



Forbidden to be Sick or Educated? Undocument Migrant Workers in Asia

Shinta Maharani ^{a,1,*}, Asmak Ab Rahman ^{b,2}, Mohd Shahid Mohd Noh ^{c,3}

^aThe State Islamic University of Ponorogo, Indonesia.

^{b,c} University of Malaya, Malaysia

¹ maharani@uinponorogo.ac.id *; ² asmak@um.edu.my; ³ shahid82um.edu.my

* corresponding author



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ABSTRACT

Migrant workers are considered vulnerable as they remain excluded from various social safety provisions. The Covid-19 pandemic has further exposed significant gaps in policy support for these workers in Asian countries. However, scholarly evidence is lacking in the international literature to guide policy, particularly on undocumented workers. This paper fills this void by critically reviewing emerging evidence on undocumented migrant workers' access to healthcare and formal education in Asian countries according to a comprehensive analysis of research papers released between 2002 and 2022. In total, 72 scientific papers were identified from Scopus, WoS, and Emerald databases. The qualitative research software Nvivo was used to analyze the final 10 studies (out of 72 indexed articles). The results indicate the dominant issues in the migration literature include access to healthcare services and formal education as well as others social aspects. The findings itself reveal structural barriers, including limited health coverage, high healthcare costs, low health awareness, and inadequate legal documentation, which restrict access to education for migrant workers' families. The findings of the review exercise suggest that the government should develop policies and solutions for undocumented migrant workers to get healthcare and formal education opportunities.

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1. Introduction

The global demand for labor – cross border labor, including highly skilled professional workers as well as semi-skilled and low-skilled workers employed Generally, workers from developed countries meet the demand for skilled workers in developed countries, while developing countries cater to the demand for unskilled labor (Kunpeuk, 2022). Workers from high-income developed countries are often uninterested in low-paid jobs. On the other hand, economic hardship, limited job opportunities, and low wages in developing countries push millions to try their luck overseas, often without adequate preparations such as necessary skills, financial preparation and appropriate legal documents. (Indriawati, 2024). Most of these migrant workers from developing countries are generally driven by the prospect of higher wages compared to what they received in their countries of origin (Kusakabe, 2013). It creates new policy challenges when workers from sending countries migrate illegally; It creates new policy challenges when workers from sending countries engage in undocumented or irregular migration, defined as the movement of individuals across borders without complying with legal entry, residence, or employment requirements in destination countries. in large numbers. In comparison, host country policies have provisions for legal (official) migrants who illegally remain undocumented and outside the social safety net. In contrast, host country policies primarily provide protection for legally documented migrants, while migrants who overstay permits or lose legal status often remain undocumented and are excluded from social safety net systems. Their illicit status leaves them very vulnerable to experiencing socio-psychological problems, particularly during economic and public health crises (Hartati & Andawiyah, 2020).

The significant scale of undocumented migrant workers; individuals who cross borders and participate in employment without valid legal status, work permits, or residence documentatio in many high-income Asia countries , for instance singapore. creates policy dilemmas – how to ensure equal rights and opportunities for all workers to decent work and income in a way that ensures dignity and human rights as well as equal distribution of employment opportunities (LeVoy, 2010). According to ILO conventions, governments must ensure a universal social protection system that includes undocumented migrant workers and their families. It puts an added policy challenge -- integrating actions and measures of central and regional government agencies by involving community actors to locate undocumented migrant workers (Ahmadinia et al., 2022).

Another challenge involves defining undocumented workers. The International Organization for Migration (IOM) defines 'illegal migration' as a movement that occurs outside the regulatory norm in countries of origin, transit, and destination.' The such transfer includes coming, living, or working illegally (Loganathan et al., 2021). Thus, a non-citizen person who carries out work activities without following official procedures from the country of origin, country of transit/stopover, or country of destination can be referred to as an illegal migrant/worker. "Trafficking in persons" is defined by the United Nations (UN) in its Convention on Transnational Organized Crime as "the recruitment, transportation, transfer, harboring, and receipt of persons, through threats or coercion or other forms such as coercion, abduction, fraud, abuse of power or a position of vulnerability, or the giving or receiving of payments or benefits that obtain the consent of one person to control another person, for exploitation" (Accord, 1988; Doe et al., 2021). The need of the study/ original

contribution it self, can be articulated along four dimensions: Integrated focus on healthcare and education, Explicit inclusion of family and intergenerational impact, Systematic synthesis of fragmented evidence, Identification of emerging, non-state and hybrid solutions

Unregistered marriage is another related problem that involves undocumented migrant workers throughout Asia. Unregistered marriage occurs when undocumented migrant workers depart via official channels or unofficially hold a wedding. When marriage is not registered to the consulate general, the government's representative, the marriage is not recognized by the state (Dugana et al., 2019). Therefore, even though migrant workers initially come to work officially, they marry another undocumented citizen, foreign citizen, or even co-workers of the same nationality during their employment. Consequently, either the marriage is not legally recognized (Loganathan et al., 20212), or it creates new policy problems: children born from such marriages remain unregistered, creating an intergenerational dimension to a protected undocumented population in the host country. It creates additional vulnerability since parents without legal status often do not accompany their children. Although the child has a birth certificate from a hospital, this cannot be used to register with the State Registration Office, which paradoxically also impacts their rights as citizens. Lastly, a sub-section of migrant workers become undocumented once their passport expires, and yet they stay back either by choice or as a consequence of marriage to a citizen. It once again creates dilemmas for their children's health and educational opportunities as they are born into families where parents lack official papers (Kornasham, 2022).

In sum, undocumented migrant workers' life choices cause many problems and challenges for host country policymakers, which also motivates us to undertake this study. Undocumented migrant workers are closely linked to economic dynamics at both the macro (national and global) and micro (household and firm) levels. Their existence is not accidental; it is largely a by-product of economic structures, labor market segmentation, and income inequality. We answer three questions based on this paper. First, what do the undocumented migrant workers and their families do when they become sick and need access to formal health care facilities? Second, how do they access formal education without supporting official documents? Third, what are some emerging solutions for undocumented migrant workers to ensure access to healthcare and formal education? All three questions relate to economic issues, but the first and second questions address economic issues most directly, while the third does so indirectly through policy and institutional responses. These question directly addresses economic vulnerability and financial constraints

We do so by conducting a comprehensive systematic literature review (SLR), initially identifying 72 scientific papers from various academic databases (Scopus, WoS, and Emerald). The information extracted from the selected articles is summarized in tables and graphs to detect the dominant themes and narratives. This analysis is aided by the qualitative research software Nvivo. The structure of the paper is as follows: Section 1 provides an overview, while Section 2 describes the setting and backdrop of the study. section 3 discusses methodology, section 4 displays the result, and the last section 6 clarifies the conclusion and policy implication. The need of the study/ original contribution it self, can be articulated along four dimensions: Integrated focus on healthcare and education, Explicit inclusion of family and intergenerational impact, Systematic synthesis of fragmented evidence, Identification of emerging, non-state and hybrid solutions.

2. Literature Review

As explained in section 1, undocumented migrant workers include a range of cases -- having no passports or having a passport without a travel permit or official passport; or children were born in foreign to parents who do not have a passport or marriage certificate, so they cannot apply for a passport, or residence those who are far away in remote areas, so it is difficult to reach and pay for the Consulate General . Existing literature and institutional frameworks employ varying and sometimes overlapping definitions of undocumented migrant workers, leading to conceptual ambiguity. Addressing this definitional fragmentation forms one of the analytical objectives of this systematic literature review. Every citizen who wants to travel overseas must have a passport and a visa or residence permit to stay longer. Undocumented migrant workers, as well as their children who do not have passports, are illegal. Consequently, they cannot access healthcare and formal education. The causes of healthcare, legal, and educational problems for undocumented migrant workers in Asia is the lack of complete citizenship documents, including birth certificates, passports, and visas. A complete record is required to access healthcare and formal education. This problem often becomes an obstacle for undocumented migrant workers and their families to access healthcare (M Niaz, 2020) and formal education in public infrastructure because most do not have complete documents.

Birth Certificate is another aspect of the problem that complicates access to education. Many newborn children face difficulty obtaining birth certificates because their parents do not have an official marriage certificate and do not even have a passport. The incompleteness of undocumented migrant workers' official documents led to the issuance of birth is impossible. While the birth certificate is one of the requirements for every child to be able to attend formal education and access healthcare because the birth certificate is one of the conditions for issuing passports and visas. (Ball, 2012). Indeed, many undocumented migrant workers violate. Specifically, refugees and asylum seekers, in principle, can get a birth certificate for their children, but government officials require them to issue a refugee ID from the United Nations High Commissioner for Refugees (UNHCR) before applying for a birth certificate. The card itself is only available to refugees. In other words, asylum seekers cannot obtain a birth certificate for their child.

A visa is a permit or power of attorney to enter another country or to stay for a while in other countries in the form of a stamp and initials affixed to the passport of the applicant by the relevant state official. Back to the subject passport, because a visa cannot be issued without a passport, a passport is one of the requirements for applying for a visa. (Arya et al., 2021). Undefined legal status for the worker and his/her family members creates various welfare-related challenges. Two areas of concern are access to formal education and health care services, both critical pillars of human development.

Primary, secondary, and postsecondary education make up the systematic, tiered educational path known as formal education. Public and private schools generally do not accept foreign nationals or children without complete documents to access their services. Everyone must receive formal education to have the provisions to maintain their lives and fulfil their primary or basic needs, called formal education. Access to formal education is critical for children of migrant workers from a human security point of view (Munaz et al.,

2022). Educational access issue aside, exclusion from the health care system is another source of insecurity.

The high cost of hospitals and medicines limits poor migrant workers' access to the hospital for treatment. Undocumented migrant workers are excluded regardless of their ability to pay. Hospital/ healthcare needs an official document as. Generally, they do not accept foreign nationals or children without complete documents to access their services. To cope with such hidden exclusions, many undocumented migrant workers do not view health and education as essential for themselves and their children (Mona et al., 2021). In sum, undocumented migrant workers do not think about how to get a proper education or be healthy, which can improve the family's economic situation or protect them during times of public health crisis (Chaney, 2017). Regardless of the consequences, Asia's undocumented migrant population is a growing concern. It is about multiple sums related to official migrant workers. Table 1 below presents data on the phenomenon by countries based on sources compiled by authors from secondary sources—i.e. World Bank, 2019. In the case of multiple estimates on the count of undocumented workers in a country, it included a range instead of a single figure.

Table 1: The Size Of Migrant Worker Population for Selected Asian Countries

Country of Origin	Total Number of Migrant Workers (Official)	Total number of undocumented workers (unofficial)
Indonesia	700.000	1.500.000
Nepal	400.000	800.000
Bangladesh	360.000	720.000
India	110.000	220.000
Myanmar	100.000	200.000
Pakistan	80.000	160.000
Philippines	60.000	120.000
Vietnam	50.000	100.000
China	30.000	60.000
Thailand	20.000	40.000
Srilanka	10.000	20.000
Cambodia	8.000	16.000
Laos	5.000	10.000

Sources: Compiled by researchers and estimations, 2022

3. Research Method

The systematic literature review technique serves as the foundation for the analysis in this research (Littell et al., 2008). Generally, a literature review can be considered a "mapping of knowledge" of a particular subject; it aims to research and explore all of the written material and summarizes it (Frank & Hatak, 2014). Phases of a systematic literature review include: An explanation of database search and selection keywords; Browse articles in the databases; Reading and choosing abstracts and titles; Article selection and reading; A review of the articles (Thorpe et al., 2005).

The indexed articles through a popular database were used with the Boolean operators AND and OR to build the sample to be analyzed. The following search terms were chosen to be used in the abstracts, keywords, and title.: Healthcare, Education, Undocumented, Migrant Workers, Asia, open access. The following was used as the final search string after the Boolean operators AND and OR were added:

Table 2: Search Strategy through Popular Databases

No	Result/ Databases	Search strategy
1.	22 Documents results/ from the Scopus database	TITLE-ABS-KEY (health AND education AND undocumented AND migrant AND workers)
2.	2 Documents results/ from the Scopus database	TITLE-ABS-KEY (health AND education AND undocumented AND migrant AND workers AND Asia)
3.	25 Documents result/ from the Web of Sciences	Web of Science Core Collection for health AND education AND undocumented AND migrant AND worker
4.	6 Documents result/ from the Web of Sciences	Web of Science Core Collection for health AND education AND undocumented AND migrant AND worker AND Asia
5.	25 Documents result/ from the Emerald database	Health AND education AND undocumented AND migrant AND workers
6.	2 Documents result/ from the Emerald database	Health AND education AND undocumented AND migrant AND workers AND Asia Content-type Article (3) Early cite the article (1) Access: Only Open Access Year From 2002 until 2022

Source: Own Processing by Researchers, 2022

Using the Boolean operator AND instead of OR among the keywords “healthcare,” “education,” “undocumented,” “migrant workers,” “Asia,” and the open-access filter substantially narrowed the search results. This refined search strategy yielded only 72 records across the Scopus, Web of Science, and Emerald databases. After evaluating the relevance and adequacy of the retrieved studies, this search string was deemed appropriate and was therefore adopted for the systematic literature review. The search string was refined to include only those in the categories "Healthcare, Education, Undocumented, Migrant Workers, and Asia." We chose to consider only open access articles that had already been published in an index and English as a type of document. Because the topic of undocumented migrants worker new systematic literature review view is new, a time horizon of 2002 to 2022 was chosen. According to the research, several databases, particularly in Asia, do not yet have the article. The final result after applying these appropriate filters is 10. Using predefined inclusion and exclusion criteria focused on healthcare and formal education for undocumented migrant workers in Asia, a structured and repeatable screening process was conducted (Tranfield et al., 2003). The final set of eligible studies revealed a fragmented literature, with most articles addressing either healthcare or education independently, and none explicitly examining their intersection (Littell et al., 2008).

Table 3: List of articles used as samples

No	Year	Author	Title	Indexed Journal	Country
1	2017	Ball, J., Butt, L., & Beazley, H.	Indonesian Birth Registration and Child Protection for Children of International Labor Migrants	Journal Of Immigrant & Refugee Studies	Indonesia
2	2019	Dhungana, R. R., Aryal, N., Adhikary, et al.	Cross-border migrants' psychological morbidity in India: A cross-sectional research conducted in a community	BMC Public Health	Nepal & India

3	2022	Kunpeuk, W., Julchoo, S., Phaiyarom, et al.	A qualitative investigation into the availability of healthcare and social protection for migrant workers in Thailand both before and after the COVID-19 epidemic.	International Journal Of Environmental Research And Public Health	Thailand
4	2013	Kusakabe, K., & Pearson	Burmese migrant workers' cross-border childcare practices in Thailand.	Gender, Place, and Culture	Burmese
5	2008	Lee, J.	Migrant workers and HIV vulnerability in Korea	International Migration	Korea
6	2021	Loganathan, T., Chan, Z. X., Hassan, F. et al	The schooling of non-citizen children in Malaysia during the COVID-19 pandemic: a qualitative investigation.	Plus One	Malaysia
7	2022	Loganathan, T., Chan, Z., Hassan, F., et al.	Undocumented: Analyzing Malaysian children's legal identities and educational opportunities	Plus One	Malaysia
8	2016	Musumari, P. M., & Chamchan, C.	An analysis of secondary data on the factors associated with HIV testing experiences among migrant workers from Myanmar residing in Thailand.	Plus One	Myanmar
9	2020	Sampson, I. A., Miles, G. M., & Piano	"Undocumented, unregistered and invisible": An investigation of the causes and consequences of youth migration from Cambodia to Thailand.	International Journal of Sociology and Social Policy	Cambodia

Source: Compiled and modified by researchers, 2022

A portion of the final sample utilized for the study is displayed in Table 3 above, which consists of 10 articles arranged by author. First, no documents before 2002 discuss Asia in general but one country to others around Asia. Meanwhile, our selection does not entirely represent migrant labor dependent Asian countries – studies on Japan, the Philippines and Singapore are absent, and it should be the opportunity for the next researcher to complete this limitation. The interaction between healthcare and migrant is more reviewed than undocumented workers, and formal education is none reviewed. Healthcare access among migrant populations has been relatively well studied; however, undocumented migrant workers receive limited attention, and formal education access for this group is almost entirely absent from the literature.

4. Results and Discussion

The steps used in N-Vivo categories to create a word cloud are: Review the research questions and/or research methodology; Go over a transcripts and draft summary memos; Create a research diary and a coding plan. Write up the important new concerns in a research journal as a memo, considering their connection to the research objectives and formulating a preliminary general coding approach. Code for the major subject areas (themes) using the Mind Map. A coding framework may already exist in thematic analysis. or some preliminary codes. It will emergently develop the rest. In any case, we can begin coding at a high level. Later, we can review each code, review the topics discussed in that subject, followed by more detailed coding inside the code (referred to as "coding-on" (N-Vivo, 2022).

Following those steps, We can create attribute values and classify a specific source or case, the state of dominant "themes" based on N-Vivo analysis. Also, it creates a 'word cloud,' where our basic articles' recurrent terms are included. It's interesting to note that the terms that are more commonly used and have a larger, more central size are 'migrant,' 'health care,' 'social,' and access.' The others are undocumented, education, and workers in smaller. It means that healthcare and formal education opportunities for undocumented migrant workers in Asia are nothing in our specific case. It becomes our challenge to answer this phenomenon.



Figure 1. Word cloud

The paper samples were then subjected to cluster analysis utilizing the previously developed word cloud as a reference. Figures 1 and 2 below show how the samples were catalogued by the Nvivo software and classified into clusters using word similarity criteria.

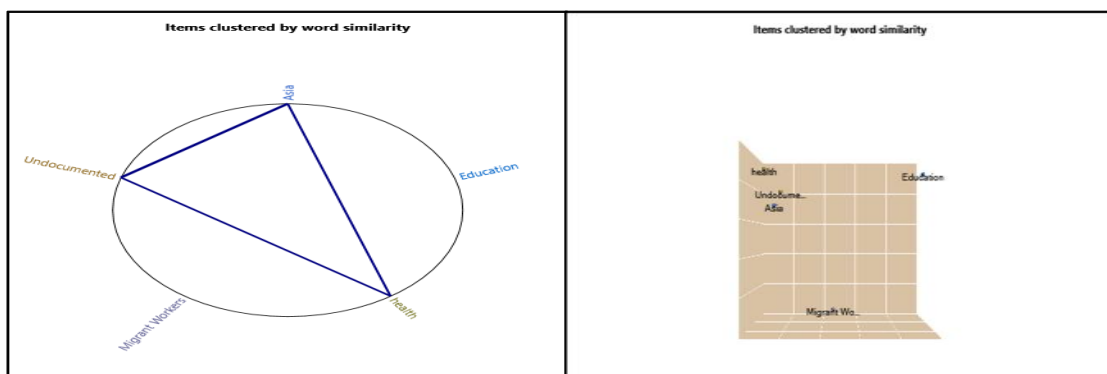


Figure 2. Items Clustered by word similarity

Word Frequency Query

health	care	social	unive	study	educ	undoc	sourc	popu	keyw	lega	wor	http	poll	engad	md	sex	affil	an	art	cov	me	
						unite	state	serv	publ	ope	abs	issn	stu	pro	ec	nee	sta	pa	ind	jou	use	wo
migran	acces	work	rese	artic		docur	statu	amo	inter	depa	comp	pub	chil	rece	id	par	uri	title	fer	one	ref	sch
migran	thaila	migra	hiv	doi		scopu	cana	hum	imm	type	cro	lang	aor	time	in	wri	risk	abl	com	my	info	bo

Figure 3. Sample data clustered by word similarity

Four main labels—referred to as "nodes" by the Nvivo software—were found by clustering our samples. In other words, for the majority of the papers in the sample, it is a necessary label indicating redundancy. The nodes that were reached, in alphabetical order, are: Health care, Migrant, Social, Access.

As shown in figure 1,2,3 above, identified through auto coding using Nvivo from 492 items, the items that we were able to determine from the cluster analysis of our sample clustered by four leading labels that the Nvivo program refers to as "nodes"—that is, the most significant labels that have redundancy in the majority of the sample papers. The grounded theory that forms the basis of the qualitative research program Nvivo is predicated on the notion that theory is found via data analysis; it begins with data to construct the theory rather than the other way around, i.e., beginning with a theory that is already established to validate research data (Stress & Corbin, 1990). Grounded theory, according to Strass and Corbin (1990), is a theory that can faithfully represent the reality it refers to. It uses both concepts and the connections between concepts to apply to a range of situations that are inherent in the study being done, as the software Nvivo does by creating what we previously referred to as "nodes." In our comprehensive analysis of the literature, we aimed to define a possible future conceptual framework through qualitative data analysis. The three macro-categories of healthcare, formal education, and undocumented migrant workers themselves are not, in our opinion, included in any link in the literature. The result of analysis using the NVivo program is the proposed practical conceptual framework, which specifically shows which issues within the sample under consideration can be specified separately. The information provides a summary of the previously listed macro-categories, and their interactions may be advantageous to undocumented migrant workers.

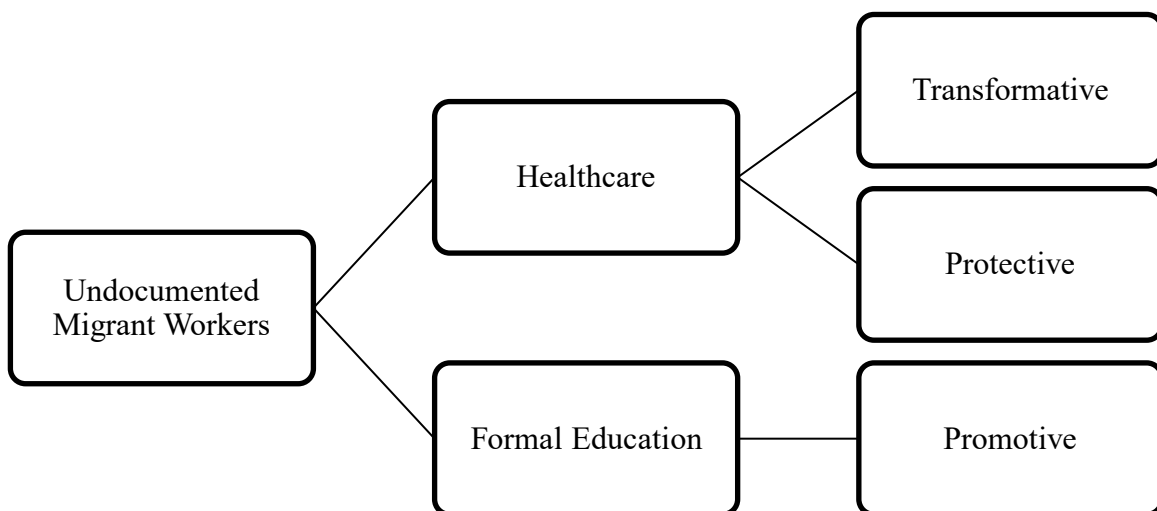


Figure 4. Conceptual Framework
Source: Authors' compilation, 2022

Several key insights emerge from that framework : Interventions differ in function, not just in sector, Healthcare has both short-term and structural impacts, Education is positioned as a long-term economic lever, Policy gaps become visible, Analytical clarity for discussion. An integrative framework can address future avenues of research and provide a better understanding of the many components of the current literature, as seen in Figure 4 above.

Table 4: Problems related to Undocumented migrant workers

Problems		
Unpaid	Workload	Traffic accident
Wants to repatriated	Overstay	Acts of violence
Died	Early Termination	Detention process
Job Scams	Trafficking	Uninsured
Debt	Disconnect Communication	More than 1 employer
Salary Deductions	Hospitalization	Formal education for their family

Source: Compiled and modified by researchers, 2022

Table 4 functions as a bridge between empirical evidence and conceptual modeling. It demonstrates that the framework is grounded in the data by showing that each intervention pathway corresponds to a clearly identified and repeatedly observed problem cluster. Based on the 18 problems shown in table 4 above that undocumented migrant workers face, there are 3 problems related to access to healthcare which is death, hospitalization, traffic accident, and others. There is no access to formal education for their family. The other barrier for undocumented migrant workers is healthcare access, not only because the distance from their place of residence to healthcare is relatively far away, but also lack of awareness about their health's importance. Undocumented migrant workers are not allowed to marry and bring their families, but not a few undocumented migrant workers bring their wives and children without having an official residence permit and do not have a complete document. It results in problems faced by undocumented migrant workers' children who have not completed official documents and still require formal education and healthcare access. The description above shows a big gap between health and education opportunities for undocumented migrant workers, making a comparative and comprehensive analysis needed. The related parties to undocumented migrant workers must try to catch up and answer the challenge of this issue that happened long ago and is still ongoing.

5. Conclusion

By reviewing the literature on the current state of healthcare and formal education access among undocumented migrant workers in Asia, this paper has addressed a systematic deficit in Asian labor markets, namely, inadequate policy provisions for migrant workers. To our knowledge, it is the first attempt to scrutinize the international literature on this subject. We can respond to the three primary research questions provided in the introduction since we have employed an SLR. First, we wanted to explore what choices the undocumented migrant workers have when they are sick and need health facilities. Based on the review, the second issue we have looked into is how illegal workers access formal education without supporting documents. Lastly, we explored the policy solutions for undocumented migrant workers to get healthcare opportunities and formal education.

Based on the review, what are the policy insights for managing the well-being of undocumented migrant workers? As we have highlighted, the main public policy challenge originates from the fact that, by law, stateless persons are not considered lawful residents of any Asian country. In some circumstances, especially across national borders, they are recognized as stateless persons without official identity documents or undocumented persons. The United Nations considers a stateless person from any country to be around 10 million. Most are minority groups living in various countries (Hagood, J., & Schriemer, C, 2018). In this context, bilateral MoUs can help (Holmes, 2006). For example, the Southeast Asian region of Sabah, Malaysia, has a long history of migrant worker problems. They are classified as illegal migrants/ undocumented migrant workers from neighbouring Indonesia and the Philippines and have lived in Sabah for decades in various capacities: indigenous people as children of illicit relationships, children from unrecognized marriages, children with incomplete parental documents, or simply because their parents have abandoned them. To implement an action plan, mutual agreements between state authorities in Sabah, Indonesia, and the Philippines can be the starting point.

Nevertheless, this requires political will (Saether et al., 2007).). Likewise, there is a need for commitment from the employing company to provide facilities for the fulfilment of healthcare for undocumented migrant workers (Sampson, 2020), (Tober, 2007). Fulfilling the basic needs of undocumented migrant workers—particularly in healthcare and education—must be understood as a foundational prerequisite, not an alternative, to formal documentation. There are several interrelated reasons for this.

- a. Basic needs are a human rights obligation, not a legal reward
- b. Immediate needs cannot be postponed without harm
- c. Meeting needs enables, rather than undermines, documentation pathways
- d. Economic efficiency favors early intervention
- e. Documentation alone does not resolve structural exclusion
- f. Diplomacy also plays a role in the Government to Government (G to G) arrangements

An example is the Malaysian government's efforts for Indonesian migrants. The first signing of an MoU between Indonesia and Malaysia took place in 2006. The result of the MoU led to the establishment of the Kota Kinabalu Indonesian School (SIKK) in Sabah. Second, to address the education issue for undocumented migrant workers in Sabah, the Government of Indonesia, through the Consulate General of Kota Kinabalu, issued official or population documents (Komnasham RI, 2022). These documents include Passport, Birth Certificate, and Marriage Certificate issued during the marriage session. It makes it easier for the children of undocumented migrant workers to obtain formal educational services. The existence of the Community Learning Center also shows that the government's soft diplomacy is successful because it has provided a platform for undocumented migrant workers and their families undergoing education. In sum, efforts to fulfil the rights of undocumented migrant workers need active collaboration between countries (Government to Government) throughout Asia. Associated policy measures are summarized in Table 5 below. The exact combination of the measures will depend on the country's context. In addition, it is necessary to have a periodic evaluation mechanism to determine the conditions and needs of the undocumented migrant workers and their families and redesign strategies.

Table 5: Potential policy measures and provisions for undocumented workers

Measures	Description Provisions
Promotive Efforts	<ol style="list-style-type: none"> 1. Establishment of the school for undocumented migrant workers 2. Establishment and maintenance of community learning centre (CLC) 3. Delivery teachers to development centres
Transformative	<ol style="list-style-type: none"> 1. The bilateral agreement between the Governments Governments 2. The obligation for every company to have health facilities even though 'simple' healthcare 3. Cooperation in the field of healthcare and formal education
Protective	<ol style="list-style-type: none"> 1. Preventive measures in handling education problems 2. Facilitation of advanced healthcare and formal schools 3. Cooperation between the Government Government 4. Document administration management 5. Birth certificate issuance 6. Organizing the marriage itsbat session (marriage legalization)

Source: Authors' compilation based on literature review, 2022

Lastly, our study has some limitations, especially since our selection does not entirely represent migrant labour-dependent Asian countries – studies on Japan, the Philippines, and Singapore are absent, and it should be the opportunity for the next researcher to complete these research gap opportunities.

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References

- Accord No. 000244, 30 June 1988. (1988). Annual Review of Population Law, 15, 195.
- Ahmadinia, H., Eriksson-Backa, K., & Nikou, S. (2022). Health-seeking behaviours of immigrants, asylum seekers and refugees in Europe: A systematic review of peer-reviewed articles. *Journal of Documentation*, 78(7), 18–41. <https://doi.org/10.1108/JD-10-2020-0168>
- Arya, N., Redditt, V. J., Talavlikar, R., Holland, T., Brindamour, M., Wright, V., Saad, A., Beukeboom, C., Coakley, A., Rashid, M., & Pottie, K. (2021). Caring for refugees and newcomers in the post-Covid-19 era: Evidence review and guidance for FPs and health providers. *Canadian Family Physician*, 67(8), 575–581. <https://doi.org/10.46747/cfp.6708575>
- Asadullah, M Niaz (2020) "Is ASEAN's COVID-19 Response Leaving The Migrant Workers Behind" East Asia Forum, 21 May 2020.
- Asadullah, M Niaz and Raman, Mishkatur (2020) "Migrant workers cut off from aid but public health at risk" The Edge Financial Daily, 27 April 2020.
- Asmini, A., & Yusuf, A. M. (2025). Unveiling the Role of Protean Career Orientation and Leadership in Organizational Commitment and Employee Performance: A Systematic Literature Review. *Ekulilibrium : Jurnal Ilmiah Bidang Ilmu Ekonomi*, 20(2), 317–340. <https://doi.org/10.24269/ekulilibrium.v20i2.2025.pp317-340>
- Astuti, H., Susilo, J. H., trifandha, siskha, & Nkembo, A. F. (2025). Dynamic Panel Data Analysis of the Human Development Index in Indonesia. *Ekulilibrium : Jurnal Ilmiah Bidang Ilmu*

- Ekonomi, 20(2), 229–245. <https://doi.org/10.24269/ekuilibrium.v20i2.2025.pp229-245>
- Bain, I. (1998). South-East Asia. *International Migration*, 36(4), 553–585. <https://doi.org/10.1111/1468-2435.00059>
- Ball, J., Butt, L., & Beazley, H. (2017). Birth Registration and Protection for Children of Transnational Labor Migrants in Indonesia. *Journal of Immigrant & Refugee Studies*, 15(3, SI), 305–325. <https://doi.org/10.1080/15562948.2017.1316533>
- Chaney, B. H., & Torres, E. (2017). Covariates of identified stress and depression among seasonal farmworkers. *International Journal of Environmental Research and Public Health*, 14(7). <https://doi.org/10.3390/ijerph14070711>
- Cloos, P., Ndao, E. M., Aho, J., Benoit, M., Fillol, A., Munoz-Bertrand, M., Ouimet, M.-J., Hanley, J., & Ridde, V. (2020). The negative self-perceived health of migrants with precarious status in Montreal, Canada: A cross-sectional study. *PLoS ONE*, 15(4). <https://doi.org/10.1371/journal.pone.0231327>
- Creta, F., & Mazaj, J. (2021). Can FinTech Progress the Real Estate Sector? The Disruptive Role of Crowdfunding & Blockchain: A Systematic Literature Review. *European Journal of Islamic Finance*, (17). <https://doi.org/10.13135/2421-2172/5323>
- De Jesus Diaz-Perez, M., Farley, T., & Cabanis, C. M. (2004). A program to improve access to health care among Mexican immigrants in rural Colorado. *Journal of Rural Health*, 20(3), 258–264. <https://doi.org/10.1111/j.1748-0361.2004.tb00037.x>
- Dhungana, R. R., Aryal, N., Adhikary, P., Kc, R. K., Regmi, P. R., Devkota, B., Sharma, G. N., Wickramage, K., Van Teijlingen, E., & Simkhada, P. (2019). Psychological morbidity in Nepali cross-border migrants in India: A community based cross-sectional study. *BMC Public Health*, 19(1). <https://doi.org/10.1186/s12889-019-7881-z>
- Doe, F., & Essiaw, M. N. (2021). When being hospitable hurts (staff experiences of bullying from hotel guests). *International Hospitality Review*, ahead-of-print(ahead-of-print). <https://doi.org/10.1108/IHR-11-2021-0071>
- Frank, H. and Hatak, I., (2014). Doing a research literature review. In: A. Fayolle and M. Wright, eds. *How to get published in the best entrepreneurship journals*. Cheltenham: Edward Elgar, pp. 94–117.
- Hagood, J., & Schriemer, C. (2018). Oral history and farmworker studies. *International Journal of Migration, Health and Social Care*, 14(1), 30–40. <https://doi.org/10.1108/IJMHSC-08-2016-0033>
- Hargreaves, S., Rust, K., Nellums, L. B., McAlpine, A., Pocock, N., Devakumar, D., Zimmerman, C. (2019). Occupational health outcomes among international migrant workers: a systematic review and meta-analysis. *Lancet Global Health*, 7(7), e872–e882. <https://doi.org/10.1016/s2214-109x%2819%2930204-9>
- Holmes, S. M. (2006). An ethnographic study of the social context of migrant health in the United States. *PLoS Medicine*, 3(10), 1776–1793. <https://doi.org/10.1371/journal.pmed.0030448>
- Indriawati, R. M., Gravitiani, E., & Samara, P. W. (2024). The Comparison of Circular Economy Analysis in Developed and Developing Countries. *Ekilibrium : Jurnal Ilmiah Bidang Ilmu Ekonomi*, 19(1), 1–17. <https://doi.org/10.24269/ekuilibrium.v19i1.2024.pp1-17>
- Jommaroeng, R., Richter, K. A., Chamrathirong, A., & Soonthorndhada, A. (2020). The effectiveness of national HIV prevention education program on behavioral changes for men who have s** with men and transgender women in Thailand. *Journal of Health Research*, 34(1), 2–12. <https://doi.org/10.1108/JHR-12-2018-0163>

- Kunpeuk, W., Julchoo, S., Phaiyarom, M., Sinam, P., Pudpong, N., Loganathan, T., Yi, H., & Suphanchaimat, R. (2022). Access to Healthcare and Social Protection among Migrant Workers in Thailand before and during COVID-19 Era: A Qualitative Study. *International Journal of Environmental Research and Public Health*, 19(5). <https://doi.org/10.3390/ijerph19053083>
- Kusakabe, K., & Pearson, R. (2013). Cross-border childcare strategies of Burmese migrant workers in Thailand. *Gender, Place and Culture*, 20(8), 960–978. <https://doi.org/10.1080/0966369X.2012.753582>
- Lee, J. (2008). Migrant workers and HIV vulnerability in Korea. *International Migration*, 46(3), 217–233. <https://doi.org/10.1111/j.1468-2435.2008.00467.x>
- LeVoy, M., & Geddie, E. (2010). Irregular migration: Challenges, limits and remedies. *Refugee Survey Quarterly*, 28(4), 87–113. <https://doi.org/10.1093/rsq/hdq010>
- Littell, J.H., Corcoran, J. and Pillai, V., 2008. *Systematic reviews and meta-analysis*. Oxford: Oxford University Press
- Loganathan, T., Chan, Z. X., Hassan, F., Kunpeuk, W., Suphanchaimat, R., Yi, H., & Majid, H. A. (2021). Education for non-citizen children in Malaysia during the COVID-19 pandemic: A qualitative study. *PLOS ONE*, 16(12). <https://doi.org/10.1371/journal.pone.0259546>
- Loganathan, T., Chan, Z. X., Hassan, F., Ong, Z. L., & Majid, H. A. (2022). Undocumented: An examination of legal identity and education provision for children in Malaysia. *PLOS ONE*, 17(2). <https://doi.org/10.1371/journal.pone.0263404>
- Martins-Fonteyn, E., Loquiha, O., Baltazar, C., Thapa, S., Boothe, M., Raimundo, I., Hens, N., Aerts, M., Meulemans, H., Degomme, O., & Wouters, E. (2017). Factors influencing risky sexual behaviour among Mozambican miners: A socio-epidemiological contribution for HIV prevention framework in Mozambique. *International Journal for Equity in Health*, 16(1). <https://doi.org/10.1186/s12939-017-0674-z>
- Mona, H., Andersson, L. M. C., Hjern, A., & Ascher, H. (2021). Barriers to accessing health care among undocumented migrants in Sweden—A principal component analysis. *BMC Health Services Research*, 21(1). <https://doi.org/10.1186/s12913-021-06837-y>
- Muñoz-Mora, J. C., Aparicio, S., Martinez-Moya, D., & Urbano, D. (2022). From immigrants to local entrepreneurs: Understanding the effects of migration on entrepreneurship in a highly informal country. *International Journal of Entrepreneurial Behavior & Research*, 28(9), 78–103. <https://doi.org/10.1108/IJEER-07-2021-0615>
- Musumari, P. M., & Chamchan, C. (2016). Correlates of HIV testing experience among migrant workers from Myanmar residing in Thailand: A secondary data analysis. *PLoS ONE*, 11(5). <https://doi.org/10.1371/journal.pone.0154669>
- Nvivo Application (2022) *Qualitative application*, USA
- Rael, C. T., Sheinfil, A., Hampanda, K., Carballo-Diéguez, A., Norcini Pala, A., & Brown, I. W. (2017). Examining the Unique Characteristics of a Non-Probability Sample of Undocumented Female Sex Workers with Dependent Children: The Case of Haitians in the Dominican Republic. *Sexuality and Culture*, 21(3), 680–691. <https://doi.org/10.1007/s12119-017-9412-3>
- Saether, S. T., Chawphrae, U., Zaw, M. M., Keizer, C., & Wolffers, I. (2007). Migrants' access to antiretroviral therapy in Thailand. *Tropical Medicine and International Health*, 12(8), 999–1008. <https://doi.org/10.1111/j.1365-3156.2007.01879.x>
- Sampson, I. A., Miles, G. M., & Piano, E. (2020). “Undocumented, unregistered and invisible”: An exploratory study of the reasons for and effects of migrating to Thailand of

- Cambodian young people. *International Journal of Sociology and Social Policy*, 41(7-8), 862-874. <https://doi.org/10.1108/IJSSP-12-2019-0250>
- Strass, A. and Corbin, J.,(1990). *Basics of qualitative research: techniques and procedures for developing grounded theory*. Thousand Oaks, CA: Sage.
- Thorpe, R., Holt, R., Macpherson, A., & Pittaway, L., (2005). Using knowledge within small and medium-sized firms: A SR of the evidence. *International Journal of Management Reviews*. vol. 7, no. 4, pp. 257-281.
- Tober, D. (2007). "My body is broken like my country": Identity, nation, and repatriation among afghan refugees in Iran. *Iranian Studies*, 40(2), 263-285. <https://doi.org/10.1080/00210860701269584>
- Tranfield, D., Denyer, D. & Smart, P., 2003. Towards a methodology for developing evidence-informed management knowledge through a systematic review. *British Journal of Management*. vol. 14, pp. 207-222
- Worldbank. (2019). *Malaysia Estimating the Number of Foreign Workers (A Labor Market Data for Monetary Policy report)*.