Welcome to the 2020 MMC newsletter! This year’s newsletter is a great way for us to catch up with each other at a time when we are not able to meet each other in person due to the ongoing Covid-19 crisis. These are hard times, indeed. However, it may turn out that good things come out of challenging situations as we discover new forms of engaging and collaborating with each other. On this note, we renew our invitation to use the MMC newsletter to share news and info about your research activities during this uncertain time.

In addition to reflections of the impact of the Covid-19 pandemic on migrants’ lives, this edition of the newsletter includes information on recent, ongoing and prospective migration research of our esteemed colleagues from across the globe. I hope you enjoy this edition of the newsletter and I look forward to seeing you at our future events.

Thank you for your interest in our newsletter!

Sureeporn Punpuing
Director of Mahidol Migration Center
Institute for Population and Social Research, Mahidol University
In 2020, COVID-19 brought the “age of migration” to an abrupt end, as nation-states reacted restrictively to a global pandemic. The absence of a joined up international or global response, as nation-states manage the pandemic, politically, as if it is contained within their territorial borders, simply intensifies the problems. As light at the end of the tunnel remains distant, the world that emerges will be very different than the one that entered. This raises questions about whether the drastic unanticipated changes we are experiencing are temporary, or here to stay. My short-take is that global distribution of costs will be highly uneven, and inequalities heightened, between and within countries. An important question is whether a world of inward-looking nation-states and politicians can serve a globalised world undergoing a pandemic and economic recession. In the following, I refer to prospects for international labour migration and tourist mobilities, before discussing the democratic crisis of “pandemic politics”.

Wealthy Global North nation-states are heading into unprecedented economic depressions and mass unemployment. What impact will this have on labour migration from South to North? Perhaps the most “open” international migration system we can hope for is a partial “return” to highly restrictive pre-COVID approach. This would be small openings for the very highly skilled (and wealthy international students), highly controlled short-term “guest worker” openings to fill sectoral “gaps” (e.g., in healthcare or seasonal work that locals won’t do), and highly restrictive barriers as the norm for everyone else. In the past, wealthy states coordinated their efforts, internationally. Perhaps now receiving nation-states will build their own systems of “small doors” in “high walls”. The post-pandemic international migration “pathways” may be different in spatial scope, demarcated by bilateral “bubbles” between relatively “healthier” and “sicker” states. Also, the pandemic offers wealthier states an opportunity to justify excluding people from specific “unwanted” nations, places significant additional burdens, costs and challenges on immigrants, and raises prospects for anti-migrant sentiments. In short, as the world shrinks politically inwards within units of nation-states, and inequalities grow, how will globalised economies find the boost of international labour migrants that they need?

What about international mobilities? Tourism and the delights of globalisation were a common staple for cosmopolitan elites and masses alike. Tourists are seldom categorised as “migrants”, but their mobilities significantly generate economic development, in countries like Thailand, receiving 36m short-stay visitors per year pre-COVID, and cities like London. When international travel starts again, will it be restricted to temporary “bubbles” of countries with low R rates? Will “budget flights” be dead, making travel an elite pursuit again, or something only for transnational families? Will restrictions imposed seemingly arbitrarily at origin or destination, make the whole activity costly and unattractive? How will cities built for tourists and societies dependent on them adapt to a world that no longer provides relatively easy international travel? Again, the pain will be unevenly and unequally distributed across places and peoples, but enforced by nation-states.

Another concern is the democratic challenge of “pandemic politics”. Important questions of state authority and civil liberties result directly from pandemic responses. Populations are “locked down” by elected governments – a unilateral state removal of civil liberties, sometimes restricting mobility to within one’s own home, combined with salary reductions/job losses, impositions of childcare/schooling duties etc… Of course, the justifications seem reasonable, that by placing public health concerns above economic interests, temporarily, we will emerge collectively with more family members alive. While this logic achieved a broad public consensus in the “first wave”, there is an increasing sense that some governments have used this suspension of accountability as an opportunity to enhance their control over state authority, permanently. This authoritarian trend is visible in relatively more and less advanced states, and raises questions about the capacity for the liberal-democratic model for politics to govern pandemics.

Governments, like the UK, led by national populists, have used the pandemic to make state authority a vehicle under their political control and restrict opposition and accountability. The Johnson government was formed out of an opportunistic mobilisation of pseudo-nationalist populist sentiment against the European Union – “Brexit”. Before COVID, Johnson’s government already had an agenda to limit media scrutiny, weaken the judiciary’s independent authority, side-line and bypass Parliament, and undermine the civil service’s neutrality. Under COVID, this has all taken a goose-step forward. Make no mistake the liberal-democratic model for politics was already under threat, but during a pandemic it becomes a hollowed out symbolic semi-suspended national democracy. People and oppositions lack a means to make the few in political control of the state accountable, not least because the few pro-actively (ab)use state authority to make sure this is the case.

In the UK, government ministers repeatedly attack the very state institutions they should be working with to govern and manage a pandemic: health institutions (Public Health England “abolished” in March); civil service; elected regional authorities (forbibly imposing “lockdown” conditions in Greater Manchester); Scottish and Welsh governments and Parliaments. “The British people” are no longer asked to self-sacrifice for the better national good, but increasingly blamed for worsening health outcomes and not obeying the authority of those in control. In addition, Johnson’s government intentionally stokes up internal divisions within society, pitting young v old, black v white, natives v immigrants, English v Scots, North v South etc…, in a series of largely bogus “culture wars”. The idea here is that increasing divisions will distract attention from the government’s pandemic governance, resulting in one of the world’s highest death rates, and prevent the emergence of coherent political opposition. As a political campaign organisation, Johnson’s government always lacked the talent and rationale for governance. This has been made publicly visible in an unexpectedly short time. An edited lowlights of Johnson’s pandemic governance includes failures to: protect elderly in care homes; protect health workers; “track and trace”; educate children; safeguard students; feed poor children; and follow own scientific advice.

Is there a way out? Much depends on whether building public disenchantment with repeated government failures translates into a meaningful project for political opposition. However, this government knows that its power rests on politically controlling the state. So, don’t be surprised if political opposition is met by the hard fist of state authority and “lock downs” become “crack downs”. The uncertainty of the times provides opportunities for change, but this can go either way.
The COVID-19 pandemic is highlighting major divides in society and exposing pre-existing vulnerabilities. A case in point are the estimated 10 million international migrants in Southeast Asia (UN DESA 2020), mainly consisting of lower skilled-workers most often in irregular positions. The pandemic has disproportionately affected them if not in terms of infections, in terms of socio-economic impacts and disruption to their already precarious lives.

In Singapore, national spatial modelling exercises (Koo et al., 2020) and containment measures missed to include the large migrant population as they simply did not consider them part of the local population. The government was taken aghast by the growing spread of the infection in migrants’ dormitories and implemented ‘stay-at-home’ orders, in spite of activists arguing that such measure will continue to expose them to transmission due to the substandard living conditions. In September 2020, the dormitories, housing over 300,000 construction and shipbuilding workers in often packed rooms to up to 20 workers, accounted for almost 96% of Singapore’s 57,000 infections (Aravindan 2020). Even if now decreasing, the number of daily infections in dormitories continue to outnumber those in the “local community” –the terminological place-based divide employed to track COVID-19 making clear that lower skilled migrants do not really belong to the city-state, even if they are the backbone of key industries.

In other destination countries, responses to migrants’ cramped and unsanitary living and work conditions conducive to the spreading of COVID-19 have also fallen short of protecting the workers and respecting their rights. In Malaysia, early in the epidemics, migrants and refugees were totally locked-down in settlements with no running water or isolation space and in great stress. And when the country started to re-open last May, they were subjected to immigration raids and arrests leading to a surge of infections in detention centres (Zsombor 2020). In Thailand, the hastily-announced partial lockdown of Bangkok and border closure order in March triggered a mass exodus of migrants from Myanmar, Cambodia, and Laos. Fearing being trapped in Thailand with no jobs and social protection, they took the risk of exposure in crowded transportation vehicles and border areas. At the same time, workers in sectors exempted from lockdown such as construction were seen heading to work as usual in filled trucks with no social distancing and masks (Rogovin 2020). A recent study found that last July 57% of those interviewed were not provided basic personal protective equipment of masks and hand sanitizer by their employer – a figure higher than the already significant average of 33% for the region (ILO 2020). Abuses have exacerbated, with greater pressure on migrants to take unpaid leave, refuse time off during the lockdown or being prevented from leaving by passport’s confiscation (Freye 2020).

Sending countries have demanded migrant workers abroad not to return, but no bilateral arrangements have been made to enable this to happen. Vast numbers of Indonesian migrants had to return home from Malaysia, East Asia and the Middle East due to visa limitations and loss of employment, having to take risks along the way and experiencing stigmatization on arrival as the perceived “importer” of the disease. Worries are also rife among returnees about their not being able to migrate again –and thus to provide their families with much needed resources– due to regulations suspending the formal overseas placement of Indonesian migrant workers and the closure of the destination countries (IOM 2020). Likewise, in the Philippines, many lost jobs or were unable to take up positions because of travel restrictions. Those stranded in foreign countries often are not entitled to social welfare and face rising xenophobia and abuses. Being one of the world’s main labour exporting country, an unprecedented fall in overseas remittances is expected, with an increasing number of families being pushed into hardship (Almendral 2020). Thai migrants abroad have experienced similar condition and the higher number of infected returnees from usual migrant destination countries can be seen as a signal of the disproportionate impact on migrants.

As the pandemic continues unabated, regional institutions are failing to work out ways to protect migrants and their livelihoods. ASEAN summits and declarations to strengthen cooperation among member states in public health measures and resources have ignored migrants (Virgil & Lie 2020). Governments have not given recognition to the contribution of migrants to national economies and the, often-minimal, social protection and welfare programs have tended to exclude migrants, particularly undocumented migrants. Containment measures have also overlooked migrants’ realities and discriminated them as reflected in reduced access to testing and quality treatment and poorer quarantine facilities. Costs of health documentation and costs of repatriation, particularly transportation, COVID-19 tests, and quarantine costs are disproportionate to migrants’ meagre incomes, depleting their savings and increasing their debts. Several disease control acts criminalize migrants for entering countries of destination or returning to home countries without accounting for their needs (MMN 2020).

A “new” or a “better’ normal for migrants in ASEAN?

Rosalia Sciortino
rosaliasciortino@yahoo.com
Observers are quick to point out that the pandemic only serves to magnify the shortcomings of an already broken migration management system. In their hope for a better future, some go as far as seeing COVID-19 as a transformer that will enable greater awareness of migrants’ poor conditions eventually leading to safer migration. Propositions to address the current structural weakness vary from having so far reticent destination countries adopt the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families to improving living and housing arrangements and rising wages and benefits. Calls are also there for guaranteeing access of basic services and health care and of social protection programs to migrants and refugees, irrespective of their legal status and decriminalize migrant irregularity (ILO 2020, MMN 2020, Simperingham 2020).

Although it is too early to judge how realistic these aspirations are, indications are far from promising. In spite of heightened concerns in the media and among civil society and UN organizations, only the Singaporean government has pledged some concrete measures by committing to improve the dire conditions of dormitories and allocate somewhat more space to migrants. If more structural changes that question the very perception of lower status and decriminalize migrant irregularity (ILO 2020, MMN 2020, Simperingham 2020),

Rosalia Scortino is associate professor at the Institute for Population and Social Research, Mahidol University, director of SEA Junction, Bangkok, and emeritus regional director for Southeast Asia with the Rockefeller Foundation and the International Development Research Center.


The United Kingdom is one of the most popular European destinations for Thai migrants. The unequal socio-economic conditions and traditional values in Thailand lead many Thais to search for a better life in foreign countries. For the UK, marriage is the most viable channel for Thai migrants’ long-term settlement due to the restrictive British immigration law. It is estimated that more than half of Thai migrants to the UK are female\(^1\). A minority of Thai migrants enter the country through work or student visas but seek to renew their visa or change their visa status in order to stay for long-term. According to the author’s doctoral research on transnational migration and opportunities and challenges facing Thai marriage migrants in the UK, it is found that although the majority of Thai female migrants in the UK enter the country by the status of spouse or family dependent, data from 31 in-depth interviews and a survey of 300 Thai first-generation female migrants in the UK suggest that most of them participate in the British workforce, in particular in the service and health sectors. From the survey, the top 5 occupations that Thai women hold are cleaner, kitchen staff and waiting staff, beauty therapist and beautician, nurse and nursery assistant, and care worker.

Among European countries, the UK has been hit hardest by the COVID-19 pandemic, with the highest death toll in Europe (44,998 deaths) as of 27 October 2020\(^2\). The British government ordered the first stay-at-home order for England in March 2020, causing the UK’s service sector to be shut down. Amid the pandemic, the UK’s healthcare service workload also tremendously increased. Thai women workers are predominantly employed in these two sectors that have experienced the most severe impact of the pandemic. Although the British government put in place furlough schemes for workers across the UK, it is expected that a large number of Thai workers have not been eligible due to their status as informal employees. Reports suggest that even though the furlough scheme has been applied to workers across the UK, many businesses – such as restaurants, pubs and other services – could not bear the adverse economic effect of the pandemic and were forced to close, resulting in numerous job losses\(^3\)\(^4\). Concentrating on the service sector, the prospect of Thai migrants’ employment seems to be highly uncertain.

Due to their limited language skills and cultural and social capital, many Thais tend to work in co-ethnic businesses such as restaurants, grocery stores and massage parlors. Many of them are not full-time workers and receive cash-in-hand for their labor. From my observation, although respondents said that they work 30 hours or more per week, it appears that they work as part-time employees at different venues. Moreover, those working in the healthcare sector such as in care homes or are members of the National Health Service (NHS) staff are exposed to the risk of infection more than others. A Thai community newspaper, AmThai Paper, reported that during March-April 2020, there were 8 Thai people in the UK who passed away due to COVID-19 among them was a Thai female NHS frontline worker\(^5\).

These conditions point to the precarity of Thai female workers in the UK. In addition to the precarity of their work conditions and labor situation, there are also several reports on a rising number of racial discrimination cases towards people of Asian descent in the UK\(^6\). It has been reported in the media that several Thai people were victims of stereotypes and racial violence amid the pandemic. Apart from these issues, there is also an emerging question of how the stay-at-home order affects intercultural family settings and whether or not the order put more pressure of domestic responsibilities on Thai women in intercultural union.


Thailand Elite Card: Little Known, but Growing in Popularity in the Midst of the COVID-19 Pandemic

Sakkarin Niyomsilpa
sakkarin.niy@mahidol.ac.th

Thailand Elite Card, although categorized as a ‘special tourist visa’ by the Thai authorities, is basically a variant of ‘Golden Visas’ introduced by many countries around the world to attract wealthy people to become their residents or citizens. Golden Visas may include different immigration programs, mainly focused on economic citizenship programs (ECPs), immigrant investor programs (IIPs), citizenship by investment (CBI), and residency by investment (RBI) schemes. These schemes offer long-term residency status or citizenship rights to investors plus other privileges such as a second passport and income tax incentives. At present, there are 83 Golden Visas around the world offered to foreign investors and wealthy individuals, most of which are in European countries. However, the COVID-19 pandemic has disrupted Golden Visa programs as travel restrictions are imposed in most territories, and foreigners are refused visa issuance. Ironically, Thailand Elite Card has fared well and even recorded a strong membership growth with over 2,000 new enrollments expected in FY 2020 (October 2019-September 2020), generating a revenue of 1,400 million baht to the scheme.

What is Thailand Elite Card?

The Thailand Elite program offers long-term stay in Thailand for foreign investors. It is run by Thailand Privilege Card Co. (TPC), a state-owned enterprise under the supervision of the Tourism Authority of Thailand. Membership schemes include 5, 10, 15, or 20-year visa permits. Main privileges and incentives include elite treatments such as concierge services, fast-tracked immigration processing at airports, limousine services, the access to golf courses, and spa treatments, depending on the schemes. The entry level is the ‘White Gold Card’ which costs 500,000 baht for a 5-year visa, before graduating to the more expensive ‘Rose Gold Card’ and the ultimate ‘Diamond Card’, which offers a 20-year visa permit. Each 5-year increment in the program costs additional 500,000 baht. At present 7-8 different programs, with different fees and benefits, are offered to foreign investors and their family members.

Although the Elite membership is classified as a long-term tourist visa, Thai immigration authorities will initially grant a 1-year visa stamp at the port of entry. Elite visa holders can later extend their stay in Thailand with the assistance of the Elite program. Unlike a Thai business visa (Non-Immigrant B visa), Elite visa holders are not allowed to work in the Kingdom. Not the Elite Card could be used to apply for a work permit. Thailand Elite Card is more suitable for lifestyle migrants who want to avoid the hassle of an annual visa extension as the Elite concierge staff will take care of the immigration process. They can also rest assured that their annual visa renewal in Thailand will not be rejected. However, Elite Card holders are not permanent residents and are still required the 90-day reporting to the Immigration Bureau.

COVID-19 and Thailand Elite Card

The COVID-19 pandemic has of course disrupted Golden Visa programs around the world, including Thailand Elite Card program, as travel restrictions were imposed in most countries. Elite Card members, along with other foreign tourists, were not allowed to travel to Thailand during March-August 2020. However, in August 2020, the Centre for Covid-19 Situation Administration (CCSA) has approved the visit to Thailand of Elite Card Holders, subject to state quarantine regulations. As a result, Thailand Elite Card has received 900 new membership applications a month from foreign investors, compared with only 400 a month before the pandemic. As of 30 September 2020, the number of Elite Card Holders totaled 11,132. The majority are Chinese, Japanese, South Koreans, British and Americans. Thailand’s success in controlling the pandemic has attracted strong interests from foreign investors and entrepreneurs to apply for the Elite Card membership, many of whom are foreign expats in Thailand. Therefore, a new type of card, Elite Maxima Health with a five-year membership and 1.5 million baht fee has been offered since October 2020. Members of this category will receive annual medical check-ups, the access to local and overseas hospitals, 5 million baht health insurance coverage, and spa treatments. Moreover, TPC has proposed new schemes under the Elite Flexible Program in 2021 aiming to bring in more investment to Thailand. TPC will ask for the government’s approval to add work permit privileges for Elite Card members who invest a minimum of US$1 million in Thailand.

Such measures are likely to make Thailand Elite Card a more competitive Golden Visa scheme as foreign investors can buy properties in Thailand and easily obtain long-term visas and work permits in the Asian safe haven.


The world has been changing fast and will change even faster with the arrival of the digital revolution. This rapid change has been accelerated by the Covid-19 pandemic. The digital revolution will bring the second demographic revolution. The first demographic revolution started with a rapid fertility-mortality decline because of the introduction of contraceptive technology. All aspects of life have changed since then. The coming second demographic revolution will start with a rapid change of patterns of population mobility. The new patterns of population mobility will change all aspects of people’s life. The resulting changes in lifestyles may be unimaginable now. This paper shows an emerging pattern of population mobility—the voluntary population immobility.

The population mobility transition theory as postulated by Zelinsky (1971), modified by Skeldon (1990), shows that at the initial stage of development, people had short-term mobility because they did not have the possibility of long-term mobility (often called “migration”). This was a “forced” short-term mobility. The advance in transportation technology then made people able to travel a long distance and stay a long time in the destinations. In this stage, migration became the dominant pattern of population mobility. However, as transportation technology further advanced accompanied by progress in communication technology, people did not need to travel for a long time anymore and neither needed to stay for an extended time in the destination. The need to migrate declined and people started to have more short-term mobility. This was a voluntary short-term mobility in contrast to the forced short-term mobility at the initial stage of development. The declining trend of migration and the emerging pattern of voluntary short-term mobility have been noticed by several studies cited by Ananta and Arifin (2014).

Short-term population mobility usually includes commuting, circular mobility, and seasonal mobility. These three types of population mobility have regularity and predictability patterns. Commuting is movement from place A to place B and return to place A every day or every week. Circular mobility is similar to commuting except the time is longer, for example every three months. Seasonal mobility is people movement according to certain events in the destination.

Ananta and Arifin (2014) observed another pattern of short-term population mobility, “wira wi”, an Indonesian word with no English synonym, seen all over the world but which had not been studied in literature. This short-term population has no regular pattern of movement. This mobility is unpredictable. The distance travelled, the length of stay in the destinations, frequency of movement, the destinations and origins are all random. Yet, this wira wi has a lot of social-economic-political implications for both the destinations and origins. Wira wi is hypothesized to have been dominating the pattern of short-term mobility and mobility in general.

Furthermore, Baldwin (2016) anticipated that cost of person-to-person meetings will become much cheaper. These meetings do not involve a “real” movement but are substitutes which are close to “reality”. Advances in digital technology allow people to meet others without leaving their origins. Tele-robotic technology, artificial intelligence, and holograms will create tele-presence. The Covid-19 pandemic has speeded up the occurrence of this anticipated trend.

Ananta (2020) called this phenomenon “going nowhere, but being everywhere”. People can be anywhere in the world but they can be just sitting in their homes. This is a voluntary population immobility, though virtually people are very mobile. The Covid-19 pandemic has provided the seeds of the emergence of this virtual mobility, “going nowhere, but being everywhere”. The Covid-19 pandemic has made people suffering from forced population immobility. In contrast, in the post-pandemic, more people will enjoy voluntary population immobility.

For example, people do not have to travel for business meetings. Virtual tourism will boom. People who could not be mobile in the absence of digital technology will then be able to explore the world just from their homes. This rising virtual mobility will have a lot of socio-economic-political implications. One illustration is that people can easily travel to all countries without visa.

Does this mean the death of “traditional” population mobility? Migration (long-term population mobility) had been declining even before the pandemic. It will further decline though we will still observe migration. Short-term population mobility may continue to rise, but people in the future will have more options. People will have more choices: migration, short-term mobility (especially wira-wi), virtual mobility, or any combination of them.

https://www.adb.org/annual-meeting/2020/events/acf13-replenishment


Coronavirus Disease 2019 (Covid-19) and Migration

During 1995-2019, the number of international migrants around the globe continuously increased, while the proportion of migrants to the world population increased slightly. In 2019, based on the world population of 7.7 billion, 1 in every 30 people was a migrant (International Organization for Migration - IOM, 2019).

The United States of America (USA) received the biggest number of migrants (referring to those who were not born in USA) in the world. The USA has been a major destination country for migrants since 1970, with the number of migrants having increased more than 4 times in the last 50 years - from approximately 12 million in 1970 to 51 million in 2019. Germany is the second most popular destination country, with the number of migrants having increased from about 9 million in 2000 to 13 million in 2019. More than 40% (112 million) of the world’s migrants were born in Asia, primarily India, follow by China and South Asian countries such as Bangladesh, Pakistan and Afghanistan (IOM 2019).

In the year 2020, the health status and socioeconomic conditions of the world population have been greatly affected by the Covid-19 pandemic. By November 2nd 2020, the World Health Organization (WHO) indicated that there were 46,403,652 accumulated cases of Covid-19 infections worldwide. The USA had the highest accumulated number of infected cases and deaths, which were 9,032,465, and 228,998 respectively (WHO, 2020).

Incidentally, the USA received the highest number of immigrants in the World. There has been no study that has assessed whether there was a correlations between the number of migrants and Covid-19 cases. However, we know that migrants, particularly irregular migrants and those of low socio-economic status, are one of the most vulnerable populations in many aspects of their life including their access to health care services.

Migrants normally have difficulty in health accessibility, partly due to language barriers and the health system in destination countries. There is no doubt that they face a double burden of accessing health services during the Covid-19 pandemic. Migrants often live in crowded accommodations, which mean that they cannot practice ‘social distancing’. Their work and working conditions, particularly if they work in wet and dirty environments or poorly ventilated workplaces, makes them particularly exposed to the risk of Covid-19 infection. Migrants tend to have slimmer chances to protect themselves from the pandemic than others. Migration policies frequently do not provide health care to migrants and if they do irregular migrants are mostly not covered. Moreover, border closures have made it difficult, if not impossible, for migrants to return to their home countries, leading to frustration. Strict regulations and unusual long processing periods for visa and work permits in destination countries posed additional problems.

Lastly, Covid-19 has been causing confusion, anxiety and fear among the public, because (1) the disease is new and there remain many unknowns, (2) people are often afraid of the unknown, and (3) people are likely to associate that fear with ‘others’. These problems in combination with xenophobic attitudes among the local population can fuel stigmatization and discrimination of migrants. As a result, migrants tend to hide their illness, don’t immediately seek health care, and don’t adopt healthy behavior. This can lead to more severe public health problems, including a wider spread of Covid-19, and make the control of the pandemic more complex.

In response to the global compact for safe, orderly and regular migration, the four basic principles to advancing safe and inclusive migration during and after the Covid-19 outbreaks are: 1) exclusion is costly in the long-run while inclusion pays off for everyone; 2) the response to Covid-19 and protection of the migrants’ human right are not mutually exclusive; 3) no-one is safe until everyone is safe and 4) migrants are part of the solution (United Nations, 2020).
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The negative economic consequences of the COVID-19 pandemic have affected millions of workers around the world, including labor migrants.¹

Taking into account the fact that migration in the Commonwealth of Independent States (CIS) presents one of the most numerous migration flows of our time, the migration crisis in this region can produce severe consequences for world migration flows as a whole. The effects of the COVID-19 pandemic on the CIS led to the rapid adoption of serious restrictive measures. In this regard, some states began to solve the problems regarding the spread of the epidemic independently, without cooperation with each other, which, in turn, has led to a worsening of the migration situation in the CIS.²

Migration between CIS countries and partly internal migration was temporarily frozen. Only after May 11, the CIS countries began to ease restrictions on internal quarantine and discuss the issue of opening borders. Migration corridors between Central Asian countries and Russia are one of the largest in the world with a turnover of about 6 million people each.³ In this connection, uncoordinated closure of borders between countries and the termination of passenger traffic between them, led to the accumulation of hundreds of migrants trying to return home but stuck on the way at airports and at the borders of countries. To add, many labor migrants from Central Asian countries have lost their jobs in Russia.

To highlight the empirical background of the situation with labor migrants in the Russian Federation, we can observe a research conducted by ISPR FCTAS RAS in April 2020. It is based on the sociological online survey with the support of a migration lawyer V. Chupik, NGO “Tong JAHONI” and the Union of Russian Migrants. During this survey 717 respondents were interviewed to investigate the impact of the COVID-19 pandemic on the situation of migrant workers in Russia. The average age of the respondents was 36.4 years, the minimum value - 19 years, the maximum - 65 years. The majority of respondents (labor migrants) were citizens of Central Asian countries: 62% – Tajikistan, 14% – Uzbekistan, 10% – Kyrgyzstan, 1% – Kazakhstan, 14% - citizens of other countries.

Key findings indicate that the main problem for labor migrants during the pandemic was their inability to pay for housing (about 64%), loss and inability to find work (45%) and lack of money for food (43%). About 20% had problems with inspections, 11% had poor living conditions, and 2% of respondents could not pay for a patent.

The largest reduction in employment of migrant workers of those who lost their jobs was observed in construction – 37%. The catering sector was significantly reduced by 21%. Around 18% of those who lost employment worked in the trade sector (supermarkets, shops). About 6% of those who lost their jobs were dismissed from the taxi service. Also employment faced decline in home services (3.5%), industry (3.5%), education (about 2.9%), housing and utilities (2.6%), hairdressers and beauty salons (2.4%), clearing (1.5%), and tourism (1.1%).

Overall, practically all spheres of the job sector faced shutdown. The demand for taxi services fell by 80-90%. Many construction sites were closed. However, the demand for home services, courier delivery, housing, utilities and cleaning services has increased.

When it comes to implemented legal regulations, Russian Federation did a lot to minimize the risks of the COVID-19 pandemic for foreign migrants. By decree of the President of the Russian Federation N 274 of April 18, 2020 (from March 15 to June 15, 2020) the validity period of patents, work permits, visas, residence permissions and registrations expiring from March 15 to June 15, 2020 was extended. In addition, the period for deportation and expulsion for foreign citizens has been suspended. Another important innovation was the amendment to Law 135-FZ “On the Legal Status of Foreign Citizens”, which removed restrictions on patent extension for work without leaving Russia.

Going forward, governments of Russia and Central Asia need to combine and coordinate efforts regarding humanitarian assistance and information support for labor migrants. That means that they should synchronize and coordinate actions against COVID-19 at the international level. The borders of countries should always be open for their own citizens who decide to return to their homeland and to foreigners who decide to leave the country. Russia’s security agencies must stop using force to pressure migrant workers. Employers should not fire migrants during restrictive measures, since in this situation it is impossible to find a new job, and the lack of funds puts migrants in a dire situation. Without these actions, we can expect negative consequences for the economy, increased crime and social tensions for both donor and recipient countries.


The National Statistics Office estimated that unemployment in Thailand has doubled to 5,411,407 people in 2020 (8% of the population), with many applying for Covid relief and social security.1 According to the Ministry of Labor, Thailand typically sends over 100,000 workers abroad annually with over 100 million Baht in remittances.2 In the past, seeking work abroad had assisted working class households increase incomes when faced with underemployment. Since the Covid-19 situation, only Taiwan, South Korea, and Japan continue to allow for significant numbers of new migrant workers. Sending workers abroad to Taiwan, South Korea, Israel and Japan to supplement underemployment cannot continue to function as a stop gap measure that is sustainable.

In September 2020, only 2,344 Thai workers traveled to work abroad, 1,023 to Taiwan, 735 to Japan, 214 to Israel, and 132 to Bangladesh, while the highest number of consistent re-entry workers went to countries like the UAE (34) and Israel (33).3 It was not until this month that South Korea’s EPS has re-opened their active recruitment for 2,681 Thai workers for its agriculture, livestock, and construction sectors.4 In August 2020, the Thai Ministry of Labor reported that 121,952 Thai workers remained abroad, with most workers in Asia and the Middle East and a goal of sending close to 52,000 workers abroad.5 While lowered numbers of Thai migrant workers abroad lead to less opportunities for buffering the economic impact for low income households, there still are a number of aspects that necessitate a careful approach under Covid-19.

This is still the case, but less so. In our interviews with Thai workers, we found that only workers who wanted to be placed with particular factories guaranteeing significant overtime or workers who faced a criminal record and needed doctorpered documents were overcharged.6 Wages for working in Taiwan without overtime are not significantly different from working in Thailand. Furthermore, in the sectors that have traditionally hired Thai workers, like mass construction and factory sectors, rates of new employment have slowed, while Taiwan continues to show growing demand in home care, fisheries, and agriculture sectors. These are sectors exempt from the Labor Standards Act and not preferred by Thai workers.

While working in Israel and South Korea compensates workers with higher wages, working in Israel's agricultural sector near Gaza places workers at physical risk in conflict zones. Yet questions remain about what migrant worker Covid-19 safety measures are in place and what are the responsibilities of both sending countries and receiving destinations. Workers bound for abroad are vigorously tested for their health status, need to abide by state quarantine measures, and are subjected to varying conditions of working abroad during the Covid-19 economic downturn. In some of the worst cases, migrant workers are often subjected to high Covid-19 risks, including overcrowded living quarters, various workplace abuses including limited health access, wage theft leading to further vulnerabilities, and employer denial of responsibilities when workers become injured, sick or die. All receiving countries for Thai workers are yet to grant Covid-19 monetary relief to migrant workers, despite their legal residency status. Increasing levels of abuse, disregard, and exploitation make it clear that citizenship or lack thereof facilitates rent extractions, and exacerbating migrant worker precarity. Thai migrant workers returning to Thailand are often either ill-informed or disqualified from seeking Covid-19 relief due to exclusive measures. In these desperate times, it is yet to be seen how any goals of the Global Compact for Safe, Orderly and Regular Migration might be pursued.


1https://www.bot.or.th/ThaiResearchAndPublications/articles/Pages/Article_120Oct2020.aspx
5https://www.bangkokpost.com/thailand/general/1989259/50-000-thai-workers-to-head-overseas
6Forthcoming Report, IPSR Mahidol University and ICSS National Chiao Tung University, 2021.
This article aims to share some key findings about the situation of cross-border migrant children (MC, aged 0-14) and their access to basic rights in Thailand — mainly, access to birth registration, education, and health insurance. The findings were drawn from 3 IPSR research projects during 2017-2020 (before COVID-19) including (1) A Baseline Survey Report “Empowering Civil Society Organizations for the Protection of Migrant Children (ECPMC Project)” in 2017; (2) Migrant children population: Child rearing, access to health services and education in Special Economic Zone (SEZ) Mae Sot, Tak Province, in 2018-2019; and (3) An Assessment of Access to Birth Registration among Migrant Children: The Quantitative Study, in 2019-2020. The target respondents of these surveys were cross-border migrant households (mainly from Myanmar) with at least 1 non-Thai child born in Thailand. Focusses of the survey questions included migrant children’s birthplace, receiving of the delivery and birth certificate (registration), educational status, health insurance or welfare coverage, plan to return home country (of the household) and also characteristics of the MC’s household and main caretaker (in particular, their migration profiles and related socio-economic factors).

Summarily, in 5 survey sites of these 3 studies along the Thai—Myanmar border including Chiangrai, Tak, Ranong, Chumphon and Phang-nga provinces, 65% to more than 90% of the MC were born in Thailand of which 60-75% obtained a birth registration. With respect to school enrollment, 17-50% of the MC had never been in school or were not currently in school. Of those currently in school, less than 10% to up to 54% were in Thai schools studying the Thai curriculum while 46% to more than 90% were in migrant learning centers or non-Thai schools studying the Myanmar or a mixed curriculum. Regarding their health insurance coverage, 60-90% of the MC were found not being covered by any health insurance scheme. Among those with health insurance coverage, nearly all (in all survey sites except Mae Sot) were enrolled in the Migrant Health Insurance Scheme by Thailand’s Ministry of Public Health (MOPH). In Mae Sot, 70% of children with a health insurance reported being enrolled with the M-Fund (a non-profit health insurance scheme for migrants started in Mae Sot in 2017 (https://www.m-fund.online)) or a private health insurance scheme. From the multivariate statistical analyses using the survey data in Mae Sot in 2019, the 4 key factors that were significantly associated with the accessibility to Thai education and health insurance of migrant children included having a birth certificate (registration), future plan of the family for the child (whether to be in Thailand after age 15 or return to their home country), perception of the caretaker about child’s rights to education and health insurance, and Thai language ability of the caretaker. For the MC to access to Thai education, level of social integration in Thai society of his/her household and working status of the main caretaker were also found significantly important. For accessing to the health insurance, age of the child and health insurance status of the main caretaker were two other significant factors.

Based on these findings and insights gained from additional qualitative data collected during the fieldworks, the following issues were recommended for policy consideration: (i) enhancing universal access to birth registration to all children born in Thailand, (ii) mitigating language and cultural barriers (migrant friendly services) to accessing health and education, (iii) improving knowledge, understanding and awareness of migrant households and caretakers about rights and merits of birth registration, education and health insurance for MC, (iv) supporting social integration of the migrant population into the Thai society and community-based initiatives, (v) considering long-term replacement migration policy (especially in the areas of special economic zones (SEZs)); (vi) promoting multiculturalism and multilingual skills in the Thai educational curriculum, (vii) implementing school health programs and customized health insurance schemes for migrant children, etc.
I have been the Principle Investigator of an intercultural team research on migrant sex work and trafficking in persons into the sex industry entitled as above. The past one and a half years were full of political, administrative and personal blockages as much as the vortex of COVID. However, it has been crawling slowly and steadily, and the hope is that our research will renew the knowledge in this field within the coming three years. This research aims to investigate cross-border sex trade, a result of globalisation, based on the experiences of the migrant women involved as well as networks revolving around the migrants and their mediators. The geographical areas of study are countries that display characteristic phenomena found by the predecessors work in the field: Thailand, the Philippines, France, the UK, the Netherlands and Japan including Chinese diasporic population in each. I should especially note that the Thai part is conducted by a formidable team of MMC researchers led by Ajarn Sureeporn Punpuing. The investigation and analysis, we hope, will represent an important step in scientifically evidencing the complex realities and wide-ranging factors influencing a global sex trade that can no longer be understood in terms of the dichotomy between sex work versus being trafficked; the former based on self-determination and choice and the latter as a part of “modern sexual slavery”.

Cross-border sex trade itself is not a recent phenomenon. Records of the debate as to whether it should be viewed as a type of migrant labour or as human slavery date back at least to the early 19th century in both Europe and Asia. However, this phenomenon has become considerably more widespread since the late-1980s, with the increased global economic disparity and the certain level of free movement of information, trade and people that has accompanied globalisation. As a result, the academic debate on the topic has seen development of new perspectives. The new trends are characterised by an expansion in terms of both the phenomenon itself and where it is studied; greater awareness that this is an inevitable issue in a global society; an increase in research methods informed by post-colonial feminism that include the voices and views of migrants involved in the sex industry; and an expansion in both qualitative and quantitative methodologies. Then, the focus of the academic debate on this issue has moved away from the dichotomy above, and towards an understanding that the boundaries are blurred and the reality more ambiguous.

Nevertheless, particularly since the early 2000s, when the sex industry became the subject of international anti-human trafficking discourse and policy, many researches into cross-border sex trade have predominantly been dealing with exposing and prohibiting human trafficking, as well as punishing the perpetrators and rescuing the victims. With these, sex trade as migrant sex work tends to get lost; and this situation is not conducive to the development of the debate more rooted in ambiguity. Our research, therefore, seeks to re-investigate sex trade involving the cross-border movement of people basing itself on the experiences of the migrants themselves as well as networks centered on contact with their mediators in light of social history, and to elucidate the complex realities and wide-ranging influencing factors associated with the global sex trade. The ambition is to develop more nuanced academic arguments, to move beyond the theoretical and provide a foundation for future legal policy measures from the standpoint of those involved.

As far as we are aware, this would be the first inter-national/cultural study to employ network analysis into contact between the migrants involved and their mediators/traffickers. It will closely examine who these networks connect to whom, what are the features and functions, and what kind of needs on the part of the women they do and do not fulfil, in order to understand the integrated networks making up the structure of global sex trade. We are also using ethnographies, interviews with the migrants and their close connections, including managers and other workers in the sex trade, communication records and secondary materials to bridge the gap between the separate findings to date in the different countries, both in the context of migrant sex work and of human trafficking with its perpetrators and victims.
Are young cross-border migrant workers in Thailand vulnerable to alcohol-related disorders? To further explore answers to this question, a cross-sectional study in 2017 (Racal, et al., 2020) was conducted to examine alcohol consumption and factors influencing alcohol use in this population. There were 186 participants, who are young migrants from Myanmar working in a coastal province near Bangkok-Samut Sakon. Standardized survey instruments for measuring alcohol use, acculturative stress, depressive symptoms, and self-esteem were used. Conceptual foundations utilized were the Transactional Model of Stress and Coping (Lazarus & Folkman, 1984) and Cooper’s Four-Factor model of Drinking Motives (Cooper, 1994).

Given that the study was conducted in a coastal province, the participants were mostly working in the seafood processing industry. Results (Table 1) show that most young migrant workers from Myanmar who consumed at least one alcoholic drink within the past year (64.5%) were low-risk drinkers (92.5%). The participants also had low levels of acculturative stress, low levels of depressive symptoms, and normal levels of self-esteem. Furthermore in this sample, the majority of the young migrant workers did not have a history of drinking in Myanmar nor have a family history of alcohol abuse. Migrants who were more likely to drink were males, those having a history of alcohol drinking in Myanmar before migrating to Thailand, and the chance of alcohol drinking increased with the duration of stay in Thailand (Racal, et al., 2020).

Table 1 Frequency and AUDIT classification by score among participants (N=186)

<table>
<thead>
<tr>
<th>Alcohol Use and Risk Levels</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not drink alcohol in Thailand</td>
<td>66</td>
<td>35.5</td>
</tr>
<tr>
<td>Drank alcohol in Thailand</td>
<td>120</td>
<td>64.5</td>
</tr>
</tbody>
</table>

AUDIT classification

<table>
<thead>
<tr>
<th>Low risk (0-7)</th>
<th>172</th>
<th>92.5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hazardous drinking (8-15)</td>
<td>13</td>
<td>7.0</td>
</tr>
<tr>
<td>Harmful drinking (16-19)</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Alcohol dependence (20-40)</td>
<td>1</td>
<td>0.5</td>
</tr>
</tbody>
</table>

It is worth noting that the participants’ motivation for drinking alcohol was not stress-related but more as an instrument for improved social interaction, particularly during festivals or celebrations. In fact, peer bonding and socialization were indicated as the primary reasons for drinking. The researchers did not expect the results that alcohol consumption, acculturative stress and depressive symptom levels were low, and self-esteem normal. Possible explanations supporting these favorable findings include the religious beliefs of the participants.

Thailand and Myanmar both share a common religion—Buddhism. In Buddhist teachings, alcohol drinking is wrong according to the five precepts. Also, in this religion, mindfulness meditations and the concept of “middle way” (moderate practices between the two extremes) are recommended practices for daily living and in response to stressful life events. In addition to Buddhist influence, favorable results on alcohol use, acculturative stress, depressive symptoms, and self-esteem may be due to the presence of social support as evidenced by migrants living in close-knit communities as well as the availability and accessibility of migrant-friendly social resources such as schools, markets, temples, and sports facilities. Given these findings, the study was more consistent with Cooper’s four factor model of alcohol drinking motives rather than the stress and coping theory of Lazarus and Folkman.

This study points to opportunities for further research and reflections around mental health and the progression of alcohol and perhaps other illicit substance-related disorders. One of the things that can be highlighted in this study is the influence of culture and local tradition. Other than Buddhism as the participants’ main lifestyle and belief foundation, the Myanmar locals also do not have a language counterpart for depression. This is a foreign concept. The closest but not accurate local translation is "feeling down". Another research opportunity is to take a step back and further explore tendencies for alcohol-related disorders in stress and non-stress driven drinking. Perhaps different health outcomes can be found between choosing to use alcohol as a means to cope with stress and/or escape emotional distress and choosing to have it as part of social gatherings and celebrations. This study can also be taken a step further by exploring alcohol use and factors influencing it among non-documentated migrant workers and those residing in other regions of Thailand.


Bilateral Agreements: Opportunities or Challenges for Cambodian Labor Migrants

We found that an increasing number of migrants have become more aware of laws and regulations. However, there are major challenges in the migration process such as the cost of formal and informal migration procedures. Some prospective migrants revealed that they have experienced being cheated in Cambodia during the processing of their documents. They did not have a complete understanding of each type of document and its purpose, and that is the reason they used passports with no work visas for working purposes.

The findings of the study make it clear that there should be laws and standards in both the sending country and the receiving country (Thailand), specifying the costs and duration of the process to import labor, and that these laws and standards should be implemented by the relevant offices/agencies/personnel in both countries. Such bilateral agreements will ensure that Cambodian labor migrants can work and migrate safely in the Greater Mekong Region.


Teeranong Sakulsri
Teeranong.sak@mahidol.edu

Thailand, since the 1980s when it had a rapidly growing economy, has become an attractive destination for large numbers of Cambodian migrants, both legal and illegal (Chantavanich and Jayagupta, 2010; Huguet and Chamratrithirong, 2011).

Over the past two decades, millions of people from Cambodia have migrated to Thailand. One of the main purposes for this migration, both short- and long-term, is work, as migrants aim to find employment opportunities leading to a better future for themselves and their families (International Labour Organization, 2017). However, many of these migrants did not have proper legal documents or work permits.

In responding to the migration situation through policy formulation, the Thai authorities have employed two parallel strategies for regularizing temporary migration to Thailand. The first has been to register migrant workers already in Thailand. The second has been to enter into bi-lateral MOUs with the Cambodian government to promote cooperation for the employment of workers. However, deploying a worker from any of the MOU-sending countries is a complicated process involving workers, employers, recruitment agencies on both sides of the border, as well as provincial and central level labor ministries in both the origin countries and in Thailand.

Exploring this migration phenomenon, was one part of our project entitled “Promoting Safe Migration for Temporary Migrants to Thailand” with funding from the Mekong-ROK Cooperation Fund, Republic of Korea, through the collaboration between the Migrating out of Poverty Research Programme Consortium, the University of Sussex; International Collaboration Development; the Ministry of Public Health, Thailand; Friends-International Thailand; World Vision Foundation of Thailand (WVFT); Analyzing Development Initiatives Center (ADIC); and Migrant Working Group (Thailand). We had the opportunity to conduct face-to-face interviews with migrants and migrants’ families in three provinces, namely Siem Reap, Battambang, and Pursat, from which a high number of migrants, particularly those going to Thailand, originate. Brokers and recruitment agencies were interviewed in Poipet.
Extralocal teachers of English (i.e., ‘native’ or ‘non-native’) teachers of English inclusively, from other nationalities who are outsiders or non-locals, and who are not citizens of the national community in which they teach English, have long been part of the community of migrant workers in Thailand. Studies regarding the presence of implicit, and on occasion explicit, privilege and marginalization subjectively experienced by extralocal teachers of English have gained more interest in English Language Teaching (ELT) research as of late. These inquiries into privilege and marginalization within the ELT industry have mainly concentrated on the inequity perceived by ‘non-native’ teachers of English (e.g., Filipino), but more recently, and to a much lesser degree, studies have looked at possible related issues of inequity faced by ‘native’ teachers of English (e.g., American or British).

The manner in which the Thai society views extralocal teachers of English has attracted very little attention from the ELT scholarly community. Research in Thailand tends to slant towards the way teacher associations, teacher training institutions, and school administrators regard ‘non-native’ English teachers. Although recent criticisms of the concepts of privilege and marginalization have challenged the traditional way of thinking that only ‘non-native’ teachers of English can be marginalized, scholars have yet to systematically investigate the effect of such social perceptions towards extralocal teachers of English as one homogenous group in Thailand.

The reluctance in amalgamating ‘native’ and ‘non-native’ English teachers, even after extensive research in the field of ELT, stems from the emphasis of studies of privilege and marginalization to center on the ‘native’ versus ‘non-native’ teachers of English dichotomy. A significant portion of ongoing traditional binary-oriented research has equated privilege as a sense of having greater social capital or more social value for being a ‘native’ English speaker teacher, and marginalization as having a sense of lesser social capital or less social value for being a ‘non-native’ English speaker teacher. Therefore, identifying the perception of privilege and marginalization, as stated above, may offer a more concrete explanation of the potential connections between the Thai societal views and the effect of such constructs on the self-image of extralocal teachers of English in Thailand.

With the aim to examine the sense of privilege and marginalization within the Thai society of the extralocal teachers of English possessing greater or lesser social value, this author has embarked upon a groundbreaking study which employs multiple research methods to examine the influence of such constructs of privilege and marginalization on the working contexts, social perceptions, and self-image of extralocal teachers of English as a collective group. The conceptual theoretical framework of this current study is based on qualifying discourse structures relating to the ELT profession implemented and reproduced in official documents and on social media platforms regarding equitable working contexts and social perceptions, and by in-depth interviews focusing on the influence of each construct on the self-image of extralocal teachers of English collectively.

Evidence-based information being gathered to investigate the possible phenomenon of simultaneously perceived privilege and marginalization of extralocal teachers of English may lead to a mutually beneficial awareness of a more equitable working and social environment.

Some key issues should emerge out of this study, namely the results from this study could eventually enhance the nature of social connections among groups of local Thai teachers, and extralocal teachers of English, and that of teaching organizations and education decision-makers, with reciprocity and trust, better-shared understandings, stronger social norms of collaboration, leading to more effective general social structures.

Accordingly, a research framework grounded in social capital, and framed in an English Language Teaching context, can offer a scope of social capital within the perception of privilege and marginalization, which may need to change. This change may not only affect the personal narrative (self-image) of individual extralocal teachers of English; it may also affect the development of English language teaching (working contexts and social perceptions) within Thailand.

[1] The author believes without reservation that the term extralocal (extra [prefix] + local [root] = extralocal [word]), which lacks all negative connotations, should be mutually applied to create one classification for ‘non-native’ and ‘native’ teachers of English collectively.

[2] The author has placed potentially offensive terms (‘native’ and ‘non-native’) in closing single quotation marks to show solidarity that these outdated descriptors should be eliminated in the field of ELT.


7. The long term impact of diverse parental migration experiences on youth transition to adulthood: A case study from Southeast Asia. Aree Jampaklay. (The University of Hong Kong). [2019-2021]


The 7th edition of the Mahidol Migration Center (MMC) newsletter marks unprecedented times. As a result of the Covid-19 outbreak, our ability to meet and collaborate in person has been limited. Some of us needed to work from home for some time and temporarily suspend research activities. However, the current crisis has also brought a renewed need for research on migration. Migrants across the globe have been among the groups most vulnerable to the Covid-19 pandemic. Many of us have seen this as a call to investigate the many effects of COVID-19 related restrictions on the lives of migrants. I hope that the MMC newsletter will help keep you updated on our latest research projects and that it will give you inspiration for new research engagement.

This edition of the MMC newsletter includes thirteen contributions from our research network. We begin with an article from Paul Statham, who reflects on migration prospects and democratic challenges in a post-pandemic world. The second article, written by Rosalía Sciortino, sheds light on how the Covid-19 crisis is highlighting major divides in ASEAN societies and exposing pre-existing vulnerabilities. Pattaraporn Chueglertsiri is the author of the third article, which deals with the precarity of Thai female workers in the UK amid the COVID-19 pandemic. The fourth article, written by Sakkarin Niyomsilpa, focuses on the growing popularity of the Thailand Elite Card, a variant of ‘Golden Visas’, in the midst of the Covid-19 crisis. In the fifth article, Aris Ananta elaborates on an emerging pattern of population mobility during the pandemic. Sureeporn Punpuing is the author of the sixth article, which looks at challenges to safe and inclusive migration during and after the Covid-19 outbreak. In the seventh article, Sergey V. Ryazantsev and Alexey D. Bragin present results of their research on the impact of the crisis on the situation of CIS migrants in the Russian labor market. The eighth article, written by Sudarat Musikawong, wraps up our collection of Covid-19 related articles as she discusses the case of Thai migrant workers during the pandemic. Our remaining articles focus on highly important further migrant-related issues, such as the access to basic rights of cross-border migrant children in Thailand, which is the topic of the ninth article written by Chalermpol Chamchan. Kaoru Aoyama is the author of the tenth article, which introduces her ongoing intercultural research “Between global sex work and human trafficking: an analysis of interviews and networks”. The authors of the eleventh article, Sarah Jane Racal and Sureeporn Punpuing, share findings from their research on alcohol use among migrant workers in Thailand. The twelfth article, written by Teeranong Sakulsri, discusses opportunities and challenges for Cambodian labor migrants with respect to bilateral agreements. Last but not least, David D. Perrodin discusses constructs of privilege and marginalization subjectively experienced by extralocal teachers of English in Thailand and outlines an upcoming research project.

I hope you enjoy reading this edition of the MMC newsletter and that we will be able to welcome you in person at future MMC conferences at the Institute for Population and Social Research in Thailand.
MMC Newsletter Editorial Team
Editor: Marc Voelker: marc.voe@mahidol.edu
Design and Layout: Wisinee Thipsupanimit: wisinee.thi@mahidol.edu

MMC Coordinators
Niphon Darawuttimapraporn: niphon.dar@mahidol.edu
Wisinee Thipsupanimit: wisinee.thi@mahidol.edu
Saowapak Suksinchai: saowapak.suk@mahidol.edu