



COVID-19 RAPID NEEDS ASSESSMENT: MAHACHAI SUB-DISTRICT SAMUT SAKHON PROVINCE (ROUND 4)

INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)
FEBRUARY 2021



DTM

IOM DISPLACEMENT
TRACKING MATRIX

BACKGROUND

In light of the recent outbreak of COVID-19 in Samut Sakhon province, migrants, irrespective of their legal status, face a new set of challenges and vulnerabilities. The stringent movement restrictions and temporary disruption of income-generating activities pose a significant burden on migrants employed in both the formal and informal sectors. With limited or no access to technology, limited capacity to cope and adapt, little or no savings, inadequate access to social services, and uncertainty about their legal status and potential to access healthcare services, thousands of migrants find themselves facing renewed hardship as a result of both lockdown measures and possible health risks.

However, the full extent to which these challenges and vulnerabilities are affecting migrant communities in Samut Sakhon, and particularly in Mahachai sub-district - at the epicentre of the outbreak - is unknown. It is also unclear whether migrants are receiving sufficient information about COVID-19 or have access to the resources which will allow them to maintain the hygiene and sanitation standards required for effective protection. To fill this data gap and inform possible responses, IOM initiated a data collection exercise focused on: 1) Understanding the health concerns of migrant populations in Mahachai sub-district; 2) Understanding the impact of lockdown measures on migrants in Mahachai sub-district; 3) Understanding the information needs of migrants in Mahachai sub-district; and 4) Understanding the assistance received by migrants in Mahachai sub-district. This report is the fourth in a series of rapid assessments.

METHODOLOGY

The Displacement Tracking Matrix (DTM) is a set of tools and methodologies which enable systematic and regular primary data collection, analysis and dissemination of population movements, human mobility and forced migration (both internal and cross-border). Originally designed to serve the humanitarian community during crises, DTM has also been implemented to respond to the COVID-19 crisis.

By using a snowball sampling method, IOM used its network and that of Migrant Workers Rights Network (MWRN) to identify eight key informants who were able to provide informed answers on the situation and vulnerabilities of migrant communities in Mahachai sub-district of Samut Sakhon province. These key informants were representatives from six of the primary migrant communities around the Central Shrimp Market in Mahachai sub-district. Key informants provided information about the migrants in their communities.

The information presented in this report represents estimates and perceptions provided by key informants. External validity of the study is therefore limited, and generalizations should be avoided. It should also be noted that information was not collected on all migrant communities in Mahachai sub-district and the report should therefore not be viewed as comprehensive in nature. Nonetheless, the results of this rapid assessment can be used to develop a better indicative understanding of the vulnerabilities and needs of migrants in Mahachai sub-district, and can serve as a basis to inform the humanitarian response.

Data was collected through phone surveys administered by one IOM staff (male) between 15 and 17 February 2021.

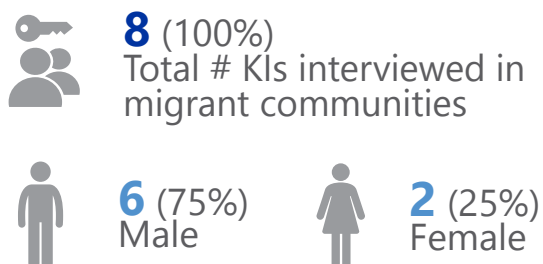
NOTES AND DEFINITIONS

Migrants: All persons resident in Thailand who do not hold Thai citizenship regardless of country of birth, usual residence, citizenship or legal status.

Multiple answer: When the label "multiple answer" is found next to a graph or a question it indicates that a single respondent was allowed to provide more than one answer. For this reason, totals do not add up to 100%.

KEY INFORMANTS

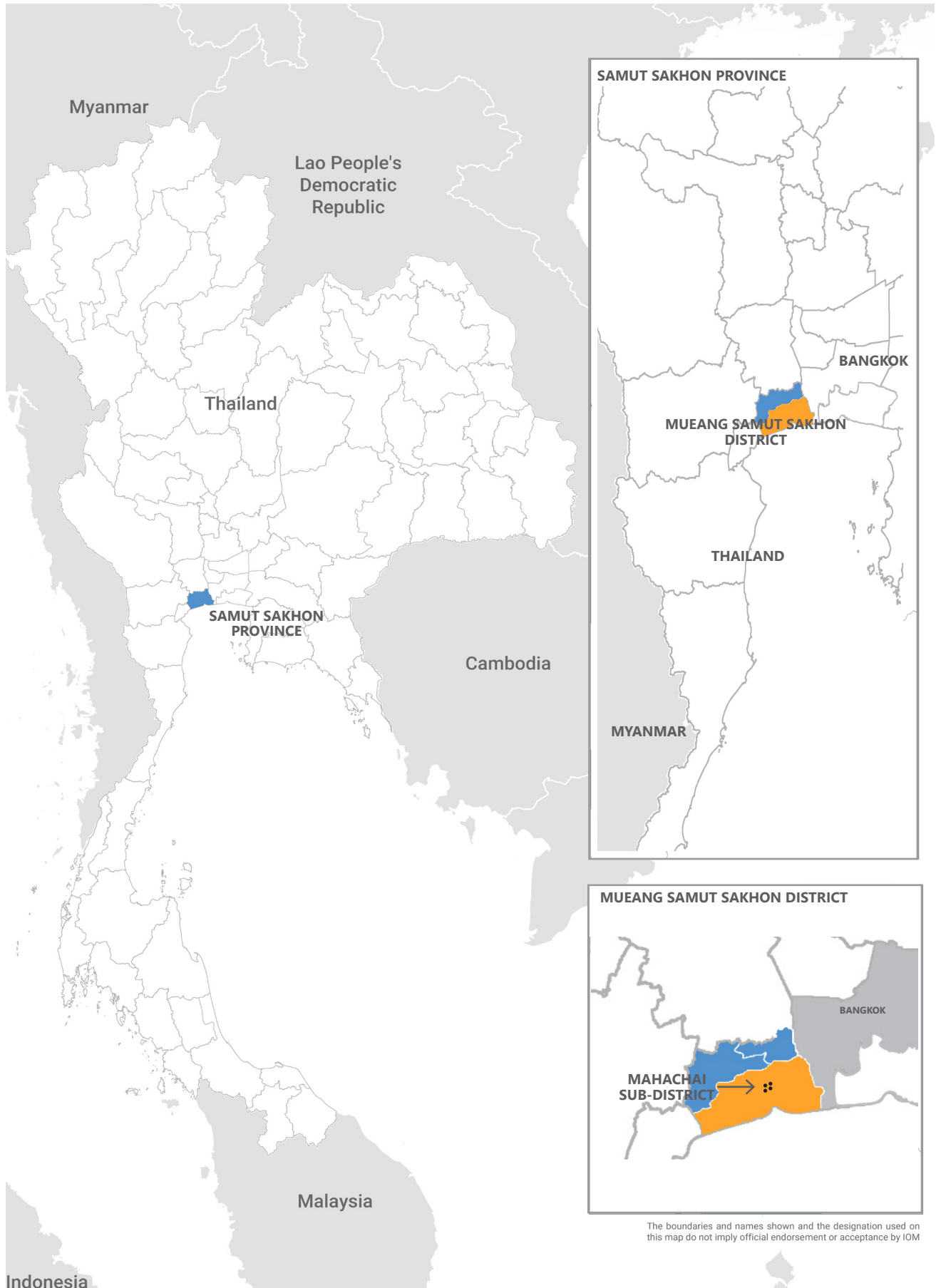
KEY INFORMANTS BY SEX



KEY INFORMANTS BY TYPE



GEOGRAPHICAL SCOPE



POPULATION

MIGRANT POPULATION



24,802 migrants are estimated by KIs to live across 6 communities surveyed in Mahachai sub-district



15,173 (61%)
Migrant female



9,629 (39%)
Migrant male



24,800
Myanmar migrants



2
Cambodian migrants

HEALTH CONCERNS



20 (close to 0%) migrants estimated to currently have fever, cough, or respiratory symptoms



92 (close to 0%) migrants are estimated to have chronic medical conditions



201 (1%) migrants estimated to be older persons (over the age of 65)



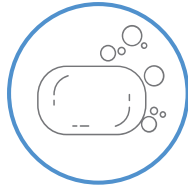
181 (1%) migrants are estimated to be pregnant

KIs estimate that 24,802 migrants live in the Talad Kung, Thai Union, Kon Maya, Baan Aue Arthorn, Talad Thai, and Tha Sai communities in Mahachai sub-district. Myanmar migrants account for almost 100 per cent of the migrant population in these communities and females represent the majority of migrants. The data indicates that the number of migrants estimated to have symptoms of COVID-19 have decreased compared to earlier needs assessments undertaken by IOM in December 2020 and January 2021.

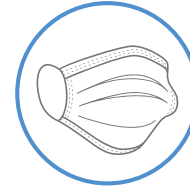
PERSONAL PROTECTIVE EQUIPMENT NEEDS



800



800



800

KIs were asked a series of questions related to personal protective equipment (PPE) needs in their communities. Only KI representatives from Thai Union and Kon Maya estimated that migrants in their communities need hand sanitizer or alcohol for sanitizer purposes, soap, and face masks. Overall, the findings suggest a significant decrease in PPE needs in the six communities assessed.

IMPACT OF LOCKDOWN ON MIGRANTS

IMPACT OF LOCKDOWN ON EMPLOYMENT

1,810



migrants or 7 per cent of the total migrant population in the communities assessed are estimated to be currently out of work since the lockdown on December 19, 2020.

SHARE OF MIGRANTS WHO ARE UNABLE TO FULFILL THEIR BASIC NEEDS



KIs estimated that 2,950 migrants or 12 per cent of the total migrant population in the communities assessed are unable to meet their basic needs since the imposition of lockdown measures.

IMPACT OF LOCKDOWN ON FOOD CONSUMPTION

2,950



migrants or 12 per cent of the total migrant population in the communities assessed are estimated to need food assistance. Rice and cooking oil are the most needed items, followed by tinned fish and eggs.

MAIN TYPES OF FOOD ASSISTANCE NEEDED



Rice



Cooking oil



Tinned fish



Eggs

IMPACT OF LOCKDOWN ON HYGIENE AND SANITATION

2,700



migrants or 11 per cent of the total migrant population in the communities assessed are estimated to need hygiene items. Detergent, toothbrushes and toothpaste were flagged as the most needed hygiene items.

MAIN TYPES OF HYGIENE ITEMS NEEDED



Detergent



Toothbrush



Toothpaste

IMPACT OF LOCKDOWN ON MEDICAL SUPPORT

800



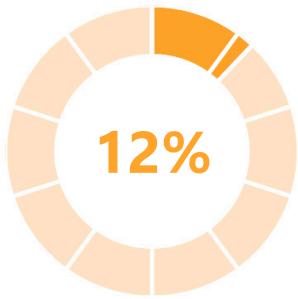
migrants or 3 per cent of the total migrant population in the communities assessed are estimated to need medical items.

MAIN TYPES OF MEDICINES NEEDED



The medical items flagged by KIs as being most needed were cold relief medicines (paracetamol, decongestant and cough syrup).

IMPACT OF LOCKDOWN ON ACCESS TO MEDICAL TREATMENT



of KIs indicated that migrants in their communities are unable to access medical treatment.

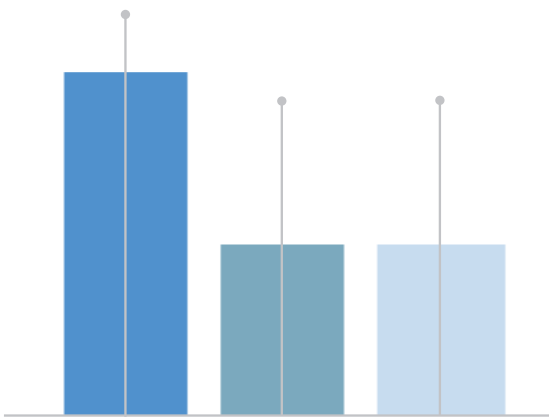
PRIMARY BARRIERS TO ACCESSING MEDICAL TREATMENT



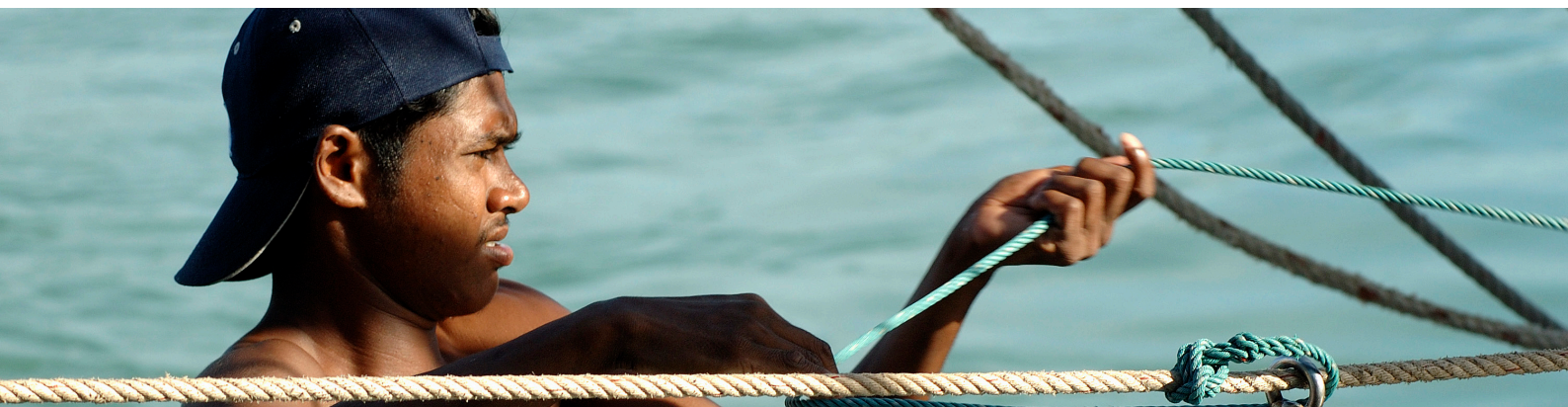
- Fear of detention/arrest
- Financial barriers (additional charges related to COVID-19 testing before seeing a doctor)

MAIN CONCERNS MIGRANTS ARE FACING SINCE THE LOCKDOWN

- Economic/financial problems
- Discriminatory treatment
- No challenges

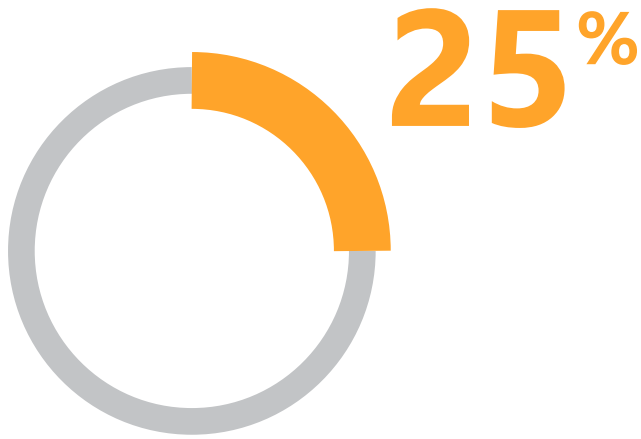


When asked about the concerns migrants are facing since the imposition of lockdown measures, 50 per cent of KIs stated that migrants in their communities are primarily concerned about economic and financial problems such as insufficient income, unemployment, debt, or concerns over job security. Another concern raised by KIs was discriminatory treatment, particularly from shop-owners refusing to sell food and goods to migrants. Twenty-five per cent of KIs indicated no concerns during the data collection period.



ACCESS TO INFORMATION ON COVID-19

DISTRIBUTION OF COVID-19 INFORMATION AND COMMUNICATION MATERIALS



of KIIs reported that IEC materials on COVID-19 are not being distributed in their communities. In communities where IEC materials are being distributed, all KIIs reported that materials are being distributed in migrant languages. Information is primarily being distributed by social media (Facebook), messaging applications (LINE), television, radio, print media and word of mouth through both official and unofficial channels. KIIs indicated that the information being distributed mainly covers COVID-19 prevention and hygiene and how to stay mentally and physically healthy during lockdown. No KIIs reported any information needs or gaps.

ASSISTANCE RELATED TO COVID-19 LOCKDOWN



of KIIs reported that migrants in their communities have received support. Among the KIIs who reported their communities had received support, all KIIs stated they had received support in the form of food and water, 86 per cent stated they had received information about COVID-19 and 29 per cent stated they had received hygiene and sanitation items.

Main support provided by NGOs or government

(Multiple answers possible; top 3 answers only)

100%
Food and water

86%
Information about
COVID-19

29%
Hygiene and
sanitation items





IOM Thailand
18th Floor, Rajanakarn Building
3 South Sathorn Road Bangkok 10120

Tel: (+66) 2-343-9300
Fax: (+66) 2-343-9399
Email: iomthailand@iom.int
Website: www.iom.int