

Occupational Hazards and Health Issues Among Women Migrants: An Empirical Study in Dharmapuri District, Tamil Nadu

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KEYWORDS

Women migrants, occupational hazards, health issues, social discrimination.

ABSTRACT

This empirical study investigates the occupational hazards, health issues, and socio-economic challenges faced by women migrant workers in Dharmapuri district, Tamil Nadu. Women migrant workers are primarily employed in unorganized sectors such as granite quarries, construction, and service industries. They endure significant exploitation, unsafe working conditions, and inadequate access to basic amenities. Families of migrant women face inadequate housing, sanitation, and education for their children, alongside cultural clashes and social discrimination. Limited legal awareness and language barriers further hinder their ability to address grievances. This study employs descriptive and survey methods, collecting data from 50 women through structured interviews. Key findings show that 94% of respondents are exposed to dust and heat, while 96% endure excessive noise, contributing to health issues such as respiratory problems, skin diseases (56%), and musculoskeletal disorders. Psychological issues, including shivering (66%), stress (15%), and sleeplessness (19%), arise from overwork and handling vibrating machinery. Harassment at work is alarmingly common, with 64% of respondents reporting physical abuse. Additionally, irregular wages and financial exploitation compound their plight. The absence of safety protocols, such as proper fencing and protective equipment, increases the risk of accidents, affecting 34% of respondents. The findings emphasize the need for comprehensive interventions, including stricter enforcement of labour laws, provision of safety gear, periodic health camps, and awareness programs about workers' rights. The study underscores the urgent need for holistic approaches to safeguard the rights and health of women migrant workers. Creating inclusive, safer work environments and implementing robust policies will help address systemic exploitation and improve their quality of life.

Introduction

Migrant workers are vulnerable to various forms of exploitation, including financial exploitation, at all stages of the migration process. About 281 million people i.e., 3.6 per cent of the world's population are living outside their country of birth, due to internal and external migration. Men, women, children, adolescents and families are crossing international borders to improve their living conditions and sometimes to ensure their survival. Economic disparities, demographic change, civil wars and natural disasters have caused the number of international migrants to double between 1975 and 2010. According to Census 2011, there were 454 million migrants in India. This had risen by 139 million from 315 million in 2001 in Census 2011 and 220 million in 1991, a doubling over 1991-2011.

While analysing the causes for migration, the Marriage and other family related migration, which was 72.2% of all migration during 1991 to 2001, now is 74.7% of all migration during 2001 to 2011, but the share of marriage is diminishing while the share of other family related migration is growing. According to Census 2001, 40% of all internal migrants (309.4 million) across all durations who constituted rural to rural marriage migrants (123.9 million of which 122.3 million were female), only 4.8% were inter-state marriage migrants (6.0 million), i.e., 1.9% of all migrants. By contrast, of the 14.6 million rural to urban migrants for work and business (4.7% of all migrants), 43% (2.0% of all migrants) were inter-state migrants. The corresponding share of such inter-state urban to urban work migrants (2.9 million) is 41% of all urban-to-urban migrants for work (7.1 million). So, inter-state migration is a significant part of migration for work and business. As of 2011, Tamil Nadu had 31,274,107 migrants, which was an all-time high. Significant internal migration, especially from rural to urban areas, driven by employment, education, and industrial growth. Around 42.8% of the state's population are migrants, with most moving for work-related reasons.

The Constitution of India guarantees freedom of movement for all citizens. The foundational principles of migration are enshrined in clauses (d) and (e) of Article 19(1) of the Constitution, which guarantee all citizens the right to move freely throughout the territory of India, and reside and settle in any part of the territory of India. In order to protect the rights and the principle of Equality, the article 15 of Indian Constitution prohibits discrimination on the basis of place of birth, among other grounds, while Article 16

guarantees equality of opportunity for all citizens in matters of public employment, and in particular prohibits the denial of access to public employment on the grounds of place of birth. It is presumably concluded that these articles not only protect the rights of native people but also safeguard the rights and equality of migrants in India.

Dharmapuri district have witnessed significant migration in recent years. Many people from these districts have migrated to the nearby states, for instance Karnataka, Andhra Pradesh, Kerala etc. At the same time, rapid industrial development in these districts has attracted migrants from neighbouring states such as Karnataka, Kerala, and Andhra Pradesh. This often leads to cultural clashes between migrants and native people, social discrimination, differential treatment, economic exploitation, and, notably, health hazards faced by migrants, particularly women workers, which remain largely unnoticed in most research studies.

It is significant to note that women migrant workers residing in Dharmapuri district of Tamil Nadu, face numerous social, economic, and health-related issues. They encounter problems such as low wages, exposure to health hazards, sexual abuse, financial exploitation, and denial of their rights. These women, who migrated to these districts from various parts of Tamil Nadu over three years ago, still do not feel safe and secure. They are economically exploited by private employers; their children are facing lack of access to proper education, healthcare, medical facilities, adequate housing, social security, clean water, and sanitation. The present research paper aims to understand and explore the issues faced by women migrant workers, examine their working conditions, and provide policy suggestions to improve workplace safety, health, and overall well-being of migrant women workers in the region.

Objectives:

1. To examine the working conditions and availability of workplace safety measures for women migrants.
2. To identify the types and prevalence of occupational hazards faced by migrant women workers in Dharmapuri district of Tamil Nadu.
3. To explore the challenges and exploitation experienced by migrant women workers in their occupational settings.
4. To recommend policy measures for improving workplace safety, health, and overall well-being of migrant women workers in the region.

Methodology

The study adopted descriptive and survey methods to understand the problems faced by women migrant workers and to identify the health hazards they encounter in their daily lives. A structured interview schedule was used under the survey method, and interviews were conducted with 50 women migrant workers respondents by following snowball sampling technique in Dharmapuri district. Both qualitative and quantitative analyses were employed, and the data were analyzed. The findings of the study are presented in this paper.

Sources of Data:

The data were obtained from two sources. Primary data were collected from respondents, the women migrant workers, working in unorganised sector industries through face-to-face interviews conducted by the researcher using an interview schedule. Secondary data were gathered from Books, Newspapers, Web sources, Journals etc.

Delimitations

The study was conducted in the Dharmapuri district of Tamil Nadu. In this district, women are predominantly employed in unorganized sectors, particularly in granite quarries, the blue metal industry, construction, and service sectors. Data were collected from 50 migrant women workers using a structured interview schedule during the first week of June 2024

Operational Definitions:

i. Migration

In this study, migration refers to those people who have migrated from other districts and states to Tamil Nadu. The term migration means settlement or shifting of an individual or group of individuals from one cultural area or physical space to another, more or less permanently.

PROBLEMS OF MIGRANT WOMEN WORKERS

Migrant women workers endure intense labour and harsh working conditions, which often result in numerous physical and mental health issues. The sheer burden of overwork, combined with repetitive tasks, leads to physical exhaustion, musculoskeletal problems, and chronic fatigue. Many women also suffer from malnutrition and poor access to healthcare, exacerbating these physical health concerns. In addition to these occupational hazards, migrant women are frequently subjected to various forms of harassment, both overt and covert, including sexual harassment. The lack of protective measures and enforcement of labour laws in informal sectors leaves them vulnerable to exploitation. This harassment, combined with the daily stress of their work environments, contributes to severe psychological strain. Many women experience feelings of isolation, anxiety, and depression, as they are often separated from their families and communities. Their mental well-being deteriorates under the pressure of economic uncertainty and exploitative working conditions.

Health issues are widespread among migrant women as they work in hazardous environments with little regard for safety standards. Exposure to toxic substances, unsafe machinery, and unhygienic conditions makes their workplaces extremely dangerous. The unorganized and informal nature of much of their work leaves them without access to health insurance or social security, further exacerbating their vulnerability. The deterioration of working conditions for migrant women is largely a result of increasing migration and the growing unorganized nature of women's labour. As more women enter these sectors, the lack of regulation and oversight leads to exploitative practices, unsafe working conditions, and inadequate protection from the law. The situation demands urgent attention to improve labour laws and ensure better working conditions, health protections, and social support for migrant women.

The intense global competition forced out the women workers from formal sector and many of them joined the informal sector as domestic helpers, agricultural labourers, vendors and construction workers etc. The rise in female participation in unorganized sector is due to the economic competition and employer's preferences to female employees bring flexible labour force. The weak position of women labour in India is reflected in low position. On the basis of various researchers and government report the major problem which the women workers are facing in country are the women workers are paid lower and marginal wages. Women workers have poor bargaining power and that is why they cannot pressurize the employers for their rights, which leads to their exploitation. The women migrant workers suffer from increasing job insecurity, unemployment and under employment. They are also deprived of adequate social security safety and welfare provisions necessary for their overall development. Women workers face the problems of discrimination in various ways in work place. Women workers also lacked participation in decision making of labour organization and the government policy. Women are vulnerable to more occupational diseases. Migration of women workers always poses a risk of their exploitation.

Human Rights Issues

All persons, regardless of their nationality, race, legal or other status, are entitled to fundamental human rights and basic labour protections, including migrant workers and their families. Migrants are also entitled to certain human rights and protections specifically linked to their vulnerable status. The human rights of migrant workers and their families encompass a range of universal, indivisible, interconnected, and interdependent rights. These include the right to work and receive wages that enable an adequate standard of living. Additionally, there exists a fundamental right to freedom from discrimination based on race, national or ethnic origin, sex, religion, or any other status in all facets of employment, including hiring practices, working conditions, promotion opportunities, and access to housing, healthcare, and essential services.

Migrant workers are entitled to equality before the law and equal protection under labour legislation, irrespective of their legal status. They have the right to equal pay for equal work and the right to freedom from forced labour. Furthermore, individuals have the right to return to their home country at their discretion. An adequate standard of living that ensures the health and well-being of migrant workers and their families is paramount. This includes the right to safe working conditions and a clean, healthy working environment, as

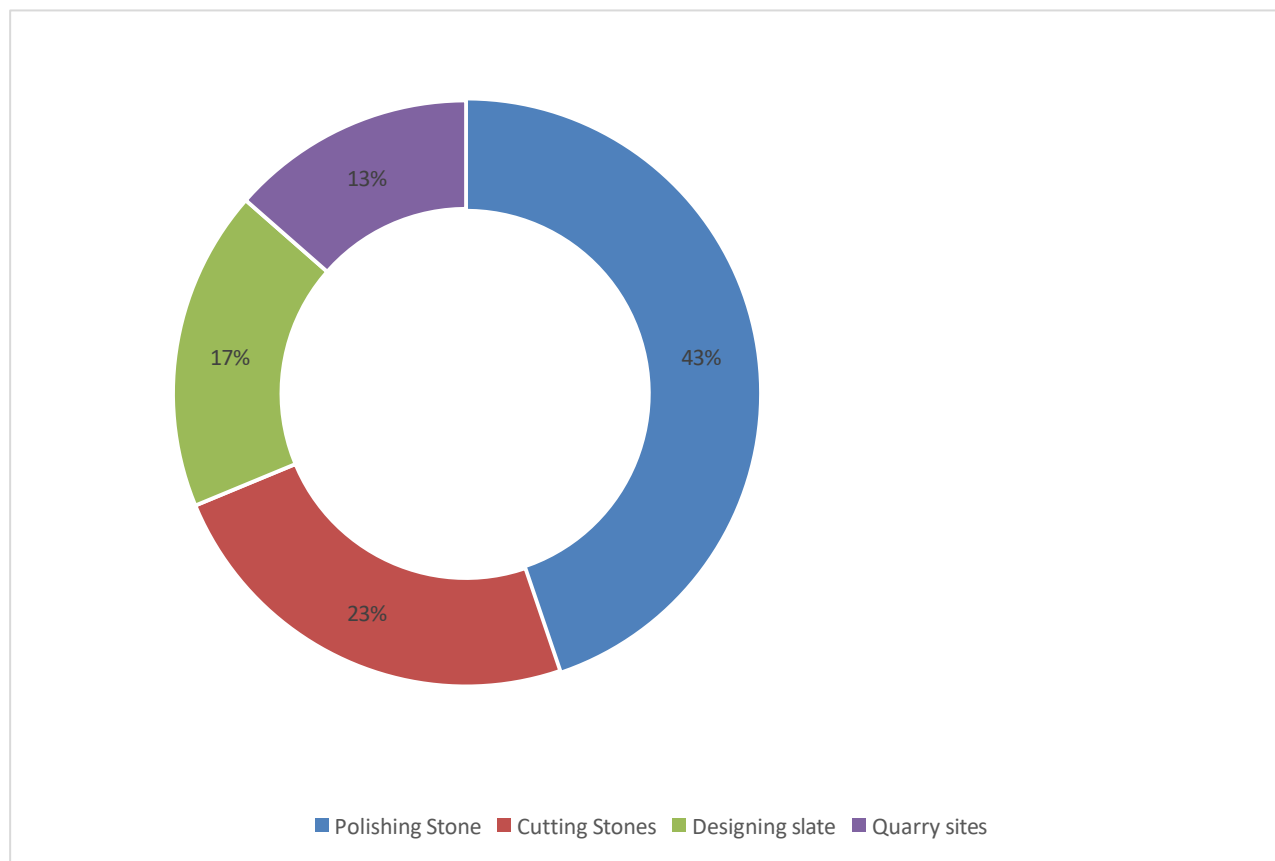
well as reasonable limitations on working hours, rest, and leisure time. Additionally, migrant workers should have the right to freedom of association and the ability to join trade unions. They are entitled to freedom from sexual harassment in the workplace and protection during pregnancy from harmful work conditions. Children of migrant workers also have the right to protection from economic exploitation and any work that may pose hazards to their well-being and development. Importantly, the right to education for these children is essential, as is the right of migrant families to reunification.

Type of Occupation:

As mentioned earlier, most migrant women workers are employed in granite quarries, the blue metal industry, construction, agriculture, and service sectors. They receive meagre wages, which are often disbursed irregularly. The occupational details of the respondents are given below:

Occupation of the Respondents

Figure 1



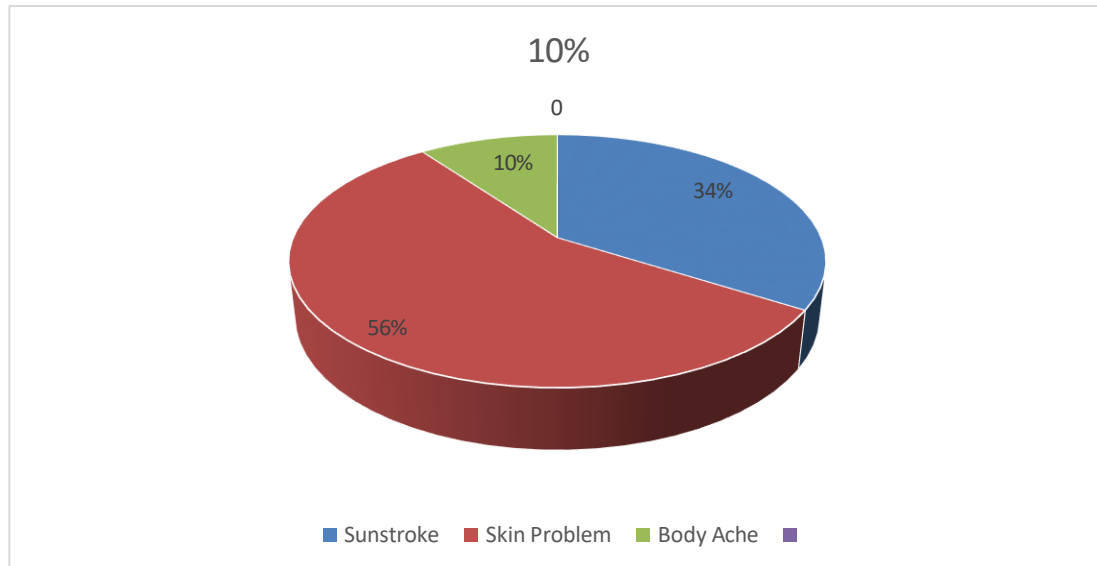
Source: Primary data collected by the researcher

The diagram 1 depicts that 43 percent of the respondents are involved in the work of polishing the stone, 23 percent of them are cutting the stones, 17 percent of the respondents are involved in designing slates and marbles and 13 percent of the respondents are working in quarry sites.

Occupational Problems: Health Problems at work place:

Health-related problems have become a common phenomenon in the industrialized world. Despite adopting preventive measures by the government and private industries, the migrant workers often subject many health issues and the details are presented in Table- 2. The majority of respondents (56%) were affected by various skin diseases. Skin-related problems occur due to prolonged exposure to sunlight while working in the quarry. Additionally, 34% of the respondents experienced sunstroke, and 10% reported body aches.

Figure 2



Source: Primary data collected by the researcher

The study observed that despite numerous health-related issues faced by migrant women workers, little has been done to address these concerns. Most private enterprises do not provide adequate medical care facilities for their workers, especially women migrants. Doctors visit the work sites very rarely, and in many cases, these migrant workers must pay for healthcare out of their own pockets, which they often cannot afford. This has resulted in the neglect of their health and family well-being.

Table-1

Respondent's Opinion about the Availability of Fencing or Physical Barriers to Prevent Unauthorized Entry

S.No	Availability of fencing or Physical Barriers	Number	Percentage
1	Available	21	42%
2	Not Available	29	58%
Total		50	100 %

Source: Primary data collected by the researcher

The data presented in Table 1 reflects the responses regarding the presence of fencing or physical barriers aimed at preventing unauthorised access. The data reveals that 58% of the respondents reported a lack of fencing or physical barriers, while 42% indicated that such measures are present in their workplace. The absence of fundamental safety protocols presents dangers related to unauthorised access, accidents, and environmental threats, highlighting an urgent requirement for improvements in workplace safety.

Table-2 Respondents' opinion about Accident or Injury

S.No	Accident or injury on duties time	Number	Percentage
1	Meth with accident or injury	17	34%
2	Not met with accident or injury	33	66%
Total		50	100 %

Source: Primary data collected by the researcher

The data presented in table 2 reflects the opinions of respondents regarding incidence of workplace accidents. The data reveals that lower proportion (34%) of respondents have mentioned experiencing accidents or injuries during work, where as a significant portion (66%) stated that they had not faced any such incidents. Even though the frequency appears to be low in number, the nature of the work in quarries and other similar environments requires stringent safety measures to prevent any sort of occurrences.

Table-3 Respondents' Opinion about Hazardous Operation

Si.No	Opinion about Hazardous Operation	Number	Percentage
1	Hazardous Operation Carried out	37	74%
2	Hazardous Operation are not Carried Out	13	26%
Total		50	100 %

Source: Primary data collected by the researcher

The data presented in table 3 reflects the responses of respondents regarding hazardous operations. The data indicates that a significant majority (74%) of respondents acknowledged the existence of hazardous operations in their workplace, such as exposure to noise, dust, and vibrations. On the other hand, only 26% of them reported absence of such risks existing in workplace. This suggests that the pervasive exposure to occupational hazards, requires regulatory oversight and mitigation strategies to reduce health risks.

Table-4 Health Problems at Quarry:

Si. No	Occupational Health Problems	Yes	No	Total	%
1.	Heat Stress	47	3	50	94%
2	Noise	48	2	50	96%
3	Vibration	41	9	50	82%
4	Lighting	19	31	50	38%
5	Radiation	14	36	50	28%
6	Ventilation Problems	32	18	50	64%
7	Dust related Problems	47	3	50	94%
8	Respiratory Problems	34	16	50	68%
9	Renal	21	29	50	42%
10	Liver	6	44	50	12%
11	Occupational Cancers	17	33	50	34%
12	Stress	43	7	50	86%

Source: Primary data collected by the researcher

The information displayed in Table 4 illustrates the perspectives of respondents concerning issues related to occupational health. The findings indicate a significant occurrence of occupational health issues among the participants, with the following concerns being particularly prominent: Heat stress at 94%, noise at 96%, dust-related issues at 94%, stress at 86%, and vibration at 82%. A less common yet significant health concern encompasses respiratory problems (68%) and ventilation challenges (64%). Concerns such as radiation, renal issues, and occupational cancers were reported less often, highlighting the distinct health risks associated with the work environment.

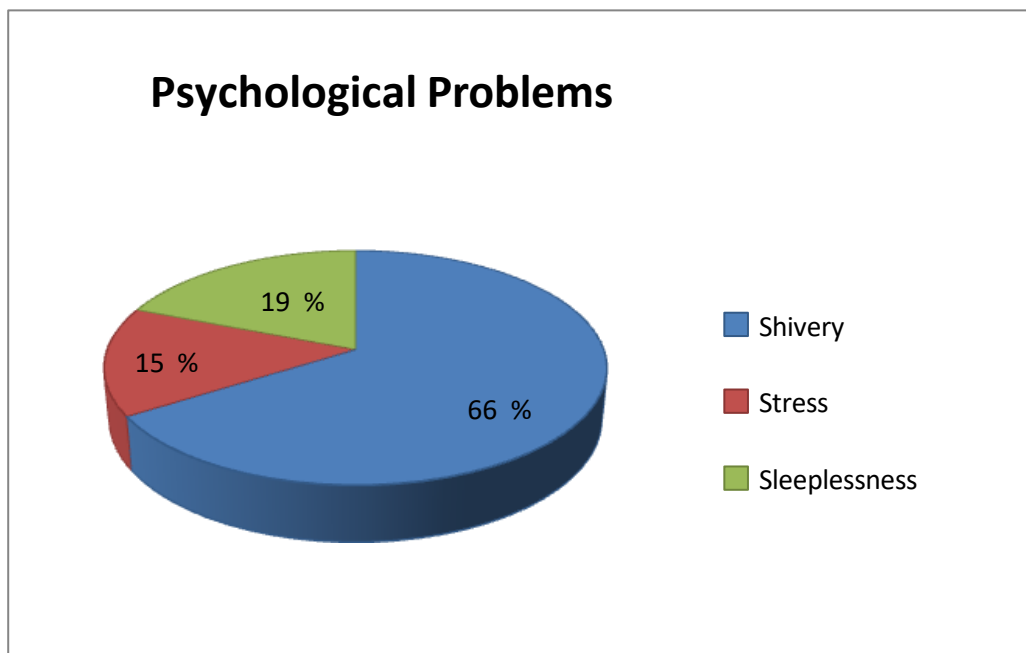
Table -5Harassment at work place:

Sl. No	Harassment at work place	Number	Percent
1	Harassed	32	64%
2	Not Harassed	11	22%
3	No response	7	14%
Total		50	100%

Source: Primary data collected by the researcher

The above Table presents the respondents' views on issues pertaining to physical harassment in the workplace. 64 per cent of respondents indicated experiencing physical harassment in the workplace, whereas only 22 per cent reported not encountering such incidents. 14 per cent of the participants did not provide a response. The findings indicate that harassment is a prevalent issue necessitating prompt action, such as enhanced enforcement of workplace harassment policies and legal protections for migrant women workers.

Figure-3 Psychological Problems of the Respondents



Source: Primary data collected by the researcher

Figure 3 indicates that the psychological impacts of the work environment on respondents are significant, with shivery (66%) being the most frequently reported issue, followed by sleeplessness (19%) and stress (15%). The problem of shivering occurs more when compared to stress and sleeplessness. This is because of the handling of vibrating machines in the work place, which likely intensifies these symptoms, highlighting the critical necessity for ergonomic interventions and mental health support.

Conclusion

Women migrant workers in unorganized sectors, such as the granite industry, blue metal industry, and service sector, often face various forms of physical violence due to their precarious working and living conditions. These acts of violence stem from factors such as lack of oversight, power imbalances, and gender-based discrimination. The study has identified several forms of violence inflicted on migrant women workers. Firstly, Physical Abuse by Supervisors/Employers is common, from the opinion of the majority of the

respondents. They were sometimes physically restrained by supervisors or employers to enforce discipline or compliance. Further, they are also subject to many unwanted physical advances, groping, or outright sexual assault in unsafe work environments.

Secondly, financial exploitation by factory owners and male family members is pervasive. Salaries are irregular and are often credited to workers' accounts only once every two months. Additionally, a portion of their earnings is deducted by private employers to recover debts previously incurred by the workers. This poor or inconsistent salary has resulted in a lukewarm response to health-related issues, as they are often unwilling or unable to visit hospitals.

Thirdly, overwork and punitive actions are frequently imposed on women workers, as they lack any forum to raise their concerns or draw the attention of the public and government officials. Many respondents reported being forced to work beyond the mandatory eight hours a day, yet they received wages for only one day's work. They were also denied rest during lunch hours, and when they refused to comply, they were subjected to physical or verbal abuse by their supervisors or industry owners.

Fourthly, migrant women workers are facing numerous health-related issues but little has been done to address these concerns. Most of the unorganised sector industries do not provide adequate medical care facilities for their workers, especially women migrants. Doctors visits the work place very rarely, and in many cases, these migrant workers must pay for healthcare out of their own pockets.

Fifthly, alcoholism among male family members significantly affects migrant women workers, compounding their financial, emotional, and physical burdens. Male members often spend a significant portion of the family income on alcohol, leaving little for essential needs such as food, education, and healthcare. Migrant women workers are forced to borrow money from moneylenders for household expenses, which leads to a cycle of indebtedness. To compensate for this financial loss, these women may take additional jobs or additional workloads.

Sixthly, cultural clashes between migrant women workers and local or native people are a common phenomenon in the study area. The migrants' language, dress, culture, food habits, and living patterns are often entirely different, which hinders their assimilation with the local community. Sometimes, migrant workers face social boycotts, leading to denial of access to essential services such as drinking water, public distribution systems, and common property resources.

Seventhly, a lack of awareness among women migrants about their legal rights and the mechanisms available to protect them from harassment or exploitation is pervasive. Many women workers are unaware of their rights and the processes to address their genuine grievances. The Tamil Nadu government enforces the Inter-State Migrant Workmen (Regulation of Employment and Conditions of Service) Act, 1979, and the Tamil Nadu Shops and Establishments Act, 1947, to protect the economic and social rights of migrant workers. Furthermore, through Labour Welfare Boards, the Tamil Nadu government caters to unorganized workers, offering benefits such as accident relief, maternity assistance, and financial aid for education.

Measures such as the strict enforcement of labour laws, strengthening workplace safety standards, conducting awareness programmes for women migrants, establishing a dedicated Grievance Redressal Officer in each district, and creating networks of support for women workers to address their grievances and issues would be viable ways to prevent or minimize rights-based violence and social discrimination unleashed against women migrants in Tamil Nadu.

Suggestion:

1. Most of the women workers face skin diseases because of heavy disposal of sunrays at the work place. So, the employer has to wear safety equipment's such as mask, helmet etc.
2. The problem of shivering occurs because of the handling of vibrating machines in the work place and the employers are suggested to change the machines which produce more vibrations.

3. First aid facility has to be provided to all the quarry workers. As the workers feel that they are exploited by heavy work load, the employers have to consider a decrease in the work. It was observed from the study that appropriate medical help is needed for the migrant women workers. Health facilities should be provided through organizing medical camps periodically by the employers.
4. In the quarry, there is no fencing or physical barriers to prevent unauthorized entry and it will lead to more accidents. So, fencing or physical barriers have to made to prevent such accidents.
5. The majority of the respondents say that there is physical harassment in their work place. Severe action has to be taken on those who are involved in the harassment of women workers.
6. The social work Department, NGOs and civil society in Dharmapuri can extend their support for the migrant women workers. They can help in the formation of SHG's and the women can be trained to take up self – employment activities. Awareness regarding the rights of migrant women workers can also the promoted by the social work trainees.

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