



# International Journal of Advance Research in Community Health Nursing

E-ISSN: 2664-1666

P-ISSN: 2664-1658

[www.communitynursing.net](http://www.communitynursing.net)

IJARCHN 2024; 6(1): 134-137

Received: 12-02-2024

Accepted: 16-03-2024

## K Preetha

B.Sc., (Nursing)-IV Year,  
Sri Manakula Vinayagar  
Nursing College, Puducherry,  
India

## S Sakthipriya

Assistant Professor in  
Department of Community  
Health Nursing, SMVNC,  
Puducherry, India

## Dr. G Muthamilslevi

Principal, SMVNC,  
Puducherry, India

## A study to assess the attitude of textile workers towards preventing against byssinosis (Occupational lung disease) at Thirubhuvanai, Puducherry

K Preetha, S Sakthipriya and Dr. G Muthamilslevi

DOI: <https://doi.org/10.33545/26641658.2024.v6.i1b.180>

### Abstract

**Introduction:** Occupational health and safety remain critical concerns across various industries, as workers are exposed to a plethora of risks associated with their job environments.

**Objectives of the Study:** The main objective of the study to assess the level of attitude among textile workers towards preventing byssinosis and to associate the level of attitude among textile workers towards preventing byssinosis with their selected demographic variables.

**Methodology:** The research approach used for this study was quantitative research approach. A descriptive research design was adopted for this present study. By using convenient sampling technique, 30 textile workers were selected for the present study.

**Results:** The present study reveals that majority 23 (76.7%) of them had low attitude, 4 (13.3%) of them had very low attitude and 3 (10%) of them had moderate attitude.

**Conclusion:** The study findings concluded that majority of textile workers had low attitude towards preventing byssinosis.

**Keywords:** Byssinosis, occupational lung disease, prevention, textile workers

### Introduction

The textile industry, a key contributor to global economic development, faces significant challenges in terms of occupational health hazards, particularly respiratory diseases. Byssinosis, a respiratory ailment caused by prolonged exposure to cotton dust and other textile-related particulates, is a significant occupational lung disease in this context. The industry relies heavily on a large workforce operating in close proximity to these particulates, making understanding the attitudes of textile workers towards preventing byssinosis crucial.

Despite advancements in automation, machinery, and production techniques, the risk of occupational lung diseases persists due to inadequate preventive measures and an incomplete understanding of health risks associated with textile work. Byssinosis, a respiratory ailment, is primarily affecting textile workers who encounter cotton dust and other textile-related particulates. Despite advancements in industrial hygiene practices, byssinosis remains a persistent occupational health challenge in regions with outdated equipment, inadequate ventilation, and limited protective measures.

Byssinosis affects workers' quality of life, places a substantial burden on healthcare systems and employers due to increased absenteeism, medical expenses, and decreased productivity. Understanding the attitudes of textile workers towards preventing byssinosis is essential for developing effective preventive strategies. However, there is a significant gap in research exploring textile workers' attitudes towards preventing occupational lung diseases, hindering the development of tailored interventions that address the unique needs and concerns of textile workers.

### Need for the study

Occupational lung diseases are prevalent worldwide, with varying degrees of occurrence based on industries, regions, and exposure levels. Silicosis, asbestosis, occupational asthma, chronic obstructive pulmonary disease (COPD), and byssinosis are some of the most

### Corresponding Author:

#### K Preetha

B.Sc., (Nursing)-IV Year,  
Sri Manakula Vinayagar  
Nursing College, Puducherry,  
India

common diseases. Silicosis, caused by crystalline silica dust, is a major global concern, with around 23,000 deaths attributed to it in 2016. Asbestosis, caused by inhaling asbestos fibers, is a major concern in construction and shipbuilding industries.

Occupational asthma, caused by exposure to sensitizing agents, accounts for 15% of adult-onset asthma cases worldwide. COPD, caused by dust, chemicals, and fumes, has over 3 million deaths globally in 2019. Byssinosis, a common occupational lung disease, has decreased in some regions due to improved working conditions and mechanization. It has been documented among textile workers in China, Pakistan, India, and southern states. Understanding the prevalence and nature of occupational lung diseases among textile workers can inform targeted interventions, improve workplace conditions, enhance preventive strategies, and support comprehensive healthcare programs.

**Statement of the problem**

A study to assess the attitude of textile workers towards preventing against byssinosis (occupational lung disease) at Thirubhuvanai, Puducherry.

**Objectives of the study**

- To assess the level of attitude among textile workers towards preventing byssinosis.
- To associate the level of attitude among textile workers towards preventing byssinosis with their selected demographic variables.

**Research Methodology**

A quantitative research approach and descriptive research design was selected for the present study. The study was conducted in Thirubhuvanai, Puducherry. The study population comprised of all the textile workers who are all working in Puducherry. The sample consists of 30 textile workers who are all working in Thirubhuvanai, Puducherry, who meet the inclusion criteria. Using a convenient sampling technique the samples were selected for the present study. The tool consists of demographic variables and attitude assessment scale. The data of the study was evaluated by using descriptive and inferential statistics.

**Major Finding**

Regarding the age in years, the majority 10 (33.3%) were in

the age group of 21-30 years, 13(43.3%) were in the age group of 31-40 years and 4 (13.3%) were in the age group of 41-50 years. With regards to gender, majority 22 (73.3%) were male and 8 (26.7%) were female. In the aspect of education status, the data shows majority 13 (43.3%) were uneducated and 1 (3.3%) were completed primary level. In the aspect of occupation status majority, 30 (100%) were private employed. In the aspect of religion majority, 28 (93.3%) were Hindu, 1 (3.3%) were Muslim and 1 (3.3%) were Christian. Regarding income per month, the data shows that the majority 13 (43.3%) come under Rs.9001 to Rs.15000 and 9 (30%) were come under Rs. 15000/- to Rs20000/-. With regards to marital status majority, 22 (73.3%) were married and 8 (26.7%) were single. In the aspect of type of family, 12 (40%) had 3-6 years of experience and 6 (20%) had below 3 years experience. With regards to history of occupation lung disease majority 17 (56.7%) had previous history and 13 (43.3%) had no previous history.

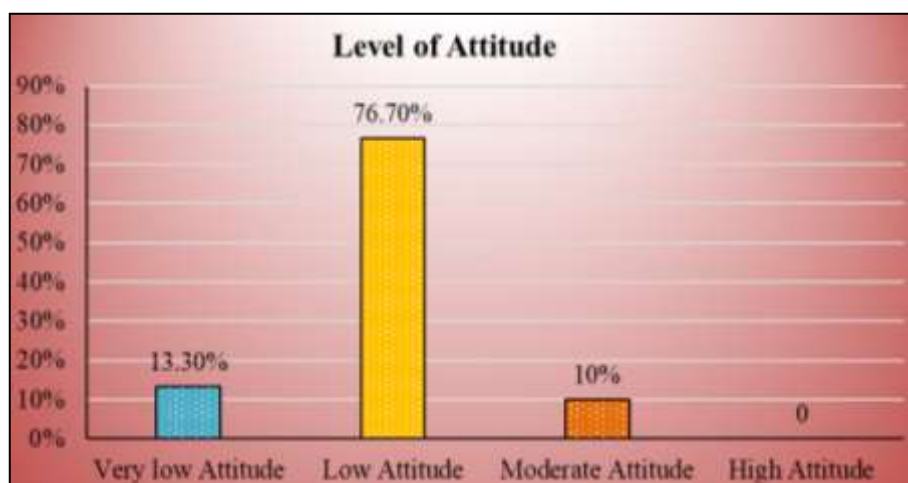
**Results and Discussion**

The study was conducted study to assess the attitude of textile workers towards preventing against byssinosis (occupational lung disease) at Thirubhuvanai, Puducherry. The table 1 reveals the frequency and percentage-wise distribution of level of attitude among textile workers towards preventing byssinosis. The finding shows that, majority 23 (76.7%) of them had low attitude, 4 (13.3%) of them had very low attitude and 3 (10%) of them had moderate attitude.

The table 2 shows that there is significance association between education status and year of experience with level of attitude among textile workers towards preventing byssinosis where  $p < 0.05$ . There is no significance association between Age, Gender, Occupation, Religion, Income per month, Marital status, Type of family, Any history of occupational lung diseases with level of attitude among textile workers towards preventing byssinosis.

**Table 1:** Distribution of the level of attitude among textile workers towards preventing byssinosis. N = 30

S. No	Level of Attitude	Frequency (n)	Percentage %
1.	Very low Attitude	4	13.3%
2.	Low Attitude	23	76.7%
3.	Moderate Attitude	3	10%
4.	High Attitude	0	0



**Fig 1:** Percentage wise distribution of level of attitude among textile workers towards preventing byssinosis

**Table 2:** Association of the level of attitude among textile workers towards preventing byssinosis with their selected demographic variables. N = 30

S. No	Demographic variables	Level of Knowledge						X <sup>2</sup> value
		Low attitude		Moderate attitude		Very low		
		N	%	N	%	N	%	
1	<b>Age in years</b>							X <sup>2</sup> = 5.177 P= 0.521 (NS)
	a) 21-30 years	1	2	9	18	0	0	
	b) 31-40years	2	4	10	20	1	2	
	c) 41-50 year	1	2	2	4	1	2	
	d) >50 years	0	0	2	4	1	2	
2.	<b>Gender</b>							X = 2.208 P= 0.331 (NS)
	a) Male	2	4	17	34	3	6	
	b) Female	2	4	6	12	0	0	
3.	<b>Education status</b>							X <sup>2</sup> = 7.585 p = 0.042 (S)*
	a) uneducated	1	2	10	20	2	4	
	b) Primary level	0	0	1	2	0	0	
	c) Higher secondary	1	2	5	10	1	2	
	d) Graduation	2	4	7	14	0	0	
4.	<b>Occupation</b>							K
	a) Government employed	0	0	0	0	0	0	
	b) Unemployed	0	0	0	0	0	0	
	c) Self employed	0	0	0	0	0	0	
	d) Private employed	4	7	23	46	3	6	
5.	<b>Religion</b>							X <sup>2</sup> = 0.652 p = 0.893 (NS)
	a) Hindu	4	8	21	42	3	6	
	b) Muslim	0	0	1	2	0	0	
	c) Christian	0	0	1	2	0	0	
	d) Others	0	0	0	0	0	0	
6.	<b>Income per month</b>							X <sup>2</sup> = 4.845 p = 0.564 (NS)
	a) Below Rs. 9000/-	1	2	6	12	0	0	
	b) Rs. 9001/- to Rs.15000/-	2	4	8	16	3	6	
	c) Rs. 15000/- to Rs.20000/-	1	2	8	16	0	0	
	d) Above Rs.20000/-	0	0	1	2	0	0	
7.	<b>Marital status</b>							X <sup>2</sup> = 3.320 p = 0.190 (S)*
	a) Single	0	0	8	16	0	0	
	b) Married	4	8	15	30	3	6	
8.	<b>Type of family</b>							X <sup>2</sup> = 4.725 p = 0.094 (NS)
	a) Joint	4	0	10	20	1	2	
	b) Nuclear	0	8	13	26	2	4	
9.	<b>Year of experience</b>							X <sup>2</sup> = 9.762 p = 0.013 (S)*
	a) Below 3 years	0	0	6	12	0	0	
	b) 3-6 years	3	6	9	18	0	0	
	c) 7-10 years	1	2	5	10	1	2	
	d) Above 10 years	0	0	3	6	2	4	
10.	<b>Any history of occupational lung disease</b>							X <sup>2</sup> = 0.195 p = 0.907 (NS)
	a) Yes	2	4	13	26	2	4	
	b) No	2	4	10	20	1	2	

\*p<0.05 - Significant; p<0.01 - Highly Significant K= constant

**Conclusion**

The present study assessed the attitude of textile workers towards preventing against byssinosis (occupational lung disease) at Thirubhuvanai, Puducherry. The study findings concluded that most of the textile workers had low attitude towards preventing byssinosis. There is significance association between education status and year of experience with level of attitude among textile workers towards preventing byssinosis where p<0. 05.

**Recommendations**

- Same study can be conducted with large samples.
- Same study to can be conducted among the general public.

**Conflict of Interest**

Not available

**Financial Support**

Not available

**References**

1. Laney AS, Weissman DN. Respiratory diseases caused by coal mine dust. Journal of Occupational and Environmental Medicine. 2014 Oct;56(Suppl 10). doi: 10.1097/jom.0000000000000260.
2. Orbon KH, Garcia TR, van der Gulden JW, van Duin J, Wouters EF. Employment status and quality of life in patients with chronic obstructive pulmonary disease. International Archives of Occupational and Environmental Health. 2005;78(6):467-74. doi: 10.1007/s00420-005-0617-7.
3. Chen X, Li Y, Ma Y, Liu Y, Hu Y, Liu X, et al. A nomogram for predicting lung-related diseases among

- construction workers in Wuhan, China. *Frontiers in Public Health*. 2022 Dec;10:1032188. doi: 10.3389/fpubh.2022.1032188.
4. Meeker JD, Cooper MR, Lefkowitz D, Susi P. Engineering control technologies to reduce occupational silica exposures in masonry cutting and tuckpointing. *Public Health Reports*. 2009 Jul-Aug;124(Suppl 1):101-11. doi: 10.1177/00333549091244s112.
  5. Oo TW, Thandar M, Htun YM, Htoo KS, Khaing TT, Tin O, *et al*. Assessment of respiratory dust exposure and lung functions among workers in textile mill (Thamine), Myanmar: a cross-sectional study. *BMC Public Health*. 2021 Apr 12;21(1):673. doi: 10.1186/s12889-021-10712-0.
  6. Wang XR, Zhang HX, Sun BX, Dai HL, Hang JQ, Eisen EA, *et al*. Respiratory symptoms and cotton dust exposure; results of a 15 year follow up observation. *Occupational and Environmental Medicine*. 2003 Dec;60(12):935-41. doi: 10.1136/oem.60.12.935.
  7. Sadia A, Nafees AA, Jamal S, Shah MA, Asad N, Kazi AN. Effect of cotton dust exposure on respiratory health outcomes among textile workers. *Journal of Ayub Medical College Abbottabad*. 2023 Jan;35(1):69-73. doi: 10.55519/jamc-01-10901.
  8. Murgia N, Gambelunghe A. Occupational COPD—the most under-recognized occupational lung disease? *Respirology*. 2022 May;27(6):399-410. doi: 10.1111/resp.14272.
  9. Hinson A, Zango SH, Sani I, Biao E, Lawin H, Paraiso MN, *et al*. Cotton dust exposure and respiratory disorders among textile workers at a textile company in the southern part of Benin. *International Journal of Environmental Research and Public Health*. 2016 Sep;13(9):895. doi: 10.3390/ijerph13090895.

**How to Cite This Article**

Preetha K, Sakthipriya S, Muthamilslevi G. A study to assess the attitude of textile workers towards preventing against byssinosis (Occupational lung disease) at Thirubhuvanai, Puducherry. *International Journal of Advance Research in Community Health Nursing*. 2024;6(1):134-137

**Creative Commons (CC) License**

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International (CC BY-NC-SA 4.0) License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.