

A RESEARCH BY



CENTER FOR  
MIGRANT ADVOCACY

*Accessibility to  
Social Security  
for Migrant  
Domestic  
Workers*

IN PARTNERSHIP WITH  
AWO INTERNATIONAL



International e.V.

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## **Accessibility to Social Security for Migrant Domestic Workers**

### **I. Executive Summary**

The Center for Migrant Advocacy (CMA) conducted a research on the subject of Filipino migrant domestic workers' (MDWs) accessibility to social security both in the Philippines and while abroad in the country of destination. The study determined elements that prevent MDWs access to these benefits and programs through different Philippine social security government bodies and agencies such as the Republic of the Philippines Social Security System (SSS), the Philippine Health Insurance Corporation (PhilHealth), and the Home Development Mutual Fund (Pag-IBIG). The study was administered from April to July 2019 for a total of four (4) months. Data was gathered through semi-structured interviews with key informant interviews (KIIs) from the aforementioned agencies and bodies. Data was also gathered through Focus Group Discussions (FGDs) with Filipino MDWs who were deployed from 2008 - 2019 in Singapore, Malaysia, Saudi Arabia, Qatar, and Kuwait.

The research showed that there are several factors that prevent the access of social security for our MDWs. The data from the FGD revealed that among MDWs, awareness of social security laws and policies in the Philippines is low, there are physical barriers such as remoteness, isolation, and restricted mobility. Legal barriers such as lacking documents, and burden of presenting proof was stated as well. The Key Informant Interviewees acknowledge the lack of information, difficulty with communication, requirement deficiency, limitations of the host country, and sustainability of contributions as elements that affect the accessibility.

It is recommended that the lack of information is addressed through inclusion in Pre-Departure Orientation Seminars (PDOS) and Post-Arrival Orientation Seminars (PAOS), information campaigns, improve modes of collection, review implementation of upcoming laws, lobby for Social Security Arrangements (SSAs) in contracts, merge current SS programs into one for MDWs, make resolutions to include MDWs in Pag-IBIG Affordable Housing Loans for Low Income Earners, and include Private Recruitment Agencies (PRAs) and Training Centers in information dissemination.

### **II. Introduction**

#### **A. Definition of Terms - Social Security**

In the course of transit and movement, migrants fall out of the jurisdiction of their country of origin and of the country of destination, often falling "in between cracks". These migrant

workers are generally excluded from the social security assistance but readily available for host country citizens while the home country provides weak systems of support (Hennebry 370).

According to the ILO, of the world's population, more than half lacks any type of social security protection, with only an estimated number of 75% (ILO xxi). "Broadly defined as public policy measures aimed to protect members of society against social and economic distress in relation to sickness, economic insecurity, unemployment, disability, poverty, old age, and so on. Social security and social protection are often used interchangeably. Whilst the former is a state-based affair, the latter can include private measures such as employer-funded schemes because of the more limited scope of private measures" (Taha et al. 97).

The ILO has defined social security as "the protection that a society provides to individuals and households to ensure access to health care and to guarantee income security, particularly in cases of old age, unemployment, sickness, invalidity, work injury, maternity or loss of a breadwinner." (Tamagno 5). More than this, social security is a human right, as determined by UN instruments such as Article 22 of the United Nations Declaration of Human Rights and past ILO conventions such as ILO's Declaration of Philadelphia (1944) and the Income Security Recommendation (1994).

Aside from social security being able to prepare safety nets for members of society in the chance that the family experiences a loss of income, short periods of unemployment, sickness, maternity, employment injury, or pension in the instance of retirement, benefits also include children in which families need financial help for educational expenses. On the other hand, impacts of social security include greater social cohesion and overall growth for the country, development in the living standards, and a better relationship between employers and the workforce.

### B. Branches of Social Security

ILO Convention No. 102 or the Social Security (Minimum Standards) Convention of 1952 was the first to identify the international standards for social security systems and the nine branches of social security which are sickness benefits, unemployment benefits, medical (health) care, survivors benefits, invalidity benefits, maternity benefits, old age benefits, employment injury benefits, and family benefits. With each social security branch, exists various programs which employ several financing arrangements like cash benefits or lump sums which can either be provided by the private or public sectors (ILO 5).

### III. Methodology

The study used qualitative research with focus group discussions, and semi-structured interviews. Data was gathered through Focus Group Discussions with returned migrant



domestic workers who have previously transacted with relevant government agencies dealing with social protection such as the Social Security System of the Philippines, Pag-IBIG, PhilHealth etc. The data collected was then analyzed using thematic analysis of the emerging themes in the interviews and FGDs.

The participants of the Focus Group Discussions were chosen through purposive and snowball sampling, starting with CMA's pool of Migrant Domestic Workers contacts. The participants currently reside in Manila, Rizal, Bulacan, and Oriental Mindoro. The MDWs were all deployed from 2008 - 2019 in Singapore, Malaysia, Dubai, Saudi Arabia, Qatar, and Kuwait. A total of four FGDs were conducted, with 2-5 participants each. A total of 14 participants took part in the discussions. The FGDs lasted for approximately an hour to two hours. The activity was conducted in Filipino. The FGDs were recorded, transcribed, and then analyzed.

Data was also gathered through semi-structured interviews with the pool of Key Informant Interviewees (KIIs) which will be taken from the policymakers and administrators, particularly in the field of social security measures of the Philippines. A total of five government officials were interviewed from Pag-IBIG and SSS. Interviews lasted for approximately an hour to two hours. The interviews were conducted in Filipino and English. Notes and recordings were taken from the interviews as well.

The following are the questions for the SSS government officials:

1. What are the common problems regarding access to social security for migrant domestic workers?
2. How does SSS operate abroad?
  - a. Do the operations differ per country/region/sector?
  - b. Currently, where are your offices abroad?
  - c. How do you reach out to our OFWs abroad from the Phil and from your offices abroad?
3. What is the process/what are the requirements for acquiring the benefits for a migrant domestic worker currently abroad?
4. How is the process for determining which applicants receive benefits first?
5. What is the basis for the criteria needed to avail of the benefits?
6. Do you think that the new SSS law can improve further enrollment and availment of SSS programs for MDWs?

7. MDWs earn relatively less than other Overseas Filipinos, but they are also the ones in need most of the benefits of SSS, do you have a strategy to attract MDWs to enroll in SSS despite their more difficult circumstances?

The following are the questions for the Pag-IBIG government officials:

1. What are the common problems regarding access to social security for migrant domestic workers?
2. How does Pag-IBIG operate abroad?
  - a. Do the operations differ per country/region/sector?
  - b. Currently, where are your offices abroad? How do you reach out to our OFWs abroad from the Phil and from your offices abroad?
3. What is the process/what are the requirements for acquiring the benefits for a migrant domestic worker currently abroad?
4. How is the process for determining which applicants receive benefits first?
5. What is the basis for the criteria needed to avail of the benefits?
6. Do you think that the RA 9679 improved further enrollment and availment of Pag-IBIG programs for MDWs?

The following are the questions for migrant domestic workers participating in the FGDs:

1. Are you aware the laws for social protection both in the COD and COO?
2. Have you tried availing of the benefits of social protection in the Philippines or in your country of destination?
  - a. If no, what prevents you from applying for any form of social protection?
3. What are the requirements?
4. Are these requirements easy to obtain?
5. Were you aware that you needed these documents before applying?
6. How were you able to know the documents needed?
7. Instances that you don't meet the requirements to avail the benefits, what do you do?



8. Are you aware of the process of availing of benefits?

#### IV. Statement of the Problem, Research Questions, and Objectives

##### A. Statement of the Problem

According to the UNDP, about 80% of the global population lives in social insecurity, unable to enjoy a set of social guarantees that enable them to deal with life's risks. In addition, this number mostly consists of children and women, informal sector workers, and other marginalized groups such as migrant workers, people with HIV/AIDS, and the disabled. Particularly for the group of migrant domestic workers, they are confronted with a multitude of difficulties such as mistreatment, exploitation, human rights violations, and lack of any form of social protection in countries of destination (7).

In spite of the invaluable contributions of these migrant workers to their home countries through remittances, this particular group remains precariously vulnerable while being excluded from social protection schemes of the countries they work for. These migrants are often in the "third space" or in a position of liminality in which they do not have the same access and protection provided to nationals or permanent residents. In many instances access to social protection in countries of destination are dependent on immigration status or national citizenship, while temporary migrant workers lie in a "state of permanence" in which they are inside a country's bounds but denied proper access (Hennebry 370-371).

##### B. Objectives

1. To analyze the system of acquiring these public goods by looking at formal rules, rule makers, administrators, and participants
2. To determine the degree to which these are accessible
3. To understand and detect areas of vulnerabilities in social protection for Migrant Domestic Workers
4. To identify gaps in the system and propose possible policy interventions and reform strategies

##### C. Research Question

1. What are the physical and legal barriers that hinder access to social security for migrant domestic workers?

#### V. Scope and Limitations

This is only focusing on migrant domestic workers as opposed to permanent residents or immigrants. The participants of the FGD are limited to migrant domestic workers that were

deployed from 2005 - 2019 in Singapore, Malaysia, Saudi Arabia, Qatar, and Kuwait. This focus is further justified by the unique difficulties that such workers face in accessing social security protection. The research focused on these countries seeing that countries in Asia are the leading destinations of OFWs for the year 2016 (Philippine Statistics Authority xviii). While permanent residents are often given access to benefits in the host country with the same treatment as its citizens, temporary contract workers, particularly low wage workers, are often denied such access.

The fact that we are focusing on temporary migrant workers has a significant bearing on our recommendations pertaining to social security provisions. Temporary migrant workers refers to those who work abroad for a limited and specific duration of time with the full intention of returning to the country of origin. Migrant workers who have left their families behind and who likely plan to return to the Philippines have unique social security interests as compared to other categories of migrant workers. They will likely be interested in ensuring portability of benefits, access to social security for their families left behind, wage equality, and maximizing their remittances.

The Social Security Act of 2018 and the Universal Health Care Act will not be included in the research. The Implementing Rules and Regulations (IRRs) for both laws have yet to be finalized and implemented and is beyond the time allotted for the research.

## VI. Framework

Four elements comprise social protection for international migrants. This consists of the following (Avato et al. 456):

1. Access to formal social protection-- social security and social services--in host and origin countries
2. Portability of SS rights or rights in the process of being bested between host and origin countries
3. Labor market conditions for migrants in host countries and recruitment process for migrants in the origin country
4. Access to informal networks to support migrants and their family members

This research will be focusing on the access to formal social protection component. This element has a bearing on a migrant's vulnerability level as this comprises health care benefits, long-term social security benefits as well such as disability and old-age benefits, and includes short-term benefits like maternity, unemployment, social assistance, public housing, family allowances, and the like.



There is a criteria which evaluates social security through “considering the extent to which individuals are entitled (on paper) to social security schemes and essential services, the degree to which they are accessible (in practice), as well as democratic mechanisms that enable participation in determining the forms of such protections (e.g. voting, consultation)” (Ibid.)

This research will use the same criteria for evaluating the social security currently present for our domestic migrant workers from the Philippines, particularly concentrating on the extent to which these are accessible in practice.

## VII. Overview

### A. Pag-IBIG

The Home Development Mutual Fund or commonly known as Pag-IBIG is considered as a mechanism for social security due to its directive to provide adequate shelters and savings to our Filipino workers. As one of the major social institutions in the Philippines, Pag-IBIG membership was extended to include migrant workers or Overseas Filipino Workers (OFWs) through the Pag-IBIG Fund Law of 2009 (RA 9679). According to this law, all OFWs, both land and sea based are included in the mandatory coverage and are required to register before leaving the Philippines.

Members of Pag-IBIG may withdraw the member’s total accumulated savings (TAV) which consists of both the employer and employee contributions and the dividend earnings credited to the member. However, withdrawal can only be done either due to retirement, permanent/total disability, insanity, permanent departure from the country, death, separation from service due to health, or after at least 240 months of contributions or for the Pag-IBIG Overseas Program (POP) at the end of the 5, 10, 15, or 20 years as stated by the member upon registration. Pag-IBIG also offers loans such as the multi-purpose loan, calamity loan, and housing loan. It is important to note that to avail of these loans or benefits, there are requirements that the applicant needs to meet in order to qualify and usually entails having met a minimum number of monthly contributions. As of March 2019, there are 14.11 million active members and out of this, only an estimated 1 million are OFWs. Pag-IBIG has 23 posts abroad with 9 in the Middle East, 4 in Europe, 2 in North America, and 8 in Asia Pacific (Pag-IBIG Interview, June 2019).

### B. SSS

SSS or the Social Security System of the Philippines was established through RA 1161 or the Social Security Act of 1954. This continued to evolve and through the Social Security Act of 1997 (RA 8282) the SSS widened the scope of coverage, increased benefits, provided additional loan privileges, and created a voluntary provident fund. The mission of the SSS according to their mandate states that “to manage a sound and viable social security system which shall promote social justice and provide meaningful protection to members and their families against the hazards of disability, sickness, maternity, old age, death and other contingencies resulting in loss of income or financial burden”.

Benefits of SSS include retirement, death and funeral, permanent disability, sickness, and maternity. Each benefit/program has a specific set of requirements to meet and also a minimum number of contributions before being eligible to claim benefits. Currently, Domestic Workers are categorized under SSS as voluntary members; being a member is not a requirement before leaving the country. Recently, the Social Security Act of 2018 (RA 11199) has been passed but is yet to be implemented. In this new law all land based migrant workers, including domestic workers, are now categorized under self-employed members and is now considered mandatory. To date, there are 1.14 million OFWs registered but only 550,500 are actively paying (SSS Interview, July 2019).

### C. PhilHealth

Republic Act 7875 or the National Health Insurance Program was enacted in 1995. The Philippine Health Insurance Corporation or PhilHealth administers the National Health Insurance Program which aims to supply health insurance coverage and provide affordable and accessible healthcare to Filipino citizens. PhilHealth administers a wide array of health services which comprise of hospital confinements and outpatient surgeries in the Philippines, allowances for laboratory exams, drugs and medicines, and many more. For OFWs, their dependents can receive the same benefits as a member and the confinements of OFWs overseas may be reimbursed, with a deadline of 180 days upon discharge. Currently PhilHealth registration is not tied to the OEC or Overseas Employment Certificate for Filipino Migrant Domestic Workers. The Universal Health Care Act (RA 11223) was signed earlier this year and the IRR is yet to be finalized. As of December 2018 there are a total of 53, 816,468 members registered. Of this number, 22% of the covered members are comprised of the informal economy which includes the migrant workers amounting to 337,426 members (“PhilHealth Stats and Charts 2018”).

## VIII. Findings and Results

The following findings below are indicative of the opinions and perspectives of the respondents of both the interviews and the focus group discussions thereby cannot be



generalized due to the qualitative nature of the research. Although cannot be generalized, these findings shed light on how some MDWs respond to the mandatory SSS requirement.

#### A. Focus Group Discussion Findings

##### *Awareness of social security policies and programs is low*

In the FGDs that were conducted, all the participants were aware of the government bodies related to social security in the Philippines namely, SSS, Pag-IBIG, and Philhealth. When asked about the membership status of the MDWs in relation to the four above mentioned agencies, participants would have different sets and circumstances of memberships. Some were members of all, and some were members but are currently inactive or have not paid a single contribution, some paid contributions but only for a few months, etc. The other participants stated that their SSS memberships were due to their previous jobs before they became domestic workers.

Upon asking the participants if they were aware of the policies and programs that the mentioned government bodies had for social security, although aware of the functions, could not name specific programs except for the Balik Pinas program by OWWA and death benefits such as lump sums or burial assistance. It was then asked whether the programs of the government regarding social security were discussed either in the Pre-Deployment Orientation Seminar (PDOS) or in any manner from the government or the agency prior to being deployed abroad and all said no. It was also revealed that their agencies did not explain or orient them about these government agencies, their functions, or the social security benefits they could avail.

##### *Social Security contributions are not seen as a priority for MDWs*

The MDWs who participated in the FGDs had stated that discontinued or inconsistent contribution payments were due to the fact that other family matters are more urgent and given more priority over social security contribution payments. The MDWs stressed putting their children's education, basic necessities such as food, medicine, electricity, water, buying land/house, and other family and everyday needs ahead and as the top priorities. Aside from this, it was also mentioned that contributions were stopped since upon return they are currently unemployed and have no money to shell out.

Despite being unable to make successive and consistent contributions to the social security programs in the government, the participants of the FGDs understand the value of having social security and saw this as savings, pension, and as a form of insurance.

##### *Physical barriers: remoteness, isolation, restricted mobility*

The participants stated physical barriers such as distance, restricted mobility, and isolation. The physical distance from the employer's house to the embassies, consulates, or official offices is a factor that adds to problems with accessibility. Participant A mentioned how her employer's house was on a farm that was 1-2 hours away from the city. A key informant revealed how a bus ride would cost roughly 7,000 pesos or 500 riyals, in which the transportation would cost more than the Pag-IBIG contribution of about 300 pesos.

The physical distance between a MDW and their family also aggravates the situation. In some cases, communication is limited, and the MDWs lose access to communicating with their families, with some employers confiscating their cellphones and in turn further isolate the MDW. On top of this, MDWs especially in the Middle East, have extremely restricted mobility. The participants who needed medical help or suffered from ailments while in their employer's home all highlighted the need to ask permission from their employers and additionally relied on their employers to be able to transport them from employer's home to the medical facility.

Either the employer or the employer's driver brought the MDW to be treated. In one instance, Participant B escaped from her employer's home after being raped and was brought by the police into a medical facility in Saudi Arabia. All the cases of MDWs needing medical attention as mentioned in the FGDs, involved physical transportation which was heavily relied on the employer. In other time sensitive circumstances, transportation is extremely crucial and needed but access to this is unavailable.

#### *Legal barriers: documents and presenting proof*

In the Philippines, since 2010 it was enforced that MDWs are required under law for mandatory Pag-IBIG membership before being deployed to their host countries. Currently, only OWWA and Pag-IBIG memberships are required for MDWs while SSS and PhilHealth are on a voluntary basis. The voluntary coverage means that the MDW will have to shoulder both contributions of the employer and the employee.

For the MDWs part of the FGDs, document withholding and confiscation occurred for those who were confined or assessed in hospitals abroad. For the MDWs who experienced these, no documents were shown but in some instances passports were shown but were still held by the employer. The medical certificates, receipts, and other documents as such were taken by the employer and no copies were provided for the MDW. Participant B recalled leaving all her documents with her employer when she escaped and was admitted in the hospital abroad without being asked to show any documents but was still able to receive medical care.



It was also revealed that the family members left behind by the MDW in the Philippines were unable to avail any of the benefits when needed, especially for the health or PhilHealth concerns. When asked whether their family members were able to use any of the PhiHealth/SSS/Loan benefits and all collectively said no. The participants mentioned how the ailments of their family members/dependents did not meet the criteria set out by the government. Participant C brought up an incident that her son was bitten by a dog when she was abroad and sought help from PhilHealth and was told that it was not covered by the program. In turn they had to shell out their own money, approximately 15,000 pesos to treat the child.

The families of the participants also experienced difficulty in applying for the benefits or saw it as a bother, needing a great deal of time. When asked for the reason for not applying for these benefits the participants specified their families needing a copy of their signature and the MDW not being able to easily send the required documents or having no one at home able to attend and go through the process of applying. Participant D mentioned how her husband is also an OFW and her son needed a gall bladder operation but was denied aid because they needed a signed document despite the child being on the list of dependents.

The topic of distance was also brought up as a factor that affects the families of migrant workers. Those living in rural areas or far flung provinces would have to go to the nearest urban centers or sometimes even the offices in Metro Manila to fix their documents or transactions.

### *Barriers to accessibility while in Country of Destination*

It was revealed that several of the MDWs needed medical attention or had ailments while in the country of destination. Participant E experienced appendicitis while in Singapore. Participant F experienced severe bleeding, Participant G was paralyzed, while Participant I had an ulcer attack, all going through this in the Middle East. Participant H was raped and admitted into a psychiatric ward.

The employers highlighted the isolation the MDWs experience while in the country of destination. The FGD participants who experienced some form of illness relied on their employer, needing their permission in order to seek medical attention. It was noted that some employers did not believe the MDW and brushed off their problems regarding their physical health. There were cases of MDWs being beaten, reprimanded, berated, and even blamed for their physical ailments while abroad. A participant brought with her documents from the Philippines such as ultrasounds proving her illness to her employer but this was dismissed as well. It is important to note that the employers of the MDWs who participated, only brought them

to get checked when the case was already severe, meaning they had fainted, lost consciousness or were unable to move their bodies, or certain body parts. In the case of a Participant 9, instead of a doctor, her employer brought her to her agency. The agency did not bring her to a doctor to seek professional help.

Two participants were brought to medical centers while in Saudi Arabia. They did not shell out their own money nor did their employers pay for any fees. Participant J mentioned how at first she was brought to a private hospital but then after the expensive fees her employer brought her to a medical center run by the government and her employer and she did not pay for anything. The center just asked for their passports and got a xerox copy. Participant H who was admitted into a psychiatric ward indicated that she did not have to pay for anything while she was confined.

#### *Access when returned to the PH*

However, upon returning to the Philippines, the above mentioned participants did not receive any financial help from the government and used their own money to either continue treatment or for their medicines. Participant A approached OWWA after returning home and was denied saying “bawal” and the staff saying no doctor was available to examine her and with the staff being unsure of when the doctor would be available.

The participants who experienced being given medical assistance through medicine such as pills mentioned how the medicine prescribed by the doctor abroad was different from what was prescribed to them in the Philippines.

#### *Inclusion in contracts/agreements*

According to Philippine law, the MDW is listed under voluntary membership for SSS which requires them to pay both the employer and employee shared contributions. However, in some cases the employer pays the contributions for the MDW. Participant 8 cited that the contract stated her employer agrees to pay for her SSS contributions. Upon returning she was able to check and it was verified that her employer paid for the past two years. Another’s employer showed her the receipts in order to prove the contributions that were being made. A participant stated as well that her agency paid for her contributions. Participant J stated that contributions were part of her contract but her employer or agency did not pull through and make the contributions. Others only had their Pag-IBIG membership paid for by the agency but no contributions were made.



A participant disclosed that in her contract it stated that if the need arises, her employer would have to pay for her medicine but this was not followed and they ended up using their own money.

## B. Key Informant Interviews Findings

### *Lack of information and difficulty with communication*

Interviewee 2 specified lack of information on government services, programs, and benefits as a common problem in access to social security. Due to the lack of information, the MDWs lose opportunities and miss out on these benefits. Upon asking if these government agencies are present in PDOS or Pre-Departure Orientation Seminars, both agencies are only present in selected PDOS sessions. Although the two agencies have offsite services such as participation during embassy or consular mobile services, both agencies still rely heavily on electronic forms of information dissemination, namely, Facebook and emails as the most used. Pag-IBIG also has form and apartment visitations but only with selected partners such as seafarers and none with the MDWs sector.

Despite local advertising through television, radio, print, and the internet, Interviewee 2 mentioned that this is not enough as difficulty with communication still persists. The interviewees recognize the limits of some of the MDWs with communication and are aware of the employers taking the MDWs cellphones and have extremely limited access to communication.

### *Requirement deficiency*

Interviewee 2 revealed requirement deficiency as a problem in accessing social security for MDWs. There have been instances that some OFW members have trouble with presenting documents such as valid IDs and proof of income. This results in being unable to claim benefits or loans. Interviewee 5 indicated that although there are benefit claims that can be done online, other benefit claims need documents to be presented and requires face to face filing.

### *Limitations of host country*

Both interviews mentioned that culture, religion, and laws of the host country affect their operations abroad. Interviewee 1 also mentioned how problems of access tend to differ per country or region. All the government officials stated that countries in the Middle East are more difficult to operate in compared to others. Interviewee 4 mentioned how Singapore and Hong

Kong are easier to handle since these are geographically smaller than the scope of the Middle East.

The topics of limited internet access, harder communication, and mobility restrictions we brought up as well. Aside from acknowledging the mobility restrictions of the MDWs in the Middle East, both government agencies mention the mobility restrictions experienced by female personnel as well. Interviewee 4 mentions that for the Middle East posts, they purposely choose male representatives since females need male escorts in those regions. Interviewee 2 revealed how a bus ride would cost roughly 7,000 pesos or 500 riyals, in which the transportation would cost more than the Pag-IBIG contribution of about 300 pesos.

Aside from this, Interviewee 1 stated difficulty in giving out flyers to OFWs, they are unable to easily give out flyers. Stating an instances when she would encounter MDWs while out in the Middle East and how she cannot outright hand out flyers by cause of security guards or employers not permitting MDWs from receiving. The interviewee also mentioned convoys of the host country, accompanying them when they would go on official business outside of the office.

#### *Sustainability of contributions*

All the interviewees mentioned the problem of sustainability or continued contributions. Interviewee 2 stated how some MDWs members would just enroll and not pay contributions at all, or have a few contributions but would not be consistent. This can be due to not being a priority, lack of time/days off, and mobility issues due to employers and the distance needed to travel. Interviewee 3 mentioned a case in the Middle East wherein due to the distance of the employer's house to the city, the MDW would have to pay around 7,000 pesos for a bus ride just to pay the 300 peso contribution for Pag-IBIG. It is important to note that the number of contributions is vital and part of the criteria for being eligible to receive benefits from these social security agencies.

#### *Lack of adequate personnel*

The interviewees from both agencies mentioned the lack of adequate and properly equipped personnel abroad. Interviewee 5 mentioned how their agency is only given one personnel slot for their office in the embassy/consulate abroad. The administrative staff is locally hired in the host country and only one authorized personnel from the Philippines has the agency to sign claims, benefits, and has proper knowledge regarding the functions and programs of the government agency. The other government agency that was interviewed also mentioned how due to a 2014 Department of Foreign Affairs (DFA) ruling and lack of resources, they are unable to send employees who are from the Philippines.



## IX. Conclusions and Recommendations

The study has found that there are several factors that hinder access to social security for MDWs abroad. Aside from this, there are factors that also affect government agency operations while abroad.

1. Knowledge on the programs and benefits being offered by the government is low. The research found that the participants who were asked to name government policies and programs could not name any or could only name death and burial benefits. To further confirm this, the government officials who were interviewed mentioned how they are only present in some PDOS sessions and that they also observe a lack of information when it comes to MDWs or even OFWs in general.
2. Cultural, geographical, and religious contexts of the host countries are factors that have to be taken into account. Operations of government agencies that offer social security services are also limited by the host countries. Interviewees have expressed difficulty securing permits for activities outside the office.
3. Lack of proper documentation is a problem for both the MDWs and the government officials. The FGD participants all mentioned the difficulty in presenting documents since their employers keep their records and refuse to give them a copy. The interviewees confirmed this as a hindrance for MDWs to be able to receive the benefits.
4. Restricted mobility also surfaced as an issue for both the interviewees and the FGD participants especially in areas in the Middle East. Females in some Middle Eastern countries have to be escorted by males in order to go around. MDWs are also limited in terms of their mobility by their employers.
5. Lack of adequate and properly equipped personnel. The interviewees from the government agencies mentioned how this can affect the operations abroad. The personnel needed have to be knowledgeable about the different programs being offered but resources prohibit either sending a representative from the Philippines, or sending more than one in order to expedite the process and make processing more efficient.
6. Inconsistency of contributions for MDWs. The government agencies that offer social security benefits operate with a contributory scheme. The interviews and FGDs reflected the lack of sustainability in terms of making contributions in order to take part and be eligible to receive the benefits.

Presented with the aforementioned findings and conclusions of the study, the proposed points below are recommendations for areas of intervention in order to address the concerns:

1. Address lack of information through inclusion in PDOS and PAOS;

- a. Government agencies will be able to properly disseminate information by allocating segments in PDOS and PAOS for them to properly address the MDWs about to leave abroad and readily be able to answer any questions they have.
  - b. Maximize different forms of multimedia including TFC etc and related institutions e.g. banks, remittance centers, travel agencies, money exchange centers, etc.
2. Create information campaigns
  - a. In line with the recommendation above, equipping our MDWs with proper knowledge can empower and educate. After the FGD sessions, several of the participants expressed intent on continuing with their membership contributions after finding out they have missed opportunities and benefits.
3. Improve modes of collection
  - a. With mobility being a recurring problem for MDWs based in the Middle East, the burden to physically contribute rests on them. The government should explore more ways in which contributions can be made easier and more convenient for the MDWs.
4. Review implementation of upcoming laws;
  - a. The Social Security Act of 2018 and the PhilHealth Universal Healthcare Act should be properly reviewed before implementation. There are issues and concerns surrounding these newly passed laws and although these laws are meant for the welfare of the MDWs in vulnerable positions, it is also important to note that they are in vulnerable positions and the factors stated above that hinder their access have to be taken into account.
5. Lobby for Social Security Agreements with top destination countries;
  - a. Currently, all MDWs have to shoulder all expenses or contributions for all their social security memberships. In the effort to be more inclusive, the government should make efforts to initiate and establish Social Security Arrangements in order to lessen the burden on MDWs and for them to have better coverage and increased protection as they are in vulnerable positions, especially those based in the Middle East. To date, the Philippines has SSAs with 13 countries only namely, Austria, Belgium, Canada, Denmark, France, Germany, Japan, Netherlands, Portugal, Quebec, Spain, Switzerland, and the UK and North Ireland.
6. Inclusion of social security arrangements in contracts.
  - a. In the absence of SSAs, inclusion of social security payments/contributions should be included in contracts. In the FGDs that were conducted, some participants mentioned having prior arrangements with their employers or agencies, which lessens the burden on their part and provides them social protection.
7. Merge current social security programs for MDWs into one program
  - a. Much like the Government Service Insurance System (GSIS) which caters to government employees, it is recommended that a centralized system be set up



for migrant workers. With this in mind, the possibility of having one collecting agent or scheme should be explored in order to improve efficiency and increase accessibility for migrant workers.

8. Make a resolution to include MDWs in Pag-IBIG Affordable Housing for Low Income Earners
  - a. Currently, the law states that those eligible for this program should receive a maximum of 17,500 pesos gross monthly income. This excludes MDWs since the Household Service Workers Policy Reform Package of 2007 states that the minimum salary is 400 USD which roughly converts to 20,000 pesos a month.
  - b. It is recommended that this be reviewed to include MDWs under the low income earners bracket.
9. Include Private Recruitment Agencies (PRAs) and Training Centers in information dissemination
  - a. These PRAs are closest to the MDWs in terms of interaction and are in constant contact with them. Inquire into collaborating with PRAs to aid in information dissemination to MDWs since there are some PRAs that are accredited as PDOS providers. Foreign recruiter counterparts should likewise be included.
  - b. Much like the PRAs, the Training Centers also have a great deal of interaction with the MDWs. In line with this, the government should maximize this interaction and include them as partners in disseminating information about different social security policies and programs to the MDWs.

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