

ISSUE REPORT

Improving the Quality of Life for Labour in the Fishery Sector

Access to public health services and health rights, considered as a whole

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2569

Contents

สารบัญ

01	Preamble	—
	บทนำ	
02	Overview of the situation	—
	สถานการณ์ทั่วไป	
03	Risks and factors regarding health of workers in fisheries in Thailand	—
	ความเสี่ยงและปัจจัยเรื่องสุขภาพของแรงงานในภาคประมง	
04	Healthcare system for fishers in Thailand	—
	ระบบการดูแลสุขภาพสำหรับแรงงานประมงในประเทศไทย	
05	Enhancement of fishers' quality of life regarding their health	—
	การยกระดับคุณภาพชีวิตแรงงานภาคประมงในมิติสุขภาพ	
06	Public health services that meet the needs of workers in sea fisheries in Thailand	—
	บริการสาธารณสุขที่สอดคล้องกับเงื่อนไขของแรงงานภาคประมง	
07	Bibliography	—
	บรรณานุกรม	

CHAPTER – บทที่

[01]

Preamble

บทนำ



Thailand's sea fisheries have played an important role in its economy for a long time. Due to its geographical location, inherited traditional livelihoods, the development of fishing technology linked to international assistance, and the recognition of fishing expertise from other countries, as Thailand's sea fisheries have evolved into a major industry, **the demand for labour in this sector has kept rising** for several decades. This is linked to periods of domestic labour migration as well as the ongoing presence of migrant workers. Labour shortages in sea fisheries are related to certain patterns of migration from neighboring countries, leading to challenges in managing migrant workers and policies concerning employment and various aspects of the lives of fishers in Thailand.

Health and public health policy are key dimensions affecting the quality of life of fishers, who contribute significantly to sea fisheries. While there have been significant advancements in health insurance systems, both in concept and service delivery, for both Thai and foreign workers, it can be argued that fishers' health remains a secondary priority, falling short of economic and livelihood issues. As a result, the issues of health-related well-being are often made unaware even among the fishers and within the industry. This is attested to by findings from studies on the right to health and access to medical services among fishers, as well as observations from the **Labour Protection Network Foundation** in the past, which highlight some aspects of the health situation among fishers in Thailand.

To cast light on aspects of health among fishers concretely in order to develop recommendations to enhance quality of life of sea fisher, particularly their better access to public health services and their right to health, the Labour Protection Network Foundation (LPN) has received funding support from the International Fund for Fishing Safety (IFFS) to conduct a study on "Improving the quality of life for fishers in a holistic manner, focusing on access to healthcare services and the right to health", and an effort has been made to collect data from **100 Thai and foreign workers** in Thailand's sea fisheries using qualitative research methods. Interviews and focus group discussions have been conducted with fishing crew members and their families residing and working in eight **coastal provinces** of Thailand. This field research aims to contribute to understanding of the basic conditions of fishers, particularly regarding their health such as healthcare, health risks, rights, and access to health services. It also seeks to promote health awareness among workers at various levels of the sea fisheries ecosystem and support improvements in the quality of life for fishers, ultimately contributing to the productivity and sustainability of Thailand's sea fisheries.



PLATE

Commercial fishing vessels moored along the pier

CHAPTER – บทที่

[02]

Overview of the situation

สถานการณ์ทั่วไป



Thailand's fisheries have consistently received government support and been listed in the National Economic and Social Development Plans since the mid-1970s, under the **Third National Economic and Social Development Plan** when blatant support has been given to the development of fisheries sector in several areas, including processing industries to promote exports.¹ Prior to this, there had been extensive exploration of fishing grounds and development of infrastructure to support the expansion of fishing activities. As a result, Thailand's fisheries production has reached the world records and it has become a major exporter of processed seafood products. These achievements attest to the importance of sea fisheries and their ability to generate significant economic value for the country.² However, in the **1990s**, Thailand began to experience a labour shortage in sea fisheries, stemming from the decline of Thai labour-force, particularly those from the Northeast, who stopped migrating to work as fishing crew members. Foreign workers have thus been recruited as a replacement. Cabinet resolutions issued at that time allowed the employment of foreign workers in the fishing industry³, leading to the increasing registration and systematic management of foreign labour.

Thai government policy towards migrant workers from neighboring countries serves as a mechanism to regulate the existence of this group, an indispensable workforce in the country's fishing and related industries. However, while migrant workers contribute significantly to the production value of Thailand's sea fisheries, legal provisions providing social protection and rights to them are limited, primarily based on pre-existing security policies. As a result, migrant workers have to face exploitation, deception, and becoming victims of human trafficking, among other things. The process of cross-border travel to a destination country like Thailand, the application for work permits and the subsequent employment procedure in Thailand, used to be a common occurrence along with the growth of this industry. A number of Thai migrant workers employed on commercial fishing vessels have also experienced this in the past. Thailand's revisions to regulations and the implementation of measures to ensure compliance with international standards have typically been undertaken as part of international obligations. A significant milestone for the fishing industry labour was made late 2000s, driven by pressure from the United States on the use of forced labour and human trafficking in Thai sea fisheries, and the European Union on **illegal, unreported, and unregulated (IUU)** fishing in Thailand, directly impacting the Thai fishing economy. This has led to a complete overhaul of laws related to labour and sea fisheries, including the Fisheries Act B.E. 2558 (2015), the Maritime Labour Act B.E. 2558 (2015), and the **Labour Protection In Fishing Work Act, B.E. 2562 (2019)**, to provide clearer guidelines for protecting workers in this sector, in line with Thailand's previous ratifications of various conventions.

Recent policy implementation has shown a growing trend towards considering the rights and welfare of fishers through coordination and cooperation with relevant sectors. However, measures concerning migrant workers remain ad hoc, focusing more on controlling movement than on integrating them into the labour market and health/social security systems.⁴ This reflects a gap in providing comprehensive protection to sea fisher, particularly migrant workers entering Thailand through various channels. Meanwhile, it is necessary for the fishing industry to adapt to enacted regulations, such as the establishment of **port-in-port-out (PIPO) controlling centers** and regulations for issuing ‘**seabook**’ to migrant workers to ensure sea fisher as a whole are properly documented, ready for vessel and onboard labour inspections, and are included in some form of health insurance due to pre-employment health checkup as required as well as access to fair employment. However, in some areas, gaps in labour protection exist due to employers or fishing business owners imposing working conditions that violate the rights and welfare of sea fisher. In some cases, full protection and access to benefits are not provided, especially in the health dimension, which directly and indirectly influences the productivity of workers.

Given that sea fisheries involve working conditions that differ from other types of work in general, including the working area and the environment, employment patterns and working hours, as well as the constant risks associated with working on fishing vessels, **health** is an inseparable dimension affecting the quality of life and work of fishers and is a key issue that will be discussed here.

¹ Waranya Chitphong, 2012: 271.

² In particular, the period from 1960 to 1972, aka a golden age of fishing, and after that, it continued to expand, including the growth of related fishing processing industries and the export of aquatic products (Mana Chuaychu, 2003: 4).

³ Suphat Kukhun, 2002: 16.

⁴ National Health Commission Office, n.d. (online) retrieved from <https://www.samatcha.org/site/issues/a2b58e70-a5af-4c88-be49-2214377c9733/detail>.



PLATE

Fishing vessels and dwellings in a waterfront fishing community

CHAPTER – บทที่

[03]

Risks and factors regarding health of workers in fisheries in Thailand

ความเสี่ยงและปัจจัยเรื่องสุขภาพของแรงงานในภาคประมง

Health risks for working on board fishing vessels and challenges

Health risks at work

Sea fisheries are a kind of work involving risks. Although there is yet any exact figure about the mortality rate in the fishing industry since there is no global reporting system for this data, according to the **Fish Safety Foundation**, it is estimated that mortality rate in sea fisheries is higher than the estimate made by ILO/FAO (80/100,000 fishers).⁵ These attest to the risks associated with working on fishing vessels. Workers face several challenges, including unpredictable weather conditions, dangerous equipment, limitations regarding working areas, and long working hours. Furthermore, when facing any problems, their situations often become vulnerable, given the remoteness of their work locations, making it challenging to seek assistance. Meanwhile, in many parts of the world, remuneration may not be clearly defined and may hinge on the share of the fish caught. It forces the tendency for longer fishing trips and the boat owners may risk venturing out at sea despite the harsh weather conditions⁶.

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However, health and safety issues in the sea fisheries are complex and multifaceted, as fishing is conducted under unpredictable weather and sea conditions. Fishers often lack protective equipment, especially in small-scale fishing cartels which avoid providing formal employment contracts and social protections. **Common health issues among commercial fishers** include cancer and allergies, injuries, vision loss, hearing loss, bone diseases, suicide due to harsh working conditions and fatigue, and substance abuse and alcoholism.⁷

Alayyannur et al. (2023)⁸ who reviewed studies on the health and safety of fishers to determine risks, factors, and impacts faced by fishers at work pointed out that: 1.) Work-related accidents most often involve slips and falls, burns or engine-related injuries, and hearing loss; 2.) Key factors contributing to work-related accidents include external factors such as lack of appropriate protective equipment or weather conditions, and internal factors such as lack of work experience, difficult working conditions, fatigue, and absence of attentiveness; and 3.) Physical impacts include heart and cardiovascular diseases, while mental impacts include depression, post-traumatic disorder (PTSD), and psychiatric conditions.

⁵ Fish Safety Foundation, 2025.

⁶ ILO, 2010.

⁷ FAO, n.d.

⁸ Alayyannur, P. A., Ramdhan, D. H. and Tejamaya, M., 2023.

Risks from challenges concerning law enforcement

The working conditions that incur health risks among fishers on board asides, having to ‘**work remotely**’ as the vessels have to set sail for a long time, this has led to difficulties in **properly regulating labour practices** on fishing vessels. Furthermore, being migrant workers increases the likelihood of facing risks while working on fishing vessels, as their legal status may lead to limited welfare support and access to labour rights protection mechanisms, potentially resulting in forms of labour exploitation.⁹ However, it is worth noting that although acquiring a legal status may not guarantee protection of workers' rights and welfare, it may increase their bargaining power to some extent. Among Southeast Asian countries, including Thailand, there have been significant efforts to regularize the use of labour in the fishing industry. This includes the mandating for fishing vessels to install Vessel Monitoring System, and requiring reporting and inspection of vessels before and after port arrival/departure (port-in/port-out). It also involves requiring fishers to carry more documents, this an increasing cost and that amount may be deducted from their salaries, making it difficult for workers to change employers.¹⁰

Meanwhile, research has shown a link between poor working conditions on sea fishing vessels and the likelihood of such vessels engaging in illegal, unreported, and unregulated (IUU) fishing and other offenses. However, in terms of law enforcement to regulate sea fishing, given the constant movement of vessels and the existing legal and international regulations, such enforcement has become daunting. International laws that define responsible persons include the **United Nations Convention on the Law of the Sea (UNCLOS)**, which assigns responsibility to **the State whose flag the vessel flies**. This responsibility may encompass management, technical, and social aspects on fishing vessels to ensure safety at sea and the welfare of workers on board. To implement the spirit of this convention, the United Nations has designed mechanisms, including specialized agencies and both binding and non-binding mechanisms¹¹ including;

Organizations	Roles and tools at disposal
1. International Labour Organization (ILO)	Role: Set out rules for labour practices and develop policies and programs to promote decent work. Tool: - International Labour Organization Convention on Forced Labour - International Labour Organization’s Work in Fishing Convention
2. International Maritime Organization (IMO)	Role: Set out minimum standards for training and certification for senior fishing crew members on vessels larger than 24 meters in length Tool: - International Convention on Standards of Training, Certification and Watchkeeping for Fishing Vessel Personnel (STCW-F)
3. Food and Agriculture Organization (FAO)	Role: Set out guidelines regarding fishing practices and attempt to expand the scope to include improving working conditions on fishing vessels Tool: - Code of Conduct for Responsible Fisheries which applies to management and fishing practices, addresses fishing safety and safety standards that must not be inferior to the minimum requirements.

TABLE 1 International organisations and the instruments through which work on board fishing vessels is regulated

However, the enforcement of these tools has to face several restrictions and challenges including the **fragmented work among international organizations** which have their own specific roles and responsibilities, while the problems in the sea fisheries sector are intersectional across multiple issues; the capacity of flag states to regulate fishing vessels that have move around constantly; the jurisdiction of law enforcement; the nature of the tools, which are not immediately binding and require ratification by member states; and the intensity of domestic laws in each country. The role of non-governmental organizations in oversight and problem-solving is thus crucial.¹² Under these conditions, regulating fishing vessels presents significant challenges.

⁹ Kadfak, A., 2024.

¹⁰ Kadfak, A., 2025.

¹¹ Riddings, Penelope J., 2021.

¹² Ibid.



PLATE

Drums and fishing gear stacked on deck

Challenges regarding access to medical and public health services among sea fisher

Regarding access to medical services, **Levesque & Russell (2013)** sets out concepts regarding access to medical services in **five key dimensions** including ability to perceive, ability to seek, ability to reach, ability to pay, and ability to engage. The factors influencing such abilities are not related to individual capacities. Rather, they are swayed by various factors including the organization of public health services, social norms in specific areas, and resources within a particular society/community, all of which contribute to the complexity of access to medical services for different groups. In the context of sea fisheries work, the access to medical services is complex due to the nature of the work, labour status (migrant/transnational), and legal status. The situation gets even more challenging and complicated for groups exploited on fishing vessels, such as how undocumented migrant workers have been allowed to purchase health insurance cards and granted ad hoc permits to work in Thailand thanks to cabinet resolutions. Meanwhile, the workers identified as victims of human trafficking who wish to get registered are denied such opportunities. Furthermore, some workers have to work at sea for extended periods beyond the eligibility limits of such health insurance.¹³

Regarding access to medical services, Levesque & Russell (2013) sets out concepts regarding access to medical services in five key dimensions

01

ability to perceive

02

ability to seek

03

ability to reach

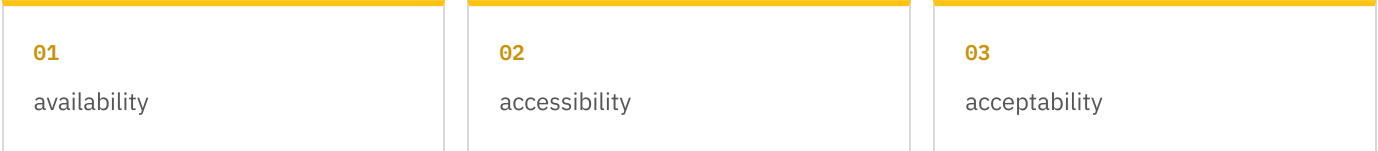
04

ability to pay

05

ability to engage

As to access to health protection regime among migrant workers, **Konig et al. (2022)** presented **three dimensions** of challenges in accessing health coverage: availability, highlighting the lack of certain services such as reproductive healthcare services, insufficient protective equipment at work, and employer assistance in the event of work-related accidents; accessibility, where obstacles to accessing health coverage include high costs hindering access to medical services, lack of health knowledge or public health services, health literacy, and legal documentation; and finally, acceptability whose main obstacles are language and culture, length of access to health services and the belief among migrant workers about their self-care, rather than having to rely on medical facilities. In terms of workers in sea fisheries, it is blatantly clear that their working conditions have led to the exposure to health risks. For example, they are required to work for a long continuous period of time, and some have to live on fishing boats or docks where it is difficult to maintain good hygiene. If they are undocumented workers or lack legal status, they will have to face difficulty in accessing social security and are at risk of being exploited by both employers and government officials. Even though labour groups can rely on information about medical treatment from communication or their relatives, but doing so may cause workers to receive inaccurate health information.¹⁴



In reviewing previous studies about health risks, safety, and access to medical services among workers on board fishing vessels, it has been found that fishing work involves high risks thanks to **the working environment which is challenging and unpredictable**. Workers have to work in unpredictable weather conditions for extended periods, using large and potentially dangerous equipment and machinery. This poses a direct health risk to sea fisher. Cultural factors related to fishing and living environments, such as wages, workers' beliefs, and even the living conditions of fishers and their families, also accelerate health problems among them. Despite efforts to design accessible health services for all workers, challenges in law enforcement, as well as the knowledge and beliefs of workers, significantly impact their ability to decide when and/or under what circumstances they should utilize healthcare services.

¹³ Suphanchaimat, R.; Pudpong, N.& Tangcharoensathien, V., 2017.

¹⁴ Wongsuwanphon, S., Chottanapund, S., Knust, B., Wongjindanon, N. and Suphanchaimat, R., 2024.

Conceptual framework for the study

Based on the aforementioned data, factors that determine access to health services and good quality of life among fishers include **determinants at the individual level of the workforce, and structural determinants** resulting from government management and stakeholders. All of these have a bearing on outcome of the workers' health in terms of their access to health services and good quality of life. Determinants at the individual level include how workers used to experience risk while working on fishing vessels which reflects their working conditions, legal status, and health awareness. Apart from these determinants, access to health protection is determined by at least three structural dimensions. For this study, these include the general healthcare system provided by the public, private, and civil society sectors; workforce preparedness and occupational safety systems, which mitigate risks to workers performing hazardous work on fishing vessels; and access to worker status documentation in terms of ease of access, clear criteria, and reasonable costs. The conceptual framework for data collection and analysis is shown in the diagram.

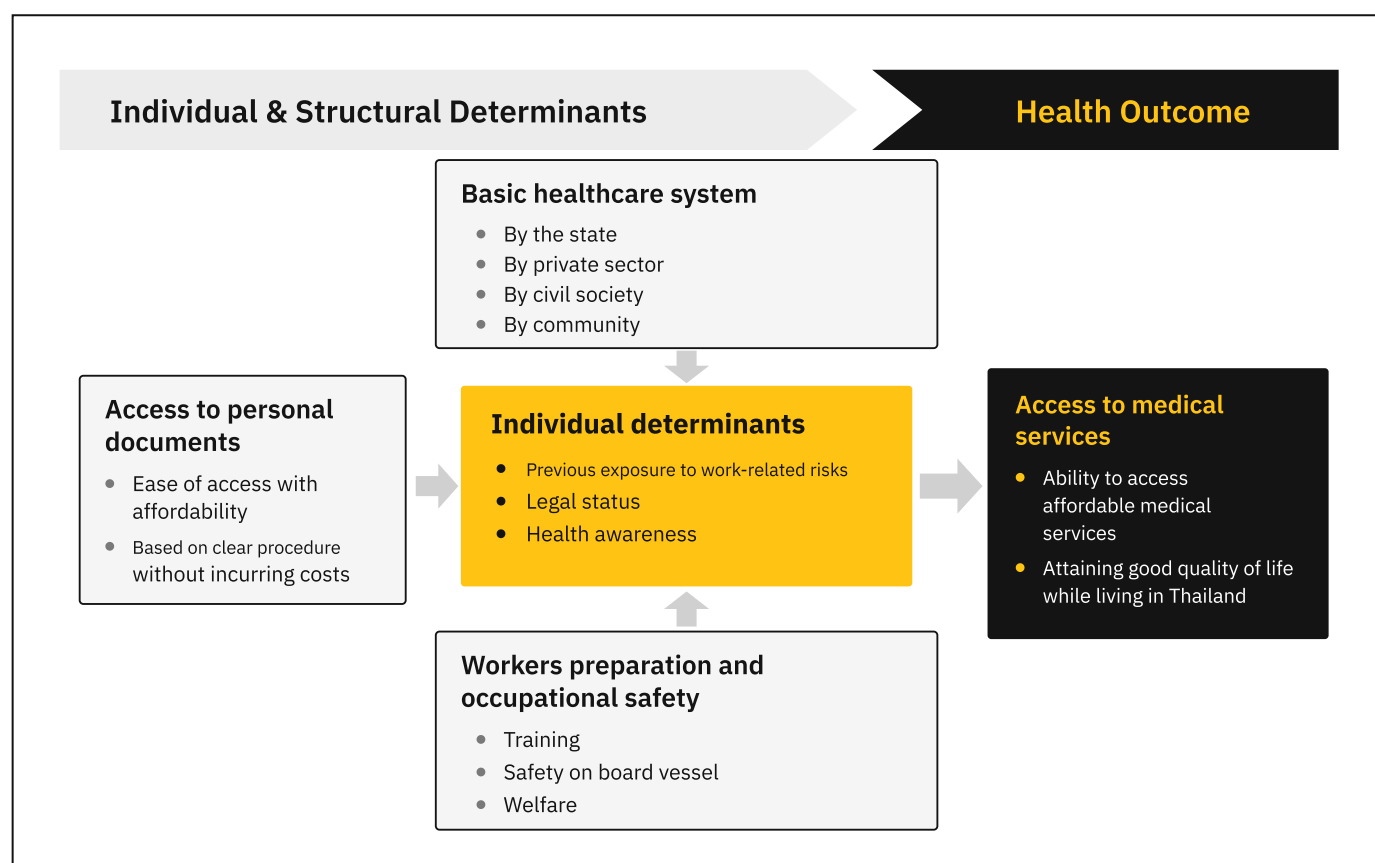
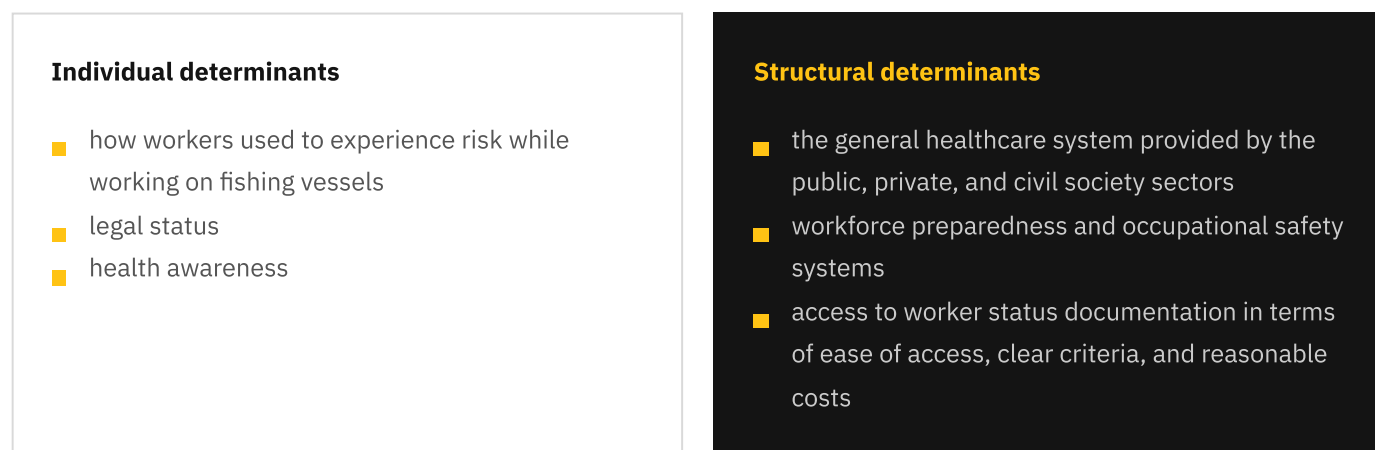


FIGURE 1 Conceptual framework for this study · Source: Based on the study team's analysis

CHAPTER – บทที่

[04]

Healthcare system for fishers in Thailand

ระบบการดูแลสุขภาพสำหรับแรงงานประมงในประเทศไทย



As aforementioned, work on board fishing vessels involves exposure to various kinds of risk in terms of the environment and equipment for work which may feature harmful risks. Therefore, **international standards** have been designed to protect workers on fishing vessels in both labour rights and health aspects, leading to improvements in Thai law in this direction. This section attempts to explore international standards and domestic laws and regulations focused on protecting workers in the fishing sector, particularly in the health dimension, which will help in understanding the healthcare system Thailand has designed for fishers.

— INTERNATIONAL STANDARDS

International conventions and standards

Work in Fishing Convention, 2007 (C188)¹⁵

The international convention sets out rules to regulate work on board fishing vessels, particularly commercial fishing vessels, which often have higher fishing capacity compared to artisanal fishing vessels. Therefore, the Convention offers guidelines for protecting the rights and safety of workers on fishing vessels in several dimensions, including: 1) The duties of fishing vessel owners, skippers, and crew members to ensure that crew members can work in safe conditions and receive adequate training for safe work; and 2) Minimum standards for working on fishing vessels, covering a minimum age of **at least 16 years**. And in the case of 15-year-olds, they must engage in work that is not too strenuous and are not allowed to work during holidays, and must receive health examination required to ensure that the fishers are healthy and ready for work. 3.) Working conditions, covering working hours, workers' name list, employment contracts, and job placement. 4.) Food and accommodation on fishing vessels, which stipulates that fishing vessels must have sufficient and clean water and food for the crew. 5.) Medical treatment, health coverage, and social insurance, to ensure that fishers who become ill or have accidents on board receive good medical treatment, while also having measures to prevent accidents and hazards arising from work on fishing vessels, as well as laws regarding social insurance for fishing vessel workers. Thailand ratified this convention on **30 January 2020**.

Thailand ratified this convention on 30 January 2020.

Council Directive 93/103/EC of 23 November 1993 concerning the minimum safety and health requirements for work on board fishing vessels (EU Directive 93/103/EC)

This Directive sets out minimum standards regarding minimum safety and health requirements for work on board fishing vessels, on-board equipment, information sharing and training about work on board fishing vessels. The standards are determined according to either old or new vessels. Failure to comply with these conditions could affect Thailand's access to the European Union market, **a major importer of Thailand's seafood.**

¹⁵ For more detail, please see C188 – Work in Fishing Convention, 2007 (No. 188). (Online) https://normlex.ilo.org/dyn/nrmlx_en/f?p=NORMLEXPUB:12100:0::NO::P12100_INSTRUMENT_ID:312333.

— DOMESTIC LAW

Laws regulating work on board fishing vessels in Thailand

Labour Protection In Fishing Work Act, B.E. 2562

The law contains objectives to determine duties of fishing vessel owners and the performance of duties of the fishers in compliance with international standards. It also aims to protect fishers' rights and **prevent the use of forced labour** in sea fisheries given this work is different from conventional work since it involves risks at sea and long period of working hours. Its enactment was also meant to ensure compliance with the ratification of the **International Labour Organization Convention no. 188** on Work in Fishing, 2007.

This law provides for measures to protect fishers including requiring those working on fishing vessels to be kept in good health for their jobs, having right to request return to the place where the vessel owner recruited them or another designated location, and requiring vessel owners to provide fishers with specified health and welfare benefits. It also mandates inspections of living and working conditions for certain types of vessels, such as those fishing for more than three days per trip and meeting legal size requirements, or those fishing for more than three days outside Thai territorial waters. Furthermore, the law requires fishing vessel owners and fishers to comply with minimum working standards, duties, accommodation, and health and safety regulations in accordance with other laws, including the Labour Protection Act, the Employment and Job Seeker Protection Act, and the Act on Navigation in Thai Waters. The existence of this law and such measures reflects Thailand's efforts to protect fishers, encompassing not only work aspects but also safety and health.

Social Security Act B.E. 2533 and its amendments

A key legislation to provide social security for all workers, both employed by others and self-employed, are entitled to benefits based on the risk-sharing principle. Benefits for employed workers include **seven cases**: Injury or sickness benefits, maternity benefits, disability benefits, death benefits, child support benefits, old-age benefits, and unemployment benefits. Such benefits serve as protection for workers when exposed to non-related incidences. However, **fishers are not subjected to the Social Security Act** and the Royal Decree specifying employees under Section 4 (6) of the Social Security Act B.E. 2533 B.E. 2545.¹⁶

01 Injury or sickness benefits	02 maternity benefits	03 disability benefits
04 death benefits	05 child support benefits	06 old-age benefits
07 unemployment benefits		

However, fishers are not subjected to the Social Security Act

Insofar, an effort has been made to revise Section 4 Royal Decree specifying employees under Section 4 (6) of the Social Security Act, albeit it was met with resistance from the **National Fisheries Association of Thailand** which cited the dynamic and mobile nature of fishing workforce, and the fact that fishing vessels do not operate regularly. Most sea fisheries operators are normal persons who may not be able to prepare necessary documentation to enter the social security. In addition, the Ministry of Labour already has specific regulations regarding health and welfare benefits for fishers.¹⁷

¹⁶ Please see Section 4, Social Security Act B.E. 2533 and Royal Decree specifying employees under Section 4 (6) of the Social Security Act B.E. 2533 B.E. 2545 (online) <https://www.mol.go.th/wp-content/uploads/sites/2/2021/02/2-%E0%B8%9E%E0%B8%A3%E0%B8%9A.%E0%B8%9B%E0%B8%A3%E0%B8%B0%E0%B8%81%E0%B8%B1%E0%B8%99%E0%B8%AA%E0%B8%B1%E0%B8%87%E0%B8%84%E0%B8%A1-%E0%B8%9E.%E0%B8%A8.-2533.pdf> and https://www.sso.go.th/wpr/assets/upload/files_storage/sso_th/5c8741d7c5129f40f8cb88638943c015.pdf.

¹⁷ Fishermen protested at Ministry of Labour to oppose inclusion of sea fishing as an occupation under social security system, 2025. (online) retrieved from <https://www.prachachat.net/hilight-prachachat/news-1768468>.

Workmen's Compensation Act B.E. 2537 and its amendments

This law establishes a compensation fund to protect employees who suffer accidents or injuries as a result of their employment, leading to illness requiring treatment, succumbing to death, disappearance, or disability. The employers are obliged to pay contributions to the fund, which **covers all types of businesses**, including workers in the fishing industry.

The employers are obliged to pay contributions to the fund, which covers all types of businesses, including workers in the fishing industry.

Notification of the Ministry of Labour regarding the provision of health and welfare benefits to fishers, dated 26 November 2019

This Notification specifically provides protection for fishers for non-work-related incidents, including:

Protection	Detail
Health protection for non-work-related incidence	- If not provided with protection according to the National Health Act, the workers must alternatively be provided with health protection according to the Notification of the Ministry of Public Health regarding health examinations for foreign workers.
Loss of income benefit due to illness or non-work-related injury	- Vessel owners are required to pay the loss of income benefit at 50% of the highest rate of the daily minimum wage mandated by the labour protection law. - The duration for receiving loss of income benefit shall last from the first day you are required to take time off work as ordered by the doctor until the last day the doctor specifies for your leave.
Non-work-related disability benefit	- 30% of the highest rate of the daily minimum wage as stipulated by the Labour Protection Act, multiplied by thirty days, for a period of one hundred and eighty months.
Non-work-related death benefit	- 40,000 baht for funeral expenses. - In the event of a death benefit for a fisher, the compensation will be at 50% of the highest rate of the daily minimum wage as stipulated by the Labour Protection Act, multiplied by thirty, for a period of twelve months.

TABLE 2 Benefits under the Notification of the Ministry of Labour on the provision of health benefits and welfare for fishery workers, dated 26 November B.E. 2562

To provide for the case of loss of income from illness or exposure to non-work-related injury/disability/death, the vessel owners **may opt to purchase insurance policies** to ensure the fishers receive benefits. Benefits from such insurance must not be less than what is stipulated in this Notification. For providing health coverage (not due to work) and all benefits, the vessel owners and fishers may agree to receive health and welfare benefits in accordance with social security laws instead.

For providing health coverage (not due to work) and all benefits, the vessel owners and fishers may agree to receive health and welfare benefits in accordance with social security laws instead.

The existing healthcare system for fishers in Thailand

Excluding those specified by particular laws, access to medical treatment and right to health among fishers vary according to their nationalities. They can be divided into two main groups: **migrant workers and Thai workers**.

Healthcare system for migrant fishers

Migrant workers' entry into Thailand has been made through key channels including employment under Memorandums of Understanding (MOUs) between Thailand and its country of origin, and exemptions granted to undocumented workers to allow them to work in the Kingdom of Thailand according to cabinet resolutions. Migrant workers employed as fishing crew members are required to undergo **health examination** and purchase health insurance from a government medical facility or a financially stable insurance company as specified by the Department of Employment. The costs of the health checkup and health insurance vary depending on the permitted duration of employment, as follows:

Permitted duration of employment	Rate
1) Two-year coverage period	- Health examination (twice), 1,100 baht each - Health insurance fee 3,200 baht each
2) One-year coverage period	- Health examination, 540 baht each - Health insurance fee, 1,600 baht each

TABLE 3 Health examination and health insurance costs for migrant fishery workers, by permitted duration of employment

The health insurance benefits **cover four areas**: 1.) General medical treatment and rehabilitation, such as examinations, diagnosis, treatment, normal childbirth, medical rehabilitation, general dental services, food and general patient care, and medication; 2.) Health promotion, such as age-appropriate care, family planning, and disease prevention vaccinations; 3.) Disease surveillance; and 4.) Disease prevention and control, such as providing antiretroviral drugs for HIV/AIDS, ensuring that workers and their dependents receive prescribed medication, and providing treatment for filariasis (elephantiasis).¹⁸

¹⁸ Division of Health Economics and Health Security, 2024.

Healthcare system for Thai fishers

For Thai fishers, healthcare coverage is provided under the **National Health Security Scheme (30-baht gold card scheme)**. When ill, the workers can receive treatment at primary care facilities or any primary care unit, such as pharmacies, medical clinics, dental clinics, nursing clinics, physiotherapy clinics, traditional Thai medicine clinics, and medical technology clinics. They can also receive treatment at participating private healthcare facilities under the 30-baht universal healthcare program, using only their national ID card. However, for government hospitals under agencies other than the Ministry of Public Health, such as the Bangkok Metropolitan Administration, the Ministry of Defence, the Royal Thai Police, or university-affiliated hospitals, a referral letter is required, or they may need to purchase additional private health insurance as appropriate.

Healthcare system for migrant fishers

- Memorandums of Understanding (MOUs) between Thailand and its country of origin
- exemptions granted to undocumented workers
- undergo health examination
- The health insurance benefits cover four areas

Healthcare system for Thai fishers

- National Health Security Scheme (30-baht gold card scheme)
- primary care facilities or any primary care unit
- private health insurance

In terms of the legal frameworks and policies, Thailand has ratified the Work in Fishing Convention, 2007, which is a key convention aiming to directly protect fishers. Thailand has also enacted domestic legislations to offer specific protection to fishers. However, when considering social security, which provides general protection, fishers are not covered by Thai social security law. The Ministry of Labour has, however, issued a notification regarding health and welfare benefits for fishers, dated 26 November 2019, which specifically addresses these needs. However, some benefits, such as **old-age** benefits, unemployment benefits, and child support, are not included in this legislation. In short, Thailand has established a legal and policy framework that provides fishers with basic protection and healthcare rights. However, further discussion and adjustments are needed to ensure that the rights of fishers are not inferior to those engaged in other occupations.

CHAPTER – บทที่

[05]

Enhancement of fishers' quality of life regarding their health

การยกระดับคุณภาพชีวิตแรงงานภาคประมงในมิติสุขภาพ



Thailand's public health policies are inclined toward providing health insurance to all people. It has extended to the expansion of universal healthcare insurance to migrant populations in Thailand as well. Key motivations behind this move has stemmed from the fact that Thailand has signed **ASEAN Consensus on the Protection and Promotion of the Rights of Migrant Workers** in 2017 and adopted the Global Compact for Safe, Orderly and Regular Migration and the Global Compact on Refugee in 2019 with intent to become a champion country regarding health management of migrants.¹⁹ The expansion of policies concerning the right to health and human rights to migrant populations under the regional and global treaties asides, Thailand which is a country of destination of migrant workers and their dependents in Southeast Asia, has embarked on the implementation of health policy for the migrant populations systematically since 2011.²⁰ These regulations have been periodically adjusted in relation to the management of migrant workers, specifically regarding health checkups and health insurance. Currently, the primary policy governing these regulations is the **Ministry of Public Health Notification on Health Examination and Health Insurance for Foreign Workers** (No. 2) B.E. 2563 (2020) and (No. 3) B.E. 2566 (2023), which apply to migrant workers employed in sea fisheries.

This section presents findings from a health perspective, encompassing self-care, health risks in the workplace and daily life, the right to health, access to public health services, and the experiences of fishers regarding medical and public health services in Thailand. This aims to explore the initial situation regarding the health of a sample group of fishers in eight **coastal provinces** of Thailand including Samut Sakhon, Chonburi, Rayong, Trat, Prachuap Khiri Khan, Nakhon Si Thammarat, Trang, and Phang Nga. This will then be linked to an analysis of the obstacles and limitations in accessing medical and public health services faced by fishers in these areas.

¹⁹ World Health Organization, 2023:23. ²⁰ United Towards a Migrant-Inclusive Health System in Thailand, 2024. (Online) Retrieved from <https://thailand.who.int/news/united-towards-migrant-inclusive-health-system-thailand-0>.

²⁰ Development of health insurance for migrant workers in Thailand, 2559. (online) retrieved from <https://www.hfocus.org/content/2016/12/13925>.

— FIELD FINDINGS

Fishers and health issues

Basic information about sample group

Of the **100 informants**, 65 are sea fisher who have given data by themselves and 35 who have given data as family members of the workers. Almost all of the sample group of Thai fishers are either crew members or fishing boat owners, totaling 40. Whereas the sample group of migrant workers comprised **60** individuals, consisting of 33 Myanmar fishers and 27 Cambodian fishers. The Myanmar group included not only those from Burman ethnicity, but also other ethnic groups such as the Mon, who have migrated to work in Thailand. The distribution of the sample group across the eight study provinces was, in descending order, Prachuap Khiri Khan, Nakhon Si Thammarat, and Trang. The sample group in Prachuap Khiri Khan comprised 13 Thai fishers and 23 migrant fishers, including both Myanmar and Cambodian nationals.

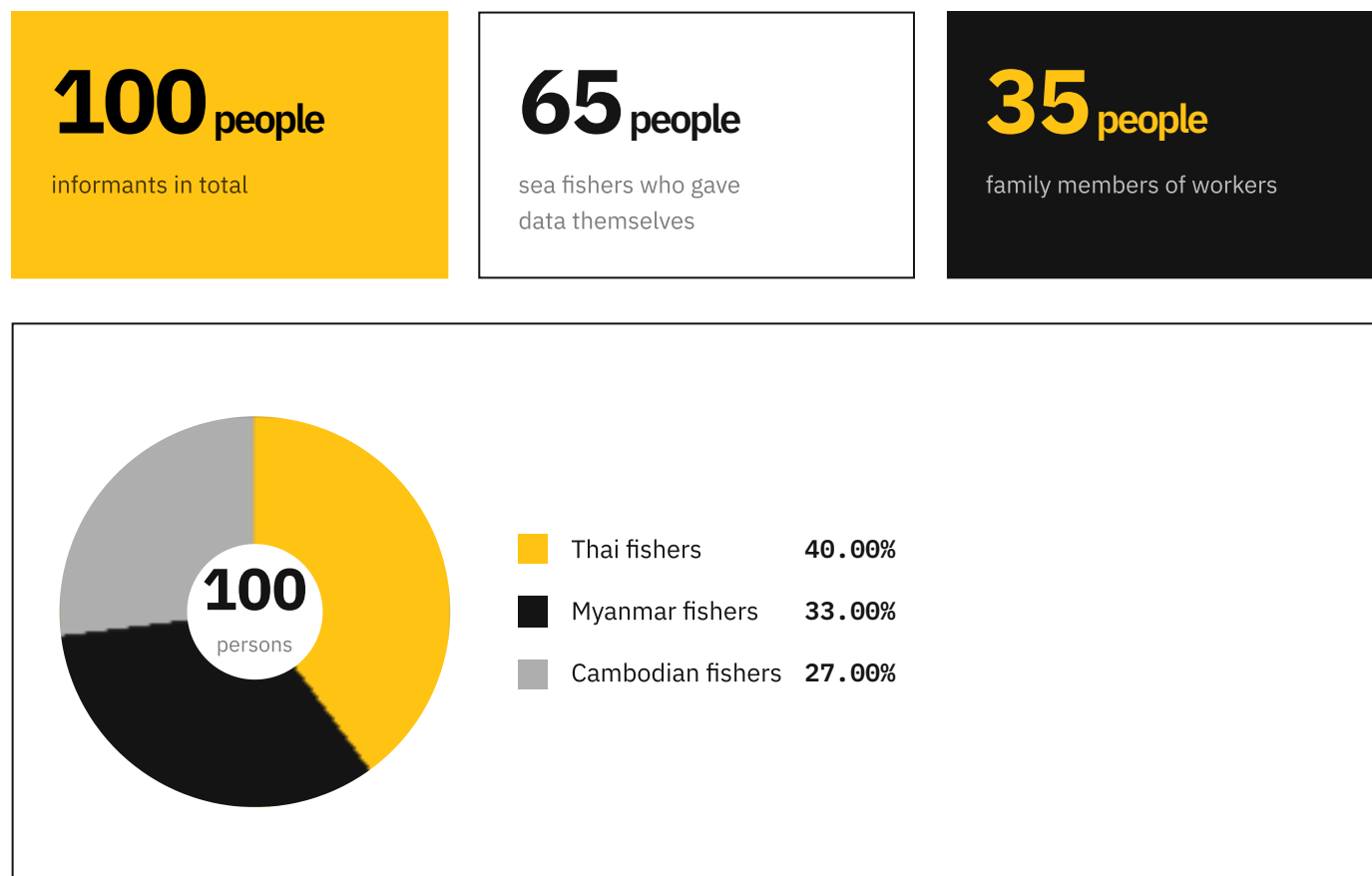


FIGURE 2 Composition of the 100-person sample of informants by nationality (number of people, and percentage of the whole sample), from fieldwork in 8 coastal provinces

The sample group of migrant workers came from various locations. The largest number of Myanmar fishers came from **Moulmein/Mawlamyine**, followed by Dawei and nearby towns, all from coastal states. Meanwhile, Cambodian fishers came in roughly equal numbers from Kampong Cham, Preyveng, Koh Kong, Kampong Chhnang, and Banteay Meanchey, as well as other surrounding cities.

Overall age, the sample group of fishers has an **average age of 43**. The average age of the Thai informants is 48.5, and the average age of the migrant informants is 41. The oldest informant is 75 years old, and the youngest 22 years old. Within the Thai sample group, middle-aged fishers (40-60 years old) make up the largest proportion, approximately 60% of the total Thai fishers. The younger and older age groups are roughly equal in number. For migrant fishers, the proportion of middle-aged to young adults (under 40 years old) is nearly equal.



In terms of marital status, approximately three-quarters of the total sample are married, and the majority have children. The number of those who did not specify their marital status and those who identified themselves as single are nearly equal. The single fishers vary in their age with the 20s-year-old age group (25-28 years old) being the largest, accounting for **46%** of all single fishers. A significant number of these are migrant workers who have moved to Thailand for fishing since 2015.

The majority of migrant fishers migrated to Thailand to work in fishing and fishing was their first job, accounting for **80% of the total migrant worker sample**. The mode of the year they migrated to work in fishing in Thailand is 2015. A smaller number came to Thailand working in other fields before joining sea fishing vessels, and one sample member was born in Thailand and therefore did not migrate at all. As for the migration of the Thai sample group, only **17.5%** of the fishers moved from their hometown to go fishing in other area. Note that their working years of fishing ranged from approximately 20 to 45 years, and the sample of Thais who did not migrate also had many years of experience in sea fisheries work. They have picked their skills and learned about fishing by getting on board fishing boats along with the family from the age of over 10 years and continuing to work as a fisher ever since.

80%

of the migrant sample for whom
fishing in Thailand was their first job

17.5%

of the Thai fishery-worker sample who moved
from their hometown to fish elsewhere

While the majority of the sample of middle-aged migrant fishers have migrated to Thailand for fishing and taken on this as their first job and they have lived in Thailand for a long time, others have migrated to Thailand at a relatively older age, mostly after 2017. For the younger sample, the majority have migrated to Thailand for fishing and taken on this as their first job in Thailand as well. A small percentage of this age group initially took on other jobs in Thailand including fish sorting, fishing boat construction, or other factory work. Reasons for switching to fishing crew work included insufficient **income**, better pay for fishing, or persuaded to work on fishing or being offered by relatives as a job to help generate income for their families.²¹

²¹ Not dissimilar to migrant workers from other states in India's Kerala who get engaged in sea fisheries due to the influence of their relatives and friends who are already involved in or working in this profession, some of these workers are very new to this type of work and need to gradually learn the ropes after arriving (MU, J. and Jaysawal, N., 2024: 68).

Almost all of the sampled migrant fishers (**92% of the total migrant worker sample**) were documented labour. The most common personal documents included a travel document/certificate of identity, followed by a passport, a non-Thai national identification card (Pink Card), a work permit, and a seabook for foreigners, respectively. These personal documents were, however, not always in their possession since their **employers** or the persons called “Thao Kae (Boss)” are the persons who kept them.²² Some employers allowed the workers to take photo of their documents to keep them as a copy that they use when needed or may produce to the police when requested so. Some were allowed to keep their Pink Card or passports with themselves. The sample group who were undocumented migrants were those who lacked personal documents from their country of origin and were awaiting documentation processing to work in sea fisheries/ on board current fishing vessels. These migrants crossed the border from Myanmar and have prior experience working in the Thai fishing industry, having previously returned to their country of origin before rejoining Thailand for fishing work.

92%

of the migrant sample were documented labour

2015

mode of the year the sample migrated
to work in fishing in Thailand

²² The employment-related violations give rise to difficulty among sea fishers including the ‘retention’ of their personal documents as their employers withhold their travel documents and work permits to prevent them from changing their jobs and to ensure they work long enough to pay off their debt incurred from expenses including documentation fees, health insurance cards, etc. Such expenses have been paid for by their employers who deduct from the workers’ salaries later. (Suphanchaimat, R., Pudpong, N. and Tangcharoensathien, V., 2017: 3 – 4). However, the implications of retaining vs. seizing these documents should also be considered within the context of the superior/inferior power relationship between the employer and the employee.



PLATE

Stilt dwellings and small boats in a waterfront community

Health issues and experience using medical and public health services from the prospective of fishers

Data was collected from a sample group using interview questions focusing on key topics such as: their experiences in fishing work, risks associated while working on fishing vessels and illness as a fisher, **health** services and health insurance systems chosen/covered by fishers when ill, their opinions regarding the health services and benefits/welfare received while doing fishing work, their perspectives on health and how they defined illness, career paths in fishing, and recommendations regarding health services and issues. The data shed light on the meaning of health as important capital for fishers. It also reflects their attention to their health since physical health was essential for working on fishing vessels at sea. A common finding among the sample group is that they take their own health as a secondary concern, or in some cases, they tolerate suffering from injuries or illnesses assuming it is ok to find treatment later. The findings from interviews and focus group discussions with the sample group in the study area, related to health issues and dimensions connected to the quality of life of sea fisher, are as follows:

- Some fishers have learned the ropes with their families since young (younger than **15 years**) and several of them have started to work on board sea fishing vessels in their teen and most of them have pursued this job until now.
- All fishers tend to agree that sea fisheries work is risky and among the risks cited include natural disasters due to storm and rough seas, which can be dangerous while at sea, especially during monsoons. In some cases, people have experienced **tsunami** disasters while fishing at sea. Other risks include working on board, such as **accidents involving equipment that result in injuries or disabilities** like severed fingers or broken bones, or wounds from caught marine animals. Accidents on board, such as slips, falls, falling overboard, and fires, as well as exposure to pollution or toxins like fumes from ship exhaust or explosive gases, are cited as examples. In addition, conditions on board and/or working conditions on fishing vessels also affect the fishers' health, particularly the hygiene of food and drink on board, and overcrowding, which may lead to insufficient rest.²³
- As to the factors contributing to **accidents** and hazards on board, natural disasters asides, some fishers think they are beyond our control. "It depends on luck. We could get fucked up anytime." "Accidents are unpredictable." These things can happen to anyone on a fishing boat, and accidents happen on every boat. Even some who have never experienced an accident feel that it's not their turn yet, while some fishers think it is down to the ability, particularly the leaderships or the skippers and how the crew members try to pick up skills working on board. If they are new employees who lack skills or are unfamiliar with working on a fishing vessel at sea, it could be dangerous.²⁴
- To work safely on board a fishing vessel, it has to rely on experience, memory, ability, skill, wit, and most importantly not being negligent. "Working on board teaches us what **precaution** we should take, what can be dangerous." Sometimes, they simply advise or give warnings to each other. Regularly checking

fishing equipment such as fishing nets and engines before going out is another way to prevent accidents. In addition, the qualifications of crew/fishing boatmen who have knowledge of the sea or are knowledgeable about the weather and how to operate various equipment²⁵ can help prevent the risk of working on board and to prevent damage. On-site training is offered on some fishing vessels, or the crew can learn from those more senior or from their colleagues who teach them their experience. “Those working on board can teach the newcomers. We need to teach and tell them, otherwise any danger can happen.” After all, some fishers do admit to having to pick up skills working on fishing vessel by themselves. This attests to a gap in terms of safety while working on board a fishing vessel.

- Preparation before working on board a fishing vessel is necessary as fishers indicate that they need adequate rest in order to work at their full capacity and to not get sick while venturing out in the fishing vessel. Some migrant workers have health supplements with themselves, while middle-aged workers tend to carry their own prescription medications or common remedies. However, most report that fishing boats usually have a **first-aid** kit or basic first-aid supplies on board. Some boats also carry traditional Thai medicines such as inhalants, herbal balms, and ointments, which help alleviate symptoms caused by weather conditions, such as dizziness.
- Some fishers report that they have never fallen ill while going out at sea and retain good health without chronic diseases while others report that they do get ill sometimes while on board. The most common sickness is fever which can be treated with taking medication or taking rest on board until they get better. They may also sustain aches and pains, especially in the lower **back**, resulting from strenuous work and certain movements frequently performed on the boat.²⁶ They can either choose to allow their bodies to recover themselves through taking sleep, massage, or using balm to relieve the pain, or buy over-the-counter medications believing they speed up the recovery²⁷. In cases of shortness of breath, rest is the primary method fishermen use to alleviate illness/pain while living on fishing boats. “Resting first, it’ll get better.”
- When on shore, if a fisher experiences the above symptoms or has a cold, headache, body aches, fatigue, etc., they often go to a pharmacy to buy medicine to take themselves, considering them ‘**minor illnesses,**’ just as they would avoid having to miss work on the fishing boat if they got sick before going out to sea. However, **if the symptoms get worse**, such as high fever, abdominal pain/diarrhea, feeling heavy, bedridden and not sweating for more than 2-3 days, or if the fisher feels like his body can't take it anymore, or if medication doesn't help, he will decide to go to a medical facility such as a clinic or hospital. They would prefer going to clinic to get injections, which can provide faster relief. Sometimes, it's the pharmacy that advises the fisher to see a doctor at a hospital.
- Some fishers report that if they fall seriously ill until they can no longer work, or suffer an accident causing serious injury while working on board a fishing vessel, after reporting the case to the supervisor, the **skipper** may decide to sail the boat back or ask a passing small boat to bring the worker on shore. Otherwise, the Thao Kae (Boss)/Manager may send a boat to pick up the worker at sea and bring him to hospital. This experience is starkly different from what some fishers used to experience directly (or indir-

ectly from observing what happened to others). In the past, the injured/sick workers often had to wait out until the boat finished its work and headed back to the shore.²⁸ However, how sea fisher get their medical treatment may not entirely rest on the sole responsibility of the employer.

- The fishers who report to have chronic illnesses or conditions such as gout, diabetes, hypertension/high cholesterol, or ischemic heart disease/coronary artery disease, regularly utilize medical services at hospitals (both community health centers and district/provincial hospitals) to obtain medication for their conditions and attend doctor's appointments. However, if it is not for the aforementioned necessities, hospitals are usually not the first choice of medical facility for fishers, for similar reasons: long **waiting** times for services.
- One of the most common health facilities for fishers in the study areas is **private clinics** given their convenience/speed of service, confidence in the medication and treatment methods, even though the cost is relatively high, most are willing to pay for it themselves, "Pay a bit more to save time to work." This is followed by pharmacies, which are easily accessible and close to their residences. Another type of public health service located in the community is the health center or Tambon Health Promotion Hospital. However, due to varying reasons and experiences using these services²⁹, some users (fishers) are satisfied with the referral process to larger hospitals and the free cost of services. Those not satisfied with the services cite reasons including **racial** prejudice by staff affecting the treatment of migrant workers.³⁰ " (The healthcare staff) knew that we are Cambodian, and are not willing to treat us.", or that some health centers lack resident doctors and have insufficient resources, especially medicine, etc.



" (The healthcare staff) knew that we are Cambodian, and are not willing to treat us."

— MIGRANT FISHERY WORKER

- For health facilities such as District Hospitals or Provincial Hospitals, the fishers often use them as a secondary choice since it can be time-consuming having to wait for the examination by physician and the procedure in such large health medical facilities may cost them hours or the whole day. Also, there are a lot of people going to **hospital**. "Going to hospital slows things down and it time-consuming." "It's ok to spend money, but we can't waste time." Furthermore, the hospital's typical operating hours overlap with fishing hours/fishermen's rest periods, which makes many people reluctant to use hospital services unless they have a serious condition requiring diagnosis or an emergency. "You have to be very sick to go to hospital," "I only go to hospital once a year for serious illnesses like stomach pain," and "If going to hospital isn't inconvenient, then I go."
- Time is a crucial factor as it correlates to the fishers' income, whether they are crew members or owners of artisanal fishing vessels. This is especially true for fishing crew, where time spent at the hospital is

linked to leave/absences and wages under the conditions set by employers in sea fisheries. Therefore, the idea of **"it's better to spend time at sea"** reflects the emphasis on economic well-being at the expense of health among workers in sea fisheries.



"it's better to spend time at sea"

— FISHERY WORKER, STUDY AREA

- Even though the use of services at hospital could cause delay or is time-consuming, the fishers are inclined to show their **positive** attitude toward medical services, for example, commending medical doctors for giving them good advice, how the places are equipped with good and modern devices and good staff. Some fishers, however, indicate that it does not take them long to stay in line at hospital perhaps due to the good management there. For them, such hospitals are often the ones they choose to go to, rather than the hospitals listed as part of the universal healthcare program to which they are eligible. Even if the hospitals are located further away than local hospitals, causing increased travel costs, they appear to offer faster and smoother access to healthcare and the right to health. As a result, such hospitals have gained more trust from the fishers who decide to go there further on.

²³ Sleep deprivation/insufficient sleep is a significant concern for the health and safety of sea fisheries work. (Tseng, H.-S., Tsai, H.-H., & Tseng, P.-H., 2023: 5) In addition, the working hours on fishing vessels depend on the marine environment and the amount of fish caught, making it impossible to specify a precise schedule and often leading to longer than usual working times. This results in insufficient time for physical recovery or rest, affecting health and increasing exposure to work-related injuries. (Occupational Safety and Health Division, 2556: 31 – 39).

²⁴ Lack of experience on the crew can lead to accidents and injuries. Newcomers lacking the necessary skills are at risk of falling overboard and drowning, especially when working at night and without a toilet on board. (Pocock, N.S., Tadee, R., Tharawan, K., Rongrongmuang, W., Dickson, B., Suos, S., Kiss, L. and Zimmerman, C., 2018: 5).

²⁵ A study on the employment of migrant workers on fishing vessels in Phuket province indicates that work skills and experience are important qualities that fishing employers prioritize when recruiting migrant workers, in addition to their agility, diligence, perseverance, and ease of control. The employers also pay attention to the validity period of work permits and the workers' communication skills (Phuwanai, 2006, cited in Aniruj Manotham, Nitiya Sangkhanan, Patchrawan Keocharoen, and Sara Aporn, 2556: 44).

²⁶ Fishers are exposed to ergonomic risks due to the strenuous nature of their work and the repetitive movements involved for extended periods, such as bending over, squatting, and raising their arms or hands above shoulder level. Some fishers experience chronic muscle pain or stiffness in various parts of their bodies. Furthermore, stress can also unconsciously cause muscle tension (Nattakan Lekcharoen, Anamai Teskathuk, and Kulap Rattanasatchatham, 2011: 50).

²⁷ The use of medication without guidance merely suppresses symptoms, leaving the underlying health problems untreated (MU, J. and Jaysawal, N., 2024: 71). Self-treatment of illnesses or injuries by fishermen without proper knowledge can result in long-term damage, such as bone deformities (Pocock, N.S., Tadee, R., Tharawan, K., Rongrongmuang, W., Dickson, B., Suos, S., Kiss, L. and Zimmerman, C., 2018: 9).

²⁸ As stated in the article by Saman Laodamrongchai (2008: 99), the crew had to endure illnesses until the boat reached the shore. If a crew member was seriously ill or severely injured, their chances of survival were slim because there were no life-saving devices on board.

²⁹ Patients'/clients' experiences and responses to illness, disease, and access to healthcare services are part of the individual factors that can influence access to healthcare, including for migrant workers (Worawit Mitthong, 2017). For a detailed explanation of the four levels of the healthcare system and an interesting analysis of power relations in health issues from a critical medical anthropology perspective, please see the work of Baer, Singer, and Susser (1997, cited in Worawit Mitthong, 2017: 9–12).

³⁰ Unfriendly attitudes and attitudes of hospital staff remain a significant problem that excludes migrant workers from accessing healthcare services and receiving full medical treatment (Migrant Working Group, 2025). The attitudes of healthcare professionals and their sensitivity towards migrants are therefore important factors determining whether migrants are likely to be able to use healthcare services effectively (International Organization for Migration, 2013: 45).

- In terms of access to public health services and the right to health under the health insurance scheme that applies to the fishers in the study area, for the Thai fishers, they often exercise their right under the **National Health Security** Scheme, with some able to utilize alternative schemes such as healthcare benefits derived from their children who work as government employees. Some fishers who appear to get registered under social security system, but when they suffer an accident, they are unable to exercise their right under the system. Among migrant fishers, some fall under the health insurance system operated by the Ministry of Public Health. Access to health insurance among them has been made possible by the purchase of migrant health insurance as a follow-up step after a health checkup at a medical facility, a requirement for employment in the fishing industry in Thailand. For those currently in the process of securing jobs on their current fishing vessels, during the transit period while getting registered/renewing work permits, they shall enjoy the rights and benefits, albeit limited, under the national health security scheme, particularly for those who have recently migrated to Thailand.
- Although migrant workers are required to get registered as workers in fisheries and to undergo health examination and to purchase health insurance in order to acquire the protection of their right to health while residing and working in Thailand, but not all of them may have the **awareness about the necessary information and their due rights** under the national health insurance scheme.³¹ Some migrant workers in the study areas report to have the rights (or documents to prove their edibility) to receive treatment at a certain hospital. Some of them have been informed of detail concerning their benefits by the officials, while others are unaware or do not know of any medical facility in Thailand. Such migrant workers may not care about having to know about hospitals assuming that if they fall ill, their employers will look after them and arrange things for them. Otherwise, it is the concern about the incurred expense that prevent them from exercising their right to medical treatment.³² “I have no idea about going to hospital. I fear losing money, I just wait for my boss to take me there.”



“I have no idea about going to hospital. I fear losing money, I just wait for my boss to take me there.”

— MIGRANT FISHERY WORKER

- Beyond the physical discomfort manifested through various illnesses, there is also the emotional **distress** associated with sea fisheries work. Stress is something fishers face and share with their families, stemming primarily from having to adjust themselves to the work, and issues related to job security and income,³³ for example, the decline of fish catch, or conflicts on board a fishing vessel,³⁴ and when crew members were forced to resume their work on the fishing vessel. One migrant fisher exhibited noticeable health issues, appearing listless and unable to answer questions clearly during conversations. However, data on the **mental health** of fishermen in the study area is not widely publicized.³⁵

- Among Thai fishers, there are both those who own their artisanal fishing boats and crew employed on board fishing vessels. Members of this group tend to start their fishing career from working with their families and have picked up fishing skills at home and then taken on it as their main occupation later. They even said that **“Sea people have to take on sea work.”** “After all, our livelihood hinges on the sea.” Meanwhile, the migrant fishers are composed of those taking on fishing since they were in their hometown and those who just start to work in sea fisheries work while in Thailand. Among the similar positives for taking on fishing job shared by them is good money (better than other jobs), as they can get their dividend/shared income based on the amount of fish catch and to receive advances and have the freedom, more than jobs with fixed working hours, especially for Thai fishers who see it as better than being hired for wages because they are their own bosses. They also choose fishing because they are skilled and enjoy the profession. Some workers even say that the fishing boat serves as their food, shelter, and workplace, saving them the expenses of living on land and allowing them to save money. Some migrant workers who previously worked on fishing boats did so to save money and return to their home countries. However, when necessary, they choose to return to Thailand to earn income from fishing again. There is always a demand of labour on fishing vessels and after gaining sufficient experience, the workers may get promoted to other positions on the vessel. “Because we have limited knowledge, we can only afford to work on fishing vessel.” That idea supports the notion that fishing is the only kind of work afforded by migrant workers in Thailand³⁶



“Sea people have to take on sea work.”

— THAI FISHING CREW MEMBER

- In the future, **most fishers still want to pursue their job on fishing boats.** “It’s was the job we’ve chosen.” Some plan that they will work until their children’s graduation. Some think they may pursue it until the boat piers are shut down, or there is no longer any policy to allow migrant workers to continue working. While others plan to work for a little longer before heading home. Others may think about continuing to work until they bodies ‘could no longer take it’. Although these are individual ideas, but overall, it refers to the availability of strength and power to take on various duties on board a fishing vessel which are quite tiring and exhausting including the setting/retrieving nets, which mainly requires arm strength. “It depends on whether our body can survive,” “If you get older and can’t do it anymore, you’ll stop.” Note that, some sea fishes are yet to decide to take on fishing as a long-term job because working on board fishing vessels is dangerous, and their future plans may not always be long-term or predictable.
- In response to the experience using public health services among Thailand’s fishers in the study areas, similar recommendations have been proposed regarding the management to ensure swift services in public hospitals hoping to make access to medical and public health services more convenient,³⁷ and users spending less time. Additionally, it was proposed to establish health examination centers offering

comprehensive health screenings for fishermen of different ages, similar to the annual **health checkup** benefits for workers in the formal sector. This is because even older fishers/crew members continue to work at sea. It was also suggested that this service should be mandatory in all sea fisheries to monitor potential health risks to fishers. “Everyone should be made aware the level of sickness they are. Don’t have to wait until they got into stage 2 or 3.” This is one of the recommendations to offer the workers **preventive** healthcare.

- In addition, an effort should be made to promote **access to information** among the right to health regarding healthcare or health insurance. For migrant fishers, they tend to go see doctor at hospital only when they become documented/are entitled to the rights. Those who used to work on board a fishing vessel may have some idea about the necessity of such documentation. But for who are not aware and have no documents, how can they cope with this?³⁸ What advice is there for accessing healthcare services, especially finding good and affordable doctors?³⁹ Further recommendations regarding health risks and occupational safety include that the charging of fees/taxes should translate into resources to develop services that protect the safety of fishing vessels and their crews. They also emphasize the importance of hygiene on fishing vessels, including adequate food, lodging, and rest, ultimately leading to improved efficiency for sea fisher.

³¹ Similarly, among Myanmar migrant workers in Samut Sakhon, according to the study on access to health services by Worawit Mitthong (2017: 49-63), migrant workers are not adequately aware of the health benefits they are entitled to under their health insurance or social security schemes. They are merely aware that they need to have some form of health insurance in order to work and live in Thailand legally. While others are not particularly interested in any specific health insurance coverage and think they won’t need medical treatment frequently. Some are even unaware of basic information such as the hospitals they are covered by insurance.

³² Fishers are concerned about their own health in the event of accidents, for which they have to pay for expenses themselves. They are unable to utilize health benefits under the social security system if they did not enter Thailand through the MOU channel. Moreover, if the workers are undocumented, they only have to rely on the employers’ generosity to cover their medical expenses. (Pocock, N.S., Tadee, R., Tharawan, K., Rongrongmuang, W., Dickson, B., Suos, S., Kiss, L. and Zimmerman, C., 2018: 11).

³³ Financial anxieties among fishermen, such as feelings of guilt or shame for failing to provide for their families as expected, are linked to poor physical health. This may give rise to physical symptoms indicating a more serious mental illness or distress, and these deficiencies in both mental and physical health worsen if left untreated. (Pocock, N.S., Tadee, R., Tharawan, K., Rongrongmuang, W., Dickson, B., Suos, S., Kiss, L. and Zimmerman, C., 2018: 2 – 16).

³⁴ “Regarding stress at sea, it also contributes to pressure and emotions that can lead to conflict.” (Saman Laodamrongchai, 2008: 104).

³⁵ Despite increased emphasis on mental health in recent years, “psychosocial care efforts still lag behind comprehensive biomedical care for migrants.” (Nader, M., Bhandari, M., Netroj, N., Ponchamni, D., Warangkanand, A., Turavinina, D., Vunsiripaisal, P. and Mounsookjarean, A., 2024.: 244).

³⁶ The fishing industry, including processing sector, requires a large workforce. The workers do not have to have high levels of knowledge or education, but must be strong and resilient, able to withstand strenuous work, monotonous environments, substandard hygiene, and sometimes high risks while at sea (Supat Kukkhun, 2002: 16).

³⁷ Unfamiliarity with the health insurance system may lead to a reluctance to utilize preventative health check-ups, as well as a delay in the diagnosis and treatment of health problems, which may contribute to the worsening of health condition over time. (Jatrana, S., Graham, E. and Boyle, P., 2005: 1 – 16).

³⁸ A lack of information about general health or what health services are available is often one of the main reasons why migrants do not utilize health services effectively, and do not take steps to prevent illness. (World Health Organization, 2003: 28) A study on access to healthcare services and factors linked to unmet needs among migrant workers in Phuket found that employment in the fishing industry demonstrates a high level of unmet needs. This is likely due to the nature of offshore work and the demands of the profession, which put migrant fishers at higher health risks. Using social media platforms to disseminate health information may help alleviate unmet needs. Furthermore, the study suggests supporting health communication through collaboration between migrant health volunteer networks and local health authorities that have the potential to coordinate with migrant groups. It also proposes reaching and adapting approaches specifically to the fishing industry/those in the fishing sector. (Wongsuwanphon, S., Chottanapund, S., Knust, B., Wongjindanon, N. and Suphanchaimat, R., 2024: 10 – 11).

³⁹ The quality of service is a key factor to determine how migrants are treated when accessing care/health services. (World Health Organization, 2003: 27).

Obstacles and restrictions regarding access to medical and public health services among sea fisher

In light of the findings on the health of the fisher sample within the framework of this study, a correlation is found between individual and structural factors affecting access to healthcare services in the study areas. In particular, obstacles and restrictions to accessing medical and public health services for fishers in sea fisheries work are evident. Understanding and implementing measures to reduce these barriers and address restrictions affecting fishers' access to healthcare will enhance the **protection** of their right to health, whether Thai or migrant, and contribute to a better quality of life for fishers in Thailand.

■ Fishers' perception of illness and awareness of maintaining good health

Although sea fishery require a long presence on board the fishing vessel, only some fishers are aware of the importance of getting themselves physically prepared including having adequate rest time, taking good care of health before setting sail. These fishers are often older in age and are still manage to cope with working on board a fishing vessel. Most fishers, however, do not pay attention to their own health. If it is the day they are bound to work on board a fishing vessel, and if they happen to get sick, it is unlikely they will not go on board. Or, if they're sick on board a fishing vessel, they still have to carry on working. **“Sea people only focus on earning their living rather than their own sickness”**⁴⁰ In most cases, the fishers tend to underestimate their symptoms. Only when they feel they ‘cannot bear it anymore’, when they are “sick.” “They would only go to hospital when they feel they cannot take it anymore.” “(When would they consider themselves sick?) When they can no longer work, cannot bring themselves up, when they feel they desperately need to see doctor. But if it happens when they got fish catch, even though they could not take it physically, they feel obliged to keep working.” This may further increase the body's perceived **tolerance**/endurance level. “It's not the doctor's advice, it's our own.” Therefore, tolerating illness is a behavior that impacts the health risks of fishers and causes them to only seek medical treatment when symptoms become too severe.⁴¹



“Sea people only focus on earning their living rather than their own sickness”

— FISHERY WORKER, STUDY AREA

■ Absences and sick leave: Barriers to accessing healthcare services under the compulsory conditions of sea fisheries work

The absences from work of fishers in order to seek treatment at hospital do affect workforce on board a fishing vessel and their income of those days. “If we go see doctor, we have to find someone to replace us.” Such condition does affect their decision whether they will go see doctor or use public health services or not.⁴² It also depends on the rules regarding working hours imposed by the supervisors or owners in each of the fishing vessels. For example, “If storms or heavy rain prevent sailing, then work must be stopped. However, if too many days are missed, the lost work days must be compensated for.”⁴³, “You can rest, but your wage gets deducted.”, “If you take leave, (your wage) shall be deducted.”, “If you take leave (when the boat leaves for fishing), your wage shall be deducted.”, “If you take leave, **your wage shall be deducted 1,000 baht a day.**” Since wage can be deducted on the days the workers take leave, the fishers therefore feel they should literally not take leave. In addition, the importance of their own health is put behind. And although the right to leave of those working on a fishing vessel including sick leave is a right recognized by law,⁴⁴ but in reality, it is all subject to the discretion of the supervisor or the owner. “When we take leave to see doctor, whether our wage shall be deducted or not is up to the **skipper** assistant.” Otherwise, it is subject to whatever conditions as aforementioned. “If you get sick, your wages will be deducted. If you're at sea, 300 baht will be deducted; if you're on land, 2,000 baht will be deducted.”, “The boss never helps pay for medical bills, there's no compensation, but they still pay the same wages. And if the illness is severe (high medical expenses), the boss will deduct tens of thousands of baht (from the wages that are calculated annually).” These conditions not only impact the right to health of workers in sea fisheries, but also perpetuate the practice of waiting for illness to reach a severe stage before seeking medical diagnosis, thereby denial of timely/early access to health services for sea fisher.

⁴⁰ As migrant workers in sea fisheries face financial constraints, they often neglect their health. Financial pressure to send income home forces them to spend insufficiently on healthcare. This neglect of health leads to various health problems. (MU, J. and Jaysawal, N., 2024: 68) Socioeconomic conditions and gender dimensions are considered important determinants of health for fishers in many areas.

⁴¹ Among migrant workers, there is a tendency to delay seeking healthcare services until the condition worsens and treatment costs increase significantly. (Pocock, N.S., Chan, Z., Loganathan, T., Suphanchaimat, R., Kosiyaporn, H., Allotey, P., Chan, W.-K. and Tan, D., 2020: 13).

⁴² Due to the limited workforce on fishing vessels, a labour shortage would slow down operations, making onboard strikes difficult (Jirasak Bangthamai, 2019: 28). Furthermore, migrant workers often refuse to seek medical treatment due to costs, travel difficulties, and the inability to miss work. In addition, most are unfamiliar with the local healthcare system and may face cultural and language barriers when communicating their symptoms. (World Health Organization, 2003: 23).

⁴³ Commercial fishing is characterized by the efficient use of limited fishing days, and workers often have to work long hours at sea to maximize returns on labour and other costs. (Harkins, B., 2567: 150).

⁴⁴ Article 16 of the Ministerial Regulation to Protect Workers in Sea Fisheries Work B.E. 2565 states that ‘Employees are entitled to sick leave for as long as they are actually sick, and the employer must pay the employee wages for those sick days at the same rate as their working day's wages for the entire duration of the leave, but not exceeding thirty working days per year.’ “The law is intended to give employees the right to sick leave for physical or mental rehabilitation to ensure they are ready to return to work, thus preventing work-related accidents... Employees must notify their employer of each sick leave request... and in some cases, they may also need to comply with the employer's rules, regulations, and work guidelines regarding leave. For more details, please see Explanation of the the Ministerial Regulation to Protect Workers in Sea Fisheries Work B.E. 2565 (online) https://legal.labour.go.th/images/law/fishing/fishing_2565.pdf.



“If you take leave, your wage shall be deducted 1,000 baht a day.”

— FISHING CREW MEMBER

- Right to health and social protection of fishers, the welfare they deserve, or a textbook provision

The Thai state has begun revamping several laws concerning fishing including provisions regarding social protection and labour rights in sea fisheries to ensure their better clarity. Some migrant fishers in the study's sample group have noted changes regarding their working environment including the available complaint procedure, how officers at the pier inspect fishing vessels, checking documents and the number of people on board before the boats go out to sea. A first-aid kit and life-saving equipment are readily available on board a fishing vessel, especially commercial fishing vessels. In case of illness or emergency, a boat will be available to transport the crew for treatment, etc. "Before PIPO era, it was quite difficult. "Going out to sea without life jackets, But during the PIPO era, crew members must have life jackets and a first-aid room. The boats are much better than before; you can choose which boat to work on." This change is not just to meet a legal requirement, but also reflects the **employers'** willingness to adapt to the measures, which are minimum standards that consider the quality of life of fishing crew members.⁴⁵



"Before PIPO era, it was quite difficult. "

— MIGRANT FISHERY WORKER

However, some sea fisher mention conditions of employment and work which could be tantamount to the use of **forced labour**/debt bondage and how migrants have been recruited to work on board a fishing vessel in the study area which involves exploitation in terms of the fees and expense of the workers.⁴⁶ Such cases illustrate a practice that views fishers solely as production factors for a business, who only matter for their economic value. At the same time, the workers do not afford much understanding about their rights and welfare.⁴⁷ They tend to say they are not aware, or are not certain about such rights, particularly the right to health and medical welfare, unless clarified by the relevant authorities. "We don't know our rights, we don't exercise our rights, they (the supervisor) will inform us when the time comes." These are the conditions that arise in the practical environment of sea fisheries, hindering the effective protection of fishermen's rights and welfare, including social protection and/or the right to health.

As to the artisanal sea fisher, some are workers, while others are owners of the fishing vessels. They also express their opinion regarding the fishers' welfare that even though they realize the importance of acquiring health insurance which can apply in emergency situations, but given how artisanal fishing depends on a few crew members and they often work as **daily** wagers, this poses a challenge to any effort to provide them with a formal regime for rights protection and access to medical treatment.⁴⁸ It is also not possible to purchase accident insurance due to future risks.⁴⁹ Furthermore, they face the impact of changes in marine resources and amendments to certain fishing laws. "Although we cast (nets) many times, but the fish catch has dwindled. We'll keep doing it if we can," which makes providing welfare for the crew on board a artisanal fishing vessel or increasing their own health coverage beyond their means.

Note that at present, **there is yet any specific health insurance to protect the benefits of fishers adequately**. The social security system does not mandate the inclusion of certain types of informal workers, but it lists them as optional benefits that employers can provide to fishers. While the national health insurance system provides coverage for Thai fishermen, the health insurance system for migrant workers under **Universal Health Coverage** appears to lack coverage for some specific benefits. While private health insurance often excludes certain health coverages and benefits, and may have specific conditions that prevent full access to services in some cases, the health insurance model is designed to systematically support fishers' right to health coverage. However, if this system/structure does not fully support the provision of appropriate health rights and services, combined with the factors and conditions mentioned above, fishers' access to the right to health and social protection will remain limited.

⁴⁵ Supporting the fishing sector to adapt to changing circumstances is another necessary approach, as exemplified by employers' opinions that local agencies involved in sea fisheries should simplify regulations, ensure fairness, and provide incentives to employers (Aniruj Manotham, Nitiya Sangkhanan, Patchrawan Keocharoen, and Sara Aporn, 2013: ๙). Otherwise, government agencies should actively explain/advise employers to accept the demands of (migrant) fishers in order to create better living conditions on land, as well as guarantee human rights and basic living conditions (Tseng, H.-S., Tsai, H.-H., & Tseng, P.-H., 2023: 13).

⁴⁶ The recruitment process to work in Thailand requires migrant workers to pay a lot of money for fees and expenses compared to the salaries they shall be receiving. One option for the workers is to have the employers/brokers pay the expenses for them in advance while the workers are obliged to service the debt, otherwise, they would become undocumented workers. All of these contribute to their vulnerabilities and exposure to rights violation perpetrated by their employers and exploitation by the authorities. (Health Assembly on Access to Health Rights for Migrant Workers, 2022: 24) (online) retrieved from <https://www.samatcha.org/file/2c04ae87-4db1-46ca-912c-7f6455f2f689/preview>.

⁴⁷ Unfamiliarity with foreign countries, cultures, and languages often leads migrant workers to be unaware of their rights. (World Health Organization, 2003: 25). In addition, in the past, fishers have received very little information about their health, especially unregistered migrant workers (Siriporn, 1998, cited in Nat-Karn Lekcharoen, Anamai Teskathuk and Kulab Rattanasatchatham, 2011: 50).

⁴⁸ A study on artisanal fishing communities in Nakhon Si Thammarat province noted changes in the labour force used in artisanal fishing. In the past, there were 2-3 crew members, one being the boat owner and the rest being crew members, who shared the income from each fishing trip. However, as income decreased to the point where it was insufficient to share, there was a greater need to utilize family labour (Mana Chuaychu, 2003: 6-13).

⁴⁹ Regarding accident insurance, there may be restrictions that make it difficult for workers in the fishing industry to access this insurance system easily, as the work involves relatively high-risk.

Note that at present, there is yet any specific health insurance to protect the benefits of fishers adequately.

- Occupational health and safety standards in sea fisheries work and their impact on the fishers' quality of life

As widely known, sea fisheries work involves high-risk regarding the natural and working environment on board a fishing vessel which is exposed to waves and rough seas. Experienced fishers reveal that working safely on fishing boats requires quick thinking, skill, familiarity with the job, and taking no chance. It is necessary to inspect their equipment and readiness before going out to sea, and provide onboard training to the incoming fishers.⁵⁰ “Initially, the income was low because I lacked experience, but the senior staff on the boat would help advise me.” Advice and warnings about potential dangers and precautions during the work are examples of ways to prevent accidents in sea fisheries work. Meanwhile, some fishers believe that accidents and dangers are due to bad luck or fate, which can happen to anyone on board a fishing vessel. “Accidents happen on every vessel, you just haven’t experienced it yet.” These reflect detail of occupational **safety** and health in the fishing industry, as stipulated by relevant laws and conventions providing protection in this area⁵¹. However, the ability to strictly comply with these requirements significantly impacts the health risks faced by workers in sea fisheries work.⁵²

Workforce preparedness and occupational safety systems, which are key determinants of health outcomes including access to health services and a good quality of life for workers are essential as well as the promotion of preventative culture of occupational safety and health. “Preventing accidents on board depends on how workers pick up their skills on board, how they stay in one place, and work until the fish are gone”. Those who have been in the fishing profession for many years may overlook the risks or dangers that can occur.⁵³ Fishers who work continuously for long periods may experience fatigue or health problems that are often overlooked, leading to chronic complications. Protecting health by standardizing practices to eliminate or reduce the causes of injury, disease, and death in sea fisheries not only prevents risks in various aspects but also positively impacts the productivity of fishers in the long term. All of this highlights the importance of **preventive** healthcare to align the health-related quality of life and the working quality of life for fishers.⁵⁴ This can reduce the potential future costs of medical and public health services. However, standardizing and promoting occupational safety and health practices in sea fisheries work may be impossible without strong support and cooperation.⁵⁵ The lack of cooperation shall pose an obstacle to the protection of the fishers’ right to health.

⁵⁰ Onboard training for a fishing vessel relies on knowledge transfer from experienced personnel, with employees/crew members learning through practical experience via a supervisory system. Therefore, experienced crew members are prepared to handle various situations. Furthermore, fishing vessels have a network of mutual support among crew members. (Occupational Safety and Health Division, 2013: 42).

⁵¹ Please see, the Ministerial Regulation to Protect Workers in Sea Fisheries Work B.E .2565’s Article 20 and the International Labour Organization Convention no. 188 on Work in Fishing Convention, 2007’s Articles 31 and 32 which apply to fishing vessels of 24 meters in length and over normally remaining at sea for more than three days (online) https://legal.labour.go.th/images/law/fishing/T_0006.pdf and https://normlex.ilo.org/dyn/nrmlx_en/?p=NORMLEXPUB:12100:0::NO::P12100_INSTRUMENT_ID:312333. The scope of issue is also expanded in the Work in Fishing Recommendation, 2007 (No. 199) as well.

⁵² Research by the International Labour Organization has found that measures in place for safety, occupational health, and working conditions on boats remain inadequate (ILO, 2022, cited in Harkins, B., 2024: 143). (ILO, 2022 อ้างถึงใน Harkins, B., 2567: 143).

⁵³ Social and community factors, particularly certain identity and social awareness stemming from being a fisher, play a significant role in injuries and safety, with various reasons related to the use of safety equipment, the perception that one has the right to not wear safety equipment, and the underestimation of hazards/risks in fishing work. In addition, workplace attitudes that downplay the impact of work-related injuries or fail to recognize them as a part of the job mean that fishermen do not value the necessity of safety equipment, making the enforcement of safety measures challenging. (Guillot-Wright, S., Wang, L.KP., Figueira, B.T., Jones, M.O., Maredia, R. and Kichili, N., 2025: 3).

54 One example of preventive healthcare is health promotion and disease prevention services for migrant workers without access to health services including fishers. By working proactively in labour communities, this does not only prevent illness among workers but also increase their access to health services. (Worawit Mitthong, 2017: 67 – 68). Occupational health and disease prevention and promotion are key focuses in addressing the health needs of migrant workers, requiring a proactive approach to health service delivery (National Health Assembly on Access to Health Rights for Migrant Workers, 2022: 33) (online) retrieved from <https://www.samatcha.org/file/2c04ae87-4db1-46ca-912c-7f6455f2f689/preview>.

55 A study on occupational health and safety among migrant fishermen in Phuket Province revealed insights from stakeholders working in sea fisheries in the area. These insights highlight the challenges in implementing occupational health and safety programs which can be distinct/diverse and face redundancy of multiple agencies, the limitations of existing power and laws, and obstacles to providing safety services to migrant workers (Aniruj Manotham, Nitiya Sangkhanan, Patchrawan Keochaoen, and Sara Aporn, 2013: 65 – 68) At the same time, an essential element for successful occupational safety and health implementation is the shared rights, duties, and responsibilities of both employers/fishing vessel owners and employees. (Occupational Safety and Health Division, 2556: 60).



PLATE

Fishing vessels moored beneath the pier sheds

CHAPTER – บทที่

[06]

Public health services that meet the needs of workers in sea fisheries in Thailand

บริการสาธารณสุขที่สอดคล้องกับเงื่อนไขของแรงงานภาคประมง

Recommendations to enhance fishers' quality of life

This final section offers recommendations to promote the protection of health dimension of sea fisher based on the initial circumstances, including actions to support access to health rights and services for sea fisher in the study areas. The recommendations can be divided into **three** main aspects including the right to health and appropriate public health services; promoting health standards and public health service systems for fishers; and improving the quality of life and sustainable productivity of fishers.

— FRAMEWORK 1

The right to health and public health services that serve as solutions

- **The right to health is a fundamental right** that the state should provide and protect for the populations in the state regardless if they are Thai or migrant workers who engage in fisheries work to drive Thailand's economy. Supporting fishers' access to universal health coverage will enhance their right to health and ensure they receive essential health services, a crucial first step.
- Nonetheless, health protection and benefits that the fishers receive or are about to receive remain inconsistent between the Thai insured persons in the social security system and the migrant workers who are employed in the same kind of job, namely sea fisheries work. Domestic laws permit the selection of health protection regimes that fit the fishing employees. Meanwhile, the International Labour Organization Convention No. 188 (**C-188**) provides comprehensive and clear protection for health, medical care, and social security. Advocacies for the legal provisions and the enforcement of the C-188 to ensure the acquisition of standard health benefits of the fishers, therefore, resonates with the intention of the Work in Fishing Convention, genuinely.⁵⁶
- For migrant fishers who migrate to Thailand through various channels, their status is tied to the conditions for legal residency and work in Thailand. However, the documentation and status verification processes incur costs. When combined with social responsibilities such as earning income to support their families and sending money home, this creates a financial burden that fishermen must carefully calculate to ensure sufficient funds for their livelihood abroad. The economic, social, and political conditions of migrant workers substantially impact healthcare spending, which is often given a secondary or insufficient priority. Therefore, fees and processing charges should not be excessively high considering the workers' economic status and the duration of their permitted stay in Thailand. Relevant agencies should establish **fair**, non-repetitive rates and facilitate a transparent and efficient process for migrant workers to access documentation and legal status.
- Promoting health awareness and right to health is another approach that influences attitudes/behaviors towards healthcare, access to medical and public health services, and the preservation of the fishers' right to health, etc. Awareness is not only a determinant of health outcomes at the individual level but is

also linked to access to health services, particularly the **ability to perceive** one's needs and the ability to seek timely medical treatment. The issues of sick leave and welfare benefits are a focus for fishers in the study areas. This could involve implementing programs to review and understand employment contracts and legal regulations so that fishers are aware of these rights, and can develop their ability to protect and exercise these rights appropriately without compromising their employment status or labour benefits.

- Medical and public health service campaigns are becoming more accessible and familiar to fishers, whether in the form of **outreach**/mobile medical and healthcare services or **migrant-friendly** services. These initiatives involve communication efforts through volunteers and migrant healthcare workers working with target groups such as migrant workers in communities to improve their access to healthcare services. Therefore, when healthcare providers are proactive in adjusting their positions or schedules/directions to provide medical and public health services that meet the health needs of fishers, it further expands opportunities in various aspects of healthcare access. Examples of such approaches will contribute to providing service recipients, such as fishers, who work in hazardous environments, perform repetitive physical movements, and have irregular working hours, with a wider range of options for utilizing healthcare services.
- Another sector that can influence the promotion of the fishers' right to health is civil society and non-governmental organizations. During the Covid-19 crisis, support groups have been formed and worked with NGOs to ensure outreach to the migrant workers in fishery sector to disseminate accurate information on health issues and public health services during the pandemic, government policies at the time, and highlighting concerns about the impact of Covid-19 on fishers, such as social security benefits for migrant fishers, etc.⁵⁷ The potential of NGOs and civil society to address the **unmet needs** of fishers is crucial. Furthermore, an effort to promote the recognition of domestic laws and regulations, and international conventions related to workers in fisheries sector has been made to serve the mutual benefits of all parties in sea fisheries in recent years. Such effort warrants continuing support from the responsible authorities and the supporting of missions of groups/organizations that promote health, health rights, and other rights, working in collaboration with fishers/stakeholders in the marine fisheries sector.

⁵⁶ Please see more in Migrant Working Group's report, 2023. (online) retrieved from <https://mwgthailand.org/sites/default/files/2023-07/%E0%B8%A3%E0%B8%B2%E0%B8%A2%E0%B8%87%E0%B8%B2%E0%B8%99%E0%B8%81%E0%B8%B2%E0%B8%A3%E0%B8%94%E0%B8%B3%E0%B9%80%E0%B8%99%E0%B8%B4%E0%B8%99%E0%B8%81%E0%B8%B2%E0%B8%A3%E0%B8%95%E0%B8%B2%E0%B8%A1%E0%B8%AD%E0%B8%99%E0%B8%B8%E0%B8%AA%E0%B8%B1%E0%B8%8D%E0%B8%8D%E0%B8%B2%E0%B8%89%E0%B8%9A%E0%B8%B1%E0%B8%9A%E0%B8%97%E0%B8%B5%E0%B9%88%20188%20%E0%B8%9B%E0%B8%B5%E0%B8%97%E0%B8%B5%E0%B9%88%202.pdf>, and the study by Laphasrada Techa-ampai, 2021 (online) retrieved from https://ethesisarchive.library.tu.ac.th/thesis/2021/TU_2021_6201033567_14569_17927.pdf.

⁵⁷ Please see more in articles by Marschke, M., Vandergeest, P., Havice, E., Kadfak, A., Duker, P., Isopescu, I. and & MacDonnell, M., 2021. (Online) Retrieved from <https://doi.org/10.1007/s40152-020-00205-y>.

Promoting health standards and public service system for fishers

- Occupational health and safety is crucial to the quality of life of fishers. Guidelines for protecting fishers in terms of safety and occupational health are stipulated in the **Ministerial Regulation** on Labour Protection in Sea Fisheries Work B.E. 2565 (2022) which stipulates the need to educate sea fishers regarding working conditions, tool instructions, health and hygiene, living conditions, and safety equipment prior to working on board vessels. However, the scope of this education is not clearly defined, and the provision that states that if employers claim to have provided such education, it shall be assumed that such training has been given. In reality, such effort might be insufficient to prevent risks and promote the health and safety of fishers. Furthermore, without regular knowledge reviews and risk assessments, it will be difficult for workplace safety to become a priority or a preventative culture to be adopted among those working on board a fishing vessel.
- Therefore, an effort should be made to expand the scope of the promotion of occupational health and safety in fishery sector to ensure its compliance with the standards under Convention C-188, including Recommendation No. 199 (**R-199**).⁵⁸ This may include training/management/risk assessment or reporting accidents that occur on board a fishing vessel, if there is information indicating specific danger, the crew and persons on board must be warned to take precautions using a language/proficiency level that can be understood (especially for migrant workers). This includes ongoing training and updates on occupational health and safety. Furthermore, fishing vessel owners/employers should be supported in accessing this information, which could be in the form of manuals or recommendations from research that can be adapted into appropriate practices for working on board a fishing vessel, in order to create a safe working environment.
- **Occupational diseases** are an important occupational health issue as well since fishers tend to overlook their own sickness, for example, physical fatigue or musculoskeletal pain are common health problems among seafarers/fishing crew members. In such case, an effort should be made to promote health among the workers to prevent or reduce the severity of work-related injuries on boats. Measures should be taken such as adjusting work postures that involve strenuous activity according to **ergonomic** principles, using personal protective equipment, etc. Furthermore, workers should seek timely medical care in the event of work-related injuries or illnesses. In addition, employers may consider providing health rehabilitation benefits regarding to work-related illnesses, as well as other benefits that will enhance the physical and mental well-being of fishers, or design conditions that incentivize fishers to have increased access to health services from local public/private facilities without affecting their productivity on board a fishing vessel.
- Thailand's coastal provinces are home to a vast majority of migrant workers who engage in fisheries. It is necessary to provide public health services that **take into account the different backgrounds in terms of cultures and languages** and based on the problems the fishers have been exposed to when using serv-

ices at certain local health facilities since it impacts the fishers' decisions regarding health rights and public health services and could have repercussion for the overall public health system. Therefore, strengthening the cultural competencies of medical and public health professionals is crucial.⁵⁹ This is one approach that will enhance the performance standards of healthcare personnel, enabling them to work with understanding and equitable standards. In addition to reducing significant obstacles from structural determinants of health, it also facilitates more efficient access to healthcare rights and services for migrant workers. In addition, if healthcare providers can enhance their skills or knowledge management systems, for example, the mapping of the target group's health needs⁶⁰ perhaps incorporating multidisciplinary methodologies/concepts in data collection, it would be beneficial for planning appropriate and standardized healthcare services for fishers.

⁵⁸ For more detail, please see R199 - Work in Fishing Recommendation, 2007 (No. 199). (Online) Retrieved from https://normlex.ilo.org/dyn/nrmlx_en/f?p=1000:12100:0::NO::P12100_ILO_CODE:R199.

⁵⁹ Please see more in Pocock, N.S., Chan, Z., Loganathan, T., Suphanchaimat, R., Kosiyaporn, H., Allotey, P., Chan, W.-K. and Tan, D., 2020. (Online) Retrieved from <https://doi.org/10.1371/journal.pone.0231154> and International Organization for Migration, 2013. (Online). Retrieved from <https://publications.iom.int/books/international-migration-health-and-human-rights>.

⁶⁰ Please see Sample templates for lists/topics for gathering information and preparing for healthcare, International Center for Migration, Health and Development, 2020.

— FRAMEWORK 3

Sustainable enhancement of fishers' quality of life and productivity

- Challenge to advocacies for the fishers' rights in Thailand does not rest solely on pushing for successful law enforcement following the success in ensuring compliance of domestic laws with international treaties. This also depends on the responsibility and attitude of stakeholders in the fishing industry ecosystem. The challenge may also include raising awareness in the wider public to achieve the goals of protecting the right to health and improving the quality of life for fishers. Players in this sector come from various fields, including civil society, academia, media, and international organizations. They work to drive issue-based change to foster long-term collaboration and a paradigm shift. This issue-based approach is based on key elements such as data sets, including research, policy planning, and public communication, etc. Each approach can be connected to or serve as a foundation for other approaches or work at other levels, depending on the objectives/agenda of the work. For example, currently, **decent work** is an agenda that links various dimensions of labour, including social protection, the right to work, and sustainable employment. For the sea fisheries sector, promoting the right to health and/or issues related to the health and quality of life of fishers could begin by fostering awareness and developing a concept where all parties value the workforce and support decent work. This would create a healthy ecosystem in the fishing industry, improve the quality of working life for fishermen, and ensure sustainable productivity.

CHAPTER – บทที่

[07]

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