

Experiences of structural neglect by scavengers and pickers of waste products on work-life balance in South-West, Nigeria

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Abstract

Health is wealth, but relative risks and environmental challenges have negatively affected the health of scavengers and pickers of waste products in several ways in Ibadan, South-West Nigeria. There were over one thousand deaths during the coronavirus pandemic in southwest Nigeria, and some of the treatment pathways waste management workers used were not hygienic to treat, cure, or prevent potential contracted illnesses. The purpose of this research was to examine how precarious employment in waste cycle practices affects the work-life balance of scavengers and pickers of waste products in Nigeria. To pay close attention to the experiences of scavengers and pickers of waste products, we used a health belief model. In Lagos and Oyo State, Nigeria, eleven unstructured, structured interviews with these waste management workers were conducted using the snowballing technique and purposive sampling to recruit them. Braun and Clark's (2006) six steps for thematic analysis guiding data analysis and the Pivotal analytical tool were used to interpret the data. The study's outcome shows that these waste management workers faced health crises and financial crises during difficult times, such as the COVID-19 pandemic in Nigeria. We identified knowledge gaps in the impact of health hazards on their safety and the need for adequate training of the workers during times of these difficulties. The part reason was that while the waste workers lacked policies for good hygiene behaviors, many residents developed the attitude of purposefully littering public spaces. As a result, most scavengers and pickers of waste products became subject to harsh environmental conditions and poor health outcomes daily, which are not primary concerns to them. Because of these effects, their productivity, mental and physical health, and the surrounding people are all potential targets for health problems.

Keywords

COVID-19, illness, pickers, scavengers, waste products, and work-life balance.

1.1. Introduction

Work-life balance involves appropriate prioritization between work and family life (Fapohunda, 2014), but waste management workers, who are the first responders in the management of waste disposal in Ibadan and Lagos, are exposed to a variety of health hazards and financial crises, including skin reactions, injuries from the injection, and inhalation, and poor financial savings culture. The evidence of environmental hazards in the dumpsite is significant, emphasizing the importance of a strict occupational limit to hazardous materials as a requirement of personal protective equipment (Health and Safety Executive, 2007). Contact with waste products causes eye infection, bone, and muscle injuries when handling heavy containers, and poisoning from chemical inhalations and burns when small amounts of hazardous chemical waste mixed with general waste come into contact (UNEP, 1996; Nyathi, Olowoyo, & Oludare, 2018). Waste management involves the steps of "reduce, reuse, and recycle". The goal is to extract as many practical benefits from products as

possible while producing as little waste as possible (Raleigh, 2011). Waste management is an important aspect of hygiene, and its processes cannot be well carried out without a team of sanitation workers, which are also regarded as waste pickers who are exposed to environmental challenges resulting from improper disposal of solid waste (Omosimua, et al., 2020). Their activities are supported by scavengers, who involve recovering items like glass, metal, polythene materials, plastic, irons, waste produced by hospitals, primary care facilities, sharp objects, and a host of others (Das, et al., 2021, Omosimua et al. 2020).

Despite their various activities and their contributions to the environment, their effort is not recognized and properly rewarded, as there is no means of effective protection for them (Nzeadibe & Alieji, 2020), and this leads to why their poor response to the exposure from hazards. Their work is highly precarious and sets the workers in danger of being the first responders in the management of waste disposal. The outbreak of COVID-19 which is an infectious disease

caused by the most recently discovered coronavirus acknowledged as a public health emergency of international concern, made the matter worst for the waste management workers as it increases their level of exposure to hazards and diseases (Smith & Osman, 2020), and almost all countries of the world were affected. Most of the countries affected took different measures to cushion the overall effects of the pandemic by reducing the spread. Prominent among the measures are; Lockdowns, business shutdowns, hygiene regulations, social distancing, and contact tracing (Spurk & Straub, 2020; United Nations, 2020). The work-from-home practices became the new normal in the world of work during the lockdown period. This affords employees and employers the privilege of performing workplace tasks right from the comfort of their homes or places away from the normal workplace (Bhumika, 2020; Gajendran & Harrison, 2007). But this was never the case for the waste management workers as pickers of these waste products were making the street free from dirt while the scavengers were also out to seek valuable materials from streets and dump sites they sell for personal gains (Das et al. 2021).

There was another type of waste materials generated during the COVID-19 pandemic, which is highly hazardous and increased the spread of the disease among the waste management workforce. These include; infected masks, gloves, and other protective equipment, including non-infected items of the same nature (UNEP, 2020). According to Sharma et al., (2020), when waste is improperly collected, it could bring about contamination of general municipal solid waste with the virus, which could pose a threat to workers' health in terms of transmission of diseases. Waste management workers are however susceptible to health-related issues, like musculoskeletal pain, cough, chest tightness, diarrhea, joint pain, skin irritation, cancer, injuries, puncture wounds, and damage to the eyes and ears (Poulsen et al., 1995). They have identified these illnesses with the waste management workers long before the COVID-19 pandemic and the workers who exhibit any of these symptoms at work will go back home to

their children and family and this increases their chances of being infected with this disease.

Records Waste management workers marginalization in countries like Nigeria (Omosimua et al., 2020), where their earnings are relatively low, their social status is daily being degraded, they have a negative experience with health care, and their educational statutes are nothing to write home about (Omosimua, et al., 2020). Since the general health and well-being of the solid waste management workers are not of major concern to the Nigerian government even before the COVID-19 pandemic, according to Omosimua et al., 2020; during the pandemic, workers' health is of no importance to the government, and they expose these workers to various risks during this period.

Therefore, this study intends to focus on structural neglect while building on the experiences of scavengers and pickers of waste products as regards their opinion on work-life balance in Ibadan, northern Nigeria.

1.2. Theoretical underpinning

The health belief model (HBM) is the theoretical orientation of this study. It will aid in accounting for waste management workers, and their work-life balance in Ibadan and Lagos Nigeria, by organizing concepts, constructs, and propositions in logical and applicable ways.

The HBM provides the theoretical context for explaining how pickers and scavengers of waste products behave in response to their health. According to Rosenstock, their responses contain six types of health belief model (Glanz, 2001) that explains how and why they may not take preventative health measures, including getting tested for an illness, eating nutritious foods and exercising, and keeping their environment clean.

The theorists of this model believe that these waste product workers' motivations and attitudes influence their work and health activity at the individual level. Individual perceptions define how they see the world, its changing conditions, and the chance of taking. The theorists agree that when waste management workers become afraid of diseases and illness, it will motivate them to take health-related actions (Glanz, 2001), or else they will remain undecided

in their life course. We group these waste management workers based on six-level of perceptions, susceptibility, severity, benefits, barriers, cues to action, and self-efficacy (Laranjo, 2016).

Perceived susceptibility - when waste management workers feel vulnerable to certain illnesses such as body pains and malaria symptoms, they attempt to use malaria drugs, herbs, or alcoholic substances to reduce the effects of such symptoms. Their preventative action, according to the health belief model, depends on their judgment of susceptibility (Laranjo, 2016). Those who feel susceptible to certain illnesses because of their unhygienic behavior are most likely to develop a change of hygienic behavior than those who feel indifferently.

Perceived severity – beyond the feeling of susceptibility to illness, many waste management workers prefer to experience the seriousness of a health problem before preventive actions are taken. At this moment, they weigh the significance of work in the face of health challenges. Those workers who perceive the illness as not serious are most likely to become negligent and respond poorly to living healthier but may reconsider when the illness grows deadlier in their bodies. Those who feel the illness symptoms are not serious may ignore the use of personal protective equipment (PPE) during work hours, which can expose them to work-related health hazards.

Perceived benefits - aid and help in the workplace are common incentives that trigger motivations and participatory actions. These theorists believe that when waste management workers are convinced of some positive outcome when taking certain actions that can improve their work productivity and health conditions, they ignore the risks in those actions as long as the benefits outweigh the risks involved.

Perceived barriers - not all workers are likely to accept the risks involved in achieving the benefits of better working and health conditions. Those workers who perceive the risks as high will have

more drawbacks of engagement than those workers who perceive the benefits as higher than the risks involved. Barriers represent delays in decision-making, actions, or hesitant responses to accept a process perceived as dangerous. The beliefs of the waste management workers concerning what they consider as the costs, time-consuming, inconvenience, and side effects influence these barriers. These factors guide their decisions to accept or reject working conditions and health conditions.

Cues to action - The concept argues that specific cues, such as environmental circumstances and work conditions, can influence one's last action (Champion & Skinner, 2008). This refers to the availability of optional strategies or information that, when adopted, activates the waste management workers' readiness to take action for the maximization of healthy living. Cues to action can be internal or external, while examples of internal cues to action are pain, symptoms, and reminder. External Cues include events or information from close others, such as the media, education, or the illness of a friend or family member. The intensity of cues needed to prompt action varies between waste management workers by their level of perceived susceptibility, seriousness, benefits, and barriers.

Self-efficacy: refers to an individual's perception of his or her competence to perform a long-term healthy behavior or working condition. This attempt to better explain the health behaviors of different scavengers and pickers of waste products based on their level of confidence, competence, and abilities to effect changes against the regular occurrence of health challenges in the workplace as the outcome of health behavior. This self-efficacy relates to these workers' belief that they can successfully change their behavior and complete the desired behavior despite perceived obstacles.

1.3. Methods

Study Site, Participants, and Interviews

We have chosen two cities in Southwest Nigeria for the study: Lagos and Ibadan. The study area had 1,129 deaths during the coronavirus outbreak, making it a suitable location (NCDC, 2020).

Between October and November 2021, we conducted eleven interviews with scavengers and pickers of waste products which include ten males, and one Focus Group Discussion (FGD) including (8 females and 10 males), ages 24-76 years old. They are all indigenous to their respective states. The difficulty of not recruiting more females in the study was because of recommendations through the snowballing technique and purposive sampling we used. Potential participants must have worked in waste management for at least two years. The qualitative interview technique was best suited for eliciting detailed insights into how respondents performed their tasks and managed their health in the aftermath of the COVID-19 Pandemic in southwest Nigeria. Word-of-mouth and snowballing techniques (Bourdieu, 1970; Goodman, 1961) aided in the recruitment of participants, which began with the authors visiting

dump sites for several days during their hours and at the participants' leisure. All authors interviewed lasted between 24-45 minutes. The following questions/probes were used to elicit data: "How many times did you work in a week during the pandemic, and after the pandemic?", "in what ways did the COVID-19 affect your family?", "How did you balance your home and work during the pandemic, and after the pandemic?", "Are you provided with enough protective equipment for doing your work?", and "How often do you practice personal hygiene during work hours?" At the end of each interview, we asked participants to put us in contact with other waste management workers who could share with us how their knowledge and lived experiences on the job. We used a digital device to record the interviews with the permission of the interviewees.

Table 1. Sociodemographic data of the Participants

Participant (P)	Gender	Age	Interview	Position	Number of persons	Married
Participant 1	male	28	KII	Site Supervisor	1	1
Participant 2	male	35	KII	Dump Supervisor	1	1
Participant 3	male	40	IDI	Picker	1	1
Participant 4	male		KII	Dump Supervisor	1	1
Participant 5	male		IDI	Picker	1	1
Participant 6	male	42	IDI	Scavenger	1	1
Participant 7	male		IDI	Picker	1	1
Participant 8	Male	45	KII	Dump Supervisor	1	1
Participant 9	male		IDI	Picker	1	1
Participant 10	male	52	IDI	Scavenger	1	1
Participant 11	Fe/male	24-79	FGD	Pickers	8	1
Total						11

The study employs a symbolic interaction approach, and the authors become acquainted with the terms waste management used, which we considered necessary to guide the interactive sessions (Blumer, 1937). This term aided in capturing an understanding of the symbols and meanings of waste management attributes to make sense of their daily realities.

We conducted a thematic analysis of the data collected using inductive and deductive approaches. The analysis was guided by Braun and Clarke's (2019, p. 87) six steps of thematic

data analysis (acquainting oneself with the primary data, generating initial codes, probing for and identifying themes, reviewing themes, defining and naming themes, and constructing reports). After having transcribed verbatim tape recordings, the authors read the data several times before beginning a manual inductive coding directly from the data, using participants' own words and phrases in English translation. Enhancement of the analytical rigor and transparency is what we attempted. We then imported the transcripts into the Pivot Table Tool

from Microsoft Excel 2016. We compared the initial codes to the manually generated codes after we generated them (Dierenfeld & Merceron, 2012; Maher et al., 2018). Before selecting themes, the responses generated by interviewees during the coding processes are completed by compiling relevant data (Jackson & Bazeley, 2019; Braun & Clarke, 2019). To aid in the identification of codes for the study, we subjected the themes developed to a series of analytical reviews of the codes. Following that, was refining themes and subthemes and naming before recording the import trends. The purpose of involving the study team in the analytical procedures was to deliberate and decide on the coding and themes developed to help improve the trustworthiness of the data and to maintain reflexivity in the study (Shenton, 2004; Braun & Clarke, 2019).

Ethical consideration

The Department of Sociology at the University of Ibadan provided the letter of introduction for the study, while the Ministry of health Oyo state, the ethical committee in Ibadan North, approved this study. We strictly adhere to their local ethical standards that govern research. Before we conducted the interview, the participants voluntarily agreed to take part in the study and were made aware that they could withdraw. We carefully explained the purpose of the study to them via verbal and written information sheets, and we did not research without prior consent acceptance. During the interview session, we asked participants to protect their identities by choosing the best location and using pseudonyms. We replaced the participants' names and other identifiers with false names that they preferred to maintain confidentiality and anonymization. We did this to gain their trust and to encourage an interaction free of bias and distractions that could jeopardize the study's purpose. When conducting the research, we were careful to avoid any events or acts that could endanger the participants' well-being, including considering our safety in the field. In the absence of English, we communicated with the participants in their native languages (Yoruba and Pidgin), both of which we are fluent in.

1.4. Results and findings

The data reported below depict waste management workers' experiences of neglect in the face of the COVID-19 epidemic, which flipped the world of work upside down (United Nations, 2020), and how it affected their work-life balance in Ibadan North and Lagos, Nigeria. In this setting, most of the participants' work-life circumstances revolve around their ability to balance work, family, and health issues during and after the COVID-19 pandemic lockdown. Most of the participants talked about their cleanliness habits, the recruitment process, work-home tolerance, social ties with others outside of work hours, healthcare perceptions, and their fears and challenges to having a healthier work-life balance.

Defining scavengers, sweepers, and pickers within the waste management environment

The scavengers differ from the pickers. The scavengers' work is at the dumpsite called the field. They sought different materials, like metal irons, cartons, plastic, and rubber materials. The scavengers at their base (dumpsite), stay here all they long. They come in the morning and leave at night time. The government does not pay the scavengers. It is their business. Whatever they scavenge, they have scavenged buyers who buy from them after we have scaled it and negotiation will take place concerning the amount and size of the materials. By next month in February, the scavengers will start paying the government based on the materials they get and sell from here (P1/KII/site supervisor).

Their skin appears darker because of their daily exposure to sunlight. Most of them are slim, with dry dark lips and rough palms with unclean fingers, even after washing their hands; they appear the same whether they are old or young, male or female. Outside the dumpsite, scavengers were looking for stuff. Males make up most scavengers on both night and day shifts. As they scavenge for low-value items in the dumpsite, they come across smelly, sick things daily. In most dumpsites, people are waiting, scaling, and buying what has been scavenged. The negotiations are taking place between scavenging

buyers and scavengers who are looking for supplies. They do this activity for personal benefit, but because they get their materials from government-owned dumpsites, the government will levy them by January 2022.

One of the dump supervisors who took part in the survey had this to say about the sweepers, another kind of waste management worker:

The sweepers are working for the government and many of them have health insurance. The only people without health insurance are the scavengers because they do it for their earnings (P2/KII/dump supervisor).

They usually dressed sweepers in government-issued uniforms. These government-approved laborers sweep polluted public spaces and deposit the soil at a crossroads where waste collectors may easily gather it. According to this participant, the sweepers' health and emergency needs are covered. As a result, scavengers do not work for the state government explains why they do not have health insurance.

Another participant had this to say:

For the pickers, their work condition is very simple. They are told to only pick and park the waste within a particular route, and immediately after the compactor is filled, they come to the dumpsite (P1/KII/site supervisor).

While most scavengers are men, most sweepers are women. The pickers are practically evenly split between the male and female genders. Their task is to collect what the sweepers have swept and store it somewhere safe. Every picker and sweeper has a specific area where they carry out their job. They keep picking dirt until their vehicle is full, then they follow it back to the dump site. Within their working hours, they can make up to three or more excursions. Their bosses regard this type of employment to be a straightforward task.

Another participant who examined the pickers and sweepers construct said:

We are the one that picks waste on the road. So, we follow their truck

to this place is not like they are working in the dumpsite. We are motor boys and motor girls. The sweepers are also government workers and I can find them on the main road, ensuring that the roads are clean. (P9/IDI/Picker)

Although the scavengers are non-government workers who make their living on the dump site, the pickers' principal purpose is to pick up trash on the road, and they do it even at night. Because they follow their vehicle carrying dirt while selecting dirt from the streets, the pickers refer to themselves as motor boys and girls.

Recruitment of waste management workers

Recruitment is not tedious to do. As people leave work, some others come in. Within themselves, the pickers and scavengers communicate among themselves, and they get their people and friends to replace them before they leave. They will be the ones to bring their friends to the office for formal recognition and proper documentation, such as writing a formal letter for the work (P1/KII/site supervisor).

This post does not require an advertisement from the supervisors or the waste management office. Referrals from scavengers, sweepers, and pickers are used to fill positions. This occurs when employees leave the company because they are retiring or because they have received a better employment offer. Friends who work in the waste management industry introduce new members. Following the introduction of new members, a job-based interview session will be held, followed by a formal offer from management. Inclusion criteria for this evaluation include age qualification and consent to follow the job standards.

If we want to work, we would be led to the chairman. We have a meeting that we always do so from there we will be trained. Then we will be brought to the chairman to me as a new member that we want to start working, they will tell us no problem. (P10/IDI/Scavenger)

Ogbu, Emmanuel Elijah, Ojedoyin Oluwaseyi Emiola, Bakare Ayoyinka Ayobomi, Olujimi Victoria Atinuke, Aliu Aderonke Omotayo and Odunola Bukola Omolara: Experiences of structural neglect by scavengers and pickers of waste products on work-life balance in South-West, Nigeria

Scavengers aren't hired based on a formal application letter. On the dumpsite, anyone interested in working as a scavenger will be introduced to their coordinator and then to the scavenger supervisor, who is a government employee. Some of the government-paid garbage pickers gained the job either of their own volition or with the help of a relative or dumpsite personnel. According to a member of a focus group session:

“Nobody brought me here. When things were hard for me so one day as I was going, I saw one person sweeping and I approached her and told her I would like to be doing the work. She then said there are different aspects of the work, some sweep and some follow the truck, so I said I will like those that go with the truck. She then introduced me to one aunty Bose. It was the Bose that now directed me to Gate. I got the job through people that help me”. (P11/FGD/Picker)

There is employment in Ibadan, however, the sort of job is one of the reasons why so many people are unemployed in the state. People's decisions on the types of work they finally acquire are shaped by hardship and long periods of unemployment. In Ibadan, basic methods of inquiry with persons who undertake low-paying occupations, such as consulting a relative or family member who knows a worker, are frequent ways of obtaining low-paying jobs. Most of the time, these jobs aren't advertised; instead, those who are interested voluntarily express their desire and are formally recognized by the organization once a set of procedures has been agreed upon and authorized. Another participant who discussed how he got recruited stated that:

Picking waste has been my family business right from its inception. I grew up knowing my father as a picker and I learned this work directly from him. When I was 9 years, I used to follow my father around assisting him to pick up the waste. I gradually mastered this

business. But with waste management, I got this job as a picker in the waste management dump site from my uncle who introduced me to the dumpsite (P5/IDI/Picker).

This further shows that being employed as a waste management worker is a referral from family or a relative or directly approaching someone who works there. There is a formal application as a first to securing the job.

Working conditions of waste management workers

According to studies, these rubbish pickers are prone to injuries since they lack the appropriate personal protective equipment and work in hazardous situations. One of the participants who responded to the question about garbage generation had the following to say:

During the pandemic, as waste management workers, we know that people in their houses will continue to generate waste. So those workers that are Muslim during their festive period will be off work while those that are Christian will work, and vice versa. Most times during the festive period, we generate the highest waste. (P3 IDI/Picker).

The majority of waste items are produced over the holiday season. Despite the lockdown, waste management employees documented a considerable volume of waste items during the COVID-19 outbreak. Workers' religious backgrounds helped manage repetitive job activity, especially during holiday periods between Christians and Muslims in the workplace, to successfully clean the streets and keep the environment clean. That understanding that people will continue to make garbage was not limited to a happy season or tough times, as the case may be; waste and dirt will always be present in society as long as humans live and consume products.

Another attendee, who raised the issue of safety kits as a worry for working conditions, said:

During work hours, I gave no available safety kits to the workers who pick at the dump site. The sweepers are given gloves, uniforms, and nose masks here. But as a supervisor for this unit, the government officers gave us hand sanitizers, nose masks, and hand gloves. We have it in our office presently (P8/ KII/ dump supervisor).

Part of the health concern of people who work in hazardous environments is having a regular supply of safe kits and regular health check-ups, such as providing safety uniforms, hand sanitizer, nose masks, hand gloves, and protective shoes to limit the health hazards to which they are exposed during working hours. Scavengers and pickers are among the dumpsite personnel. Except for supervisors, who are provided with all of these materials, this category faces the usual difficulty of not having safety kits during working hours. This demonstrates that, while the scavengers' situation is understandable because they do not work for the government, the pickers who do still lack the necessary protective gear. Because of the offensive and sharp materials and objects they come into contact with after being exposed to infected nose masks, injections, and other offensive objects, it is difficult for them not to be exposed to health risks such as coughing, headaches, numbness of feet, wound and burn infections, and body injuries.

Another participant, who emphasized the structure of working hours and days off work, said:

I have 2-3 days off per week, while the pickers or parkers do not have any day off, but they rotate their working hours, including the sweepers too. We rather call theirs a duty shift instead of days off. For them, we have the site and dump supervisors. We the supervisors work from 7 am to 2 pm a day and

another supervisor will take from that 2 pm to 8 pm that same day (P1/KII/site supervisor).

Every day, scavengers, sweepers, and waste product pickers go to work. They have a duty shift, whether it is in the morning or evening, and they report to the dumpsites and other areas daily. Instead of a duty shift, the trash employees' site supervisors have two to three days off per week. This allows them to spend quality time with their families and take part in other activities of their choosing. All the study's participants are married, including those as young as 24 years old. Apart from the boss, most of these employees struggle to find time to rest, eat well, engage in other personal interests, or spend time with their families. This will have an impact not only on the parenting of the children but also on their health. Another participant, who emphasized spending time with family after days off work, had the following to say:

Concerning balancing work and family, this is what I do. If I work for 2 weeks, I will have 2 days off work. I will spend those 2 days off work with my family. While the pickers or parkers do not have any day off, they rotate their working hours, including the sweepers too. We rather call theirs a duty shift instead of days off. For them, we have the site and dump supervisors. We the supervisors work from 7 am to 2 pm a day and another supervisor will take from that 2 pm to 8 pm that same day (P2/ KII / dump supervisor).

After working 7 hours a day, I gave site managers at least two days off. The dump managers and waste management staff are not in this situation. Dump supervisors, who ensure that all waste items reach assigned places within dumpsites, as well as handle dispute situations and report cases to site supervisors, only get two days off every two weeks. I spend the two days with family, according to one of the landfill supervisors.

Ogbu, Emmanuel Elijah, Ojedoyin Oluwaseyi Emiola, Bakare Ayoyinka Ayobomi, Olujimi Victoria Atinuke, Aliu Aderonke Omotayo and Odunola Bukola Omolara: Experiences of structural neglect by scavengers and pickers of waste products on work-life balance in South-West, Nigeria

Most of those who took part in the focus group said:

“No resting day. We don’t have a holiday. Charismas, El-fidia day, new year, etc. we are here”. We are always at work from Sunday to Saturday. Expect if we do a night that we relax during the day after we have a close for the duty before we resume back at night (P11/FDG/Picker).

Most pickers in the FGD agreed they do not have a holiday and that they are working during the holidays when they should be with their families, just like every other government employee. They only have time to unwind once the day's work is completed. The pickers are in charge of both morning and night shifts. Every day, those on night duty go out to pick up the trash as early as 2 a.m.

Injuries and Health challenges of waste management workers

It affected the health issues that waste management personnel face by a lack of personal hygiene culture and a lack of investment in their well-being as first responders to trash disposals. One participant who identified some of the health issues faced by waste management workers said, "one participant who highlighted some of the health challenges faced by waste management workers has said:

What people who work here complain about often is just normal malaria, and they feel headaches because they are working inside the sun (P2/KII/dump supervisor).

Sunburn on the skin, headaches, body aches, and malaria symptoms are all frequent health issues that waste management personnel confronts daily. This could be because of a lack of personal hygiene culture and a government's lack of investment in the well-being of waste management staff as first responders to garbage disposals. In addition, the working conditions of these people are a frequent factor affecting their health. Another participant, who emphasized the

employees' injuries and attitudes about treatment options, had this to say:

If any of them have injuries on their body such as hand and leg cuts, they don't tell us or complain to us, but their fellow workers will notice it (P1/KII/site supervisor).

Poor working relationships between waste management employees and their bosses harm their health. As a result, these employees rarely tell their bosses about any health problems they've experienced. They prefer to share health issues like hand and leg cuts, as well as other injuries, with co-workers with whom they feel comfortable discussing their personal lives since they believe their superiors are less interested in their health problems. It is impossible to provide any health interventions because the supervisors are unaware of the health issues.

Another participant, who manages his health issues with a branded local drink, had this to say:

I don't fall sick often, but when I am stressed; I take Alomo bitters and other bitters. And I take the Alomo bitters only when I want to sleep (P3/IDI/Picker).

The impression of sickness symptoms is based on perception. It heavily influenced healthcare routes by one's perceptions and belief system. Many waste management workers, particularly scavengers and pickers who visit dumpsites daily, consume Alomo Bitters, a local alcoholic beverage. They may not drink this drink during work hours and are only allowed to do so when they reach home or leave the office. Another participant stated the following about the job's dangers:

There are a lot of dangers in this job like the workers here are exposed to a lot of diseases, and odors, the majority of them do not use a nose cover or hand gloves, so they are exposed to several diseases as they are working inside in dumpsite. But for me, I have visited no hospital in the last 10 years but my last born has

consistent malaria during this period (P2/KII/dump supervisor).

It is well known that working in trash management creates a hazardous working environment for employees. This has altered their perspective on life's events. The more odors, wounds and burn diseases, and toxic chemicals they come into contact with, the more typhoid, fever, mosquito bites, and flies they are exposed to, and the less incentive they have to care about their immediate health or even attend a local hospital. This is one reason they do not wear a nasal mask or hand gloves while working in a dumpsite, where they are exposed to a variety of diseases. One participant expressed his thoughts:

No one has been infected during the COVID-19 virus. We admitted nobody to the hospital during that time, but most get cuts and injuries from broken bottles, medical injection needles, and other sharp objects.
(P10/IDI/Scavenger).

However, a scavenger supervisor claims that they are frequently cut or injured by materials found at the dumpsite, such as shattered bottles, medical injection needles, and other sharp objects because they are not provided with protective equipment. Scavengers are also vulnerable to this injury, but it does not trouble them as much. Furthermore, the majority of the FDG participants believed that:

...though we might work sometime and get tired, and we might decide to rest for a day but we don't usually fall sick like having headache, or kidney problem"
(P11/FGD/Picker).

The majority of FDG participants reported that they don't normally become sick and that no one was infected or sick during the COVID-19 epidemic. They may feel weary, but they normally improve after sleeping and using pain relievers or herbal mixtures. They thought that God was looking after them. In the discussion with other

scavengers and their supervisors, this was also confirmed.

Anxiety escalation during the COVID-19-lockdown

Anxiety episodes were widespread throughout the epidemic all around the world, and waste management professionals were no exception. Most of them were concerned about contracting coronavirus. The site supervisors who spend less time at the sites in a week and do not work as waste workers are the workers who are less likely to get this disease as a result of their decreased exposure to it. The pickers and sweepers of waste items had a difficult time working long hours during the lockout. During work hours, individuals displayed prudence and self-care combined with the anxiety of contracting COVID-19. One of the participants who stated that worry of catching the coronavirus was a common occurrence for most people said:

There was fear everywhere, and we were afraid that we may contract it. It was a normal thing everyone had then and while the parkers, sweepers, scavengers, and dump supervisors were all outside working, we were not involved
(P1/KII/site supervisor).

Another participant, who highlighted a lack of safety kits as a major issue that influences the likelihood of contracting a disease, said:

Although I was scared that I might catch the virus even after COVID-19 because there were no safety kits. And once our "Oga" in the ministry doesn't provide any of these kits, there is nothing we can do. But now that the pandemic is over, everybody works normally again (P2/KII/dump supervisor).

In a hazardous working environment, illness transmission is linked to a lack of protective equipment. This was the reality for waste management personnel because most of them lacked this safety equipment, causing the dread of catching coronavirus. They feel that meeting those

needs is solely the responsibility of authorities in the Ministry of Health; otherwise, they believe they have no voice. They go to great lengths to train their bodies to fit their current employment, despite the health dangers. They believe that, like other epidemics such as Ebola, Laser fever, and Zika virus, the coronavirus will pass and that everyone will return to their normal lives.

Another participant from the FGD had this to say:

.... we trust in God and if not for him, we won't have been here today. Some would have been in the hospital if not for God" (P11/IDI/Picker).

While some garbage pickers are concerned about COVID-19, others do not believe it will be a major issue. Despite being exposed to the illness, they all believed that God loved them since He prevented them from contracting it.

Gender abuse and violence during working hours

Although most FDG participants believed that there is no gender discrimination or abuse at the dump, when there is a conflict between workers, however, there are means to resolve the conflict, and they can impose punishments such as suspension on the perpetrator. The scavenger supervisor, who stated, also backed this up

Among the workers, abuse and violence are normal things. In a place case where you have a large number of people violence is bound to happen; misunderstanding is bound to happen. We have had several cases of violence here, especially when the truck drivers and those guys that go with them to load the truck. Even among the scavengers too (P8/KII/dump supervisor).

Another participant had this to say:

We have had cases of violent attacks against females here. The males who take alcoholic drinks when intoxicated will embarrass

the women. They will abuse each other with words. In a case like this, we report to the authority that will sanction the authority and such a person (P2/KII/dump supervisor).

Abuse of rights and privileges is widespread among waste management professionals, and we consider it a way of life because they feel that at a place where people come from all walks of life, misunderstanding, disagreement, and conflict would always occur. A male co-worker usually launches this, most of whom are intoxicated or alcoholic, against female co-workers.

Personal hygiene culture of workers

The lack of specific regulations that address the health needs of waste management workers is one of the reasons they are exposed to a variety of health dangers, including body pains, leg and hand wounds, cough, malaria, typhoid fever, and a variety of other illnesses. Allowing workers with a variety of attitudes and views about health symptoms to direct care paths for their health has harmed their health outcomes. One of the participants had this to say about these challenges:

There are no policies ensuring that personal hygiene is practiced here. Hygiene is personal to everyone here (P7/IDI/Picker).

A participant who used an alternate perceived hygiene method had this to say:

After working, I made use of dry gin to wash his hands because I was told to do so to prevent me from contracting COVID-19. I quickly went to the woman opposite the site that sells dry gin and I used it to wash his hands (P6/IDI/Scavenger).

The perceived effects of using dry gin, locally called Ogogoro, as a way of preventing diseases on the body externally, especially the hands, are widely used by waste management workers. This belief is shared among them because gin shops and sellers are closer to them than hospitals and they feel safe using it. This was an alternative

measure for them to stay free from dirt because hand sanitizers were not regularly provided by the government to them. One of the FGD participants who stressed the importance of personal cleanliness had this to say:

“During the COVID-19, I always took my bath when I got home and not here, I just clean my head, hand face, and leg here, and when I get home, I take my bath”. We wash it every day. I and my friend here always wash our clothes every day. This old woman always washes her cloth every day (P11/FDG/Picker).

Four of the FDG members showed they took a bath first after concluding the day's work during and after the COVID19 epidemic. The guy always bathed in the dumpsite, whereas the female arrived home before bathing and simply used water to clean their face, hands, and legs. Many people, especially women, washed their clothes daily. During the COVID-19 outbreak, the picker stated that they only cleaned their hands once a day. During the COVID19 pandemic, their hands were cleansed every morning before entering the dump site, but we discontinued once the hand sanitizer ran out and was never supplied. An interviewee also stated that he only washed his hands when he wanted to eat and that he would skip washing his hands if the food was to be eaten with a spoon. According to one of the dumpsite supervisors who responded to concerns about personal hygiene:

I do practice personal hygiene; I cannot go to the dumpsite without my nose covered. Whatever I want to eat, I do not eat it close to the dumpsite, rather; I eat it in this office. The first thing I do when I get home, if the weather is not too cold, I will take my bath, eat and sleep. I prefer to eat outside because I don't cook. There are a lot of workers eating very close to the dump site. Even after I warn them, they will still eat there. They will tell me they have been working here for the last 7 years.

Nothing happened to them, so nothing will happen to them now (P4/KII/dump supervisor).

These waste management workers as "first responders to waste disposals" have poor health knowledge and a very poor work-life balance due to a lack of hygiene culture and poor investment in their well-being. They may come into contact with several communicable diseases such as the COVID-19 Pandemic without proper care, which may eventually affect their immediate health conditions.

1.5 Discussion

Because the scavengers are not paid by the government, they do not have to fill out an application before working on the dumpsite; however, their actions are guided by the scavenger supervisor, who is a government employee. Not being provided with protective working equipment like thick rubber gloves, shoes, and face masks should keep waste management workers safe from sustaining injuries or being infected with any disease increasing their risk of health hazards. Also, because they are at work every day, waste management employees, particularly garbage pickers, are subjected to a great deal of mental stress. Many people have become disappointed because of this, and many have quit their jobs. That most pickers prefer herbal mixtures such as Alomo Bitters and dry gin may be because of their financial situation, in which they try to get well without spending much of their money. The garbage picker or sweepers are not at risk of harm compared to the scavengers because they are not operating on the dumpsite often but on the road and just follow their vehicle to offload it, but the scavengers' supervisors are permanently stationed at the dumpsite supervising the scavengers' actions and are at risk of injury and health hazards. Female participants felt more at ease cleansing themselves at home than at the dumpsite, which could be because of the dumpsite's filthy toilet facilities and male counterparts. They credit their immunity to the coronavirus to the African belief in God as a powerful guardian.

Ogbu, Emmanuel Elijah, Ojedoyin Oluwaseyi Emiola, Bakare Ayoyinka Ayobomi, Olujimi Victoria Atinuke, Aliu Aderonke Omotayo and Odunola Bukola Omolara: Experiences of structural neglect by scavengers and pickers of waste products on work-life balance in South-West, Nigeria

1.6 Conclusion

During a moment as unusual as the COVID-19 pandemic lockdown, achieving work-life balance becomes critical for all employees, since it becomes emotionally exhausting if this is not accomplished. The inherent risk of scavenger and picker jobs, along with the conditions surrounding the employment during the pandemic lockdown, might make attaining work-life balance a herculean task for the workers, while also exposing them to unknown illnesses, which this study provides practical insights.

Conflict of interest

We have no conflict of interest in association with the use of this publication. We have provided no significant financial support for this work, which could have influenced its outcomes. I confirm that all the named authors read and approved the manuscript for submission.

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