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Internews empowers people worldwide with the trustworthy, high-quality news and information they need to make informed decisions, participate in their communities, and hold power to account. We seek to realise the potential of a digitally connected world: a world in which evidence-based information advances human progress, enables broad opportunity and accountability, and fuels vibrant civic debate.

For more than 35 years, in more than 100 countries, Internews has worked to build healthy media and information environments where they are most needed. We have proudly incubated hundreds of sustainable organizations, bolstered the skills of thousands of media professionals, activists, and citizens, and helped these partners reach millions of people with quality, local information. Internews, an international nonprofit organization, operates with administrative centers in California, Washington DC, London and Paris, as well as regional hubs in Bangkok and Nairobi. Formed in 1982, Internews has worked in more than 100 countries and currently has offices in Africa, Asia, Europe, the Middle East, Latin America and North America.



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executive summary

During a pandemic, there is a pressing need for people to be able to access accurate and timely information to increase awareness of health risks, promote practical methods of prevention, and to inform people how to access vital health services for care and treatment.

Communities need information in the languages that they understand and have communication channels available in the language they are most comfortable asking questions in, so they may take precautionary measures to protect themselves and their families and to be able to easily verify the information they receive.

The COVID-19 pandemic has seen a proliferation of information being spread via local and international media, online and through social media channels. The so called "infodemic" meant risk communication had to tackle simultaneously information gaps and information fatigue. While there was a lot of information produced, it was often not produced locally, but created for a global audience, often in English. It also meant that while it might have been accurate to begin with, it was not necessarily adapted to the local context and at times, was outdated by the time it would reach a more remote community.

Misinformation from so-called trolls, bots and the speed at which information travels online is making it even more difficult for health communicators to be able to reach communities with the information they need, respond to questions and concerns and to be able to maintain clear lines of communication. Frequent interaction with incorrect or unreliable information can quickly translate skepticism into distrust, creating an obstacle for true and necessary information to permeate.

Thailand has become an increasingly attractive destination for migrant workers from neighbouring countries in the Greater Mekong Sub-Region. The World Bank reports that Thailand is the fastest growing destination country in ASEAN, with an increase of 3 million regional migrants between 1995 and 2015 (World Bank, 2018).

Inaccessibility to access information in their primary language, and low comprehension of Thai language puts these workers at a distinct disadvantage in accessing information relevant to their context. While many migrant workers benefit from a high level of internet connectivity, they struggle to access verified content in the languages and the formats they prefer.

At the same time, migrant populations are likely to feel significant impacts of the pandemic, due to unstable employment and interrupted access to adequate health care and social welfare provisions. Their ability to cope with the economic, social and psychological impacts of the pandemic can be further affected by their living and working conditions, lack of consideration of their cultural and linguistic diversity in service provision, prejudice, stigma, their limited local knowledge and networks, and access to rights and level of inclusion in host communities, often related to their migration status.



This Information Ecosystem Assessment includes the thoughts and opinions of 48 migrant community leaders and migrant workers in Thailand. The information was collected through a series of qualitative and quantitative techniques, using remote data collection methodologies to ensure the safety of participants and researchers and compliance with global and Thai specific restrictions on movement and gathering.

We aimed to better understand how information is accessed and how it flows through this community. We hope that findings of this research will support improved communication with migrant populations, both during this pandemic and in future crises.

key findings

information needs:

Information on labor rights and immigration status is not widely available and contributes to increased anxiety, and exploitation of migrants by employers.

Risk communication during the pandemic readily conveys how to prevent spread and how to identify symptoms, but most migrants are more concerned about the economic impact of the crisis, and the impact on their legal work and immigration status.

I'm not prioritising the COVID issue now, but I want to get severance pay for unemployment... The information related to COVID-19, I have no problem to access. All I want to know is about our benefits and severance payment issue now.

Myanmar male, age 37.



information landscape:

Migrants with a low comprehension of Thai language are dependent on community leaders, NGOs and secondhand information delivered through informal networks.

Migrants called for government and media to share more information relevant to them in their primary language or to use more simplified Thai terminology when sharing health information and explaining government restrictions in relation to COVID-19.

After I read the LIVE today
[Thai language content], I
write the information I think
is most important in Khmer
language to post on Facebook
for them [other Cambodians].
Any important information,
we should make it simpler
for them when they ask.

Cambodian male, age 46.





key findings continued

production and movement:

Facebook is the primary channel through which migrant workers access information during the pandemic. Facebook is a principle channel to access information, stay connected to their friends and family in Thailand and back home.

Because of social media we can keep in touch and because of that, people are overloaded with much information as well. Even my niece, she has her own little daughter and she is overloaded with information on how to care and prevent her child from getting COVID-19.

Myanmar woman, age 45.

dynamic of access:

Access to smartphones and a reliable internet connection play a key role in getting timely and reliable information. Migrant workers feel lack of ownership of a smartphone or poor access to the internet significantly increase vulnerability.

For agriculture/cultivation group, it is a bit difficult to access the information, due to lack of technology skills and equipment. For them, they will try to access information through MAP radio channel for them when they ask.

Myanmar male, age 37.

99

use of information:

Timeliness and contextual relevancy of government information impact how useful the information is to migrant groups. Many migrants reported that they felt that information related to government restrictions, such as the closing of the borders, self-isolation and curfews were not delivered with enough time for people.

Even though we could be informed about the situation and policies the Thai government implemented, it is impossible to comply because the financial situation. The self-quarantine policy that asks us to stay at home - even though it could protect us from the virus, we cannot afford to stay at home as most of us are daily workers - no work, no food.

– Laotian male, age 53.

99

access to treatment:

While migrants feel well informed about disease prevention, information about how to access testing and treatment is lacking. In addition, some migrants are hesitant to access healthcare out of concern about the spread of the pandemic, a history of negative experiences with health care services and for fear of arrest or detention if their work permit has expired.

The staff in the hospital do not respect migrants because they just hold worker status, they speak in an unfriendly way with a negative tone. Thai people discriminate against people from Myanmar through history.

Myanmar male, age 42.



key findings continued

social trust:

Migrants place a low trust in information coming from friends and family. When friends, family members or other migrants convey information to one another, whether in-person, by phone, or social media there is greater desire to confirm the validity of this information.

The source I trust the least is face-toface communication within the
migrant community. They like to share
information through based on what
they are hearing from others/
friends. I'm not sure whether the
information is true or not. I can't
fully trust such information unless I
found out it is true what they stated.

- Cambodian male, age 35



influencers:

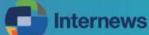
Community leaders, landlords and employers play a pivotal role in conveying key information to migrants. Bosses, landlords and people in leadership positions are more likely to speak Thai and they are perceived to be better informed than friends and family. However, they may also struggle to access quality information or verify sources.

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Laotian woman, age 29.



Cambodian migrant workers at the Thai Cambodian land border in Pailin province - Sonny Krishnan/Internews



background

In a crisis, access to trustworthy, timely and reliable information can be lifesaving. However, in the COVID-19 pandemic, consumers continue to receive an onslaught of conflicting information from health authorities, governments and well meaning, but misguided advice from friends and family. This 'infodemic', fed by the dynamics of our modern, technological, information-rich global society, has led to an overabundance of information, a mix of facts, rumours, and misinformation, making it difficult for people everywhere to find trustworthy sources and reliable guidance (United Nations, 2020).

Reliable information is paramount to keeping safe and healthy as well as knowledgeable about how to access key resources when needed such as COVID-19 testing, treatment and practical preventative measures. Misinformation is potent, difficult to mitigate, and is an obstacle to the effectiveness of public health response to the pandemic.

Medical science has never moved so fast and the average consumer cannot possibly keep up. **Since January, more than 23,000 medical science papers have been released** (Johns Hopkins University, 2020), hundreds have been retracted and thousands more will be released in the coming months as the world races to create a vaccine. However, this information is inaccessible to the average person. The language and concepts are complex, overwhelming published in English and while communicators wait for definitive answers, rumours and misinformation quickly move to fill these information gaps.

Online, information travels with ease and speed and what might be accurate and relevant in one context, may be impractical, dangerous or confusing in another. As the information moves, it may become distorted as it is translated from one language to another, fuelled by community fears, hopes or a deliberate will to distribute harmful disinformation to disrupt or promote personal gain from response attempts.

Thailand hosts an estimated 3.9 million migrant workers from Cambodia, Laos, Myanmar and Vietnam. Migrant workers make up 10% of Thailand's labor force and Vietnamese. Low literacy and comprehension of Thai language puts these workers at a distinct disadvantage in accessing information relevant to their context.

While some benefit from a high level of internet connectivity, they struggle to access verified content in the languages and the formats they prefer. The Government of Thailand has attempted to address this information access issue by creating migrant worker hotlines available in relevant languages, but awareness of the hotlines is not widespread and migrants continue to rely on community leaders to filter information to them.

At the same time, migrant populations are likely to feel significant impacts of the pandemic, due to unstable employment and interrupted access to adequate health care and social welfare provisions. Their ability to cope with the economic, social and psychological impacts of the pandemic can be further affected by their living and working conditions, lack of consideration of their cultural and



background

linguistic diversity in service provision, prejudice, their limited local knowledge and networks, and access to rights and level of inclusion in host communities, often related to their migration status.

In order to understand how to best reach the migrant population with the information they need, this assessment aims to understand the information ecosystem within which they communicate. The term Information Ecosystem refers to a loose, dynamic configuration of different sources, flows, producers, consumers, and sharers of information interacting within a defined community or space. For anyone interested in improving information access, flow and uptake in target communities, an understanding of Information Ecosystems are increasingly recognised as being key to the design of appropriate and effective interventions.

Key informant interviews were conducted with 48 migrants in Thailand, including male and female documented and undocumented migrants from Myanmar, Cambodia, and Laos. Mapping the information needs, information landscape, use and impact of information, will help the Thai government, NGOs and other key stakeholders ensure the biggest impact of information transmitted to migrants during the pandemic.



Migrants who have limited knowledge of Thai language and reliable sources in Myanmar language are more vulnerable and have difficulty accessing information during pandemic as the Thai government usually announces update information and news only in Thai Language.





Migrants play a key role in the economic infrastructure and future development of Thailand. Consideration of their health and information needs during the pandemic is necessary to ensure post-pandemic economic recovery.

While this report focuses on the migrant population in Thailand, these factors are relevant for migrants living in many contexts around the world. As we've seen in Singapore, if all groups, including migrants are not included and catered for in COVID-19 response and recovery efforts, countries risk prolonging the outbreak, including second waves of infection as well as other significant direct and indirect economic consequences.



Context - migrants in Thailand

Thailand is host to approximately 3.9 million documented and undocumented migrant workers from neighbouring Cambodia, Lao People's Democratic Republic, Myanmar and Viet Nam. Other major groups include an estimated 480,000 stateless persons, 110,000 skilled professionals and 100,000 refugees and asylum seekers (IOM, 2019).

Constituting over 10 per cent of the total labor force, they work predominantly in agriculture, fishing, as domestic help and in the informal economy.

The need to satisfy demands from the private sector to fill labor shortages led the Thai government to sign labor cooperation agreements with Cambodia, Myanmar and Laos in 2002-03. This bilateral policy, still referred to as the memoranda of understanding (MOU) along with the Nationality Verification (NV) process, a form of regularising the status of undocumented labourers already in Thailand in 2009 have led to a substantial increase in migrant workers over the last two decades.

While 20% of migrant workers are undocumented, 3.1 million work within Thailand with a government work permit. Most migrants (68%) come from Myanmar; there is a fairly even split across gender (49.8% male, 50.2% female); and most work permits are issued for work in Bangkok (52%) (United Nations Thematic Working Group on Migration, 2019).

In 2001, a migrant health insurance scheme was established to cover health screening and treatment for migrants, both documented and undocumented. While documented migrants are eligible for health insurance under the national social security plan, the introduction of migrant friendly health services further expanded coverage and supports improved migrant health outcomes.

Since 2003, migrants have served as community health workers and volunteers in select districts within seven provinces with a high concentration of migrants. The policy has provided migrants the ability to receive health information and advice in their primary language and allowed for increased access to other services available at health facilities (Tangcharoensathien, 2017).



Context - migrants in Thailand

In Thailand, literacy rates are high (around 95%), and access to printed and online media is common for the general Thai population. However, minority and migrant communities living in Thailand may struggle to access information due to a myriad of barriers, most obviously, language. A recent study from the Thai Ministry of Public Health (MOPH) on health literacy amongst migrants in Thailand examined reading and listening comprehension in Thai and the ability of migrants to access, understand, and appraise health information.

Amongst those surveyed, Myanmar migrants were more likely (18.97%) to be proficient in listening comprehension for Thai, and 7.76% were at a proficient level of reading in Thai. The proportion of general migrants with favourable health literacy score was 15.52%. A low health literacy score compounded by misinformation and obstacles in accessing health services can lead to poor health outcomes in migrants (Kosiyaporn, 2020).

At the beginning of the pandemic, job uncertainty and the period for annual renewal of work permits saw tens of thousands of migrants rush to border areas to return to their home countries. While an estimated 60,000 were able to cross the border, migrant support organisation Metta estimates that 90 percent of all Myanmar migrants lost their jobs, and over 750,000 people were stranded in Thailand when the borders were closed without any income (Fawthrop, 2020).

Migrant groups reported that 500,000 migrants had not received health insurance renewals due to their loss of work permits and around 1,000,000 migrant workers were without social security (The Diplomat, Fawthrop, 2020). Three Thailand-Myanmar border checkpoints were reopened in mid-May but with Myanmar ill-prepared to provide sufficient quarantine facilities for returnees, only 50,000 had been accepted for repatriation by June, with the remainder languishing in border towns in conditions conducive to the spread of disease.



Migrant workers in a longan fruit plantation in Thailand's Chantaburi province Nat Sumon, Internews



High mobile phone ownership and high internet connectivity levels result in an increased exposure to unlimited and potentially unverified information from a variety of sources. Thailand is considered advanced in the state of mobile connectivity, consumer readiness and infrastructure amongst other indicators (Bahia, 2019). In Thailand, there are 92.3 million phone numbers (amongst a country population of 69.4 million); 57 million people have internet access with 98% of those who access the internet, connecting through a smart phone; 51 million people use social media with Facebook (93%), YouTube (91%), LINE (84%) and Facebook Messenger (72%) being the most popular platforms. However, as this report shows, while migrants in urban areas may have relatively easy access to the internet, there are migrants who move in and out of areas of low connectivity or do not own smartphones and lack access to critical information.

During the COVID-19 pandemic, migrant populations are at a heightened vulnerability for misinformation which can impact their decision-making behaviour. Living in a different cultural context, where information is communicated in a language other than their preferred language and where recommendations may not take into consideration the nuances of their living and working conditions or their ability to access healthcare, places them at greater vulnerability.

research methodology

Information Ecosystem Approach

Information Ecosystem Assessments are aimed at understanding how information flows through communities as seen from the perspective of the information consumer. The human-centred approach of mapping experiences at the local level looks beyond formal media outlets and takes into consideration how informal, cultural, and social media factors facilitate and impact how information, both reliable and false, makes its way through a community.

The information ecosystem is inclusive of the physical and institutional infrastructure that supports information production and flow (e.g. media outlets, government, private industry, civil society etc.) and factors in the environment that influences information access (e.g. political, cultural, economic, technological). The impact and application of this information can be understood by examining structures of influence and social trust and how this ultimately leads to behavioural change within the target population.

Meeting and interacting with information consumers where they are is foundational to this approach. Restrictions on international and internal movement within Thailand due to the COVID-19 pandemic caused a shift from migrants occupying physical social spaces, to virtual and remote spaces.



Similarly, in order to enable the team to collect data with the restrictions of physical distancing measures, the identification of participants, interviews and discussions were conducted remotely to incorporate communication platforms the target audience prefer to use.

1.Surveys

Survey questions were sampled and adapted from previously validated questionnaires and surveys from Internews (Internews Humanitarian, 2020) and guidelines from the Communicating with Disaster Affected Communities Network (CDAC) and the Assessment Capacity Project (ACAPS) (ACAPS, 2014).

Quantitative and qualitative questions were clustered under the following themes:

- · Communication channels before and during the pandemic
- · Barriers to accessing information for the general target population and any known highly vulnerable subgroups
- · Trust for information types, sources, and key influencers
- · Additional information needs beyond what is being presently communicated
- · Preferred channels for two-way communication with government and aid agencies

Surveys, including an informed consent statement, were translated from English to Thai, Myanmar (Burmese), Khmer and Lao. Thai and Myanmar translation services were provided by Translators Without Borders, Khmer and Lao translation was conducted by the research team.

The assessment conducted non-probability sampling of participants. Participants were selected using convenience and snowball sampling with entry points into the Myanmar, Cambodian and Laos migrant communities beginning with contacting NGOs in Thailand working with migrants, Facebook groups or influencers, and the networks of the interviewers who were either migrants themselves and/or had previously done work supporting this population. The quantitative survey was implemented using convenience sampling, by sharing a survey link across established contacts, LINE groups and Facebook groups with a significant migrant audience.

Participant selection was based on a maximum variation approach of notable population characteristics as identified by organisations working with migrants. Proportions of these characteristics were aimed at achieving a similar distribution based on documented profiles of migrants in Thailand. These characteristics included irregular (undocumented) status and regular legal status (documented work permit); male and female; and working in Bangkok and outside of Bangkok:

Table. Maximum variation of notable characteristics based on migrant population profile			
	UN Thailand Migration Assessment Population		
	Report 2019		
Women	50.2%	50%	
Irregular (Undocumented)	21%	25%	
Myanmar	68%	46%	
Working in Bangkok	52%	54%	



Participant age was documented during interviews but was not included in the selection criteria due to the additional constraints it would pose in preselecting interviewees. Vietnamese migrants were initially to be included in the research, but due to the small proportion of Vietnamese migrants and challenges to identifying diverse entry points into the community, they were excluded. The MOU signed between Viet Nam and Thailand has yet to be implemented and only permits employment in the fishing and construction sectors, where a relatively small number of Vietnamese migrants (almost exclusively men) are employed. Whether migrants considered themselves community leaders or community members was also considered to ensure the inclusion of perspectives from individuals that might be key influencers in the community

2. Key Informant Interviews

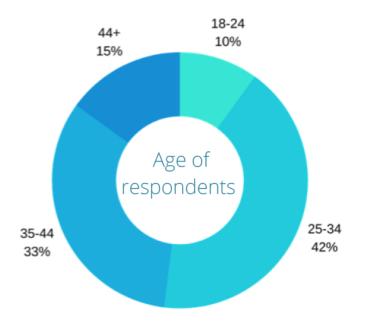
Conversations with community leaders and members who participated in the KIIs were conducted over three weeks in May 2020. Participants were able to choose the language they preferred to use in the interview as well as the platform (if they would like to speak by phone, LINE, Facebook Messenger or using other voice communication platforms). The initial sample target was 60 individuals, however as data saturation was reached, this number was decreased to 48.

Interviewers who spoke Myanmar, Karen, Khmer, or Lao obtained informed consent to record interviews for note taking, which they then translated into English for analysis.

Table. Final Sample Key Information Interviews (Klls)					
Country of Origin	Total	Myanmar	Cambodia	Laos	
Total Interviews	48	22	16	10	
	100%	46%	33%	21%	
Gender					
Male	24	11	8	5	
	50%	23%	17%	10%	
Female	24	11	8	5	
	50%	23%	17%	10%	
Community Role					
Leaders	14	8	4	2	
	29%	17%	8%	4%	
Members	34	14	12	8	
	71%	29%	25%	17%	
Work Permit Type					
Documented Work Permit	36	15	13	8	
	75%	31%	27%	17%	
Undocumented	12	7	3	2	
	25%	15%	6%	4%	
Work Geography					
Bangkok	26	14	6	6	
	54%	29%	13%	13%	
Outside Bangkok	22	8	10	4	
	46%	17%	21%	8%	

Community leaders (n=14) included a public servant, NGO employees, social media influencers, members of community support organisations (CSOs) and other local leaders. Community members (n=34) included those who laboured in domestic work, farms/plantations, factories, construction, fisheries, shop keepers/employees and other day labourers.

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A notable difference between responses from community leaders and community members were that leaders felt they had a much more solid grasp of information and services being provided by formal channels including informational hotlines and eligibility and locations for testing and treatment of COVID-19.

Other remote data collection methods

Conducting research during times of physical distancing brought unique challenges. While Information Ecosystem Assessments usually require researchers, recruited from within the community, to engage with participants in face to face discussions and focus group discussions, this was not possible due to movement restrictions and for both the safety of the participants and the researchers. To overcome this challenge, the research team deployed a series of remote data collection methods. In early June 2020, a pilot group discussion was conducted over Facebook Live. Initially, the session was designed to be run as a talkback radio discussion on MAP radio, a radio station with a diverse migrant audience. However, as the organisation confirmed that many migrants access the radio broadcasts via Facebook and prefer to communicate online, the methodology was adapted.

The format included a panel discussion between three community leaders representing the Thailand offices of the following migrant affiliated organisations: MAP Foundation, Human Rights and Development Foundation (HRDF), and Raks Thai Foundation (RTF). Our Myanmar speaking Field Research Assistant used a conversational style to discuss key barriers migrants may face when accessing COVID-19 information in Thailand. Viewers were then encouraged to participate in the discussion using the comments section. The discussion aired live and was cross-posted between the Facebook page of Internews COVID-19 program (3,000+ Followers) and MAP Radio (33,000+ Followers).

Live viewership reached a maximum of 20 during the broadcast, afterwards the post reached 4,500+ and engaged 2,500+ (engagement includes the total likes, comments, or clicks on an associated link; reach is how many people watched the post). While the reach and engagement were higher than expected, this did not translate to an increase in migrants sharing personal experiences that could be used in this research.

There is ongoing research to examine how Facebook can be used as a space to host focus group discussions. While some research has found an equitable level of nuanced and sensitive information being shared in comparison with in person FGDs, further examination into the approach of conducting online FGDs is warranted.

3. Data Analysis

The quantitative survey was programmed into Kobo ToolBox and a link powered by Enketo to the survey was shared across multiple platforms including Facebook and LINE. Despite efforts to boost the visibility of the survey, there were only 31 respondents, 16 of whom identified as a migrant currently working in Thailand or having recently worked there in the last three months.

While qualitative interviews were able to be conducted over familiar and self-selected platforms such as Facebook Messenger and LINE, survey host sites like Kobo ToolBox powered by Enketo, Google forms, or Survey Monkey were less familiar to our audiences. This may have contributed to the lower than expected uptake of the survey. While trusted social influencers were engaged in the project, Internews does not have a physical presence on the ground serving migrant populations and this lack of familiarity and unestablished trust may have contributed to low response rates.

A chatbot designed for use in Facebook Messenger was also considered. However, the length or survey questions, and multiple-choice answers did not translate well to the format. In the testing phase, it became clear that users would have had to scroll significantly to clearly read all the available text which would likely lead to confusion and missed questions/responses. Future IEA's could consider creating a simplified/shortened version of surveys to better fit this platform or producing audio recordings of questions in local languages.

4. More Challenges

We also faced challenges programming the survey using Myanmar script. Myanmar uses two main programming codes in their fonts: Zawgyi and Unicode. Unicode is a character set, and the current world standard, but the Zawgyi font is encoded in another character set, the Windows 1252 Code Page, which assigns totally different numbers to the Myanmar characters. In practical terms, this means that some devices can read one, but not the other. Before programming the Myanmar text into Kobo ToolBox, the researchers were unaware of this challenge, even though this challenge does not seem to be uncommon. A partner organisation, also surveying the migrant population in Thailand, used Survey Monkey to conduct their research. They reported that more than half of potential respondents had issues with the Myanmar font on their phone. They subsequently printed surveys, distributed within the target communities, and arranged collection and data entry.

With a coronavirus vaccine yet to be developed, and comprehensive testing and contact tracing initiatives not yet universal, mobile and internet-based data collection services are highly needed. Interactive Voice Response (IVR) surveys have been reported to be best utilised when delivering rather than collecting information (Bolton, 2018). SMS surveys often show a low level of initial response, and an even lower level of subsequently finishing the survey in similar high connectivity, low resourced areas (Johnson, 2016). Contextualising qualitative interviews with quantitative data helps to bring about a more complete understanding of the target population, and other approaches to remote mixed methods assessments will be evaluated in future IEAs.



Information Ecosystem Assessment

1. Information Sources

For many migrants, their community leaders are an important source of information. The research also investigated the sources these community leaders had access to, what sort of assistance is requested of them by migrants, and their perception of information accessibility and inclusiveness of migrants.

General information, such as health prevention measures, resources and opportunities during the pandemic was shared on Facebook group pages (See Annex 1. Facebook Groups Utilised by Migrants in Thailand).



Many leaders noted that before the pandemic, face-to-face meetings and visits were how they commonly conducted their work, with support from Facebook Messenger and LINE. With the inability to meet in-person some leaders were worried that migrants would be less likely to use digital communication to report workplace issues or exploitation and they were also concerned about the health and safety of migrants who were still working. While migrants living and working in Bangkok were more likely to have a smartphone with an internet connection, community leaders noted that migrants working in the agricultural and fishing industries were less likely to be connected. Remaining in contact with these workers had become more challenging.



Migrants need more information from reliable sources because many migrants have limited education and knowledge, so they easily accept rumours especially in this pandemic period when information is overloaded on social media.

Migrants also need more information related to Visas, work permits, updated situations and emergency announcements from the Thai Government in an easy to read and understand version because some official announcements are difficult to understand with technical and formal words for Myanmar migrants who have only basic Thai language skills.

Myanmar woman, age 25.





They noted that migrants did have a need for more information in their local languages as well as for more simplistic terminology to be used in Thai language content. Complex health terminology was a difficult hurdle in understanding public health messaging that would otherwise be understood by some migrants. MAP Foundation content was noted as one of the most readily available and reliable sources of Myanmar content. An increased use of audio and video content were necessary to overcome literacy issues and reach an increased number of migrants.

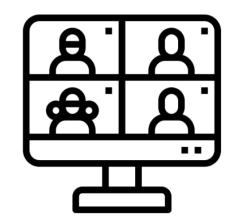
Resources from and direct contact with the Migrant Working Group, MAP Foundation, IOM, Mae Tao Clinic and Mae Sot Hospital (Facilities providing free health services for refugees and migrants in Myanmar) were frequently cited by leaders as a way to access information to share. Embassy staff or call centres were also noted as a reliable source. Some solicitation of information was informal, leaders commonly reported having the personal number of different embassy or organisation staff and would periodically call them directly with questions. Labor Law Clinic (LLC) and Human Rights Development Foundation (HRDF) were mentioned when citing information about labor rights.

Assistance that migrants requested from community leaders during the pandemic mainly focused on labor rights, employment, visas and work permit status and status of the border opening.

2. Communication Channels

Community members were asked about the information and communication channels that were available to them before and during the pandemic and if/how migrant communities organise themselves to access information when something important happens.

Besides community leaders, Facebook messenger group chats and LINE (a voice/messaging app) were overwhelmingly the most common ways that community leaders remained in contact with migrants that they supported. LINE channels were also used to create hotlines for migrants to call into, though typically they were used for the chat features and creating groups.



For example, A migrant domestic worker group used a LINE group to share information with more than 100 Burmese domestic workers who work in homes around Bangkok. These workers used the group to access COVID-19 prevention methods for themselves, but also for their employers who were often Thai nationals or expats who travelled regularly.

Television was often watched through streaming on Facebook. The most frequently mentioned TV networks were Channel 3, 5, 7, and Thairath. Besides less in-person contact, migrants did not note much of a difference in how they accessed information or what pages and channels they followed before and during the pandemic.



There was a heavy reliance on audio or video content due to some literacy issues even in their local languages. It was mentioned that Thai content was easier to understand when it was accompanied by descriptive graphics.

Bosses and team leaders were frequently mentioned as people that they would go to for information especially when there was no language barrier. Family members or colleagues sometimes served as an interpreter if the individual was not able to understand Thai. These types of information gatekeepers were also seen as necessary to access key services in Thailand.



When the workers are in trouble, they would reach out to their team leaders in their factories to find out how the issues could be solved. They would listen because the team leaders are very close to the factories and some recruited them in Cambodia because workers have no one to rely on.

If there are problems of harassment or verbal arguments within their community, they still reach out to team leaders because they could not communicate to the police due to language barriers. Workers don't know how to write a complaint to police and team leaders can communicate with the embassy

- Cambodian woman, age 38.

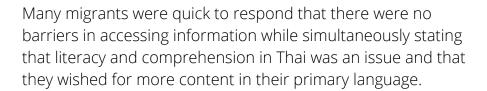
Researchers noted rising concerns from migrants about security and privacy across internet platforms and a desire to know which apps and messaging platforms were the most secure and least vulnerable to hacking.

Burmese and Cambodian migrants were more likely to reference communicating regularly with other migrants from their country of origin. Laotian migrants often cited similarities in language and culture with Thailand as reasons why they typically face fewer challenges in accessing information and are less likely to interact with one another or communicate using Laos migrant community LINE or Facebook groups.



3. Information Barriers

Participants were asked what sort of barriers prevented them from accessing the information they need. They were also asked to describe a time they could not access the information they needed and if, in their opinion, there were particular groups of migrants that might be most vulnerable to gaps in information during this time.







The Thai government gives information to its people but for us if we are not able to understand. It's up to you because they don't target Khmer people, but if you are able to understand [Thai] you get it.

- Cambodian woman, age 30.



In later responses, some migrants explained that while they felt that information in Thailand is geared at Thai people and not migrants, they did not have an expectation that the media in Thailand should be responsible to meet their information needs, including providing information in other languages.

There is an expectation that embassies should work more closely with the Thai government, to ensure the financial

and health status of migrants during this time. Providing information and resources for migrants in Thailand was much more likely to be felt as a responsibility of home country embassies than a direct responsibility of the Thai government.

Community leaders noted that migrants did have a need for more information in their local languages as well as for more simplistic terminology to be used in Thai language content. Complex health terminology was a difficult hurdle in understanding public health messaging that would otherwise be understood by some migrants. MAP Foundation content was noted as one of the most readily available and reliable sources of Myanmar content. An increased use of audio and video content were seen as necessary to overcome literacy issues and reach an increased number of migrants.

One community leader who supports migrant workers' rights noted that factory managers at times restrict his access to meet with employees. While the management of the factory might approve his visits, there have been instances where he has been blocked from entering the site when he arrives to meet with migrant workers.

While migrants felt that access to risk communication content such as COVID-19 symptoms and prevention practices were readily available, they struggled to find out which clinics offered



coronavirus testing and treatment and to access information on how to safely travel to those clinics.

Both leaders and members suggested that the groups that were most vulnerable to a lack of information or exposure to misinformation were those who would not have access to a phone or an internet connection. These could include migrants employed in fishery or in agriculture and were either at sea or in remote geographical areas without connectivity.

At the start of the COVID-19 outbreak, I was very broke, without money to put in my phone to use Facebook. So, I kept asking people, 'how's the situation now for COVID-19?'

I was worried about my people at my Cambodian home. Sometimes I was crying alone. We do not have a single penny and I did not know who to ask for help.

Cambodian woman, age 28.

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Another respondent noted that a loss of employment meant that she could not afford phone credit and became reliant on her neighbours to inform her of what was going on.

4. Information Trust

Participants were asked what their most and least trusted source of information was. Researchers also asked what they do if they encounter information that they doubt the veracity of, and how they feel issues relating to migrants are covered in the Thai media including instances of prejudice or stigma.



Understandably, Information trust was heavily influenced by the information source. Many reported that if information is passed by word of mouth or from a personal rather than group Facebook page, they were more likely to doubt this information, or feel the need to verify it with more reliable sources such as the ministry of health platform or trusted television networks.

Historical prejudice was mentioned by several Burmese and Cambodian migrants. While some said this was a thing of the past, others reported an increase in stigma during the pandemic as some migrants were perceived as being vectors for transmission. Those who noted no real stigma included some migrants that had lived in Thailand for a longer period of time or Laotian migrants who felt they could blend more seamlessly into Thai culture and who were more likely to live amongst Thai people than within a community of other Laotian migrants. The majority of participants said that even if they had not personally experienced prejudice or stigma, they rarely saw the perspective of migrants and issues affecting migrants covered in the Thai media and would like to see these issues addressed more regularly.





10 years ago, there was some stigma about Myanmar people historically, so I lied about my nationality to my friends and taxi drivers - but it has improved now. I rarely hear about discrimination against Myanmar migrants in my community nowadays. However, in some communities there was some stigma during pandemic because local people see migrants as virus carriers.

- Myanmar woman, age 45.

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Understandably, Information trust was heavily influenced by the information source. Many reported that if information is passed by word of mouth or from a personal rather than group Facebook page, they were more likely to doubt this information, or feel the need to verify it with more reliable sources such as the ministry of health platform or trusted television networks.

5. Information Needs

Participants were asked what information they needed and if they perceived information coming from the Thai government considered the specific needs of the migrant community. They were also directly asked how easy it is to access information about labor rights and how to receive testing and treatment for COVID-19.



Common information needs included: wondering when the pandemic will be over, what will be the status of jobs when that happens, how those who have lost their jobs can receive support, and when will the border be open so people can leave Thailand.

Many migrants have seen aid agencies such as IOM operating where they live, and they would like to see more communication from these agencies and believe that these organisations can help respond to their additional information needs.



There are many jobless migrants because of pandemic in Thailand so both sides of government should think about how to support those people as some would like to return to their original country, but the border gates haven't opened yet. They already spent all of their March salary in April and they have nothing left to spend in May.

Myanmar woman, domestic worker - age 44.





6. Safety and Security

Community leaders and members were asked how they would most like to be in contact with aid agencies and the Thai government. Researchers also asked about the perceived safety and security in sharing information including sensitive information, and how COVID-19 information from their home country compares to the information available in Thailand.



Most individuals interviewed feel safe communicating with those within their community, and waiver between feeling comfortable and hesitant about communicating with those outside their communities. People feel mostly safe discussing health information, but anything related to politics is considered highly sensitive and migrants felt they should not be discussed outwardly.

Undocumented migrants or migrants with lapsed work permits and visas are worried about being discovered by the police and being fined or going to prison.

I feel worried about safety - getting arrested or physical attacks by the business owners or factory or anyone.

Cambodian Male, age 35.

Infighting was mentioned by a few Myanmar migrants, saying I sometimes impacts their ability to communicate with other Myanmar migrants.

Migrants prioritised information about the pandemic from Thai media, rather than information from home country media outlets, as migrants wanted information that was more relevant to their current living situation.

Respondents wanted to remain up to date with information about the disease spread, but also about government announcements such as curfews and border opening/closures. Most migrants were still frequently in touch with family back home and might listen to information about preventative measures regarding hand washing and mask wearing, but otherwise, they were mostly focused on supporting one another.

I think information from Thai government is more applicable and reliable for us as we are staying under their governance.

Myanmar Male, age 24.

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recommendations

Communication starts with listening to concerns: Insufficient information on labor rights and immigration status contributes to increased anxiety, and exploitation of migrants by employers.

Clear communication should also be founded on the actual questions and concerns of the community. It is important to communicate from the perspective of the people we are trying to help. By understanding the main concerns and addressing those, other important information about the pandemic is more likely to be accepted if it's linked to these primary concerns.

Risk communication during the pandemic has primarily focused on increasing awareness of COVID-19 symptoms and preventative measures to protect yourself and slow the spread of the outbreak. However, most migrants surveyed are first and foremost concerned about impact of the pandemic on their jobs and their legal status. Migrants said they did not find it difficult to find basic health information in relation to the pandemic, however they struggled when trying to find information that related to their work status and labour rights. Many migrants were place in an extremely vulnerable situation as many workers lost their jobs, could not cross the border to return home and were unaware of what entitlements they may have been eligible for or how to access them.

Remittances sent home by migrants to their countries of origin are a critically important and sometimes lone source of income for their family members. However, these remittances also leave many migrants with fewer savings or a financial buffer in Thailand. While the Thai government has established legal protections for some migrants with respect to severance pay, and set up a multilingual hotline for documented and undocumented migrants, many migrants were unaware of this service and relied on community leaders and employers for information about employment rights.

Many migrants reported that they felt that the information about the closing of the borders was delivered in a very sudden and abrupt way. This caused what they often referred to as the "flood," a high influx of migrants traveling to the borders, some who were able to cross, others who had to remain on the Thailand side, and others who would otherwise had preferred to return to their home countries felt they did not have enough time to prepare. Domestic workers seem most able to adhere to stay at home ordinances and curfews, but those migrants who can continue working find their need to work to be at odds with the movement restrictions. They at times risk arrest or exorbitant fines to continue working.

Government and other risk communicators need to take into account the distinct information needs of migrants, regardless of their migration status, must be considered as an integral part of any effective public health and recovery response to COVID-19. This begins with not only ensuring two-way channels of communication are opened that cater for language and literacy needs, but that these channels are well publicised via the information sources and platforms migrants already trust and use.



Secondhand messengers:

Migrants with low or no comprehension of Thai language are dependent on community leaders, NGOs and secondhand information delivered through informal networks.

Migrants who felt confident in their listening and reading comprehension in Thai were more likely to feel secure in the accessibility and reliability of information available to them, which was predominantly coming from the Thai government or public broadcast networks.

Migrants with a low or no proficiency in Thai stated that the complex bureaucratic and health terminology used in Thai government announcements and media made it difficult for them to access and fully understand the information. This resulted in a dependency on migrant organisations such as MAP Foundation or on friends and colleagues to interpret the information for them. There is a strong desire to have more information accessible in their primary language, which would also reduce the chances of information being misinterpreted or misunderstood.

While direct access to information and communication channels for migrants should be increased as previously stated, there is also a need to ensure that these key information influencers, such as migrant leaders have the tools they need to provide accurate information to their communities in the languages they prefer.

Social media, the problem and the cure:

Facebook is the primary channel through which migrant workers access information during the pandemic.

For most migrants surveyed, Facebook is the principle channel to access information and stay connected to their friends and family in Thailand as well as back in their home country. While television and radio content were also mentioned, migrants still predominantly accessed this information through Facebook, Facebook LIVE broadcasts and Facebook Messenger.

Connection to information from the Thai government, NGOs, employers, colleagues, and other community connections is accessed with such a high frequency over Facebook that "the internet" and Facebook" are practically synonymous terms. It is a primary lifeline for most during the pandemic.

Social influencers such as migrant community leaders and embassy officials regularly provided COVID-19 updates on their Facebook pages. Facebook was also a portal for some migrants to access media from their home country or to form private groups to discuss workplace conditions.

However, as for many communities, the deluge of information on social media can be difficult to verify, especially when primary source content is not in your primary language. Official information can easily be lost in the mix of opinion, hearsay and rumour.



Social media the problem and the cure

However, the strategic us of social media to provide information that responds to migrant questions and concerns will work to slow the spread of misinformation in the community. As migrant leaders rely heavily on Embassy and consulate staff for up to date information, these institutions should ensure they increase communication via online platforms to ensure the information is more accessible to a wider migrant audience and does not rely on 'personal connections'.

For example, despite Burmese migrants being the largest group represented in Thailand, the Myanmar Embassy in Bangkok should consider relaunching their Facebook page. The last post on their page is from September 2014 and they currently have ~2,000 followers. In comparison, the Royal Embassy of Cambodia in Bangkok has an active page with text, photo and video content reaching over 40,000 followers. The page also includes an active chat bot allowing open ended messaging or selection of a prompt such as "Is anyone available to talk" or "I have a question. Can you help?"

Connection is common, but not universal:

Migrants living in remote areas or those who have lost income find it difficult to stay informed.

High levels of smartphone ownership or other ability to access the internet was frequently referenced. Those without smartphones or no social media accounts were more likely to cite accessing information via television. When asked to identify those migrant workers who might be most at risk to coronavirus, besides language barriers, lack of ownership of a smartphone or ability to access an internet connection were commonly cited reasons why someone would be vulnerable.

Not all migrants have regular and sustained access to social media or the internet. Due to the remoteness of the areas that they work in, migrants working in agriculture or fishing, were the groups noted to be least likely to own smartphones or have an internet connection. In addition, many migrants lost their jobs and only source of income when the crisis hit. For some, this meant directing remaining financial resources towards food and accommodation and foregoing data connections.

Governments and NGO's should ensure they communicate using a diversity of channels that allow for low- and high-tech access to information. Migrant leaders and employers, especially those in remote areas, should be well equipped with the latest information to respond to key questions and concerns. Government officials should also be open to contributing to trusted information channels such as MAP Radio to regularly provide direct updates to migrant listeners and respond to any new and emerging information needs.



Access to services:

Migrants concerned about where and how to access safe treatment.

While migrant groups are receiving prevention messaging, information about access to testing and treatment is lacking. For those that do have access to information, some migrants are hesitant to access healthcare out of fear for the pandemic, a history of negative experiences with health care services and for fear of arrest or detention if their work permit has expired.

This challenge is seen with respect to those migrants who have either been stopped by the police, undocumented migrants who have been arrested or detained, and migrants who have fled to the border to attempt to cross back to their home countries due to a lack of work and access to food and housing in Thailand.

Clear communication from the government and NGO's in relation to access to treatment and the cost of treatment is needed. Many migrants were unsure whether testing was free or if whether they were covered by government social security nets.

Community trust is selective:

Community leaders, landlords, bosses play a pivotal role in conveying key information. with less trust for person to person information.

As bosses and landlords were likely to speak Thai and have a higher comprehension of local news, they were generally considered as informed and trusted information sources by the community. Some migrants reported that while they may have already heard about coronavirus, it was not until bosses, landlords or other individuals in leadership or oversight positions conveyed the gravity of the situation did they take it seriously. While there seems to be a high level of trust for information from these key influencers, there is a risk with blanket trust for bosses and landlords who are not fact checking information themselves.

When friends or family members convey information to one another, whether in-person, by phone, or through their individual Facebook accounts (not linked to a group) there is higher desire to confirm the validity of this information.

When the same type of information reappears frequently, or is distributed in a wide-reaching platform, there is a sentiment that if this information was false, it would not be so widely distributed. These conformation cascades can them validate information that is at best misleading or could be false (Llewellyn, 2020).



I. Annex 1. List of Facebook Groups Cited by Migrants in Thailand as Information Sources

#	Channel description	Link	Language
1	Facebook page for social influencer Siri Felix where she regularly shares COVID-19 information. More than 74,000 followers.	<u>lts me SF</u>	Burmese
2	Reliable FB sources that Siri turns to get information apart from Myanmar embassy. 150,000 followers	Myanmar Labour Office Thai	Burmese/ Thai
3	Thai news agency used by migrants for information on COVID-19. 1,750,000 followers	<u>Thestandardth</u>	Thai
4	Thai NGO supporting migrants. 26,000 followers.	R <u>aks Thai Foundation</u>	Thai
5	Director General of the Myanmar Trade Promotion Organisation from Myanmar Embassy who usually shares COVID-19 news and updates. 6,000 followers.	<u>Uaungsoe</u>	Thai
6	Labour Inspector from Myanmar Labour Attache office who usually shares updates of COVID-19 news and migrant related news. 4,600 followers.	<u>Wailinmaung</u>	Thai
7	Ko Ye Min, one of the founders of the Aid Alliance for Migrant workers. Shares updates on Labor rights issues. 100,000 followers	<u>Ko Ye Min</u>	Thai
8	Facebook page for Yaung Chi Oo Workers' Association, a nonprofit organisation working for Burmese migrant workers staying in Thailand. 4,300 followers.	<u>Yaung-Chi-Oo-Workers-</u> <u>Association</u>	Thai
9	Facebook account for Mec Kaw Thaung at the FED migrant education centre. Private account.	Hmrc Kawthaung 3	Burmese
10	Myanmar Live news media organisation, regular stories on migrant labor rights and COVID 19 updates. 800,000 followers.	<u>Myanmar Live News</u>	Burmese
11	Labour Hittai news media organisation, regular stories on migrant labor rights and COVID 19 updates. 550,000 followers.	<u>Labouthittai News</u>	Thai
12	Facebook group for the Migrant Domestic Worker Network.	<u>Migrants Domestic Worker</u> <u>Network</u>	Tai (Shan)
13	Popular weekly news journal in Myanmar used by Migrants to get COVID-19 information. 24,800,000 followers.	7 Day News	Tai (Shan)
14	Popular news site in Myanmar used by Migrants to get COVID-19 information. 19,000,000 followers.	Eleven Media Group –	Tai (Shan) /Burmese
15	Myanmar Ministry of Health Facebook page. 4,000,000 followers.	Myanmar Ministry of Health	English/Thai/Nepali/ Burmese
16	Myanmar language Facebook page for Samitivej private Hospital. 250,000 followers	<u>Samitivej Myanmar</u>	Thai



I. Annex 1. List of Facebook Groups Cited by Migrants in Thailand as Information Sources

#	Channel description	Link	Language
17	Facebook page for prominent journalist Surachai Min Tun. 600,000 followers.	Surachai Min tun	Burmese
18	Facebook page for MAP Radio, NGO radio broadcaster servicing migrant community. 33,000 followers.	MAP Radio	Burmese/Thai
19	Thai TV channels 3	<u>Thai Television 3</u>	Thai
20	Thai TV channels 5	<u>Thai Television 5</u>	Thai
21	Thai TV channels 7	<u>Thai Television 7</u>	Thai
22	Thai TV channels 8	<u>Thai Television 8</u>	Thai
23	Thai TV Channel 9	<u>Thai Television 9</u>	Thai
24	Thai PBS news	<u>ThaiPBS</u>	Thai
25	MRTV 4 (Myanmar news channel)	MRTV4	Burmese
26	MRTV (Myanmar news channel)	<u>MRTV</u>	Burmese
27	Facebook page for the Migrants Working Group (MWG), CSO supporting migrants working in Thailand. 4,500 followers.	<u>mwgthailand</u>	Thai
28	AAC migrant community organisation page. 1,300 followers.	AAC,	Burmese
29	Facebook page for the Shan news TV channel. 250,000 followers.	<u>Shan News TV</u>	Tai (Shan)
30	Facebook page for Tai Freedom online news. 350,000 followers.	<u>Tai Freedom News</u>	Tai (Shan)
31	Facebook page for Tai Freedom online news. 350,000 followers.	Pang Long news	Tai (Shan)/ Burmese
32	Thai Nepali Association- BKK branch (which provide Nepal migrants from Myanmar in Bangkok)	Thai Nepali Association	English/ Thai / Nepali / Burmese
33	Facebook page for MONO29 media organisation. 1,400,000 members.	Mono29News	Thai
34	Facebook group for Mukdahan media organisation which services the border area and where migrants get news about borders closures. 700 members.	<u>Mukdahanmedia</u>	Thai
35	Facebook page for Punpromotion media, Thai media organisation. 6,000 followers.	<u>Punpro</u>	Thai



I. Annex 1. List of Facebook Groups Cited by Migrants in Thailand as Information Sources

#	Channel description	Link	Language
36	Facebook page for SCB Thailand media organisation. 3,800,000 followers.	SCB Thailand	Thai
37	Facebook page for BBC news Thailand. 2,900,000 followers.	BBC news Thai	Thai
38	Facebook page for Khaosan English media. 160,000 followers.	<u>KhaosodEnglish</u>	English / Thai
39	Facebook page for Sanook news. 5,700,000 followers.	<u>SanookNews</u>	Thai
40	Facebook page for E-Jan media. 10,000,000 followers.	<u>E-jan 2016</u>	Thai
41	Facebook page for the NGO Labour rights promotion network (LPN) and Myanmar Migrant Labour Group (MMLG). 130,000 followers.	<u>LPN</u>	Thai
42	Facebook page for Tholakhong, Lao PDR phone company and news site. 1,200,000 followers.	<u>Tholakhong</u>	Lao
43	Facebook page for Laos United Labor Federation in Thailand (LILF). 900 followers.	laounitedlaborfederation	Lao / English / Thai
44	Facebook page for the Ministry of Health Cambodia. 700,000 followers.	<u>MinistryofHealthofCambodia</u>	Khmer
45	Facebook page for the Cambodia Embassy in Bangkok. 42,000 followers.	<u>Royal-Embassy-of-Cambodia-in-</u> <u>Bangkok</u>	Khmer
46	Facebook page for the Cambodia labour Ministry. 300,000 followers.	<u>mlvt.gov.kh</u>	Khmer
47	Facebook Private group of Khmer team leaders in factories who can speak Thai and share information with Cambodian migrant workers.	Migrants worker fb group	Khmer
48	Facebook page for Prak Pheaktra, a Khmer influencer who shares updates about migrants and COVID-19. 800 followers.	<u>Official Pheaktra</u>	Khmer
49	Facebook page for Radio Free Asia (RFA), media organisation based in the United States. 6,900,000 followers.	<u>RFA Cambodia</u>	Khmer
50	Facebook page for Khmer TV, entertainment and news media organisation. 19,000 followers.	Khmer TV Channel 168	Khmer

