[TRANSLATION]

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The Vulnerability of Indonesian Migrant Workers in Facing the COVID-19 Pandemic

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The impacts of the development of COVID-19 as a global pandemic has been widespread. Not only does it cover health issues, but it also has serious implications on labour issues. On the 18th March 2020, the Minister of Labour of the Republic of Indonesia issued a Ministerial Decree (*Kepmenaker*) No. 151 year 2020 which stipulates a temporary suspension of the placement of Indonesian migrant workers. The labour ministerial decree was published after various protests, especially among migrant worker activists, when the Minister of Labour previously issued a Circular Letter which only concerned formal workers and neglected the vulnerability of migrant workers against the COVID-19 pandemic.¹

Not only neglecting the migrant workers' vulnerability, but the substance contained in the Circular Letter does not recognize the existence of workers in the informal sector such as domestic workers, homeworkers or migrant workers even though Indonesia's labour demographics are dominated by informal workers, with the majority being women. Up until 2019, 57 per cent of labour composition in Indonesia worked within the informal sector.² With regard to the labour migration sector, the growth rate of Indonesian migrant workers fluctuates by 1.1 per cent annually.³

Since there were no immediate measures taken to anticipate the impacts within the informal sector, these groups became vulnerable to be infected by the contagious disease. They insist on continuing their work as usual even after the Work from Home policy was issued. Another risk-taking action many workers in the informal sector are taking is the decision to return to their hometown for Eid much earlier than usual.⁴

¹ Indonesian Minister of Labour Circular Letter No. M/3/HK.04/III/2020 on Worker/Labour Protection and Business Continuity in the Context of Prevention and Control of COVID-19

² Sakernas BPS, 2019

³ Migrant CARE Outlook 2020, available at: http://www.migrantcare.net/2020/01/migrant-care-outlook-2020/

⁴ This week, various media coverage expressed concern that the mass return to hometowns early amid this pandemic could trigger an explosion of COVID-19 cases in Indonesia.

From the perspective of Indonesian migrant worker protection, the policy of temporarily suspending the placement of migrant workers is inadequate to break the patterns of migrant workers' vulnerability to the COVID-19 pandemic and its impact on long-term employment. The Ministerial Decree only stipulated the termination of the placement process for Indonesian migrant workers, primarily to the affected countries of the COVID-19 pandemic without comprehensively elaborating on the steps that must be taken to ensure the basic rights of Indonesian migrant workers are not eroded.

In the previous two articles⁵, the authors stated that Indonesian migrant workers are the first sector that experienced the direct impact of the COVID-19 endemic while they were still in the epicentre of mainland China and its surroundings. This sector had already experienced being in the middle of a panic buying situation in the country where they worked and concerns about their health condition when masks as a protection device became a rare commodity.

In early 2020, at the beginning of the COVID-19 endemic in China, Migrant CARE had delivered a notice to the Indonesian government to take action and concentrate on anticipating the spread of COVID-19 in Indonesia along with its impact on Indonesian migrant workers. This notice was delivered in the Migrant CARE Outlook 2020 which was launched on the 27th January 2020 as a data-based analysis of media monitoring and reports from Indonesian migrant workers residing in the initial epicentre of the spread of COVID-19⁶.

Indonesian Migrant Workers as the Victims in the Epicentre of the COVID-19 Pandemic

The phenomenon of Indonesian citizens' vulnerability in the midst of the COVID-19 endemic can be represented through a series of three cases involving Indonesian migrant workers. The first case that gained public attention was the incident of hundreds of Indonesian citizens isolated in the City of Wuhan, most of whom were there as students. This case also opened Pandora's box about the presence of Indonesian migrant workers working in mainland China. These migrant workers are concerned about the situation that they will be facing in relation to the isolation plan made by the Government of People's Republic of China. Moreover, the Indonesian government took a discriminatory action by only evacuating those who are "officially registered" as a student and dismissed complaints from Indonesian migrant workers.

The second case was the case of Indonesian crew members on board the Diamond Princess cruise ship. This is the largest COVID-19 endemic in a vessel, with 3,711 people on board as passengers and crews from various countries (including 69 Indonesian crew members). On the 1st February 2020, the novel coronavirus spread from a single passenger which later threatened all passengers and crew on board. Within the global monitoring of COVID-19 developments, the confirmed cases of coronavirus on the Diamond Princess is listed in the same category with states' confirmed cases due to its huge number of the COVID-19 victims⁸. A similar case also

⁵ Wahyu Susilo, "Stigma Karena Corona", opinion piece in Koran TEMPO, 7 February 2020 and Wahyu Susilo, "Bersama Melawan Korona, Bukan Menstigma", opinion piece in Media Indonesia, 6 March 2020

⁶ Migrant CARE Outlook 2020

⁷ BBC Indonesia writes about the complaints of Indonesian migrant workers in mainland China who face the anxiety of being infected by the coronavirus. Read "*Virus corona: Puluhan Ribu Buruh Migran Indonesia Kerja di China, 'Juga Perlu Ditangani Pemerintah*", BBC Indonesia 4 February 2020 available at https://www.bbc.com/indonesia/indonesia-51367811

⁸ On this site https://www.worldometers.info/coronavirus/ the development of the coronavirus case in a state and on the Diamond Princess cruise ship are listed in the same category.

happened on the Dream World cruise ship where there were 188 Indonesian crew members. On this ship, it was suspected that 8 passengers tested positive for COVID-19.

The third case is the press conference by the Singaporean government with respect to the coronavirus outbreak in which it announced the first known case on the 4th February 2020. One of the patients identified was an Indonesian migrant domestic worker in Singapore⁹. Contrary to the failure of the Indonesian government in protecting the personal data of the first COVID-19 patient in Indonesia, the Singaporean government strictly upholds the principles and protocols of personal data protection. Singapore also has a neat record and strict protocol for tracking cases of COVID-19. This efficiency may be due to Singapore's position as a city-state.

This string of cases relating to Indonesian migrant workers and COVID-19 highlights the vulnerabilities of this sector and of the workers from the beginning stages of the spread of this pandemic, starting with the undocumented workers in mainland China and followed by an understanding of the proximity Indonesian migrant workers had to the epicentre and the spread of COVID-19 (as shown with the case in Singapore and the crews of the Diamond Princess and Dream World cruise ships).

The events could have been a starting point to enforce preventative action by the Indonesian Government, particularly the Ministry of Labour who should have prepared a set of instruments to anticipate the impact of COVID-19 outbreak towards Indonesian migrant workers. Unfortunately, it was not enforced. Despite involving Indonesian citizens, the government still considers these cases as having occurred "outside Indonesia". The Indonesian government's negligence in underestimating the spread of COVID-19 in January-February is a form of NIMBY syndrome (Not in My Backyard). Not taking any significant preventive measures because the problem is not yet in sight is a fatal mistake.

Meanwhile, Indonesian migrant workers are experiencing greater vulnerability in facing the spread of the COVID-19 pandemic. The vulnerabilities they face are (1) exposure to the virus due to being in areas around the COVID-19 epicentre, (2) bearing a stigma as a carrier of the virus leading to restricted mobility and discrimination in access to services, and (3) experiencing an increase in workloads which can lead to conflict with employers.

The stigma of migrants being carriers of diseases is not new. During the SARS pandemic a decade ago, migrants were also targeted as being carriers of the virus. Before that, migrant workers were often also accused of being carriers of HIV/AIDS. Given these stigmas, policy development is often biased and tends to mainly focus on restricting freedom of movement but consequently ignores the sustained impacts of such restrictions faced by migrant workers.

Various reports that Migrant CARE has received based on surveys conducted by an Indonesian migrant worker organisation in Hong Kong has found that there has been an increase in workload for migrant workers with limited mobility due to isolation policies, coercion to work on designated days off and an increased use of chemical substances when cleaning. The reports also highlight that despite the increased workload, migrant workers have not been receiving any salary adjustment and are unable to receive adequate vitamin intake. This situation can

⁹ The first case experienced by Indonesian migrant workers in Singapore was recorded as the 21st case. In its development this case was declared cured. Available at https://www.gov.sg/article/covid-19-cases-in-singapore#week-3:-3-feb---9-feb

trigger conflict between the migrant worker and their employer which could lead to termination of contract.

The situation for migrant workers in this time of the COVID-19 pandemic is highlighting that those working in the field of nursing, of which women migrant workers are a part, are the most at risk and on the front line, exposing them further to the deadly virus. This is a confirmation of what has already been shared by UN Women¹⁰.

The reality of these conditions for Indonesian migrant workers in the healthcare sector must also be made known to the Indonesian government. Data regarding the placement of migrant workers in the healthcare sector compiled by Indonesian Migrant Worker Protection Agency (BP2MI)¹¹ shows that between 2017-2019 there were at least 150,907 nurses, 198 midwives and 20 assistant midwives. They work in various destination countries that are now also areas of the COVID-19 pandemic. As a side note, the Indonesian government has been working with the healthcare sector as part of a 'government to government' program which places Indonesian migrant workers in Germany and Japan.

On the 18th March 2020, the Government of Malaysia began enforcing a total lockdown. This measure has certainly had an influence on Indonesian migrant workers in Malaysia. Similar to the situation in Hong Kong, this lockdown in Malaysia has also made the Indonesian migrant workers in the domestic sector have increased workloads without any additional pay. Meanwhile, for the Indonesian migrant workers across the sectors of construction, factories, hospitality and cleaning services who normally receive a daily or weekly wage, the lockdown measure threatens the continuation of their work due to restrictions on modes of transport as well as workplace closures¹².

The enforcement of lockdown measures by the Malaysian government, known as *Perintah Kawalan Pergerakan*, or translated from Malay language as Movement Control Order, set originally until 31st March 2020 will be extended until 14th April 2020. These measures impact the consular and immigration services carried out by Indonesian representatives in Malaysia.

This situation has led Indonesian migrant workers who need to renew their documents into an uncertain situation. The Indonesian representatives overseas have issued appeals through an annual Circular Letter which have not yet provided concrete solutions or alternative options to address food shortages and the threat of job losses facing Indonesian migrant workers. Services that are provided are limited to telephone correspondence¹³.

At the same time, despite Malaysia being in a state of lockdown, in the past week there have already been thousands of undocumented Indonesian migrant workers deported. This mass movement of people not only makes the migrant workers more vulnerable to COVID-19

¹⁰ UN Women, "The COVID-19 Outbreak and Gender: Key Advocacy Point from Asia and The Pacific" https://asiapacific.unwomen.org/en/digital-library/publications/2020/03/the-covid-19-outbreak-and-gender diakses 27 Maret 2020.

¹¹ Data processed from statistics about the placement of Indonesian migrant workers from the Indonesian Migrant Worker Protection Agency (BP2MI).

¹² Read Kompas.com "*P3WNI: Pekerja Migran Indonesia di Malaysia Tak Takut Covid-19, tetapi Takut Kelaparan*", https://nasional.kompas.com/read/2020/03/26/16251661/p3wni-pekerja-migran-indonesia-di-malaysia-tak-takut-covid-19-tetapi-takut

¹³ See the Circular Letter by the Embassy of the Republic of Indonesia in Kuala Lumpur on 16th March 2020 http://kbrikualalumpur.org/w/2020/03/16/perkembangan-covid-19-hingga-16-maret-2020-di-malaysia-dantindakan-pencegahannya/

exposure but also put the border areas of both countries at higher risk for the COVID-19 disease transmission.

In Saudi Arabia three cities have also been in a state of lockdown; Mecca, Medina and Riyadh. Lockdown measures in Indonesian migrant worker destination countries like these add to the vulnerabilities female migrant workers face with regards to gender-based violence. Moreover, there are still many undocumented Indonesian migrant workers in Saudi Arabia which puts them in a precarious situation with the threat of deportation.

These complexities faced by Indonesian migrant workers in the context of this COVID-19 pandemic do not feature in updates provided by the Indonesian Ministry of Foreign Affairs. These updates report only the quantity of Indonesian migrant workers infected abroad, not shedding any light on their vulnerable positions¹⁴.

Recommendations

This insight into the complexities of the problems facing Indonesian migrant workers in the COVID-19 crisis highlights the tendency for reactive policies which are not based on the experiences of vulnerabilities these migrant workers face, and which do not meet their concrete needs.

Specifically, Migrant CARE urges:

1. the Indonesian Ministry of Labour to produce policies to manage the COVID-19 pandemic which are inclusive, gender-sensitive and prioritise fulfilling worker rights as well as human rights.

2. the Indonesian Ministry of Foreign Affairs to ensure the provision of complete services for Indonesian migrant workers to access information and emergency assistance for those in areas experiencing lockdown.

3. the Agency for the Protection of Indonesian Migrants Workers to provide updates on the situations and conditions of migrant workers in the healthcare sector which has so far not been communicated during this COVID-19 crisis.

Migrant CARE also stresses that:

1. The Social Protection policies for managing this pandemic must not overlook the vulnerabilities which have become a reality for Indonesian migrant workers in destination countries as well as their home communities.

Socialization and management measures aimed at mitigating the spread of COVID-19 must actively involve migrant worker organisations in destination countries, their home communities as well as village-based migrant worker protection initiatives (Desbumi, Desmigratif and KKBM). Moreover, these strategies must maximise social media platforms and information channels accessed by Indonesian migrant workers and their families.

¹⁴ According to the Ministry of Foreign Affairs' monitoring on 25 March 2020, there were at least 79 confirmed cases of COVID-19 amongst Indonesian citizens abroad. The highest cases were in Singapore, Malaysia, India, followed by Japan and Saudi Arabia.

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