Exploring the Nexus of Covid-19, Precarious Migration and Child Labour on the Cambodian-Thai Border

Il Oeur, Sochanny Hak, Soeun Cham, Damnang Nil and Marina Apgar

June 2022
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Research Report

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Summary
This report shares findings from qualitative research on the impacts of Covid-19 on Cambodian migrant workers in four sites along the Cambodia-Thai border. Government restrictions in Thailand and the border closure in February 2020 led to job losses and reduced working hours, and ultimately to an increase in the rate of return migration. Return migrants were forced to use informal points of entry with the facilitation of informal brokers, facing increased costs and risks and, in the process, becoming undocumented. This report shows an unequal access to health services between documented and undocumented migrants. Even in the context of Covid-19, some migrants continue to travel with young children who support the family, mostly through light agricultural work.

Keywords
Cambodia, Child Labour, Covid-19, Migration, Thailand

Authors
Il Oeur is Executive Director of the Analyzing Development Issues Centre (ADIC) and was a team leader on the project that delivered this report. He has been studying issues of migration since 2005 in different parts of Cambodia. His interests are child labour, indigenous people, migration, and natural resource governance.

Sochanny Hak is a Research Fellow at ADIC and was a researcher on the project that delivered this report. She has engaged in research on migration since 2015. Her interests are migration, gender roles and migration, indigenous people, and land governance issues.

ORCID ID: 0000-0003-3077-6478
Soeun Cham, PhD, is a Senior Research Fellow at ADIC, and was a researcher on the project that delivered this report. He has been engaging on migration issues since 2018. His interests are migration, child labour, social protection and social well-being, education, and Technical and Vocational Education and Training (TVET) and skills.

Damnang Nil is a Research Associate at ADIC and was a team member on the project that delivered this report. He has been participating on a similar study since 2018 with ADIC and the International Organization for Migration. His interests are child labour, migration, and educational development.

Marina Apgar is a Research Fellow at IDS and provided technical oversight of the research design, implementation, and analysis, as well as co-authoring this report. She is Deputy Director of the IDS-led Child Labour Action Research in South and Southeast Asia consortium, focused on drivers of the worst forms of child labour.
Executive Summary

This report shares findings from qualitative research on the impacts of Covid-19 on Cambodian cross-border migrants. Cambodian migrant workers, forced into Thailand by poverty and a lack of employment opportunities in rural Cambodia, have faced poor working conditions and exploitation along migration channels for decades. Conditions for migrant workers, both in Thailand and at home in Cambodia, have been degrading consistently since the onset of the pandemic. Government restrictions in Thailand, especially the border closure in February 2020, and associated job losses and reduced working hours, led to an increase in the rate of return migration. Returned migrants were forced to use informal points of entry (PoE) to cross the border with the facilitation of informal brokers. They faced high costs for the return journey, often endangering their lives by travelling at night through forests, taking the risk of becoming undocumented in the process. In spite of this increased precarity in migration conditions, migrants are still returning to Thailand to seek new opportunities, attempting the perilous journey back in spite of the increased risks.

The impact of Covid-19 has not only been on the migrant’s journey and their employment in Thailand, but also on access to health services. We found that documented migrants had some access to healthcare in their workplace and at public health facilities. Those who were undocumented, however, did not have the same access, and had to cover their own Covid-19-related healthcare costs. We found that access to healthcare is linked to whether or not migrants hold formal working documents obtained in Cambodia or Thailand, through efforts in coordination assumed by Thai employers. Furthermore, despite fearing Covid-19 infection, migrants have been denied vaccinations, illustrating a further inequality in public health measures.

Even in the context of Covid-19, we found that migrants continue to travel with young children who support the family. We identified cases of under-age children accompanying their parents to take care of younger siblings and engage in light duty work, mainly in the agricultural sector. Children are migrating and entering the workforce and as a result, discontinuing their education.
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Acronyms

ADIC       Analyzing Development Issues Centre
ANKO      Akphivat Neary Khmer Organization
AS         Aphiwat Strey Organization
CDRI      Cambodia Development Resources Institute
CLMTV     Cambodia, Lao, Myanmar, Thailand, and Vietnam
Covid-19   Coronavirus disease 2019
CSOs       Civil society organisations
FCDO       UK Foreign, Commonwealth and Development Office
IDS        Institute of Development Studies
IOM        International Organization of Migration
MFI        Microfinance Institution
MoH        Ministry of Health
MOL        Ministry of Labour
MoLVT      Ministry of Labour and Vocational Training
MoP        Ministry of Planning
MOPH       Ministry of Public Health
MoU        Memorandum of Understanding
NGO        Non-governmental organisation
NIS        National Institute of Statistics
OECD       Organisation for Economic Cooperation and Development
PIS        Participant Information Sheet
PoE        Point(s) of entry
RGC        Royal Government of Cambodia
TCO        Trailblazer Cambodia Organization
TVET       Technical and Vocational Education and Training
WFP        World Food Programme
WHO        World Health Organization
1. Introduction

Cambodia has made significant economic progress since opening up to the market economy, which has encouraged private investment from national and international investors. The country has also expanded its regional economic cooperation and become better integrated with the ASEAN community. Improvements in economic performance contributed to an average annual economic growth rate of 7.7 per cent between 1998 and 2019 (World Bank 2022). Cambodia has also shifted from being highly dependent on agriculture towards a more industrial- and service-orientated economy. Despite this remarkable economic performance, the country still faces several major challenges including a labour-intensive industrial sector and relatively low-valued labour particularly within its garment and footwear factories (ibid.). The labour market is still dominated by poorly educated and low-skilled workers (CDRI 2013). Despite an overall decrease in poverty rising income inequality remains a major concern (So et al. 2015). Rapid economic growth has been followed by population movements, especially out-migration to neighbouring countries which attracts many rural Cambodians (CDRI 2009; FitzGerald and Sovannarith 2007; IOM 2010).

Migration has played a critical role for many households by enabling them to cope with financial crises, improve their housing and cover their food costs, and has contributed to overall poverty alleviation more generally (Roth et al. 2014; Tong 2011). Hence, migration has influenced household decision making and labour market changes. Migration has become more dynamic and divergent, with a marked increase in the pattern of remittances. Sixty-four per cent of the total migrant population in 2020 was between 15 and 64 years old (Statista 2022), and 15 to 54 year olds (the prime working age population) made up 59 per cent of the total population (Indexmundi 2021). This suggests the young age that many migrants enter the workforce. While many migrants work within Cambodia, others decide to migrate across borders, seeking higher wages. In 2018 roughly 1.23 million Cambodians were working abroad, of which 1.15 million were working in Thailand (NIS 2020). Thailand is the major destination country for most Cambodia migrants, followed by South Korea, Japan, Malaysia, Singapore, Saudi Arabia, and Hong Kong (NIS 2020).

Historically, most Cambodian migrants have used informal channels, crossing without legal travel documents, and thus are considered undocumented or illegal migrants. The largest population of undocumented Cambodian migrants are in Thailand due to its proximity and easy land access. Informal channels are often preferred as the process is less complicated and cheaper (CDRI 2009). The cost of legal migration was estimated to be around US$700 and takes between three
and six months. Illegal channels, on the other hand, cost only around US$100 with the process taking only a few days (CDRI 2009). However, in recent years, there was an increase of migrants opting for legal or formal channels of migration through recognised recruitment companies supported by a Memorandum of Understanding (MoU) between the sending and receiving countries. There was a marked increase in the use of legal and recognised channels of migration to Thailand, from fewer than 10 per cent in 2012 to approximately 87 per cent in 2018 (NIS 2020; Tunon and Khleang 2013).

Most seasonal migrants work without employment contracts and usually work on agriculture farms, making it easier for them to change employers or return home as they wish.¹ Other sectors employing Cambodian migrants include the construction and manufacturing sectors (OECD and CDRI 2017). Migration journeys are most often facilitated by brokers or experienced migrants (who may currently work in Thailand or have already returned to Cambodia) (ibid.). Informal networks (friends or migrants) are vital in facilitating the journey to Thailand, built on existing relationships among migrants and potential migrants. The number of (documented and undocumented) migrants reported by authorities have likely been underestimated given the informality involved, and the prevalence of seasonal migration. The migrating population can be considered to be always on the move. During the Covid-19 outbreak, migrant workers faced job losses, with the seasonal and undocumented migrants especially vulnerable.

Against this backdrop, anecdotal evidence was emerging in early 2021 that conditions for migrant workers, both in Thailand and at home in Cambodia, have been degrading consistently since the onset of the pandemic. It seems that as a result of the closure of businesses as part of the government response to Covid-19 in Thailand, by early 2021 the rate of return migration to Cambodia was increasing significantly. In this period migrants faced a high risk of contracting Covid-19 on their return journey – for example, the Administrative Office of Battambang province reported that of 4,670 (2,058 women) returning migrants, 510 (261 women) had contracted Covid-19 between April and June 2021 (Battambang Governor’s Office 2021).

As the pandemic continued to evolve, the prolonged crisis in Southeast Asia and the ongoing challenging conditions in rural Cambodia was, in turn, forcing many to attempt the journey back to Thailand in spite of the limited opportunities for decent work. The potential for brokers to become more active and take advantage of this pattern of precarious migration in both directions has created an increased risk of human trafficking. While some anecdotal evidence has emerged around the increase in numbers of children migrating and entering the

¹ Seasonal migrants are those who work on a short-term basis of between three to nine months (WFP 2019). Seasonal migrants are mostly undocumented, or they may use border passes with the option to renew these monthly to remain in Thailand.
workforce, there remains little understanding of the dynamics of the nexus of Covid-19, precarious migration, and longer-term impacts on the increasing prevalence of child labour.

This report shares findings from in-depth qualitative research based on interviews with 80 returned migrants in four sites in three provinces. This qualitative study provides empirical evidence of the impact of Covid-19 on the patterns of migration and pathways in and out of Thailand. In the following section we present findings from a literature review including both published and grey literature on the evolving context of Covid-19, presenting a timeline with government responses and key ‘moments’ of the pandemic. After briefly describing the research methodology and case selection process we present our key findings in key themes from cross-case analysis, in response to the overarching research question from Section 1.2. This is followed by a presentation of the results of the qualitative interview analysis conducted with return migrants or families of migrants from each of the four case study sites. We conclude with some reflections on policy implications which are feeding into the production of a policy briefing, to be presented to decision makers in the three provinces of focus.

1.1 Research focus

We define migration following the definition of the Cambodian Population Census of 2019 as ‘the geographic movement of people across a specified boundary for the purpose of establishing a new permanent or semi-permanent residence’.

Migration is the act of moving from one place to another, while the term ‘migrant household’ refers to the household of the person who migrates (even if not all members of the households migrate). Generally, there are two forms of migration: short-term or seasonal migration, and long-term migration. Short-term or seasonal migration is migration lasting three to nine months (WFP 2019) and does not include employment contracts. Long-term migration is migration that lasts for ten months or longer. Given that the focus of this study was on impacts of Covid-19 on cross-border migrants we did not distinguish between the type of migration in the sample which includes both short- and long-term migrants.

This research was led by Analyzing Development Issues Centre (ADIC) in Cambodia and built upon their longstanding research on cross-border migration, including research on the lived experience of migrant workers undertaken in partnership with the University of Sussex-led ‘Migration out of Poverty’ programme in 2015 (Nurick and Hak 2019). A key output from this project was a

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Further details of this project can be found here.
comic book which narrates some of the challenges of cross border migration to Thailand without documents, both during travel and while working, such as experiences of police raids at construction sites. Migrants narrated how they had to hide and worked in extremely difficult conditions. Some were luckier than others when good employers provided high relative incomes, allowing remittances to be sent home. Upon returning home, the same challenging journey had to be endured.

More recent work with Mahidol University, Thailand, and three local NGOs including Trailblazer Cambodia Organization (TCO), Aphiwat Strey (AS), and Akphivat Neary Khmer Organization (ANKO) in three provinces of Siem Reap, Battambang and Pursat, focused on ‘Promoting Safe Migration amongst Temporary Cambodian Migrants to Thailand’ (Sakulsri, Nurick and Oeur 2020). The study explored migrants’ experiences under the bilateral agreement framework. The research found that migrants were becoming more knowledgeable about laws and regulations and outlined the differences in the cost of formal and informal migration procedures. This assessment illustrated that formal migration is a time-consuming and complicated process, with unfair treatment not uncommon. The research highlighted the need for awareness-raising around safe migration, including where and how to get legal documents. There is also a need for a clearer specification of the costs and duration of the process for migrants in both sending and receiving countries.

1.2 Research objectives

This research aimed to investigate the impacts of Covid-19 on cross-border migrants through documenting and analysing the lived experience of migrants. In particular, we sought to explore the shifting patterns of migration in the context of Covid-19 and identify any implications for child labour. We responded to the overarching research question:

- How has Covid-19 impacted the patterns of migration of Cambodian migrant workers and what, if any, are the implications on patterns of child labour within this vulnerable population?
2. The context of Covid-19 and migration in Cambodia

In this section we present key themes from a literature review, which aimed to situate the succeeding exploratory study in the broader context of migration and Covid-19 in Cambodia.

2.1 The timeline of Covid-19 and responses to it

The initial outbreak of Covid-19 had mild impacts on economic activities in Cambodia and Thailand, despite the growing threat of the virus to public health. The first cases of Covid-19 in Cambodia and Thailand emerged in January 2020. In response, both countries took immediate measures to contain the virus. In Cambodia in the first and second quarter of 2020 there were only 122 reported cases of Covid-19 and no associated deaths (Djalante et al. 2020). Despite the low rate of cases of Covid-19, Cambodia issued several measures to contain the virus including self-quarantine, cancelling celebrations of Khmer New Year, and issuing economic stimuli (Rebeca 2020). The government established a special committee for a rapid response to Covid-19 in February 2020; introduced restrictions on arrivals into the country; closed educational institutions, garment factories, and entertainment venues; and cancelled all major holidays (Rebeca 2020; Xinhua 2020). Cambodia was praised for successfully containing the virus in July 2020. However, from February to April 2021, the country experienced the largest community outbreak of Covid-19, which led to lockdowns in major cities.

The vaccination programme commenced in February 2021 (see Figure 2.1). By the end of 2021, over 96 per cent of the adult population aged 18 years old and over had been fully vaccinated (IOM 2021). The programme first started with government officials and was then rolled out to all citizens. Returned migrants were prioritised for Covid-19 vaccination along the border to make sure they were protected when they returned to their home village or returned to their workplace in Thailand (ibid.). Covid-19 vaccines were and still are offered free of charge to all Cambodia citizens. The government expanded the coverage age to

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3 The response committee consists of key officials from various ministries including the army, national policymakers, national military police, governors of all the cities, and state employees involved in the process across the kingdom. The roles of this committee are to set national policy and strategy related to the fight against Covid-19 and to control the impact of the virus on politics, economy, and society at national and international levels.

4 Highlighted by reported remarks from the WHO Director General.

5 Provinces located along the Thai-Cambodia border providing Covid-19 support for migrants included Banteay Meanchey, Oddar Meanchey, and Battambang. Within these provinces, vaccine teams were stationed along the border to make sure that migrants received the jabs before returning from or leaving for Thailand.
three years old in February 2022 to prepare the country for a full reopening to tourists.\(^6\)

Similarly, Thailand was placed under a state of emergency, which included a partial lockdown from March to April 2020, and a ban on incoming flights introduced in April 2020. Major public holidays such as the Sangkran celebrations were cancelled. The government introduced economic stimuli to support businesses. In October 2020, Thailand eased restrictions in order to attract tourists. However, in December 2020 and April 2021, the largest community outbreak appeared in Thailand, which led to the mass testing of migrant workers for Covid-19. Travel restrictions on specific highly affected areas were also imposed. However, the Sangkran celebration was celebrated once again in April 2021. The Covid-19 vaccination programme started in February 2021, but without the inclusion of migrant workers.

The Cambodian-Thai border was closed from March 2020 until December 2021. Despite the border closure, trade continued to operate, while no human movement was allowed. Despite the low cases of Covid-19 in both countries, a huge number of migrant workers (an estimated 100,000) returned to their homes in Cambodia between January and May 2020 (IOM 2020). This reflects the severe economic impact of job losses and the uncertain situation of Covid-19 on employment opportunities.

\(^6\) As highlighted within this Xinhua news article.
Figure 2.1: The evolution of the Covid-19 pandemic in Cambodia and Thailand from January 2020 to November 2021

The Cambodian government issued a statement to provide social assistance to support the poor and vulnerable households affected by the Covid-19 virus and lockdown restrictions in April 2021. Support to families residing in Phnom Penh and Takmao (close to Phnom Penh) was first announced for those most affected by lockdown measures, as well as members of Covid-19 victims nationally. Through the government’s cash transfer programme, poor households in urban areas (such as Phnom Penh and Takmao) received US$30, while rural areas received US$20 (Sen 2021). Further, Covid-19 patients received a payment in the range of US$40 to US$60, with the amount dependent on their number of household members. In addition to the cash transfer programme, the government also provided a one-off food aid package comprising of 25kg of rice, a case of instant noodles, six bottles of fish sauce, and six bottles of soy sauce (ibid.). However, the emergency relief programmes did not specify if returned migrants would receive the benefits, causing uncertainty. Moreover, the emergency relief programmes were short-term. The plan for long-term support of those who were hardest hit by the virus or responses to it was unclear in the government’s response.

All people entering Cambodia via air or overland received a free Covid-19 rapid test upon arrival or at the border. If they tested positive for Covid-19 they were

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7 Member(s) of the deceased household who died of Covid-19 received US$500 from the government (Mom 2021).
sent to Covid-19 treatment facilities, while those who were Covid-19 negative were sent to quarantine facilities. The required quarantine period was between 14 and 21 days dependent on the Covid-19 test results. The Covid-19 test and treatment were offered free of charge to all Cambodians including returned migrants from abroad (Sen 2021).

Special units for Covid-19 monitoring and control were assigned to the border areas and each point of entry (PoE)⁸. Due to the Covid-19 outbreak affecting both Thailand and Cambodia, the border between the two countries has remained closed since March 2020 which has caused a significant barrier for migrant workers wishing to return home.⁹ In June 2021, the Cambodian prime minister advised migrant workers not to return to Cambodia in order to control the spread of the virus from Thailand into Cambodian communities. In spite of this advice, hundreds of migrant workers made their way home to their villages through informal PoE. Since start of the pandemic through to the end of 2021, there were over 260,000 migrant workers returned from abroad, and a large number of them were from Thailand (Lay 2021).

2.2 The Covid-19 pandemic, health care and social protection

Two social protection schemes operated by the Ministry of Public Health (MOPH) cover unregistered migrant workers and their dependents: the Social Security by Social Security Office of the Ministry of Labour (MOL), and Year-by-Year Health Insurance Program of MOPH for migrant workers. Coverage, however, has been consistently low over the years. In 2013, the Social Security scheme covered less than half of eligible migrant workers and the year-to-year scheme covered less than 63 per cent. Further, only 7.8 per cent of eligible children were covered by health insurance. Even when migrant workers have health insurance, they still face other obstacles when seeking care including language, fear, and a lack of networks (IOM 2019).

2.3 Migration of children and child labour

Migration has a huge impact on parents of migrant children because the reduced household workforce leads to reduced farm productivity (FitzGerald and

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⁸ A PoE is an informal border passing place which the border authorities of both Cambodia and Thai, following the policy at the time, agreed to use to allow migrant workers to cross the Thai-Cambodia border using daily/weekly border passing tickets, known as a border pass.

⁹ As of November 2021, the Thai-Cambodia border remains closed (November 2021 being the most relevant date for returnee migrant participants in the study). The border authorities on both sides have been discussing the reopening of the border for residents, passengers, and tourists but have not reached an agreement yet, primarily due to a lack of agreement form the Thai authority. Despite the border being closed to persons, it remains open for goods and trade. This article provides more detail on the situation.
Sovannarith 2007). Others argue that as families average four or five children, one child migrating contributes monetary support while others remain with elderly parents (Hak et al. 2013). Parents often cover the cost associated with the early stages of the migration process for their children, indicating that parents expect that their migrant child or children will contribute to the household’s income, and showing that debt to support migration is often held by the whole family.

Much of the child labour across the Cambodian-Thai border is of underage children who work as day labourers in the agriculture sector, while older children work in construction. Child protection issues related to migrant populations are common, including sexual and physical abuse of children by their relatives. Cases of children being forcibly returned to Cambodia or detained in shelters for long periods of time and held against their will have also been reported, which have linkages to the arrest of their parents (UNICEF 2017).
3. Research methodology

3.1 Site selection

The Pursat, Battamang and Banteay Meanchey provinces were selected as the target areas for the study. The main selection criteria was the prevalence of cross-border migration. All three provinces are located in the middle of migration flows along the Thai-Cambodian border forming part of the main migration corridor. The three provinces are mainly agricultural provinces; thus, seasonal migration is a supplemental livelihood activity for households.

The research design purposefully sought to make use of data on migrant experiences from two previous studies in 2015 and 2018, providing the potential for a comparative view of the patterns of migration prior to and during the Covid-19 pandemic. The initial study in 2015 was conducted in the Bakou village of the Kandieng district in the Pursat province (see Figure 3.1). The focus was on the impacts of the change of the Thai government policies to returned migrants, and consequently all of the migrants selected were undocumented migrants. The second study in 2018 was also conducted in Bakou and four villages in Battambang’s Prek Norin commune, and focused on safe migration. In the second study we found that some undocumented migrants had shifted to becoming documented migrants, illustrating a general trend towards a seeming reduction in precarious migration in recent years.

To enable comparative research, Pursat and Battambang were purposefully retained as the main study sites for this project’s research. Reaching the same respondents as the 2015 and 2018 studies proved difficult, however, given the high levels of mobility of the migrant population. The additional sites of Kamrieng in Battambang and Malai in the Banteay Meanchey province are closer to the border areas and part of ‘border corridors’, which allowed migrants access even during the difficult conditions of Covid-19, and so were hotspot locations for this study on the impact of Covid-19. In these two districts, there were verbal reports by key informants during the pre-visit of the ADIC team on the patterns of child labour which suggested that working in these sites could allow some exploration of the relationship between migration and child labour.
Figure 3.1: Study locations, 2022

Source: Adapted from Map Data © 2022 Google. Reproduced with permission. All rights reserved.

3.2 Methods

Prior to the fieldwork, data collection instruments were developed in Khmer and English. Six research assistants, from ADIC, AS, and ANKO, were trained by the core team members. The objectives of the fieldwork orientation were to reach a common understanding of the research process, and to test guiding questions and recording techniques. The research assistant and the core team members discussed data collection preparation stages, data collection, and data analysis. Each of the four core members of the research team were responsible for one research site, and were supported by two research assistants, one being from a local NGO working in the research site.

Data collection was conducted in two stages. The first stage involved a preparatory visit to the study sites conducted in December 2021. The preparatory visit was conducted in order to inform local authorities (the district governor, commune chief, and village chiefs) about the study objectives and fieldwork schedule in the respective locations. The ADIC team members

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10 This research was a collaborative effort between three local NGOs of which ADIC (Analyzing Development Issues Centre) was the leading partner; AS (Aphiwat Strei Organization) and ANKO (Aphiwat Neary Khmer Organization) were implementing partners based in Battambang and Pursat, respectively.
verified the village information about migration, obtaining a list of migrants from the respective village chief with the support of the local NGO partners. The information collected during the pre-visit focused on the availability of migrants in the village at the time of the fieldwork, verifying migrants’ information and selecting only those who fitted one of more of the following selection criteria:

- Migrants who experienced working in Thailand either on a short-term (between three to nine months) or long-term (not less than ten months) basis.
- Migrants who had returned between January 2020 and November 2021.
- Adult migrants and children from 12 to 18 years old who experienced migration either on their own or with their parents, and who could share their experiences and thoughts.\(^{11,12}\)
- Those who were willing to talk with the research team for at least 90 minutes uninterrupted.

The second stage included the final selection of respondents and interviewees. Twenty migrants from each site were selected from the main list based on selection criteria listed above. The village chiefs supported recruitment by making appointments with the respondents. All respondents were first informed about the research objectives through a Participant Information Sheet (PIS) and were asked to sign a consent form to agree to participate in the study\(^{13}\). For respondents under 18 years old, one of their parents or guardians currently living with them provided the consent either verbally or by signing the consent form.\(^{14}\) Interviews were conducted in January 2022 over a week in each location. All interviews were conducted in Khmer language and digitally recorded. All recordings were verbatim transcribed into Khmer.

Evidence from secondary sources was used to complement and verify primary data where appropriate. This included grey literature such as official policy documents, government statistics on migrants and returned migrants, and NGOs reports, as well as published literature on migration.

\(^{11}\) According to the Cambodia Labour Law, any person under 18 years old are minors and they cannot sign an employment contract without the consent of their parents or guardians (RGC 1997). However, the law allows children aged 12 to 15 years old to be hired for light work that is not hazardous to their health or mental or physical development, so long as it does not affect their school attendance or training programmes (RGC 1997; RGC 2007).

\(^{12}\) Informed consent from respondents under the age of 18 years old was obtained from one of their parents or guardians currently living with the children.

\(^{13}\) Verbal consent was taken from respondents who could not read or write.

\(^{14}\) A specific consent agreement was given to respondents under 18 years old. At first, the research team approached one of the parents or guardians of the potential under-age respondents to explain about the research objectives, the questions to be discussed, and how the results would be used (as shown in PIS). After gaining the agreement of the parent or guardian, the research team approached the potential under-age respondents to acquire their agreement. Then, the research team assured the respondents of the anonymity and confidentiality of their answers, and that they could refuse to answer any questions that they felt uncomfortable with.
3.3 Data analysis

The process of data analysis involved data preparation, sensemaking and interpretation, and data presentation. Content analysis was the basic approach to qualitative analysis, to identify key patterns (Patton 2014). The core members of the research team first analysed the interview transcripts from the research sites by reading the transcripts to identify broad patterns. An agreed coding framework was developed, and each team member coded the data using the framework. Themes were developed from the main categories identified. Case specific narratives were developed, drawing out from the four case study sites. In the final stage, a synthesis of the case study was developed to identify common trends and understand the similarities and differences (if any) between the discussions at each research site.

Figure 3.2: Steps in the data analysis process

There were a total of five common themes which emerged from the transcripts coding:

1. General patterns of migration.
2. Impact of Covid-19 on travel arrangement and type of work.
3. Access to health services.
5. Child labour.
Based on these themes, detailed descriptions and narratives were constructed to illustrate common patterns related to migration experiences (journeys) and the impacts of Covid-19 on individual migrants, including how they coped with the impacts affecting their livelihoods. Life stories from migrants were selected to present in a box to illustrate the common understanding of migration challenges or successes, how migrants dealt with their own challenges, or their perspectives on successful migration.
4. Key findings

In this section we present the key findings through a synthesis of the themes emerging from analysis of data gathered from across the four sites, organised in relation to the research question. In the following section we share the content analysis from the in-depth interviews conducted at each site (80 respondents in total).

4.1 Characteristics of the respondents

Of the 80 respondents at the four sites, 54 were female and 26 were male (see Table 4.1).

The youngest respondents were 15 years old and the oldest was 58. While respondents aged between 15 to 24 include an equal number of male and female (5:5), the three youngest were female. While we cannot assume this is representative of broader patterns of migration, we do know that young female migrants tend to receive more support from their relatives or employers (Nurick and Hak 2019). Some respondents indicated that their experiences of migration started when they were young teenagers and have continued since that point.

Similarly, the majority of respondents aged 25 to 34 years old were female. Of the 80 respondents, 33 were IDPoor\(^{15}\) and 47 were non-IDPoor households. Yet half of the 33 IDPoor households said that the cards were not valid at the time of their migration.

In terms of marital status, a large number of respondents were married (63 out of 80), of which 45 were female. Thirteen of the migrants were single, and of these the split between male and female was almost equal in proportion.

A large number of married migrants (50 out of the 80 respondents) reported to have migrated as a married couple; husband and wife, leaving their young children with the children’s grandmothers at home in the village. A few migrating couples also brought their teenage children with them (aged 15 to 17).

While our sample was not representative, the largest number of respondents were female, married, and aged between 15 to 44 years, so there is greater representation from this group. This coincides with other reports indicating that

\(^{15}\) IDPoor is the Cambodia national poverty identification programme for the identification of poor and vulnerable households, with the intention of providing them with free services and assistance, and to assist service providers in directing their services towards these groups. IDPoor identification is undertaken once every two years. Households who meet the criteria receive an IDPoor card (or Equity card) which they can use to claim free public services (particularly in relation to health services) across Cambodia.
women are changing traditional norms of ‘women could not turn around the stove’\textsuperscript{16} by moving outside of house and home to work and contribute to the household income. Based on the labour force participation survey, female labour increased from 77.5 per cent in 2014 to 84 per cent in 2019, and more of these women are migrating to work in Thailand (RGC 2019). In addition, a greater number of young (aged 15 to 24) women compared with young men migrated to work abroad (34.4 per cent female vs 28.7 per cent male) (NIS 2020). With regard to remittances, more women than men in this age group regularly gave income to their parental households (25 per cent female vs 11 per cent male) (MoP 2012).

\textsuperscript{16} ‘Women could not turn around the stove’ is a proverbial saying illustrating Khmer’s traditionalist culture and society, where women are considered to be those working around the house, taking care of the household and the household members, including child care and undertaking chores.
Table 4.1: Characteristics of respondents

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Female</th>
<th>Male</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>54</td>
<td>26</td>
<td>80</td>
</tr>
<tr>
<td>Male</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td>80</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 to under 18 years</td>
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<td>3</td>
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<tr>
<td>18 - 24 years</td>
<td>2</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>25 - 34 years</td>
<td>25</td>
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<td>29</td>
</tr>
<tr>
<td>35 - 44 years</td>
<td>15</td>
<td>12</td>
<td>27</td>
</tr>
<tr>
<td>45 - 54 years</td>
<td>8</td>
<td>3</td>
<td>11</td>
</tr>
<tr>
<td>55 - 64 years</td>
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<td><strong>Total 15 - 64 years</strong></td>
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<td><strong>Total 15 - 24 years</strong></td>
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<td>5</td>
<td>10</td>
</tr>
<tr>
<td><strong>Education level</strong></td>
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<td></td>
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<tr>
<td>No schooling</td>
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<td>2</td>
<td>11</td>
</tr>
<tr>
<td>Primary level (1-5)</td>
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<tr>
<td>Lower secondary level (6-9)</td>
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<td>16</td>
<td>32</td>
</tr>
<tr>
<td>Upper secondary level (10-12)</td>
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<td>0</td>
<td>4</td>
</tr>
<tr>
<td><strong>Marital status</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>45</td>
<td>18</td>
<td>63</td>
</tr>
<tr>
<td>Single</td>
<td>7</td>
<td>6</td>
<td>13</td>
</tr>
<tr>
<td>Separated/divorced</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Widowed</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td><strong>Migration duration</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 1 year</td>
<td>1</td>
<td>4</td>
<td>5</td>
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<tr>
<td>1 – 3 years</td>
<td>21</td>
<td>7</td>
<td>28</td>
</tr>
<tr>
<td>4 – 6 years</td>
<td>14</td>
<td>4</td>
<td>18</td>
</tr>
<tr>
<td>7 years and above</td>
<td>18</td>
<td>11</td>
<td>29</td>
</tr>
</tbody>
</table>

17 **15-64 years old is the working-age population.**

18 Based on the United Nations’ definition, youth refers to those between 15 and 24 years old (Secretary-General’s Report to the General Assembly, A/36/215, 1981; Secretary-General’s Report to the General Assembly, A/40/256, 1985). Please see this report for more background.

19 Based on the definition by WFP (2019), those who migrated to work for less than one year are short-term/seasonal migrant workers.
### 4.1.1 Push and pull factors motivating migration

**Key finding:**

The main motivations for deciding to work in Thailand during the Covid-19 period were not significantly different to the existing push and pull factors that are intertwined with poverty and lack of livelihood opportunities in rural Cambodia.

Commonly cited reasons for migrating across all four sites related to the lack of opportunities for decent work in their local areas. Even when there were job opportunities, the work was often precarious, and the wages insufficient to meet household needs. Another driver of migration was an increased indebtedness to local banks, Microfinance Institutions (MFIs) and private money lenders, often with exorbitant rates of interest. Further, low incomes from rice farming due to poor yields related to damage by droughts and floods, due to shifting climatic conditions in Cambodia, were also reasons for deciding to migrate to work in Thailand.

Important motivations also came from what potential migrants heard from their peers or relatives. They heard about better income opportunities and working conditions, and improved lifestyles which influenced their decision to migrate. Relatives, friends, and neighbours who had already migrated and worked in Thailand encouraged migration and were an important motivator. These push and pull factors are not different to what we found in previous studies, suggesting that Covid-19 has not influenced the drivers of migration.

### 4.1.2 Uncertainty in employment in Thailand

**Key finding:**

Losses of jobs due to Covid-19 pushed migrants to return home while deepening indebtedness.

In general, and unsurprisingly, we found that Covid-19 impacted the employment of migrants from all four sites. A loss of jobs directly translated into a declining or total loss of income for migrants in Thailand and, as a result, for their households back in Cambodia. Further, it led to a decrease in their ability to repay loans taken out to pay for migration, or to pay for obtaining documents in Thailand.
For migrants from Bakou of Pursat, their work in the construction and manufacturing sectors experienced low service or buying demand, resulting in a number of workers, mainly migrants, being laid off. Likewise, migrants from Prek Norin of Battambang described a similar impact on their jobs but added that without work their savings were quickly eroded and they faced food shortages as they were not allowed to go anywhere, including to marketplaces. Different somewhat from the first two sites, migrants from Kamrieng of Battambang working in the informal sector suffered more than those engaged in the formal sector. For example, electronic factories were still operating, albeit with reduced hours.

Migrants who had lost their jobs needed to cover daily food expenses. While some reported getting support from other migrants or informal Cambodia associations in Thailand, for most returning home was the only viable option.

4.1.3 The lack of access to health care in Thailand

Key finding:
Some level of health insurance was available for some migrants during Covid-19 but was this was dependent on the will of employers.

Some migrants with formal documentation had access to health services through health cards provided by the Thai authorities, which they obtained through their employers. This entitled them to attend medical appointments for 30 Baht (less than US$1). For example, one respondent from Bakou, who was affected by Covid-19, reported having access to health care insurance from the factory owner who contributed partially, while respondents from Malai reported that employers agreed to pay 50 per cent of the cost of health treatment. Those without health cards, however, had no access and had to cover the cost of Covid-19 treatment on their own. Further, all migrants had to pay for Covid-19 testing and none had access to vaccines. This lack of access to healthcare during the pandemic was also a driver for migrants deciding to return to their homes in Cambodia.

4.1.4 Precarious return journeys

Key finding:
Both documented and undocumented migrants returned to Cambodia from Thailand during the Covid-19 outbreak using informal border crossings, which involved risks, high costs and the loss of legal status.

Of these 80 respondents, 15 were first time migrants, and 65 of them had migrated to Thailand multiple times (ranging from two to ten times). Many
migrated twice a year. A typical journey to Thailand took place over land with the support of informal brokers or networks coordinating their travel. Notably, among the 80 respondents, 43 respondents migrated without travel documents and 37 migrated with some documents (such as border passes, passports or MoU agreements between Thai-Cambodia authorities). Despite attempts to regularise undocumented migration, many migrants kept using informal networks or brokers to facilitate their journey out of Cambodia due to the expense and challenges with legal migration.

Regardless of their formal status, however, most decided to return to Cambodia during the Covid-19 outbreak in Thailand. In the process of returning, all migrants became undocumented. Some left their travel documents with employers with the expectation that they would return after receiving Covid-19 treatment and becoming vaccinated, yet most were unable to return. During border closures all migrants were forced to use informal PoEs, and their passports or border passes became invalid because they had no exit and/or entry stamps.

Using informal PoEs when returning to Cambodia involved taking greater risks than legal migration routes, alongside the cost of needing to pay brokers for their services. We estimate that the cost of the return journey has increased by 50 per cent to 60 per cent since the onset of the Covid-19 pandemic. Risks faced included travelling at night, crossing dangerous rivers, and sleeping in the forest, for some doing so whilst travelling with young children. Respondents described how brokers and informal networks which had always existed but were less prevalent due to the gains in formalising migration over recent years, were re-activated quickly in the face of the Covid-19 crisis and the increased demand from migrants to return illegally. This has resulted in a higher degree of undocumented migrants, reversing the trend in recent years towards increasing levels of documented and safe migration.

4.1.5 The influence of social networks on migration decisions

Key finding:
Migrants rely on a range of actors in deciding if and how to migrate. Informal brokers are part of the network and have always been active in recruiting and facilitating the migration journeys of both documented and undocumented migrants. The reliance on brokers has increased during Covid-19.

A range of actors are part of the social networks that influence migration choices, including whether to migrate, what work to migrate for and how to make the

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20 To address undocumented migrant deportation, the Thai and Cambodia authorities agreed to regularise these migrants in Thailand at the one-window service office.
journey to and from Thailand. Informal brokers, close relatives (sibling or parents), distant relatives (cousins, uncles or aunts), or friends and co-workers who were already working in Thailand all played roles in making the journeys possible.

Figure 4.1 illustrates our synthesis of the levels of influence of different actors represented by concentric circles, with the most influential at the centre. The ultimate decision makers in the centre are the migrant workers themselves. Migrants rely heavily on the knowledge and attitudes of family members, such as parents (especially mothers) and household relatives. Married respondents (63 out of 80) mostly consulted with their spouses regarding whether and how to migrate. Single respondents (13 out of 80) were influenced by their parents (in particular mothers) or older persons in their families (older brother or sisters, uncle or aunt). For those who did not have mothers, their fathers or oldest sisters tended to be their key counsellor on migration. After relatives, the next most influential actors were friends and other local connections, and in particular former co-workers with whom they maintained a relationship and who tended to come from the same locality.

**Figure 4.1: Networks and their level of influence on decisions to migrate**

Beyond individuals with whom they have personal ties, brokers are an important source of information, in particular around the logistical aspects of migration, including obtaining legal documents and border crossings. The selection of
brokers was based on trust and any established pre-existing relationship. Employers in Thailand were also influential, as potential migrants often discussed details about the type of work and conditions with prospective employers before they left Cambodia.

In the challenging circumstances of Covid-19, informal brokers became central actors in the migration network. The uncertainty around jobs meant potential migrants had to rely more heavily on brokers to identify employment opportunities. The border closure, in particular, increased the reliance on informal brokers who could coordinate movement through informal PoEs. The cost associated with travelling and obtaining documents varied between broker, type of work, and existing connections that migrants or potential migrants had, but was generally higher during Covid-19.

A few migrants indicated their desire to return to work in Thailand illegally and could only do this with the support of brokers. However, only a few of the 80 respondents had (in January 2022) attempted to make their way back to Thailand. It is likely that the role of brokers will remain central as migrants seek to formalise their migration status in the coming years.

4.2 The nexus of migration and child labour

Key finding:
Some migrant workers brought their young children with them and engaged them in light work, especially true for those who worked in the agriculture sector.

The youngest aged respondents were 15 years old. In the Cambodia Labour Law, children aged between 12 to 17 years old are allowed to do light work as long as the work does not disrupt their studies (RGC 1997). We found that some parents working in the agricultural sector brought their children with them and engaged them in light work. Some of these children had access to school while others did not. For instance, there were only a few cases in Bakou of under-aged children helping parents in farming after their parents negotiated to include them in the contract with the Thai employer. Likewise, there were only four cases from Kamrieng of children working with their parents or helping to take care of younger siblings to allow parents to work. In these instances, the employers allowed them to work but they were paid less compared to their parents. In Malai, very few children worked in the informal and agricultural sector, especially along the Thai side of the border.
5. Findings from the four case study sites

5.1 The case of Prek Norin, Battambang Province

Summary findings from Prek Norin:
We interviewed 20 respondents in the Prek Norin commune, most of whom had migrated multiple times. They relied on existing relationships through their personal informal networks to facilitate their journey to and from Thailand. The impacts of Covid-19 were varied across the 20 returned migrants, some experiencing greater levels of poverty than others. Social protection was not available for all migrants, and some had to cover their own medical costs while in Thailand. There were some reports of families migrating with children who supported with farm work, although it is unclear as to the ages of the working children or how heavy the work was.

5.1.1 Patterns of migration and the impact of Covid-19 on travel arrangements
The main motivations for migrating were related to seeking improved income opportunities. This was due to a variety of reasons affecting their ability to make a decent living in Cambodia, including an inability to make a living due to being landless; no access to regular jobs; low salaries in Cambodia; low income from agricultural activities; and small businesses (clothes selling, ice cream) being unprofitable. Other reasons included the need to pay off debts to MFIs and private lenders. For some, the motivations were more positive, and they mentioned wanting to see Thailand as part of the factors that influenced their decision to migrate. The majority (n=12) migrated with their partners (husband and wife) while the remainder migrated by themselves.

Before they decided to go to Thailand, they received information about jobs and travel through a range of means, including radio broadcasts asking for applicants (2/20); individual contacts offering jobs (1/20); and relatives, neighbours or friends who worked in Thailand and had contacts with Khmer and Thai brokers (12/20).

Prior to Covid-19, and even in the early stages of the pandemic prior to border closure in March 2020 (see Figure 2.1), those that had documents (about half of respondents) traveled to Thailand through agencies or by themselves without any major challenges. Some of the respondents worked near the border and so only required a border pass, returning home every evening. Respondents who did not have documents (n=12) used informal routes, through coordination
provided by their husbands, relatives, Khmer brokers and Thai brokers, and neighbours who had experiences. There is no evidence, however, of them being cheated by the brokers.

Most returnees went back to their original form of work upon return from Thailand, such as agriculture (on their own farms, mostly on wetland rice cultivation), day wage work, selling groceries, and raising pigs. In spite of the low yields and profits from wetland rice cultivation (due to the high costs of agricultural inputs and an unreliable climate) many remain engaged in rice cultivation because they have no alternatives. This return to agricultural work reveals the importance of this sector during crisis as the only fallback option. Migrants who own land are relatively better off than those who do not, further illustrating the primacy of land ownership for wellbeing.\(^{21}\)

There were a variety of reasons for their return from Thailand. Specific reasons depended in part on the timing of their return. Eight out of 20 respondents who returned in the first quarter of 2020 said their reasons for returning were not directly associated with Covid-19. Among them, reasons for return included renewing travel documents (passport and work permit/visa) and needing to take care of young children or elderly parents. Taking care of household members was mentioned more by female respondents.

The remaining 12 respondents returned later in 2020 and 2021 and related their return directly to the impact of Covid-19. They mentioned fear of the Covid-19 outbreak (getting sick), loss of jobs, uncertain and poor working conditions (delays in receiving salaries, and discrimination), and personal health challenges (expected to give birth, and their own illnesses).

During the border closure and lockdowns in Thailand, both documented and undocumented migrants were forced to use informal channels for crossing the border when returning to Cambodia. Consequently, upon returning, respondents with travel documents became undocumented. Respondents who shared their experiences of undocumented migration described how the journey took a few days and nights and they had to sleep in the forest. At the border, they were tested for Covid-19 and sent to quarantine facilities (when arriving at the Cambodia side). For example, one 20-year-old mother with children explained that she had to return through an informal route, and had to quarantine at the border and then in her home district for 18 days before she could arrive home.

\(^{21}\) Respondents who own land can return to cultivate it themselves. When migrating, land was either left unmanaged or lent to relatives to cultivate. Direct observations showed that migrant landowners had improved livelihood options compared to those who didn’t own land. Even respondents with 0.5 ha had a greater capacity to save money when borders were closed until they opened and they could return to work in Thailand.
Some reported trying to return again to Thailand through the use of brokers, but at an increased cost of US$200-250 per person with or without documents, and having to travel at night until reaching the border.

**Box 5.1: Sokha’s outward and return journey to Thailand**

I decided to work in Thailand through hearing information broadcasts via local radio from a recruitment agency to work at an electronic factory in Thailand. After discussing with my family, I notified the recruitment agency of my intention, and they accepted. I was then required to pay half of the total fee agreed with the recruitment agency. As travelling to Thailand by land and through Battambang, I waited there until travelling with others to Poipet for document preparation and orientation before continuing to the factory. However, my actual work was not at the electronic factory but at a steel factory in the production sector where all the employees were Thai and I was the only non-Thai. Working with heat exposure after finishing one piece I had to rest for about 15 minutes to maintain my health. All employees worked to this rule.

Before Covid-19, I travelled to some leisurely places locally with my Cambodian friends and Thai colleagues - particularly markets and local drink stalls during the weekends. In other instances, I had played volleyball as a way to relax. I stayed at accommodation provided by the factory with other colleagues. Others usually like to hang out and drink, particularly during the weekends, but that was not my practice.

I returned back to Cambodia usually once annually around the time of the Khmer New Year and transferred saved earnings through the banking system (Krong Thai Bank) where my family could get paid through mobile operator in Cambodia (Wing).

During Covid-19, the factory reduced the available work due to reduced demand [for their goods] from clients. The working schedule was rearranged and no more overtime was provided, which meant my monthly income was less. As a result, I couldn’t remit my monthly income as I’d previously done. During my free time, I just relaxed by climbing the nearby mountain.

Due to the worsening conditions [due to the pandemic], I decided to return to Cambodia after discussing options with my family and hearing the

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22 Each respondent whose life story was share in this report was given a pseudonym to protect their confidential identity.
experiences of my friends. Before departing, I consulted with friends in the factory and also informed to my employer of my intention. The employer just mentioned that it was my right to decide and there was no objection from the factory, but no extra support was offered to assist this return travel. Thus, all costs were covered by me. I arranged for a private taxi and travelled during the night time and arrived at the Cambodia border in the early morning. I crossed through the regular border crossing and was sent to the quarantine centre in Cambodia for 15 days before they transferred me to my hometown in Prek Norin for another seven days of quarantine.

Source: From a direct interview

5.1.2 The impact of Covid-19 on employment in Thailand

Respondents expressed that Covid-19 has had a major impact on their work while in Thailand, primarily driven by the reduction in demand of factory goods (see Box 5.1), and as a result, they earned less income for themselves and their families (through remittances) in Cambodia. In many cases they had to wait a long period of time before they could return home. However, some respondents from Prek Norin did not report serious impacts from Covid-19 in their workplaces.

5.1.3 The impact of Covid-19 on health and social safety

Of the 20 respondents, 14 neither had insurance nor health coverage, while the remaining six did have health cards which provided them access to health centres in Thailand. For those with health cards, they were able to access to health services for under US$1 per visit. If they stayed for one week in the health centres or the hospital, they only had to pay US$6.50. In most cases these health cards are provided by employers. For those who travelled with children, employers allowed them the time to take care of their children.

Covid-19 lockdown measures in Thailand, especially at factories, impacted negatively on migrants’ physical and psychological wellbeing. Respondents mentioned that they were not allowed to go anywhere outside of their own workplace and homes. Lockdown policies meant that they were forced to stay at home and were unable to go anywhere, not even to the markets to purchase essential goods. However, some were offered the opportunity to go with employers to purchase food or other essential supplies. Some respondents said that they did not want to discuss their ill health when they had symptoms such as a fever or cough with the factories’ medical staff for fear of being discriminated against. Others said that they felt stressed as they may have been exposed to the Covid-19 virus via their co-workers.
If workers became ill with Covid-19, they were allowed to take rest for up to seven days with full pay from their employers, which especially applied to those who worked in factories. Others, however, said that in cases where they had not reported a health condition, even if it was not associated with Covid-19 symptoms, they opted to spend their own savings on privately-sourced medicine. Respondents working in other informal sectors reported that they did not receive any health care cover cost from employers, having to pay any costs out of their own pocket. In short, respondents who worked without health care insurance were lacking the financial means to cover the cost of hospital treatment, and encountered challenges due to language barriers when they were infected with Covid-19.

5.1.4 Social networks

Migrants from Prek Norin managed their trips to Thailand and back to Cambodia in a few different ways, depending on the status. It was reported that most of their first experiences were undocumented, except for a few cases. When going undocumented, they connected with Cambodian brokers who have close relationship with Thai brokers, or employers through friends and relatives already working in Thailand by sharing contact details. The migrants contacted them to clarify the employment opportunities and travel arrangements, as well as accommodation. Many of the undocumented later became documented migrants, with facilitation by the Thai employers who processed the documents in Thailand for them to work safely. However, some currently remain undocumented.

Those who have documents in hand, such as a passport and work permit processed by a Cambodian company, paid 18,000 Baht (about US$600) each, facilitated their trip by bringing the documents from Phnom Penh, while migrants wait for the pickup in Battambang provincial town to go through Poipet border gate. The local company made their advertisements in different forms including radio and stickers on bank ATMs. During the Covid-19 period, when the border remained opened, there were cases of migrants coming back home by themselves. Return routes include Osmach border gate as well as others, and there was a case when documented migrants paid 2,000 Baht (about US$65) for the transport, 300 Baht (about US$10) for police, and 500 Baht (about US$15) for luggage transport costs to cross border, and have their passports checked and stamped. No payment was required on the Cambodian side, but they were quarantined in Osmach for one week and another week at Prek Norin commune before allowed to go homes.

For those who went to Thailand before the Covid-19 pandemic without documents, they had to pay to Khmer brokers 3,000 Baht (about US$100), who managed to bring groups of migrants at night by walking across the border
through difficult roads and streams, in order to reach a particular meeting point where driver waited on Thai side, mainly at the Longkoeu market, and sometimes they had to sleep for a night before travelling to Bangkok and other places in Thailand. Seated in the car, they had to get out mid-way and walk through the forest, and then got back into the car again in order to escape from the police. At the workplace, they made passports and other relevant documents with the help of Thai employers, who deducted this from the salaries. During Covid-19, they returned home by themselves through Laem, Obeichon and other smaller border gates. Those who were still without documents since the first migration experience and were returning home due to Covid-19 through similar routes paid for transport, for example 2,500 Baht (about US$83), depending on where they were picked up, and paid 100 Baht (about US$3) for Thai Police; and then quarantined at a designated pagoda for 18 days in a Prek Norin commune.

5.1.5 Child labour
In Prek Norin, no child migrants were interviewed. Within the sample as a whole, there were few cases of child labour reported and most reported cases occurred before the Covid-19 outbreak. In these cases, the young children had accompanied adults to Thailand. The children in these cases became adults and went on to work independently in Thailand, demonstrating that patterns of migration can have their roots in early childhood migration experiences. In most of these cases, farm work predominates (fruit pickers or sugarcane farmers) where workers are paid by number of outputs rather than a day rate. As such, children as young as eight years old are needed to help their parents collect sugarcane and earn a liveable wage. Some mothers reported that they allowed their young children (under 15 years of age) to do only light (non-labour intensive) work. It remained unclear from interviews how the income was shared among family members – however, it tends to be the mother who manages the wage income.

5.2 The case of Kamrieng, Battambang

Summary findings from Kamrieng:
Most respondents were undocumented and worked in a variety of sectors. Those working in agriculture commonly brought their children with them, but only involved them in light work or helping in taking care of younger siblings. Migrants were forced to return home due to Covid-19 and used informal PoEs. The level of risk faced varied across respondents; some faced severe risks such as crossing rivers while others had employers transporting them to the border area.

23 Typically, a bulk of sugarcane costs two Baht, with one family with four members (two parents and two children) able to collect on average 200 bunches of sugarcane per day.
5.2.1 Patterns of migration and the impact of Covid-19 on travel arrangements

A high percentage of respondents (19 out of 20) migrated to seek jobs in Thailand due to debts incurred to cover basic living costs when facing low yields from agriculture. Some respondents reported that they could not find stable jobs in Cambodia, which meant they could not earn enough money to pay the bank interest, support their children’s schooling, and pay for family members’ health costs on top of daily family needs. Other reasons included having no farmland; low education levels; low daily wages; access to only seasonal jobs; and persuasion by neighbours. Respondents discussed how neighbours had informed them about those who had migrated to Thailand and had earned comparatively large incomes – enough to buy land or motorbikes, build new houses, and pay off their loans. These reasons provided strong motivations.

From the Kamrient sample, 17 out of 20 respondents migrated to Thailand as undocumented migrants, while two of them used a border pass, and one migrant had passports with visas on arrival but lacked working visas or working permits. In some PoE, even when holding border passes Cambodian and Thai police required migrants to return back to their home country on a daily basis. In the morning of each day, Thai employers were required to register with the border police their organisation and the total number of workers needed. If the workers did not return, then the Thai employers were held accountable and the employers were preventing from recruiting further migrants.

All of the undocumented migrants we interviewed used brokers to guide their way to Thailand and the cost of these services was reported to be high. The migrants took illicit pathways en route, walking across farms and rivers until they reached the destination with a taxi in waiting to collect them. Sometimes, they needed to stay one or two nights in a forest or wait in a cottage or on a farm before a taxi could take them directly to their working place, as a taxi could only take around four to five migrants per trip. The total cost of the journey was typically US$200-350 per person, which included the broker’s guidance, taxi fee, and other expenses.

Those travelling with a passport and obtaining visas on arrival had already contacted Thai employers in advance, and had transferred them money to pay for a passport and other expenses such as transportation, food, a guesthouse, and snacks. When they arrived at the place of employment, their employers obtained a work permit for them directly. Respondents in these cases explained that the cost of the work permit transaction was deducted from their daily wages.

During the time of the border closure, the Thai government informed documented migrants to protect themselves through public health measures, such as wearing masks and cleaning their hands with disinfectant. Further, the
enforced lockdown meant that they did not have access to markets, their place of work, or public parks. In addition, two respondents working at factories were guarded by police and told to stay in their rental room or working place. They reported feeling bored with no access to markets to purchase goods. In some provinces in Thailand, such as Chanthaburi and Sa Kaev, employers transported migrant workers from their farms located along the border back to Cambodia. Respondents reported being supported by their employers with provisions of dry food, payments for transportation, and in some cases funds to stay overnight.

The only way to return to Cambodia during Covid-19 was through informal PoEs. In some cases, this led to taking life-threatening risks, such as with one interviewee who returned in this period with her three small children and had to swim across a river and nearly drowned. Cambodian soldiers patrolling the river helped them and carried her bag and other materials to the riverbank, and she and the children survived. Respondents reported spending about US$10 to US$15 per person for brokers to guide them over the informal PoE. In the process, all documented workers became undocumented. After getting the primary health check in Cambodia and confirming a negative Covid-19 test result when arriving at an informal PoE, they were forced to stay for 14 days at one of the quarantine centres which were established along the border.

Some returnees have tried to return illegally to Thailand again in search of work, particularly when the Covid-19 infection rates seemed to be decreasing from June to December 2021. Interviewees reported that because the border is still closed, undocumented migrants now need to pay for very expensive brokers, at around US$200-300 per person. This means that the cost of migration has increased by 50 to 60 per cent since the Covid-19 pandemic began.

5.2.2 The impact of Covid-19 on employment in Thailand

When Covid-19 took hold in Thailand, migrants lost their jobs, especially those in the informal sector. To remain in Thailand, migrants were forced to spend their savings. Some interviewees who worked on farms along the border were not allowed to continue picking longan fruit, cutting grass or sugarcane, or fertilising fruit trees due to a reduction in demand for produce. Respondents reported that Thai farm owners decided to keep their fruit trees without using fertiliser or chemicals because of low or no demands.

For those who worked in the formal sector, their working hours were reduced, with a resulting reduction in salary. Some interviewees reported that the reduced income meant staying in Thailand was no longer viable, and as a consequence a loss in supplementary remittance to repay their loans or support their parents or children.
5.2.3 The impact of Covid-19 on health and social safety

Some migrants reported that during the Covid-19 pandemic, employers would still send them to hospital in cases of a serious accident or sickness as would have been the case prior to Covid-19, but now they had to cover the medical fees themselves. However, additional support did exist in some instances. For instance, some respondents reported getting support in the form of uncooked rice, noodles, and canned fish from other migrants or from the informal Cambodia Association in Thailand. There were cases where support existed but for only certain workers, such as Covid-19 vaccines, which were not available to informal or agricultural sectors workers. However, treatment in Thailand was provided in the case of a positive test for Covid-19.

Migrants who had returned to their home villages reported that it was difficult to seek support from the village or commune chief if they did not have Equity cards. With an Equity card, they would receive about US$50 per month. However, some poor families who did not have Equity cards received 20 kgs of rice, noodles, fish sauce, fish can, and other materials from high-ranking officials, who supported these costs for good favour ahead of upcoming commune council elections.

5.2.4 Social networks

Respondents reported different mechanisms for securing jobs in Thailand. As the first approach, respondents typically communicated with their former employers or team leaders in Thailand directly. When jobs were available, they spent around US$15 to obtain a border pass, then sought to extend the border pass if further work became available. In these cases, respondents needed to wait around one to two days before departure.

Once a border pass had been received, they entered Thailand through a PoE and then completed other required documents from both the Cambodian and Thai police. Thai employers needing workers would then select those needed and transport them directly to their farm. Respondents reported that they could choose their employers or working sectors according to their skills or negotiated wage.

When using the border pass, the available roles were limited to seasonal work in the agricultural sector along the border, involving picking fruit, cutting sugar cane, cutting grass, fertilising fruit trees, feeding animals or fish, or guarding farms. Through weekly extensions of border passes, respondents could spend around

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24 The Cambodian Association in Thailand is an informal community-based organisation, made up of a group of factory workers who support other workers facing challenges in Thailand. The organisation is not recognised by the Thai or Cambodian authorities.
six months working in Thailand per year before returning to their home in Cambodia. In other instances where respondents lived close to the border, the border pass was used to work in Thailand in the morning and then they would return back that day to stay overnight with their family in Cambodia.

As a second approach, respondents identified brokers who in turn found them jobs in Thailand. In these cases, respondents crossed the border and worked illegally. They had to spend US$100-150 per person in advance to the brokers to guide though an illegal route, over the border and to a job. Before reaching their place of work, respondents had to walk for long distances, mostly at night time through forests and across the rivers in the dark. They were exposed to many risks, such as being arrested by Thai soldiers, running out of food and drinking water, and sleeping unprotected in the forest. They were also vulnerable to traffic collisions and subject to travelling in cramped conditions (with up to 15 people per taxi). Some migrants also reported being cheated by unscrupulous brokers or Thai employers who refused to pay them, despite having undertaken many months work.

Figure 5.1: Migration journeys from Cambodia to Thailand, Kamrieng district

Source: Authors’ diagram based on all cases in the Kamrieng district

5.2.5 Child labour

Two out of 20 respondents in the Kamrieng district decided to take their children out of education to accompany them on their migration or take care of their siblings while in Thailand. Those that worked were in the agricultural and the construction sectors. One mother talked about her son who was a construction worker and earned US$10 per day because he was under 18 years of age and the contractor did not provide him with a work permit.
Migrants working in the agricultural sector estimated that five to six of the children working on the farms were about 14 years old and were assisting their parents with light work, while six to seven of them were from 15 to 17 years old and worked as adults. However, some interviewees reported that at some working places in Thailand, young children need to work at the same pace as adults but they only earn around US$5-7 per day while adults were paid US$10.

Some respondents reported that if they had worked for a long time in the agriculture sector for the same employer, such as guarding the farm, feeding pigs or fish or cows, and monitoring other daily workers, then their children were supported to attend school in Thailand if they were under 10 years old.

**Box 5.2: Sophy works on a fruit farm**

I am 15 years old and currently I live only with my widowed mother and a nephew. My village is located around 30km from the district town which was surrounded by Cassava farms and other seasonal crop fields. I dropped out of school at grade six and then migrated to Thailand without any documents. I cannot request that the authorities provide formal documents for me to work in Thailand because I am under 18 years old.

I decided to work in Thailand with my older sister and brother-in-law because I was poor and my family has an IDPoor card. Before reaching the working place, I walked across a river and Cassava farm for almost an hour to escape from Thai and Cambodian border soldiers through an informal point of entry. From there the Thai boss picked me and other four people up in his car. I paid 5,000 Baht [around US$150] to the labour broker for the journey.

In Thailand I picked longan fruits because I had this experience from my hometown. With this work I could earn around 600 Baht (around US$15) per day. Sometimes, I needed to climb on the high longan tree and used a long stick to pick its fruits. If I were to fall from the longan tree and break a leg or arm the employer would take us to local hospital; I do not know how much this would cost him. I would be fined 500 Baht (around US$10) per box (around 25 kgs per box) if I mixed small and big longan fruits together. To earn enough I needed to work from early morning until late afternoon every day.

In Thailand I stayed in a room with other people, with the Thai employer paying the electricity and water bills. However, I needed to spend around 100 Baht (around US$2.50) for transportation from my accommodation to the farm and needed to pay additionally for food each day. Each transportation
pick-up carried around 20 to 30 labourers, so some sat on one another while male workers stood or used the pick-up roof rack as their seats. Luckily, there were no traffic accidents or checks by Thai police.

After the Covid-19 pandemic outbreak in Cambodia, my mother got seriously sick and I returned home to take care of her. During that time, the Thai employer drove me from my accommodation in Thailand to the Cambodian border. I then walked alone across the river before reaching the temporary primary health check point in Cambodia. Fortunately, I did not have Covid-19 positive after testing, so I arrived home without the need to quarantine. No money was spent on travelling as the Thai employer provided transport to the Thai-Cambodian border. Currently, I am a waitress in a local food shop, working from 5pm to 12am (midnight), and receive US$150 as a monthly salary.

Source: From a direct interview

5.3 The case of Malai, Banteay Meanchey

Summary findings from Malai:
There were a total of 20 returned migrant workers interviewed in Malai. They were mostly undocumented migrants, with some having border passes and working along the border areas in the agricultural sector. In this commune, informal brokers were used by undocumented migrants. We found some children helping parents and often holding documents with a false age reported.

5.3.1 Patterns of migration and the impact of Covid-19 on travel arrangements

Most respondents in Malai did not wish to reveal their migration status, so we assume that most were undocumented, except for the few that mentioned having border passes. The border pass holders worked seasonally near the border in the agricultural sector. Most respondents travelled to Thailand with the help of brokers or their own informal networks, such as friends or relatives who had some connection with the border authorities.

For those who worked in areas other than the border, they decided to travel back to their villages during Covid-19 through their own arrangements. Those with border passes travelled through taxi services. The border authorities of both sides did not cause any trouble, but rather allowed them to cross the border even during the Covid-19 period and border closure, while ensuring compliance with the Covid-19 protocols.
Before Covid-19, undocumented migrants, if arrested, faced potential imprisonment by the Thai authorities before escorting them back to Cambodia. However, during the Covid-19 period, no punishments were imposed, but migrants were simply returned back to Cambodia.

The most common reason for returning home among respondents was redundancy resulting from Covid-19. Lacking other options for earning income, they returned home. Those with documents often did not have them to hand, as employers retained them. In the Covid-19 context when borders closed, all migrants became undocumented.

5.3.2 The impact of Covid-19 on employment in Thailand

Respondents from Malai described a variety of employment pursuits in Thailand, the most prevalent of which being in the construction and agricultural sectors, as well as in the informal and small business (small vendors) sectors. Construction was the most common sector of work for individual migrant men, while agriculture was more prevalent for migrant families, particularly those with young children. The informal and small business sectors were more common for migrants who had pre-acquired skills (such as cooking or vending). Other occupations were also cited, including those related to seafood or machinery.

Most respondents described losing their job or facing reduced hours due to Covid-19 restrictions. During this period, they had to rely on their savings, and most were forced to return home.

Back in Cambodia, most are now working locally in the agricultural sector, or are employed as daily wage workers on other people’s farms or plantations in surrounding communities. Most report that they were waiting for the opportunity to return to Thailand to earn a better income to support their households.

5.3.3 The impact of Covid-19 on health and social safety

While employed in Thailand, documented migrant workers had access to free health care in Thailand organised by their employers, but not their dependents or spouses. But for workers engaged in the informal sector (sellers in the marketplaces), health coverage depends entirely on the will of employers themselves. If documented workers tested positive for Covid-19, they would be treated under the health insurance scheme, while undocumented workers needed to cover their own expenses, for which they commonly used traditional Chinese medicine. No Cambodian migrant workers, however, had access to Covid-19 vaccinations in Thailand.
Prior to the existence of the social insurance scheme an employer would typically be willing to cover 50 per cent of total health cost, while the remaining 50 per cent would be covered by the worker. There were also some instances where employers paid ahead, and then the cost was deducted from the worker’s monthly pay. It was reported that for workers who had health cards, they only needed to spend about US$1 for each visit to the public hospital, usually for outpatient services.

In terms of support for protection against Covid-19, migrant workers were given masks and hand sanitisers only. Respondents reported no social assistance system in place to support them while they were still in Thailand. Upon returning to Cambodia, similarly there were no specific services for returned migrant workers, except for the quarantine and treatment services available through local authorities. Once at home, no social protection services were available unless their families had valid IDPoor cards or Post-ID cards which would provide access to public services and public health care coverage free or charge. For these reasons, many are engaging in agricultural work or as wage workers in their local areas.

5.3.4 Social networks

Respondents in Malai described how they made the decision to migrate in consultation with their families, particularly those who migrated with their spouses. Single migrants were influenced by their parents and family elders. In the main, the key sources of employment opportunities and guidance for travel to Thailand were relatives and friends who had lived and worked in Thailand.

During the Covid-19 pandemic, informal networks were used for travelling to and from Thailand. In order to return to Thailand, workers used information obtained informally through co-workers, as well as discussions with their families back in Cambodia to find private taxis to take them home. Undocumented migrants, however, had to rely on brokers to cross the border illegally. While such brokerage services existed prior to Covid-19, they were not used as much because most migrants were documented.

Respondents described how brokers and informal networks were able to be built and re-activated quickly and spread very fast among migrant workers in the face of the Covid-19 crisis and the need of many migrants to return. The services are now used regularly and are widely known among communities and workers, as well as their families in Cambodia. The connections and interactions were very efficient and rapidly reinstated by migrant workers and brokers, illustrating the reliance on informal networks. Brokering activities, while considered illegal by both Cambodian and Thai migration authorities, were used regularly by local authorities and community people.
5.3.5 Child labour

Three respondents were from 15-17 years of age, while ten of them were aged from 15-24 years. Respondents described two main ways that children below 18 years old are employed in Thailand despite child labour being illegal. The first route is through migrating with their parents and eventually becoming employed informally, particularly in the informal (such as workers in retail stores, shopkeepers, street vendors, etc.) and agricultural sectors. This happens mostly along the borders where renumeration is based on the quantity of produce harvested daily by migrants. The contribution of children is encouraged voluntarily or involuntarily by parents. Employers here have some flexibility towards casual workers, given the seasonal demand. Seasonal works have mainly been employed in the agricultural sector, especially during the Cassava harvest.

The second pathway is through faking their ages on the required documents, supported by their own families in Cambodia. Some noted that when children are younger than 16 years old, they tend to engage only in lighter work, for example, in factories children under 18 years old were requested to carry smaller loads than adults.

Box 5.3: Under-aged Bopha works in construction

I am now 17 years old, and I dropped out of my school at grade seven. Currently, I live with my family that has four members — parents, an older brother, and a younger sister. Due to poor livelihood, indebtedness, and persuasion from my aunt who is working in Thailand as a contractor with Thai construction company, me and my parents agreed that I should migrate without documents to work in Thailand.

At first I felt hesitant because I didn’t want to quit my school. But my mom told me that I should go to work for just only one month during the school break, then I could return to continue it again. After one month, my aunt told me to continue working because my school was still closed due to Covid-19 and there was nothing for me to do in my home village.

I did not know how my aunt organised the illegal travel for me from my hometown to the working place in Thailand. I just remembered that I first took a motor taxi from my house to the Cambodia-Thai border check point and then my aunt called a Thai taxi driver to pick me and the others up directly. The taxi fee was 1,600 Baht (around US$40); my aunt paid it at the
beginning, and I needed to deduct from my monthly salary for her at a later point.

The following morning the day after my arrival, my aunt instructed me about the work. It was a cement drainage construction site. I shovelled the gravel and sand from the big pile, put into the bucket, and poured it in to cement mixing machine. As it was a kind of contractual work, my working hours were unlimited. I could work as much as I wanted and received a single payment on completion. However, as the working hours were the same, men got a higher payment than female workers. I worked as part of a team, so I could earn around 340 Baht (around US$10) per day.

I stayed at the place of work in one room without having to pay rent, and with electricity and water bills included. The Thai employer also gave all workers sleeping mats, mosquito nets, and other sleeping materials. In case of any minor workplace injuries, he or she could make use of one of the first aid kits available at the construction site. For more serious illnesses the Thai employer would send them for treatment at a local hospital.

I felt concerned about my potential arrest by Thai police as I worked there illegally. However, the Thai employer promised to arrange formal working documents for me and respond to police if they were to check the construction site. This encouraged me to continue to work in Thailand for more than a year before the serious Covid-19 outbreak.

Each month, I could transfer money from 3,000 to 4,000 Baht (around US$100 to US$150) to my parents to pay off their debts. I contacted them and my siblings through Facebook or sometimes called them by phone directly when I was free from work.

The impact of Covid-19 in Thailand led the working place to close, at which point I decided to return to my hometown. I was quarantined for 21 days after I arrived in Cambodia which included full support such as three meals a day, drinking water, sleeping materials, and a health check from a health worker, and member of the local authority, and the police. I’ve had two doses of the Covid-19 vaccination already, but I am not sure if I would get back to work in Thailand again.

Source: From a direct interview
5.4 The case of Bakou, Pursat

**Key findings from Bakou:**
A total of 20 respondents were interviewed in the Srae Sdok commune of Pursat province. The pattern of migration did not differ from the three previous commune cases in relation to the changes between formal and informal migration. Upon returning, most migrants who owned some piece of land (rice field) returned to work on their agricultural land in the same way as they did before they migrated. In this commune, informal brokers or informal connections among friends or former migrants were key influencers on potential migrants in choosing their migration journey. From the perspective of child labour, there was no severe form of child labour exploitation, yet there were cases of parents encouraging their children to help them to complete work on agricultural farms which did or did not support this additional labour with supplementary wages.

5.4.1 Patterns of migration and the impact of Covid-19 on travel arrangements

The most common pattern of migration before and during the Covid-19 pandemic was through connections with brokers in Cambodia and Thailand, and by travelling across informal border checkpoints for undocumented migrants and formal checkpoints for documented migrants. Almost all respondents (16 out of 20) reported using brokers to arrange their travel to Thailand illegally, and then processed their documents in Thailand with the support of their employers.

Due to border closures, migrants decided to return home due to fear of the outbreak, often deciding to use informal checkpoints to do so. Many of these journeys were facilitated by brokers introduced by friends or co-workers, while others arranged transportation to the Thai-Cambodia border themselves using public transportation (bus or train), or hiring a taxi with a group of returnees.

Migrants with or without travel documents who returned to Cambodia during the Covid-19 period used informal PoEs. A few respondents reported that they decided to leave their passports with their employers while they returned to Cambodia so that their work permit visa (which they had to renew every three months) could be renewed. Consequently, this opened the opportunity to return to work in Thailand. To do so, however, they would need to use illegal channels to cross the border. Many respondents said that they had brought their passports with them to Thailand but because they had to return through an informal PoE, their passports had become invalid and they could not return even after the border restrictions were lifted. Additional costs for travel arrangements must now
be paid which disproportionately affects poorer households, or illegal channels must be sought which involves greater personal risk.25

Most returnees had migrated several times and had experienced both illegal and legal routes. Nida’s story (Box 5.4) speaks of her migration journey and highlights the risks in migrating illegally, taken against the expectation of earning more income to repay debts and support to their household. Nida’s first experience of cross-border migration was dreadful, but this did not stop her from making a second attempt again illegally. Her reason for migrating was to support her late mother’s medical costs, purchase food for her family, and repay the debt incurred when her late mother was very sick.

Many respondents who had made their way into Thailand illegally had processed their documents there to avoid the three to nine months wait time in processing their documents in Phnom Penh. Despite the risks, travelling to Thailand without documents or a border pass took less time and cost less money (as Cambodia side processing fees were avoided). Employers often assisted the migrants with an advance to cover these upfront costs (recouped as deductions in instalments from their bi-monthly wages).

Box 5.4: Nida’s journey to and from Thailand

I am not different to other undocumented migrants. I used informal networks to migrate to Thailand. I experienced migrating to Thailand four times; the first three times were illegal/undocumented migrations, and the fourth time was as a legal migrant. After receiving some information about brokers, employers, and types of work, I decided to first call a broker to enquire about a journey to Thailand. I, and ten other villagers, travelled to the Banteay Meanchey province to meet with a Khmer broker. Sitting in the back of a pick-up truck together with 20 others; a mix of men and women from different villages, I reached the Thai-Cambodia border where I was instructed to leave the truck and walk on an informal pathway into Thailand in the middle of the night. I waited there for about three hours until the Thai broker arrived and transported us to the workplace in a carriage truck, with me and the other undocumented migrants hidden under boxes of vegetables.

After working for four months I was arrested during a police-check and sent to prison for 48 days. I returned to my home village afterwards. After staying in the village for one week I was keen to return to work in Thailand. My older

25 The cost of informal travel can vary widely dependent upon the existing connection with the brokers. On average it ranges from US$50 to US$200 per person with no travelling documents. The border pass fee is about US$8 per person for one week’s validity (female returned migrant, Bakou, 2022).
brother who worked in Thailand at the time introduced me to a different broker and employer in Thailand and I migrated illegally again. After working there for four months I heard about a new policy change from the Thai authorities that would affect undocumented migrants working in Thailand. Fearing being detained again, I returned to my home village.

After two months, another friend working in Thailand called me and introduced me to a new network of brokers who suggested that I work in a meat factory where the employer could make sure that all undocumented migrants were safe from police arrest. I took the risk, and for the third time illegally migrated to Thailand, this time with a different broker. I worked at this factory for four years before returning home to arrange my mother’s funeral. During the four years of work I managed to repay all of the debt taken on from the previous migration trips. Each informal journey to Thailand cost between 22,000 Baht (US$550) and 35,000 Baht (US$875). The last journey taken was in early 2020, about a month before the first Covid-19 case in Thailand. For the fourth journey I processed the migration documents in Thailand with the support of my employer (passport and work permit visa) with the cost of 22,000 Baht (US$550). The employer prepaid the cost and I agreed to repay him when I received my bi-monthly wages (worth 1,000 Baht or US$25 per month). After 22 months’ work the loan was completely repaid.

Then there was an outbreak of Covid-19. My elderly father and sisters were worried about me and suggested that I return home. I decided to ask my employer for my final salary payment and returned to Cambodia. I took an informal route as the border between Cambodia and Thailand remained closed. Since I had to bypass the formal checkpoints my passport was not stamped. With or without documents the Cambodia border authority allowed me to get into Cambodia by following Covid-19 prevention instructions. I was found Covid-19 positive at the border and was sent to a Covid-19 treatment facility in the Oddar Meanchey province where I stayed for one month, and from there was sent to a quarantine centre in the Pursat province for another week before I was allowed to return home.

Source: From an interview with Nida, Bakou village, Pursat province

5.4.2 The impact of Covid-19 on employment in Thailand

Migrant workers lost their jobs upon leaving to return to Cambodia. Many respondents reported that they were aware of these consequences of returning but had little choice. Some even commented that they had not fully repaid their loans at this point, so the loss of income became a burden on their family. This was the case with one couple, who had taken out a loan from an MFI just months before the Covid-19 outbreak forced their return.
Remittances contribute to migrant household income in Cambodia, so job losses mean a direct loss of vital income. For some migrants this meant having to reduce household expenditure, taking on wage work, or taking loans and getting further in debt to cover food and medical costs. One married woman said that while working in Thailand she could earn enough income to repay her debts (fees for migration) but had to return, and has since relied on harvesting rice while her husband sells fish he catches.

A couple who worked in a construction site in Bangkok similarly reported that they had to return to their original village for fear of Covid-19, despite not having repaid all of their loans. This prompted them to take the risk to migrate again to Thailand, despite the uncertain situation of potential border closures. Another female respondent said that she was waiting for the border to open again to return to work in Thailand, so that she could repay the loan she got when she lost her job in Thailand due to Covid-19.

All of the 20 respondents in the surveyed pool owned agricultural land which they could return to, to continue their farming. Despite the uncertain situation brought about by the pandemic, many still retained choices in livelihood options. Income from agricultural land may be significantly smaller, but it at least acts to provide a survival safety net.

5.4.3 The impact of Covid-19 on health and social safety

Of the 20 respondents, only one respondent said that they had access to health care insurance, which in this case was required by the Thai factory where they worked when their spouse became infected with Covid-19. No clear information was available on how she had gained access to the insurance scheme, but she explained that the fee had been paid in part by both the factory owner and the couple.

Other respondents said that they had to self-medicate in cases of infection, while some said that their workplaces provided free medicine but their effectiveness was limited.

While sick, migrant workers (especially those who worked in the formal sector such as factories) were allowed to rest for up to seven days with full pay, and treatment could be received for mild infections. However, Covid-19 testing is not free for migrant workers, as reported by one female respondent; ‘only Thai citizens got the test for free’.

Of the 20 respondents, 15 said that they used to have Equity card, but that their card had expired. Therefore, they were not eligible to receive any cash transfer programme as part of the Covid-19 emergency relief package from the
Cambodian Government. However, returning migrants testing positive for Covid-19 upon arriving at the border (four out of 20) were sent to free treatment facilities receiving three meals during their quarantine period, and between US$150 to US$200 per person for the duration of their Covid-19 treatment. Those who had direct contact with Covid-19 patients or those who returned during the time of the border closures but tested negative (18 out of 20), were sent to quarantine facilities and received three meals per day. After migrant workers completed their quarantine or Covid-19 treatment, they had to pay for their own cost to return to their original villages.

Some respondents said that they had early symptoms of Covid-19 while working at the factories in Thailand. However, some migrant workers reported that they had to use their own savings to get the medicines that they sought (often based on advice from family members in their home villages). One woman reported to have spent about 5,000 Baht (about US$160) to get a Covid-19 test (for both her and her husband) and associated medicine (as her husband was Covid-19 positive). She did not visit the public hospital in Thailand due to not knowing the language and a fear of losing her job if she was found to be infected with the Covid-19 virus.

5.4.4 Social networks

The migrants interviewed often obtained information about migration in general and the journey they would specifically take. Close friends, relatives, and parents influenced migrants’ decisions to migrate (for single migrants), and consulted with spouses if married. Older siblings shared their perspectives too in relation to seeking migration networks and what work in Thailand was like (such as in relation to the living area, wage rates, and travel). Brokers were selected based on relationships of trust between brokers and migrants. Most migrants took the risk to migrate into Thailand without documents, and then had their documents processed in Thailand with the costs covered by employers on credit.

Relatives (close or immediate household members) and friends played a significant role in suggesting the method of migration. Figure 5.2 provides a visual summary of Nida’s story (Box 5.4) of her journey to Thailand after an experience of several previous illegal migrations.

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26 This level of financial support reported by four of our interviewees differs significantly from media reports of between US$40 to US$60 (Mom 2021), previously mentioned in Section 2.1.
Figure 5.2: Nida’s migration journey from Cambodia to Thailand

Source: Authors’ visual depiction of Nida’s migration journey.

5.4.5 Child labour

Of the 20 respondents, two respondents said that they were accompanied by their children to work on Thai agriculture farms near the border. The mothers are the ones who collect the income, and they claim that they distribute a fair amount to their children, who range from ten to 17 years old.
6. Conclusions and policy implications

The social and economic changes in Cambodia and the Southeast Asian region more broadly represent both opportunities and challenges for migrant workers, particularly cross-border migrant workers. Pre-Covid-19, Thailand’s improving agricultural, construction, and industrial sectors provided strong incentives for Cambodian people to migrate for employment, predominantly for agricultural and construction work. The push factors in Cambodia include precarious and unpredictable wage work, increased indebtedness, poor rice crop production as a result of extreme climatic conditions, and low profits in small business.

These push and pull factors did not change significantly during the Covid-19 period, yet job losses in Thailand coupled with a loss of legal status has increased the vulnerability of migrant workers following this forced return to Cambodia, who are often now reliant on a weak safety net of agricultural work in the absence of other forms of social protection. Many desire to return and some are already returning back to Thailand. However, work is typically now in more precarious conditions, with more dangerous journeys taken, an increased cost burden (with an estimated increase of 50 per cent to 60 per cent), and a heavier reliance on informal brokers.

Alongside showing the impact of Covid-19 on migration patterns and journeys, this research has also highlighted a lack of health coverage for undocumented migrants in Thailand, a situation now commonplace and exacerbated by pandemic regulations. During the most severe Covid-19 restrictions, migrant support groups such as the Cambodia association in Thailand provided a safety net for food and other basic support. Established informal support channels such as these could be leveraged or formalised for continued support.

We offer some reflections on implications for policy from the findings of this study, which are elaborated upon more fully in an associated Policy Brief:

- Given that the loss of legal status was a central and common forced dilemma across all four sites, a coordination mechanism is required for returned Cambodian migrant workers who became undocumented, to provide them with support on their return, and for if or when they plan to migrate again.

- Social protection schemes, particularly social health care and social assistance programmes, are needed to support migrant workers, especially during crises where strong and deeply impacting policy measures are put in place.
Official workers engaged with the migration process (such as local authorities, health staff, border soldiers, border officers, and development partners) could be important supporters of migrant workers and are well positioned to play a more active role in providing better information on safe migration routes.

Given the pattern identified of families migrating with young children, exploring how to support migrant children to study (alongside supporting their parents) in Thailand is a necessary step to reduce the prevalence of harmful child labour.
## Annexe 1: Timeline of how the Covid-19 pandemic affected migrant workers in Cambodia

<table>
<thead>
<tr>
<th>Timeline</th>
<th>Covid-19 situation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early 2020</td>
<td>The Covid-19 pandemic starts its global spread including in the ASEAN region.</td>
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<tr>
<td>January 2020</td>
<td>The first Covid-19 case is detected in Cambodia.</td>
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<tr>
<td>March 2020</td>
<td>Cambodia National Response Committee is formed to address Covid-19 outbreak. Restrictions on air travel arrivals to Cambodia is introduced.</td>
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<tr>
<td></td>
<td>Announcement of the Thai-Cambodia border closure.</td>
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<tr>
<td>April 2020</td>
<td>Education institutions, garment factories, and entertainment venues are forced to close.</td>
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<tr>
<td>September 2020</td>
<td>Most restrictions are lifted.</td>
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<tr>
<td>September 2020 - January 2021</td>
<td>The country re-opens fully.</td>
</tr>
<tr>
<td>November 2020</td>
<td>The first wave of a community outbreak of Covid-19 in Phnom Penh occurs. Travel restrictions are imposed. Cambodians travelling from abroad have to quarantine for 14 days at a designated quarantine facility.</td>
</tr>
<tr>
<td>February 2021</td>
<td>The first Covid-19 vaccination programme starts. The largest Covid-19 community outbreak to date occurs.</td>
</tr>
<tr>
<td>March 2021</td>
<td>The prime minister waives quarantine upon arrival for migrant workers in apparent good health who returned from Thailand through provinces along the Thai-Cambodian border.</td>
</tr>
<tr>
<td>7 March 2021</td>
<td>The prime minister issues a voice message about a large-scale community outbreak in Thailand, prompting a required quarantine for returning Cambodian migrant workers.</td>
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<tr>
<td>April - August 2021</td>
<td>City wide lockdown in Phnom Penh with ‘high-risk’ business activities restricted.</td>
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<tr>
<td>June 2021</td>
<td>Curfews are introduced in Siem Reap, PoipetCurfe.</td>
</tr>
<tr>
<td>Date</td>
<td>Event Description</td>
</tr>
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<td>--------------</td>
<td>-----------------------------------------------------------------------------------</td>
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<tr>
<td>July 2021</td>
<td>Samraong in Oddar Meanchey province goes into lockdown.</td>
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<td></td>
<td><strong>Provinces that border Thailand (Banteay Meanchey, Oddar Meanchey, Battambang, Pailin, Pursat, Koh Kong, Preah Vihear and Siem Reap) are put into lockdown for 14 days to combat the spread of the Delta variant into the community.</strong></td>
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<td></td>
<td>Migrants returning from Thailand had amongst the highest rate of infection by the Delta variant.</td>
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<tr>
<td></td>
<td>From January to June 2021, more than 60,000 migrants returned from Thailand. (Same source as above)</td>
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<tr>
<td>June 2021</td>
<td><strong>The border between Thailand and Cambodia remains closed.</strong></td>
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<tr>
<td>23 November 2021</td>
<td><strong>Representatives from both countries discuss the reopening of the Thai-Cambodia border.</strong></td>
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<tr>
<td></td>
<td>While the Thai-Cambodia border remains closed to human crossings, trade exchange is ongoing. Migrants are not able to cross the formal Points of Entry, so instead seek informal PoEs.</td>
</tr>
<tr>
<td>November 2021</td>
<td><strong>The prime minister announces the reopening of the country.</strong></td>
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<tr>
<td></td>
<td>The Thai-Cambodia border remains closed.</td>
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<tr>
<td></td>
<td>Cambodia announces full vaccinated of about 85.68 per cent of its 16 million population.</td>
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<tr>
<td>February 2022</td>
<td><strong>The prime minister announces the full reopening of the country.</strong> No Covid-19 testing is required, with visas on arrival granted.</td>
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</tbody>
</table>
References


Indexmundi (2021) Cambodia Age Structure (accessed 25 April 2022)


Statista (2022) *Age Structure in Cambodia 2010-2020* (accessed 25 April 2022)


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