



## A LEGAL STUDY ON HEALTH AND SAFETY OF MIGRANT WORKERS IN TAMIL NADU: FOCUS ON AGRICULTURAL, CONSTRUCTION, AND TEXTILE SECTORS

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### ABSTRACT

*Migrant workers are an important part of the economic structure of Tamil Nadu, focusing on three critical sectors such as agriculture, construction and textiles. Their contribution to the savings is difficult, notwithstanding that they are low-perilous, which exposes them to difficult health risks, working conditions, exploitation, and inadequate legal protection. This research is about the legal frameworks established to protect the rights of these workers under national and state-specific laws such as the Unorganised Workers' Social Security Act, 2008, the Inter-State Migrant Workmen (Regulation of Employment and Conditions of Service) Act, the Factories Act and the Minimum Wages Act. This Paper applies the combination of qualitative and quantitative methods, including case studies and stakeholder interviews, to value the strength of such factors as sound supplies and important gaps in enforcement and consciousness. The findings point out systemic Problems such as the lack of access to proper healthcare, insufficient protection and lack of awareness of rights among migrant workers. Astatine the close it gives unjust recommendations along with sound protections and remedial health and guard standards, and extremely recommends further stable and further ancillary surroundings for the unsettled workers in Tamil Nadu. Through legal analysis and empirical data collected from affected workers, this paper aims to offer policy recommendations to strengthen the legal safeguards and improve health and safety conditions for migrant workers.*

**Keywords:** Migrant workers, Health and Safety, Agricultural, Construction & Textile Sector, Workplace Safety Regulations.

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## INTRODUCTION

Migrant labour plays an important role in the economy of Tamil Nadu and adds to the state's agricultural production and textiles, which are very important. Despite their advantageous conditions are always bad and dangerous, putting their health and safety at stake important possibilities. This chapter outlines the socio-economic conditions of migrant workers in Tamil Nadu, highlighting the need for comprehensive legal studies to protect these workers. A colourful agriculture-primarily based financial system characterises Tamil Nadu, employing a large proportion of migrants primarily within the rural regions, which are especially concerned in planting, harvesting, and processing crops. The construction quarter is likewise a big enterprise, supplying migrants and opportunities to stable, high wages for the physically demanding process within the city development challenge. Likewise, the fabric industry, the biggest in India, is closely based on migrant workers for production and other methods.

### **Migrant workers in those industries are at risk of many health risks:**

**Agriculture:** These workers expose themselves to numerous unsafe insecticides and fertilisers without shielding gear, resulting in acute and chronic illnesses, along with respiratory troubles and skin diseases. The bodily labour involved in agricultural work also poses a risk of musculoskeletal accidents.

**Construction:** The construction environment is full of dangers. Falls from heights, injuries because of equipment, and exposure to harmful materials, consisting of asbestos and silica dust, signify these surroundings. Lack of safety and machinery education contributes to this risk. They provide very high fees for work accident sites.

**Textile:** Workers are often exposed to contaminated chemicals used in dyeing and finishing, which leads to respiratory problems, skin diseases, and other health problems. Furthermore, the disturbing nature of the job frequently creates mental issues like strain and anxiety.

### **Migrant employees have various challenges that make their fitness and protection even worse:**

Many migrants work within the informal financial system, where exertions laws are poorly enforced. This leaves them vulnerable to exploitation as they have been confined and do not have access to protection measures and health services. Migrant workers usually live in small houses and do not have the means of transportation to access the fitness facilities. Moreover,

the language and cultural boundaries restrict them from seeking medical care. Migrant employees rarely realise what rights they have and how they can defend their rights legally. Without good enough records, they may have no capacity to push for higher situations or any felony protection provided.

**Objectives:**

- To examine the present prison frameworks governing the fitness and safety of migrant workers in Tamil Nadu.
- To investigate the effectiveness of those laws in protecting migrant people in the agricultural, construction, and textile sectors.
- Analyse limitations to healthcare get admission to for migrant employees, such as availability and affordability of offerings.
- Examine the position of social support systems and networks available to migrant workers in having access to healthcare and legal services.
- Measure the extent of cognisance among migrant people regarding their criminal rights and protections related to health and safety.
- Analyse the responsibilities of employers in making sure health and protection standards are met for migrant workers.
- To pick out gaps and provide actionable hints for improving fitness and protection situations.

**Significance of Study:**

- This study is highlighting issues of healthcare and protection for the migrant workers in Tamil Nadu at instances, this is, particularly, which deserve focused interventions.
- From the evaluation of present legal frameworks and effectiveness, this takes a look at provides essential records for policymaking functions to work out toward strong exertions laws and policies.
- The end aims at regulation strengthening protection for migrant employees in ensuring secure working situations and fitness care.
- The findings of the review will help NGOs and other hard-working organisations to support and push for better working conditions and rights for migrants.
- By identifying gaps in current knowledge and practices, we can help guide future research efforts and focus on the rights of migrants to work hard and stay healthy.

- The study aims to support social justice by addressing the unfair treatment of migrant workers and ensuring their rights and well-being are protected.
- Support sustainable financial development in Tamil Nadu by helping to improve the empowerment and protection of migrant workers. This is a blessing to all workers and the wider economy.
- The research emphasises collaboration between agencies, employers and civil society in scaling up holistic strategies to improve the driving conditions of migrants.

## OVERVIEW OF MIGRANT LABOUR IN INDIA

Migrant exertions are an important feature of India's labour marketplace, reflecting the socio-economic diversity of the United States of America. This evaluation highlights the important traits, trends, and demanding situations of migrant hard work in India.

**Definition and Scope:** This comprises labour migrants who migrate from one area to another to gain admission to numerous progressed employment possibilities. Hereby, those individuals' journey returned to their home by and large on my own and are often normally at work in agriculture or related sectors like creation, in addition to textile industries.

**Migration Demographics:** An expected tens of tens of millions of people migrate within India, but in keeping with the 2011 Census, around 139 million internal migrants, which could have multiplied at some point in recent years. The migrant people are essentially teenagers, though ruled with the aid of men, even though girls account for a widespread range too, specifically in textiles and domestic service.

**Causes for Migration:** One of the essential motives for migration is good employment and higher wages in towns as compared to rural regions. Drought situations, land degradation, and monetary instability in rural regions inspire people to relocate and search for employment in towns. Increased rates of urbanisation and industrialisation have resulted in the need for hard work in extraordinary sectors, thereby attracting migration.

### Sectoral Distribution -

**Agriculture:** It is where large populations paintings in the agricultural fields in seasonal modes. The agricultural people engage in cultivation, harvesting, and packaging of the plants.

**Construction:** Another tremendous place wherein the migrant personnel contribute immensely entails constructional paintings, which include building infrastructures and habitations.

**Textiles and Manufacturing:** The migrant populace is considerable in fabric industries and production units, wherein jobs are furnished on a large scale at low wages; however, labour intensity is very excessive.

**Issues Faced by way of Migrant Workers:** The majority of migrant workers work within the informal sector, where labour laws are weakly applied. As a result, they grow to be sufferers of exploitation and abuse. Migrant people generally paintings in dangerous environments with little to no access to safety equipment, and for that reason have an excessive incidence of work-associated injuries and health issues. There is a problem in having access to health care, schooling, and housing, as migrants are often characterised as transients and do not have neighbourhood identification. Migrant employees are socially alienated and afflicted by discrimination in the towns, which increases their vulnerability.

**Government Policies and Initiatives:** The Indian government has introduced numerous guidelines that protect migrant workers, including the Unorganised Workers' Social Security Act 2008 and the National Policy on Migration 2017. However, maximum of these guidelines are ineffective because of vulnerable implementation and enforcement.

**Recent Trends: COVID-19 Impact:** The pandemic seriously impacted migrant people, inflicting high unemployment, loss of income, and forced migration to rural regions. This confirmed the vulnerabilities in this institution. Civil society groups and advocacy companies have more and more been aware of the rights and wishes of migrant people and have multiplied efforts to address their challenges.

## LEGAL FRAMEWORK GOVERNING MIGRANT WORKERS

The prison system that controls migrants in India is multi-tiered and has a wide range of legal frameworks or provisions that enable migrants to gain entry and ensure their welfare. Principles for such a system are defined below:

**Fundamental Rights under the Constitution of India:** Articles 14 (right to equality), 21 (Right to life and personal liberty) and 23 (prohibition of trafficking) protect migrants and guarantee them fundamental rights and freedoms.

**Political Principles of the State:** Articles 39(e) and f) establish the right to a dignified standard of living and financial security.

**The Inter-State Migrant Workmen (Regulation of Employment and Conditions of Service) Act, 1979:** This Act controls the terms and conditions of employment for interstate migrant workers, Worker registration and wage assessment and housing provision.

**The Minimum Wages Act, 1948:** The migrant employee is paid minimal wages consistent with their starting place.

**The Employees' Provident Funds and Miscellaneous Provisions Act 1952:** Only a few sections apply to these employees, as their contributions can be deposited into a provident fund for protection.

**The Factories Act 1948:** Hours of labour, safety, and so on. Underneath this act is implemented for a migrant employee who works in a manufacturing unit.

**Occupational Safety, Health and Working Conditions Code 2020:** It pursues to make a secure working environment for all people, which includes migrant workers, by means of requiring health and safety measures at work.

**Employee's State Insurance Act, 1948:** The Act gives social protection to employees. This includes medical treatment and maternity benefits. Sometimes this may not be the case for immigrant workers.

**National Food Security Act 2013:** Food security for vulnerable groups, such as migrants, although implementation may be sporadic. India has ratified some of the ILO conventions to guard the rights of migrant workers:

**C97 - Migration for Employment Convention:** It addresses the rights of migrant workers and their own families.

**C143 - Convention of Supplementary Provisions on Migrant Workers:** The convention aims to ensure the safety of migrant workers from discrimination. Most states administer their specific laws and regulations governing the employment and benefits of emerging professionals. They primarily attempt to address these issues in specific issues and contexts. Indian courts provide legal interpretations and guidelines for the transfer of labour rights abroad. Decisions often promote rights through judicial review. Especially with fair driving conditions and protection from exploitation. Some of the tasks which might be in the region by the authorities are: Shramik Special Train throughout the COVID-19 pandemic, Pradhan Mantri Garib Kalyan Yojana supplied comfort to the maximum vulnerable sections of society.

## LITERATURE REVIEW

**Bhowmik, S.K. (2010):** The study sought to analyse vulnerabilities of migrant workers in different sectors related to issues concerning job security and productivity. Its findings are globally applicable, and there is no local specificity.

**Chaudhuri, S. (2017):** The research presents an account of the different health risks that the migrant workers would be facing by integrating findings from various studies; nevertheless, the findings could do with more in-depth case studies in some instances.

**Deshingkar, P., & Akter, S. (2009):** The aim is to link migration with human development. It is a wide-ranging review of literature. But the focus is quite limited on particular disability problems.

**Ghosh, J. (2013):** This survey is about disorder and migrants and also provides insights into the vulnerabilities they suffer in general terms. Though a few findings may come too early due to rapid social and economic changes.

**Kumar, R. (2014):** This study aims to assess health and safety risks for migrant workers in construction, but it offers targeted but limited guidance for other industries.

**Luthra, R. (2018):** This study probes the reaction of the state towards migrant worker issues; hence, the policy effectiveness becomes doubtful. Yet there's a void regarding the implementation of practical solutions.

**Mishra, A., and Rai, A. (2015):** This study investigates health and safety hazards faced by migrants. It's the reliance on poorer documentation that may prove to weaken the findings' strength.

**NCEUS (2007):** This report by the government captures whatever detail is available with regard to specific migrant workers in various sectors. Even the vocabulary of bureaucracy can be hard for the average individual.

**Ranjan, A. (2013):** The study delves into the ambit of studies on mental health problems of migrant workers. This is an issue that is mostly ignored. It is more centred around the problem than potential solutions for coping with it.

**Sasikumar, S.K., & Sahu, P.K. (2010):** This study gives an overview of the migration process in India, which is crucial for researchers. It lacks, however, a very thorough perspective on the experiences of migrants.

**Sharma, R. (2012):** The research incorporates the vulnerabilities of migrant workers and provides a structured analysis of their problems. But some of these may be repetitions.

**Sharma, V., and Bhattacharya, P. (2015):** This socio-economic analysis covers various sectors, and the insights generated are, however, from what would not constitute a lack of practical solutions to the discussed problems.

**Singh, J. (2018):** The research deals with the health and safety issues of migrant workers in agriculture. And the very detailed case studies, but then again, the resolution is inadequate in terms of the problem of urban migration.

**Srivastava, R. (2012):** It should give a clear view of the health disparities emerging because of migrants; future research can be built on its findings. However, there are no practical recommendations for interventions.

**Thomas, S. (2015):** This study assesses health risks among migrant workers through systematic adjustments. But geographic limitations may lessen the ability to enforce such features.

**World Bank (2016):** This research encompasses a global perspective on the economic participation and challenges related to migration, along with general policy recommendations that may not apply to specific local needs.

**Wadhwa, W. and Prakash, A. (2016):** This study focuses on occupational health and safety issues concerning migrant workers, providing some practical insights into it. But it ignores some important potential economic and social factors.

**Bhagat, R. B. (2013):** The study gives a broad overview of migration trends in India and squeezes insights for decision makers. Although the theoretical framework is not easy to adapt to the locality.

**Venkatesh, S. (2014):** This work critically examines the legal framework that posits migrants' protection. Especially labour that is manual in nature. However, it becomes very difficult to reach because of sheer legal restrictions.



**Vishwanath, K. (2014):** The study intends to look into the health challenges that migrant workers face in various cities. India is faced with related case studies. But it does not concern migration dynamics in rural areas.

**D'Souza, R. M. (2016):** This study establishes critical barriers for migrants to access health services. But concentrating on just one barrier could, in turn, lead to possible solutions.

**Ghosh, J. and Mukherjee, A. (2014):** Research on migration concerning health and consolidating various forms of data sources.

**Kaur, R. (2011):** This study presents an overall account of two social and economic problems that migrant workers bear: being somewhat up-to-the-minute disbursement that affects the relevance of those concerned.

**Kaur, R. (2015):** The Present systematic overview gives a look into the health problems of migrant workers; however, the result may not apply to some areas due to the absence of local context.

#### **GAPS IN RESEARCH**

- Limited studies on specific fitness-demanding situations confronted by means of migrant people in agriculture, creation, and textiles.
- Lack of studies tracking health consequences over the years for migrant people.
- Lack of information on the obstacles to healthcare access for migrant people.
- There is restricted research on the broader determinants of social elements related to the fitness of the migrant worker.
- There is limited research on how gender, age, and socioeconomic labelling influence health and safety.
- The importance of technical and safety standards for immigrants is grossly ignored.
- There is a lack of research on employees' awareness of their rights and available sports services.
- Required studies that would help to decide which strategies are most helpful for the health advertising of migrant employees.
- Research is constrained about environmental fitness hazards among migrant employees.
- Effectively disaggregate statistics by geographic location, gender, and location to understand the exact problem.

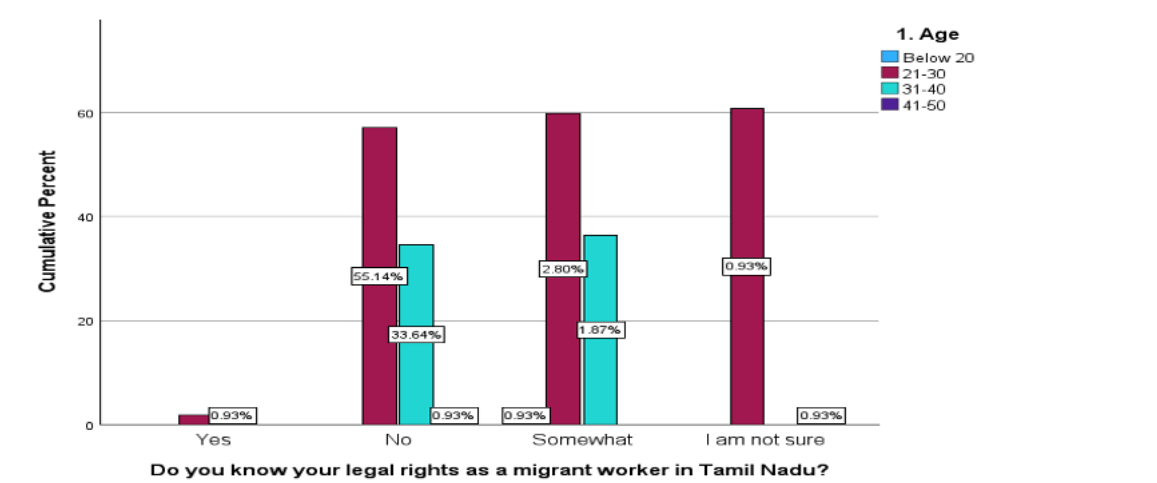
- There is limited research on the ongoing impact of COVID-19. On the health and safety of immigrants.
- Need for research on mechanisms for reporting health and safety violations.
- Insufficient comparative research between migrant worker conditions in Tamil Nadu and other areas.

## RESEARCH METHODOLOGY

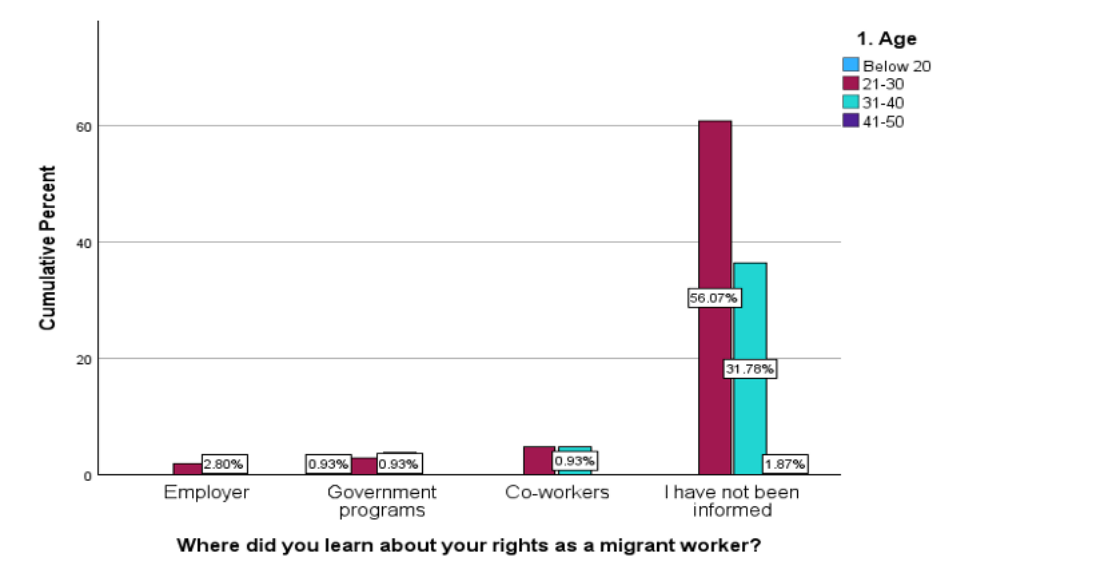
The research method used is empirical. The study is based on primary and secondary data collection. The secondary is using the data information already collected by someone and using it to solve the problem. Examples of Data Collection are newspapers, magazines, websites, blogs, case law, published books, articles, working /discussion papers. The research instrument used to collect primary data is a well-structured questionnaire, which has been launched through Google Forms online. Around 200 responses were collected. The independent variables used here are age, gender, qualification, occupation and place of living. The dependent variable is do you believe that the subject of the fitness and protection of migrant people in Tamil Nadu, especially within the agricultural, production, and textile sectors. It will undertake a blended approach method combining quantitative and qualitative techniques for correct evaluation. This section analyses the experiences, needs and health and safety challenges of migrants in Tamil Nadu across three sectors: agriculture, creative industries and textiles. The hypotheses based on the data and findings provided:

**(H0):** There is no significant relationship between the demographic factors and the awareness of legal rights, access to healthcare, and the usage of legal assistance among migrant workers in Tamil Nadu.

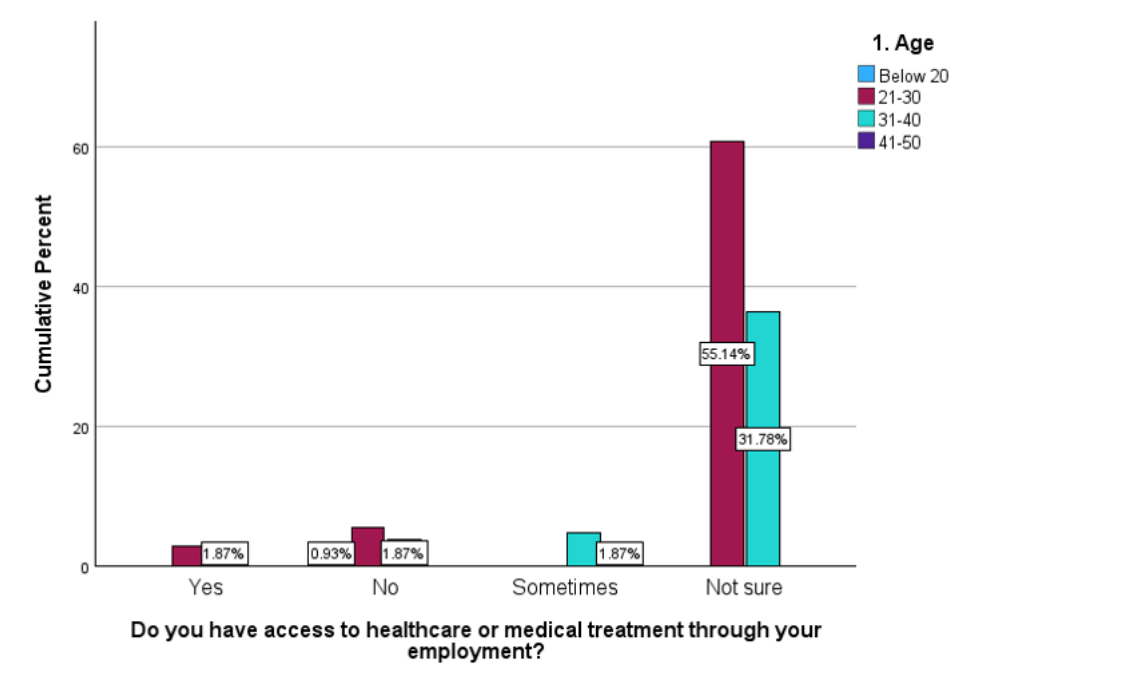
**(H1):** There is a significant relationship between the demographic factors and the awareness of legal rights, access to healthcare, and the usage of legal assistance among migrant workers in Tamil Nadu.

**FIGURE:1**

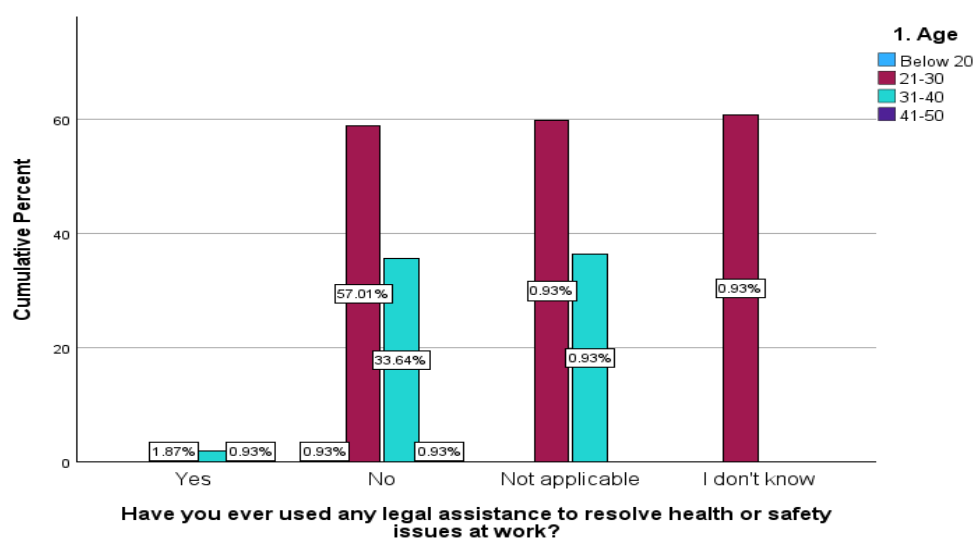
**LEGEND:** shows the relationship between the age of the respondent and their opinion on Do you know your legal tribes as a migrant worker in Tamil Nadu.

**FIGURE: 2**

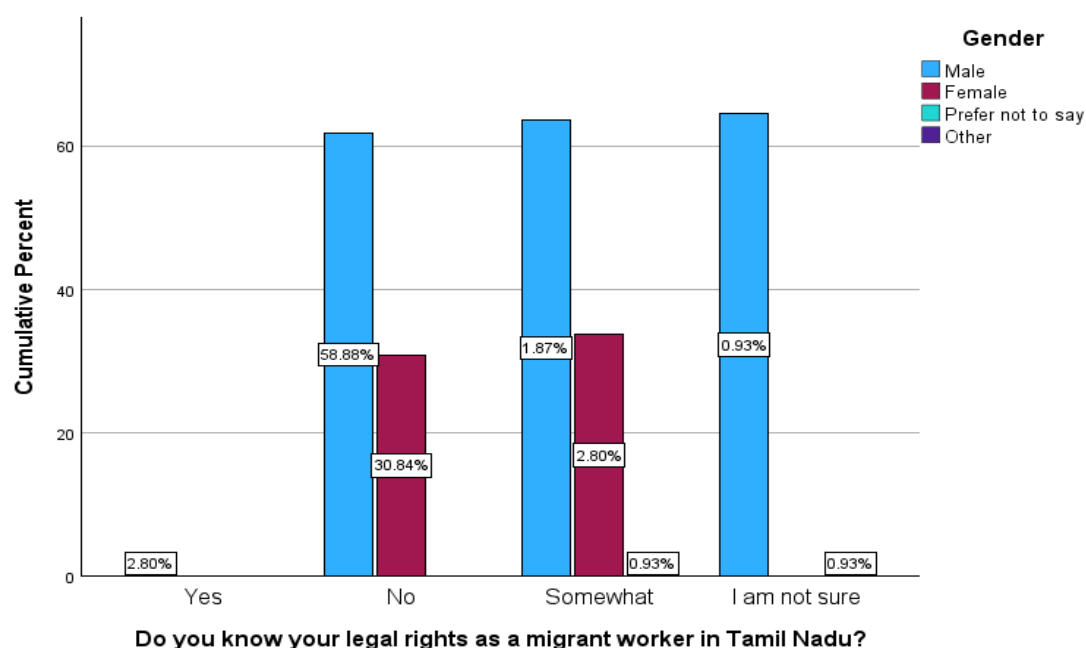
**LEGEND:** shows the relationship between the age of the respondent and their opinion on where they learn about their rights as a migrant worker.

**FIGURE: 3**

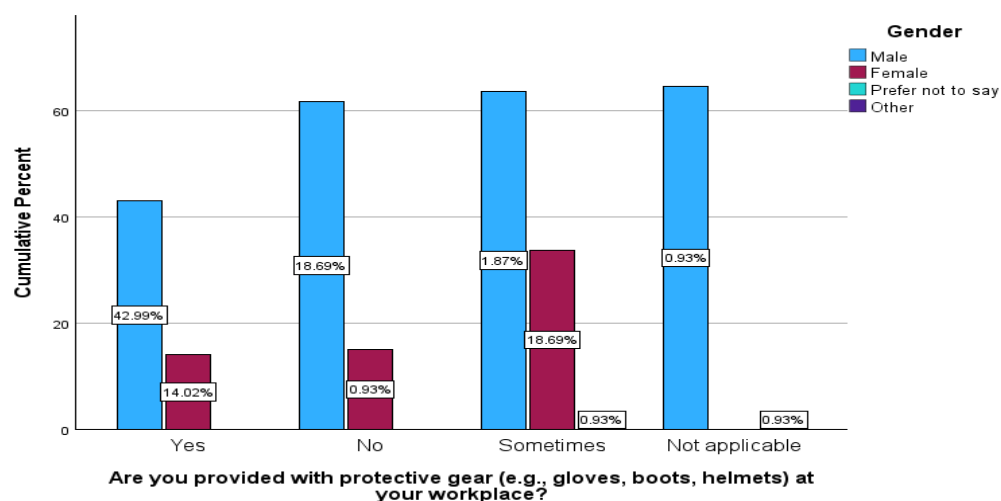
**LEGEND:** shows the relationship between the age of the respondent and they are opinion on do they have access to health care or medical treatment through their employment.

**FIGURE: 4**

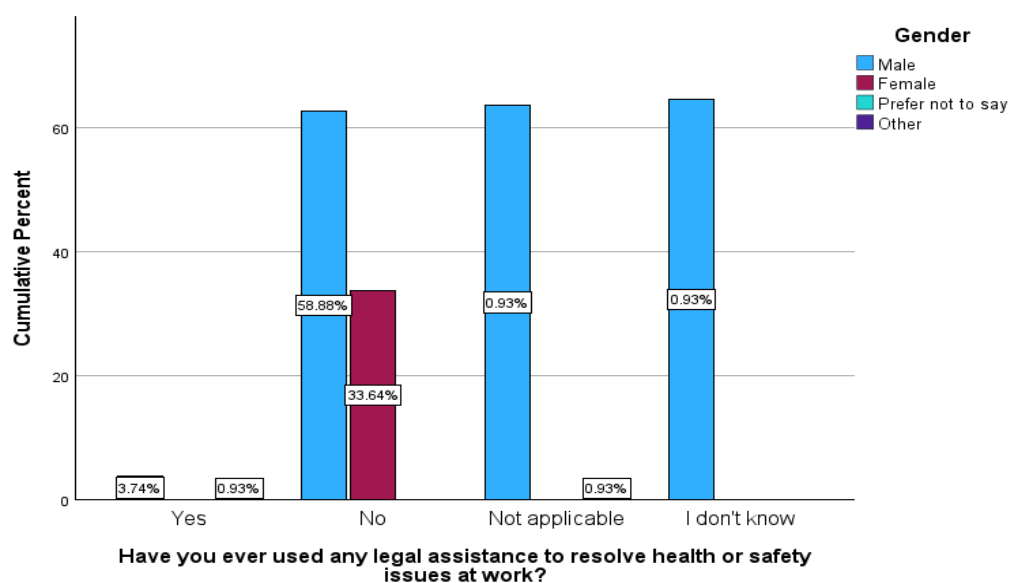
**LEGEND:** shows the relationship between the age of the respondent and their opinion on having ever used a legal assistant to resolve health or safety issues at work.

**FIGURE: 5**

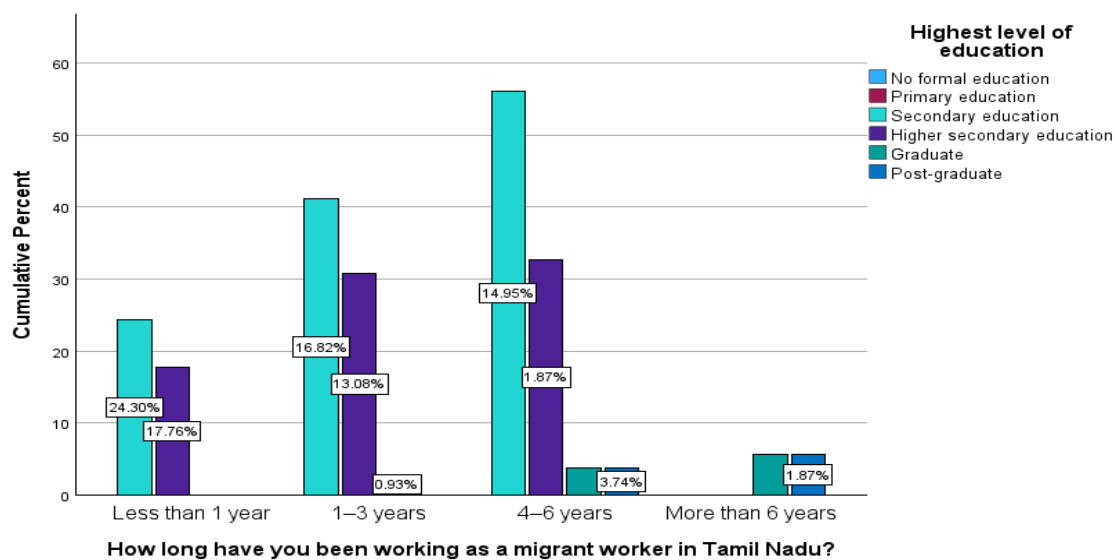
**LEGEND:** choose the relationship between the tender of the respondent and their opinion on Do you know your legal right as a migrant worker in Tamil Nadu.

**FIGURE: 6**

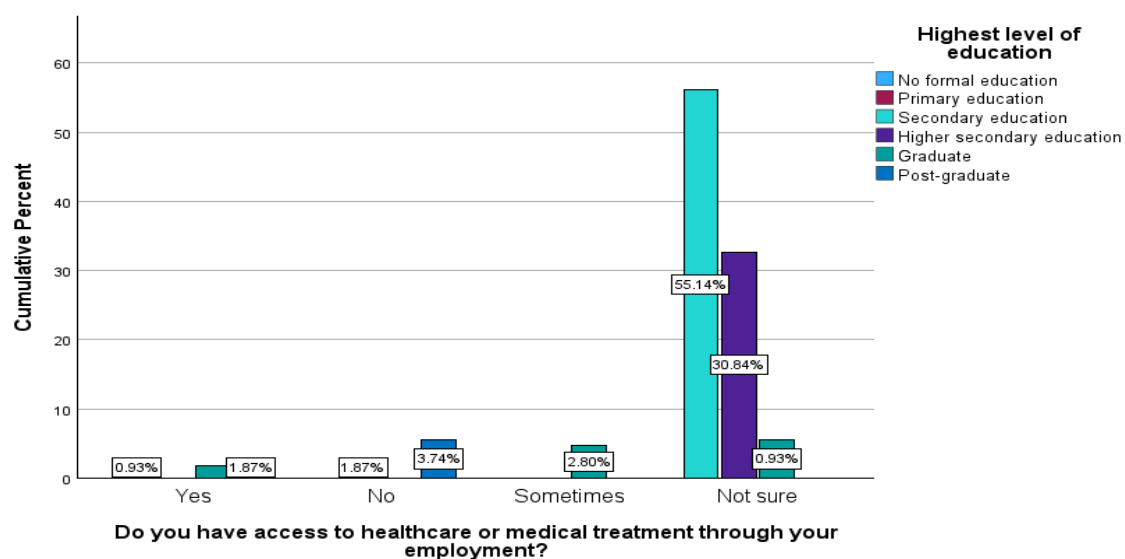
**LEGEND:** choose the relationship between the gender of the respondent and their opinion on are provided with protection gear at their workplace.

**FIGURE: 7**

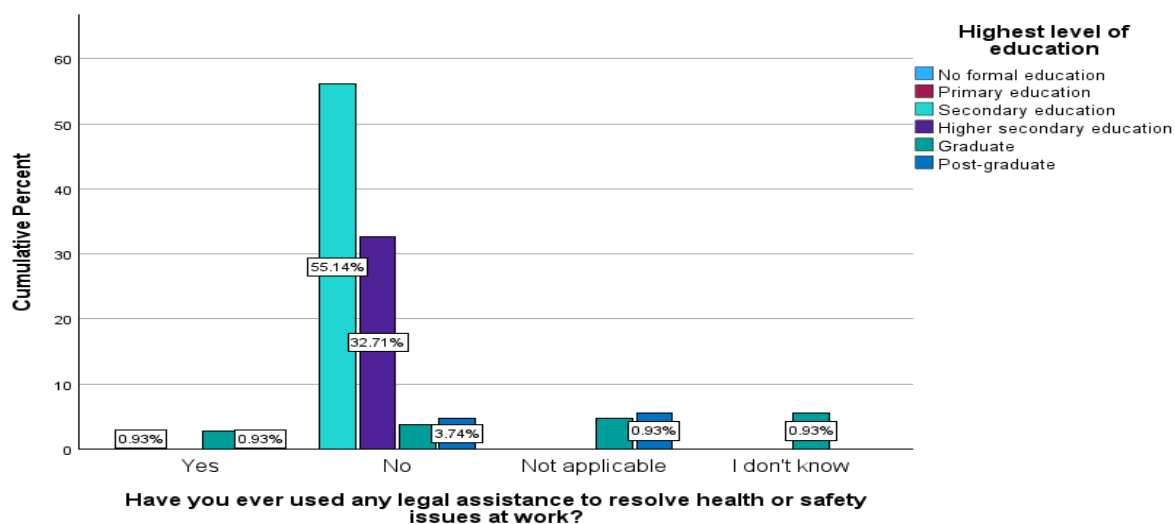
**LEGEND:** shows the relationship between the gender of the respondent and their opinion on having ever used any legal assistant to resolve health or safety issues at work.

**FIGURE: 8**

**LEGEND:** choose the relationship between the highest level of education of the respondent and their opinion on how long they have been working as a migrant worker in Tamil Nadu.

**FIGURE: 9**

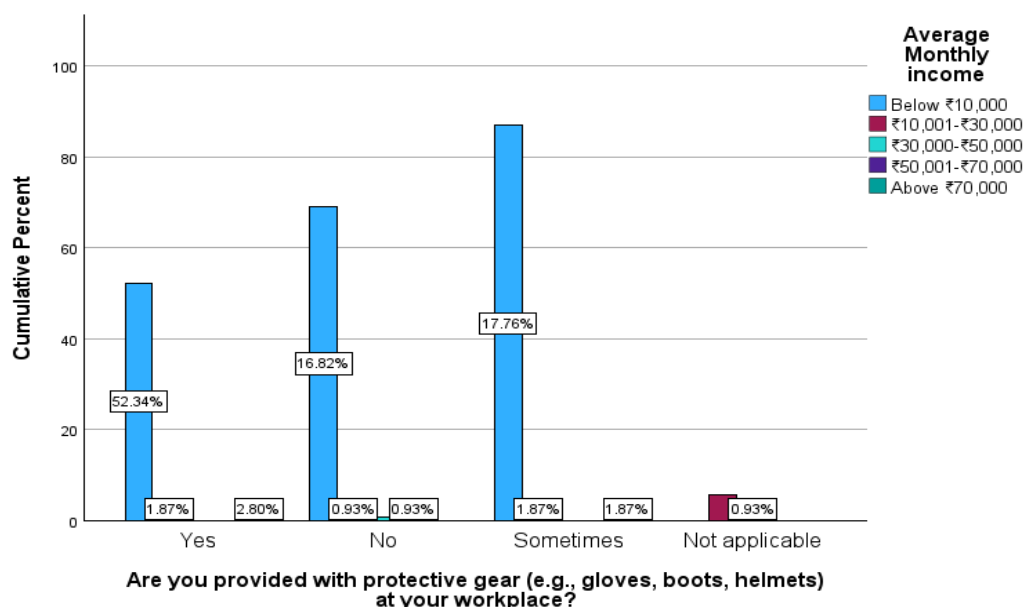
**LEGEND:** choose the relationship between the education qualification of the respondent and their opinion on do they have access to help care or medical treatment through their employment.

**FIGURE: 10**

**LEGEND:** shows the relationship between the education qualification of the respondent and their opinion on having ever used any legal assistant to resolve health or safety issues at work.

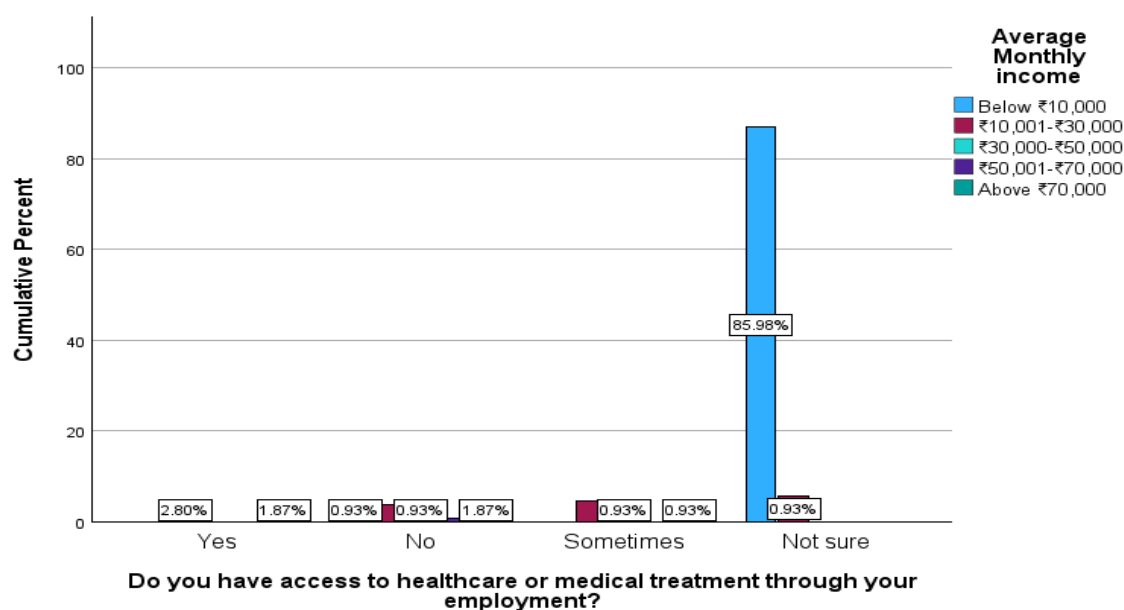
**FIGURE: 11**

**LEGEND:** shows the relationship between the education qualification of the respondent and their opinion on do they know where to report health and safety violations at your workplace.

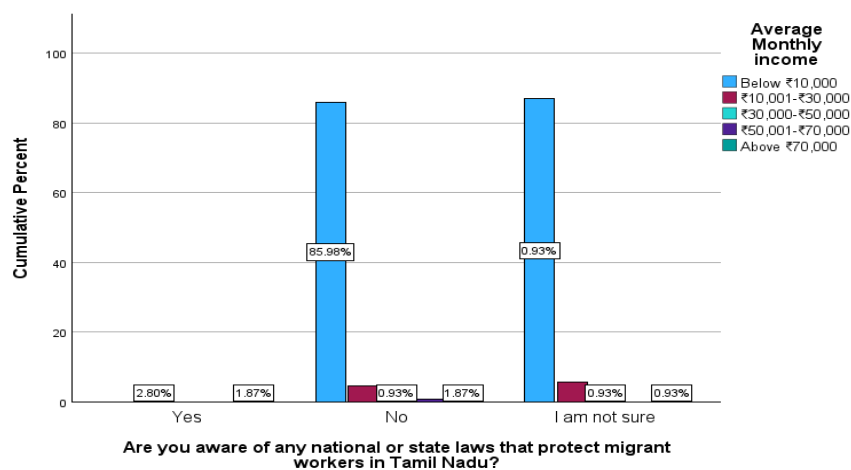
**FIGURE: 12**

**LEGEND:** shows the relationship between the income of the respondent and their opinion on are provided with protection gear at their workplace.



**FIGURE: 13**

**LEGEND:** choose the relationship between the income of the respondent and their opinion on do they have access to help care or medical treatment through their employment.

**FIGURE: 14**

**LEGEND:** shows the relationship between the income of the respondent and their opinion on are aware of national or state laws that protect migrant workers in Tamil Nadu.

## RESULTS

**Figure 1:** It can be concluded by stating that the maximum response is given by age category 21 to 30 years, and they have stated that they are not aware that they have a legal right as migrant workers in Tamil Nadu (55.14%).

**Figure 2:** It can be concluded by stating that the maximum response is given by age category 21 to 30 years, and they have stated that they were not informed about the rights they possess as migrant workers (56.07%).

**Figure 3:** It can be concluded by stating that the maximum response is given by the age category 21 to 30 years, and they have stated that they are not sure about access to healthcare or medical treatment through employment (55.14%).

**Figure 4:** It can be concluded by stating that the maximum response is given by each category, 21 to 30 years, and they have stated that they have never used any legal assistance to resolve health or safety issues at work (57.01%).

**Figure 5:** It can be concluded by stating that the maximum response is given by the male gender, and they have stated that no, they are not aware that they have a legal right as migrant workers in Tamil Nadu (58.88%).

**Figure 6:** It can be concluded by stating that the maximum response is given by the male gender, and they have stated that no, they are not provided with protective gear at the workplace (18.69%).

**Figure 7:** It can be concluded by stating that the maximum response is given by the male gender, and they have stated that no, they have never used any legal assistance to resolve health or safety issues at work (58.88%).

**Figure 8:** It can be concluded by stating that the maximum response is given by the persons whose educational qualification is secondary, and they have stated that they have worked as a migrant worker in Tamil Nadu for less than 1 year (24.30%).

**Figure 9:** It can be concluded by stating that maximum response is given by the persons whose educational qualification is secondary, and they have stated that they are not sure about the access of healthcare or medical treatment available in their employment (55.14%).

**Figure 10:** It can be concluded by stating that the maximum response is given by the persons whose educational qualification is secondary, and they have stated that no, they have never used any legal assistance to resolve health or safety issues at work (55.14%).

**Figure 11:** It can be concluded by stating that the maximum response is given by the persons whose educational qualification is secondary, and they have stated that they do not know where to report about the violation of health and safety at their workplace (55.14%).

**Figure 12:** It can be concluded by stating that the maximum response is given by the income category that earns below 10000, and they have stated that sometimes they are provided with protective gear at their workplace (17.76%).

**Figure 13:** It can be concluded by stating that the maximum response is given by the income category that earns below 10000, and they have stated that they are not sure about the availability of healthcare or medical treatment in their employment (85.98%).

**Figure 14:** It can be concluded by stating that the maximum response is given by the income category that earns below 10000, and that they have stated that they are not aware of any national or state laws that protect migrant workers in Tamil Nadu (85.98%).

## DISCUSSION

Most important is work health, safety, and legal literacy for working persons in Tamil Nadu. These concerns increase especially for workers in the age group of 21 to 30 years, who have completed their high school education and who earn very little. They show that: poor awareness of the legal system, access to health services, Protection factors and legal aid, all these form their working as well as living conditions challenges for the migrant worker.

**Figures 1 and 2** indicate that most of the migrant workers fall in the age group between 21-30 years, yet do not have any knowledge of legal rights. By this group, the data account for 55.14% in Figure 1 and 56.07% in Figure 2, which represent extreme paucity of information with respect to the legal protections for working individuals and, henceforth, welcome. This unwillingness to assert rights pushes workers into a state of increased vulnerability-exploitation, not knowing how to protect themselves in it way. Furthermore, **Figure 4** demonstrates that 57.01% of employees of this age group have ever sought legal counsel for any health or safety issues concerning work.

This could be caused by varied factors such as fear of repercussions, distrust of the judiciary, limited legal aid; the lack of use of judicial channels results in exploitation and a huge gap in access for displaced people.

**Figure 5** stresses gender differences. Male migrant workers (58.88%) reported unawareness of their legal rights in Tamil Nadu. This becomes a grave situation for them as unsafe working conditions, exploitation, and health hazards will be endangered without legal knowledge and supporting mechanisms. Furthermore, **Figure 6** shows that a very large percentage of male migrant workers (18.69%) do not have access to safety equipment at their workplaces. Poor safety measures make workers susceptible to hazardous environmental conditions that ultimately lead to long-term health effects. For this reason, gender-sensitive interventions are needed to cater for the specific vulnerabilities of male migrant workers, especially regarding legal protection and job security.

**Figures 3 and 9.** Many of the workers between the ages of 21 and 30 years and with secondary education are not sure that they will get health care from work. This uncertainty is shared by 55.14 per cent of respondents from figures 2 and 4. This shows that there is an enormous gap in the provisions of welfare benefits to employees. There again, migrant workers spend most of their time in precarious living conditions and precarious work situations, which leads them to be dependent on reliable health services. This includes uncertainty in accessing health facilities, risking their well-being. They are also at risk of developing untreated occupational injuries and diseases. This brings into focus the need to improve healthcare delivery by employers and state authorities, and the need to communicate the availability of these healthcare services clearly to employees. **Figure 8** shows, these are people with secondary qualifications (24.30%), who are therefore in Tamil Nadu, working as migrant workers for less than a year. Short tenure may limit the knowledge about rights and resources. Short-term employment would provide less experience. Most of the time, the employee would consider investing short term because they are hesitant to invest in the long term, like understanding their legal protections. Migrant workers have serious levels of trauma regarding health access (as confirmed by **figures 9 and 10**). For one, over half of those who hold the secondary level were themselves unsure about their access to health services (55.14%), never using any legal arrangements to deal with health or safety issues in the workplace (55.14%). Indeed, this gives credence to the difficulties that migrant workers face in exercising their rights. This is more so in cases where these persons lack formal education and training. **Figures 12, 13, and 14** Workers with incomes below 10,000 Rs are considerably challenged compared to other income groups among migrant workers. A considerable number of workers in the income level (17.76%) mentioned that safety equipment was provided 'sometimes' to them at the workplace. While more than 85.98% said, "No idea" about access to health services through employment.

Moreover, migrant labourers do not lack national and state laws for their protection. These results seem to indicate a combination of a lack of standards in occupational health and safety for workers, as well as limited access to health services and a lack of deep legal awareness, putting low-income workers particularly at risk. In general, as for low income, it is related to very few resources and opportunities. This makes these workers vulnerable to exploitation, and poor health outcomes. Inadequate access to health services also exacerbates the precarious condition of workers, and poor health outcomes. Although this study is based on the experiences of migrant workers in different sectors, it accords with the issue of ranking, which highlights some key social challenges in agriculture, textiles, and other industries that cover the agricultural field. Workers are exposed to raw materials and physical labour under conditions where safety measures are absent. In technology, there is a lack of suitable equipment and transparency remains inadequate across all sectors. The absence of legal cognisance, lack of health-availing services, and poor workplace safety measures imply that these need sector-specific intervention.

## **CONCLUSION**

Thus, the study considers the health and safety conditions for migrant workers in Tamil Nadu across agriculture, manufacturing, and textiles. It is quite multi-challenging. With physical hazards, one might also typically consider the mental health issues that arise from subpar living conditions coupled with a lack of legal protection despite the law-but weak labour practices. In this, the workers cease to be aware of what rights and protections are accorded to them. The urgency that the research highlights is for political reform. Strengthening access to justice processes, improving vocational training, better legal aid, aside from improvement in labour and living conditions, and promoting the establishment of labour unions, coupled with continued inspection and evaluation, are some of the objectives to ensure the fair and good treatment of migrants. To address those, all these goal posts require cooperation from decision makers, employers, and civil society towards creating a safer and fairer environment for migrant workers.

## **FURTHER DIRECTIONS OF RESEARCH**

Providing better health and safety for migrant workers in Tamil Nadu reveals some important gaps that should be further studied. Studies on health outcomes in the long run, particularly of long-term occupational exposure and living conditions, should be set up. This would give a better understanding of the long-term physical well-being of migrant workers. Such studies can

also give better indications of the implications of economic mobility or exposure towards the general quality of life. Comparisons across sectors such as agriculture, manufacturing, and textiles will give answers to sector-specific interventions and challenges. Finding success stories of interventions would contribute to better policy and practice and improve the efficiency of subsequent initiatives targeting the needs of migrant workers.

Look into studies dealing with capacity augmentation or not, one such study is assessing the efficacy of laws in being put up against the advocacy organisations and the labour rights they are advocating. Research is conducted on social integration by studying the mental disorders and psychological traumas experienced by immigrant workers. All these will contribute to a better knowledge of unique social and psychological barriers. These include exploring the cultural intricacies as well as promoting practices around community building. Some Critiques of Recent Reforms Repay for the betterment of workers' working conditions, as well as for establishing a feedback mechanism from the side of workers. They can throw more light on the aspect concerning implementation and effectiveness across the world. New technologies include digital platforms for rights awareness and health surveillance technologies. Conducting surveys on this will improve the coverage and efficacy of the intervention. Finally, the regional and international comparisons may be made, as Tamil Nadu can fairly measure itself against experiences of this kind across India and even around the globe. Further insights will bring about problems and solutions for migrant workers.

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