approached by respondents who prefer allopathic treatment. Out of 31 respondents, the majority, 24 respondents (77.4%), reported that they frequently approach Local RMP/PMP for treatment. About 5 respondents (16.1%) visit PHC or Government Hospitals, while only 2 respondents (6.5%) seek treatment from private hospitals. This indicates that most respondents prefer Local RMP/PMP for allopathic treatment, possibly due to easy accessibility, lower cost, and immediate availability of medical services compared to government and private hospitals.

13. Weather you received any support from the Government:

Response	Yes	No
Labours	09	41
Percentage	18%	82%

The above table shows whether the respondents received any support from the government or not. Out of 50 respondents, only 9 respondents (18%) reported that they received support from the government, while the majority, 41 respondents (82%), said that they did not receive any support. This indicates that most of the respondents have not benefited from government support.

14. Awareness on Labour Rights:

Awareness	Response	Percentage
Yes	16	32%
No	34	68%
TOTAL	50	100%

From the above table, it is clear that most of the respondents are not aware of labour rights. Out of 50 respondents, 34 respondents (68%) said that they are not aware of labour rights, while only 16 respondents (32%) reported that they are aware of them. This shows that the level of awareness about labour rights among the respondents is low.

15. Respect within the Society:

Response	Frequency	Percentage
High	00	-
Medium	11	22%
Low	39	78%
TOTAL	50	100%

From the above table, it is clear that most of the respondents feel that they receive low respect in society. Out of 50 respondents, 39 respondents (78%) reported that they experience low respect, while 11 respondents (22%) said they receive medium respect. None of the respondents reported that they receive high respect in society. This indicates that the majority of the respondents feel they are not highly respected in society.

Findings:

- Age and Working Capacity:** Most respondents (46%) are in the 31–45 years age group, indicating that the majority of SC agricultural labourers are in their productive working years.
- Education and Literacy:** Illiteracy is high at 44%, slightly more among Madigas than Malas, highlighting limited access to education and skill development opportunities.
- Living Conditions and Income:** A large proportion (76%) live in poor conditions, especially Madigas (84%), and 68% earn below ₹1,00,000 annually, reflecting economic hardship and low household income.
- Workload and Labour Conditions:** Most respondents (78%) work around 8 hours per day, with additional hours reported by some. Farm mechanization has reduced labour demand for more than half (54%), affecting employment opportunities.
- Wages and Satisfaction:** Males earn more than females during both Rabi and Kharif seasons, and 70% of respondents are dissatisfied or highly dissatisfied with their earnings, showing wage inequality and economic dissatisfaction.
- Health Status and Treatment:** Agricultural labourers face multiple health issues, including back pain, skin allergies, respiratory problems, joint pains, headaches, and asthma. While 62% prefer allopathic treatment, most (77.4%) rely on local RMP/PMP practitioners due to affordability and accessibility.
- Government Support and Awareness:** Only 18% have received government support, and 68% are unaware of labour rights, indicating limited access to welfare schemes and low awareness of entitlements.
- Social Status:** Most respondents (78%) feel that they receive low respect in society, highlighting on-going social marginalization of SC agricultural labourers.

Discussion:

- The dominance of respondents in the working-age group shows that agriculture remains a major livelihood source for rural labourers. To reduce over-reliance on agriculture and provide alternative income sources, the government should introduce skill development and vocational training programs tailored for agricultural workers.

- The equal participation of men and women in agricultural labour highlights that both genders heavily depend on farming for income. However, wage inequality between male and female labourers underscores gender discrimination in the sector. Addressing this requires enforcing fair wages and reducing gender-based wage disparities in agricultural work.
- High illiteracy levels among labourers limit their employment opportunities and contribute to persistent poverty. Improving access to education and literacy programs, particularly for marginalized communities like Malas and Madigas, can empower workers to pursue better livelihoods.
- Poor living conditions reflect the economic hardships faced by agricultural labourers. Housing and rural development schemes should be implemented to improve living conditions, ensuring basic amenities are accessible. Low income levels further restrict the ability of labourers to afford education, healthcare, and housing. Financial assistance and social security measures such as pensions, insurance, and subsidies should be made available to support these needs.
- Farm mechanization has reduced the demand for manual labour, negatively affecting employment opportunities. To mitigate this, alternative employment avenues should be created in rural areas, including non-farm sectors, to absorb displaced workers.
- Continuous physical work and exposure to chemicals contribute to various health problems among agricultural labourers. Although modern medical treatments are preferred, many rely on local RMPs due to affordability and accessibility issues. Strengthening rural healthcare infrastructure and ensuring accessible, affordable medical services is essential. Additionally, NGOs and community organizations should raise awareness about health, hygiene, and preventive care.
- Limited access to government support and low awareness of labour rights indicate a need for better implementation of welfare schemes. Awareness programs should educate labourers about their rights, entitlements, and government welfare initiatives.
- The feeling of low respect in society reflects the social discrimination and marginalization faced by agricultural labourers. Efforts should be made to promote equal respect, social inclusion, and recognition of marginalized communities to reduce discrimination and foster community integration.

Testing of Hypothesis:

Hypothesis 1: Agricultural labourers are dissatisfied with their earnings due to wage inadequacy and landlessness.

The data strongly supports this hypothesis. Among the 50 respondents, 36% reported being dissatisfied and 34% highly dissatisfied with their earnings, totaling 70% expressing dissatisfaction. The majority earn below ₹1,00,000 annually, with males earning ₹600–800/day and females only ₹200–300/day, highlighting significant gender wage disparities. Most respondents are landless, relying entirely on wage labour for survival, which restricts their economic mobility and access to basic needs such as education, healthcare, and housing. These findings indicate that low wages, landlessness, and unequal earnings directly contribute to widespread dissatisfaction among Scheduled Caste agricultural labourers.

Hypothesis 2: Continuous exposure to manual labour and agrochemicals results in significant health issues.

This hypothesis is also supported by the evidence. Respondents reported multiple occupational health problems, with males most commonly suffering from back pain (72%), skin allergies (56%), and respiratory problems (44%), while females reported skin allergies (72%), back pain (68%), joint/muscle

pains (56%), and respiratory issues (52%). None of the female respondents and only 12% of male respondents reported being free from health problems. Most labourers work 8–12 hours per day under physically demanding conditions, often exposed to agrochemicals, which exacerbate chronic health risks. These findings confirm that continuous manual labour combined with chemical exposure significantly affects the health of SC agricultural workers.

Conclusion:

The study reveals that Scheduled Caste agricultural labourers in Namilikonda village continue to face significant socio-economic and health challenges despite decades of land reforms and welfare measures. High rates of landlessness, illiteracy, low income, poor living conditions, wage inequality, and limited awareness of labour rights restrict their opportunities for social and economic mobility. Continuous manual labour and exposure to agrochemicals contribute to widespread health problems, while dependence on local medical practitioners highlights gaps in rural healthcare accessibility. Addressing these issues requires integrated interventions, including skill development, fair wage enforcement, improved education and healthcare, social security schemes, and awareness programs, alongside efforts to promote social inclusion and reduce discrimination, to enhance the dignity, well-being, and economic security of SC agricultural labourers.

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