

## **Working Paper 30/15**

# **Garment Sweatshop Regimes: The Informalisation of Social Responsibility over Health and Safety Provisions**

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'If we allow the politics of health to do no more than follow the shifting effects of the structural contradictions in the labour-reserve system...then, indeed, we do no more than accept the boundaries of suffering' (O'Laughlin, 2013: 194).

## **1. Introduction**

Health and safety concerns have recently taken centre stage in discussions on the global garment industry, particularly after the collapse of the Rana Plaza Complex in Dhaka, Bangladesh. As global buyers and other international stakeholders willingly or forcibly put in place 'emergency' measures, the systemic features of the industry are instead left largely unchallenged. Focusing on the Indian garment sector, this paper puts forward three main points. Firstly, it argues that the poor health and safety record of the industry has to be understood in relation to its dominant labour regime. Secondly, building on this labour-regime approach to health and safety, and by presenting evidence from the National Capital Region (NCR), the paper discusses the limitations of health and safety provisions in the industry for both factory and non-factory workers. Thirdly, after discussing the pitfalls of corporate approaches to health and safety standards in the industry, the paper zooms further into the reality of home-based work. Focusing on Bareilly, in Uttar Pradesh, a key homeworking centre linked to the NCR, the paper discusses how the overlapping between productive and reproductive time undermines attempts at elaborating meaningful health and safety measures. By subcontracting work outside factory premises, employers effectively 'outsource' health and safety concerns to households and homes, eschewing their responsibilities towards workers even during labour time. Recent corporate approaches to ameliorating homeworkers' conditions simply reinforce this process of externalisation of costs related to health and safety. The paper concludes that the informalisation of labour in the sector seems to also entail different processes of 'informalisation of social responsibility' over health and safety concerns. In this context, corporate approaches to standards are not only unable to significantly address health and safety issues, but they may be even reinforcing the push towards self-regulation, particularly in home-based settings. Overall, better health and safety provisions can only result from a systematic approach apt at challenging the dominant labour relations in the sector.

The paper attempts to develop a political economy approach to health and safety outcomes in the industry, centred on the capital-labour relations that characterise it. In doing so, it builds on the work of Bridget O'Laughlin (2010; 2013) on the 'production of affliction' and its relation to the dynamics of capital accumulation and social reproduction. Insights on social reproduction are also inspired by Federici's (2004) work on 'the making of bodies' under capitalism. The empirical evidence presented has been gathered during a period of fieldwork conducted in India between March and April 2010, January and May 2012, and April, May, August and September 2013. However, the discussion is also informed by a long-term engagement with processes of capital accumulation in the sector, in line with what

Burawoy (1998) defined as the ‘extensive case study method’, and with the political economy tradition in general.

## **2. Health, safety and labour regimes**

In April 2013, the garment industry was hit by what is considered one of the worst disasters in the history of manufacturing production. Rana Plaza, an eight-story commercial building, collapsed in Savar, a sub-district in the Greater Dhaka Area, the capital of Bangladesh, claiming the lives of 1,129 workers, and leaving another 2,515 injured. Just a few days before, in Delhi, I had interviewed the corporate social responsibility (CSR) director of a renowned American brand outsourcing from several countries in South Asia and the Middle East. He stressed that all large buyers wanted to source from Bangladesh, due to very cheap labour costs. He acknowledged the country’s ‘infrastructural problems’, but he was positive that local suppliers were working hard to ‘resolve’ them. After the disaster, many brands probably wished they never sourced from Bangladesh in the first place. The Rana Plaza case triggered a huge upsurge in national and international campaigning in favour of Bangladeshi garment workers, and many buyers, hugely pressured by national and international campaigning, ‘agreed’ to pay compensation to the victims and/or their families.<sup>1</sup> To date, two further agreements have been elaborated to prevent another Rana Plaza from happening. The first agreement is the EU-led Accord on Fire and Building Safety in Bangladesh. According to some, despite its focus on auditing, and despite becoming legally binding only once voluntarily signed (Prentice, 2014), the Accord also ‘takes a major step towards restoring brands’ direct responsibility to workers for their conditions’ (Kumar and Mahoney, 2014: 203). The second, a weaker, US-led counterpart of the Accord, is the Alliance for Bangladesh Worker Safety, which remains voluntary even once signed (Gunther, 2013). As a note, serious campaigning has been accompanied by problematic forms of what Ponte and Richey (2011) would call ‘Brand-Aid’, with different celebrities racing to wear T-shirts inside out for ‘Fashion Revolution Day’, under the widely popularised slogan ‘it is what is inside that counts’ (Metro, 2014; Huffington Post, 2014).

Indeed, the Rana Plaza disaster speaks loudly about the infrastructural problems plaguing the Bangladeshi garment industry, which my interviewee was referring to. However, arguably, it speaks as loudly about the type of labour relations that characterise the garment industry since its origins. Just over one hundred years ago, in 1911, the US witnessed the first ever disaster known in the history of garment making; the Shirtwaist Triangle Factory fire in New York City. The death toll of this first disaster - ‘only’ 146 workers - pales in comparison with Rana Plaza’s numbers. However, the modalities of this disaster, as well as the social practices that enabled it, are strikingly similar to those of Rana Plaza. In both cases, workers were locked into the premises, and could not escape as the fire and the collapse started. In both cases, infrastructural failure was rendered particularly lethal by the social practices

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<sup>1</sup> Arrangement for Rana Plaza (<http://www.ranaplaza-arrangement.org/>).

enforced on the shopfloor, its organisation and, overall, the particular regime of discipline imposed on garment workers, entailing long shifts during which it is standard practice to lock workers into industrial premises. All these considerations should be kept in mind not only when assessing the Rana Plaza disaster, but also the numerous 'minor' forms of sickness and injury affecting garment as well as other labour-intensive industries as waves of a 'low-intensity' epidemic. For instance, 'in the Pearl River Delta, 40,000 fingers are severed each year in work-related accidents' (Sluiter, 2009, in Hoskins, 2014: 68).

In this paper, I argue that health and safety concerns and outcomes in labour-intensive industries cannot be decoupled by their labour regimes, i.e. the specific set of social relations shaping their functioning. Focusing on garment, for instance, factory fires and collapses, or work-related injuries and illnesses are seen as moments of exceptionality only if one does not consider the type of labour relations dominating the 'global garment sweatshop'. In fact, while the modalities of local 'sweatshop regimes' vary across time and space (see Mezzadri, 2014a), there is by now significant evidence that garment jobs are primarily 'bad' jobs; 'informalised', 'feminised', and often defined by harsh working conditions and rhythms and low levels of social security (Howard, 1997; Rosen, 2002; Esbenshade, 2004; Hale and Wills, 2005). The fact that some of these 'bad jobs' could entail health hazards or safety risks is not necessarily an exceptional outcome. Rather, poor health and safety outcomes are often *de-facto* manifestations of what having a 'bad job' may entail. In the context of declining or minimal welfare state provisions, for instance, processes of labour informalisation further constrain access to health services, particularly for certain categories of workers, like migrants and/or women (Gideon, 2007).

Reflecting on what she calls the 'production of affliction' in Southern Africa, O'Laughlin (2013: 175) reminds us how poor health outcomes obviously reflect denial of access to formal health provisioning, but they are also produced by the conditions of labour, including capital's struggle 'to externalise responsibility for the reproduction of its workers'. In her work, she specifically looks at various forms of disease afflicting the labouring poor during colonial and postcolonial times, and their relation to specific moments of capital accumulation in the region, epitomised by the formation and reproduction of specific labour regimes. Her analysis highlights how the spread of tuberculosis in the first decades of the 21<sup>st</sup> century in South Africa laid in the organisation of mine-labour and its system of labour recruitment, and how the current, increasing spread of HIV-AIDS in post-apartheid South Africa should be understood in relation to the shifts in the movement of migrant labour and its new flexible residential and living arrangements. By the same token, she illustrates that the rise of malaria in Swazi sugar estates was intimately linked with the deployment of casual workers from non-infested areas with the scope of cutting costs, overcome labour scarcity, and fragment the labour force. Konzo paralysis in Mozambique, instead, was triggered by excessive consumption of unprocessed or poorly processed cassava, introduced as a staple food to cheapen the cost of social reproduction of the labour force in the rising textile sector. In all these cases, crucially, health outcomes appear as specific outcomes of processes of

accumulation and their correspondent social relations of production, rather than isolated disastrous events in the history of the region (see also O’Laughlin, 2010).

On the other hand, the feminist literature has stressed with particular emphasis the impact of capitalist transformations and the labour process on ‘the body’. The first hurdle for capital is to create individuals who are ‘willing’ (read forced) to work for a wage. This involves transforming the body into the ‘container of labour power’; in this sense, as provokingly put forward by Silvia Federici (2004: 146) ‘the human body and not the steam engine, and not even the clock, was the first machine developed by capitalism’. The alienation from the body is a distinguishing trait of capitalist work-relation, as workers submit their bodies ‘to an external order’ (Federici, 2004: 135). The labour process, through its working rhythms, organisation and disciplining mechanisms, cannot but have profound implications for the health and safety of those who participate in it. Crucially, capitalism is not necessarily interested in the everyday subsistence of the workers (O’Laughlin, 2010), or indeed their health and safety. It may internalise health concerns over the reproduction of their workforce if this threatens profitability in various ways. However, insofar it does not - when, for instance a large reserve army of labour is available, and/or when the ever falling price of commodities in the world market is ultimately presented as a ‘lamentable but inescapable reality’ (Prentice, 2014) – the pressure to reduce overall costs will also entail processes of externalisation of costs related to the reproduction of labour. The most generalised and quoted example of this process of externalisation is unpaid, reproductive work, mostly performed by women (Gideon, 2007; Federici, 2004; 2010, O’Laughlin, 2010).

What I have argued above has important implications for how we are to understand health and safety practices and outcomes in labour-intensive manufacturing production such as garment. On one hand, an understanding of health and safety outcomes anchored to the labour regime dominating the industry enables us to deconstruct oversimplified representations of disasters like Rana Plaza as single moments of rupture in the otherwise linear, progressive development of industrial relations in the sector. It provides a glimpse into the hardship of garment making for millions of workers worldwide – 40 million according to the most recently known global estimates (Hale and Wills, 2005). By deploying this approach, Rana Plaza appears as the outcome of the harshness and intensity of the labour regime defining accumulation in the industry; a characterisation of the risks that the sweatshop entails, against simplistic conceptualisations ‘in praise’ of cheap labour as providing much needed jobs in depressed areas of the world economy. These conceptualisations are still anchored to understandings of factory labour as a liberating experience, paving the way for the formation of what Standing (2007) calls ‘industrial citizenship’, bearer of important entitlements and provisions. However, today many workers remain in fact at the very margins of this citizenship during their entire industrial experience, until they are simply ejected from the factory.

On the other hand, and quite importantly for the aims of this paper, this approach provides scope for a systemic critique of current regulation aimed at ‘ensuring’

given health and safety standards in the sector. In fact, let us remember that the Shirtwaist factory fire in New York City took place in the era when tuberculosis was still known as 'tailor's disease' (Hoskins, 2014), resulting from working in dangerously filthy places. Rana Plaza, instead, has happened in the context of the ongoing globalisation of labour regulation in the sector, aimed at ameliorating working conditions and providing garment workers with minimal levels of security against work-related risk and injury. Again, it would be wrong to simply consider this as a case of exceptional failure of regulation. At the very least, this is instead partly due to the fact that regulation is embedded socio-culturally and 'travel across uneven capitalist production spaces' (Ruwanpura, 2013: 102), leading to their irregular – and perhaps erratic – application. However, what is argued here is that in many geographical settings the labour regime at work in the industry is structured around processes of systematic externalisation of costs of social reproduction of the workforce. These processes vary, and so do the failures of regulation, with different implications for workers' health and safety. The following sections illustrate how these processes unfold in the Indian garment industry in the National Capital Region (NCR) and one of its satellite embroidery centres, Bareilly, in Uttar Pradesh (UP).

### **3. The Indian garment industry: informalising health & safety concerns**

The Indian garment industry is complex and extremely varied, and is organised in clusters of small and medium enterprises (SME) (Tewari, 2008). These are characterised by clear patterns of regional product specialisation, each entailing a distinct 'local sweatshop regime' (Mezzadri, 2014a; Mezzadri, 2014b). The National Capital Region (NCR), i.e. the Delhi metropolitan conglomerate, is one of the main garment export hubs. Engaged in tailoring since Mughal times (Blake, 1993), today it is the leading centre for ladieswear production. This type of production involves numerous ancillary activities and processes of value addition, which result in a complex product cycle. Larger factories tower over the entire cluster, which is however primarily composed of medium and smaller units, and by informal workshops. Different relations of (multiple) ownership, subcontracting and interdependence link these units together, and also with the myriad of (often informal) processing units also scattered around the main industrial areas. Moreover, the majority of garment companies are also linked to the universe of home-based production, where important production tasks take place. Locally, given the specific type of product specialisation, one of the most significant non-factory based production tasks is embroidery, but also some stitching activities – particularly button-holing (known as *kaj*)- can take place in home-based or 'home-based like' units. Embroidery is not only decentralised around industrial areas in the NCR, but also in towns and villages in Uttar Pradesh (Mezzadri, 2008; Unni and Scaria, 2009; Mezzadri, 2014a).

The local sweatshop regime is as complex, as it articulates across factory and non-factory production realms. Factory-based labour is primarily male and migratory, coming from several northern Indian states, but primarily from UP and Bihar. A number of companies are currently trying to partially feminise their workforce in

given factories, with mixed results; the resilience of labour regimes is not only due to capital strategies, but also to labour dynamics. Male migrants can be of different categories; some stay longer, and go back home only for festivals and holidays. Others engage in more circulatory forms of migration; they go back during the whole of lean season, to return only for the new business year. However, in both cases, the majority stay in the same industrial premise only for a very limited period of time. Indeed, the majority of the factory workforce is in fact temporary or casualised (Singh and Kaur Sapra, 2007; Mezzadri, 2008, 2012; Barrientos et al, 2010). A survey of over 300 workers sampled across around 35 firms we conducted in 2012-2013 found that 91% of workers come from rural areas, with around 70% owning some land back home. The majority are Other Backward Castes (OBCs), although also other caste groups are present, and Muslims are overrepresented, particularly in lower industrial circuits. While 43% of workers considered land owned back home as a crucial part of their livelihood income, the rest reported to primarily rely on different forms of wage employment (Srivastava, 2014). This means that a good percentage of workers still diversify their strategies for social reproduction, across the urban-rural divide, although agricultural activities may have more or less of an impact on their overall livelihoods. In line with this outcome, we also found very high 'attrition rates' (annual turnover) across factories, even the largest.<sup>2</sup> Altogether, around 60 percent of the workers worked in the same unit for less than one year. This is to say that if migrant labour may be of a more or less circulatory nature, it remains primarily circulatory in relation to the labour process. This is a key point, as it undermines modernising narratives on factory work, over-emphasising the 'civilising influence of capital' (Federici, 2010, quoting Marx).

Patterns of recruitment partially explain circulation. The industry relies considerably on contract labour arrangements (see also Mezzadri, 2008; Barrientos et al, 2010; Barrientos, 2013). Field findings reveal that these are multiple, and highly differentiated, although in many cases layers of intermediation hide attempts by garment companies to simply eschew their responsibility towards the workers. While a good share of the workforce works in fact for contractors, a more significant share reports the company itself as the primary recruiter. The contractor may be introduced later to workers by the company. He may manage and/or supervise them, or simply register them under his name, so that they will not result as directly employed by a specific factory (Mezzadri and Srivastava, 2014). In this case, contracting is simply deployed to disguise the wage relation. Recent legislation allowing contracting in core business functions of the industry is likely to further boost this type of practice. Moreover, findings on take-home wages (not considering social security contributions) suggest that workers are paid very similarly across different categories of industrial units (large, medium, small), and across contractual positions (Srivastava, 2014). Again, this challenges ideas of large capital as able to provide better wages to the workforce, while it also explains why workers themselves may not have an interest in becoming permanent in given industrial

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<sup>2</sup> Even 'feminised' factories showed high attrition of around 15-20%.



units. Strikes and labour unrest do not manifest in the industry, except in sporadic cases, generally linked to individual cases of harsh mistreatment of workers (a common issue in India, see Bhattarcharya, 2014). In terms of living arrangements, workers either live in colonies close to the main industrial areas, or deploy a variety of informal living arrangements. In almost all cases, groups of more than five workers share tiny rooms per the entire period they work in the metropole. In 'infamous' colonies, like Kapashera, in southwest Delhi, close to Gurgaon and the Haryana border), access to water is an issue, and workers share filthy common toilets located at the entrance of the colony, which is generally 'managed' by the many local housing contractors and landlords who thrive in the slum economy.

Non-factory based labour instead comes in different combinations, on the basis of activities. Focusing on hand-embroidery, a characteristic feature of NCR products, one can subdivide workers in two types: *adda* workers (who work on intricate patterns through the use of a loom called the *adda*) and *moti* workers (who engage in classic sequin, or bead work). The former are Muslim workers, and primarily male, although women are increasingly engaging in this work. *Moti*-work is entirely feminised, and generally a Hindu activity, which can be performed by a great variety of castes. While male *adda* workers are more likely to be circular migrants and work in either small or even micro units at the very end of the informal spectrum, female *adda* workers and *moti*-workers are generally settled in Delhi for longer periods of time, as they come to Delhi with their families, and primarily work in their homes.<sup>3</sup> Machine-embroidery and button-holing is primarily organised in family units, what in India is generally classified as 'own-account work' (effectively self-employment); they may hire a few extra-workers only during peak times. The family in this case is either local or migrated to Delhi years earlier; and managed to buy its own house, something which is by now unaffordable for newcomers (the few workers hired are instead once again male circular migrants). The husband, or the dominant male in the family, is the head of the unit, and organises production while also working (Mezzadri, 2014c, CDPR, 2014).

A survey of 70 non-factory based workers placed at the very periphery of the NCR industrial formation, which we deployed to complement that on factory-based labour, provided interesting findings. In relation to production, it showed that the division between the informal, micro-units and homes is increasingly ambiguous and hard to draw, particularly in metropolitan settings, where being self-employed and organising a home-based production unit may be becoming a luxury newcomers cannot really afford, given the price of real estate and/or rent. It is not a case, in this sense, that the Government of India (GoI) recently reclassified the unit of analysis defining 'homework', to include home-based units, home-based work, but also work in 'home-based-like' units (see Raju, 2013). In fact, our survey revealed that quite tellingly, once one accounts for regularity of employment (which was guaranteed only in 11% of cases) own-account workers individually earn a very similar income than migrant wage workers (while women homeworkers, settled or otherwise, always earn less than half). Indeed, this confirms how in many settings

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<sup>3</sup> Although *moti*-workers can come from considerably different class backgrounds.

self-employment should be reconceptualised as a 'class of labour', as it is in fact proletarianised (see Bernstein, 2007; Lerche, 2010), although its integration across (non-labour) markets may be highly complex (Harriss-White, 2014).

Non-factory labour is always recruited by contractors, although these may also be relatives or kinfolks. In non-factory production, the contractor is more likely to be involved in the actual organisation and/or supervision of the work, and often comes from the same village or district of the worker, a point amply discussed by Breman (1996; 2013) in relation to issues of freedom or neo-bondage in circuits of labour circulation. In non-factory settings, one can identify different living arrangements; these range from own-dwelling to informal housing in colonies and/or slums, or even in the same contractor's unit. In no case, neither in factory-based or non-factory based production, we found workers in dormitories, unlike what was reported by studies focusing on labour-intensive manufacturing elsewhere. In China or Vietnam, for instance (e.g. Pun and Smith 2007; Cerimele, 2015), the commodification of the time and space of workers' daily social reproduction is instead a widespread practice in order to tighten control over the workforce, particularly (albeit not only) in settings characterised by tight labour markets (see also Pearson and Kusakabe, 2012). In India, at least in the NCR, neither employers nor the state bear any cost of workers' daily social reproduction, and its time and space are deployed to tighten control over the workforce, which still comes in a huge reserve army from the poor areas of the Hindi belt. 'Living' in the metropolitan area is fully informalised; it is up to workers to find 'suitable' housing arrangements.

Across factories and workshops, the labour regime is very intense. The majority of workers work for 10-12 hours per day (51%; 67% in workshops); while one third of all workshop labour works even 13-16 hours per day. In peripheral units and homes, instead, intensity varies dramatically as the relevance of un(der)employment also clearly emerges. Circular male migrant workers always work above 12 hours per day, while female homeworkers at the end of the informal labour spectrum work far less, as they lack access to regular employment (Mezzadri and Srivastava, 2014).

In terms of safety and occupational health, exhaustion was reported as the main issue in large units, which may or may not work against high targets or production quotas, but where working rhythms are always quite intense on the shopfloor. The former production manager of the largest garment player in the NCR reported that he left that employer as workers continue fainting on the shopfloor, a sight which he found difficult to bear. He now works for a medium employer, who although breaches regulation in a number of other ways, does not need such 'inhumane' working rhythms. On the other hand, 'waves' of fainting in the industry are not unknown, as reported in the brilliant *New York Times* article 'Workers of the World, Faint!' by Julia Wallace (2014). At given working rhythms, the process of extraction of labour power from its 'container' – the body – is always an unhealthy experience; an experience even confused or compared with 'possession' during the initial entry of workers into the capitalist regime, as highlighted by scholars such as Aiwa Ong (1988) or Michael Taussig (1980), to whom in fact Wallace refers.

Back pain was reported by one third of all workers, while one fifth also reported allergies due to dust and cloth particles. For workers in workshops and peripheral workers, the majority of health and safety issues are related to eyestrain and loss of eyesight, particularly those engaged in detailed embroidery work. Tellingly, across both factory and non-factory realms, very few workers still work in the sector past the age of 30, with the only exception made by own-account operators. As a matter of fact, in our sample in factories, 58% of workers were between 21 and 30 years of age, while 12% were younger than 20. Only 21% were above the age of 30, and a meagre 5.9% was above 40 years old (less than 2% above 50). In non-factory settings, the average age was even younger, with only 6% of all workers sampled older than 40 (Mezzadri and Srivastava, 2014). This means that the industrial experience remains a transitory one for the great majority of workers, one specific moment in their lives. By the age of 30, workers' bodies are hugely impacted by the intensity of work. In relation to informal migratory cycles, Breman (2013: 57) already highlights how older workers eventually go back to their village for good, like 'sucked oranges'. Indeed, the majority of both factory and non-factory workers interviewed still see their place of origin as primary residence, and the place where they eventually go back to. What happens to them once they are ejected from the factory is perhaps one of the most compelling questions to ask, to deepen our understanding of the long-term impact of informalised factory work on livelihoods.

Only one fourth of all these workers, and specifically only those working in larger units, are provided with any emergency medical facility or go through medical check-ups. However, crucially, this is linked to their work-time in a given unit (Srivastava, 2014). As workers stay generally less than one year in the same industrial premise, the internalisation of health costs per single worker born by employers is minimal, as it is the impact of such services on workers' lives. High levels of labour circulation in relation to the labour process greatly undermine the already limited health and safety provisions of the industry. Indeed, 'industrial citizenship' remains largely an unfulfilled aspiration in the sector.

The other key provision of healthcare should take place via social security, and, in India, through the payment of ESI (employee state insurance) and PF (provident fund) contributions, providing members with access to different clinics and facilities. However, only between 40-50% of all workers are entitled to ESI and PF in factory settings, and none in non-factory settings. Crucially, entitlement does not mean access, as the latter, again, depends on staying on the same company, while 'break in service' is the norm. This explains why 80% of workers in factory settings declare that they have no entitlement in relation to injury compensation and retirement benefits (Srivastava, 2014). Often, in non-factory settings, we had to even explain what we meant with work-related social benefits during interviews; none of the workers is covered under any scheme (Mezzadri, 2014c). Across the whole spectrum of labour relation, workers generally pay privately for their health issues, and access local clinics.

This illustrates that health and safety matters can hardly be represented as technical issues, particularly in contexts characterised by labour regimes which are complex,

volatile, characterised by poor working conditions, harsh working rhythms and informalised labour relations. Exposure to risk and poor access to health provisions is part and parcel of what being part of a cheap, informalised labour force means. Obviously, these issues manifest in different ways in different geographical settings. At times, they manifest in catastrophic events, and it is generally when we come to realise the inequities of the current global production and trade system. However, highly unequal circuits of production and distribution, not leading to the formation of a stable industrial proletariat can only be unhealthy and unsafe for those at the bottom, i.e. workers.

In the NCR, the extent of the potential exposure of workers to risk and health problems can only be understood by looking at the labour regime in all its complex, multiple facets, and by accounting for both realms of production and reproduction. In fact, it is the reproductive sphere which bears the brunt of employers' strategy towards cost minimisation of social contributions in favour of the workforce. The 'home', which for many workers is often far away in peri-urban or rural settings, is the place that is supposed to absorb any work-related vulnerability. In fact, it is there that a significant share of the workforce returns on a yearly basis. Moreover, it seems it is there that workers will return once their industrial experience is over. The factory remains so far a transient moment in the history of their overall reproduction. The informalisation of the workforce translates into processes of informalisation of health and safety concerns and practices, whose costs are systematically externalised from factories, workshops and employers to households, homes, and workers. Arguably, corporate approaches to health and safety standards do not really tackle this issue. In fact, in relation to recent ethical projects on garment homeworking, they may be further institutionalising the informalisation of health and safety concerns, reconstructing them as a primary responsibility of the 'home' and the workers.

#### **4. Bringing health and safety 'home' in Bareilly: the limitation of corporate approaches to labour standards**

Given the complexity of the labour regime in the NCR, and the 'composite sweatshop' it generates (Mezzadri, 2014a), several studies by now acknowledge the limitation of CSR norms in improving significantly working conditions. Barrientos et al (2010), for instance, highlight the inability of codes to tackle wages and other more 'politically charged' issues, and highlight the lack of access to social security. They also highlight how codes target primarily what they refer to as 'visual issues', namely health and safety measure quite broadly defined as synonyms for how factories 'look' to an external social auditor, in terms of fire exits, uniforms, and safety equipment more generally. In our own survey, we found that only larger units 'look good' visually, while workshops are generally over-crowded places with exhausted fans and in many cases no exits other than the entry door. At the most informalised end of the spectrum, micro-units are often placed in unsafe basements, not meant to host any commercial and/or industrial activity. Many employers, moreover, have one 'show-piece' factory they deploy for buyers' audits, while they

also own numerous other factories which representatives of brands may never visit, an issue reported by several scholars in relation to different garment producing areas across the world (e.g. Taylor, 2011, see also De Neve 2014).

This general 'visual take' on health and safety issues is highly problematic, as it does not really show a systematic understanding of the potential failures in addressing pressing health and safety concerns experienced by workers. As argued in earlier sections, this understanding should necessarily be embedded in the overall workings of the industry. Instead, codes, over-relying on visual understanding of occupational health and safety provisions, can simply scratch the surface.

In non-factory settings, codes are doomed to be ineffective, as they are specifically elaborated as factory-based regulations. However, an attempt to tackle the poor working conditions of the vast army of homeworkers engaged in the industry has been done in recent years. For instance, through the Ethical Trade Initiative (ETI, 2006; 2013), a number of buyers have tried to elaborate labour standards targeting homeworkers in Bareilly, UP, an important embroidery centre connected to the NCR. The project ran from 2006 to 2013. Despite the commitment of the project to ethical trading, fieldwork in Bareilly revealed that it had no impact on wages and access to employment for homeworkers involved in embroidery for export (Mezzadri, 2014a). Field findings also indicate that, in line with corporate approaches targeting factories, health and safety concerns were put at the forefront of the project agenda. These are in fact potentially less controversial for the vast web of contractors towering over local contracting chains, which are organised in neighbourhood-based putting-out systems of production involving tight control over informal home-based workers. However, the approach to health and safety in the context of the project betrays a clear push towards workers' self-regulation, arguably in line with the rise of the generalised culture of self-management triggered by processes of neoliberalisation in India (on this, see Gooptu, 2013).

The project involves the formation of an association of contractors, the Bareilly Homeworkers Group (BHG), later renamed the Handwork Foundation (HF), and it financed the work of a local branch of the Self Employed Women Association (SEWA). The role of contractors is effectively only one of 'facilitating' the work of SEWA, i.e. 'allowing' SEWA's activists to work with homeworkers deployed by the contractors. Control over their work is so tight, and the divide between public and private spaces so blurred in the peri-urban and rural areas where production takes place, that it is hard to even talk with homeworkers if the local contractors and its sub-agents do not agree. All the ethical content of the project is instead delivered by SEWA. Locally, SEWA offers health and safety trainings to artisans in their homes, and it should make sure that artisans liaise with the local government to benefit from social security schemes. SEWA also runs a medical camp. Artisans should be able to access at least two schemes. One is the Rajiv Gandhi Shilpi Swasthya Bima Yojana, approved within the 11th Five-Year Plan, which guarantees medical insurance for artisans, their wives and two of their children. The second is the Khadi Karighar Janashree Bima Yojana, aimed at providing life insurance to members of vocation/occupation groups below the poverty line or marginally above it

(DCMSME, 2013; Development Commissioner for Handicraft, 2013). A semi-quantitative questionnaire distributed to 100 local home-based workers across Bareilly town and its surroundings and interviews with local key stakeholders revealed that none of them was in fact part of any scheme. Home-based workers did not have access to any form of social security, in line with their counterparts in the NCR, where in fact many of them travel during given periods of the year, and engage in spells of circular migration to access the higher wage rate contractors offer in metropolitan settings (Mezzadri, 2013; Mezzadri, 2014a).

No local contractor and certainly no NCR exporter – let alone international buyer – offers any health and safety provision to home-based workers. Capital fully externalises all costs for workers' well-being and safety, even during work time. As a matter of fact, it is the very logic of subcontracting outside factory-based realms of production that enables the entire chain of garment employers to transmit risks 'upstream', towards households, homes, and workers. While it is clear that artisans are tightly incorporated into what is effectively a wage relation, defining multiple pathways to proletarianisation (Mezzadri, 2013), this relation does not translate into any social security provisions. The ethical initiative is fully embedded into the relations of domination permeating the local economy, and, arguably, further institutionalises these relations, reinforcing the role of 'the home' as the primary domain where health and safety measures should be guaranteed by educating workers towards their own well-being. Realms of social reproduction are hence reproduced as the primary locus where social responsibility has to be ensured. Workers should internalise lessons towards their own well-being, particularly in relation to posture, and use of light when working, as the impact of embroidery work on eyesight is particularly harsh. In short, they are the ones who are made in charge of protecting their bodies against the harshness of their toil for others.

However, as in metropolitan settings, in both factory and non-factory realms, very few workers work beyond the age of 30, and virtually none above the age of 40. Women generally become supervisors of their daughters' work. Despite the fact that all artisans, men and women, report that they would want a different future for their offspring, very few families manage to break free from this very taxing work. At best, some family members - generally male - will manage to enter other lines of work, while others - generally female - will continue the family's traditional occupation. The lack of social security provisions clashes against these aspirations, particularly for women, for whom migration is not an option. Health emergencies, of any type, are socialised by the household, and may imply the need to enter informal debt relations with local moneylenders, or, more often, with the same contractors providing work. This practice reinforces the subordination of home-based workers to local contractors, through a process of 'interlocking' of labour and credit relations (Mezzadri, 2013), an issue already widely discussed in relation to agriculture (see Byres, 1998; Srivastava, 1989).

Overall, the complex process of informalisation of labour in the garment sector in India, shaping a labour regime founded on the intensity of work, on minimal social provisions, and on the systematic externalisation of costs for the social reproduction

of the workforce, impacts profoundly on the health and safety of garment workers. From the largest factories of the NCR, to the homes in its metropolitan surrounding or in the peri-urban and rural enclaves and villages of Uttar Pradesh, the health and safety of garment workers remains largely unaddressed by the industry as a whole. Health and safety concerns are consistently socialised by workers and their families, although for different reasons across the spectrum of labour relations.

In factory-based realms, the rampant use of contract labour, which may even increase in the context of changing national regulation, and in light of global commercial dynamics, undermines the factory as an arena of work-related social protection. Moreover, the factory may remain a transient moment shaping workers' livelihoods. In larger factories, those which at least 'look good' to the eye of the social auditor, but which may also have inhumane rhythms due to production targets and quotas, the increasing intensity of work harshly strains workers' bodies. High attrition rates guarantee that employers will bear minimal responsibility for workers' well-being. As workers enter and exit factories, circulating endlessly across the entire labour process characterising the NCR and its surroundings, and diversifying their reproduction across the urban-rural divide, one should severely question the impact of technicistic solutions to health and safety provisions inside single industrial premises.

In non-factory settings, where productive and reproductive time and rhythms overlap, corporate approaches to health and safety concerns are primarily conceptualised in terms of self-regulation of the workers towards their own well-being. In both cases, arguably, risks and adversities are entirely socialised by the reproductive sphere. Luckily, India had no Rana Plaza. Nevertheless, garment jobs remain unhealthy, unsafe jobs, unable to provide significantly to the needs of a highly informalised workforce that seems to systematically subsidise employers in relation to bearing the costs of its own social reproduction.

## **5. Conclusion**

As health and safety concerns are taking centre stage over discussion of the global garment industry, and a new era of international agreements finally opens up, this paper has argued that we should address these concerns systemically, by looking at the labour regime characterising the industry. In fact, failures in health and safety provisions in the industry are one of the many manifestations of what having a poorly paid, insecure garment job may entail. While indeed some geographical settings may be better than others, and some employers more 'socially responsible' than others, health and safety concerns cannot be addressed through a piecemeal approach, when there is compelling evidence that the whole global garment industry is marred with deep structural problems which expose workers to different crises of reproduction. The same concerns cannot be addressed through technicistic approaches targeting single production units either; as such technical solutions may be undermined and emptied of potential effectiveness by overall labour relations and practices dominating the industry.

Discussing the case of the Indian garment industry in the NCR and one of its embroidery satellite centres, Bareilly, UP, this paper has attempted to show that the industry is characterised by systematic processes of externalisation of costs related to the social reproduction of the workforce. These processes manifest in different ways across factory and non-factory settings, but they do share a common logic; that of devolving responsibilities over workers' well-being from factories, workshops and employers to households, homes and workers. Corporate approaches to labour standards continue simply scratching the surface; in some cases they may even reinforce the institutionalisation of self-regulation in relation to health and safety, particularly in home-based settings. Under the labour regime characterising this industry in many settings, its low wages and social security provisions, health and safety outcomes are extremely problematic. 'Unequal societies are literally sick societies', writes O'Laughlin (2010: 5, paraphrasing from Wilkinson, 1996). By the same token, a highly unequal trade and production system can only be a sick, unsafe system for those fighting to make a livelihood at its very bottom.



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