The Desk Study on Gender Based Violence and HIV and AIDS Vulnerabilities among Migrant Workers and families

19 July 2011
Back Ground

- 24,131 Aids cases in 32 provinces and 300 districts (Dec 2010, Ministry of Health)
- HIV cases reported by HIPTEK (2010): 174 HIV cases out of 162,000 (0.11%)
- Aids cases among migrant workers:
  - An NGO, Caring for Migrant Workers/Peduli Buruh Migran reported HIV and AIDS cases among deported migrant workers:
    - 2010: 50 Aids cases (27 females: 23 males) 49 😞 1 😊
    - 2011-July: 21 aids cases (12 females: 9 males)
Concerns:

- Women Solidarity-ILO Research in 2006
  - HIV Vulnerabilities among migrant workers in each migration cycle
    - Lack of knowledge
    - Lack of protection
    - Lack of access to health services
  - The increasing of HIV and Aids cases among migrant workers
  - 750,000 migrant workers working abroad (BNP2TKI, 2010), 80% female migrant workers
Gender Based Violence

- GBV refers to violence that targets individuals on the basis of their gender and although GBV can be inflicted upon men as well as women, women are more frequently the victims.
- GBV is a manifestation of the unequal power relationships between men and women, which lead to the domination over and discrimination of women by men.
- The General Recommendation No. 19 of the UN defines violence against women as (Art.1.) “any act of gender-based violence that results in, or is likely to result in physical, sexual or physiological harm of suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life”.[1]
Purpose

- To provide an overview of the profile of Indonesian migrant workers (Chapter 1.) and the main vulnerabilities of Indonesian migrant workers with respect to HIV/AIDS (Chapter 2.).
- To establish the causal relationship between GBV and the increased risk of infection among women migrant workers (Chapter 3.).
- To assist Indonesian stakeholders in strengthening the protection of migrant workers, particularly with regard to addressing their HIV/AIDS vulnerabilities.
- To review existing national laws and policies (Chapter 4.), international standards, regional and bilateral agreements (Chapter 5.) as well as responses of NGOs and Civil Society Organizations (Chapter 6.)
Methodology

- Reviewing the existing documents:
  - documents and reports produced by a range of governmental and non-governmental organizations involved with migrant workers, HIV/AIDS and/or gender-issues
  - relevant legislation, regulations, policies and programmes
- Interviewing with relevant stakeholders (BNP2TKI, Ministry of Women Empowerment and Child Protection, National AIDS Commission and NGOs)
- Setting Up the Core Team and series consultation meeting with stakeholders
Migrant Workers' Vulnerability to HIV/AIDS

- Awareness of HIV/AIDS and Potential Risks Among Migrant Workers
- Sexual Behaviour and Increased Risk-Taking
- Vulnerabilities in the Recruitment and Placement Process
- Risks Faced in Destination Countries
- Hazards Faced on Return to Country of Origin
- Access to information, health and support services during migration cycle
- Stigma and Discrimination
- Irregular Migration and Trafficking and the HIV vulnerability
- Vulnerability Through Mandatory HIV-Testing
Criteria and Indicators for Assessment of Strengths and Gaps in Policy and Programme Responses

1. Preventing HIV/AIDS and the Risks of Transmission among Migrant Workers
2. Mitigation of HIV/AIDS Impact
3. Gender Responsiveness of Interventions
GBV, HIV/AIDS and Migrant Workers – Evidence of a Significant Causal Relationship

GBV contributes to the transmission of HIV and AIDS:

- the physiology of the female genital tract makes women – particularly girls - inherently more susceptible to HIV infection than men.
- Forced and violent sex i.e. rape can cause tears and lacerations, which further increases the risk of becoming infected.[1]
- power imbalances between women on the one hand, the fear of experiencing violence on the other hand, women also have less ability to negotiate safe sex
- Female migrant workers are exposed to GBV during their entire migratory experience, from the recruitment process, whilst in transit, during the employment period and upon return
Review of National Laws and Policies on Protection of Indonesian Migrant Workers and Their Families Against HIV/AIDS

Law 39/2004:

The law should be revised so that it provides a more comprehensive and effective policy framework and implementation mechanism for *Safe Migration* and *Universal Access* to treatment, prevention, care and support.

Develop and implement laws, policies and programmes that target the root-causes of migrant workers vulnerability to HIV/AIDS.
Conclusion and Recommendation:

- Importance of Mainstreaming Gender Issues and GBV in HIV Policies and Programmes
- Law 39/2004 The law should be revised so that it provides a more comprehensive and effective policy framework and implementation mechanism for Safe Migration and Universal Access to treatment, prevention, care and support.
- Develop and implement laws, policies and programmes that target the root-causes of migrant workers vulnerability to HIV/AIDS
Conclusion and Recommendation

- **HIV-testing**

- Remove policies that require or permit mandatory HIV-testing for migrant workers as a condition of entry, stay or employment in destination countries

- Ensure proper implementation of decree 1158/2008 on *Standards of Medical Testing Services* and 29/2008 on *Technical guidance on Counselling and HIV-testing for Prospective Migrant Workers*, to ensure that testing centers and their procedures reach and sustain healthy and safe standards and that HIV-testing is accompanied by confidentiality, informed consent, pre- and post-test counselling, referral to treatment and support services

- Revise policies on HIV-testing to include provisions for gender-sensitive testing and VCT, and ensure their implementation
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