



Caring for the Caregiver

Foreign domestic workers' access to medical care for minor ailments

August 2017, Singapore

Summary

In a survey of 468 foreign domestic workers of various nationalities in Singapore, we found that generally their access to medical care for minor ailments did not seem to be impeded.

- (a) over 80% were taken to see a doctor when they felt ill and requested their employer to do so;
- (b) over 80% were "not scared" to ask to be taken to a doctor;
- (c) newer workers -- generally more vulnerable because of loan repayments -- did not seem to be worse off in their access.

However, our data suggests that a small minority of foreign domestic workers may not be enjoying similar fair treatment from employers.

- (d) a number of survey respondents said their employers did not take them to a doctor

even when so requested. Without clear information about the particular circumstances or the illnesses complained of, care is needed when interpreting this information.

- (e) about 25% of FDWs who received MCs from doctors, certifying them for rest, were asked by their employers to continue working;
- (f) about one in seven FDWs reported that they have suffered skin allergies to household chemicals;
- (g) about one in twelve FDWs reported that they have experienced salary deductions for medical expenses -- this violates the law.

This study did not encompass situations where emergency or hospital in-patient care might be needed.

Introduction

The subordinate status of a foreign worker in Singapore leaves him or her open to various deprivations, usually inflicted by the employer. Salaries may remain unpaid, deductions arbitrarily made, housing accommodation may be substandard, food provision inadequate, and long working hours demanded.

Medical care is another of the possible deprivations. Among the thousands of male construction and marine industry workers that TWC2 has seen, complaints about access to medical treatment are rampant. Workers speak of company policies that penalise them for going to a doctor or being given medical leave.

From among TWC2's domestic worker clients, off and on there are also complaints about the lack of medical treatment. This is usually spoken of in the context of employers refusing to take them to a doctor when they are ill. In one case that TWC2 assisted with, an FDW reported being given traditional Chinese medicine; she had no idea what exactly it was or whether it met food safety and medical efficacy standards.

Being required to live with the employer's family, an FDW's freedom of movement is far more

Glossary

FDW: Foreign domestic worker

MC: Medical (leave) certificate

TWC2: Transient Workers Count Too

restricted than a non-domestic worker's. This could have a major impact on her reaching out for medical attention.

FDW access to medical care for minor ailments -- as opposed to serious illnesses or medical emergencies requiring hospital care -- is an area that TWC2 has not previously looked into. This study is an initial attempt to fill the gap. We wanted to know how easy or difficult it is for FDWs to get to see a doctor. We also wanted a glimpse of their concerns on related issues such as being able to rest and recover, cost considerations, and occurrences of skin allergies from exposure to household chemicals.

Survey method

The survey was done in two waves. Students from a polytechnic fanned out to various locations on two Sundays, 13 Nov 2016 and 14 May 2017, where FDWs were known to spend their days off. The locations included the area around Paya Lebar metro station, the Botanic Gardens, the Chinese Garden and Esplanade Park.

The survey was done face to face but kept anonymous; no information about respondents' identities was collected.

Results were entered directly into hand-held mobile devices connected to Google Forms.

Students able to speak Malay were directed to the Paya Lebar area where Indonesian domestic

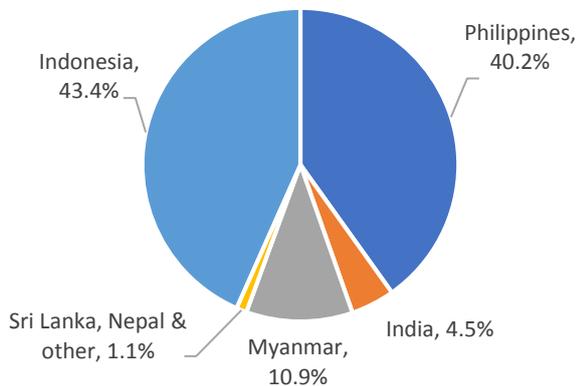
workers generally gather. Several students able to speak Burmese were sent to Esplanade Park, a location preferred by male and female workers from Myanmar. Filipina domestic workers are generally able to speak English and no special provision was needed, language-wise.

Before launching into the survey questions, the respondents were first asked to confirm that they were working in Singapore as domestic workers.

In the data processing that followed, responses that were internally inconsistent were removed. This left a total of 468 valid responses -- the sample population for this analysis.

Profile of respondents

Nationality (n=468)



All 468 respondents were female. By nationality, Indonesians and Filipinas dominated -- which reflects the general pattern in Singapore.

However, since the government has not released data as to the numbers of migrant workers by nationality, it is not possible to know how closely our sample mix corresponds to the overall mix among FDWs here.

Nationality

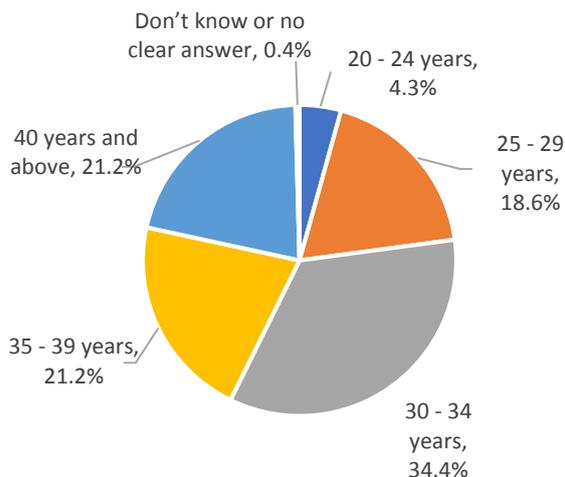
	No. of respondents	Percent
Indonesia	203	43.4
Philippines	188	40.2
Myanmar	51	10.9
India	21	4.5
Sri Lanka	2	0.4
Nepal	2	0.4
Other	1	0.2
Total	468	100.0

There was considerable spread in age, with the largest number in the 30 - 34 years category.

Age group

	No. of respondents	Percent
20 - 24 years	20	4.3
25 - 29 years	87	18.6
30 - 34 years	161	34.4
35 - 39 years	99	21.2
40 years and above	99	21.2
Don't know or no clear answer	2	0.4
Total	468	100.0

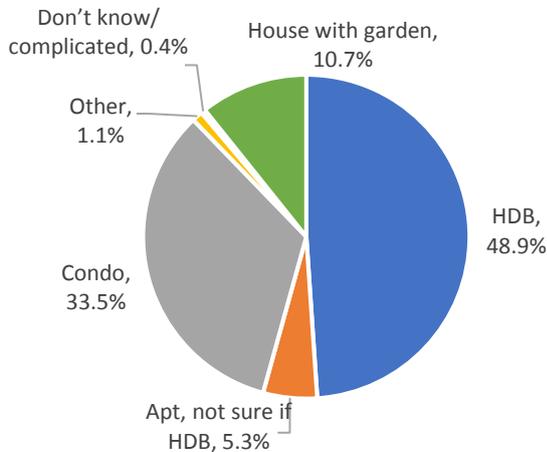
Age group (n=468)



Nearly half of the 468 respondents said they lived and worked in an "HDB flat" -- this being the Singapore term for public housing. Another 5% said they were in apartments, but were not sure if these were HDB flats. A biggish group (33%) said they lived and worked in private condominium apartments.

Without city-wide data as to the dwelling types of helper-hiring households, it is not possible to know if our sample mix corresponds to the overall pattern. But we can say that there is considerable diversity in dwelling types among our respondents; our mix does not strike us as being very far removed from the likely pattern in Singapore as a whole.

Dwelling type (n=468)

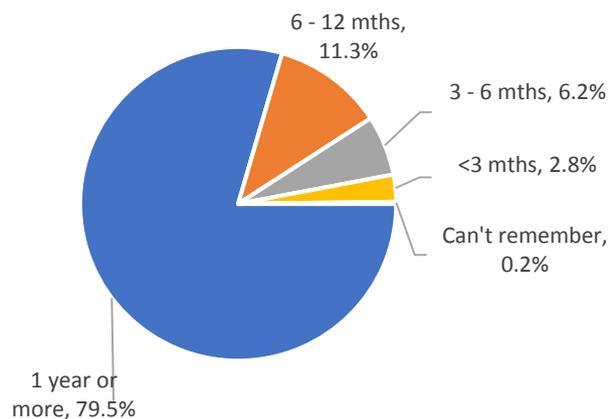


Dwelling type

	No. of respondents	Percent
HDB	229	48.9
Apt, not sure if HDB	25	5.3
Condo	157	33.5
House with garden	50	10.7
Other	5	1.1
Don't know or complicated answer	2	0.4
Total	468	100.0

Nearly 80% of respondents reported that they have been in their present jobs for more than a year. There appears to be an under representation of those who have worked only 3 months or less. This will be touched on again in the Discussion section.

How long in present job? (n=468)



How long in present job?

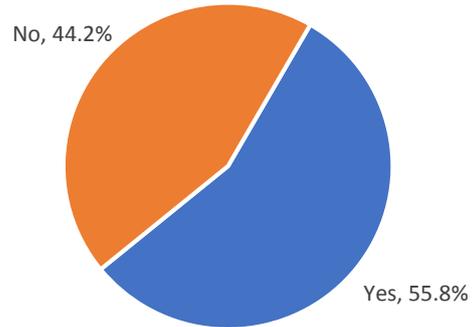
	No. of respondents	Percent
3 months or less	13	2.8
3 to 6 months	29	6.2
6 to 12 months	53	11.3
1 year or more	372	79.5
Cannot remember	1	0.2
Total	468	100.0

Slightly over half of our respondents said this was not their first job in Singapore; they had worked for at least one other employer before.

Worked for other employers before? (n=468)

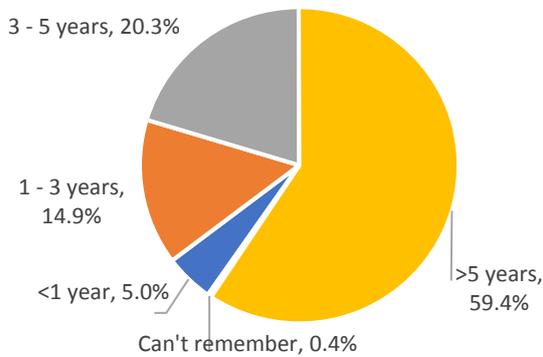
Have you worked for other employers before?

	No. of respondents	Percent
Yes	261	55.8
No	207	44.2
Total	468	100.0



In total, how long have you worked in Singapore? (n=261)

Of the 261 FDWs who have worked for other employers before, nearly 60% have spent over five years working in Singapore.



Have you worked for other employers before?

	No. of respondents	Percent
Less than 1 year	13	5.0
More than 1 year, less than 3 years	39	14.9
More than 3 years, less than 5 years	53	20.3
More than 5 years	155	59.4
Cannot remember or very complicated	1	0.4
Total	261	100.0

Access to doctor

In this section, the analysis is performed on:
 (a) the whole sample of 468 respondents;
 (b) a subsample classed as "more vulnerable"; and
 (c) a subsample classed as "less vulnerable".

"More vulnerable" would be those FDWs who reported having worked less than a year in Singapore. Of these 57, 44 were still with their first employer; 13 had already changed employers. Generally, new workers take about seven or eight months to clear their recruitment debts. During this period, not only do they have hardly any disposable income, they are also deeply anxious about losing their jobs which would leave them financially exposed. They would need a few months of full income beyond the repayment period to feel more secure.

"Less vulnerable" would be those who have worked more than a year in Singapore, either with one employer or more than one. There were 409 respondents in this subsample.

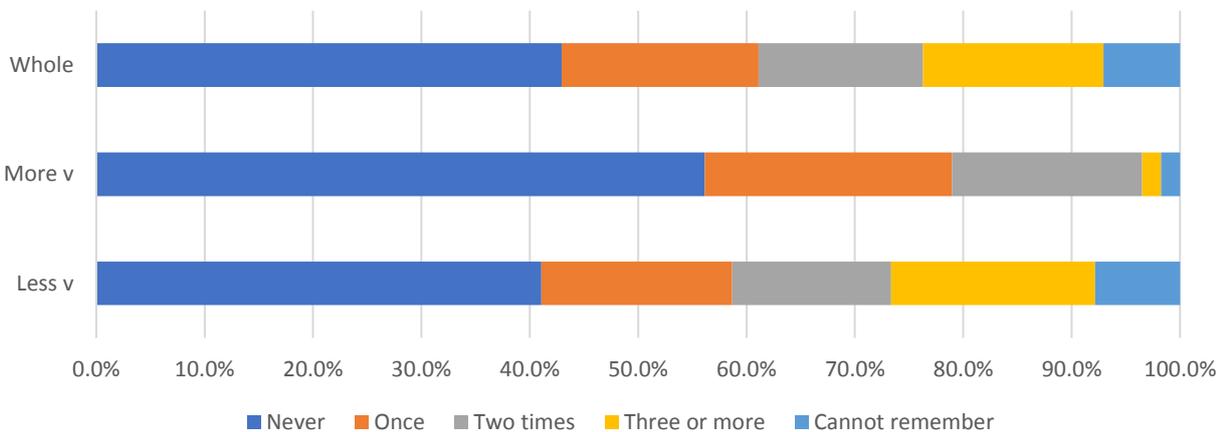
Two workers did not provide clear answers as to the length of service to date. They are included in "whole sample", but are in neither the "more vulnerable" or "less vulnerable" subgroup.

The purpose of dividing respondents into "more vulnerable" and "less vulnerable" was to see if they had different experiences when it came to access to medical care.

In this present job, how many times have you been so sick that you asked your employer to take you to a doctor?

	No. of respondents			Percent		
	Whole	More v	Less v	Whole	More v	Less v
Never	201	32	168	42.9	56.1	41.1
Once	85	13	72	18.2	22.8	17.6
Two times	71	10	60	15.2	17.5	14.7
Three or more	78	1	77	16.7	1.8	18.8
Cannot remember	33	1	32	7.1	1.8	7.8
Total	468	57	409	100.0	100.0	100.0

How many times that you asked to see a doctor? (n=468)



At first sight, the above graph may look as if the more vulnerable group (i.e. the middle bar) was either healthier or more likely to avoid asking to be taken to see a doctor. 56% of the more vulnerable had never asked, compared to only 41% of the less vulnerable.

However, a more probable explanation for this difference lies in the criterion we used to define the two groups. Those who have worked less than 12 months were classed as "more vulnerable". The rest would have worked for longer, and thus they would have naturally experienced more instances of falling ill during employment.

The previous question asked the FDW how often she was so sick that she asked to be taken to a doctor.

But did the employer take the FDW to one?

The next set of data answers that question, for the 85 respondents who were ill enough only once to ask.

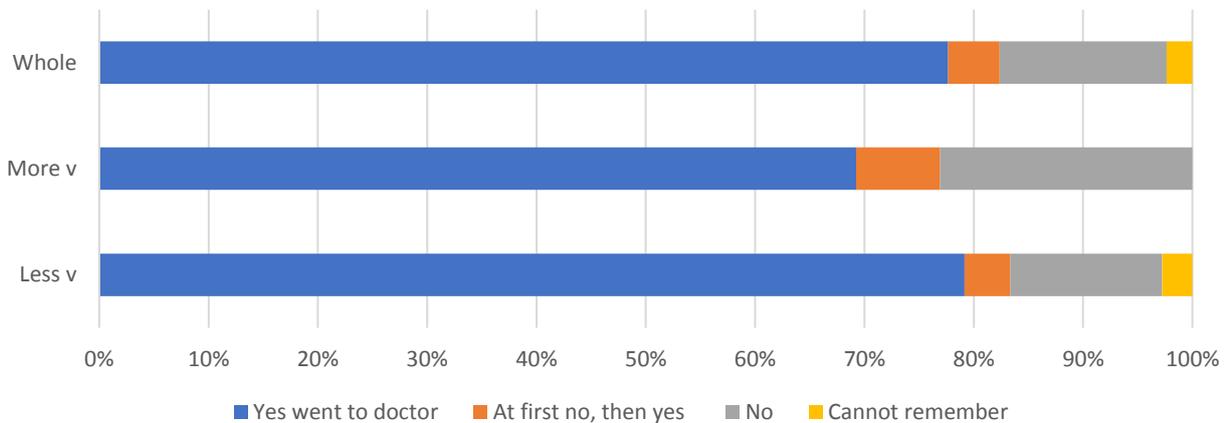
Around 80% of this group of respondents said that they were able to see a doctor when they requested for it.

It should be borne in mind that the sample size for the "more vulnerable" subgroup is extremely small.

When you fell sick and asked your employer to take you to a doctor, did the employer take you to one?

	No. of respondents			Percent		
	Whole	More v	Less v	Whole	More v	Less v
Yes went to doctor	66	9	57	77.6	69.2	79.2
At first no, then yes	4	1	3	4.7	7.7	4.2
No	13	3	10	15.3	23.1	13.9
Cannot remember	2	0	2	2.4	0.0	2.8
Total	85	13	72	100.0	100.0	100.0

Sick once: When you asked to be taken to a doctor, did the employer take you to one? (n=85)



We asked the same question of those who fell sick twice.

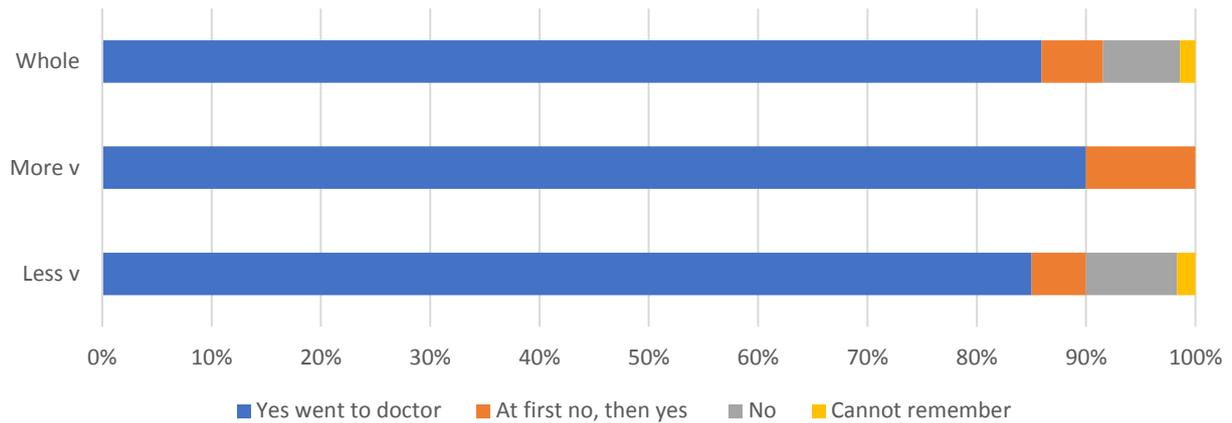
The data at right refers to the first of two times that the FDW fell sick.

The bar chart can be seen on the next page.

The first time you fell sick and asked your employer to take you to a doctor, did the employer take you to one?

	No. of respondents			Percent		
	Whole	More v	Less v	Whole	More v	Less v
Yes went to doctor	61	9	51	85.9	90.0	85.0
At first no, then yes	4	1	3	5.6	10.0	5.0
No	5	0	5	7.0	0.0	8.3
Cannot remember	1	0	1	1.4	0.0	1.7
Total	71	10	60	100.0	100.0	100.0

Sick twice: First time, did the employer take you to see a doctor? (n=71)



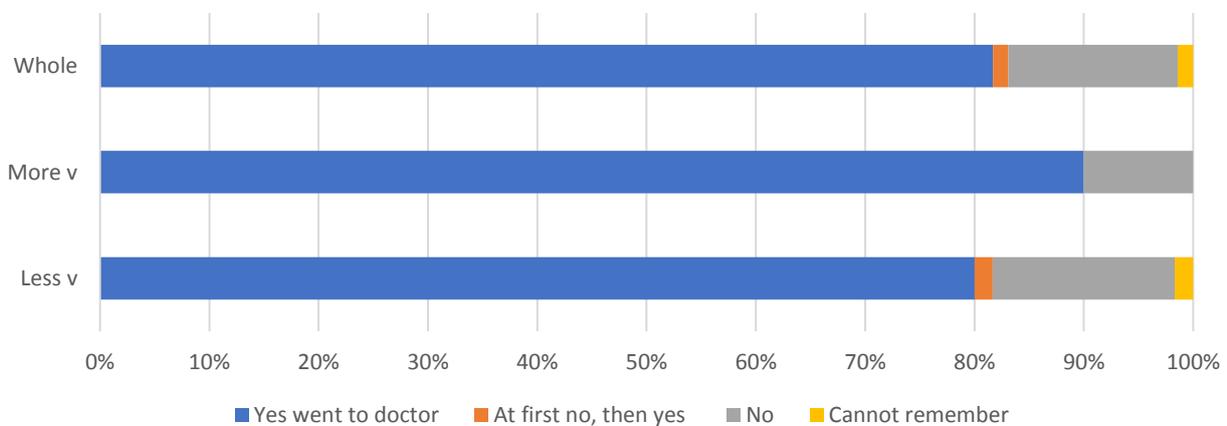
The data at right refers to the second of two times that the FDW fell sick.

Compared to the first time the FDW fell sick, there appears to be a slightly greater unwillingness to take her to see a doctor.

The second time you fell sick and asked your employer to take you to a doctor, did the employer take you to one?

	No. of respondents			Percent		
	Whole	More v	Less v	Whole	More v	Less v
Yes went to doctor	58	9	48	81.7	90.0	80.0
At first no, then yes	1	0	1	1.4	0.0	1.7
No	11	1	10	15.5	10.0	16.7
Cannot remember	1	0	1	1.4	0.0	1.7
Total	71	10	60	100.0	100.0	100.0

Sick twice: Second time, did the employer take you to see a doctor? (n=71)



For those respondents who had fallen ill thrice or more, a slightly different question and multiple choice answers were put to them. We didn't want to have to go through each instance of her falling ill.

There were 78 respondents who said they have asked to be taken to a doctor three times or more. However, 77 of them were in the "less vulnerable" category. Only one respondent was in the "more vulnerable" category, i.e. she was the only worker out of those with less than 12 months' service to have fallen ill three times or more.

Consequently, it did not make sense to analyse this question's results

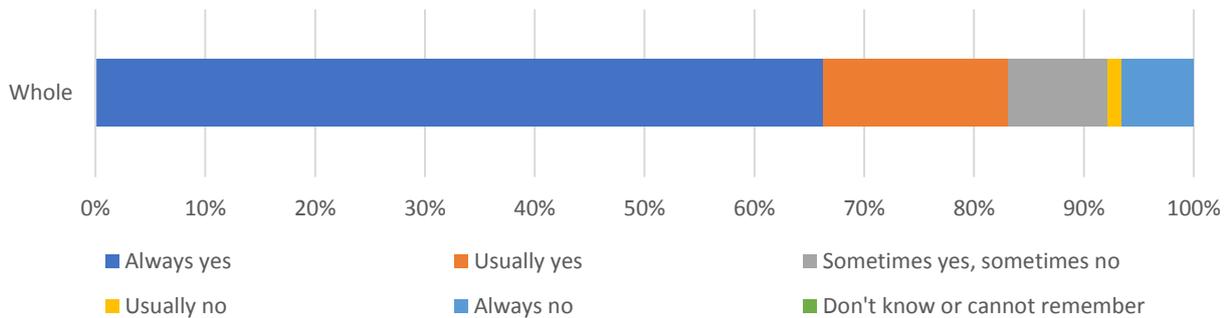
by vulnerability category.

As can be seen from the bar graph below, over 80% of respondents in this group were "always" or "usually" taken to a doctor when they felt ill enough to make the request.

Out of these times when you asked to see a doctor, did your employer take you to one?

	No. of respondents			Percent		
	Whole			Whole		
Always yes	51			65.4		
Usually yes	13			16.7		
Sometimes yes, sometimes no	7			9.0		
Usually no	1			1.3		
Always no	5			6.4		
Don't know or cannot remember	1			1.3		
Total	78			100.0		

Sick thrice or more: Did your employer take you to a doctor when you asked? (n=78)



The last question in this section took a different tack. We asked how scared the FDW was to ask her employer to take her to the doctor.

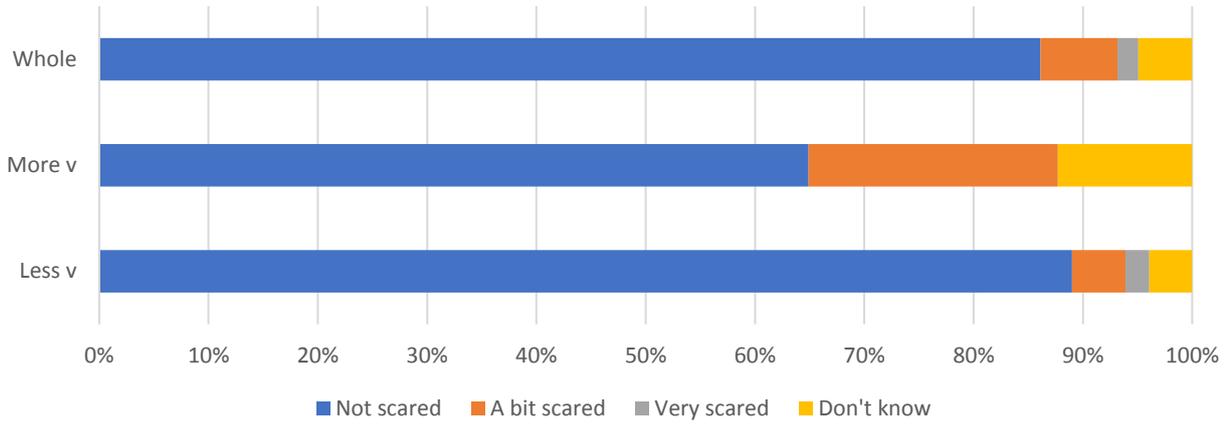
This angle will help us interpret the foregoing results. If a worker is scared to ask for medical

attention, then she will wait till she is extremely ill before she does so. As a result, this will bump up the percentage of "Yes, my employer took me to a doctor" answers. But it will also mean that timely medical intervention may not be easily obtained by the employee.

Are you scared to ask your employer to take you to a doctor?

	No. of respondents			Percent		
	Whole	More v	Less v	Whole	More v	Less v
Not scared	403	37	364	86.1	64.9	89.0
A bit scared	33	13	20	7.1	22.8	4.9
Very scared	9	0	9	1.9	0.0	2.2
Don't know	23	7	16	4.9	12.3	3.9
Total	468	57	409	100.0	100.0	100.0

Are you scared to ask your employer to take you to a doctor? (n=468)



A great majority of respondents said they were "not scared" to ask their employers to take them to a doctor.

Those in the "more vulnerable" category, i.e. the ones who had worked less than a year with their

current employers seemed a bit more unsure.

There however remains a small minority who said they were "very scared" even if, or perhaps because they have known their employers for over a year.

Related issues

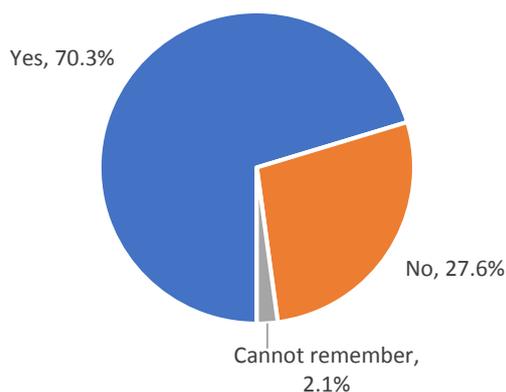
Having had anecdotal reports from TWC2's case-work of FDWs being given traditional medicine by their employers when the employees weren't feeling well, we wanted to explore in this survey how common it was that FDWs self-medicated (or more precisely, employer-medicated).

About 70% of respondents reported that employers had given them medicine to consume. This could be something very straightforward, e.g. over-the-counter drugs for fever or a runny nose. More important was the follow-up question: whether they knew what they were taking.

Has your employer given you medicine to consume?

	No. of respondents	Percent
Yes	329	70.3
No	129	27.6
Cannot remember	10	2.1
Total	468	100.0

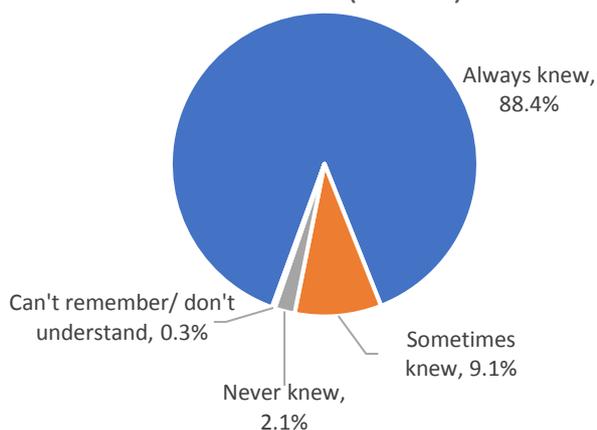
Has your employer given you medicine to consume? (n=468)



Of the 329 who reported that they had been given medicine by their employers, a large majority (88%) were confident that they knew what they were taking. This however still left quite a number

who might have been at risk of inappropriate medication not of their own choosing. Even if they had doubts, they might have felt unable to reject the medicine being offered for fear of causing offence.

Did you know what that medicine was? (n=329)

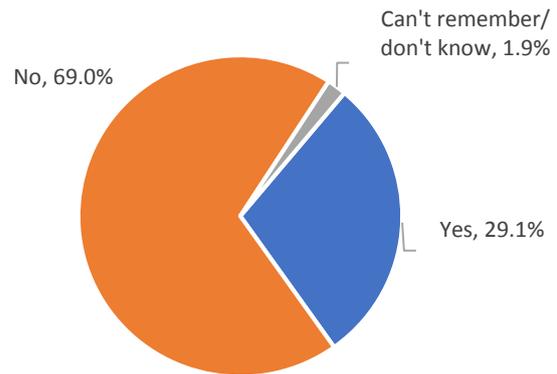


Did you know what that medicine was?

	No. of respondents	Percent
Yes, I always knew	291	88.4
Sometimes I knew, but other times I didn't know	30	9.1
I never knew what the medicine was	7	2.1
Cannot remember or don't understand the question	1	0.3
Total	329	100.0

We next wanted to explore how common or uncommon it was for FDWs to be asked to continue working even if the doctor had ordered rest and given the FDW medical leave ('MC' in Singapore parlance). We began by asking in the survey whether she has ever received an MC from a doctor.

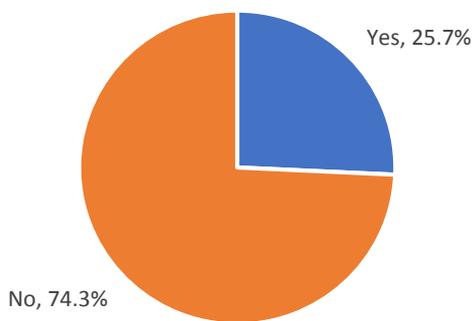
Have you ever received an MC from a doctor? (n=468)



Have you ever received an MC from a doctor?

	No. of respondents	Percent
Yes	136	29.1
No	323	69.0
Cannot remember or don't know	9	1.9
Total	468	100.0

Asked to work even though you were on MC? (n=136)



Of the 136 respondents who said they have ever been given an MC, a quarter reported that they were asked by their employers to continue working nonetheless.

Asked to work even though you were on MC?

	No. of respondents	Percent
Yes	35	25.7
No, employer always let me rest	101	74.3
Total	136	100.0

Another related issue that springs from the low bargaining power of domestic workers is that of the cost of the visit to the doctor or the prescription. From casework, TWC2 has heard of instances where these costs were deducted from the employee's salary. We wanted to see how common this practice was.

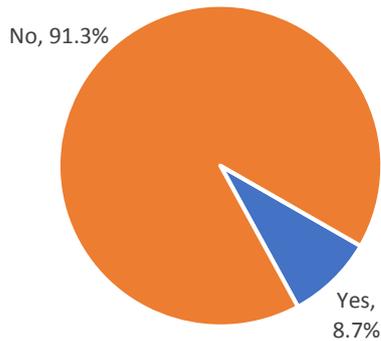
147 respondents said they had never been to a doctor, or they couldn't remember if they had. These were removed from the analysis, leaving 321 responses for this question. Of these, 28 (8.7%) said they have experienced a salary deduction for these costs.

The pie chart is on the next page.

Has the employer ever deducted doctor's cost or medicine cost from your salary?

	No. of respondents	Percent
Yes	28	8.7
No, even though I've been taken to a doctor	293	91.3
Subtotal	321	100.0
No, because I've never been to a doctor	137	
Cannot remember or don't know	10	
Total	468	

Doctor's cost, medicine cost deducted from salary? (n=321)



It should be noted that the subsidiary legislation under the Employment of Foreign Manpower Act makes it clear that the cost of medical care should be borne by the employer. Deductions are therefore illegal.

Every so often, an FDW under TWC2's care would report that she found it difficult to continue working for a household because she was allergic to one or more chemicals she had to use. It is possible that there might have been a degree of exaggeration in

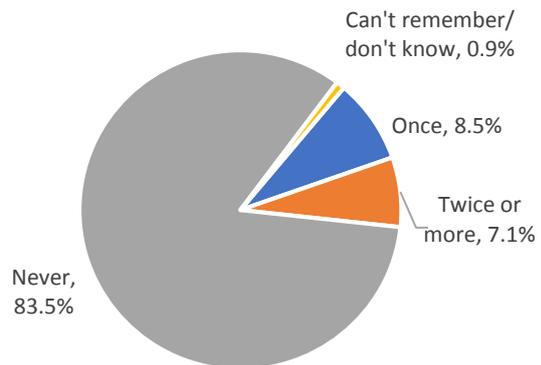
these reports since these were clients coming to us unhappy with their employment.

This study was an opportunity to see how prevalent allergies to chemicals were, in a sample that didn't comprise clients wanting to leave their jobs.

Have you ever had an allergic skin reaction to a chemical in the house?

	No. of respondents	Percent
Once	40	8.5
Twice or more	33	7.1
Never	391	83.5
Cannot remember or don't understand the question	4	0.9
Total	468	100.0

Have you ever had an allergic skin reaction to a chemical in the house? (n=468)



Findings and discussion

On the whole, the chief impression one gets from the data is that female domestic workers in Singapore have no difficulty getting access to a doctor. When they feel sick enough to ask to be taken to a doctor, the employer does so with no reported hesitation around 80% of the time.

We initially had some concern as to what would be understood by 'feel sick enough'. Might they be holding back from asking for medical attention for fear of job repercussions? However, responses to the question asking if they felt "scared" to ask to be taken to a doctor largely assuaged those concerns. Over 80% said they were "not scared".

Nonetheless, although our sample size was not particularly large, we came across several respondents who verbalised their fears. It indicates that there are some FDWs who may feel intimidated by the employers at the risk to their own health.

Respondent #244 expressed a fear of losing her job and being repatriated: "get sent home", she said. Although this Filipina had worked more than a year with her present employer, and had worked previously for other employers, her experience with getting medical attention was not encouraging. She was sick two times during her present employment. The first time, the employer initially refused to take her to a doctor, changing her mind later. The second time this FDW fell ill, the

employer again refused to take her to a doctor, and did not change her mind.

Respondent #106, another Filipina, also said employers may "fire the domestic helper" if the FDW requests to see a doctor. She herself was "very scared" to ask.

Respondent #379 was "a bit scared", saying she might get a scolding if she asked to be taken to a doctor. So far in the 1 - 3 years that this Indonesian FDW had worked for her present employer, she had not fallen ill.

The risk of getting scolded was also raised by respondents #96, #179, #417, #460 and #466. Respondent #393 said her employer would "make noise" if she asked to be taken to a doctor.

Respondent #177 mentioned her concern over having to pay for medical consultation and treatment. This Indonesian worker had this fear despite the fact that in the one time she fell ill and was taken to a doctor, no deduction was made from her salary.

Respondent #331, an Indonesian, said her employer was "calculative and stingy" and wouldn't take kindly to any request for medical attention. She had not yet fallen ill during her present employment, and was "a bit scared" if she had to ask to see a doctor.

More vulnerable vs less vulnerable

We did not find any noticeable difference in the experiences of workers who were relatively new to Singapore compared with those who have been here longer. We had wondered whether they faced greater difficulty getting the employer to take them to a doctor or whether, since they were more financially vulnerable, they might be more afraid to ask. There is some indication from the "scared to ask?" question that they were more uncertain about their employers' reaction, but in terms of outcomes -- being taken to see a doctor when a request was made -- no difference is apparent.

To a large degree, this stands to reason. Being embedded in a household, having to look after children or the elderly with weaker immune systems, the average employer would see it against his or her own interest to deny medical attention to a domestic worker who needs it. This is especially if the illness appears to be of an infectious nature. In fact, the anecdotal instances when FDWs have told TWC2 that they did not get medical attention were generally of a non-infectious nature, e.g. allergies to chemicals, sprains or dogbites.

Allergies, medical leave and costs

About one in seven FDWs reported suffering from one or more instances of allergic reaction to chemicals in the home. This study did not explore this issue further, but it deserves investigation. Just as adverse reactions to chemicals in industry and other workplaces are considered a matter of workplace safety and health, this issue affecting domestic workers should receive the same degree of attention. Any presumption that, at worst, these are household chemicals, likely bought off the shelf and therefore not of great danger, should be set aside as it may cloud an objective enquiry. An FDW is not totally free to refuse to use the chemicals bought by her employer.

A quarter of FDWs who have been issued medical leave certificates by medical practitioners reported being made to work instead of being allowed to rest. This is not only troubling from an ethical standpoint as it may affect the recovery process and prolong the worker's discomfort, it also raises the question of the legal significance of these MCs given to her. The Employment Act and the

Work Injury Compensation Act recognise MCs as triggers for certain entitlements. However, domestic workers are excluded from the ambit of these laws. Her right to adequate rest when medically necessary is thus ambiguous.

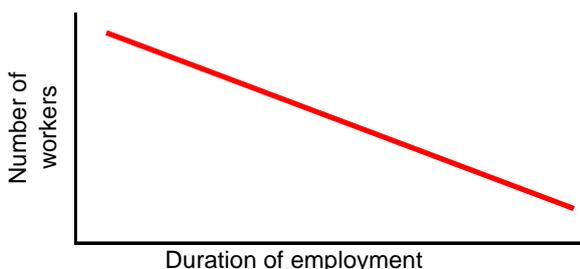
One easy way around this problem is to interpret a clause in the regulations (namely Employment of Foreign Manpower Act: Work Passes Regulations 2012, Fourth Schedule, Part 1, Section 1) that makes employers responsible for "provision of adequate food and medical treatment" more broadly, with "adequate... medical treatment" taken to include adherence to doctor's orders for rest,

About one in twelve respondents reported that costs relating to visits to the doctor or medicines were deducted from their salary. The law (Employment of Foreign Manpower Act: Work Passes Regulations 2012, Fourth Schedule, Part 1, Section 1) makes it clear that costs should be borne by the employer. Such deductions would thus be illegal.

Under-representation of new workers, weekly rest days

This study was not intended to delve into the question of weekly rest days for domestic workers. However, there is something in our data that indicates this to be an area that merits concern.

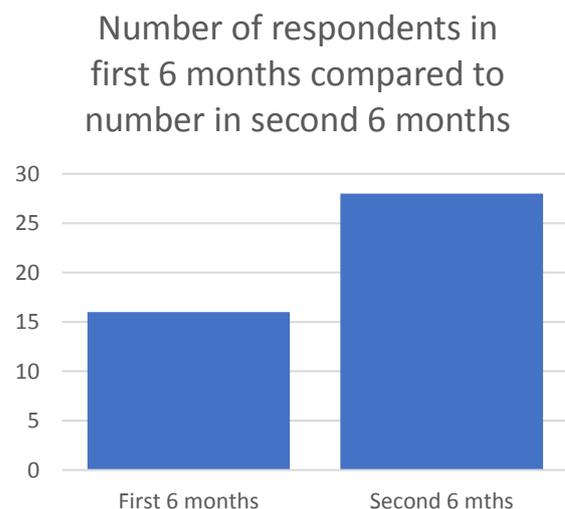
Theoretically, in a steady-state employment situation, we would expect a graph like the one below where the number of workers at any point along the horizontal axis (duration of employment) would be lower than the number of workers at any point preceding (i.e. to the left of) it.



For example, we would expect (in a steady-state situation) that the number of workers reaching their 10th month in a job to be fewer than the number reaching their 8th month. This would be the natural result of attrition from resignation or termination.

Our survey data shows a reverse trend, as can be seen from answers to the question "How long have you worked for your present employer?"

Limiting ourselves to those who were with their very first employer (to keep things simple), we find that those in their first six months were fewer than those on their second six months. There were only 16 respondents who were in their first six months on the job, compared to 28 FDWs in their second six months.



There are a number of possibilities for this observation:

- (a) new FDWs have not formed the social circles to congregate at the usual gathering places so our survey-takers missed them;
- (b) new workers were more reluctant to speak to our survey-takers;
- (c) FDW employment is not in steady-state: there have been surges of hiring and firing; however there is no indication from news reports of any such periodic surge;
- (d) new workers are not getting their rest days and were thus disproportionately absent from the gathering places where the study was conducted.

These possible reasons are not mutually exclusive. All four reasons could be operating to varying degrees. However, from previous studies conducted and reports by newer workers coming to TWC2 for assistance, it is surely the case that a large percentage of newer workers are not getting their weekly rest days. They give up, or are asked to give up, their rest days and continue working in order to earn extra to speed up the repayment of recruitment loans.

This is a matter of continuing concern. The psychological impact of having to work seven days a week cannot be healthy. Moreover, having social contacts -- a benefit of free time and rest days -- means access to information and assistance when a worker faces problems.

Conclusion

This study was originally designed to investigate how much attention was paid to treating physical ailments. We didn't find much to worry about

except in a few areas such as allergic reactions and the right to medical rest. But there are indications that psychological health merits greater attention.

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