BIBLIOGRAPHIC INFORMATION

Title	Profiting from health testing on migrant workers
Source	http://www.aliran.com/index.php?view=article&catid=55%3A2008&id=601%3Aprofiting-from-health-testing-on-migrant-workers&option=com_content&Itemid=40
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Publication/Conference	Aliran, 27 May 2008
Edition	NA
Document Type	Article
CPI Primary Subject	Labour
CPI Secondary Subject	Migrant Workers; ; ;
Geographic Terms	Malaysia;

Abstract
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Profiting from health testing on migrant workers

Tuesday, 27 May 2008 18:35

Why should migrant workers undergo mandatory health testing by private firm Fomema when expatriates and other classes of foreigners are not tested? Isn't this discriminatory, dehumanising and a violation of migrants' rights, asks **CARAM Asia.**

CARAM Asia has responded to articles published in the *New Sunday Times* on 25 May on the issue of incoming domestic workers with diseases who have purportedly passed the health testing carried out by health testing providers.

The failure of health testing system

These articles reinforced CARAM Asia's findings revealed after our research in 16 countries on mandatory health-testing polices. Mandatory health testing serves no role in public health and plays no practical role in HIV prevention. Further, the findings suggested that the systems of health testing are inherited with flaws and loopholes. One of the most prominent findings is that the policy and practice of mandatory health and HIV testing for migrant workers is discriminatory, dehumanising and violates migrants' rights.

The requirement of mandatory health testing focuses solely on migrants who fill unskilled jobs and who make up the lower socio-economic classes. It is discriminatory in nature as Malaysians and other classes of foreigners are not tested. Since the coverage of such testing and deportation policy is not comprehensive, it only creates a false sense of public health security.

Health testing should be done with the primary intention of benefiting the health of the individual undergoing testing. In Malaysia, migrant workers are deported upon being classified as "unfit" despite the availability of treatment for Aids and TB.

Patients with such illness can lead productive lives should migrants and employers be given full details of workers' health status and necessary treatment at an early stage. If Malaysians with such diseases are able to work productively, why are migrant workers who paid a whopping sum to make the outward journey into Malaysia deported - only because they have been tested positive of an illness - and shooed away from our borders without any form of treatment or compensation?

There is no evidence thus far to prove that travel restrictions can safeguard public health. In fact, it might be counter productive to public health approaches. The denial of work opportunity upon failing to meet heath requirements may lead to those migrants avoiding legal routes of entry and encourage illegal entry or falsification of supporting documents. There are 1.91 million documented migrant workers (Immigration department statistics as of 30 Jun 2007) and a further million undocumented. Mandatory health testing is likely to lead to migrant workers entering through informal channels for fear of deportation.

Flaws in health testing policies in Malaysia are rooted in the transfer of responsibility from the government to the private sector. Ever since the government allowed Fomema to take over health testing services and without an efficient government monitoring system in place, the testing of migrant workers linked with their work visas have became money-making tool for agents and testing facilities. The *NST* article reported corrupt practices where testing centres certified workers as fit without physically examining them. There were also cases of agents "recycling" unfit domestic workers. These agents and testing centres should be stringently regulated to ensure both employers and workers are not deceived and, most importantly, that the poor migrant worker is not further cheated and abused by the system.

Despite having paid levies to work here, migrant workers also have to pay for mandatory health-testing fees. Therefore, we support the calls by other civil society groups to transfer the levies paid by migrant workers into

the public health care system and that health testing fees be borne by the public health care system.

Working and living conditions cause poor health

In response to cases of foreign domestic workers who suffering mental disorders, CARAM Asia strongly holds the perspective that the lack of an enabling, decent working and living conditions for the workers to maintain a healthy mind and body are elements that contribute to mental instability. Foreign domestic workers, or maids as they are known, work long hours around the clock, are saddled with heavy workloads and live in conditions that violate their privacy and rights, all of which lead to their poor health.

Without a proper job description, they are on call for 24 hours; often even at nights. Work related stress takes its toll on domestic workers physically and mentally. Furthermore, the unfavourable conditions associated with being a migrant worker – fear of being deported, sexual abuses, being away from home, the lack of a social support system, financial insecurities, and illness - are causes for extreme anxiety. It is in this context that a right to a paid day off every week must be made compulsory.

Therefore CARAM Asia recommends the following actions for the Malaysian government and employers:

- Grant a paid day off per week from work for foreign domestic workers. The Immigration Department's guidelines on the application for domestic workers clearly states that "the employer must allow the PRA (foreign domestic workers) one rest day weekly".
- Prosecute perpetrators of physical violence, sexual violence and those who unlawfully confine foreign domestic workers.
- Regulate agents from both country of origin and destination to combat corrupt and unethical practices. CARAM Asia calls for the stemming of corruption in the recruitment of migrant workers to start with the Anti-Corruption Agency conducting investigations on agencies that recycle workers and health-testing centres that certify workers as fit when they are not.
- Ensure migrant workers have full access to workers' medical reports. The withholding of this information is a breach of privacy rights.
- Provide health care information and affordable health care services for unskilled migrant workers to promote good health among this group of low wage workers. The government must ensure that pre- and post-counselling and prevention information is given in a way that migrants can understand.
- Harmonise all laws and policies on health testing to ensure that any testing that migrants must undergo adheres to internationally accepted standards that include informed consent, confidentiality, pre and post-test counselling, and proper referral to treatment, care and support services.

All MOUs on migration should explicitly include migrants' right to health and remove any exclusionary conditions that are treatable, such as HIV and TB, as a precondition for employment.

The mandatory testing policy is in contradiction to the Code of Practice on Prevention and Management of HIV/AIDS at the Workplace which states that HIV-positive workers have the right to continue working and have access to treatment and care as they are able to work. The Code of Practice – 2001 is initiated by the Human Resources Ministry.

CARAM Asia urges the government to re-examine the current mandatory health testing and deportation policies on migrant workers and implement the recommendations mentioned above.

CARAM Asia is an open network of NGOs and CBOs, consisting of 28 members covering 17 countries in Asia and the Middle East . The CARAM Asia network is involved in action research, advocacy and capacity building with the aim of creating an enabling environment to empower migrants and their communities to reduce HIV vulnerability and to promote and protect the health rights

of Asian migrant workers globally. Visit www.caramasia.org for more information on CARAM Asia.

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We should treat these foreign domestic workers like human being, nothing more nothing less. Yes, just a human being like you and me. Nobody wanted to be ill-treated, or do you?

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