# "Makakaligtas ba ako?" Mental health situation of OFWs during the COVID-19 global pandemic

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## **KEY TAKEAWAYS**

- Filipinos choose to work abroad in response to their families' financinal needs for daily expenses, edication, and medical treatment, among others.
- Even before the pandemic, OFWs already experienced emotional distress, anxiety and depression, trauma, stress, and loss of coping mechanisms. But these became more pronounced when the pandemic hit leading some of them to experience intense fear, paranoia, suicidal ideation, and self-harm.
- The OFWs' mental health situation directly linked to their socio-economic status which, itself, is the direct cause why they seek overseas employment in the first place.
- Suffering from varying degrees of mental stress makes many OFWs unable to enjoy the things that they ususally enjoy like eating out, watching movies, and hanging out with friends.

#### INTRODUCTION

This policy brief aims to provide a snapshot of the mental health status of OFWs during the COVID-19 pandemic. It also looks into the their mental health needs, and provide recommendations on how they can be supported by the governments through its programs and services.

These recommendations were generated based on expressed needs of the OFWs who participated in group interviews conducted for the purpose. The participants come from different worker groups such as seafarers, domestic workers, healthcare professionals, and other skilled workers. The group interviews were conducted more than a year after the global pandemic was declared. As such, there are participants include those that have already returned or are already staying back home for good, those whose contracts have already ended but were still stuck overseas, those who are still fully employed, and those who are either returning overseas or are applying for the first time at the time of the interviews.

## **BACKGROUND**

When the World Health Organization declared COVID-19 as a global pandemic in 2020, it also called on governments to adopt measures to help prevent its transmission, slow the spread, and control the pandemic. Heeding this call, the Philippine, just like many countries, put in place measures such as travel restrictions to and from places with known cases of infection, imposition of lockdowns and stricter quarantine protocols, and suspension of the public transportation and close monitoring of private transportation. Consequently, these imposition of such restrictions on people's movement resulted in the disruption of day-to-day life, closure of businesses, and loss of jobs and sources of income for people from all sectors.

Among the sectors that had been heavily affected by the pandemic was the migrant sector – most especially the overseas Filipino workers (OFWs). With the unprecedented impact of the crisis to economies worldwide, businesses were forced to close shops and lay-off their workers. For those that were lucky to keep their jobs, it meant longer working hours and days because they were no longer allowed to leave their employers' homes.

But the impact of the pandemic to the OFWs went beyond the loss of employment and sources of income. The crisis has, in fact, exacerbated their vulnerabilites for exposure to the virus. Due to border restrictions and lack of commercial flights, many of them were forced to stay in their host countries with no help from their employers nor the host government. And in cases where they had been repatriated or were able to come back home to the Philippines, OFWs suffered from stigmatization and exclusion due to people's fear of transmission from other countries.

Aside from the impact to their economic well-being, the COVID-19 pandemic also affected the OFWs' physical and mental health. Initial studies and surveys conducted in several countries months have shown that mental health-related concerns during the period of the pandemic were a direct effect of the crisis. Migrant workers from the Kingdom of Saudi Arabia (Alkamees, et. al., 2020) and China (Want, et. al., 2020) have reported experiencing psychological impacts including increased levels of stress, anxiety, and depression. This is compounded by fear of falling sick and dying

of the disease, helplessness, and stigma on top of the constant worry about how they can support themselves while worrying about the families they left back home.

## Statement of the Problem

In the Philippines, as it is elsewhere, it has now become important to look into the mental health of migrant workers (i.e. OFWs) especially since assessment done by the International Organization for Migration (IOM) showed that a great majority of returned OFWs have had to come back home due to COVID-19-related reasons and that many of them have had no jobs for an average of three months prior to their return. At the same time, most of them reported a sizable drop in household income since their return (IOM Philippines, 2021). All these factor into the increasing level of stress and mental health issues as the family's breadwinners have suddenly found themselves either unemployed or with their source of income drastically reduced.

It is thus important to assess the mental health and psychosocial needs of OFWs in the context of the pandemic. Equally important is the need to look into what can be done to help them cope – not only economically but mentally and psychologically. Consequently, policies and programs around this should be designed to actually respond to the needs while at the same time anticipate and prepare for similar crisis to tone down its effects to the sector in the future.

#### MIGRATION AND MENTAL HEALTH

## **Pre-Pandemic**

"Mahirap ang buhay sa Pilipinas"

When asked by they want to work abroad, many OFWs say it's mainly for economic reasons. It is a response to their families' needs for daily expenses, education, and medical treatment, among others. Other reasons include wanting to save up for their retirement, to put up their own business, and to have their own homes. They feel that due to lack of opportunities in the country, the dream for a secured future could only be realized if they work overseas.

"Pareho lang stressful sa Pilipinas at sa abroad"

Of course, fulfilling their dreams does not come without sacrifice. OFWs are aware that eventhough working overseas could potentially help them

economically, they acknowledge that it also means that they have to sacrifice being away from their families, and work in unfamiliar environments and cultures.

This sacrifice affects them psychologically and OFWs are aware of this. However, they also say that staying at home without enough options and opportunities for growth is just as stress-inducing.

Before the pandemic hit, many OFWs have already experienced mental health-related issues including emotional distress, anxiety and depression, trauma, stress, and loss of coping mechanisms. These were a direct casue of several factors such as: (a) poverty and lack of financial security; (b) loss of income, inadequate salary; (c) loss due to disasters; (d) physical and emotional abuse, sexual abuse, and economic abuse (unpaid work, illegal recruitment, etc.); (e) collective trauma and threats to safety and fear of possible harm; (f)sickness and illnesses; and (g) processing of travel and employment papers.

# Difficulties during the pandemic

"Back to zero na naman sa Pilipinas."

When the pandemic hit, OFWs reported feeling even more financially insecure. The sudden loss of income and depleted savings forced them to avail of loans leading them to acquire more debts. Those who tried to find local jobs reported having difficulties due to closure of businesses

For those who have had to stay in their host country also reported being unable to receive government support, especially during the first few months.

"Makakaligtas ba ako?"

The OFWs also reported having more pronounced fear, anxiety, and paranoia during the pandemic. There were even a few who reported having suicidal ideation and doing self-harm as a result of the stress and anxiety they are experiencing. The pandemic also intensified their fear of getting sick of their loved ones getting sick which is even more compounded by the constant worry about their own families. Some of them expressed their fear of the risks that come with work as caretakers, domestic employees, and healthcare providers. All of these, on top of the existing causes, are exacerbated by adjusting to the new normal and uncertainties because of the pandemic.

The OFWs also talked about the fact that suffering

from varying degrees of mental stressl makes them unable to enjoy what they usually enjoy to cope with loneliness and homesickness. Instead, they reported being unable to get quality rest and sleep, and having feelings of being down, weak, numb, powerless, helpless and hopeless. While some of them said that they've already experience these to some degree prior to the pandemic, it only got worse when the pandemic hit.

## **Support Received and Coping Mechanisms**

In order to cope with the uncertainties of working overseas and of the pandemic, the OFWs adopted their own coping mechanisms to reduce loneliness, stress and anxiety. These include adopting a hobby that they are interested in, involvement in skills development activities, socialization and building personal relationships with other OFWs, starting small businesses to keep them busy, engaging with faith-based institutions and groups for psychosocial support. While not many of them mentioned actually seeking professional help for counseling, they acknowledged how this could be of great help if only they are more accessible.

"Hindi na kami nagtanong, di rin naman ma-address ang aming concern."

In terms of support during the pandemic, the OFWs said that they relied mostly on themselves, then their friends and families. Only when personal relationships and networks are exhausted do they then turn to the government for assistance.

Unfortunately, many of the OFWs are not fully aware of the various government programs aimed at providing them financial and other kinds of help. And those who are aware have reported difficulties in the processes involved to avail of such services.

Some OFWs also have reported having received assistance from their employers and employment agencies when the pandemic hit. And in terms of psychosocial support, they either rely on their families and peers, and faith-based organizations in their respective host countries.

## **Gender and Mental Health**

Gender plays a role when we talk about the effects of the pandemic to the mental health of OFWs. While both men and women reported to have been mentally affected, men are mostly just concerned about the financial impact, while women have the added burden of caring for the physical and health welfare fo the family unit. This means more mental

load for the women leading to more burden and stress.

Even their coping mechanisms are noticeably different. While men mostly talk about hobbies, skills development, and relaxation as their coping mechanisms, women mostly seek spiritual guidance and keeping themselves busy with work.

## CONCLUSION

For OFWs, socio-economic situations are really tied to mental health outcomes. Socio-economic insecurity drives them to work abroad. This, in turn, lead them to new environments and unfamiliar cultures, and make them vulnerable to a lot of abuse, deception, illnesses, and even bodily harm and death. On top of that, they face the loss of coping mechanisms and social support when they leave their families and move to foreign lands.

During the pandemic, OFWs experienced unprecedented financial difficulties. Because business have closed, many workers were forced to come home or seek for support elsewhere as they are no longer supported by their employers and are receiving little to no support from the government. While there are those that kept their jobs and continued to work through the pandemic, the situation offered its own set of challenges, especially for domestics workers who are now restricted from leaving their employers' homes to a point where they are deprived of their days off.

The pandemic further eroded the OFWs' coping mechanisms because the restrictions prevented all socialization and their own movements were subjected to outside control.

The restrictions imposed by governments worldwide were ment to keep their populations safe from COVID-19. Unfortuantely, it failed to keep OFWs safe from financial ruin. Neither did the restrictive policies keep them safe from mental distress. Further, the lack of work, transportation and access to basic social services meant the loss of any means to keep themselves and their families fed and healthy during the globa crisis.

Continuous stress over a long period can lead to aggravated mental and emotional distress, illnesses, physical deterioration, and disability which, in most societies ultimately lead to a loss of income, independence, access, choices, and opportunities. This puts OFWs at risk of never escaping the vicious cycle of mental unhealth and socio-economic insecurity.

## RECOMMENDATIONS

Mental health is not only a health issue but also socio-economic, political and gender-based concern. To address mental health issues means to address poverty, lack of access to opportunities, discrimination, abuse and violence, and gender equality. Because these social issues were compounded by the pandemic, it follows that the OFWs' mental health concerns were also exacerbated. Unfortunately, despite this, not many OFWs are seeking professional counseling and mental health assistance – not for lack of trying but partly due to availability and accessibility of services.

From the participants to the group intervies themselves, the following recommendations have been drawn:

- 1. Assessment of the program response to understand why OFWs have not been availing of psychosocial services even when they need it. Putting in place mechanisms to encourage OFWs to access what is available.
- 2. Strengthening of available psychosocial services by looking into how counseling services and debriefing sessions can relieve mental distress.
- 3. Further study to uncover the extent of mental health stigma and how this can be eliminated in the context of the OFW experience.
- 4. A gender-responsive approach to mental health services or services integrated with gender equality principles and human right-based approach.
- 5. Strengthen community organizing where networks and support groups for OFWs abroad can be built for awareness raising on mental health as a right. In this context, the roles and responsibilities of the social welfare attaché can be expanded to include a community role to ensure that the Filipino community and support groups are meaningfully engaged.
- 6. Policy review:
  - a. Adapt related existing policies to the new normal
  - b. Determine ways that RA11036 or the Mental Health Act of 2018 can be used to ensure mental health protection of OFWs

especially in the context of the COVID-19 pandemic

- 7. Inter-agency Collaboration
  - a. DSWD for livelihood and psychosocial assistance and accreditation of partner OFW CSOs
  - b. DFA-POEA-OWWA-DOLE for One-Stop-Shop processing of requirements; waiving of fees; to avail of the provident fund from companies (for those who are 'unfit to work' and/or suffered significant loss from the pandemic)
  - c. DOH for reiterating standard PEME and implementation of RA11166;
  - d. DICT to strengthen remote and online access:
  - e. Insurance Commission and PhilHealth to push for the inclusion of mental health service packages, even for OFWs and telemedicine)
  - f. Awareness raising, mental health sensitivity of service providers and referral process
  - g. Demand generation for existing programs for OFWs such as AKAP and TUPAD
- 8. Using the the Inter-agency Medical Repatriation Program as the foundation for Comprehensive Social Protection and Recovery Program for OFWs
  - a. Institutionalization of debriefing program for repatriated OFWs (During and postpandemic); case management and referral
  - Reorientation of available government assistance for OFWs (socio-economic assistance (subsidy) for necessary household expenses; educational assistance);
  - c. Health and life insurance (extended to family members); to include psychosocial services and online services including telemedicine
  - d. Income protection and financial insurance, especially in adverse circumstance and calamities
  - e. Post-pandemic recovery and rehabilitation programs

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