International Journal for Multidisciplinary Research (IJFMR)
E-ISSN: 2582-2160 ● Website: www.ijfmr.com ● Email: editor@ijfmr.com

An Analytical Study on Health Hazards, Work Challenges and Hrm Interventions for Salt Workers in Nagapattinam District with Special Focus on Vedaranyam

S. Christopher Brown[1], Dr. R. Natarajan[2], Dr. V. S. Rajakrishnan[3]

[1]Research Scholar (Part-Time), Department of Commerce E.G.S. Pillay Arts and Science college (Autonomous), Nagapattinam Affiliated Bharathidasan University, Thiruchirappalli
[2]Principal and Research Advisor, Sir Issac Newton Arts and Science College, Nagapattinam (Affiliated Bharathidasan University, Thiruchirappalli)
[3]Assistant Professor, Department of commerce, E.G.S. Pillay Arts and Science college (Autonomous), Nagapattinam (Affiliated Bharathidasan University, Thiruchirappalli)

Abstract
This study examines the health hazards, work challenges, and Human Resource Management (HRM) interventions among salt workers in Nagapattinam District, with special reference to Vedaranyam. Salt production is a labour-intensive occupation carried out under harsh environmental conditions, exposing workers to multiple occupational risks such as extreme heat, saline water, and prolonged sunlight. The study aims to identify the major health issues faced by salt workers, analyse their working conditions, and evaluate the effectiveness of existing HRM practices. A cross-sectional survey was conducted among 200 salt workers using a structured questionnaire. The findings reveal that a majority of workers suffer from various health problems, including ocular disorders, musculoskeletal pain, headaches, and hypertension due to continuous exposure to salt pans and physical strain. The study also highlights that most workers have low income levels, limited education, and inadequate access to healthcare facilities. Furthermore, a significant proportion of workers do not use proper safety equipment, increasing their vulnerability to occupational hazards. The analysis indicates that although some workers are aware of the risks associated with salt work, the adoption of preventive measures remains low. Key challenges identified include long working hours, job insecurity, and lack of social protection. The study emphasizes the need for effective HRM interventions such as provision of protective equipment, regular medical check-ups, awareness programmes, and implementation of labour welfare schemes. Overall, the study suggests that improving working conditions and strengthening HRM practices can significantly enhance the health, safety, and productivity of salt workers in the Vedaranyam region.

Keywords: Occupational Health, Salt Workers, Wor challenges, HRM Intervention, Vedaranyam Region,

INTRODUCTION

Occupational health has become a major concern in labour-intensive industries, particularly in sectors

where workers are exposed to harsh environmental and climatic conditions. According to the World Health Organization Report (2023), workplace health promotion and preventive strategies play a crucial role in reducing occupational diseases and non-communicable diseases (NCDs). The report highlights the importance of continuous monitoring of occupational hazards, implementation of safety measures, provision of medical support, and strengthening of awareness programmes among workers. Unhealthy working environments, excessive physical strain, poor nutrition, and lack of safety practices often lead to long-term health complications and reduced productivity. Globally, a significant number of workers are engaged in physically demanding occupations that directly affect their health and well-being. However, many occupational diseases remain unreported and untreated, especially in unorganized sectors. In developing countries like India, occupational health risks are more severe due to inadequate infrastructure, limited awareness, and insufficient implementation of labour welfare measures. The salt industry is one such labour-intensive sector where workers are continuously exposed to extreme working conditions such as salt dust, brine water, high temperatures, and intense sunlight. These conditions can result in various health problems including skin disorders, eye irritation, respiratory issues, dehydration, hypertension, and musculoskeletal complications. Continuous exposure to reflective salt surfaces may also lead to visual impairment and other ocular disorders. The salt industry plays an important role in India's economy by providing employment opportunities to a large number of workers in coastal regions. In Tamil Nadu, the Vedaranyam region is one of the major centres of salt production. The area is characterized by extensive salt pans, high temperatures, and saline environmental conditions, making it a challenging workplace for labourers. The process of salt production involves various stages such as brine preparation, crystallization, harvesting, and transportation, all of which require continuous physical effort. Salt workers in this region face several work-related challenges, including low wages, seasonal employment, lack of job security, and limited access to healthcare facilities. In addition, the absence of adequate protective equipment such as gloves, footwear, goggles, and headgear increases their exposure to occupational hazards. Although some workers are aware of these risks, the use of proper safety measures remains limited. In this context, the role of Human Resource Management (HRM) becomes highly significant in improving the working conditions and well-being of workers. Effective HRM interventions such as implementation of safety policies, provision of protective equipment, regular health check-ups, insurance schemes, and awareness programmes can help reduce occupational risks and improve productivity. Furthermore, proper implementation of government welfare schemes is essential to ensure better health and safety outcomes for workers. Therefore, this study focuses on analysing the health hazards, work challenges, and HRM interventions among salt workers in Nagapattinam District, with special reference to the Vedaranyam region. The study aims to provide a clear understanding of occupational risks and suggest suitable measures to enhance the overall well-being of workers in the salt industry.

Review of Literature

Agnihotram (2023) examined the status of occupational health in India and highlighted that rapid industrialization and globalization have significantly altered occupational morbidity patterns. The study pointed out that occupational health in India remains complex due to issues such as informal employment, weak enforcement of labour laws, inadequate surveillance systems, and limited access to healthcare. The author emphasized the urgent need for strengthening Occupational Health and Safety (OHS) regulations, improving compliance mechanisms, and establishing centres of excellence in

occupational medicine to address emerging health risks among workers.

Burra (2022) analysed child labour exploitation and associated health hazards in the Jaipur gem industry. The study revealed that prolonged working hours and poor working conditions resulted in physical strain, musculoskeletal pain, and dermatological issues among child workers. Medical observations indicated that malnutrition, tuberculosis among parents, and vision-related problems such as presbyopia were common. The study highlighted the link between socio-economic conditions and occupational health risks, emphasizing the need for improved welfare measures and health interventions.

Dasgupta, N., Manna, N., and Sau, M. (2022) conducted a cross-sectional study on noise-induced hearing loss among workers in heavy engineering industries in Kolkata. The findings revealed that 30.58% of workers suffered from hearing impairment due to prolonged exposure to noise levels exceeding permissible limits (above 90 dB). The study also reported complaints of body pain and fatigue, indicating the combined impact of physical and environmental hazards. It stressed the importance of protective measures and regular health monitoring in industrial workplaces.

Paul Simpson and Emma Veitch (2021) studied the impact of poor dietary habits among shift workers and found that irregular work schedules contribute to unhealthy eating patterns, leading to obesity, diabetes, and other non-communicable diseases. The study emphasized that occupational health risks are not limited to physical hazards but also include lifestyle-related factors influenced by work conditions.

Recent studies (2024–2025) focusing on salt workers in coastal regions of India, particularly in Tamil Nadu and Gujarat, have highlighted severe occupational health challenges. These include musculoskeletal disorders, skin diseases, eye irritation, respiratory problems, dehydration, and hypertension due to prolonged exposure to saline environments, salt dust, and extreme heat. Researchers have also observed that a significant proportion of workers lack access to proper protective equipment and healthcare facilities. Although workers possess basic awareness of occupational hazards, the adoption of modern safety practices remains limited.

Furthermore, recent literature emphasizes the role of Human Resource Management (HRM) interventions in improving occupational health outcomes. Effective HRM practices such as provision of safety gear, implementation of health insurance schemes, regular medical camps, training programmes, and improved working conditions have been identified as essential for enhancing worker well-being and productivity. Studies also highlight the need for stronger policy implementation and employer responsibility in ensuring labour welfare.

Overall, the reviewed literature indicates that occupational health hazards remain a critical issue in labour-intensive industries, particularly in unorganized sectors like salt production. However, there is a research gap in region-specific studies focusing on Nagapattinam District, especially Vedaranyam. Hence, the present study attempts to bridge this gap by analysing health hazards, work challenges, and HRM interventions among salt workers in this region.

Methodology

The present study adopts a cross-sectional research design to examine the health hazards, work challenges, and Human Resource Management (HRM) interventions among salt workers in the Vedaranyam region. This area is one of the prominent salt-producing coastal belts in Tamil Nadu, comprising several villages surrounded by extensive salt pans. Key locations in the study area include Vedaranyam, Kodiyakarai, Maruthur, Pushpavanam, and nearby coastal hamlets, where salt production serves as a primary source of livelihood. For the purpose of the study, four villages were selected from

the major salt-producing clusters using a simple random sampling technique to ensure representativeness. The study was conducted over a period from March 2025 to January 2026. Primary data were collected through a structured questionnaire designed to capture information on socio-economic characteristics, working conditions, occupational health hazards, awareness of risks, and the usage of safety measures. A total sample of 200 salt workers was selected for the study. The respondents were chosen based on the criterion that they should have a minimum of two years of experience in salt production activities. Both male and female workers were included to provide a comprehensive understanding of occupational health issues across genders. Data collection was carried out using a door-to-door survey method during evening hours, which facilitated better interaction with respondents after their working hours and ensured higher response accuracy. Prior to the survey, the objectives of the study were clearly explained to the participants, and informed consent was obtained. Ethical considerations such as confidentiality and anonymity of respondents were strictly maintained throughout the research process. The collected data were systematically classified, tabulated, and analysed using appropriate statistical tools such as percentage analysis. The analysis focused on identifying the major health hazards faced by workers, understanding their working conditions, and evaluating the availability and effectiveness of existing HRM interventions in the study area.

Data Analysis and Interpretation

Table 1. Gender Distribution of the Respondents.

S.NO	Gender	Frequency(200)	Percentage
1.	Male	120	60
2.	Female	80	40
		200	100

Source ; Author's calculation based on Primary Data

The gender distribution of the respondents indicates that male workers constitute the majority, accounting for 60 percent of the total sample, while female workers represent 40 percent. This shows that salt production is predominantly a male-dominated occupation; however, the participation of women is also considerable. The presence of female workers highlights their significant contribution to labour-intensive activities in the salt industry.

Table 2. Respondents Classified By Age Group.

	Variable	Frequency (200)	percentage
Age	Below 25	40	20
	25-35	70	35
	36-45	50	25
	Above	40	20
		200	100

Source ; Author's calculation based on Primary Data

The age distribution reveals that 35 percent of respondents belong to the 25–35 years age group, followed by 25 percent in the 36–45 years category. Workers below 25 years and above 45 years each constitute 20 percent of the sample. This indicates that a majority of salt workers fall within the

economically active age group, suggesting that the occupation demands physical strength and endurance.

Table 3. Educational Qualification of the Respondents.

	Variable	Frequency (200)	Percentage
Educational Qualification	Illiterate	90	45
	Primary	60	30
	Secondary	30	15
	Higher	20	10
		200	100

Source ; Author's calculation based on Primary Data

The educational profile shows that 45 percent of the respondents are illiterate, while 30 percent have completed primary education. Only 15 percent have secondary education and 10 percent have higher education. This reflects a low level of educational attainment among salt workers, which may limit their awareness of occupational health risks and access to better employment opportunities

Table. 4 Income

Income Level	Frequency (200)	Percentage
Below-5000	110	55
5000-10000	70	35
Above-10000	20	10
Total	200	100

Source ; Author's calculation based on Primary Data

The income distribution indicates that 55 percent of the respondents earn below ₹5000 per month, while 35 percent earn between ₹5000 and ₹10,000. Only 10 percent of workers earn above ₹10,000. This clearly shows that the majority of salt workers belong to a low-income group, reflecting poor economic conditions and financial instability in the sector.

Table. 5 Work Experience

Experience	Frequency (200)	Percentage
Below 5 years	60	30
5-10 years	80	40
Above-10 years	60	30
Total	200	100

Source ; Author's calculation based on Primary Data

The data on work experience reveals that 40 percent of respondents have 5–10 years of experience, while 30 percent each fall under below 5 years and above 10 years categories. This suggests that a considerable proportion of workers have long-term involvement in salt production, indicating occupational dependency and limited alternative employment opportunities.

Table 5. Working Hours

Hours	Frequency (200)	Percentage
Below 6 hours	30	15

6-8 hours	100	50
Above-8 hours	70	35
Total	200	100

Source ; Author's calculation based on Primary Data

The analysis of working hours shows that 50 percent of respondents work for 6–8 hours per day, while 35 percent work for more than 8 hours. Only 15 percent work less than 6 hours. This indicates that a majority of workers are engaged in prolonged working hours, which may contribute to physical strain and health-related issues.

Table 7. Safety Equipment

Equipment	Frequency (200)	Percentage
Yes	60	30
No	140	70
Total	200	100

Source ; Author's calculation based on Primary Data

The findings reveal that only 30 percent of respondents use safety equipment, while a significant 70 percent do not use any protective measures. This indicates a lack of awareness, accessibility, or affordability of safety gear, thereby increasing the risk of occupational health hazards among workers.

Table 8 Awareness of Occupational Morbidity

Morbidity	Frequency (200)	Percentage
Ocular morbidities	55	27.5
Musculoskeletal	28	14
Headache & Giddiness	25	12.5
Chest pain	11	5.5
Gastro intestinal	21	10.5
Dermal	7	3.5
Breathlessness	12	6
Hypertension	13	6.5
Injury	11	5.5
Anemia	11	5.5
Underweit	6	3
Total	200	100

Source ; Author's calculation based on Primary Data

The data shows that ocular morbidities are the most commonly reported health issue (27.5%), followed by musculoskeletal problems (14%) and headache and giddiness (12.5%). Other health issues such as gastrointestinal problems (10.5%), hypertension (6.5%), and breathlessness (6%) are also observed among workers. This indicates that salt workers are exposed to multiple health risks, primarily due to harsh environmental conditions and continuous physical labour.

Percentage Analysis of Occupational Morbidity

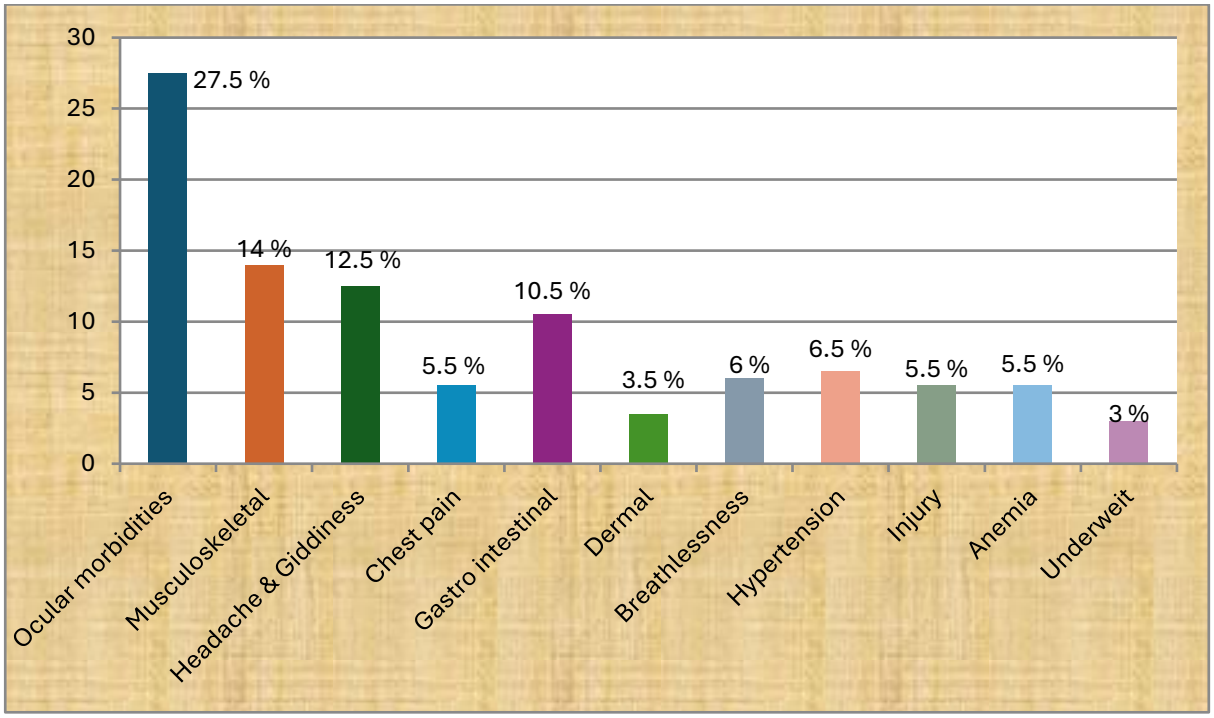

Fig 1. Occupational Morbidity

Table 9. Awareness of Occupational Hazards Caused by Salt Work

Occupational Hazards	Frequency (200)	Percentage
Direct Sunlight	40	20
Physical Stress	50	25
Glare From salt crystals	30	15
Thickness of palm & sole	25	12.5
Contact with salt& brine	20	10
Injury from spade	15	7.5
Not aware	20	10
Total	200	100

Source ; Author's calculation based on Primary Data

The analysis reveals that physical stress (25%) and direct sunlight exposure (20%) are the major occupational hazards identified by respondents. Glare from salt crystals (15%) and skin thickening (12.5%) are also significant concerns. Additionally, 10 percent of workers are not aware of occupational hazards, indicating gaps in knowledge and awareness. Overall, the findings highlight the need for improved safety training and awareness programmes.

Percentage Analysis of Occupational Hazards

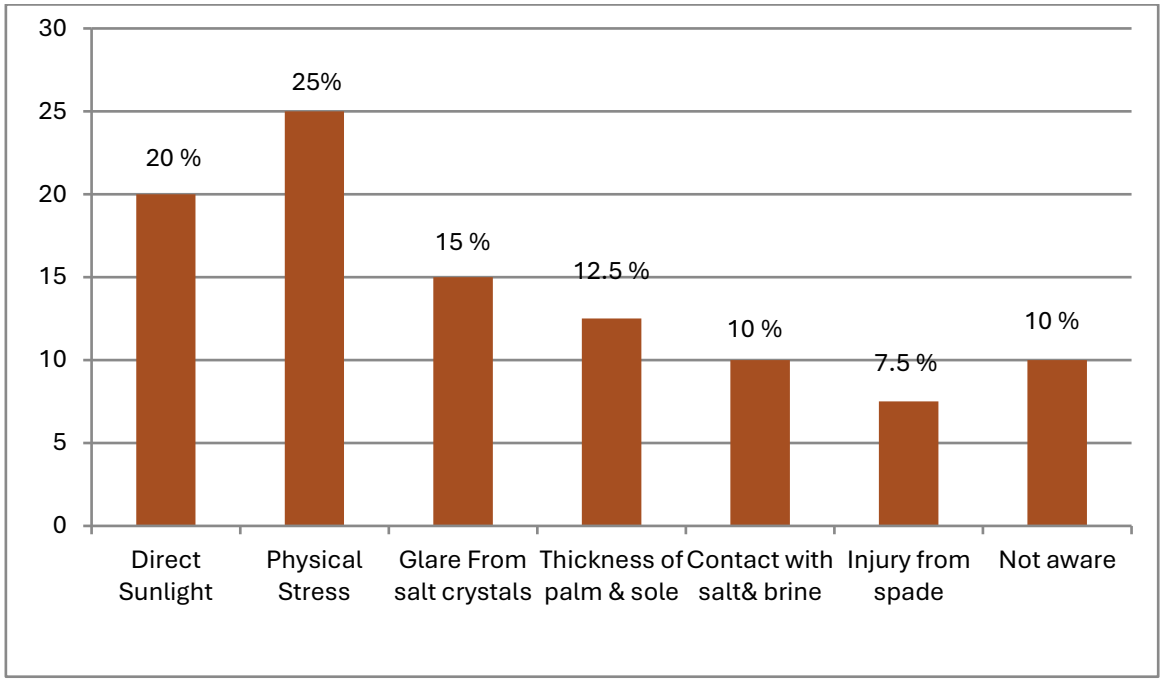

Fig. 2 Occupational Hazards

Results of the Study

The results of the study provide important insights into the socio-economic conditions, working environment, and health status of salt workers in the Vedaranyam region. The analysis shows that the majority of respondents are male workers, although female participation is also notable, indicating the involvement of both genders in salt production activities. Most of the workers belong to the economically active age group, suggesting that the occupation requires significant physical effort and endurance. The educational background of the respondents reveals a low level of literacy, with a large proportion of workers being either illiterate or having only primary education. This lack of education may limit their awareness of occupational health risks and reduce their ability to adopt modern safety practices. Income distribution indicates that the majority of workers fall under the low-income category, earning less than ₹5000 per month. This highlights the poor economic condition and financial insecurity prevalent among salt workers. The nature of employment is largely dependent on seasonal work, further adding to income instability. The study also reveals that many workers have considerable work experience, indicating long-term engagement in salt production. However, prolonged working hours, with a significant number of workers engaged for more than 8 hours daily, contribute to physical strain and fatigue. A major finding of the study is the inadequate use of safety equipment. A large proportion of workers do not use protective gear such as gloves, footwear, or goggles, which increases their exposure to occupational hazards. Health-related findings indicate that workers commonly suffer from ocular problems, musculoskeletal disorders, headaches, and other health issues caused by continuous exposure to extreme heat, salt water, and sunlight. Additionally, while some workers are aware of occupational hazards such as physical stress and direct sunlight, a section of workers still lacks adequate awareness. Overall, the results highlight that salt workers in the study area face multiple challenges, including poor socio-economic conditions, hazardous working environments, limited safety practices, and significant

health risks. These findings emphasize the need for effective interventions to improve their working conditions and overall well-being.

Suggestions and Recommendations

Based on the findings of the study, several measures are recommended to improve the health conditions, working environment, and overall well-being of salt workers in the Vedaranyam region.

1. **Provision of Safety Equipment**

Employers and concerned authorities should ensure the regular supply and mandatory use of protective equipment such as gloves, footwear, goggles, face masks, and headgear. These safety measures can significantly reduce exposure to salt, brine, and extreme sunlight, thereby minimizing occupational health risks.

2. **Regular Health Check-ups**

Periodic medical camps and health screening programmes should be organized to detect and treat occupational diseases at an early stage. Special attention must be given to eye care, skin conditions, respiratory issues, and musculoskeletal disorders.

3. **Awareness and Training Programmes**

There is a need to conduct continuous awareness programmes to educate workers about occupational hazards and the importance of safety practices. Training sessions should focus on proper handling techniques, use of protective gear, and preventive health measures.

4. **Improvement in Working Conditions**

Efforts should be made to improve the overall working environment by providing shaded rest areas, access to safe drinking water, and proper sanitation facilities. Regulating working hours and ensuring adequate rest breaks can help reduce physical strain and fatigue.

5. **Strengthening HRM Interventions**

Effective Human Resource Management (HRM) practices should be implemented, including the introduction of safety policies, health insurance schemes, employee welfare programmes, and grievance redressal mechanisms. Employers should take responsibility for ensuring safe and healthy working conditions.

6. **Government Support and Policy Implementation**

Government agencies should strengthen the implementation of labour welfare schemes, including minimum wage policies, social security benefits, and health insurance coverage. Regular monitoring and evaluation of these schemes are essential to ensure their effectiveness.

7. **Educational and Skill Development Initiatives**

Adult education programmes and skill development training should be introduced to improve the literacy levels of workers. This will enhance their awareness, decision-making ability, and opportunities for alternative employment.

8. **Financial Support and Income Stability**

Measures should be taken to improve the income levels of workers by ensuring fair wages and providing financial assistance during off-season periods. Access to microfinance and self-help group initiatives can also support economic stability.

9. **Promotion of Occupational Safety Regulations**

Strict enforcement of occupational health and safety regulations is necessary to protect workers from hazardous conditions. Employers must be made accountable for non-compliance with safety standards.

10. **Community-Based Health Initiatives**
Local health centres and community organizations should actively participate in promoting health awareness and providing basic healthcare services to workers and their families.

Conclusion

The present study provides a comprehensive understanding of the health hazards, work challenges, and Human Resource Management (HRM) interventions among salt workers in the Vedaranyam region. The findings clearly indicate that salt workers are exposed to multiple occupational risks due to the nature of their work, which involves prolonged exposure to extreme heat, saline water, and intense sunlight. These harsh environmental conditions significantly affect their physical health and overall well-being. The study highlights that a majority of workers belong to economically weaker sections, with low levels of education and income. Such socio-economic disadvantages further increase their vulnerability, as they often lack awareness about occupational safety and have limited access to healthcare facilities. In addition, the absence of proper protective equipment and inadequate safety practices contribute to the prevalence of various health problems, including eye-related issues, musculoskeletal disorders, and other work-related illnesses. Another important observation is that despite facing severe occupational hazards, many workers continue in this occupation due to lack of alternative employment opportunities and economic dependency. The seasonal nature of work, long working hours, and job insecurity further intensify the challenges faced by these workers. Although some level of awareness about occupational risks exists, the adoption of preventive measures remains insufficient. In this context, the role of HRM interventions becomes highly crucial. The study emphasizes that effective implementation of safety measures, provision of protective equipment, regular medical check-ups, and awareness programmes can significantly improve the working conditions of salt workers. Furthermore, strong support from government agencies in terms of labour welfare schemes, healthcare access, and policy enforcement is essential to ensure sustainable improvements. In conclusion, improving the occupational health and safety of salt workers requires a coordinated effort involving employers, government authorities, and the workers themselves. By addressing the existing gaps in safety practices, healthcare access, and socio-economic support, it is possible to enhance not only the health and well-being of workers but also their productivity and quality of life.

References

1. Agnihotram, R. V. (2023). Occupational health in India: Emerging challenges and opportunities. Indian Journal of Occupational Health, 67(2), 45–52.
2. Basu, S., & Ghosh, A. (2020). Occupational hazards in unorganized sectors in India. Journal of Public Health, 28(3), 233–240.
3. Bhatia, R. (2019). Labour welfare and social security in India. New Delhi: Deep & Deep Publications.
4. Bose, A., & Roy, K. (2021). Work stress and health issues among industrial workers. International Journal of Health Sciences, 15(2), 78–85.
5. Burra, N. (2022). Child labour and occupational health hazards in India. Economic and Political Weekly, 57(12), 34–40.
6. Chakraborty, S. (2018). Occupational safety and labour conditions. Indian Labour Journal, 59(4), 12–20.

7. Das, B., & Gangopadhyay, S. (2019). Ergonomics and health hazards in manual labour. Work, 62(1), 15–23.
8. Dasgupta, N., Manna, N., & Sau, M. (2022). Noise-induced hearing loss among industrial workers. Indian Journal of Community Medicine, 47(1), 56–60.
9. Desai, V. (2017). Rural development and labour welfare. New Delhi: Himalaya Publishing House.
10. Dutta, P. (2021). Occupational health issues in coastal industries. Journal of Coastal Studies, 39(2), 102–110.
11. Ghosh, S. (2020). Informal sector and worker vulnerability in India. Social Science Review, 45(3), 67–75.
12. Gupta, N. (2018). Workplace hazards and safety practices. International Labour Review, 157(1), 89–98.
13. International Labour Organization. (2022). World employment and social outlook. Geneva: ILO.
14. Jain, R. (2019). Health and safety practices in small-scale industries. Journal of Safety Research, 70, 45–52.
15. Karthikeyan, P. (2021). Occupational health issues among salt workers in Tamil Nadu. Asian Journal of Social Science, 11(2), 122–130.
16. Kumar, S. (2020). Labour conditions in India's informal economy. New Delhi: Oxford University Press.
17. Mishra, A. (2019). Occupational diseases and prevention strategies. Indian Journal of Public Health, 63(3), 210–215.
18. Mohan, R. (2018). Industrial health and safety management. Chennai: McGraw Hill.
19. Narayanan, L. (2022). Coastal labour and environmental risks. Marine Policy Journal, 58(4), 88–95.
20. National Sample Survey Office. (2021). Employment and unemployment report. New Delhi: Government of India.
21. Nayak, P. (2020). Occupational hazards in salt industries. Indian Journal of Occupational Health, 64(1), 23–30.
22. Paul, S., & Veitch, E. (2021). Dietary habits and occupational health. Nutrition and Health Journal, 27(1), 56–64.
23. Prasad, V. (2019). Social security measures for unorganized workers. Labour Economics Review, 32(2), 44–52.
24. Rao, M. (2018). Industrial labour in India. New Delhi: Sage Publications.
25. Reddy, K. (2020). Workplace stress and productivity. Journal of Management Studies, 14(3), 90–98.
26. Roy, D. (2021). Occupational safety awareness among workers. Safety Science Journal, 45(2), 67–74.
27. Saha, A. (2019). Health risks in manual occupations. Public Health Review, 33(2), 150–158.
28. Sankar, P. (2022). HRM practices in labour-intensive industries. International Journal of HRM, 9(1), 33–41.
29. Sarkar, S. (2020). Informal sector employment challenges. Economic Studies Journal, 52(3), 70–78.
30. Sen, A. (2018). Labour welfare policies in India. New Delhi: Routledge.
31. Sharma, R. (2021). Occupational stress and coping strategies. Indian Journal of Psychology, 65(2), 112–120.
32. Singh, P. (2020). Industrial relations and labour welfare. New Delhi: Pearson.
33. Sundaram, K. (2019). Rural labour and livelihood. Journal of Rural Studies, 36(1), 22–30.

34. Tamil Nadu Government. (2022). Labour welfare schemes report. Chennai: Government Press.
35. Tripathi, S. (2021). Occupational health management systems. Health Policy Journal, 18(3), 77–85.
36. UNDP. (2021). Human development report. New York: United Nations.
37. Varma, S. (2019). Safety measures in hazardous industries. Industrial Safety Journal, 40(2), 55–63.
38. World Health Organization. (2023). Workplace health promotion report. Geneva: WHO.
39. Yadav, R. (2020). Labour conditions in coastal regions. Journal of Development Studies, 28(4), 101–109.
40. Zachariah, M. (2021). Occupational diseases among workers. Medical Journal of India, 35(2), 88–95.
41. Anitha, R. (2022). Women workers in unorganized sectors. Gender Studies Journal, 12(1), 45–52.
42. Balasubramanian, K. (2020). Salt industry in Tamil Nadu. Economic Review, 50(3), 120–128.
43. Chandra, P. (2019). Industrial safety practices in India. Safety Management Journal, 22(2), 65–72.
44. Devi, S. (2021). Health awareness among rural workers. Rural Health Journal, 18(1), 30–38.
45. Elangovan, T. (2022). Labour welfare in coastal Tamil Nadu. Social Work Review, 27(2), 90–98.
46. Francis, J. (2020). Occupational risks in informal sectors. Global Health Journal, 14(3), 75–82.
47. Ganesh, V. (2021). HRM interventions in small industries. Management Insight, 16(2), 55–63.
48. Hariharan, S. (2019). Workplace health and safety. Industrial Journal, 29(1), 44–50.
49. Ilango, M. (2022). Salt workers and socio-economic conditions. Development Studies Journal, 19(2), 110–118.