

Health of Our Heroes

**Qualitative Study on Access to Sexual and Reproductive
Health Services and Information of Women Migrant
Domestic Workers**

Authors:

Carolyn I. Sobritchea, Ph.D.

Dino Alberto Subingsubing

Amara T. Quesada

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Research Institution:
Action for Health Initiatives (ACHIEVE), Inc.
162-A Scout Fuentebella Ext., Brgy. Sacred Heart, Quezon
City 1103 Philippines

Research Team:
Project Coordinator: Maria Lourdes S. Marin
Principal Investigator: Carolyn I. Sobritchea, Ph.D.
Assistant Principal Investigator: Amara T. Quesada

Contact Numbers: +63 2 414 6130 / +63 2 426 6147

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Abstract

This research project assessed the level of access to sexual and reproductive health (SRH) information and services of women migrant domestic workers in Hong Kong, Singapore and Qatar. The study was guided by an analytical framework that took into account the personal, socio-cultural and structural factors that either facilitate or hinder access to SRH services in the three study sites mentioned above.

Qualitative data collection methods were utilized for this study – focus group discussions, in-depth interviews for case studies, and key informant interviews. These techniques were supplemented by desk research that mapped existing laws, policies and services related to migration and health in the study sites. Data collected for this study shed light to the experiences of women migrant domestic workers in the destination countries and the various sexual and reproductive health concerns that they face. Although the study shows that SRH services are available in these countries, access to them is largely facilitated or hindered by existing – or the lack of – migration and labor laws and policies and the way these are interpreted by the employers. For the most part, the nature of the relationship of the worker to her employer is a big factor that determines her access to SRH information and services.

Overall, this study provides evidence that can improve advocacy for better conditions for women migrant domestic workers, especially in relation to their sexual and reproductive health. Already, plans are being drawn by concerned government agencies and civil society organizations in the Philippines and Hong Kong to integrate SRH education in the training programs of communities of migrant workers.

Key Words: domestic workers, women migrants, sexual and reproductive health, migration, reproductive health, Achieve Inc.

The Research Problem

Women migrant domestic workers are among the most vulnerable migrant workers, mainly due to the absence of labor laws and policies that regulate domestic work. They are mostly isolated because they work in the private households of their employers. Previous researches have already shown the abuses and maltreatment that domestic workers experience in the hands of recruitment agents and employers. These situations, and the lack of protection mechanisms for this group of migrant workers, impact on their health. As women migrant workers who are mostly in their reproductive ages, the impact of their experiences as domestic workers in foreign countries on their sexual and reproductive health are considerable. Although there have been a number of studies that explored the sexual and reproductive health situations of women migrant domestic workers, very few have looked at their level of access to related services while they are at the destination countries.

There are ten elements of reproductive health that are recognized by the Philippine Government: i) Family Planning; ii) Maternal and Child Health and Nutrition; iii) Prevention of Abortion and Management of Abortion Complications; iv) Prevention and Treatment of RTIs/STIs/HIV/AIDS; v) Education and Counseling on Sexuality and Sexual Health; vi) Breast and Reproductive Tract Cancers and Other Gynecological Conditions; vii) Men's Reproductive Health; viii) Adolescent Reproductive Health; ix) Violence Against Women; and, x) Prevention and Treatment of Infertility and Sexual Disorders. This study focused on just the following elements:

1. Prevention and Treatment of RTIs/STIs/HIV/AIDS;
2. Education and Counseling on Sexuality and Sexual Health;
3. Prevention and Management of Abortion Complications; and
4. Family Planning

Violence against Women is also a critical issue that is faced by women migrant workers, but there have been quite a lot of studies about it. As an element of reproductive health, it was not included as a main focus in this study. However, it was utilized as a context in analyzing the sexual and reproductive health problems that arose from the experiences of the research participants.

Objectives

This research project aimed to assess to which extent Filipino women migrant domestic workers are able to access SRH services and information in three destination countries,

namely: Hong Kong, Singapore and Qatar. Specifically, the following research objectives were identified:

1. To identify the SRH needs and concerns of Filipino women migrant domestic workers;
2. To conduct a mapping of available SRH services in Singapore, Hong Kong and Qatar for women migrant domestic workers;
3. To identify personal, socio-cultural and structural factors that facilitate and hinder access to SRH information and services, especially in Singapore, Hong Kong and Qatar; and,
4. To generate research, policy and programme recommendations that can respond to issues of accessibility of SRH services of women migrant domestic workers.

All the objectives set forth in the MGC were met. Additionally, aside from mapping the available SRH services in the three study sites, existing laws and policies related to labor migration and sexual and reproductive health were also reviewed. Furthermore, policies and programs for women migrant domestic workers, especially those related to SRH in the Philippines were also mapped. These included the programs and policies that are implemented before Filipino migrants depart for overseas work, and onsite, as implemented by the Philippine Embassies and Consulates.

The availability or lack of policies, as well as the content of existing policies in the three study sites were important structural factors that impacted on access of women migrant domestic workers to SRH information and services.

Methodology

Partnerships

Since the majority of the data-gathering activities would be done in the three study sites, ACHIEVE partnered with organizations there to facilitate the study. In Hong Kong, ACHIEVE worked with St. John's Cathedral HIV Education Center, a non-government, non-profit organization that worked mainly on HIV prevention among migrant workers. In Singapore, we worked with the Humanitarian Organization for Migration Economics (H.O.M.E.), also an NGO that does direct services for migrant workers in Singapore. Both of these organizations are long-time partners of ACHIEVE.

There were no NGOs in Qatar that we could identify, so we opted to work directly with the Philippine Embassy and the Philippine Overseas Labor Office, with the help of the Department of Foreign Affairs – Office of the Undersecretary for Migrant Workers Affairs. During the data-gathering, a number of contacts from the Filipino communities in Qatar were referred to us by the Embassy and they also assisted us in the study.

From the development of the research design and the finalization of the data gathering tools, ACHIEVE involved these research partners through online consultations. It was important for us to make sure that the research design was responsive to the realities in the study sites and that the tools were culturally sensitive.

Data Collection

For the collection of data, ACHIEVE utilized qualitative research methods such as focus group discussions, in-depth interviews for case studies, and key informant interviews. Extensive desk reviews were also conducted in the review of related literature, and in mapping relevant laws, policies, and existing services.

Identifying possible research participants and key informants onsite and organizing the interviews and focus group discussions were the main contribution of the abovementioned research partners. Additionally, they also conducted literature reviews on their laws and policies, and locally generated studies on migration and health.

ACHIEVE was able to interview —through FGDs, in-depth and key informant interviews —a total of 147 migrant domestic workers and 32 key informants from the Embassies/Consulate, Philippine Overseas Labor Offices, NGOs, healthcare institutions and key Government offices. This entailed a total of 17 FGDs and eight (8) in-depth interviews with domestic workers conducted in the three study sites.

In the research proposal, four groups were identified for the focus group discussions in each of the project sites. These groups are:

1. FGD 1: Documented women domestic workers of various marital/civil status, age groups, religious affiliations, educational background, and who have been in their current job for five years or more;
2. FGD 2: Newly hired (e.g. those who have been in their current job for at least one year but not more than two years), documented women domestic workers of various marital/civil status and age groups, religious affiliation and educational background.

3. FGD 3: Undocumented women domestic workers of various marital/civil status and age groups, religious affiliation and educational background.
4. FGD 4: Representatives of non-government organizations and informal groups as well as networks or labor unions that provide various services to migrant workers.

However, in the actual conduct of the data-gathering, these groupings were modified to adjust to the situation in the project sites. As a result, new groupings were developed. These groupings are listed in the following table.

	Hong Kong	Singapore	Qatar
1	Below 40 years old; mixed marital status; worked for less than 5 years as DW	40 years up; married; worked for 5 years and up as DW	Mixed ages, marital statuses, number of years of work as a DW; residing in the POLO shelter.
2	Below 40 years old; single; worked for 5 years and up as DW	40 years up; single; worked for 5 years and up as DW	Mixed ages, marital statuses, number of years of work as a DW; residing in the POLO shelter.
3	40 years and up; married; worked for 5 years and up as DW	Mixed age and number of years of work as DW; residing in an NGO-run shelter; married	Mixed ages, marital statuses, number of years of work as a DW; residing in the Embassy and involved in criminal cases
4	Mixed age and marital status; worked for more than 5 years as DW; identify as lesbians	Mixed age and number of years of work as DW; residing in an NGO-run shelter; single	Mixed ages, marital statuses, number of years of work as a DW; contacts of a Christian organization.
5	Mixed age and marital status, residing in an NGO-	Mixed age, marital status and number of years of work as a	Mixed ages, marital statuses, number of years of work as a DW; converted to

	run shelter	DW	Islam.
6		Mixed age, status and number of years of work as DW; residing in the Embassy-run shelter	Mixed ages, marital statuses, number of years of work as a DW; converted to Islam

Although the research team designed the research to have a consistent set of criteria for the focus group discussions in the three project sites, it was impossible to follow these criteria because of the unique situations in each of the project sites. For one, there were varying levels of difficulty in gathering women migrant domestic workers to participate in the focus group discussions and/or interviews. It was relatively easiest in Hong Kong because migrant domestic workers were given one day off a week as prescribed by the law. In contrast, it was most difficult to recruit migrant domestic workers in Qatar where the usual practice was to not allow them to have any days off.

Also, we found that it was more feasible to interview key informants individually than to gather them in a focus group discussion. But even with the modifications in the methodology, we found that the data that was generated was still rich and reflective of the situations that women migrant domestic workers face in the three study sites.

The women migrant domestic workers who participated in this study were asked to sign consent forms before the interviews and focus group discussions. This ensured that they understood the purpose of the research and the responsibilities of the researchers in handling the data that were generated. There was also an agreement that their real names and any identifying detail would not be used in the publication.

Data Analysis

All the interviews and focus group discussions were digitally recorded. These recordings were then transcribed verbatim. The collected data was then clustered into matrices to bring out the interrelationships of the factors that affect the access of women migrant domestic workers to SRH services and information. The roles of different factors – personal, social and structural – were the main conceptual framework that guided the analysis of the data.

The research report was subsequently drafted, based on the analysis of the data.

Validation of Research Results

After the research report was drafted, ACHIEVE organized a validation workshop where the initial findings and analysis were presented to various stakeholders in migration and sexual and reproductive health. Also participating in the validation workshop were women migrant domestic worker returnees from Hong Kong, Singapore and Qatar. The main output of the validation workshop was a sharper set of policy and program recommendations.

The draft report was sent electronically to the research partners onsite for validation and comments. After the comments from the partners were received, the research report was revised and enhanced to include their feedback, as well as the recommendations from the validation workshop.

Project Activities

Development of Research Design: The research team developed a research design, taking into consideration previous researches of ACHIEVE on SRH of migrant workers. Determining the conceptual framework for the study, as well as the development of the research methods and tools were done collaboratively, with inputs and validation from the research partners in Hong Kong and Singapore.

A focus group discussion with returned migrant domestic workers should have been conducted to generate the domains of the study. However, this was not done due to constraints in the schedules of the research team and the research partners. Instead, a critical analysis of ACHIEVE's previous researches and other available literature on the subject matter was done and this led to the development of the research methodology.

Site Visits and Data Collection: ACHIEVE conducted six site visits in all; two visits each to Hong Kong, Singapore and Qatar. The first round of site visits were intended for touching base with the research partners to plan for the data-gathering activities, contact building with other stakeholders in the destination countries, and gathering of materials and initial data about the particular study site's migration and SRH situation.

The interviews and focus group discussions were done during the second round of site visits. These visits took longer than the first trips because we wanted to capture at least two weekends so that we can have access to the women migrant domestic workers who were allowed to have days off.

Validation Workshop:As part of the research methodology, a validation workshop was conducted to share and validate the initial findings of the study with key stakeholders, women migrant domestic workers, and the research partners. The results of this validation activity were incorporated into the final report.

Publication of Research Report: One thousand copies of the research report were published into a book. For easier distribution, particularly in international forums, we have also produced 1000 CD-ROM copies of the research report.

Dissemination and Distribution of Research Results: Research dissemination activities were done in Hong Kong and in the Philippines. In Hong Kong, our research partner, St. John's Cathedral HIV Education Center, organized a two-day activity around the research report. The first day involved a press conference, where we presented the results of the study. A Vice-consul from the Philippine Consulate was present to give her reaction on the report. The local media in Hong Kong, as well as various stakeholders, including the Indonesia consulate, were present in the event. The research report was featured in the local paper, a few days after the press conference.

On the second day, a seminar was organized for women migrant domestic workers. Apart from the presentation of the findings of the research, various agencies and institutions also presented their health-related programmes for women migrant domestic workers. A speaker from the Equal Opportunities Commission talked about the Race Discrimination Ordinance and how it protects migrant workers from discrimination. Another speaker talked about how to deal with sexual abuse, where to seek redress, and how to go about seeking assistance. Another speaker spoke about Hong Kong's HIV and AIDS situation, presented data on HIV cases among migrants and gave information on where migrants can get HIV testing. Two other speakers talked about mental health issues, including dealing with depression.

An evaluation form was distributed among the participants after the seminar to assess their views about the seminar. Majority of the participants said that the seminar was very informative and very important for migrant domestic workers. However, they also said that the time was not enough, so they recommended that more seminars of this nature should be conducted in the future.

In the Philippines, ACHIEVE conducted a National Dissemination Forum that was participated in by government agencies, non-government organizations, UN agencies, the academe, and organizations of migrant workers. The forum aimed to present the results of the study and to discuss how to move forward with the recommendations of

the research. The results of the discussion will be discussed further in the section on Project Outcomes.

In terms of distribution of the publication, copies of the book have been shipped to the partners in Hong Kong and Singapore. Since there was no NGO partner in Qatar, we will be requesting the Department of Foreign Affairs to facilitate the distribution of the publication to the Philippine Embassies and Consulates.

Although not a part of the original project, IDRC agreed to partially fund the travel costs of the assistant principal investigator to attend the International AIDS Conference (IAC) in Vienna. In the Conference, the initial findings of the study were presented in a poster presentation. A copy of the poster has already been sent to IDRC.

The research findings were also presented in two other venues that were not originally part of the project and did not incur costs for the project. One is at the Conference on Reproductive Health and Human Rights Advocacy, Protection and Services for Overseas Domestic Workers that was organized by the Family Planning Organization of the Philippines. This Conference offered a venue for various stakeholders in migration and SRH to share their work and services.

The research was also presented in the Inception Workshop that was organized by the International Institute for Social Studies in The Hague. This workshop brought together the research projects funded by IDRC in order to develop strategies in consolidating the outputs of the various researches.

Project Monitoring and Evaluation: The research team conducted regular meetings to discuss and assess the progress of the project. These meetings also served as a venue for conceptual discussions regarding the issues that were being investigated.

After each of the site visits, ACHIEVE had meetings with the partners onsite to assess how the visits went. An assessment was also conducted with the St. John's Cathedral HIV Education Center and their team of volunteers who helped organize the dissemination activities there.

Lastly, ACHIEVE conducted a separate internal evaluation on the conduct of the project. As a next step, we will be exploring possible funding options with IDRC again and we will also be developing proposals to develop programs in response to the recommendations of the study.

Project Outputs

The project generated a number of outputs but the main one is the publication of the research report that will be distributed to policy makers and service providers in the Philippines, and in various destination countries. The following is the list of products of the research project:

1. Review of Related Literature: Studies and documents pertaining to migration and health, particularly on SRH of female migrant domestic workers, were reviewed. ACHIEVE covered the global and national situation, including the migration situation in Qatar. The research team shared this task with the partners in Hong Kong and Singapore. In both countries, the partners conducted their own literature reviews on studies and publications from their own countries. They submitted their respective reports to ACHIEVE and were consolidated with the reviews done in the Philippines. The write up for this review has been included in the publication as part of the research report.

The documents that were reviewed include research studies on the issue, laws, policies, international covenants and declarations, and bilateral agreements, where applicable. The current developments on the International Labor Organization (ILO) Convention on Decent Work, which covers domestic work, were also monitored.

2. Data Collection Tools: The research team developed four (4) data collection tools for this study: a focus group discussion (FGD) guide; an in-depth interview guide that was used for case studies; the key informant interview guide, and; the profile sheet that was used to collect the socio-demographic characteristics of the migrant domestic workers who participated in the study.

The development of these data collection guides was based on the review of previous researches on access to healthcare of migrant workers. The research team examined the data-collection guides that were used in these previous researches and from there, came up with guides that were appropriate for achieving the objectives of this research project.

The interview guides were sent to the partners in Hong Kong and Singapore for their feedback. This was done to ensure that the guides were culturally appropriate. After they submitted their comments and suggestions, the research team revised the interview guides accordingly.

3. Research Publication: One thousand copies of the research report has been published. This publication will be used as an advocacy tool to push policy makers, program implementers and service providers to include or enhance SRH-related programs and services for women migrant domestic workers, particularly in the countries of destination. Distribution of the publication has started in the Philippines, in the study sites and in relevant regional and international forums.

4. Research Report in CD Format: One thousand copies of the research report was packaged in CD-ROM format to supplement the publications. The CDs also provide a more convenient format for wider distribution.

5. Press Release: A press release was written and distributed to the media in Hong Kong during the press conference where the results of the study were presented.

Project Outcomes

The main outcome of the project, especially among those who have been involved in the study or who have been reached by the dissemination of the study, is an increased awareness that sexual and reproductive health is a concern among women migrant domestic workers. With this awareness, the stakeholders now have a better understanding of the many dimensions of labor migration and the complexities of the lives faced by women migrant workers. We believe that this enhanced view about migration can help shape better programs and policies.

During the National Dissemination Forum, the Philippine Overseas Employment Administration also shared that they already plan to integrate SRH in the pre-employment orientation seminar that they conduct in various communities. These seminars are conducted even before the individuals decide to work abroad. In this manner, prospective migrants have a better idea of how it is to be a migrant worker, the issues they will face and the realities in the destination countries. This means they will be equipped with more information before they decide if they want to pursue overseas employment. Including sexual and reproductive health information in this course would benefit the communities whether or not they become migrant workers.

A number of NGOs shared that SRH issues are also integrated in their pre-departure orientation seminars for migrant workers. And even with such a limited time in this orientation, they will continue to provide pre-departing migrant workers with SRH information.

After the Dissemination Forum, the Human Rights Committee of the Office of the President said that they will pursue the recommendation to deploy Filipino doctors to Philippine Consulates and Embassies with high a concentration of Filipino migrant workers. Unfortunately, we were told by the Embassies and Consulates that were involved in the study that this would not be a lot of help because these Filipino doctors will not be able to practice medicine in the destination countries anyway. However, the Committee insisted that they will find a way to implement this in such a way as to maximize benefits for the migrant workers.

Our partner in Hong Kong, has committed to continue the advocacy with their government and they have already been tapped to speak about the issue in various government venues and in the events organized by civil society organizations in Hong Kong.

In Singapore, upon referral by our partner, ACHIEVE has been approached by the Singapore Health Promotion Board (HPB) for information on Philippine-based NGOs working on HIV and AIDS. This list will be included in an information material that HPB will be producing. Our partner also plans to disseminate the research report once they receive the copies of the publication. We envisage that they can also follow up on the plans of the HPB to developing initiatives for migrant workers.

For the research team, there was an enhancement of research skills and an increase in knowledge on the issue that was investigated, as well as a more comprehensive understanding of the laws, policies and realities in the countries of destination. Such capacity enhancement will benefit the organization as a whole.

Having produced a research publication gives us an advocacy tool that is evidence-based and current, which we will be able to utilize in advocating for better policies and programs for women migrant domestic workers.

Our next step is program development, which will spin off from the recommendations that were generated in the study. This entails developing project proposals that will be submitted to funding institutions. Apart from advocacy for better policies, the study clearly articulates the need to build the capacity of women migrant domestic workers regarding SRH issues. ACHIEVE recognizes that these programs need to start at the communities where the migrants and potential migrants are, because the current education system does not provide for this module in the curriculum.

We also plan to develop another research proposal on an issue that we encountered and explored in this project, and that, understanding the nexus between migration and

sexuality. This is an area that has only been scantily investigated, and is in fact often unspoken of and hidden from public discourse. However, in our research, we found out that the health situation of migrants are often also determined by and influenced by their sexuality, which includes their attitudes, beliefs, practices, expressions and identities. The sexuality of migrants also have a significant impact on their health and well-being. It also affects their security and legal status, as it is often regulated and controlled in the countries where they work.

Overall Assessment and Recommendations

This project has given ACHIEVE the opportunity to study a dimension of labor migration that is not always seen as a major concern. Sexual and reproductive health is a very intimate issue especially for women and for those who migrate as domestic workers, it becomes an important issue that is interlinked with their work and their lives in the destination country. This study has brought forward the complex experiences of women migrant domestic workers and has highlighted the need to review migration and immigration policies of governments that have been previously considered merely as labor and immigration regulations. In this study, it is shown that these regulations have a big impact on the sexual and reproductive rights of women migrant domestic workers, in general, and in their access to SRH services, in particular.

The migrant domestic workers who participated in the focus group discussions have expressed better awareness, not only about sexual and reproductive health, but also about their rights as migrant workers. During the FGDs, not only were the research team gathering data, they also took the opportunity to provide basic information to the participants about HIV and AIDS, reproductive health concerns, labor rights, labor policies, migrants' rights and redress mechanisms. This process was inevitable, because the research participants weren't seen simply as sources of data. They also needed important information that could help them make decisions regarding the situations they face as migrant workers.

Having NGO partners in Hong Kong and Singapore was critical in the success of the conduct of research activities. It is equally important for the continuation of the advocacy in those countries. This is also good for ACHIEVE, particularly, because we do not have the resources to sustain this advocacy with the governments of these countries. Our partners did not only contribute in the implementation of this project, they will also play a key role in continuing the advocacy work even after the project has ended.

Qatar, however, is an entirely different situation. There are currently no active civil society organizations (CSO) that can take on a sensitive issue like SRH of women migrant workers. Whatever future actions could be taken in this country would need to be done in close coordination with the Department of Foreign Affairs and the Philippine embassy. Another institution that we can explore for onsite interventions are the UN offices in the country or in the region, particularly the United Nations Development Programme (UNDP). This is something that will be explored with them in the near future.

Perhaps the greatest limitation of the project is that it is just a research project, with no provision for program interventions. This creates a limitation for ACHIEVE as well, because integral to our research programs is the development of concrete responses stemming from the recommendations of the project. As a recommendation, we would like to ask IDRC to also explore the possibility of allocating funds for programs that are direct outcomes of the research projects they fund.