

**Child Health and Migrant Parents in Southeast Asia**  
**(CHAMPSEA) – THAILAND REPORT**

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## EXECUTIVE SUMMARY

CHAMPSEA-Thailand is the first study in Thailand that comprehensively focuses on the impacts of parental migration on the health and well-being of children left behind. The study took place in two provinces with the highest rate of overseas labour migration. The survey included 1,030 households, reflecting 1,030 target children (TC), of which 519 were transnational households (hereafter THs) and 511 were non-migrant households. The majority of migrant parents were fathers. The TCs comprised of two different age groups: 3 to 5 year olds (509) and 9 to 11 year olds (521). In terms of gender, 513 were girls and 517 were boys.

This report consists of three main parts:

- Background to the study and overview of the fieldwork conducted for the CHAMPSEA survey;
- Overview of the quantitative survey findings; and
- Overview of the sampling procedure and fieldwork conducted for the qualitative follow-up study.

The following are some key findings derived from the quantitative survey:

- Using the wealth index as a measure of economic status, a higher proportion of poor households was found among non-migrant households (56 percent) than in THs (48 percent). Among THs, almost all of them (> 99 percent) received cash remittances within the past six months of the survey. More than half of these households (58 percent) reported that the TC benefited a lot from the remittances. However, the largest proportion of THs (34 percent) reported using the remittance for debt payment purposes.
- The majority of TC's parents (both father and mother) had primary or lower secondary levels of education (81 percent). A larger proportion of fathers with upper secondary educational qualifications or higher was found among non-migrant households than in THs. This difference was not statistically significant amongst the mothers. About half the proportion of mothers (48 percent) worked in skilled agriculture. The percentage of fathers working in semi-skilled jobs was found to be higher among THs (29 percent) than in non-migrant households (13 percent). The proportion of mothers reporting as housewives was also higher among THs (38 percent) than in non-migrant households (31 percent).
- The two main reasons for fathers going abroad were for the TC's future/education (40 percent) and general family care/subsistence (34 percent). The percentage of fathers who were away from home during the first 36 months of the TC's life was found to be higher among those from THs (71 percent) than in non-migrant households (32 percent). Almost all migrant fathers went abroad on a formal work contract (97 percent) and had to pay a fee to secure their contract (94 percent).

- The majority of migrant fathers (83.3 percent) did not visit home after going abroad. However, they remained in close contact with their families and children through various forms of telecommunication, especially the mobile phone (72 percent) and landline phone (28 percent). Two-thirds of them (64 percent) contacted their family on a weekly basis or more.
- The majority of TCs were cared for by parental caregivers (95 percent), and almost all of the caregivers were the TC's mother regardless of the type of household. The majority of caregivers were aged between 25 to 39 years (68 percent). Eighty one percent of caregivers had educational qualifications that were primary or less. According to the SRQ20 measure, the majority of caregivers (79 percent) were mentally healthy with little difference between those from THs and non-migrant households. The majority of caregivers also received support when needed (92 percent).
- In terms of child nutrition, the proportion of TCs who experienced stunting, thinness, and overweightedness were 8 percent, 8 percent, and 13 percent respectively. No differences were found between TCs from THs and non-migrant households. Nearly three-quarters of TCs (71 percent) had experienced at least one of following the health symptoms within two weeks prior to the survey: colds, cough, fever, flu, headache, stomachache, loss of appetite, diarrhoea, toothache, or eye problems. Apart from eye problems which were found to be higher among TCs from THs, the percentage distributions for the other symptoms were not found to be significantly different amongst THs and non-migrant households. In the past six months prior to the interview, only 4 percent of TCs experienced some form of serious illness and 2 percent encountered serious injury.
- Based on the total difficulties score on the SDQ, TCs from THs were more likely to have psychological problems than those from non-migrant households (24 percent vs. 18 percent). TCs from THs were also more likely to have conduct problems and experiences of hyperactivity. However, they were less likely to have peer problems as compared to their counterparts.
- Caregivers reported that the majority of TCs (78 percent) had at least average class standing in terms of school performance. A very small percentage of them (6 percent) had ever received a negative school report.
- More than half of TCs aged between 9 and 11 years (53 percent) perceived their families to be well functioning. This percentage did not differ significantly amongst those from THs and non-migrant households.
- About 3 percent of TCs had ever smoked, while 6 percent of them reported having ever drunk alcohol. These percentages did not differ significantly amongst TCs from THs and non-migrant households. However, tobacco use in the family was reportedly higher among non-migrant households than in THs.

- The majority of TCs reported having to help their families with household chores, especially those who were between 9 and 11 years old (94 percent). By contrast, the percentage of those who worked for payment was substantially lower (approximately 11 percent). No significant difference was found in the percentages between TCs from THs and non-migrant households.
- Based on the TC's self-perception of their well-being, 94 percent of older TCs were generally "very happy" or "happy" and 84 percent enjoyed school. Again, these percentages were not significantly different among TCs from THs and non-migrant households.
- In terms of social support from the child's perspective, more than half reported turning to their parents whenever they faced problems with their mothers, fathers, siblings, with school work, or if they felt sad or lonely. This did not seem to matter whether their parents were working abroad or present at home.
- Bivariate analysis did not reveal a significant relationship between parental migration and the TC's nutritional status, general health, health behaviour, health risk behaviour, school performance, perceived family functioning, general happiness, or enjoyment at school.
- Significant factors influencing children's nutritional outcomes include low birth weight (stunting and thinness), being male (overweightness), and being in a rich household (overweightness).
- Having migrant parents was negatively associated with the TC's physical well-being. When taking into account the child's perspective, however, TCs from THs were reported to have a higher likelihood of being very happy and always enjoyed school.

## **PART 1: BACKGROUND TO THE STUDY AND OVERVIEW OF THE FIELDWORK FOR THE CHAMPSEA SURVEY**

### **I. OVERVIEW: National policy and labour migration in Thailand**

#### *Demographic Background*

For more than a decade, Thailand has been experiencing below replacement fertility rates. The total fertility rate has decreased from 6.3 in 1964, to 4.9 in 1974, 2.7 in 1985, 2.2 in 1991, 2.0 in 1996, and 1.7 in 2005 (Prasartkul and Vapattanawong, 2005). The most recent data source in 2008 indicates that the total fertility rate is 1.5. Females outnumber males slightly (50.7 percent and 49.3 percent respectively). More than one third (36.1 percent) of the Thai population live in urban areas. The highest proportion of the population comes from the North-eastern region (33.5 percent). In other regions, the population percentages are as follow: 24.1 percent in the Central area, 18.5 percent in the Northern region, 13.3 percent in the Southern region, and 10.6 percent in Bangkok (see Table 1). The working-age population comprises of 67.4 percent of the total population, whereas the percentage distribution for children (under 15 years) and the elderly (over 60 years) are 21.2 percent and 11.5 percent respectively. Life expectancy is 76.3 years for females and 69.5 years for males.

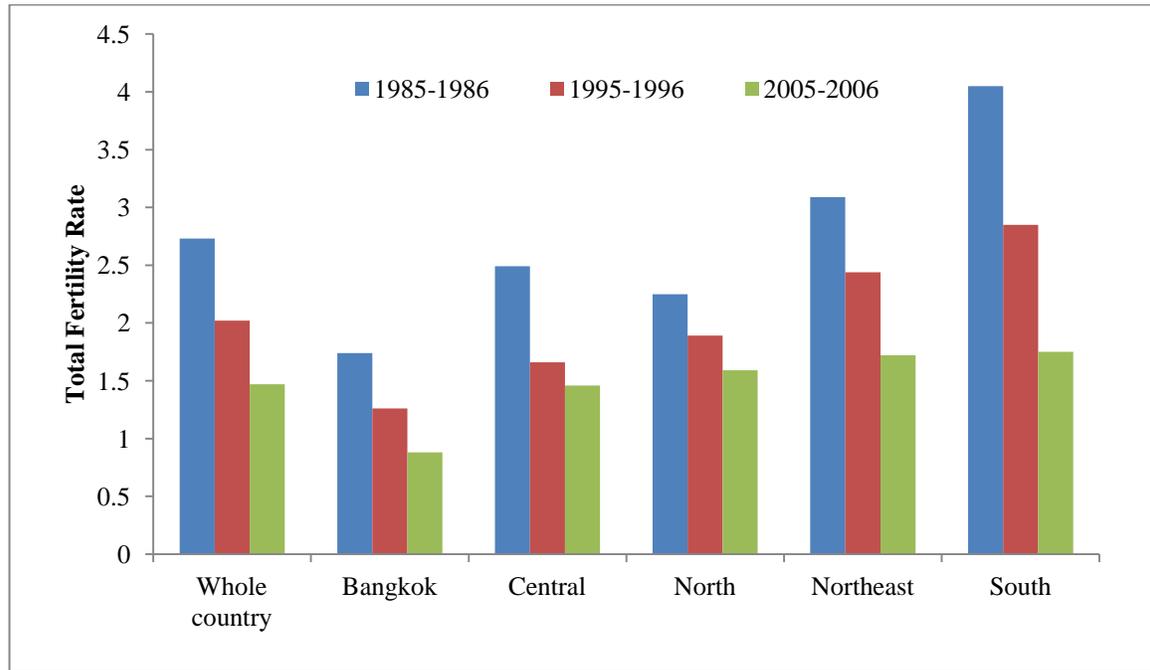
It is important to note that fertility rates of the Thai population are not consistent across different geographical areas. As shown in Figure 1, the fertility rate is lowest among the population in Bangkok, followed by those in the North. The population in the South and Northeast, by contrast, ranked first and second respectively in terms of having the highest fertility rates. One of our study sites (Lampang) is located in the North and its lower fertility rates posed a challenge for us in terms of meeting our sampling quota. This issue is discussed in a later section of the report.

**TABLE 1: Population of Thailand, 2008**

1.Total Population	63,121,000
2. Population by Sex	
Male	31,125,000
Female	31,996,000
3. Population in Urban Areas (population living in all types of cities and municipal areas)	22,799,000
4. Population in Rural Areas (population living outside urban areas)	40,322,000
5. Population by Region	
Bangkok Metropolis	6,663,000
Central (excluding Bangkok Metropolis)	15,107,000
Northern	11,734,000
North-eastern	21,245,000
Southern	8,372,000
6. Population by Age Group	
Children (under 15 years)	13,635,000
Labour force (15 - 59 years)	42,444,000
Elderly (60 years and over)	7,042,000
School ages (6 - 21 years)	15,438,000
Women in reproductive ages (15 - 44 years)	17,842,000
7. Crude Birth Rate (per 1,000 population)	12.5
8. Crude Death Rate (per 1,000 population)	8.0
9. Natural Growth Rate (percent)	0.4
10. Infant Mortality Rate (per 1,000 live births)	15.2
11. Child Mortality Ratio (per 1,000 live births)	19.8
12. Life Expectancy at Birth (average number of years a person could expect to live after birth)	
Male	69.5
Female	76.3
13. Life Expectancy at 60 (average number of years a person could expect to live after age 60)	
Male	19.4
Female	21.9
	1.5
14. Total Fertility Rate (average number of children a woman would have during her reproductive period)	
15. Contraceptive Prevalence Rate (per cent)	74.0
16. Sex Ratio (males per 100 females) All ages	97.3
Children (under 15 years)	105.5
Labour force (15 - 59 years)	97.4
Elderly (60 years and over)	54.7

Source: <http://www.ipsr.mahidol.ac.th/ipsr/PublicationGazette.aspx>

**FIGURE 1: Fertility trends by region, Thailand 1985 – 2005**



Source: Report on Survey of Population Change, National Statistical Office.

*Relevant policy for Thai overseas workers*

According to the government’s report on the situation of the labour market, Thailand’s economy is able to receive an increasing number of approximately 37 million workers each year (Ministry of Labor and Social Welfare, 2007). Employment levels in both the agricultural and industrial sector have decreased in recent years. The demand and supply in terms of workers’ qualification do not match. While the need for workers with primary and secondary levels of education has expanded, the number of people in the working-age population with this type of qualification entering the labour market has tended to decrease, whereas those with higher than secondary school has increased (Ministry of Labor and Social Welfare, 2007).

The Thai government has put in place a variety of policies to minimize unemployment, to improve workers’ quality of life, and to enhance workers’ productivity. Although most policies are generally related to local workers rather than overseas workers, overseas migrants have been one target group in all labour-related policy and development plans. Information specific to the implementation of policies and plans regarding Thai workers working abroad is discussed below (Ministry of Foreign Affairs, n.d.) In 2001, the government launched the Labour Skill Development Act, which is a policy designed to encourage the non-government sector to participate in developing workers’ skills (Ministry of Foreign Affairs, n.d.). In February 2003, the Ministry of Labour, the Ministry of Foreign Affairs, the Ministry of Commerce, and the Ministry of Public Health set up an MOU to increase Thai workers’ productivity with the aim of expanding the Thai

labour market abroad. It was agreed that Thai workers were qualified to be employed in the service sector—including areas such as Thai food processing, child and elderly care, domestic work and traditional Thai massage—as there was a demand for these skills in both the local and international labour market. Therefore, the government would seek to enhance the capability of Thai workers to reach international standards through various means such as language skills training. Other forms of governmental support include: providing information about the overseas labour demand for Thai workers, coordinating between organizations in Thailand and other countries, as well as promoting and providing resources for the training and equipping of specific occupational skills in the service sector.

In July 2003, cabinet members of the Thai government agreed upon a draft for the National Plan for Protecting and Promoting Thai Workers to Work Abroad in the 9<sup>th</sup> Socio-economic Development Plan (2002-2006). The draft composed of four sections: 1) Situation and trends of employment abroad; 2) Vision, objectives, and goal (to avoid cases of deception by providing essential pre-departure information for workers to ensure that their rights are protected by the standard contract); 3) Strategies to protect and promote Thai workers abroad; and 4) Guidelines for implementing these plans.

Between March and September 2003, the Ministry of Labour launched a project to enhance Thai workers' capability with the goal of expanding the Thai labour market overseas. The project is aimed at improving the occupational and language skills of Thai workers to reach international standards. This is applicable in several work sectors, namely Thai food manufacturers, Thai massage, child and elderly care, domestic services, and massage with oil. There were 40,000 workers who participated in the project. The target was to send out 30,000 workers to 22 countries and retain 10,000 locally. Four strategies were used, including: 1) coordination efforts among related organizations, namely the Ministry of Labour, Ministry of Foreign Affairs, Ministry of Commerce and Ministry of Public Health; 2) improving Thai workers' capability; 3) expanding the Thai labour market by providing information to Thai workers in the five sectors mentioned above; and 4) showcasing Thai workers' capability in the service sector (Ministry of Foreign Affairs, n.d.).

According to the 1997 Thai Constitution, the government is committed to promoting decent jobs for its citizens and ensure the protection of its workers especially children and women. It is the government's responsibility to arrange for a labour relations system, social insurance, and fair payment system (Ministry of Foreign Affairs, n.d.). The national plan for labour development covers the general population within the working age range regardless of whether they are internal or international migrants. Thai workers working abroad are mentioned as one target group in 2008 Labour Development Plans, which states that "Thai workers working abroad will be protected for their rights according to Thai labour laws" (Ministry of Labor and Social Welfare, 2007).

In 2007, the Department of Skill Development and Ministry of Labour set up several training seminars to help workers develop their occupational skills. The contents of the training are varied and include activities such as pre-departure preparation, upgrading of

skills to match international standards, as well as to complement workers' occupational profiles with existing labour market demands. Some 16,420 aspiring overseas workers participated in the training sessions in 2007. Those from the North-eastern region accounted for one third of the participants (the highest proportion), followed by people in the working age range from the Central region. The most preferred jobs included those in business and services (about 27 percent), followed by electrical services, technical, and computer-related jobs (23 percent).

On 19 March 2008, the Ministry of Labour announced 14 other labour policies. One policy pointed to the government's increasing focus on overseas migration, which was specifically to increase the demand for Thai workers overseas. As a result, several curriculums were developed to promote Thai workers' skills, including those designed to prepare workers before getting jobs, those which enhanced workers' occupational skills, as well as the utilization of a standardized skills test.

The government also facilitates overseas migration in the area of finance. For example, the Ministry of Labour signed an MOU with several banks for low-interest loans for those working abroad. The government deposits an amount of money from the Social Insurance Fund into each of the four participating banks, namely Krung Thai Bank (signed on 30 June 1995), Krung Sri Ayuthaya Bank (signed on 16 March 1998), Thai Saving Bank (signed on 28 June 2002), and Agricultural and Cooperation Bank (signed on 23 December 2003). The maximum loan amount is 150,000 baht per person for all banks (Department of Employment. n.d.)

Parallel to the growth in overseas migration is the increase in private recruitment agencies and their fraudulent practices. Several thousands of migrants have reported cases of deception and abuse to the Office of Welfare Protection for Thais in the Thai Consulate of destination countries. These include the excessive charging of overheads by recruitment agencies, collecting more advance payment than what is legally permitted without issuing receipts for the advance payment, or issuing receipts of a lower amount than what was actually paid. The main problem for workers going overseas is that most migrants either have insufficient information or are misinformed about working abroad, as many migrants receive information from private agency or peers rather than the government. Return migrants also face a challenge of re-adapting their work expertise with local labour market demands. (Ministry of Labor and Social Welfare, n.d.)

In response to the above problems, it was recommended in the Labour Master Plan (2007-2011) that the government should take the following actions to enhance the protection of Thai overseas migrants: 1) educate potential workers about the rules, regulations and working environments of target destination countries; 2) work with the governments of target destination countries to establish a labour organization (i.e. labour union) to protect Thai workers according to UN conventions and ILO criteria; 3) enhance workers' occupational skills to match universal standards; and 4) support returnees by assisting them with utilising their foreign work experience in the local market, which will help prevent a vicious cycle of migration (Ministry of Labor and Social Welfare, n.d.)

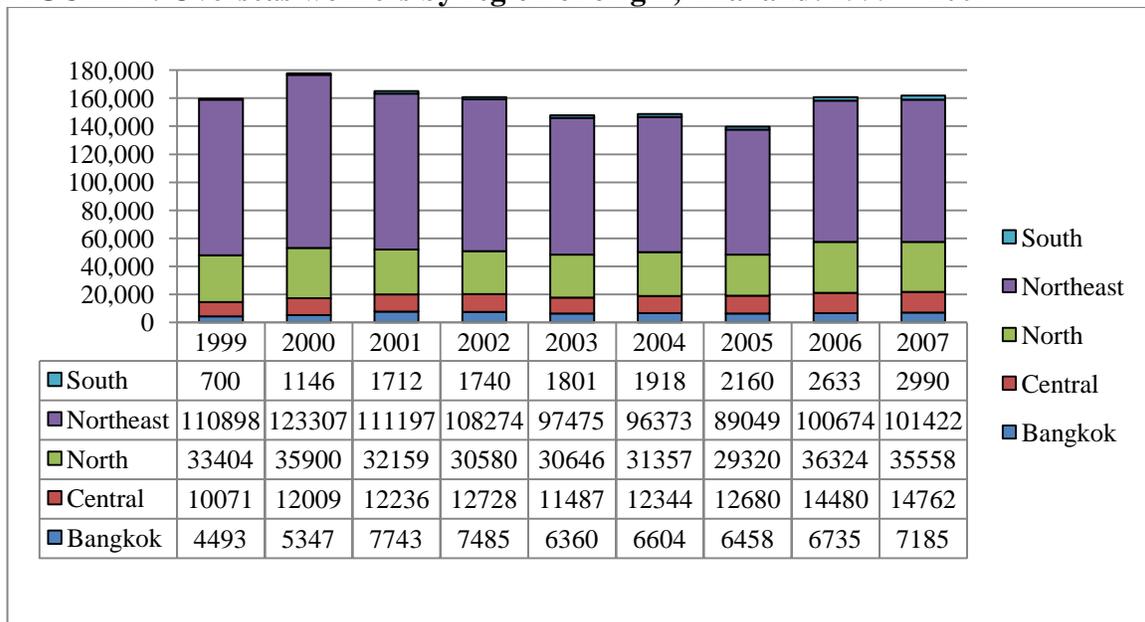
*Number of overseas migrants*

Remittances from migrant workers overseas contribute significantly to Thailand’s economy. According to Thailand National Bank reports, remittances from overseas migrants transferred via commercial banks account for more than 40,000 million baht each year (Department of Employment, n.d.) The actual figure would be higher as this does not take into account money that is physically brought home by the overseas migrants.

Latest figures in 2010 indicate that there are currently 143, 815 documented Thai workers working overseas. The actual number of overseas Thai workers is estimated to be higher than the official figure. According to the 2008 Labour Development Plan, there are at least one million Thai workers working in 11 countries abroad (Ministry of Labor and Social Welfare, 2007.)

Figure 2 shows the number of documented overseas workers by region of origin between 1999 and 2007. There was a gradual decline in numbers between 2000 and 2005, before it increased in 2006 and 2007 to match those recorded in 2001. The majority of overseas migrants originate from the Northeast while a minority are from the south. It is important to note that this figure includes only migrants officially documented by the Ministry of Labour.

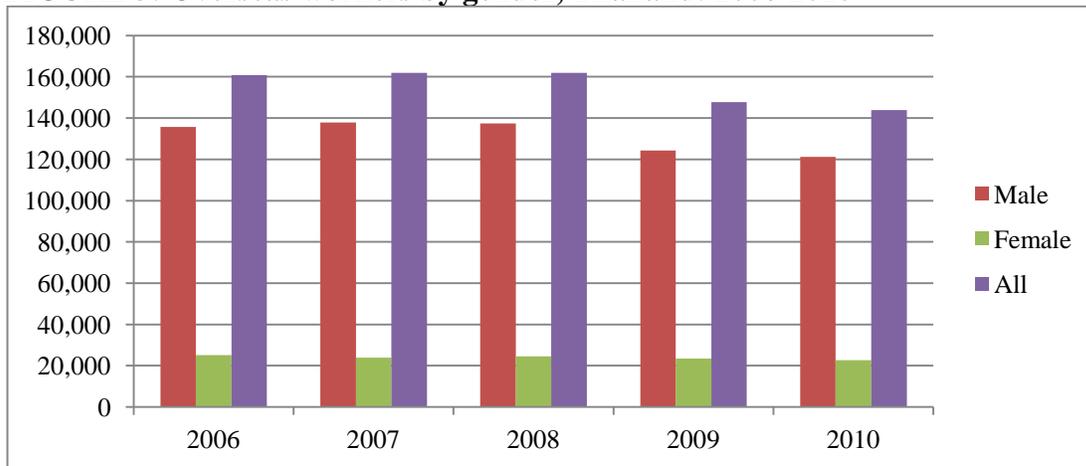
**FIGURE 2: Overseas workers by region of origin, Thailand: 1999 – 2007**



Source: Adapted from the Thailand Overseas Employment Administration (TOEA) and the Department of Employment, Ministry of Labour and Social Welfare (n.d.)  
<http://www.overseas.doe.go.th:8081/overseas/index.php>

The majority of migrant workers are males, whereas female migrants account for only 16 percent of the total number in 2010. Although the proportion of overseas migrant women was above 15 percent between 2003 and 2005 (when there was a decrease in the number of male migrants), the actual number of documented women migrant is virtually constant over time (see Figure 3). This is possibly a reflection of Thai culture and norms where overseas migration is often perceived as ‘men’s business’, even though Thai women are generally regarded as having relatively high status and the migration of women perceived as independent. Since international migration tends to have significant impacts on gender roles within the household, especially the role of mothers, women may decide to avoid the risk. The smaller number of female migrants may also be a reflection of historical trends in international migration for Thai workers, where the overseas labour market had greater demand for male workers than females. An example of this would be the construction industry in the Middle East.

**FIGURE 3: Overseas workers by gender, Thailand: 2006-2010**



Source: Title of webpage/Name of Department, year, accessed from: [www.overseas.doe.go](http://www.overseas.doe.go)

The major destinations for overseas Thai workers are countries in Asia (67 percent or 108,658 persons), followed by Middle Eastern countries (21 percent or 33,833 persons). Taiwan is the most popular destination for Thai workers, which received about a third of overseas Thai workers (52,193 persons) in 2007. Singapore (10 percent) and South Korea (8 percent) are the second and the third most attractive destinations in Asia. Other popular destinations for Thai workers include Israel (7 percent), United Arab of Emirates (6 percent) and Qatar (4 percent) (See Tables 2 to 4 below).

Male Thai workers outnumber females in all continents. In 2007, males comprised of 85 percent of all Thai workers who have worked abroad.

**TABLE 2: Number and percentage of documented Thai workers overseas by continent of destination and gender, 2007**

Continent of country of destination	Number of documented migrants			percent of documented migrants		
	Male	Female	Total	Male	Female	Total
Asia	91,150	17,508	108,658	66.09	72.97	67.11
Middle East	31,272	2,561	33,833	22.67	10.67	20.90
Europe	7,026	1,934	8,960	5.09	8.06	5.53
Africa	5,250	279	5,529	3.81	1.16	3.41
North America	2,355	1,267	3,622	1.71	5.28	2.24
Australia & Oceania	867	441	1,308	0.63	1.84	0.81
South America	2	5	7	0.00	0.02	0.00
Total	137,922	23,995	161,917	100.00	100.00	100.00

Adapted from [http://www.overseas.doe.go.th/oeao\\_th/news/news\\_body.html](http://www.overseas.doe.go.th/oeao_th/news/news_body.html)

**TABLE 3: Top ten destinations among male and female overseas migrants, 2010**

Male		Female	
Taiwan	29,477	Taiwan	5,540
Singapore	12,264	Hong Kong	2,929
South Korea	8,869	Japan	2,043
Libya	8,087	South Korea	1,225
Israel	7,655	Malaysia	1,163
UAE	7,409	USA	1,051
Qatar	5,945	UAE	899
Japan	4,059	Bahrain	619
Brunei	3,148	Brunei	577
Sweden	2,913	Israel	481

Adapted from <http://www.overseas.doe.go.th>

Table 4 indicates that around one third of overseas Thai workers hold skilled jobs in the business sector while approximately a quarter of them are employed in factories. Men tend to dominate employment in these sectors, while women are employed mainly in the service and technical job sectors.

**TABLE 4: Occupation of Thai overseas workers in 2007**

Type of occupation	Number of undocumented Thai workers			percent		
	Male	Female	Total	Male	Female	Total
Skill labour in business	51,345	3,578	54,923	37.23	14.91	33.92
Elementary job	36,696	3,142	39,838	26.61	13.09	24.60
Factory worker	31,402	5,225	36,627	22.77	21.78	22.62
Service job	5,979	7,342	13,321	4.34	30.60	8.23
Technical job	2,647	2,497	5,144	1.92	10.41	3.18
Professional	3,345	801	4,146	2.43	3.34	2.56
Skill labour in agricultural sector	3,944	297	4,241	2.86	1.24	2.62
Legislative work/Senior government official/Manager	1,448	471	1,919	1.05	1.96	1.19
Clerical staff	1,116	642	1,758	0.81	2.68	1.09
Total	137,922	23,995	161,917	100.00	100.00	100.00

Adapted from [http://www.overseas.doe.go.th/oeao\\_th/news/news\\_body.html](http://www.overseas.doe.go.th/oeao_th/news/news_body.html)

## II. STUDY SITES: Methods of Selection

Two provinces, *Udon Thani* and *Lampang*, were selected as study sites for the CHAMPSEA study. There were two main criteria in selecting the study sites. The first was identifying the region with the highest number of out-migrants so as to increase the probability of meeting the survey quota of eligible households within a limited time frame. The second criterion was that the two sites should be diverse in terms of geographical location so as to capture their differential impacts on the outcomes of parental migration on the health and well-being of children. For more than three decades, the province of Udon Thani has been ranked first in terms of sending workers abroad. It is located in the Northeast, which is the least prosperous region in Thailand. Lampang, despite ranking eighth (in terms of wealth) among all the provinces, is the top province within the Northern region in terms of sending workers overseas (see Table 5 and Map of Thailand).

**TABLE 5: Top-ten sending provinces for overseas Thai migrants**

	Region	Male	Female	Total
1. Udon Thani	Northeast	18,326	2,208	20,534
2. Nakhonratchasima	Northeast	12,912	1,858	14,770
3. Khonkaen	Northeast	4,584	447	5,031
4. Chaiyapoom	Northeast	7,941	900	8,841
5. Nongkhai	Northeast	6,614	838	7,452
6. Buriram	Northeast	6,310	880	7,190
7. BKK	Central	4,375	2,810	7,185
8. Lampang	North	5,594	441	6,035
9. Nakhonpanon	Northeast	5,295	473	5,768
10. Sakonnakon	Northeast	4,894	629	5,523

Adapted from [http://www.overseas.doe.go.th/oeao\\_th/news/news\\_body.html](http://www.overseas.doe.go.th/oeao_th/news/news_body.html)

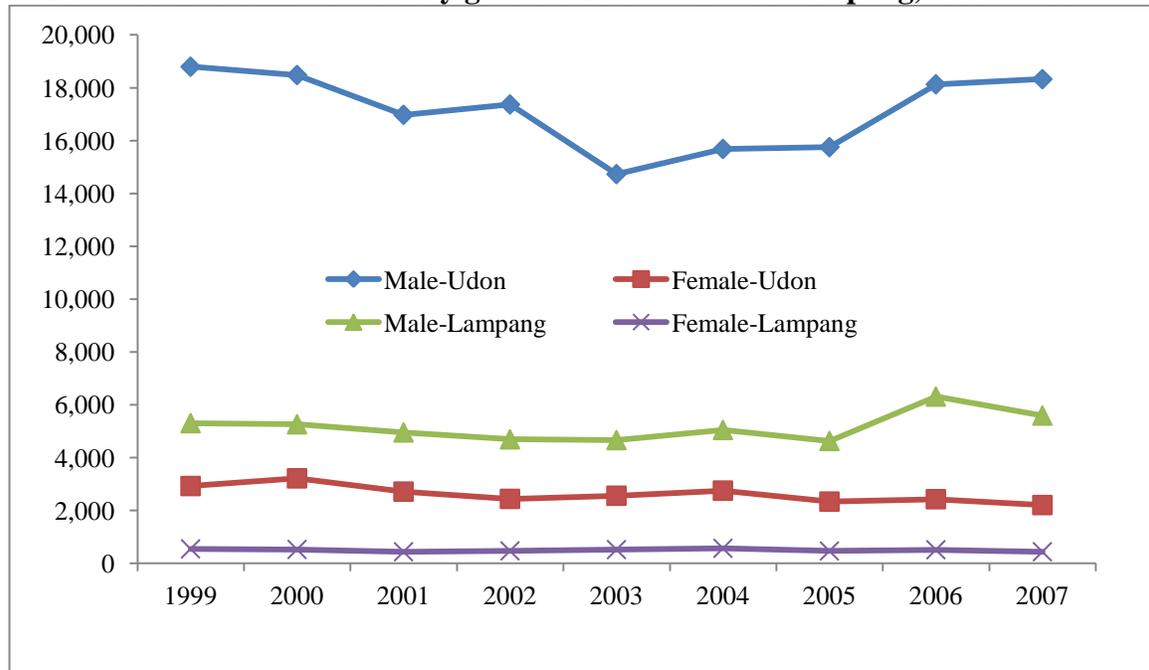
**FIGURE 4: Map of Thailand**



In view of a limited timeframe and budget, fulfilling the quota sample in Thailand based on the two main eligibility criteria of parents' migration status and children's age, was a relatively challenging task. This was the result of at least two main reasons. First, Thailand is not a major migrant sending country compared with other countries in Southeast Asia. Second, Thailand has experienced a persistent trend of relatively low fertility rates. Therefore, there are not many children of a certain age with parents of a certain migration status. To overcome these unfavourable conditions, we therefore tried to increase the chances of finding eligible households as much as possible. To ensure that we would have enough eligible cases within each selected province, we selected a district (a lower administrative level within a province) in both provinces that had the highest number of overseas workers. In Udon Thani, the Nonghan district has the highest number of migrants working abroad, and in Lampang, this would be Theon. Within each selected district, we started the survey in the sub-district with the highest number of migrants abroad, and then moved on to the next highest sub-district and so on, until the quota was met.

Due to the nature of overseas migration in Thailand, another difficulty was finding target children in the study provinces whose mothers are overseas migrant workers. Since migrants abroad are disproportionately male, finding eligible households with female household members abroad, especially those with children younger than 12 years of age is expectedly difficult. Figure 4 shows the gender proportion of international out-migrants in Udon Thani and Lampang between 1999 and 2007. While the number of male migrants has tended to fluctuate, especially among male migrants in Udon Thani, the number of female migrants has remained persistently low throughout the years in both provinces. Observations from the community interviews as well as in-depth interviews with left-behind families (Jampaklay et al. 2011) reveal the general perception that mothers would care for children household needs better than fathers. Regardless of skill, it is also the father's preference to be the main breadwinner rather than caring for their children and the day-to-day needs of the household. Responses from the in-depth interviews also reveal the inferior status of women in the household as they need their husband's permission before they are allowed to work, especially when it pertains to overseas work. This may reflect a gender-stratified social structure whereby men are generally expected to work while women remained at home to care for the children. So, if women want to work (which is not a primary role that women are socially expected to take on) they need to obtain permission from their husbands. It should be made clear, however, that this unequal perception of women's work seems to be limited to working abroad, which often involves long distance and a lengthy duration away from home and children. Local work as well as work in other settings outside the home origin are considered common and have no constraints (Jampaklay et al. 2011).

**FIGURE 5: Overseas workers by gender: Udon Thani & Lampang, 1999 – 2007**



*Type of community (A/B)*

One of CHAMPSEA’s hypotheses is concerned with the contextual effects of the target child’s local community. The study distinguishes between two types of communities. Community A refers to communities where international out-migration is relatively well established and has been ongoing for some time. In contrast, Community B includes communities where out-migration is a relatively recent phenomenon. In Thailand however, there is no clear difference between these two types of communities. Although it is clear that working abroad first became popular among Thai workers from Udon Thani, interviews with community leaders revealed that Lampang also began sending migrants abroad at around the same period of time. The difference between them may lie in the overall magnitude of workers going abroad, where the number of out-migrants from Udon Thani is greater than that from Lampang. Therefore, Community A and B in the Thai context may be distinguished in terms of the magnitude of workers, rather than the duration of migration history.

**III. ORGANIZATION OF THE FIELDWORK**

We conducted the fieldwork in Udon Thani and Lampang using different teams of supervisors and interviewers. There were three training sessions altogether for the fieldwork teams; one training session for supervisors and two training sessions for interviewers. For all the supervisors assigned to each province, a three-day training workshop was conducted at IPSR (6 to8 May, 2008) about a week before the fieldwork started. For interviewers, two five-day training workshops were organized separately. One was for interviewers in Udon Thani and the other for those in Lampang. The training

sessions were conducted at each study site in collaboration with local health offices. The training venue in Udon Thani was a health center while the training in Lampang was conducted at the district hospital. One day of field practice was included for each interviewer's training. Staff members at the health center and hospital also helped to coordinate practice interviews with the households.

After the training sessions in each province, interviewers had one day off before the actual survey began. The fieldwork for Udon Thani was conducted between mid-May and end of June 2008. We started the fieldwork in Lampang two weeks after Udon Thani, i.e. from the beginning of June to the end of July 2008. In each province, ten interviewers and two supervisors participated in the fieldwork. In terms of gender distribution, these were equally divided amongst the two pairs of supervisors in each province. This was not the case for interviewers, especially across the two study sites. Interviewers in Udon Thani comprised of two males and eight females, while there were six male and four female interviewers in Lampang. Gender was not listed as a specific requirement for recruiting interviewers and we did not encounter any issues with the unequal gender distribution amongst the interviewers.

The two supervisors in each team shared responsibilities which included assigning eligible households for the interviewing team to conduct each day, checking completed questionnaires, as well as being in charge of overall monitoring and logistics work (e.g. transportation and accounting). Interviewers worked in pairs and each pair was expected to complete four household interviews each day.

Data entry was carried out at the IPSR office. The process started immediately after the fieldwork in Udon Thani was completed (the end of June 2008). A full-day training workshop was conducted for four data entry clerks. Two were supervisors from Udon Thani and the other two were newly recruited staff. Before entering the data, supervisors from Udon Thani were responsible for coding open-ended questions, especially the "occupation" code. While waiting for the code, the other two data entry clerks entered data from screening forms compiled from both provinces. After coding and entering data from the forms, the two supervisors working in Udon Thani entered data for Udon Thani (version 1 and version 2), while the new staff were in charge of the data from Lampang. The data entry process and initial data cleaning took approximately two months (July and August 2008).

We identified a problem with this data entry process. As mentioned, we employed two data entry clerks who were not involved in the fieldwork. This strategy was intended to avoid having to wait for the Lampang fieldwork to be completed but eventually resulted in more disadvantages than advantages. We found that the new data entry clerks who were IPSR interviewers in other research projects wrongly assumed their previous experiences into our project and changed code 88 (as refer to inapplicable) to 77 without consulting the researchers. We needed to re-check all the questionnaires and change the codes back to the original. As a result, data cleaning for Lampang took a longer time than it did for Udon Thani.

## IV. PROVINCE REPORT

### Udon Thani

#### A. Geography: location of province within the country

Udon Thani is a province in the Northeast covering an area of 11,730 square kilometers, and is located 564 kilometers from Bangkok. It is one of the prime business centers of the Northeast, also known as Isan. Udon Thani is where the world heritage site for the prehistoric culture of Ban Chiang is located. Furthermore, Udon Thani is probably best known for its archaeological wonders, particularly the hamlet of Ban Chiang where the world's first Bronze Age civilization is believed to have flourished more than 5,000 years ago. Today, Udon Thani is the transportation and communications hub of the upper Northeast with several tourist destinations and facilities.

The province borders Nong Khai to the north, Khon Kaen to the south, Sakon Nakhon to the east and Nongbualamphu and Loei to the west. The province is located on a plateau which is approximately 187 metres above sea level. Most of its areas are covered with rice fields, forests and hills, with the Phu Pan mountain ranges and the Songkhram River being the province's two main sources for natural resources.

**FIGURE 6: Map of Udon Thai Province**



In terms of demography, the percentage of population living in urban areas (defined as municipal areas), as of 2009 is 32.0 percent (NSO Udonthani, n.d. ) The percentage of population under the age of 15 is 22 percent, while those aged between 15 to 59 years, and those aged 60 years older are 69 percent, and 9 percent, respectively (see Table 6). The population age distribution in Nonghan is not too different from the overall demographic structure of Udon Thani. The median age of the total population in Udon Thani is 30.6 years. Almost everyone (99 percent of population) is affiliated to Buddhism.

**TABLE 6: Registered population of Udon Thani Province and Nonghan District (as of December 31, 2007)**

Age group	Udon Thani Province				Nonghan District			
	Male		Female		Male		Female	
<15	167,782	(22.4)	159,633	(21.2)	10,746	(22.6)	10,279	(21.9)
15 – 59	521,926	(69.6)	520,021	(69.1)	33,263	(70.1)	32,414	(69.1)
60+	60,605	(8.1)	72,902	(9.7)	3,455	(7.3)	4,206	(9.0)
Total	750,313	(100.0)	752,556	(100.0)	47,464	(100.0)	46,899	(100.0)

Note: 1. Only Thai nationals and those listed in the household roster are included  
 2. Numbers included in parentheses denote percentages.

Source: Department of Provincial Administration, Ministry of Interior (<http://www.dopa.go.th>)

#### B. Site location

Udon Thani is divided into 20 administrative districts. The district where our study sites were located is Nong Han (see Map of Udon Thani shown above), which is about 35 kilometers away from Meouang district or the provincial capital. There are 12 sub-districts in Nong Han. As mentioned earlier, the fieldwork had surveyed four sub-districts with the highest proportion of out-migration in order to meet the quota: Nong Meg, Phang Gnu, Sabaeng, and Nong Pai. There are 20 villages in Nong Meg, 15 in Phang Ngu, 9 in Sabaeng, and 11 in Nong Pai.

The study sites follow the administrative hierarchy system as shown in Appendix 1 (Table A1).

#### C. Provincial policy context

As there is no written documentation that discusses policy on international migration at the provincial level, we can therefore assume that the province follows policies and plans that are at the national level.

#### D. Highlights of Community Profile Interviews

##### 1. *Main Economic Activities*

The main livelihood activity among locals in Udon Thani (comprising of approximately 81 percent of the population) is agriculture, although more people have also been

increasingly involved in wholesale and retail trading activities(NSO Udonthani. n.d.)). In fact, Udon Thani serves as an agricultural hub for neighboring provinces around the area. The main economic crop is rice. Other plantation crops include sugarcane, eucalyptus, rubber trees and vegetables. According to some community leaders, the number of households involved in rice cultivation has increased over the last two years. Many of them grow rice for their own household consumption needs rather than for sale. The number of households planting rubber trees, which was introduced to the area only a few years ago, has also been increasing. In Sabaeng economic crops other than rice have been grown for only 4 to 5 years. Households that grow other crops usually cultivate them together with rice. Apart from agriculture, people are also employed in the construction sector as contractors and workers. There are no industrial activities in the study communities.

## 2. *Major Social Issues*

According to community leaders, the absence of migrant parents has been raised as a major social concern for the well-being of young people who are mostly cared for by their grandparents (*conversations with members of Panngu SAO and Nongmeg SAO on May 17, 2008*). Grandparents are perceived as being unable to control the children of migrant parents, especially when both parents are away. Lack of parental supervision is perceived as a main cause of youth delinquency, and deviant behaviour among adolescents, especially among those of overseas migrant parents, can be observed. Reportedly, remittances from migrant parents tend to spoil the children as they have money to buy material goods, such as cell phones. As children of migrant parents are generally perceived to be more vulnerable to cases of deviant behaviour, it was raised that parents working abroad may lead to a deterioration of the social fabric of society in terms of family relationships, and children's upbringing (*a conversation with Head of Sabang sub-district and Head of Sa Baeng SAO*).

Early marriages among adolescents were also mentioned as a cause for social concern (*a conversation with members of Panngu SAO*). Another problem raised by community leaders pertains to cases of failed migration which, in most cases, results in household indebtedness instead of improved economic circumstances. Failed migration, according to community leaders, is generally a result of being cheated by informal rogue agents (*a conversation with members of Nong Meg SAO*).

## 3. *International Labour Migration*

Udon Thani has been known as a major sending area for Thai migrants abroad. The Vietnam War transformed the sleepy provincial city of Udon Thani into a booming support center for a nearby American airbase. The establishment of the airbase created job opportunities for the locals as skilled and non-skilled workers. The withdrawal of the American troops in 1976 took away jobs for many local men. For many who were once employed at the airbase with decent salaries, returning to work in the rice fields was not a comfortable choice. Given the geographical nature of the area which is infertile and often experience drought, it is difficult for the population to make a living from agricultural work, and most households grow rice only once a year. When there was a heavy demand for experienced workers in the construction industry based in Middle Eastern countries,

these unemployed workers were not reluctant to fill in the vacancies, and contacts were made via the Thai government. Thai migrant workers in the Middle East were usually well paid, especially those among the initial waves of workers. Success stories spread quickly throughout the province and its neighbors, which eventually attracted increasing numbers of workers aspiring to make a fortune.

The demand for workers was mostly in the construction sector, which meant that migrants were disproportionately male. As the trend of women seeking work abroad is a recent phenomenon, their numbers have remained relatively small. Majority of these women are employed in factory work, especially in countries such as South Korea and Taiwan. In general, households of international migrants seem relatively better off and are more economically sufficient in terms of material possessions. Although there are cases of failed migration, success stories are more evident. The improved economic outlook of THs became a motivating factor for their neighbours who look upon them as role models. A culture of migration sets in as parents expect their children to work overseas and remit, and they would try their best for their children to get a job in other countries. Young people in turn look forward to the end of school life as they anticipate their chances to go abroad.

According to the community leaders interviewed, overseas migration constitutes the main economic activity in Udon Thani as about 60 percent of community residents depend on it (*a conversation with a member of Panngu SAO on May 17, 2008*). Trends of international migration are perceived to be on the rise. In some cases, return migrants have even resorted to revising their travel and work documents (e.g. adopting new names) in order to be able to go back again. This practice stems from the specific labour policies of some countries that permit an overseas worker to be hired only once on a single contract term. The district office (where people go to be issued a new name) is now stricter about issuing new names, but others may go back using a visitor's visa.

Popular destinations include Israel, Korea, Taiwan, and Singapore. The contract duration for working in Israel is five years, while it is six years for Korea. Employment for Thai migrants in Israel is usually related to agriculture, such as flower or tomato farming, or handling animals such as cows or ostriches. Migrants to Korea tend to work in factories, e.g. in the electronics sector (*Panngu*).

The proportion of males going abroad is 60 to 70 percent (*Panngu, Sa Baeng, Nong Meg*). In Sa Baeng, community leaders shared that women who go abroad are usually those who were previously divorced and subsequently moved. A very small number of single women go abroad. There are also women who married foreigners, especially Germans, and end up going abroad (*Sa Baeng*). More married people go abroad for work as compared to their single counterparts, as they have the responsibility to make a living for their family (*Panngu, Sa Baeng*). However, there are some singles who also go abroad in order to earn money for their dowry (*Panngu*). For migrant families, it is usually the fathers who go abroad while mothers stay at home to take care of their children. The percentage of households where both parents go abroad is small. In the sub-district of Panngu, for example, their numbers constitute less than 20 percent.

Most migrants prefer to use private recruitment agencies over the Ministry of Labour (*Panngu*) since there is a limited quota of workers enforced by the Ministry of Labour's clientele. In view of the large number of applications received, only a few are able to be approved, which compels people to turn to private recruiting companies instead (*Panngu*).

#### 4. *Health and Education*

From the community profile interviews, we did not acquire a sense that there were perceived differences in terms of the levels of health and education between the children of migrants and children of stay-home parents. There is no special health service which caters to the children or family members of migrants. However, as children of migrant parents are mostly cared for by their grandmothers, health officers have mentioned that any instruction about healthcare for small children needed to be clear and easy for elderly persons to remember or follow (*Panngu*). In terms of education, there are also no special programmes set up for the children of migrants in any school. Children of international migrants are, in fact, perceived as being financially better off than children of stay-home parents or internal migrants (*Panngu*). In some communities, interviewed leaders are most concerned about the children of internal migrants in terms of financial status, since this will have significant impacts on their academic opportunities (*Panngu*).

Children of migrants were not reported as having observably different levels of health status than those with stay-home parents. Some community leaders commented, however, that the children of internal migrants tended to be less aggressive and have a lower risk of being involved with risk behaviour (e.g. drug use, premarital sex) than those with parents overseas since they get to see their parents more often (*Sa Baeng*). Some health officers also observed that the wives of overseas migrant husbands tended to be more depressed than their counterparts, especially during the initial period after their husband's departure (*Panngu*).

Most community leaders viewed international migration in a positive way and felt that the benefits outweighed the negative consequences cited by some. Those who were optimistic tended to be those who were once migrants themselves or currently have family members working abroad. Community leaders who emphasised the negative influences of parental migration on children's well-being were often government officers, who usually had no need to seek a better living overseas.

#### 5. *NGOs & Community/Civil Society Organizations*

There were no NGOs or Community/Civil Society Organizations found in this study site.

## Lampang

### A. Geography: location of province within the country

Famous for its horse-drawn carriages and having a rooster as its provincial emblem, Lampang boasts a long history of human settlement along the Wang River basin. The lands are rich with archaeological evidence from the ancient civilizations of Hariphunchai, Lanna and Burma, some of which dates back more than 1,000 years.

Lampang borders Chiangrai and Payao to the north, Sukhothai and Taak to the south, Pae to the east, and Chiangmai and Lamphoon to the west. Covering an area of 12,533 square kilometers, the province is surrounded by highly mountainous areas. Some parts on the west have granite ranges on Pee Pan Nam Mountain. Lampang provides Thailand's main source of petroleum and lignite, especially the Mae Moe district located at the central area of the province. With the Wang River traversing through the districts of Mae Prik, Theoun and parts of Sob Praab, this area is quite fertile and thus suitable for agricultural activity. Other districts consist of plateaus, mountainous areas and forests where Lampang's primary water resources are drawn from.

The weather in Lampang is tropical, i.e. hot and humid, with seasonal variations. Lampang has a long hot summer but tends to get very cold during the winter.

Some demographic data are as follows (Department of Provincial Administration, n.d.) (The proportion of the population living in urban areas is 28 percent. In terms of age distribution, the proportion of population under age 15 is 16 percent, whilst those between ages 15 to 59, and 60 and older are 70 percent, and 14 percent respectively. The median age is 37.1. The age structure of the population in Theoun district is generally similar to the overall population of the province.

**TABLE 7: Registered population of Lampang Province and Thoen District, as of December 31, 2007**

Age group	Lampang Province				Thoen District			
	Male		Female		Male		Female	
<15	63,343	(16.9)	60,208	(15.6)	3,057	(17.2)	2,819	(15.9)
15 – 59	262,953	(70.1)	269,032	(69.8)	12,113	(68.2)	12,078	(68.0)
60+	48,782	(13.0)	56,292	(14.6)	2,579	(14.5)	2,852	(16.1)
Total	375,078	(100.0)	385,532	(100.0)	47,464	(100.0)	46,899	(100.0)

Note: 1. Only Thai nationals and listed in household roster included

2. Numbers in parentheses are percentage.

Source: Department of Provincial Administration, Ministry of Interior (<http://www.dopa.go.th>)

### B. Site location

Lampang is administratively divided into 13 districts, 100 sub-districts and 912 villages. The selected study district is Theoun, which has the highest percentage of overseas labour migration in Lampang. The district is about 96 kilometers away from the provincial

capital. There are eight sub-districts with 95 villages. The population of Theoun is 62,405. Within Theoun, seven sub-districts were surveyed in order to complete the quota, namely Lom Raed, Theoun Buri, Na Pong, Mae Tod, Mae Pa, Mae Wa, and Vieng Mok. Further details of the study sites in Lampang can be found in Appendix 1 (Table A2).

### C. Provincial policy context

Similar to Udon Thani, there are no policy documents on international migration at the provincial level. There is, however, an official report that provides information on some government projects that deal with skills training for the working-age population in Lampang (Lampang Office of Labor Protection and Welfare. n.d.). These projects are probably the result of a nation-wide policy that addresses the skill development of Thai people within the working age. Various types of skills training typically include occupational skills relevant to the art industry, business service, and construction sector (Lampang Office of Labor Protection and Welfare. n.d.).

### D. Highlights of Community Profile Interviews

#### 1. *Main Economic Activities*

About a third of the Lampang's population is involved in agricultural activities (Lampang Office of Labor Protection and Welfare. n.d.). In addition to agriculture, the household industry also provides a main source of income for the population in Lampang, which includes the production of rice snacks, making flower ornaments, dress-making and weaving. For students finishing secondary school, community studies indicate that there are few job opportunities for them within the community. Factory work is generally unavailable and people usually do not have enough money to invest in setting up their own businesses. For working-age individuals who are unable to find a job within the province, they would either move to other provinces or abroad. International migration and internal migration, especially to major cities in the east coast of Thailand, are thus very common, which in turn eases the local unemployment rate. Those villagers seen as doing nothing are in fact taking a break or are between contracts (*Mae Wa*).

#### 2. *Major Social Issues*

Most communities raise the issue of youth delinquency as a major social problem, especially fighting amongst youth from different communities during the annual festivals (*Mae Wa*). In addition, the high prevalence of broken families due to early marriages is also a concern in some study communities (*Vieng Mok*). This results in many children having parents who are divorced or separated, which makes them vulnerable to various forms of deviant behavior, such as smoking and drinking.

Children's lack of supervision as a result of parental migration was also cited as a concern. According to some community leaders (*Mae Wa, Lom Raed, Na Pong*), leaving children behind in the care of grandparents may place them at risk of developing health problems as well as deviant forms of behavior encouraged by easy access to money from their migrant parents' remittances. Teenagers from broken families who live

separately from their parents (usually in a dormitory) are also generally viewed as being highly at risk of engaging in deviant types of behavior (*Na Pong*).

There are some community leaders (*Theoun Buri, Mae Tod*), however, who view migration, especially overseas migration, in positive light. One community leader (*Theoun Buri*) stated that although overseas migration results in families living apart, benefits accrued from the expected remittances far outweigh the negative consequences, and families eventually get used to it, just like internal migration. Moreover, modern communication helps mitigate the difficulties of living apart. According to the community leader in Theoun Buri, stay-behind parents (usually the mother) often obtain support from other family members in caring for household needs and children left behind. Another community leader also stated that the wellbeing of left-behind children are usually in good shape so long as the main caregiver is their mother (*Mae Tod*).

### 3. *International Labour Migration*

We were informed that communities in the study district are experienced in crafting and artisanal skills, which are generally transferred from generation to generation. This was considered a reason behind the why there is such a high demand for workers in the construction industry amongst community residents in the working age. Their distinguished skills facilitate both domestic and overseas employment, which has resulted in a high prevalence of labour migration from this district in particular.

The first group of people from the community went abroad in 1975. These pioneers were from the Theoun Buri sub-district, which is the highest sending community in Theoun. They found work through agents who came from Bangkok to their communities. Similar to other major migrant source-regions, overseas migrants returning with high incomes became the main motivation for others in the community to emulate. Bigger houses and other material assets including pick-ups are concrete evidence of the wealth and success that came with overseas migration. Chain migration sets in, which continues to proliferate over time. Major destinations include countries in Africa, Taiwan, South Korea, Brunei, Libya, Qatar, Kuwait, UAE, Saudi Arabia, and Oman (*Mae Wa, Theoun Buri, Lom Raed, Mae Tod, Na Pong*).

According to the community leaders, about one fourth of the community's population are overseas migrants (*Mae Wa*). Around half of them are undocumented and about 10-20 percent are women (*Mae Wa, Theoun Buri*). Most overseas migrants are married. For married couples, it is typically the men who go abroad, while in some cases, both parents go abroad, leaving their children in the care of their grandparents. Some single migrants also get married to locals in their respective destination countries (*Mae Wa, Theoun Buri*).

Most migrants send cash remittances to their families back home through banking services. Remittances are generally used for children's education and housing renovation, and these remittances clearly improve the left-behind family's living conditions in terms of material possessions. The children of migrants, for example, are able to own a personal computer, which partly helps in their school work (*Na Pong*). However, community leaders noted that not all migrants remit. Some have also noted the benefits of remittances

on the community's welfare, especially with contributions to the renovation or improvement of Buddhist temples or donations to cover the expenses of religious affairs (*Mae Tod, Na Pong*).

Some incidences of unfavorable behavior among children of migrant fathers were raised, for example skipping school and the use of drugs (*Lom Raed, Na Pong*). A school principal (*Lom Raed*) commented that these children often place a burden on the schools. Some mothers are overprotective and hide their children's unfavourable behaviour from their migrant fathers. In many cases, however, the problem can often be solved quite easily when identified earlier. Issues stemming from broken family environments due to parental migration were also mentioned. The root causes seem to be economic-related as families become indebted as a result of the exorbitant placement costs needed for overseas work (*Lom Raed*).

Although overseas remittances often contribute substantially to a migrant family's household finances and can thereby be seen as a major benefit, there are also negative impacts that stem from having more money. For example, it has been mentioned that left-behind wives often change their consumption behaviours and are more likely to spend on material possessions (*Lom Raed*).

#### 4. *Health and Education*

The sub-district health centers function as the central health service for study communities. Major health problems in this province include diabetes and hypertension. Another health (and social) problem is HIV/AIDS, especially amongst children of parents diagnosed with HIV/AIDS. A high number of these children were mentioned in some study communities (*Na Pong and Vieng Mok*).

No significant comments were gathered concerning the difference between children of migrants and of non-migrants in terms of health and education. The majority of people in the community go to the health center, or district hospital for more serious illnesses. The health center, district hospital, and provincial hospital provide free services, although their services and facilities might not be as advanced and efficient as private hospitals. People have commented, however, that migrant families, often viewed as being more financially well off, were more likely to take advantage of the greater variety of health services offered in town than non-migrant families (*Mae Tod*).

As education is compulsory, all children finishing primary school must move on to middle school, after which the majority of middle school children will continue with high school. However, according to a school principal, only about 10 percent of high school children enter college (*Lom Raed, Na Pong*). Most concerns about levels of inequality in education stem from issues related to poverty and broken families. According to some interviewed leaders, girls tend to be more academically successful than boys (*Lom Raed, Na Pong*).

5. *NGOs & Community/Civil Society Organizations*

There were no NGOs targeting migrants and their families in the study district. The local organization in charge of the general welfare and development of the community including overseas migrants is the Sub-district Administrative Office. It was mentioned, for example, that information about migrants who were cheated by private agencies is conveyed to community residents through the heads of the sub-district and village headmen via several public relation channels.

**V. CONDUCT OF THE FIELDWORK/SURVEY PROCESS**

A. Sampling:

1. Sampling targets and actual numbers completed (Table 8)

**TABLE 8: CHAMPSEA sample for Thailand**

**Udon Thani province: Transnational households**

	<u>Collected</u> (a)	<u>CHAMPSEA</u> quota		<u>Difference (a)-(b)</u> (d)	<u>Difference (a)-(c)</u> (e)
		(b)	(c)		
		<u>Max</u>	<u>Min</u>		
Female 3-5 years	69	83	63	-14	6
Male 3-5 years	66	83	63	-17	3
Female 9-11 years	65	83	63	-18	2
Male 9-11 years	64	83	63	-19	1
Total	264				

**Udon Thani province: Non-migrant households**

	<u>Collected</u> (a)	<u>CHAMPSEA</u> quota		<u>Difference (a)-(b)</u> (d)	<u>Difference (a)-(c)</u> (e)
		(b)	(c)		
		<u>Min</u>	<u>Max</u>		
Female 3-5 years	65	42	62	23	3
Male 3-5 years	65	42	62	23	3
Female 9-11 years	65	42	62	23	3
Male 9-11 years	65	42	62	23	3
Total	260				

*Overall total sample for*

*Udon Thani:* 524

**Lampang province: Transnational households**

	<u>Collected</u> (a)	<u>CHAMPSEA</u> quota		<u>Difference (a)-(b)</u> (d) <u>Max</u>	<u>Difference (a)-(c)</u> (e) <u>Min</u>
		(b)	(c)		
		<u>Max</u>	<u>Min</u>		
Female 3-5 years	51	83	63	-32	-12
Male 3-5 years	69	83	63	-14	6
Female 9-11 years	69	83	63	-14	6
Male 9-11 years	66	83	63	-17	3
Total	255				

**Lampang: Non-migrant households**

	<u>Collected</u> (a)	<u>CHAMPSEA</u> quota		<u>Difference (a)-(b)</u> (d)	<u>Difference (a)-(c)</u> (e)
		(b)	(c)		
		<u>Min</u>	<u>Max</u>		
Female 3-5 years	62	42	62	20	0
Male 3-5 years	62	42	62	20	0
Female 9-11 years	63	42	62	21	1
Male 9-11 years	65	42	62	23	3
Total	252				

*Overall total sample for*

*Lampang:* 507

## 2. Sampling method

Before the actual data collection, researchers conducted a screening test of eligible households by collecting information from the sub-district health centers where a list of households (including all members) in their respective villages is usually updated. Going through each household on the list, we then verified with both the staff of the health center and health volunteers for each village whether the household is eligible for interview. Information from the household folders was recorded on the screening forms for the survey. Although we recorded only eligible households during the screening process (according to information from the mentioned sources), not every household recorded on the screening form turned out to be eligible when approached during the actual survey. The majority of them were useful, nonetheless.

## 3. When the household screening occurred

The screening process was conducted between 20 and 23 April, 2008 for Udon Thani and between 27 and 30 April, 2008 for Lampang. This was about 3 weeks before the actual fieldwork took place. We also informed community leaders about the project and actual fieldwork during the screening process.

## 4. Use of the household screening form

For details, please refer to Section 2 “Sampling method”.

5. Meeting sample quotas: Major successes and challenges

Challenges faced with meeting the quota sample were derived from the fact that Thailand was a relatively minor migrant-sending country with low fertility rates. In view of these obstacles, the team's ability to meet the quota within a limited timeframe and budget was deemed as a major success. Help received from community leaders, health center staff, and Village Health Volunteers (VHVs) was greatly appreciated and was the major contributing factor to the success of the fieldwork. As noted earlier, community leaders, staff members at the health center, and VHVs, in particular, were involved in the fieldwork process since the screening of eligible households. In the actual fieldwork, the VHVs acted as a main contact point between interviewers and eligible respondents, especially at the stage of introducing the field team to people in the study villages.

The major challenge of fulfilling quotas, especially those of THs, is simply due to the fact that there are not enough qualifying cases. In each study village, things were fine at the beginning. Households listed in the screening forms were usually qualified and available for interview. As the days passed, however, identifying and reaching eligible households progressively became more difficult. Interviewers walked for longer distances and took a longer time to find eligible households and respondents. Fieldwork administration was also made more complex as supervisors had to decide whether or not to send part of the interviewing team to the next village or stay together in the same village until every qualified household was interviewed. This decision needed to be made on a case-by-case basis, depending on many factors.

Another significant challenge was to meet mother-migrant households. As discussed earlier, overseas migration in Thailand is dominated predominantly by father-migrants, which poses a real challenge to finding households where only the mother is a migrant. Although we surveyed all eligible households in the study villages, we ended up having only 3 mother-migrant households.

B. Survey Recruitment

**Table 9: Distribution of eligible households**

Distribution of eligible Households	
Total Eligible Households	1,486
Qualified Households	1,032
Non-Qualified Households	455
Refusals	1
Withdrawals during Interview	0
Households included in Study	1,030

1. Unanticipated problems in recruitment, subject withdrawals and complaints about the research (from subjects):

Fortunately, most of the eligible respondents were generally cooperative. This is in fact a unique feature amongst rural people, which is especially true in the case of people in the

N-eastern area. According to field supervisors, however, there were several people from these households who questioned about the CHAMPSEA project, and they needed to interfere and offer an explanation.

A field worker also found a left-behind wife who showed symptoms of depression. She was a mother of an older child in our study. The supervisor then contacted the health center in charge of the village she was living in, and learned that she had already been taken care of by staff members of the health center.

2. Report of any serious adverse events involving risks to subjects or CHAMPSEA staff

No serious adverse events occurred.

C. Interviews

➤ Average number of completed interviews per day

As noted earlier, there were a total of 1,030 households included in the survey. In Udon Thani, we completed 524 households within 45 days, using five pairs of interviewers, which meant that the average number of households completed per day was 2.3 households. In Lampang, 506 households were interviewed within 60 days, using five pairs of interviewers as well. The average number of households completed per day was 1.7. It should be noted that the number of households completed was about 4 per day at the beginning of each study village, and gradually became lower as fewer eligible households were left. As such the average number of two households per day was not indicative of the team's maximum interviewing capacity but rather due to the limited number of qualifying households in the study community.

➤ Overall d of field period by province

The duration of the fieldwork was two and a half months. We took a month and a half for Udon Thani and two months for Lampang, with the fieldwork at Lampang starting about two weeks later than Udon Thani. F in Lampang took about two weeks longer than in Udon Thani. The main reason for this was that there was a smaller pool of migrants abroad in Lampang as compared to Udon Thani. In addition, issues related to geographical location including other limiting factors may also account for the delay. For example, districts in Lampang are generally more spread out than those in Udon Thani. In order to complete the quota, the fieldwork team in Lampang surveyed a total of seven sub-districts from the eight sub-districts in Theoun, and travelling from one sub-district to another took time and money. In Udon Thani, however, only four sub-districts from twelve sub-districts in Nonghan were required to be surveyed before the quota was completed.

➤ Major successes and challenges of the interview process

Given our long questionnaire and the need to conduct multiple activities with several respondents, we considered the interview process to be generally a success as nobody withdrew during the interviews. We found that levels of cooperation were either good or excellent in some cases. This was aided by the fact that respondents were informed in advance by village headmen and village health volunteers during the recruiting stage.

In addition to the major challenge of finding eligible households, other challenges pertained to dealing with children, which included both young and older children. Interviewers needed to be careful and tactful not to let parents interfere with the activities or interview process too much whilst ensuring that parents can still keep an eye on their children. This required both skill and practice.

## **VI. CONCLUSION**

Overall, the fieldwork went smoothly even though the team encountered occasional challenges. We had quite a harmonious and hardworking fieldwork team, both in terms of the supervisors and interviewers, although a few of them were inexperienced. The sharing of experiences among interviewers and supervisors contributed to the success of the fieldwork. Hiring local fieldworkers in each study site also proved to be beneficial. Their familiarity with the local environment and dialects facilitated the survey a great deal, both in terms of the quality of the interviews and the administrative support. It should be noted again that the central reason for our success was the substantial cooperation amongst local organizations, village headmen, village health volunteers, and especially the eligible households.

## **PART 2: CHAMPSEA COUNTRY REPORT FINDINGS FROM THE QUANTITATIVE SURVEY**

### **1. HOUSEHOLD CHARACTERISTICS**

TABLE 1 shows a summary of household characteristics among eligible households. Overall, the percentages of households with one, two, and three or more children were 43.3 percent, 46.8 percent and 9.9 percent respectively. When classified according to household type, this distribution was slightly different between non-migrant and transnational households (THs). However, the difference was not significant.

Amongst eligible households, 21.5 percent were households where the TC had younger siblings. In non-migrant households and THs, the percentage was 21.7 and 21.4 respectively. For households where the TC had older siblings, the overall percentage was 48. The distribution of TC parity among non-migrant households and THs were not statistically different. These distributions were similar to what was found overall amongst the eligible households.

Regarding whether or not grandparents lived in the household, the data revealed that this was the case among 48.5 percent of households. The percentage of households with grandparents living in non-migrant households (46.4 percent) is somewhat lower than THs (50.5 percent). The difference was, however, not statistically significant.

A statistical difference between non-migrant and THs was found in the distribution of the number of adults (aged 15 and older) in the household. There was a higher percentage of non-migrant households with three or more adults than in THs, i.e. 60.7 percent as compared to 34.7 percent. There was no household with only a single adult. For THs, the percentage distribution amongst households with one, two, and three or more adults were approximately one-third each.

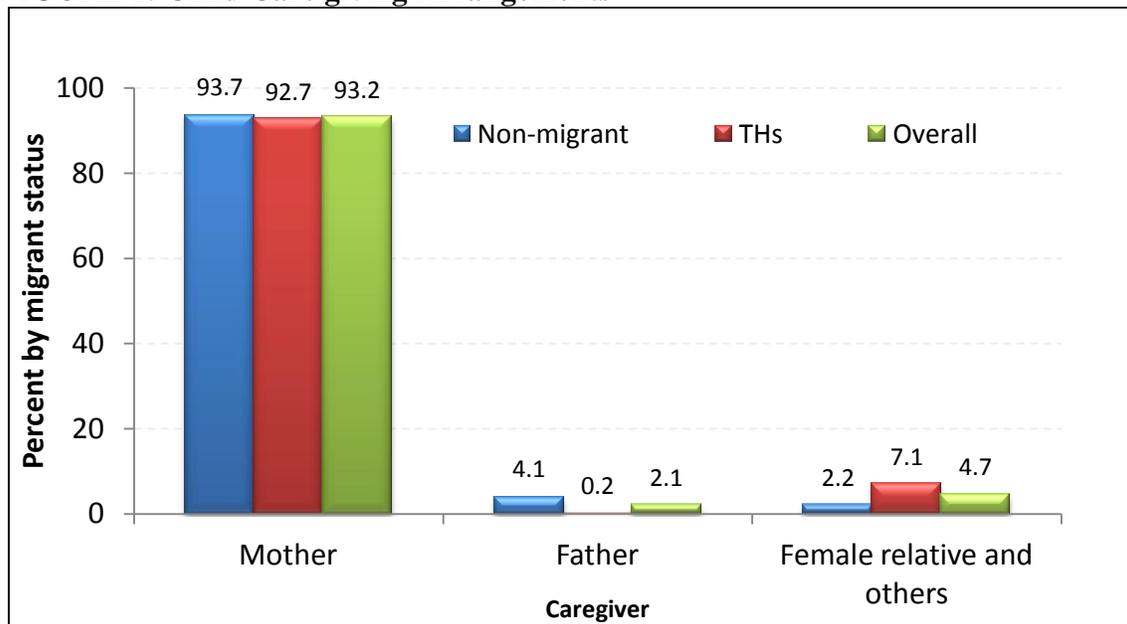
**TABLE 1: Summary of household characteristics**

Characteristics	Household by type of parent			Test statistic
	Non-migrant	Transnational	Overall	
Number of children in household				n.s.
One	43.1	43.5	43.3	
Two	48.1	45.5	46.8	
Three or more	8.8	11.0	9.9	
TC has younger siblings in household	21.7	21.4	21.5	n.s.
TC has older siblings in household	48.5	48.0	48.3	n.s.
TC parity*				n.s.
First	40.3	40.1	40.2	
Second	47.6	51.6	49.5	
Third	12.1	8.3	10.3	
Grandparent living in household	46.4	50.5	48.5	n.s.
Number of adults 15 and older in household				$\chi^2=205.1, p<.001$
One	0.0	32.2	16.2	
Two	39.3	33.1	36.2	
Three or more	60.7	34.7	47.6	

\*35 missing cases

Figure 1 shows the main care-giving arrangements for TCs. Almost all primary caregivers regardless of the type of household (i.e. non-migrant households and THs) were mothers (~93 percent). For non-migrant households, approximately 4 percent of caregivers were fathers whilst 2.2 percent comprised of a female relative or others. For THs, people who were responsible for childcare arrangements (apart from mothers) were primarily female relatives and others (7.1 percent).

**FIGURE 1: Child Care giving Arrangements**



Note: Other carers were all female relatives with exceptions of three close male relatives.

## 2. HOUSEHOLD RESOURCES (Bivariate by migration status)

In terms of household resources, target households were classified using a wealth index under three groups. Households in the first and second quintiles were defined as poor while those in the third and fourth quintiles were described as moderate. Conversely, households grouped within the fifth quintile were deemed as rich. Based on these definitions, 56 percent of non-migrant households were considered “poor”, whilst 30.3 percent and 13.7 percent of them were classified as “moderate” and “rich”. For THs, 48 percent of households were considered “poor”, whilst the percentage figure for the latter categories were 39.9 percent and 12.1 percent respectively. The data suggests that although the proportion of rich households is slightly lower among THs, there is a lower proportion of poor households among THs than in non-migrant households (48 percent vs. 56 percent). These differences in household wealth composition between non-migrant households and THs were statistically significant. (See TABLE 2)

In terms of household savings, the proportion of households with savings was slightly higher among non-migrant households (61.6 percent) than in THs (59 percent). This figure is, however, not statistically significant. (See TABLE 2)

**TABLE 2: Household resources**

Characteristics	Household by type of parent			Test statistic
	Non-migrant	Migrant parent	Overall	
Wealth				$\chi^2=10.3, p<.01$
First/second quintile	56.0	48.0	51.9	
Third/fourth quintile	30.3	39.9	35.2	
Fifth quintile	13.7	12.1	12.9	
Savings				n.s.
None	35.0	37.2	36.1	
Yes	61.6	59.0	60.3	
No response	3.3	3.8	3.6	
Total N	511	519		

Our survey also asked questions about remittances. Results showed that during the past six months prior to when the survey was conducted, the overall percentage of households receiving cash and goods from individuals living outside the household was 57.9 percent and 14.9 percent respectively. When classified according to household type, almost every TH had received cash (99.8 percent), whilst 16.6 percent received goods. These percentages were significantly lower amongst non-migrant households, especially in terms of money (15.3 percent), but not so much in terms of goods. (See TABLE 3)

**TABLE 3: Household remittances**

Characteristics	Household by type of parent			Test statistic
	Non-migrant	Transnational	Overall	
Cash from individual outside household	15.3	99.8	57.9	$\chi^2=754.8, p<.001$
Goods from individual outside household	13.3	16.6	14.9	n.s.
Total N	511	519		

### 3. PARENT CHARACTERISTICS

#### 3.1 Characteristics of parents in the interviewed households

When examining the characteristics of parents amongst eligible households, we focused mainly on differences in education levels and occupational types. In terms of the overall educational levels of TC's parents, the majority of mothers have attended primary or lower secondary school (81.0 percent), whilst 19.0 percent had upper secondary qualifications or higher. Between non-migrant households and THs, the percentage difference of mothers who had upper secondary qualifications or higher was 4.1 percent

higher among non-migrant households than in THs. These differences were not statistically significant (See TABLE 4).

TABLE 4 also reveals a similar trend in the percentage distribution of education levels amongst TC's fathers and mothers. For fathers, 81 percent had primary or lower secondary education, whilst 19 percent had upper secondary qualifications or higher. Furthermore, the percentage of fathers with upper secondary qualifications or higher was higher among non-migrant households (22.7 percent) than among THs (16.1 percent). These differences were statistically significant with a significance level of <0.01.

**TABLE 4: Parent's completed education**

Characteristics	Household by type of parent			Test statistic
	Non-migrant	Transnational	Overall	
Mother's education				n.s.
Primary or lower secondary	78.9	83.0	81.0	
Upper secondary or higher	21.1	17.0	19.0	
Father's education*				$\chi^2=7.3, p<.01$
Primary or lower secondary	77.3	83.9	80.6	
Upper secondary or higher	22.7	16.1	19.4	
Total N	511	519		

\*Two missing cases for father transnational households

Concerning the current occupation (i.e. at the time of the survey) of TC's parents, 48.1 percent of mothers worked in skilled agriculture, whilst 35.2 percent were employed in domestic/unskilled work, and 4.0 percent in semi-skilled work. 12.7 percent worked in other sectors. Amongst mothers in THs, the percentages of those working in domestic/unskilled, skilled agriculture, and semi-skilled jobs were slightly higher than those in non-migrant households. However, the percentage of mothers engaged in other occupations was much higher among non-migrant households (17.4 percent) than in THs (8.1 percent). The percentage distributions reflected in Table 5 are statistically significant.

The occupations ranked highest amongst TC fathers were skilled agriculture (48.3 percent), semi-skilled service/manufacturing (21.0 percent), and domestic/unskilled (19.3 percent). Fathers who worked in occupations apart from those classified under the four categories accounted for 11.4 percent of the overall figure. Percentage differences in types of current occupation amongst non-migrant households and THs were significantly different. In non-migrant households, fathers were most likely to be engaged in skilled agriculture (55.6 percent), jobs classified as "others" (18.2 percent), domestic/unskilled work (13.3 percent), manufacturing work (10.0 percent), followed by semi-skilled services (2.9 percent) respectively. For THs, the proportion of fathers working in domestic/unskilled work was 12 percent higher than in non-migrant (25.3 percent vs.

13.3 percent). Similarly, the proportion of those working in manufacturing work was 16 percent higher in THs than in non-migrant households (i.e. 28.9 percent, as compared to 12.9 percent). Conversely, the proportion of fathers working in skilled agriculture work and semi-skilled services was lower amongst THs than in non-migrant households (41.1 vs. 55.6 percent).

**TABLE 5: Parent’s current occupation**

Characteristics	Household by type of parent			Test statistic
	Non-migrant	Transnational	Overall	
Mother				$\chi^2=29.6, p<.001$
Domestic/unskilled	32.1	38.3	35.2	
Skilled agriculture	47.6	48.6	48.1	
Semi-skilled	2.9	5.0	4.0	
service/manufacturing				
Others	17.4	8.1	12.7	
Father*				$\chi^2=114.4, p<.001$
Domestic/unskilled	13.3	25.3	19.3	
Skilled agriculture	55.6	41.1	48.3	
Semi-skilled	12.9	28.9	21.0	
service/manufacturing				
Others	18.2	4.6	11.4	
Total N	511	519		

\*One missing case

### 3.2 PARENT CHARACTERISTICS IN TRANSNATIONAL HOUSEHOLDS

According to our survey, almost all migrants who went abroad were TC’s fathers. Although there are many reasons why fathers choose to go abroad, two primary reasons accounted for over 73.8 percent of the total response: i) children’s future and education (39.6 percent); and ii) general family care/subsistence (34.2 percent). Apart from these two reasons, 10.1 percent of TH respondents said that fathers went abroad because there were no jobs available at the place of origin. 7.4 percent went abroad because of they found local salaries in Thailand too low. Less than 5 percent went abroad to earn money for household projects, such as building a new house.

**FIGURE 2: Main Reason that Father Left to Work Abroad**

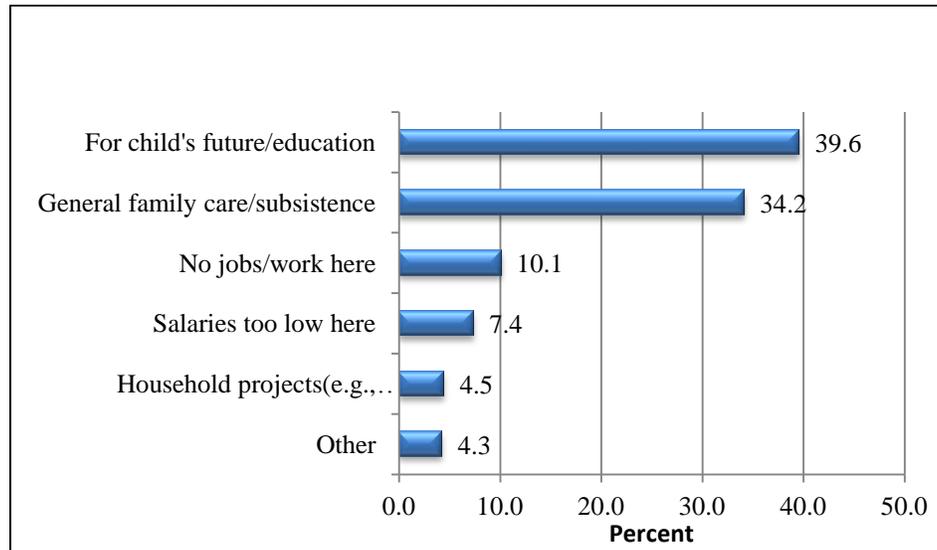


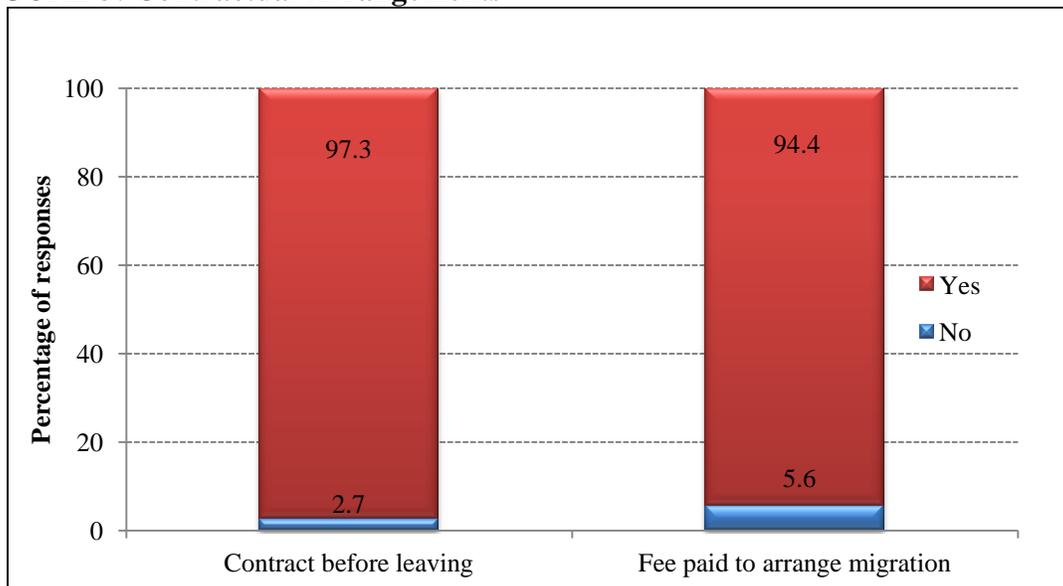
TABLE 6 shows whether fathers had ever been away from home during the first 36 months of the TC's life. The percentage differences between fathers from THs and non-migrant households are substantial. While only 31.9 percent of fathers in non-migrant households went away from home during the first three years of the TC's life, the percentage was more than twice (70.9 percent) among fathers in THs.

**TABLE 6: Father being away from home during the first 36 months of TC's life**

Characteristics	Household by type of parent			Test statistic
	Non-migrant	Transnational	Overall	
Father away during first 36 months TC's life	31.9	70.9	51.5	$\chi^2=156.9$ , p<.001
Total N	511	519		

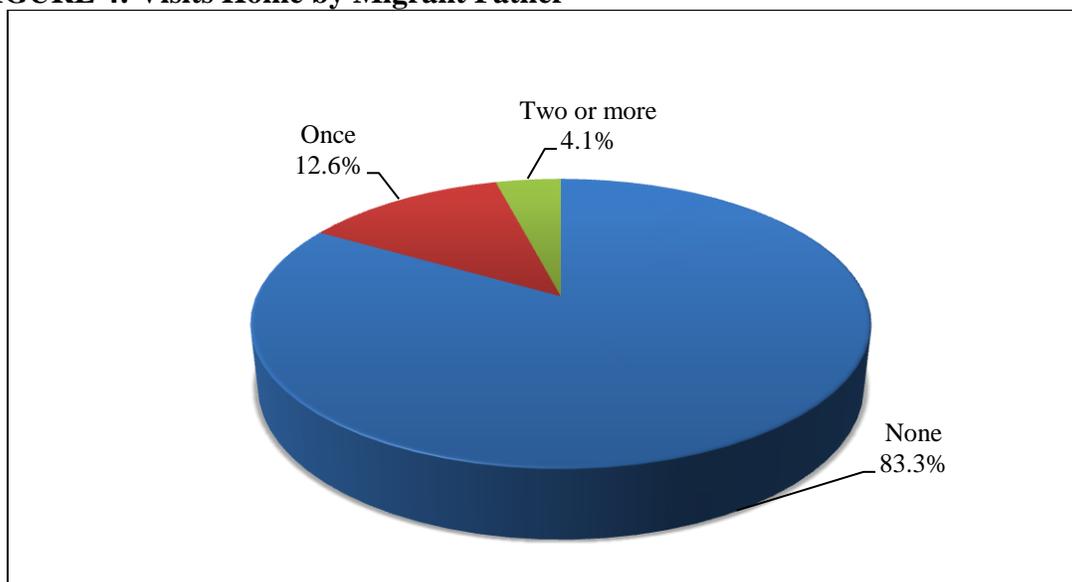
We were also interested in whether migrants working overseas were under formal work contracts, which would often help to secure standard working and living conditions for these workers. Among THs, almost all of the TC's fathers (97.3 percent) who went abroad had applied for a formal work contract before going while very few (2.7 percent) went abroad with no formal contract. In addition, the majority of fathers working abroad (94.4 percent) had to pay some fees for arranging the migration while only 5.6 percent did not pay (see Figure 3).

**FIGURE 3: Contractual Arrangements**



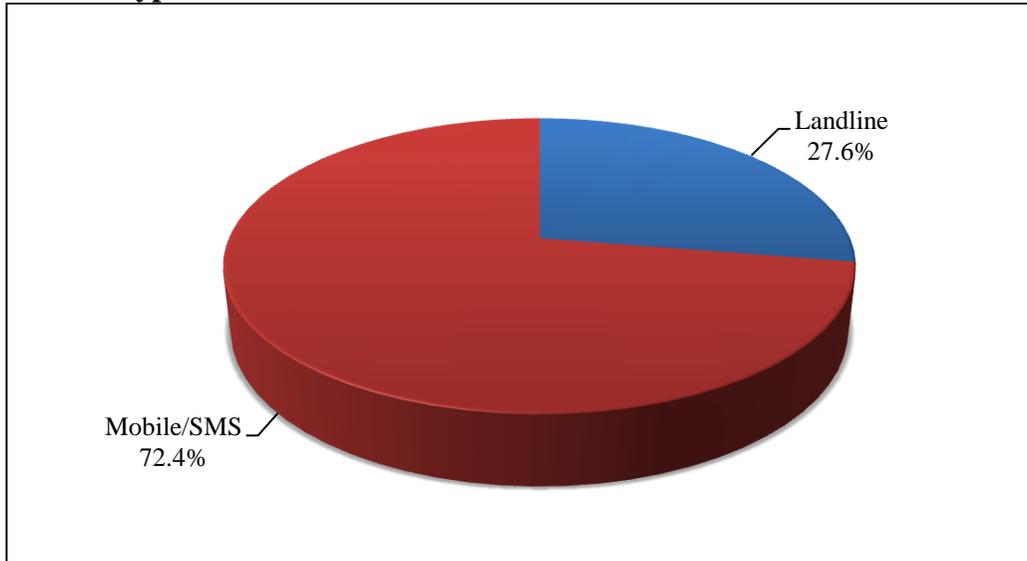
After fathers went abroad for work (i.e. for duration of at least six months according to the inclusion criteria), 83.3 percent of them did not visit home, whilst 12.6 percent visited home only once, and 4.1 per cent visited twice or more (see Figure 4). In terms of the duration of being away from home, about 40 percent of fathers were away for more than six months till about a year, while 26 percent were away for and one to two years. While the data indicated that it was not possible for overseas migrants to visit home more frequently, it might also suggest that migrants included in our study were those who have only been recently away.

**FIGURE 4: Visits Home by Migrant Father**



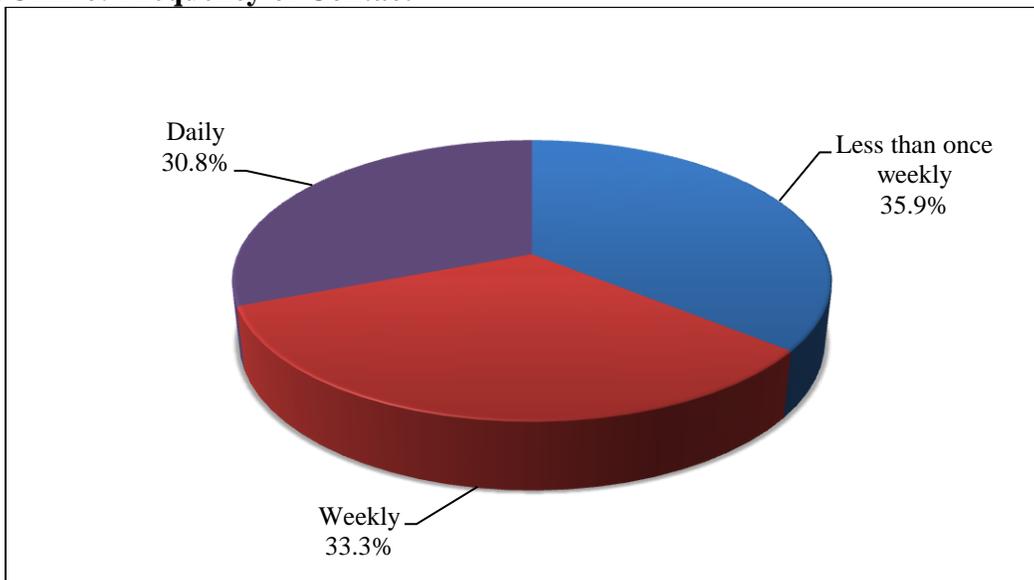
Although there are many reasons why fathers choose to go abroad, two primary reasons accounted for over 73.8 percent of the total response: i) children’s future and education (39.6 percent); and ii) general family care/subsistence (34.2 percent). (See Figure 5)

**FIGURE 5: Type of Contact**



In terms of the frequency of contact, the overall percentage was almost equally distributed among those who contacted their families daily (30.8 percent), weekly (33.3 percent), and less than once a week (35.9 percent) (see Figure 6).

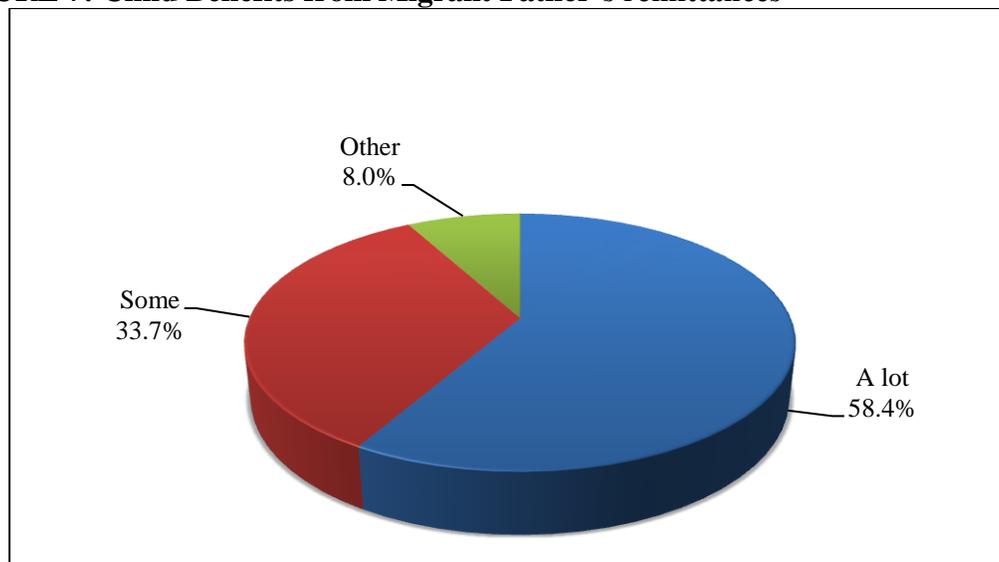
**FIGURE 6: Frequency of Contact**



Migrants working abroad will tend to send remittances to their families back home. This was confirmed in our study, where almost all migrant fathers (99.6 percent) sent money back home in the past six months before the survey date. The average amount of remittances was 96,237 Baht, ranging between 9,000 and 400,000 Baht.

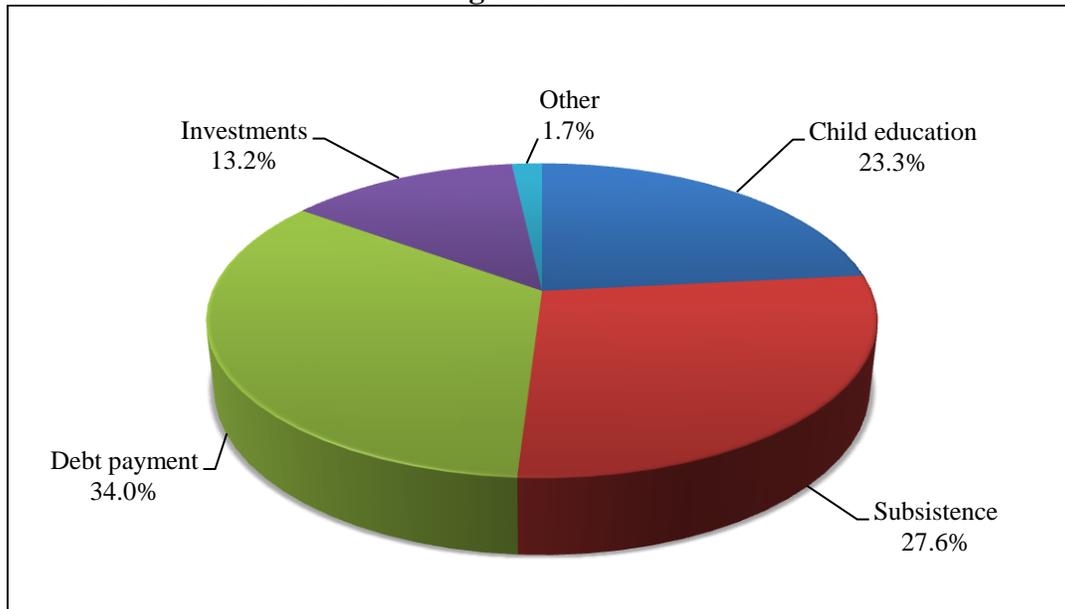
The extent to which these remittances have benefited TCs is of our interest. Most of the responsible adults in THs reported that TCs generally benefited from this money. Figure 7 shows that more than half of the respondents in THs (58.4 percent) reported that TCs benefited a lot from remittances, while 33.7 percent reported some benefit. Still, 8 percent of the respondents reported that the TC gained little or no benefits from the remittances.

**FIGURE 7: Child Benefits from Migrant Father’s remittances**



When examining the primary uses of overseas remittances, it is interesting to note that the largest proportion of THs reported using the remittance for debt repayment (34 percent). 27.6 percent was allocated towards financing basic necessities, 23.3 percent towards child education, 13.2 percent towards investments (such as setting up businesses, etc.), and 1.7 percent towards other purposes (See Figure 8). This breakdown provides some insight as to why several respondents stated that the TC obtained little or no benefits from their father’s remittances.

**FIGURE 8: Remittance Use from Migrant Father**



#### **4. CARER CHARACTERISTICS**

Previous results have indicated that almost all of the TC's primary caregivers were their mothers regardless of the type of household (see Figure 1). Table 7 provides a summary of caregiver's profile classified in terms of age, education, and employment levels. In terms of age, slightly over two thirds (68.2 percent) of caregivers were aged between 25 to 39 years old, while about one-fifth (24.6 percent) were between 40 to 54 years of age. A very small percentage of caregivers were aged below 25 (5.2 percent) or above 54 (2.1 percent). There were no significant differences between the age distribution of carers between non-migrant households and THs (See TABLE 7).

We were also concerned with the education levels of caregivers. Overall, the majority (81.2 percent) held only primary or lower than primary educational qualifications, while a minority (18.8 percent) had higher than primary education. These characteristics were not significantly different between caregivers in non-migrant households and THs (See TABLE 7).

Despite having to care for TCs, some caregivers were also employed in other forms of work. TABLE 7 shows that 29.0 percent of caregivers in non-migrant households and 25.8 percent in THs were engaged in other forms of work in addition to taking care of the TC. This difference is not statistically significant.

**TABLE 7: Caregiver Characteristics**

Characteristics	Household by type of parent			Test statistic
	Non-migrant	Transnational	Overall	
Age				$\chi^2=11.1, p<.05$
	15-24	5.7	4.6	5.2
	25-39	63.6	72.6	68.2
	40-54	28.8	20.4	24.6
	Over 54	2.0	2.3	2.1
Caregiver's education				n.s.
	Primary or less	79.7	82.7	81.2
	More than primary	20.4	17.3	18.8
Caregiver employed in addition to caring*	29.0	25.8	27.4	n.s.
Total N	511	519		

\*One missing case

One of CHAMPSEA's main interests is focused on the relationship between the well-being of caregivers and the quality of care provided for the TC. To assess problems related to mental health, 20 questions were posed in the form of a questionnaire (known as the SRQ20), which was aimed at identifying potential mental health symptoms and issues that might have surfaced over the last 30 days prior to the survey. If a caregiver had identified at least seven symptoms, s/he would be recognised as having mental health issues. TABLE 8 shows that slightly over one fifth (21.0 percent) of all caregivers had identified mental health symptoms. The percentage of caregivers having mental health symptoms in non-migrant households (20.7 percent) was almost similar to the percentage in THs (21.3 percent).

Another indicator of well-being was whether or not a caregiver could turn to someone for help s/he encountered a problem. TABLE 8 shows that the majority of caregivers (92.3 percent) were able to get support when they needed it, and no significant difference was found between non-migrant households and THs.

When asked whether there was any form of support to assist caregivers in providing care for the TC, results indicated that more than half (58.7 percent) of overall caregivers obtained support from various individuals and organizations. Again, the difference between non-migrant households and THs was not statistically significant (See TABLE 8).

**TABLE 8: Caregiver’s Well-Being**

Characteristics	Household by type of parent			Test statistic
	Non-migrant	Transnational	Overall	
Mental health concern*	20.7	21.3	21.0	n.s.
Someone to help out	92.8	91.9	92.3	n.s.
Help to care	59.9	57.6	58.7	n.s.
Total N	511	519		

\*35 missing case for TH

## 5. OUTCOMES FOR CHILDREN: CHAMPSEA FINDINGS

This report presents the health and well-being outcomes for children based on the survey reports obtained from carers and older TCs. Based on the carer’s reports, we present findings related to child nutrition, children’s psychological well-being, child health and health behaviours, as well as child schooling. From the children’s reports, we present findings related to family functioning, health behaviours, work/chore responsibilities, and subjective well-being.

5.1 Carer’s i'm just doing the finishing touches to the edits. assessed various levels of child nutrition using three measures: stunting, thinness, and overweightedness. TABLE 9 shows that about 8 percent of TCs were considered to be stunted or thin. The proportion of stunting or thinness was slightly higher among children from non-migrant households than from THs. This difference was, however, not significant when using Chi-squared test. Children who were considered overweight accounted for 13 percent. Percentage distributions of overweightedness were not significantly different amongst children from non-migrant households and THs.

**TABLE 9: Child Nutrition**

	Non-migrant	Transnational	Overall %	Test statistic
Stunting*	8.53	7.72	8.13	n.s.
Thinness**	8.95	7.47	8.2	n.s.
Overweight*	13.29	13.21	13.25	n.s.
Total N	511	519		

\*21 missing cases

\*\*18 missing cases

### 5.1.3 Child’s Psychological Well-Being

Our findings were derived from the carer’s report, which examined the psychological well-being of children using their responses from the Strengths and Difficulties

Questionnaire (SDQ). The SDQ is a standardized questionnaire used in the behavioural screening of 3 to 16 year-old children. It consisted of five sub-scales used to assess conduct disorder, emotional disorder, hyperactivity/inattention, peer relationship problems, and pro-social behaviour. The “total difficulties” score was generated by adding up the various scores derived from the first four scales. The results of the SDQ are summarised in TABLE 10.

Results from the bivariate analysis and Chi-squared test indicate that there is a significant relationship between parents’ migration status and children’s psychological well-being according to three indicators: conduct problems, hyperactivity, and peer problems.”The nature of this relationship across all indicators is, however, generally inconsistent. Results from the total difficulties score indicate that the children of migrant parents were more likely to have psychological problems than children of non-migrant parents (24 percent vs. 18 percent). In terms of specific indicators, results suggest that the children of migrant parents were more likely to have conduct problems and experience forms of hyperactivity, but were less likely to have problems with peer relationships as compared to children from non-migrant households. Parental migration did not seem to have a significant influence on prosocial behaviour and emotional symptoms related to children’s psychological well-being.

**TABLE 10: Child’s Psychological Well-Being**

	Non-migrant	Transnational	Overall %	Test statistic	
Emotional Symptoms	11.22	12.18	11.7		n.s.
Conduct Problems	24.02	30.84	27.43	5.9561	p <.05
Hyperactivity	16.93	24.75	20.85	9.4356	p <.01
Peer Problems	38.39	30.84	34.61	6.3885	p <.05
Pro-social Scale	51.01	48.99	68.64		n.s.
Total Difficulties*	17.72	24.17	20.94	6.3853	p <.05
Total N	511	519			

\*13 missing cases

#### 5.1.4 Child Health and Health Behaviours

TABLE 11 indicates that the prevalence of low birth weight among TCs is low, which is around 7 percent. No significant differences were found in the results amongst children from non-migrant households and THs. Almost every TC had received some form of vaccination regardless of their parents’ migration status. The proportion of children having a complete vaccination report was slightly below 100 percent. Again, there no significant differences were found between children from non-migrant households and THs.

**TABLE 11: Vaccinations and birth weight**

	Non-migrant	Transnational	Overall %	Test statistic
Child low birth weight	7.63	6.55	7.09	n.s.
Birth weight estimated				
Child ever vaccinated	100	99.81	99.9	---
Vaccination record reported complete*	96.27	96.91	96.6	n.s.
Total N	511	519		

\* 2 missing cases

When asked whether the TC had experienced any selected health symptoms (see Table 12) within the last two weeks prior to the survey, results indicate a highest prevalence of cold, cough, fever, or flu (40 percent), which was followed by symptoms such as a loss of appetite (26 percent), stomach ache (21 percent), and headache (21 percent). None of these health symptoms were significantly different between children from non-migrant households and THs. The only symptom that children from non-migrant households were reported to have a higher proportion of was eye problems.

**TABLE 12: Incidences of illnesses/health symptoms**

	Non-migrant	Transnational	Overall %	Test statistic
Cold, cough, fever, flu	41.49	38.73	40.1	n.s.
Headache	22.9	19.08	20.97	n.s.
Stomach ache	22.31	20.23	21.26	n.s.
Loss of appetite	24.07	28.52	26.31	n.s.
Diarrhea	5.09	6.94	6.02	n.s.
Toothache	20.94	17.73	19.32	n.s.
Eye problems	5.68	2.89	4.27	4.8836 p < .05
Total N	511	519		

We also examined children's behaviours associated with health promotion based on the carer's report. These include habits such as whether or not the TC wears shoes/sandals, washes hands, cleans teeth regularly, takes regular baths, and access to clean drinking water.. Overall, almost three quarter of TCs wear sandals/shoes when they are outside. Around two-thirds of them have the healthy practice of washing hands before eating. Almost everyone cleans their teeth at least two times a day. The percentage of those who bathed at least four times weekly was as high as 97 percent. Only 17 percent, however, ensured that healthy precautions were taken before drinking water. No significant differences in health promotion behaviours were found between children from non-migrant households and THs.

**TABLE 13: Health Promotion Behaviours**

	Non-migrant	Transnational	Overall %	Test statistic
Child wears sandals outside				
Always	74.17	72.64	73.4	n.s.
Almost always	10.76	9.25	10	
Less often (other)	15.07	18.11	16.6	
Child washes hand before eating				n.s.
Always	68.3	66.09	67.18	
Almost always	14.09	12.33	13.2	
Less often (other)	17.61	21.58	19.61	
Child cleans teeth 2 or more times daily	100.00	99.81	99.9	---
Child bathes 4 or more times weekly	96.87	97.3	97.09	n.s.
Drinking water precautions taken	16.83	17.92	17.38	n.s.
Total N	511	519		

Children’s health was also assessed according to incidences of serious illness, injury, or chronic disability over the past 6 months prior to the survey. It is evident that the prevalence of serious illnesses and injury is low—approximately 4 percent for serious illnesses and 2 percent for accidents. Fatal incidences that resulted in lifetime disability were even lower, accounting for less than 1 percent. These conditions did not vary significantly amongst children from non-migrant households and THs.

**TABLE 14: Serious Health Events**

	Non-migrant	Transnational	Overall %	Test statistic
Serious illness past 6 months	3.52	3.85	3.69	n.s.
Serious injury past 6 months	1.76	1.93	1.84	
Lifetime disability	0.39	0.39	0.39	---
Total N	511	519		

### 5.1.5 Child Schooling

In terms of child schooling, we examined relative class position, school reports, as well as educational progression in terms of the number of completed years. The information was obtained from the carer’s report in the survey. Overall, the majority of carers reported that the TC’s relative class position was average (78 percent). 13 percent reported that the TC was above average, and 9 percent answered that the child was below

average. No significant relationship was found between the child’s relative class position and parents’ migration status.

Only a small fraction of carers (6 percent) reported incidences of the child receiving a negative school report. The percentage was slightly higher amongst children from THs than those from non-migrant households (7 percent vs. 4 percent), although the difference is not statistically significant. About two thirds of children were reported to be on pace at school. However, as high as 28 percent of TCs reported being behind in class. This proportion was found to be slightly higher amongst children from THs (30 percent) than those from non-migrant households (25 percent). The Chi-squared test did not reveal any significant relationship here.

**TABLE 15: Child Schooling**

	Non-migrant	Transnational	Overall %	Test statistic
Relative class position				
Above average	10.89	15.04	13	n.s.
Average	78.99	76.69	77.82	
Below average	10.12	8.27	9.18	
Recent negative school report				
	4.28	6.77	5.54	n.s.
School pacing				
Behind	25.29	30.08	27.72	n.s.
On pace	69.65	63.53	66.54	
Ahead	5.06	6.39	5.74	
Total N	511	519		

## 5.2 Child Report

### 5.2.1 Family Functioning

Apart from assessing issues of family functioning at the household level (as reported by responsible adults), our study also explored family functioning based on the older TC’s perspective. The five statements used to measure family functioning included: i) whether TCs could approach their family when they had problems; ii) whether their family discussed problems with them; iii) whether their family supported them when they tried something new; iv) whether they liked their family’s response when they were angry, sad or affectionate; and v) whether they enjoyed the time spent with their family. Data presented in TABLE 16 reveal that slightly more than half of the children aged 9 to 11 in our study perceived their families to be functioning well. The percentage is slightly higher among children with migrant parents, although the relationship was not statistically significant.

**TABLE 16: Family Functioning-APGAR**

	Non-migrant	Transnational	Overall %	Test statistic
Family functioning is good	0.52	0.55	0.53	n.s.
Total N	256	265		

### 5.2.2 Health Behaviours

We explore children's health risk behaviours through looking at tobacco use (defined as one or two puffs of tobacco smoking) and alcohol use (defined as a sip or taking a sip from someone more than twice or thrice). When examining the use of these substances, we not only asked whether the child had ever used tobacco or alcohol, but also whether or not their friends and/or family used tobacco or alcohol as indirect measurement of tobacco and alcohol exposure. TABLE 17 below indicates that the prevalence of tobacco use among the children aged 9 to 11 was small (3 percent). However, the percentage of TCs reporting tobacco use amongst their friends was quite substantial (21 percent). At the same time, the percentage of TCs reporting tobacco use among any members of their family was approximately 57 percent. No significant relationship was found between tobacco use amongst TCs or their friends and parents' migration status. The data does suggest, however, that there is a significant relationship between family tobacco use and parents' migration status, and specifically that tobacco use was more prevalent amongst family members of non-migrant households than THs.

**TABLE 17: Tobacco Use**

	Non-migrant	Transnational	Overall %	Test statistic
Ever use tobacco	3.13	3.77	3.45	n.s.
Friends use tobacco	21.57	21.13	21.35	
Family use tobacco	64.06	50.94	57.39	9.1645 p <.01
Total N	256	265		

Interestingly, the prevalence of alcohol use among TCs was higher than tobacco use. About 6.1 percent of TCs reported that they had ever consumed alcohol. These percentages varied little between TCs from non-migrant households and THs. Among those who had ever consumed alcohol, more than half (53.1 percent) did so without the presence of family. Although the data suggests that this percentage is higher among TCs from non-migrant households than THs (58.8 percent vs. 46.7 percent), this relationship was not found to be statistically significant. Almost one fourth (24.8 percent) of TCs reported incidences of alcohol use amongst their friends, while 85 percent reported alcohol consumption within their family. These percentages were not found to be significantly different amongst TCs from non-migrant households and THs.

**TABLE 18: Alcohol use**

	Non-migrant	Transnational	Overall	Test statistic
Ever use alcohol	6.64	5.66	6.14	n.s.
Ever use alcohol without family	58.82	46.67	53.13	n.s.
Friends use alcohol*	23.14	26.42	24.81	
Family use alcohol	87.11	84.15	85.6	
Total N	256	265		

\*One missing case

### 5.2.3 Chores and Work

The majority of TCs (94 percent reported having to help the family with household chores, regardless of their parents' migration status. It is valuable to keep in mind that these are 9 to 11 year olds, which is the typical age range in which children are assigned with light household chores to learn responsible behaviour. Paid forms of employment is also not uncommon in this setting. According to the TCs, 11.5 percent of them work for pay. This percentage was found to be slightly higher among children from non-migrant households than those from THs (12.9 percent vs. 10.2 percent). However, Chi-squared test did not indicate any significant relationship between children's paid work and parents' migration status.

**TABLE 19: Chores and Work**

	Non-migrant	Transnational	Overall %	Test statistic
Child has household chores	94.53	93.58	94.05	n.s.
Child works for payment	12.89	10.19	11.52	n.s.
Total N	256	265		

### 5.2.4 Subjective Well-Being

Clearly, TCs from THs had better knowledge of other THs than children from non-migrant households (93.2 percent vs. 86.3 percent). This result is significant at a 0.01 level. In terms of children's perceived happiness and enjoyment at school, however, our study did not find any significant differences in the results between children from non-migrant households and THs. Concerning overall happiness, most of the TCs perceived themselves to be very happy (45.3 percent) or just happy (48.9 percent), while only 5.8 percent considered themselves to be less happy. Similarly, majority of the children (84.1 percent) reported that they enjoyed school.

**TABLE 20: Child's Well-Being (Self-Report)**

	Non-migrant	Transnational	Overall %	Test statistic
Knowledge of other transnational households	86.33	93.21	89.83	6.7438 p < .01
Child is happy				
Very happy	41.8	48.68	45.3	n.s.
Happy	53.13	44.91	48.94	
Less happy(other)	5.08	6.42	5.76	
Child enjoys school	83.2	84.91	84.07	n.s.
Total N	256	265		

It is important to understand children's levels of social support and how this differs amongst children from non-migrant households and THs. We explored to whom they turned to whenever they encountered a problem in their relationships with their mothers, fathers, siblings, or in terms of school work, and when they felt sad or lonely. Concerning issues with their mother, the majority (58.9 percent) of TCs reported turning to their parents, whilst 31.5 percent reported turning to others. In terms of problems with their fathers, again most of the TCs turned to their parents (82.3 percent), while 12.9 percent reported that they turned to others. In both cases, no significant relationship in the data was found.

**TABLE 21: Social Support-Problem with Mother or Father**

	Non-migrant	Transnational	Overall %	Test statistic
Problem with mother				n.s.
Parent	60.94	56.98	58.93	
Other Support	28.52	34.34	31.48	
No problems/ do nothing	10.55	8.68	9.6	
Problem with father				n.s.
Parent	81.64	83.02	82.34	
Other Support	14.45	11.32	12.86	
No problems/ do nothing	3.91	5.66	4.82	
Total N	256	265		

Similar to when TCs had problems with a parent, the majority of them turned to their parents for support when they encountered problems with their siblings. 10.7 percent of TCs reported turning to others for social support. No significant difference was found in the results between children from non-migrant households and THs. Concerning problems with school work, the percentage of TCs approaching their parents for support was the lowest (50.8 percent). Again, no significant difference was found in the results between TCs from non-migrant households and THs.

**TABLE 22: Social Support-Problem with Siblings and Schoolwork**

	Non-migrant	Transnational	Overall %	Test statistic
Problem with sibling				
Parent	82.19	85.09	83.67	n.s.
Other Support	10.96	10.53	10.74	
No problems/ do nothing	6.85	4.39	5.59	
Problem with schoolwork*				n.s.
Parent	52.21	49.43	50.78	
Other Support	47.79	50.57	49.22	
Total N	256	265		

\*Two missing cases

When they felt sad or lonely, 58.8 percent of TCs reported that they turned to parents for social support, whilst 41.2 percent turned to others. No significant difference was found in the results between TCs from non-migrant households and THs.

**TABLE 23: Social Support-Feeling Sad or Lonely**

	Non-migrant	Transnational	Overall %	Test statistic
Feeling sad or lonely*				
Parent	59.04	58.56	58.79	n.s.
Other Support	40.96	41.44	41.21	
Total N	256	265		

\*Two missing cases

The findings indicate that no matter whether their parents were abroad or not, the majority of THs sought help and support from their parents when they faced problems with parents, their siblings, with school work, or when they felt sad or lonely. This implies that migrant parents often continue their supporting role as parents despite their physical absence.

## 6. OUTCOMES FOR CHILDREN: CHAMPSEA FINDINGS – SELECTED MULTIVARIATE

### 6.1 Nutrition

*Related CHAMPSEA hypotheses:*

- *The transnational migration of fathers is positively associated with health and well-being;*
- *The transnational migration of mothers is positively associated with physical health and well-being, but only where a close female relative provides substitute care; and*

- *The positive and negative associations between the transnational migration of fathers/mothers and child health/well-being vary according to the gender and age of the child.*

In this report, we tested whether the nutritional status of the TC is related to parental migration status using multivariate analysis. The nutrition multivariate models included the following three indicators shown in TABLE 24. As indicated earlier, the data for Thailand only allowed us to compare between children from THs (mostly fathers) and those from non-migrant households. Other variables included in the model in addition to parents' migration status are birth weight, gender, age, whether or not the TC has siblings, whether father is away during the first 36 months, carer's education, the number of adults in the household, and household wealth.

6.1.1 Stunting: A binary indicator created from HAZ, which is a z-score distribution of height-for-age based on WHO standards. Stunting is indicated by HAZ using  $<-2$  SD. It is applicable to all CHAMPSEA age groups. While 1 indicates stunting, 0 means otherwise.

We started with young TCs, aged 5 or under. Using a logit model, we explored whether cases of stunting among children aged less than 6 is associated with parental migration. The model tested whether cases of stunting amongst TCs from THs and non-migrant households "gives non-significant results. Both TCs from THs and non-migrant households had equal likelihood of being stunted. Among other variables, the only significantly contributing variable that produced significant results was the child's low birth weight. If a child had low birth weight, s/he was more likely to be stunted. Results highlight the importance and long lasting consequences of children's low birth weight.

For older children (aged 9-11), no factors included in the model were found to be significant.

6.1.2 Overweight: A binary indicator created from BAZ. BAZ is a z-score distribution of body-mass-index based on WHO standards. It is applicable to all CHAMPSEA age groups. NOTE: For children over the age of 60 months (age 5) overweightedness is indicated by  $+1$ SD instead of  $+2$  SD. CMB is accounting for this in the binary indicators that are created for ICCs to use. Similar to stunting, 1 indicates overweightedness, while 0 indicates otherwise.

For TCs aged less than 6, results from the multivariate analysis show no significant relationship between parental migration and children's overweightedness. No significant effects were found amongst other factors as well.

Whilst no effects of parental migration status were found amongst older TCs, two indicators in the model showed significant association between children's overweightedness, gender and household wealth. Our study revealed that girls were less likely than boys to be overweight. The results more or less reflect the case that girls generally pay more attention to their physical outlooks than boys. The other significant factor influencing overweightedness among older TCs was their level of household

wealth. Clearly, while being rich is favorable, it does always translate into positive impacts on children’s wellbeing, especially when funds are inappropriately used.

6.1.3 Thinness: A binary indicator created from WAZ for children up to age 10, and from BAZ for children 10 and over. The variable valued 1 indicates presence of thinness/wasting and 0 indicates otherwise. Thinness is indicated by BAZ <-2 SD.

Again, for young TCs, results in the TABLE 24 suggest that thinness of the TC is not associated with parental migration. Similar to cases of stunting, the only factor associated with it is the child’s low birth weight which contributes significantly to thinness when they grow up.

The significant relationship between low birth weight and thinness was also found among older TCs. Results show that older TCs with low weight during birth were more likely to be overweight. At the same time, and as shown in the multivariate analysis, TCs from wealthier households and TCs who have younger siblings were less likely to be thin.

**TABLE 24: Multivariate Analysis - Nutrition Indicators, Children 5 Years Old and under**

	Odds Ratio	Conf. Interval		
<b>A. Stunting (N=491)</b>				
Transnational household*	0.780	0.328	1.854	
<b>TC low birth weight</b>	<b>5.701</b>	<b>2.479</b>	<b>13.113</b>	<b>P&lt;0.05</b>
TC is girl	0.606	0.313	1.175	
TC age in months	0.994	0.963	1.020	
TC has older siblings in household	0.719	0.369	1.400	
Father away at 1st 36 months	0.748	0.330	1.700	
Carer education above primary	0.408	0.346	2.180	
No. of adults in HH	0.996	0.737	1.347	
Household wealth: middle**	0.728	0.364	1.455	
Household wealth: high**	0.342	0.106	1.104	
<b>B. Overweight (n=491)</b>				
Transnational household*	0.828	0.315	2.180	
TC low birth weight	0.369	0.047	2.868	
TC is girl	1.160	0.579	2.324	
TC age in months	1.034	0.998	1.071	
TC has older siblings in household	0.841	0.408	1.732	
Father away, 1st 36 months	0.854	0.351	2.080	
Carer education above primary	2.057	0.951	4.447	
No. of adults in HH	1.059	0.752	1.491	
Household wealth: middle**	1.226	0.502	2.994	
Household wealth: high**	2.342	0.900	6.093	

C. Thinness (n=491)				
Transnational household*	0.657	0.266	1.623	
<b>TC low birth weight</b>	<b>9.472</b>	<b>4.212</b>	<b>21.306</b>	<b>P&lt;0.05</b>
TC is girl	1.163	0.588	2.301	
TC age in months	0.990	0.957	1.023	
TC has older siblings in household	0.622	0.306	1.266	
Father away, 1st 36 months	1.176	0.483	2.866	
Carer education above primary	0.893	0.342	2.335	
No. of adults in HH	0.704	0.495	1.002	
Household wealth: middle**	0.563	0.263	1.204	
Household wealth: high**	0.538	0.187	1.543	

\*Reference group is non-migrant households

\*\*Reference group is low wealth households

**TABLE 25: Multivariate Analysis - Nutrition Indicators, Children 9-11 Years Old**

	Odds Ratio	Conf. Interval	p value	
<b>A. Stunting (n=516)</b>				
Transnational household*	1.195	0.571	2.503	
TC low birth weight	1.72	0.555	5.333	
TC is girl	1.343	0.683	2.642	
Child is ten	1.680	0.736	3.839	
Child is eleven	1.333	0.554	3.208	
TC has younger siblings in household	0.805	0.373	1.739	
Father away, 1st 36 mos	0.77	0.380	1.554	
Carer educ above primary	1.449	0.603	3.482	
No. of adults in HH	0.916	0.657	1.275	
Household wealth: middle**	1.780	0.822	3.853	
Household wealth: Rich**	1.117	0.392	3.187	
<b>B. Overweight (n=516)</b>				
Transnational household*	1.178	0.713	1.946	
TC low birth weight	0.909	0.336	2.310	
<b>TC is girl</b>	<b>0.611</b>	<b>0.386</b>	<b>0.967</b>	<b>p&lt;.05</b>
Child is ten	1.399	0.792	2.472	
Child is eleven	1.531	0.866	2.707	
TC has younger siblings in household	1.370	0.838	2.240	
Father away, 1st 36 mos	0.951	0.592	1.530	
Carer educ above primary	0.598	0.296	1.208	
No. of adults in HH	1.116	0.897	1.389	
Household wealth: Middle***	1.494	0.880	2.536	
<b>Household wealth: Rich***</b>	<b>2.416</b>	<b>1.253</b>	<b>4.658</b>	<b>p&lt;.01</b>

C. Thinness (n=516)				
Transnational household*	0.791	0.380	1.648	
<b>TC low birth weight</b>	<b>5.870</b>	<b>2.378</b>	<b>14.490</b>	<b>p &lt;.001</b>
TC is girl	0.978	0.504	1.896	
Child is ten**	0.760	0.338	1.709	
Child is eleven**	0.991	0.445	2.207	
<b>TC has younger siblings in household</b>	<b>0.240</b>	<b>0.879</b>	<b>0.653</b>	<b>p &lt;.01</b>
Father away, 1st 36 mos	0.72	0.348	1.476	
Carer educ above primary	1.127	0.420	3.021	
No. of adults in HH	0.862	0.617	1.202	
Household wealth: Middle***	0.755	0.357	1.597	
Household wealth: Rich***	0.565	0.198	1.610	

\*Reference group is non-migrant households

\*\*Reference group is nine year old children

\*\*\*Reference group is low wealth households

## 6.2 Psychological Well-Being

*Related CHAMPSEA hypotheses:*

- *The transnational migration of fathers is positively associated with health and well-being;*
- *The transnational migration of mothers is negatively associated with mental health and well-being; and*
- *The positive and negative associations between the transnational migration of fathers/mothers and child health/well-being vary according to the gender and age of the child.*

To gauge the extent to which parental migration affect children left behind in terms of psychological well-being, we used a standard measurement called the SDQ. The indicator called “Total Difficulties” is the summative continuous measure which is a sum of SDQ subscales excluding the pro-social scale. The variable that represents “Total Difficulties” is a binary indicator that uses the UK cutoff points for ‘abnormal cases’ which are greater/equal to 17. To our knowledge, Thailand is the only CHAMPSEA country that has published research on revised cut-offs. In the absence of country-specific cut-offs, we followed other researchers and used the UK standard.

The first set of models in each pair uses child age and sex only (in addition to the migrant status of parents), while the second brings in the remaining set of variables. Since results for the three variables included in the first model do not change from Model 1 to Model 2, we discuss only results from Model 2. Results shown in TABLE 26 suggest a significant association between children’s psychological well-being and parental migration status. With a significance level of <0.05, TCs from THs were 1.5 times more likely to encounter psychological problems measured by SDQ. Our study indicates that while overseas parental migration did not matter for children’s physical well-being (as

measured by nutritional status,) it did have an influence on children’s psychological well-being.

Apart from parental migration status, other factors associated with psychological problems among children left behind included whether or not the child is aged 3 to 5, is the first child, has younger sibling, has a carer with mental health symptoms, and lives in a poor household.

**TABLE 26: Multivariate Analysis - Total Difficulties, All Children (n=983)**

	Odds Ratio	Conf. Interval		p value
<b>Transnational household*</b>	<b>1.465</b>	<b>1.052</b>	<b>2.041</b>	<b>p&lt;.05</b>
TC is girl	0.829	0.596	1.153	
<b>TC is older</b>	<b>0.359</b>	<b>0.252</b>	<b>0.511</b>	<b>p&lt;.001</b>
<b>TC parity two**</b>	<b>0.489</b>	<b>0.336</b>	<b>0.714</b>	<b>p&lt;.001</b>
<b>TC parity three or more**</b>	<b>0.446</b>	<b>0.240</b>	<b>0.829</b>	<b>p&lt;.001</b>
<b>Child has younger siblings</b>	<b>1.843</b>	<b>1.150</b>	<b>2.952</b>	<b>p&lt;.01</b>
Carer education more than primary	0.936	0.596	1.472	
<b>Carer has mental health symptoms</b>	<b>4.193</b>	<b>2.175</b>	<b>4.539</b>	<b>p&lt;.001</b>
Household wealth: middle***	0.776	0.539	1.118	
<b>Household wealth: high***</b>	<b>0.581</b>	<b>0.353</b>	<b>0.956</b>	<b>p&lt;.05</b>

\* Reference group is usually resident households

\*\* Reference group is TC parity one

\*\*\* Reference group is low household wealth

### 6.3 Subjective Well-Being

*Related CHAMPSEA hypotheses:*

- *The transnational migration of fathers is positively associated with health and well-being;*
- *The transnational migration of mothers is negatively associated with mental health and with well-being; and*
- *The positive and negative associations between the transnational migration of fathers/mothers and child health/well-being vary according to the gender and age of the child.*

Our study takes into account the agency of children left behind. One of the questions we asked during the interviews with older TCs was how happy they were according to their own perception. We used the outcome variable of 1 to signify responses indicating that they were “very happy” and “happy”, and 0 to signify “all others.” Judging from these variables, we found that the migration status of parents was not a significant determinant. However, when “very happy” was the outcome, multivariate results indicated that although the current migration status of parents did not make any difference on children’s subjective happiness, the migration experience of their mothers does. Our results showed that TCs whose mothers had never left since s/he was born were more likely to report themselves as being “very happy”. Another significant supporting factor influencing children’s happiness is the child’s positive perception of their family functioning (Table 27).

**Table 27: Multivariate Analysis – Very Happy, Older Children (n=496)**

	Odds ratio	Confidence interval		p-value
TC is boy	0.775	0.530	1.134	0.189
TC's age in year	1.025	0.812	1.293	0.836
TC's school is better than others	1.178	0.772	1.799	0.447
TC works to support family	1.025	0.567	1.851	0.935
TC views father's migration as good/very good	1.125	0.671	1.886	0.656
TC views mother's migration as good/very good	1.248	0.820	1.899	0.301
Transnational household	1.337	0.911	1.962	0.138
Mother is the carer	0.550	0.239	1.264	0.159
<b>Mother has never moved since TC's birth</b>	<b>1.854</b>	<b>1.009</b>	<b>3.407</b>	<b>0.047</b>
Carer is mentally healthy	1.431	0.919	2.228	0.113
APGAR score-TC's perspective	0.991	0.929	1.057	0.776
<b>APGAR score-respondent adult's perspective</b>	<b>1.176</b>	<b>1.104</b>	<b>1.253</b>	<b>0.000</b>
TC has sibling	0.996	0.666	1.491	0.986
Mother has at least secondary education	0.870	0.577	1.313	0.507
Father has at least secondary education	1.048	0.690	1.594	0.825
Household wealth: Middle	0.948	0.613	1.464	0.808
Household wealth: Rich	1.245	0.763	2.032	0.381
<b>Amount of saving</b>	<b>1.000</b>	<b>1.000</b>	<b>1.000</b>	<b>0.021</b>
Constant	-2.839	-5.721	0.043	0.053

We also took into consideration children’s enjoyment at school as another measurement of the children’s subjective well-being. This question examined the extent to which TCs enjoyed themselves in another social environment, i.e. at school. We experimented combining “very happy” and “always enjoy at school” as the outcome variable in the multivariate model. Interestingly, results show that TCs from THs were more likely to report being very happy and always enjoying themselves at school (results not shown).

## **PART 3: OVERVIEW OF THE SAMPLING PROCEDURE AND FIELDWORK FOR THE QUALITATIVE FOLLOW-UP STUDY**

### **1. PREPARATION**

#### ***1.1. Study site – site selection***

Although the study sites for the CHAMPSEA quantitative survey include two sites, Udon Thani and Lampang, we decided to conduct the qualitative study in only one site. We chose this mainly because we found Udon Thani and Lampang to have similar historical patterns in overseas labour migration from the community interviews conducted previously. Both sites are also similar in terms of geographical access and respondents' cooperation. Since Udon Thani has a higher prevalence of transnational migration, we selected this site for the qualitative study, specifically the district of Nong Han where the quantitative survey was conducted.

Target households were selected based on the selection matrix scattered throughout four sub-districts in Nong Han: Pannu (90), Sa-baeng (40), Nong Pai (15), and Nong Meg (29).

#### ***1.2. Pre-fieldwork preparation***

Before the actual fieldwork, we sent letters signed by the IPSR Director to the village headmen of all villages containing eligible households to ask for permission and inform them about re-interviewing some households on the attached list.

Before the training for interviewers was conducted in Singapore, ICCs organized a one-day meeting with interviewers to familiarize the team with the CHAMPSEA project at IPSR. In addition to providing the background of the project, the training also included expectations about the outcomes of the fieldwork, the role of interviewers, as well as various other logistical issues.

Based on contact information (especially phone numbers) provided in the quantitative questionnaires, the Thai fieldwork team made phone calls to various household heads to conduct a screening test for eligible households and make appointments for interviews. These phone calls were made before the interviewers went out into the field. About half of the phone calls were made successfully. Before commencing the fieldwork, the interviewers retrieved completed questionnaires of the target households and their backups (in case the target households are not eligible to give the interview) and brought along them to the field.

Prior to heading out, the project's research assistant also contacted the local government officer at the Public Health District Office to help with accommodation arrangements as well as liaising with the target villages and households. The officer was the same person who helped with the quantitative survey.

#### ***1.3. Field team***

The interview team in Thailand has four persons: Aew Parichart, Nun Kanya, Liw Kanchanok, and Up-ib Urapee. Parichart is a Ph.D. student in the Demography

programme at IPSR. Kanya has just graduated with an MA degree in Population and Social Research from IPSR. Liw has just obtained an MA degree from Chulalongkorn University, while Urapee is about to complete her MA degree from Thammasart university. All four of them attended the qualitative training conducted in Singapore from 9 to 10 July, 2009.

As Parichart and Kanya are a lot more experienced in qualitative fieldwork than Kanchanok and Urapee, they were each paired with the latter. At the beginning of the fieldwork, Kanya was paired with Kanchanok, and Parichart with Urapee. During the second half, the pairs were alternated.

One of the job requirements for qualitative interviewers is proficiency in the English language, so that they are able to attend the training conducted in Singapore. In view of this, all the interviewers who participated in the quantitative survey were not qualified. The interviewers who worked on the qualitative study were therefore not involved in the quantitative survey. We felt this to be one of the limitations for the qualitative study as it would be better if these interviewers had also participated in the quantitative survey.

The interviewers were responsible for logistical arrangements, liaising local government officers and collaborators, as well as taking observational notes.

## 2. FIELDWORK

### 2.1. Sample

A total number of 47 households were selected as primary targets (PTs) for the qualitative study in Thailand. Wherever possible, each of them had three backups with similar household profiles and health outcomes. Twelve PTs were non-migrant households and 35 were THs. We could not interview eight target households and all their backups due to the ineligibility criteria for our study. At the end, 41 carers of TCs from non-migrant households and THs (29 and 12 respectively) participated in the in-depth interviews. The sample distribution in the four sub-districts is shown in Table 1. Pang-ngu had the most number of interviewees (22 persons) while Nong Pai had the least (5 persons).

**TABLE 1: Sample distribution in four sub-districts of Nong Han district, Udon Thani Province**

Site ID	Sub-district name	Targets	Numbers completed
TA01-08	Pang-ngu	22	18
TA16-19	Nong Meg	8	6
TA30-38	Sa-bang	12	13
TA39-42	Nong Pai	5	4
Total		47	41

**TABLE 2: Structure of the sample for the qualitative study in Nong Han district, Udon Thani Province**

Variables		Targets	Number completed
Migration status	Mother migrant	3	1
	Father migrant	22	18
	Both parents migrant	10	10
	Usually resident parents	12	12
Carer type	Mother carer	30	28
	Father carer	3	2
	Maternal GM carer	8	6
	Other (mother's sister, paternal GF, sister)	6	5
TC's gender	Male	23	19
	Female	24	22
TC's age	Younger child	24	21
	Older child	23	20
TC's health	Positive/positive	15	14
	Positive/negative	25	23
	Negative/negative	7	4

## **2.2. Household screening**

As mentioned earlier, the household screening process was initiated by phone calls before the actual fieldwork was conducted. Although the qualitative interviewers were not involved in the quantitative survey, they did not encounter many difficulties connecting with previous interviewees who were selected for the interviews. The eligibility criteria was reconfirmed after the appointment with target households was made and before the interview took place. Prior to the fieldwork in each village, the interviewers met up the village headman to make sure that they had received a permission letter and were informed about the fieldwork activity. Confirmation for household eligibility for the qualitative study was always made directly with respondents from the target households (carers).

## **2.3 Exclusion from the eligibility criteria of target households**

Target households who were ineligible for the qualitative study included cases where the migrant parent recently visited or has returned for good (n=26), change of status from non-migrant household to TH or vice versa (n=3), not being able to make the appointment for at least 3 times (n=4), inconsistency in the identified primary carer from the quantitative survey and screening process of the in-depth interview (n=4), change of carer (n=3), refusal to be tape recorded (n=1), and refusal to be interviewed.

## **2.4 Data collection – interviews**

In each village, the interviewers first approached all the primary target households. If these households were ineligible or unavailable, their backups who lived in the same village were then contacted. In the event that backups in the same village were ineligible, backups in another village were then contacted. Backups in different sub-districts were not approached until the team visited that particular sub-district. The fieldwork began in the Nong-Meg sub-district and concluded in the Nong-Pai sub-district. Although it was generally not easy to find eligible households, the fieldwork by and large went smoothly.

The interviewers conducted an average of two to three interviews a day, depending on the interviewees' availability. Interviews with carers from THs took approximately an hour to an hour and a half, while interviews with carers from non-migrant households required less than an hour. Appointments were usually arranged in the afternoon between 1 to 6pm). Interviews in the morning (usually between 9am to 12pm) were sometimes also arranged, although to a lesser extent. These time-slots were based largely on the availability of the interviewees, so as to minimize disruption to their daily routines, whilst maximizing their cooperation to enhance the quality of the interview.

As most of the interviews took place in the afternoon, interviewers spent the mornings going through the completed paper questionnaires from the quantitative survey. They also prepared a household profile to take along to the field so that they would be familiar with some background information of the interviewees and the kinds of issues they could probe into. Most of the appointments with target households were made by the interviewers themselves using a cell phone with some help from local officers, the health officer and community health volunteers. It was important for appointments to be confirmed before the actual interviews take place.

Although the respondents responded positively to the visit as well as to questions in the Aide Memoire, the interviewers needed to reword most of the questions in order for the local people to understand. According to the interviewers, one of the difficulties encountered was having carers express their emotional feelings towards TCs and migrant parents. Furthermore, the psychological impacts of international migration on stay behind families and migrants (such as feeling of loneliness) were often seen as natural, common, and unavoidable, and thus not really a concern. Some interviewees expressed some reluctance to answer the questions about remittances. Interviewers also reported that the most difficult questions to ask were those that pertained to what caregivers felt they had gained from taking care of the TC, as well as the final question on the overall impacts of parental migration on TCs.

### ***2.3. Respondents' reactions and problems encountered in the field***

As mentioned earlier, the village headman of each target village was informed before the fieldwork took place. The village head then informed villagers from various households, especially those who were identified as target households. As a result of these preparations and the prior contact that villagers had with the quantitative surveyors, the interviewers felt generally welcomed. All target respondents were by and large cooperative, despite some interviews taking as long as an hour and a half. The fieldwork generally went smoothly. The enthusiasm of some interviewees was seen the initiative they took to return the phone calls of the interviews when they could not be reached the first time. Exclusion from the eligibility criteria.

The interviewees remembered our visit in 2008, but did not ask about the health outcomes of the TC or findings from the quantitative study. When approached, they usually called the TC to greet the team and asked if the child remembered the interview from last year.

Respondents were presented with an umbrella as a token of appreciation when the interview was completed. They all seemed pleased to receive the gift, which also seemed

timely as it was rainy when the fieldwork took place. Some respondents asked for more than one umbrella, but the interviewers had to explain that we only prepared one for each respondent.

One of the challenges encountered during the qualitative fieldwork concerned difficulties with speaking north-eastern Thai dialect. Although Thai is the language used in the study area, north-eastern Thai dialect is generally spoken and not every word is understandable for people outside of the area. Since all the interviewers were from outside of northeast Thailand, they had difficulties understanding some words. This concern was raised, and so our back up plan was to have a local interviewer present at some interviews to help with translation work.

Another challenge had to do with the time period of the fieldwork, which affected the availability of the interviewees since it was during the rainy season and farmers would have just started rice planting. The rain caused some inconvenience to travelling. Most of the target caretakers, especially those of older TCs, were not sole caregivers, but also worked in the rice field. As they had to be in the rice field during the day, usually from 8am till about 5 or 6pm, most of the interviews could only be conducted after they had returned home. This meant that interviewers had a limited timeframe to work with as being in the village during night time was not very socially appropriate. Although safety was not a major concern, their presence in the village at night might seem disruptive, especially for those who needed rest after a long-day of hard work in the field.

Despite delays encountered with some missing records of house numbers or interviewees' names, the schedule generally went as planned. Since changes in cell-phone numbers are common in Thailand, the interviews also encountered difficulties contacting those whose numbers had changed from when the quantitative survey was conducted. They also reported some errors in the maps of a few villages, which resulted in confusion in terms of locating the interviewees' houses.

#### ***2.4. Community support and reactions***

Help received from district health officers and health volunteers played a crucial role in the completion of the fieldwork. It is clear that a good relationship between health officers, the village headmen, and villagers was important in facilitating a smooth interview process. Although the village headmen in some villages did not seem to care much about the team's presence in the village, they did not obstruct the fieldwork.

#### ***2.5. Post-interview – data storage***

As the end of each day, the interviewers uploaded voice recordings of the interviews onto the computer with two backups made on DVD and a USB thumb drive. They also updated the master list of interviewees on a daily basis so that necessary adjustments to the sample could be made based on the information collected that day. Daily post-interview activities also involved checking the household screening and consent forms to ensure that all the necessary information was filled in and interview procedures properly completed.

### **3. DATA PROCESSING**

Each qualitative interviewer was responsible for transcribing voice recordings of their own interviews. The transcriptions were completed by the end of September 2009. Translation work of the transcripts into English was done after the transcribing process and expected to be completed by November, 2009. However, the two translators have taken more time to finish each interview than we expected. Therefore, the translation is expected to delay to the end of December, 2009 as the earliest.

### **4. SOME OBSERVATIONS FROM THE FIELD**

Udon Thani is well known as a major sending area for overseas labour migrants. Almost every working-age individual has moving elsewhere for work, both locally and internationally. It is believed that remittances, especially international remittances, enhance the economic well-being of families back home. This was readily observed through the newly-built houses of those whose family member had gone abroad to work.

According to the interviewers, interviewees perceived working abroad as being more positive than negative. One of the main advantages often reported was the amount of income generated from remittances. Clearly, remittances were recognized as a main form of support for the daily subsistence of left-behind families including the children of migrants. Only a few caregivers expressed concerns about emotional issues that children struggle with when their parents went away or came back. It was also observed that stay-behind mothers who raised children alone often struggled with day-to-day challenges, such as having to look after children on their own, and being watched by neighbours concerning on how well they behaved in the absence of their husbands. These were things that were not investigated in the CHAMPSEA project but may be issues related to the well-being of left behind children.

## CONCLUSION

In Thailand, the significant difference in well-being between TCs from non-migrant households and THs is not profound. Bivariate analysis shows that parental migration status does not have a significant relationship with children's nutritional status, general health, health behaviour, health risk behaviour, school performance, perceived family functioning, general happiness, or enjoyment at school. There is, however, a significant relationship between the migration of parents and children's psychological well-being, which is the key outcome of our study.

Findings from the multivariate analysis confirm that parental migration status is not a significant factor influencing children's physical well-being. The study also revealed that important factors related to children's nutritional problems are low birth weight (stunting and thinness), being male (overweightness), and being in the rich household (overweightness). For TCs from THs, more attention should be paid to their psychological wellbeing as findings from the multivariate analysis suggest that children from THs were more likely to be considered to have psychological problems than children from non-migrant households. Psychological well-being was measured using the SDQ standard questions posed to the TC's carer. Taking into account children's perspectives to their overall happiness and enjoyment at school, results indicate that TCs from THs had a higher likelihood of being very happy and always enjoyed school. Although the relationship between psychological well-being and overall happiness and enjoyment at school may not be wholly linear, these contrasted findings highlight the importance of understanding the impacts of parental migration through a comprehensive and holistic lens. Further in-depth analysis is also needed.

The community where our study took place did not seem to be overly concerned with the overall well-being of children from THs, assuming that they were much more well to do financially as compared to other children. This perception may be reflected in the non-existence of country-level policy related to children left behind by overseas migrant parents in Thailand. The insights gained from this research should be taken into consideration when formulating migration policy, especially with regards to the management of sending workers abroad. Although the number of Thai migrants working in other countries is relatively small, the numbers have been increasing especially with the move towards "One ASEAN" amongst members of the ASEAN community. Transnational families are therefore expected to be more common. The adverse effects of overseas parental migration on the health and well-being of young children should be foreseen and better accounted for on both the national and local level.

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