

## MIGRANT WORKERS AMIDST COVID-19: CONCERNS OF EMPLOYMENT AND EDUCATION



A report on community feedback from migrant workers, Thailand, January 2021

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## Introduction

As part of their activities for enhancing community's awareness on COVID-19, under the project "United to Protect Migrant Workers from COVID-19, the Thai Red Cross Society (TRCS) aimed to listen to migrant workers, find out their knowledge of COVID-19, enhance their awareness and address misinformation, rumours, and stigmatisation. To achieve these objectives, TRCS organised 14 focus group discussions with migrants in Nong Khai, Ranong, Tak, Sa Kaeo, and Pathum Thani Provinces during November and December 2020.

This report captures the migrants' feedback collected by TRCS through these discussions, in collaboration with the Migrant Working Group (MWG). The countries of origin of the migrant workers were Laos, Cambodia and Myanmar. Overall, there were no significant differences in opinion between different migrant groups except for communication preferences (see Page 6). While the data is not representative due to the small sample size, it offers useful insights into topics that need further exploration.

Majority of the participants were well informed about COVID-19 and showed interest in knowing more. However, their knowledge seemed to be closely linked to information available in their mother tongue, with participants from Myanmar who lived far from the Myanmar border having least access to relevant information in their own language and also the lowest knowledge of COVID-19 in comparison to the other participants.

Participants appeared to worry most about the economic impact of the pandemic on themselves and others. Further concerns were impact on education through school lockdowns.

Most the participants showed empathy for COVID-19 patients and no rumours were detected during the discussion nor did they blame or stigmatise others for the outbreak. However, one participant said that the recent second wave of outbreak that originated in a migrant community resulted in migrant workers being blamed for the spread of the virus. Participants shared that they were supporting their own community and were keen to engage more, which highlights opportunities to further include migrants as implementors in the response.

## Recommendations

Based on the data collected we recommend the following three key actions:

**1. Continue and expand collection of community data & tailor content accordingly.**

The collected data highlights good foundational knowledge on COVID-19 which emphasises the importance of understanding knowledge gaps and community questions and tailoring content to address these gaps.

**2. Diversify communication channels and languages.**

The data highlights differences in communication preferences between different migrant groups. Communication to reach migrants should therefore use different channels and languages (see p. 4)

**3. Offer opportunities for migrants to take action and support their community.**

Some migrants shared their interest in engaging more on COVID-19 and related topics. Additionally, migrants communicated that they were coming up with solutions to support their community, such as providing a cabinet filled with food items free of charge for anybody in need. This shows potential to include migrants more in implementing response activities and partner with them to utilise their capacity.

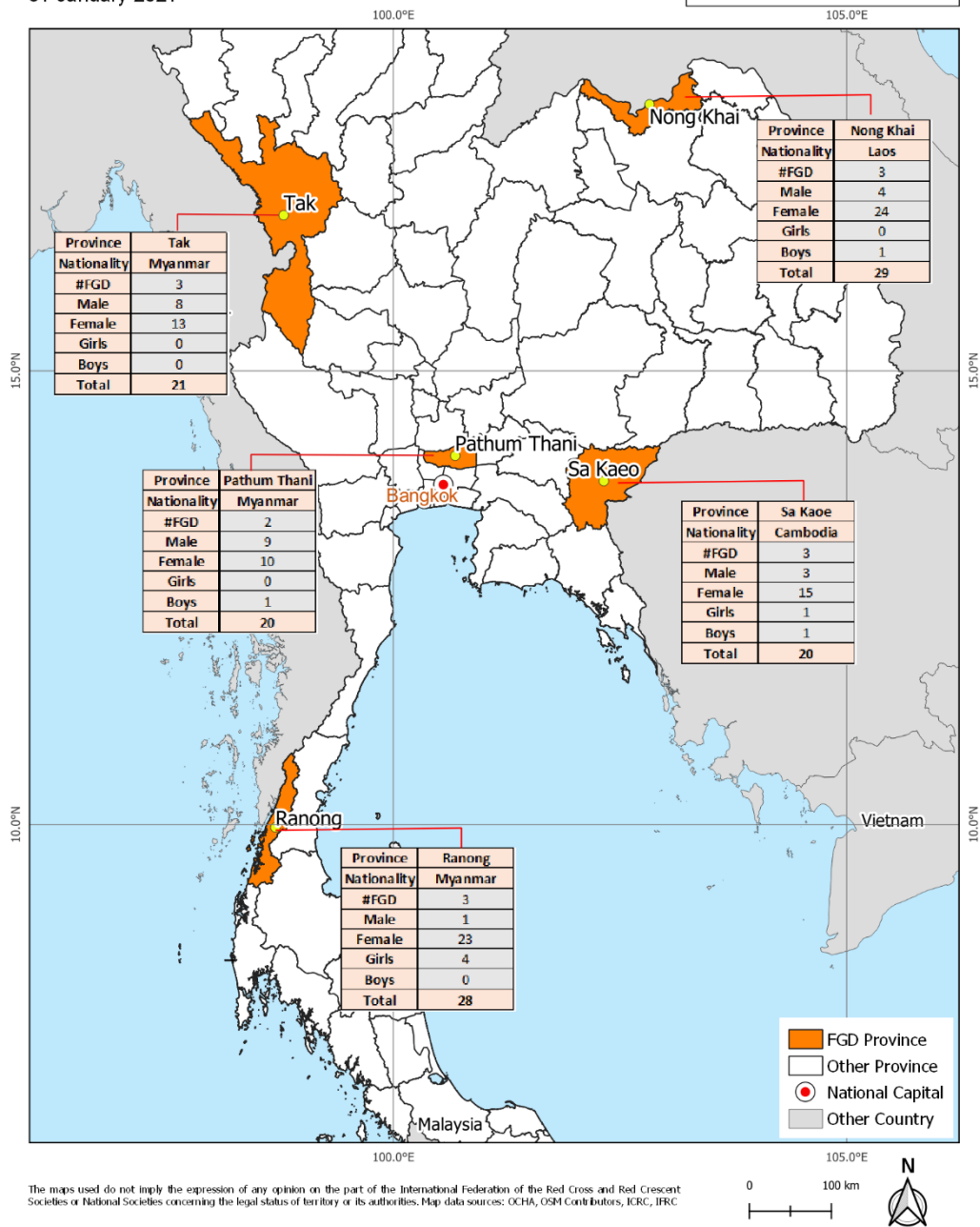
## Demographic details and methodology

The TRCS's Relief Bureau in Bangkok and TRCS Health stations in Surin, Prachuap Khiri Khan, Tak, and Sa Kaeo provinces collected information from 118 key informants, of whom 29 came from Lao, 20 came from Cambodia and 69 came from Myanmar. In terms of gender, there were more females than male key informants (85 women, 25 men, five girls and three boys). This underlines the importance of implementing follow up engagement activities to triangulate the findings further. Migrants from Lao reside in Tha Bo district of Nong Khai province, migrants from Cambodia in Ta Phraya district of Sa Kaeo province, migrants from Myanmar in Mueng district of Ranong province, Mae Sot district of Tak Province, and Thanyaburi district of Pathum Thani province. The data collection took place on 23 and 27 November, and 8 and 19 December 2020 through 14 focus group discussions with the proceedings being recorded on flipcharts and notebooks. Please see the map below to see the locations and discussants at the focus group discussions. The Relief Bureau organised two focus groups and different Red Cross Health Stations organised three focus groups, in each of their areas. The discussion topics were along the following themes:

1. Communication on COVID-19,
2. Community participation.
3. Knowledge on COVID-19 and the impact of the outbreak,
4. Preventive behaviours

**Thailand, CEA  
Focus Group Discussion (FGD)**

31 January 2021



*This map shows the locations where the migrant workers live and focus group discussions were held, along with the number of participants at each location around Thailand.*



## Community Voices

*"My children live in Bangkok and called me to talk about COVID-19." (60-year-old woman, Nong Khai Province)*

*"Chitchatting among friends is an easier way for us to receive news and information because most Burmese people follow various news on social media (and share when talking)." (15-year-old girl, Ranong Province)*

*"We usually talk to our relatives and friends by phone. When we are in trouble, we will first seek help in our family." (40-year-old woman, Tak Province)*

*"I love watching TV series on Channel 3 and Channel One, and will rather surf FB than anything else"(25-year-old-man, Pathum Thani Province)*

## Communication on COVID-19

There were key differences between age groups and nationalities regarding communication preferences. When asked from where the participants received information about COVID-19, most Cambodian participants said that they received news and information through television. The second most common channel amongst Cambodian migrants for following news and information about COVID-19 was announcements by the village headperson, health authority, or village health volunteers (VHV). They rarely used social media such as Facebook and YouTube, or messaging application such as Line. This could be because these participants had a good command of the Thai language making mainstream media channels more accessible to them. Moreover, the Cambodian migrants lived close to the Cambodian border and could access mainstream media in Khmer.

Participants from Laos had a good command of Thai language and lived at the Laos border. Therefore, they accessed mainstream media in Thai and Lao. All participants from Myanmar irrespective of their location, had limited knowledge of Thai language. One group lived in Pathum Thani Province, close to Bangkok and therefore were less likely to be able to access traditional mainstream media from their home country compared to those who lived closer to the border in Ranong and Tak Provinces. This group also had overall lower knowledge about COVID-19 which may be linked to their limited grasp of Thai and the fewer opportunities they had to receive information in their own language. Other Myanmar migrants who lived closer to the border appeared to have more knowledge on COVID-19 and preventive behaviour although they had limited knowledge of Thai.

Participants from both Laos and Myanmar who lived near the borders used both mainstream and online channels to follow news and information about COVID-19. Most young people from both countries had smartphones with internet access. Young people from Laos and Myanmar preferred to follow news and information about COVID-19 on social media such as Facebook, Line messaging application and YouTube. Older people preferred watching news and gleaned information about COVID-19 through television, public announcements by village headpersons, radio, Village Health Volunteers, word of mouth (chatting with their neighbours) or by talking on the phone with their children. They also received information from health authorities and attended trainings at Non-formal Education Centres. This highlights the need to use a multi-channel approach for tailoring communication for different age groups and languages when engaging communities.

## Community participation

Participants in most areas shared that they attended trainings or sessions organised by the health authority, NGOs and Non-formal Education Centres to keep themselves informed about COVID-19. Participants shared that they were more likely to attend such activities if the organiser provided interpreters. Some participants also wished to have more information sharing and engagement on COVID-19 activities, which they said they would encourage others in their community to attend.



The image above shows participants demonstrating handwashing techniques at the focus group discussions in Pathum Thani.

Some participants in Nong Khai Province mentioned that while movement restrictions were ongoing, they set up dispensers filled with food items to distribute to the vulnerable individuals in their village free of charge. This highlights the potential to identify local solutions and support these to increase resilience.

## Community Voices

*"Every time, when the authorities or Myanmar migrant labour network organises an activity about COVID-19, I would always help invite people in the community to attend." (39-year-old woman, Tak Province)*

*"There have been no (public awareness raising) activities that we could participate like this in our area, and we would like to have more of this activity". (Several participants at the meeting).*

*"I did not participate in any activities arranged by the provincial public health authority because there was no interpreter, but I joined the activities organised by World Vision." (59-year-old woman, Ranong province)*

## Community Voices

*"One must keep physical distance with family members and outsiders." (43-year-old woman, Tak Province)*

*"If infected, one must immediately inform the market administrator, and people at the learning centre about it." (35-year-old man, Pathum Thani Province)*

*"It makes me scared, it's like a 'silent hangman', I'm paranoid." (58-year-old man, Nong Khai Province)*

*"If I found someone that is sick, I will notify the Migrant Health Volunteer" (59-year-old man, Ranong Province)*

*"If someone is infected or suspected of being infected, I will not alienate the person from us, but I will advise him or her to stay in the home quarantine and seek treatment." (39-year-old woman, Nong Khai Province)*

*"If falling sick, one can take care of oneself by taking antipyretic drugs when having a fever, isolating oneself from others, wearing a mask, and washing hands frequently." (Woman, unknown age, Sa Kaeo Province)*

## Knowledge about COVID-19

Most participants demonstrated robust knowledge on COVID-19 in all provinces as reflected in the community voices. All participants were aware that it was a severe contagious virus, knew its origin, symptoms, how it is transmitted, and the agencies or persons to refer themselves to in case they or people they knew fall sick. Several participants felt frightened or stressed about potential infection with the virus. Only one migrant from Pathum Thani province said he did not know much about the disease, which may be linked to the lower presence of NGOs in the province, and his limited ability to follow news and information about COVID-19 in Thai language.



The image above shows the facilitator enabling discussions among participants at Ranong

A participant in Ranong said that if she knew of a person falling sick, she would notify the Migrant Health Volunteers (MHV). This demonstrates the importance of MHVs being available to the migrant worker community and suggests a level of trust towards MHVs. Other provinces were less aware of the MHVs.

However, another participant from Pathum Thani province said he would not notify the landlord or employer if he or she was infected for fear of being evicted from the rented room or loss of employment. While the collected sample is not representative this is noteworthy and suggests more consideration is needed in order to ensure migrant workers access to medical care without fears of losing housing and employment.



## Impact of the epidemic : economic and education concerns

The voices from the community illustrate the impact of the COVID-19 epidemic on the participants. When asked how the COVID-19 epidemic affected their families, most of them shared that they struggled economically due to the loss of employment or reduced income. In addition, there were increased costs to maintain their legal status: visa/work permit, and concerns that there would be unavoidable medical expenses. Moreover, young people and some parents shared concerns about the effect that school shutdowns might have on their own or their children's education.



The image above shows participants at the focus group discussions in Pathum Thani.

### Community Voices

*"I can't visit home." (48-year-old Khmer woman, Sa Kaeo Province)*

*"My job is suspended, I lost my income, I have no money to pay my rent." (25-year-old man, Tak province)*

*"It costs more to renew a visa because I have to go to the Lao embassy in Khon Kaen Province as the checkpoint is closed. Usually, we can go to the immigration check point at the expense of only 100 baht per time but when going to Khon Kaen Province, it costs 2,000 baht per time and it takes many trips to get it done." (53-year-old-woman, Nong Khai Province)*

*"It reminds me of the Education Centre that had closed before the outbreak. I was looking forward for a new semester as there would be a Thai language curriculum, but the start of the term had been postponed because of the on-going outbreak." (12-year-old-girl, Ranong Province)*

*"Most people here are familiar with a private hospital nearby, whose treatment fees is expensive, but we have to accept it because when we or our children are sick, we cannot wait. " (A 28-year-old mother)*

## Community Voices

*"If there is a new wave of the outbreak, I will tell my relatives not to come to Thailand."*

(Woman, unknown age, Sa Kaeo Province)

*"Keep in touch with family by telephone instead of visiting one another as usual."* (50-year-old man, Nong Khai Province)

*"We are also afraid of COVID-19. We take bath and wash clothes as soon as we get home."* (25-year-old male, Tak Province)

*"One must wear a mask, wash hands often and take a bath immediately when getting home. Ones must change clothes, and clean the house including the bathroom."* (28-year-old man, Pathum Thani Province)

*"Avoid gathering, stay home, don't receive visitors."* (27-year-old woman, Ranong Province)

## Preventive behaviours

The community voices show that participants were able to identify preventive behaviours and participants overall were well informed about the virus and disease. There were no significant differences in terms of age, gender or nationality regarding knowledge of preventive behaviour. Participants said they were ready to follow new measures if needed.



*The image above shows a child who accompanied her mother to the focus group discussions in Pathum Thani, putting on a face mask. Demonstrating their knowledge of preventive measures, one woman from Sa Kaeo province who was at the meeting said – "We should wear face masks all the time. It should also be cleaned and washed thoroughly. "*

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### All data was collected by:

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Teppharat TRC Health Station (TCS Health Station No.13). Tak Province

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Thai Red Cross Society, Relief Division, Bangkok

The data collection was carried out in collaboration with NGOs who are members of the Migrant Working Group (MWG), Thailand. Their staff members acted as interpreters during the data collection in Ranong, Tak and Pathum Thani Provinces.

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For more information on Migration and Displacement at IFRC please visit: <https://media.ifrc.org/ifrc/what-we-do/migration-and-displacement/> and for Southeast Asia related information, please visit: <https://www.rcrc-resilience-southeastasia.org/migration/>