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**Protecting** female migrant workers  
during the COVID-19 pandemic:  
Key recommendations for Indonesia's  
government

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**POLICY BRIEF**



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This policy brief provides information and identifies several key recommendations to assist relevant stakeholders, especially Indonesia ministry of foreign affairs, ministry of social affairs, ministry of women empowerment and child protection, and ministry of manpower, and the national board on the protection of Indonesian migrant workers (BP2MI), in designing COVID-19 rapid policy responses that can help to ensure the protection of female migrant workers based on systematic evidence from Portsmouth-Brawijaya Centre for Global Health Population and Policy study sponsored by the UKRI GCRF/Newton Fund Agile ODA Call 2020.

## Introduction

The COVID-19 crisis is having a disproportionate impact on Indonesia's international female migrant workers. Currently, there are 6.5 million migrant workers from Indonesia, with about 70% of them are female migrant workers who work across countries from Middle East, East Asia, and Southeast Asia region. Most of them are concentrated in sectors of economy with high levels of contemporary, informal, or unprotected work, characterized by low wages and lack of social protection, including in care work, which female migrant workers mostly carry out. They are among the most vulnerable during the pandemic. Immediate policy responses to mitigate the impact of the pandemic on female migrants urgently needed.

## An absence of gender-sensitive and right-based policies

The impact of the pandemic on female migrants is specific. Thus, any policy responses must address the particular impact of the pandemic on female migrants. Unfortunately, we did not find any sensitive policies from Indonesia's government and host country governments that address the specific needs of female migrants. In Indonesia, existing policy responses related to female migrants are under the umbrella of the national social safety net program, designed based on common social, economic, and health circumstances of communities during the outbreak.

We documented that the rapid flow of female migrants' repatriation during the pandemic is not accompanied by a better targeting social safety net policy. Most returned migrants were unable to access the program because they were not registered in the integrated social welfare database (*Data Terpadu Kesejahteraan Sosial Database*) collected by the ministry of social affairs. The government has also introduced a wage subsidy policy, "*Subsidi upah/gaji bagi pekerja/buruh*" for laborers with wages below 5 million rupiahs (approximately 360 USD) and registered as active members of the social security national insurance for workers (BPJS Ketenagakerjaan). In practice, these policies do not reach most female migrant workers because they are either not the BPJS Ketenagakerjaan member or registered as poor families by the local authority. The budget refocusing policy under the outbreak even removed local and national government budget for women economic empowerment targeted for human trafficking victims. Hence,

the government effort of combating human trafficking was a setback during the pandemic.

Unanticipated policies, ambiguity, and contradiction are also found within the current placement migrant policy. The ministry of manpower regulation number 151/2020 of temporary suspension of placement of Indonesia migrant workers during the pandemic is not accompanied by anticipatory steps of its implementation. As a result, thousands of migrant workers who failed to leave work abroad were stuck in the shelters, estimated at 88,700. They experience uncertainty and even have to pay some bail money for her/his agency to return to their hometown. Ambiguity and contradiction are also found in the current new normal policy response. Under the current new normal policy, the ministry of manpower, via regulation number 294/2020, reopens international migrant worker placement to 13 countries. This policy put female migrants at high risk as the number of COVID-19 infections in Indonesia is climbing, while many host countries entered a second wave of the outbreak.

Despite various measures to strengthen the implementation of health protocols, the government seems unaware of female migrant's health needs. Most of them reported that they did not receive any essential medical supports from Indonesia's government, let alone the COVID-19 test and treatment. Although the national government, through Ministry of Manpower regulation 294/2020, stipulated that all migrants have right to get reliable, accurate, and accessible COVID-19 health prevention and treatment information, most of them have reported that such essential information is not available in a language that they can easily understand especially various COVID-19 regulation of host countries that

often presented in the local language. In some cases, migrants face legal issues due to their lack of understanding of local regulation related to pandemic prevention.

The physical restriction policies implemented in host countries also hamper access to justice of thousands of female migrant workers who face legal document problems. Providing online services even though it is one solution, but the services provided by the embassy are not as good as compared to offline services. Reductions in consular services and document updates carried out by the Indonesian embassy during the pandemic also directly impact female migrant workers who have legal document issues in host countries.

Moreover, the host country's policies are generally not too friendly for female migrants. For example, the implementation of the movement control border policy in Malaysia has contributed significantly to the uncertainty of millions of undocumented migrants workers from Indonesia. Most of them work in factories, palm oil, services, and informal sectors based daily and weekly wages. Most of them are jobless, have been removed from health insurance, and even vulnerable due to the host country's repression policy.

### **Indonesian female migrants are the most vulnerable group during the pandemic**

Our survey of 2,827 female migrants and in-depth interviews of 30 female migrants and their families representing the Middle East, East Asia, and South East Asia region between November 2020 and February 2021 elaborates various risks facing female migrants' workers during the pandemic.

- Most of them are working in the domestic sector (92% as a housemaid) who currently work at Hongkong (39%), Saudi

Arabia (15%), Uni Emirate Arab (11%), Singapore (9%), Malaysia (9%) and Taiwan (8%). Most of them have a low educational background and were from low-income families and therefore work in domestic sectors, characterized by high levels of contemporary, informal, or unprotected work, low wages, and lack of social protection. Evidence indicates that these domestic workers are most vulnerable to violence, abuse, forced labor, and exploitation during the outbreak.

- Despite the fact that female migrants are a group at higher risk of the virus infection, they have poor access to health protection and services. Only 45% of them get the COVID-19 test. If they get the test, it was paid by the employer (68%), host country government (14%), and her selves (9%). Only 1% was paid by the Indonesian government. Among those who have COVID-19 test, 23% were confirmed infected. Of those who get the infection, 75% of them have no medical treatment. The treatment was paid by either themselves or employers (34%) and the host country government (13%). Only 1% was paid by the Indonesian government.
- Exploitation and forced labor seem faces by female migrants during the pandemic. Most of them had lockdown experience (92%), having long working hours (34%), working in isolation and no day off (29%), had experience salary/wage cut (9%), had salary/wages delay around a month (20%) and unable to send money to home (53%). Some of them reported should borrow money for fulfilling their basic need during the pandemic (18%).
- Female migrants are in a dilemmatic position. Even though most of them facing life difficulties in host countries, they do

not want to return to Indonesia. 21% of them said they do not plan to back to Indonesia in the coming year. 44% fear losing their job if they back to Indonesia. 34% fear of quarantine in Indonesia. 36% fear of getting virus infection in Indonesia. Most female migrants prefer to stay in the host country rather than their home country due to the worsening economic and pandemic situation in Indonesia.

- Mental health issues are a severe problem for female migrants now. 48% of them reported having mental health issues. 57% of them feeling nervous, anxious, or on edge, 49% of them not being able to stop or control worrying, 51% of them worrying too much about different things, 44% of them trouble difficulty relaxing, 41% of them being so restless, 42% of them becoming easily annoyed or irritable, 49 feeling afraid as if something awful might happen.
- Limited support from the Indonesian government during the pandemic. Only 16% seek health from Indonesia's embassy, and 63% of them reported they did not get help from the embassy to solve their problems. Movement restrictions and quarantine procedures restrict female migrants workers from seeking assistance and accessing legal support services from the embassy. The pandemic increase risk of violence and harassment and changing nature of labor rights violations come when violence response services, migrant support, and legal aid are hard to access.

### **Key recommendations for mitigating the impact of COVID-19 for female migrants**

Key recommendations for the mitigating impact of the pandemic are focused on returned female migrants as well as female

migrant workers who still work abroad. Ensuring gender-sensitive and human right based policies is needed for effective rapid mitigation responses. Some key areas that should be prioritised in the response are the following:

*For female migrant workers who still work in host countries:*

- With the implementation of ministry of man power regulation 294/2020, Indonesia's embassy should build technical agreements with the host countries government to provide health and safety measures to mitigate the pandemic risks, to access medical care and other social services for female migrants.
- The Indonesian government needs to advocate host country government and employers to allow female migrant workers to extend their visas and work permits and extend the deadline for renewals until movement restrictions and other lockdown measures are lifted.
- The Indonesian government needs to advocate for employers to retain migrant workers and provide flexible arrangements to ensure income and medical benefits are not lost at this time.
- The Indonesian embassy should provide and disseminate host countries' health and safety measures regulation in *Bahasa Indonesia*. Female migrant workers will well inform all host countries regulated related COVID-19 prevention.
- In doing so, they can work with migrant care organisations in every host country to disseminate various information relating to COVID-19 health risks and their services during the pandemic.
- The Indonesian government should develop a safety plan checklist to be disseminated widely, including female

migrant workers, for key information on what to do if exposed to violence and abuse.

- The Indonesian government should support quality psychological counseling to frontline service providers operating during the pandemic to cope with stress.

*For returned female migrants:*

- The Indonesian government and host country government should be strict with health protocol to provide secure and safe repatriation for female migrants who returned home during the crisis.
- A technical labor agreement between the Indonesian government and the host country government should be established to provide secure and safe repatriation for female migrants who returned home during the crisis.
- This agreement is needed to ensure that workers are not trapped due to lockdown policies, have a safe flight back home, and have secure COVID-19 isolation within shelters and quarantine facilities in Indonesia.
- The government, via the ministry of manpower and the ministry of social affairs, should include female migrant workers in the current social protection program, especially the social safety net program and salary/wage subsidy policy.
- The national and local government should maintain an essential budget for women empowerment programs for female migrants' survivors of domestic violence.