

The Dyke

Volume 16 No. 1



Adverse impacts on mental and physical health, work and economic burden during the coronavirus pandemic – farm workers

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ARTICLE HISTORY

Published online, 2022

Letter

Ross G. Cooper, reacts and provides some insights into the adverse impacts on mental, and by default physical health the Covid-19 pandemic caused to sections of the population such as farm workers. In a world where life has been reconfigured economically and socially, farm workers, among others have also become an important social group deserving attention against the ravaging aspects of the Covid-19.

KEYWORDS:

Covid-19, farm workers, pandemic, economic crisis

The global consequence of coronavirus (Covid-19) (SARS-CoV-2) has resulted in a widely distributed infection with devastating impacts on the health and well-being of populations in nearly every country and inhabited island on Earth. For instance, according to the World Health Organisation (WHO), in the United Kingdom (UK), from the 9th to the 11th November 2020, there were 194, 532 and 595 deaths, totalling 49,238, 49,770 and 50,365 with new infections of +21,350, +20,412 and +22,950, respectively (WHO Covid-19 Dashboard, 2020). On the 11th of November 2020 additional United States of America (USA) state restrictions were imposed following record rates of infection and hospital admissions. These restrictions were destined to remain in place until a vaccine was made widely available (WHO Covid-19 Dashboard, 2020).

On the 2nd of February 2022, according to the WHO Covid-19 Dashboard, the global Covid-19 figures were astronomical: cases-cumulative total (376,478,335); cases-newly reported in the last 7-days (of the month in question) were (22,458,285); deaths-cumulative total (5,666,064); deaths-newly reported in the last 7-days (of the month in question) were (64,229); total vaccine doses administered per 100 population (127.03); and persons fully vaccinated per 100 population (52.56).

Although face masks slow the spread of coronavirus combined with preventative measures like frequent hand-washing and effective social distancing, many have been reluctant to follow protocol.

According to Harvard University, it is of the opinion that 40-70% of the world's population is currently infected with coronavirus. Epidemiological mathematical models based upon social science of human behaviour and decisions, revealed that the first cases of Covid-19 were the most severe given its status as a new virus with 3-4% of infected individuals dying. However, epidemiologists failed by initially overlooking the non-serious cases (in the workplace) who were unknowingly spreading the virus rapidly to their colleagues due to the long lag time between infection and death of ca. 3-8 weeks.

Unfortunately, one could inadvertently place oneself out of a job by doing a good act via evasive action. Hence, many (farm) workers still came into work despite being infected. Temperature checks on entering the workplace, visible signposting, hand-washing, face masking covering the nose and mouth, and social distancing were and are all essential. However, RNA studies of coronavirus in sewerage have shown the vast, overwhelming spread of the pandemic.

The new variant of Covid-19, detected in December 2020, spread rapidly in England especially in London and the South East prompting the British Government to place these zones into new Tier 4 restrictions. Non-compliance among people has facilitated the rapid spread and mutation of the virus, perhaps due to impatience with the long initial and subsequent local lockdowns and a craving for social and other forms of human contact. However, employers have also been partly to blame by exploiting underpaid workers in overcrowded warehouses, factories, loading facilities, farms, etc. and hence providing fruitful, local breeding grounds for coronavirus. Indeed, the failure of single companies to detect and prevent the spread of SARS-CoV-2, has made working in crowded warehouses extremely risky in Italy (Airoldi *et al.*, 2021) *vs.* Croatia where the antibody seroprevalence in industrial workers was relatively low (Jerković *et al.*, 2021).

The economic crisis that has resulted from the pandemic has had specific adverse impacts on family households via attenuated paid work hours or complete loss of remuneration or employment. Without sustained government financial support through funded benefits and job retentions schemes, family incomes have been significantly cut, resulting in insecurity, emotional turmoil and mental stress. Lack of sleep due to illness and worry would certainly have health ramifications by suppressing immunity, thus leaving individuals more susceptible to viral infections including Covid-19.

Significantly reduced fluid and food intake would also result in poor health in many of the working population. Reliance on carbohydrate food notably Sadza, porridge, bread, pasta, rice and pancakes, although filling, is far removed from an acceptable balanced diet. Furthermore, overcrowding in households due to inability to pay rent or affordable subsidised housing would certainly facilitate the spread of coronavirus. There are innumerable examples of entire families being infected with many subsequent deaths. Companies exploiting workers desperate for employment and some form of income, result in working conditions far removed from one's expectations, illegal activity and inability to fully use one's qualifications. Job agencies in combination with poor management practices may also be exploitative by deducting large sums off salaries in the form of processing fees and for transport. Although so-called set hours may be promised, when workers appear on-site their hours may be subsequently cut due to "less or no more work" resulting in (farm) workers being promptly forced to go home early.

This ruthless practice by management is especially economically and financially damaging if the hourly rate is low, for example, if it is set at minimum wage, as, once sent home, workers are not paid after clocking or signing out of the workplace and they inevitably incur disproportionately higher transport costs *vs.* income. One cannot therefore be surprised at the adverse consequences on a worker's mental and physical health and well being, as a consequence of such poor treatment.

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