

The labour migration cycle: from the perspective of Filipinos with disabilities



DISABILITY MIGRATION NETWORK

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ABSTRACT

This pilot study explores the often-overlooked experiences of Filipinos with disabilities within the international labour migration cycle, addressing a critical gap in migration scholarship. Through in-depth interviews with four participants—prospective migrant workers with disabilities, migrant workers with disabilities, and migrant workers with acquired disabilities—the research uncovers barriers that span physical, social, institutional, and communicational dimensions. Key themes were generated, including navigating migration pathways, the impact of systemic reservations in the country of origin, challenges within recruitment and employment processes, and the lived realities of migrant workers abroad. The findings emphasise the urgent need for disability-responsive measures as envisioned in the Global Compact for Safe, Orderly and Regular Migration (GCM), in Objectives 7, 15, and 20. By spotlighting the inequities and exclusions faced by persons with disabilities, this study spotlights the necessity of inclusive migration policies and practices that address the unique challenges encountered by persons with disabilities across the entire migration journey.

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INTRODUCTION

Migration remains a fundamental component of human experience, providing a source of socio-economic prosperity and innovation for many (United Nations, 2019). However, migrant workers encounter a myriad of complex challenges throughout the international labour migration cycle and as a result for persons with disabilities, the migration discourse often brings systemic exclusion. They are frequently portrayed as a problem to be prevented rather than as individuals with aspirations and potential and are typically filtered out by immigration policies. This marginalisation limits their opportunities, denies them the prospects of prosperity that labour migration offers, and confines them to their country of origin, in which discrimination and social isolation can be a common occurrence.

Disability is recognised as an evolving concept, resulting from the interaction between persons with impairments (physical, sensory, intellectual or psychological) and barriers (physical, social, institutional and communication) that hinder their full and effective participation in society on an equal basis with others (UNDESA, 2006). This understanding represents a paradigm shift from the prevalent individual-centric models, which view disability as an inherent flaw focused solely on individual limitations (Riddle, 2014) to the social model, which recognises persons with impairments are disabled by a non-accommodating society hindering their participation (Riddle, 2014; Cobley, 2018). This shift has been captured within the United Nations Convention on the Rights of Persons with Disabilities (CRPD) (UNDESA, 2006), which provides new possibilities to hold duty bearers to account, enabling persons with disabilities and representative organisations to claim their right to participate in society. Despite the CRPD's progress, persons with disabilities still struggle to assert their transnational disability rights on the international stage. For instance, Article 18 of the CRPD addresses 'Liberty of Movement and Nationality' (UNDESA, 2006), affirming the right to move on an equal basis with others, yet migration remains a highly selective process (Cha'Ngom et al, 2023). This selectivity contributes to the asymmetric exclusion and numerous challenges persons with disabilities face in becoming migrant workers, a struggle often compounded by intersecting factors such as gender, ethnicity and class (Bastia, 2014). Disability intersects with labour migration in different ways; (1) persons with disabilities intend to migrate, making them prospective migrant workers with disabilities, (2) persons with disabilities migrate, becoming migrant workers with disabilities, and (3) migrant workers can acquire disabilities throughout their migration journey, becoming migrant workers with acquired disabilities. These distinct intersections may exacerbate situations of vulnerability associated within the labour migration process, for example, those created by the laws and policies which can have a potential negative impact at the different stages of the labour migration cycle.

The limited available data reflects the scale of this issue. According to the Migration Data Portal (MDP) (2022) no official international statistics exist on the global prevalence of disability within the migrating population, making large-scale analysis unattainable. This gap in data is set against an estimated 16 percent of the world's population having a disability (WHO, 2023). Of these,

about 785 million, or 80 percent, are of working age (De Luna-Narido, & Tacadao, 2021). Independent of this, there are an estimated 271.6 million international migrants (MDP, 2019), with two-thirds migrating for labour purposes (IOM, 2020). Hence, there should be some overlap between these groups, unless disability specific barriers exist that hinder labour migration capabilities for persons with disabilities.

There remains a major research gap in understanding the labour migration experiences of persons with disabilities, who currently face fragmented and inconsistent support throughout the migration process (Hultman et al, 2023). This pilot qualitative study, consisting of four interviews, seeks to amplify the views of prospective migrant workers with disabilities, migrant workers with disabilities, and migrant workers with acquired disabilities. This contribution provides insight throughout the labour migration cycle into (1) the distinct disadvantages faced by persons with disabilities (2) recommendations into what could support persons with disabilities participation.

LITERATURE REVIEW

A review of three migration journals reveals a significant gap in the research focusing on disability and migration. From January 2018¹ to November 2024, Wiley's International Migration journal featured 0 articles with "disability" in the 'title' or 'keywords', and 84 results mentioning disability 'anywhere' in the text. Similarly, Sage's International Migration Review journal had 0 articles with "disability" in the 'title' or 'keywords' and 33 mentions 'anywhere'. Taylor & Francis's Journal of Ethnic and Migration Studies included 2 articles with "disability" in the 'title', 0 in the 'keywords', and 172 mentions anywhere in the texts. Nevertheless, International Migration had 1 journal focusing on the experience of disability (Nkrumah, 2019)², International Migration Review had 0, and the Journal of Ethnic and Migration Studies had 2 (Dew, 2022; Duda-Mikulin & Głowacka, 2023)³.

The majority of these articles reviewed, utilise "disability" fleetingly in one of several ways: (a) as a vulnerable or protected characteristic, (b) in the context to welfare, benefits or social protection, (c) within the care economy centred on citizens with disabilities, or (d) was mentioned without substantive analysis or context, failing to explore the experiences of voluntary or involuntary migrants with disabilities. This limited and distant engagement with disability voices is unsurprising. As Richards (2004) highlighted two decades ago, disability often operates in the shadows within the migration discourse, despite being instrumental in shaping the concept of the 'undesirable immigrant'. Disability continues to be a rarely collected demographic characteristic and an overlooked lens for examining migration. However, as noted, "*disability is everywhere in history, once you start looking for it* (Baynton (1999: 52)" (Richards, 2004), an observation that becomes increasingly evident in the literature from the above journal search, discussed below.

In the articles more related to voluntary migration, defined as migration driven by personal choice rather than compelled by human rights violations, persecution, conflict, or violence (Hultman et al, 2023), disability is often framed through normative language portraying disability in a negative way, typically as an inherent flaw focused solely on individual limitations. This framing influences the perceptions of prospective migrant workers with disabilities, migrant workers with disabilities, and migrant workers with acquired disabilities during their migration journey and fails to tackle the barriers that hinder their participation in society. These dynamics are explored below.

For prospective migrant workers with disabilities, disability functions as both a barrier to and a driver of migration, depending on individual and family circumstances and their socio-economic

¹ 2018 was the year that the Global Compact for Safe, Orderly and Regular Migration (GCM) was deployed.

² The Hunted: UDHR and Africans with Albinism.

³ Drivers and destinations: people with disability from Syrian and Iraqi refugee backgrounds making the journey to Australia and 'I haven't met one': disabled EU migrants in the UK. Intersections between migration and disability post-Brexit.

capital in the global economy. Rita's case in Moldova exemplifies disability as a barrier, where her caregiving responsibilities for a husband with a disability and their children prevented her from pursuing migration opportunities (Bogdan, 2024). Conversely, Sabina's family, also from Moldova, illustrates how disability-related extra can drive migration. Sabina remained at home to care for her child with a severe disability, while her husband was compelled to migrate to meet the high costs of medical treatments, recovery services, and gratuities, as the family received minimal State financial support even with Sabina's child 'Grade I' disability. The family now seeks EU citizenship to access improved social security in Germany (Ducu et al, 2024). Migration aspirations are also shaped by transnational relationships and economic precarity. For instance, Josh, a British man in his late 20s with a physical disability, migrated to Thailand to work for an educational company due to limited employment, mobility, and dating opportunities in the United Kingdom (Lafferty & Maher, 2020). Similarly, marriage migration highlights how health issues and caregiving responsibilities intersect with migration decisions. A Thai woman only married a foreign partner to secure financial stability while managing her cancer treatment and caring for her child with a disability, who was living with her uncle (Statham, 2019). These cases demonstrate the multifaceted and often contradictory roles disability plays in shaping migration aspirations and outcomes, driven by intersecting socio-economic, familial, and structural factors.

The portrayal of migrant workers with disabilities is often stark, marked by marginalisation, pity, and discrimination. These challenges are particularly evident across three critical areas: employment, integration, and naturalisation processes, which are discussed in detail below.

For employment, disability is often seen as a factor that diminishes one's human capital. For example, studies reveal that immigrants with disabilities in the United States are significantly less likely to be employed than immigrants without disabilities (Nam et al, 2023). Similarly, African-origin male without disabilities marriage migrants in Australia experience diminished self-esteem and emotional well-being due to their relative lack of social, cultural, and economic capital compared to their Australian partners. This disparity is compounded by disability related barriers, as *"disabled men (are) even further (away) from trying to climb the socio-economic ladder"* (Hoogenraad, 2020). The discriminatory treatment of migrant workers with disabilities is exemplified by Daina, a 62-year-old migrant from Latvia working in the United Kingdom. Employed at an Amazon warehouse, she was made redundant because she could not meet the physically demanding targets. She recounted being told, *"Amazon does not need disabled people"*. Although she considered legal action, her employer settled out of court (Kaprāns, 2022). Disability also intersects with broader systemic issues in migration governance, particularly in educational and skilled migration pathways. For instance, an analysis comparing domestic and international labour market outcomes for graduates in Australia highlighted that international graduates were generally younger and less likely to have a disability, which is attributed to the health and age requirements of work and residence visas. Notably, the proportion of international graduates with disabilities declined over time: from 4.2 percent between 1998–2002 to just 1.6 percent by 2013–2015 (Tang et al, 2022). This trend was not addressed in the analysis but is noteworthy given Australia's Reservations when signing the CRPD, disqualifying

non-citizens to certain provisions. It raises the possibility that the CRPD's implementation may have inadvertently brought policy attention and in doing so disadvantaged international graduates with disabilities.

During integration, migrant's children often face systemic disadvantages, which are comparable to the situations of persons with disabilities. For example, children in Germany with a migratory background and language deficiencies are misdiagnosed with IQ tests and sent to schools for children with mental or physical disabilities. As one mother Andżelika stated, she intervened when her son, whom she believed to be talented and intelligent, and was wrongly placed in a 'special school' (Bargłowski, 2018), implicitly reinforcing the stigma that children with disabilities are less capable. Similarly, a migrant worker in Hong Kong without residency described his inability to access government-sponsored career training programs, stating that it made him feel *"like a disabled person, I felt so useless"* (Chiu & Choi, 2019). Whilst, under the Treaty on the Functioning of the European Union, EU citizens have rights to free movement (Article 21) and social security benefits and social advantages (Article 34). However, these rights are highly conditional. Free movement beyond three months is limited to workers with paid work or self-sufficient individuals and their dependents, leaving persons with disabilities at a disadvantage and excluded from benefits of free movement (Schweyher, 2021).

In the context of naturalisation, persons with disabilities continue to face significant barriers, reflecting systemic inequities in citizenship processes. Despite Canada's relatively high naturalisation rates, certain groups such as temporary foreign workers, individuals entering through non-economic immigration streams, and those who 'suffer' from learning disabilities or trauma, face challenges in securing citizenship (Peker & Winter, 2024). In the United States, doctors serve as gatekeepers during mandatory immigration medical screenings, tasked with identifying Class A and B conditions. While Class A conditions automatically render an applicant inadmissible, Class B conditions—which include serious or permanent disabilities impacting self-care, work, or schooling can also lead to rejection. These policies may result in deporting migrants to regions lacking adequate medical care, and vague guidelines for identifying such conditions exacerbate inconsistencies in the process (Aptekar, 2018). However, certain accommodations exist, such as exemptions from English language requirements for naturalisation due to age or disability, as provided under the 1906 Naturalisation Act (Cervantes, 2021). Whilst, Stern and Valchars (2013), as cited by Askola (2021), outline that socio-economic integration requirements for naturalisation in Austria may exempt persons with disabilities who are often unable to meet the participation demands, arguing that these exemptions are based on the premise that persons with disabilities *"cannot be 'blamed' for their lack of participation"*. While this perspective acknowledges the barriers faced by persons with disabilities, it also reflects low societal expectations and the absence of proactive accommodations to enable their inclusion. This highlights a broader failure to reframe disability as a factor requiring systemic support rather than passive exclusion.

Migrant workers with acquired disabilities, such as those who sustain occupational injuries often face compounded stigma and exclusion, as healthcare and social services provisions are typically not adapted to meet their specific needs. This exacerbates situations of vulnerability as it leads to long-term exclusion from the labour market and increased risk of impoverishment (Côté et al, 2023). The impact of these injuries extends beyond individuals to their transnational families, who often worry about the risks faced by their loved ones abroad. For instance, Hari, a father in Nepal, is deeply concerned for his son who migrated to Malaysia and later Qatar, both of which have high rates of death, injuries, and disabilities among Nepali workers (Limbu, 2022). As of October 2019, Malaysia alone recorded 6,562 occupational accidents, including 214 deaths and 236 cases of permanent disability, with these figures representing only cases reported to the Department of Occupational Safety and Health (Sunam, 2022).

These stories from the selected literature, are backed up with the wider evidence pool which reveals the inequalities that persons with disabilities face throughout the labour migration cycle (Kim, 2011; Burns, 2017; Govere et al, 2021; Thatcher, 2023). This includes legislative exclusion, lack of representation in migration mechanisms (civil society and governmental), lack of access to social services and healthcare, and the denial of access at borders based on grounds of health that follows the individual model narrative. This is aggravated with barriers constructed in countries like the UK, Australia and Malaysia who put restrictions on CRPD Article 18 such that only citizens are covered for protection. Persons with disabilities are also being rejected on medical grounds alone (Soldatic, 2013; Burns, 2017) as they are perceived as health burdens. This coincides with the literature on the 'healthy migrant effect' that proposes that immigrants are generally 'healthier' than their native-born counterparts despite facing social and economic disadvantages (Stanek et al, 2020; Bacong and Menjívar, 2021; Dondero & Altman, 2024). This is based on the 'migrant selectivity hypothesis', which suggests that immigrants are not a random sample of their home country populations. Instead, persons who are perceived to have 'healthier' bodies tend to be positively filtered through both the sociocultural mechanisms from origin countries and the State policies of destination countries (Stanek et al, 2020; Bacong and Menjívar, 2021). This supposition conflates disability with health, promoting individualistic models of disability that suggest that persons with impairments have an inherent flaw, opposed to the failures of an unaccommodating society. Research has focused on the challenges faced by persons with disabilities during the immigration process, particularly when entering their destination country, and the enduring legacy of intersectional discrimination affecting persons with disabilities, people of colour and those living in poverty (Richards, 2004; Joseph, 2022).

These issues become even more apparent when including forced migration studies, which encompass displacement and refugees - individuals who involuntarily move away from their country of origin due to experienced or potential human rights violations (Hultman et al, 2023). As there is more extensive disability research in this typology of migration (Pisani and Grech, 2015; Ghenis, 2016; Addaney et al, 2019; Emery and Iyer, 2021; Hultman et al, 2023; COAMEX, n.d.; Joppke, 2024), where the literature indicates that both discourse and praxis adopt an

ableist⁴ approach that neglects other body forms (Pisani and Grech, 2015). Countries have expanded disability exclusion procedures to include a range of tactics, including refugee and asylum selection status determination processes that actively ‘screen out’ persons with disabilities for refugee status or resettlement (Addaney et al, 2019; Vähä-Savo & Koivuluhta, 2024) with the United Kingdom government even refusing to accept the application of refugee children with disabilities after fleeing war in Syria and other countries because the government said it cannot cope with their needs (Smith & Waite, 2018).

In the context of labour migration in the Philippines, despite the depth and breadth of migration research there is no substantive literature for the intersection of migration and disability. Nevertheless, emigration has been instrumental in lifting over 850,000 families out of poverty over the past decade (Hasnan, 2019). For Filipinos, particularly those from economically disadvantaged backgrounds, migration serves as a critical lifeline. However, while multidimensional poverty affects both persons with and without disabilities, when development occurs in a society, persons with disabilities and their families do not see proportionate increases in their living standards (WHO and World Bank, 2011; Cobley, 2018). Reducing disability-specific barriers to labour migration could substantially enhance opportunities for the Filipino disability community. Nevertheless, significant structural obstacles remain; for instance, the Philippine Coalition on the United Nations CRPD (PCCRPD) (2013) presented evidence concerning the implementation of the CRPD. The PCCRPD highlighted violations related to Article 18 and the identified violations included: (1) limitations for individuals recognised under Philippine laws as having limited capacity, requiring consent from legal representatives to acquire a passport, (2) challenges at airports, encompassing restrictions on travel from the Bureau of Immigration (BI) and encountering unaccommodating airlines. Such barriers highlight how systemic exclusions within policies and laws can hinder the mobility of Filipinos with disabilities.

⁴ “Ableism is discrimination and social prejudice against people with disabilities or who are perceived to be disabled. Ableism characterizes people as defined by their disabilities and inferior to the non-disabled” (Linton and Bérubé, 1998: 9).

APPROACH

The existing literature on the intersection of disability and migration paints a picture of exclusion and marginalisation. To unpack the consequences for Filipinos with disabilities in the labour migration cycle this article utilises the concept of 'Ableism' (Campbell, 2009; Baglier & Lalvani, 2020; Hultman et al, 2023), which frames experiences within the context that the world which persons with disabilities inhabit is a world made ready for the 'able body' (persons without disabilities), and in which policy, processes and norms orientate around the capabilities of the 'able body' (Flowers, 2022). Such an orientation presents insurmountable challenges for persons with disabilities to overcome, often entailing their marginalisation, with them being depicted as abject, invisible and disposable (Dolmage, 2017) thus perpetuating inequality (Hultman et al, 2023). Therefore, this study aims to raise awareness of disability-responsive needs within the migration field, supplementing the disability-specific objectives (7, 15, and 20) of the Global Compact for Safe, Orderly, and Regular Migration (GCM) (United Nations, 2019). Drawing on the stories of the participants, this article explores the barriers that persons with disabilities face throughout the labour migration cycle and identifies helpful practices that may support persons with disabilities during the labour migration process.

METHOD

This article examines the phenomenon of the labour migration cycle through a disability lens. The migration discourse, both in terms of policy and programmes, is dominated by the voices of persons without disabilities. Thus, this pilot research was designed to focus on the voices of persons with disabilities, presented in their own words so they can identify their own disadvantages, vulnerabilities and priorities, and share their own realities – providing them dignity and representation. This entailed adopting a qualitative phenomenological approach aimed to gain deeper insights into how people understand labour migration. The approach is primarily descriptive, utilising verbatim quotes to convey the essence and depth of those experiences (Delve and Limpaecher, 2022). Termed as *Verstehen*, this method involves exploring individuals' lived experiences from their unique standpoint and context, articulating their narratives using their own language and concepts, thereby offering an insider's perspective (Hennink et al, 2020).

Data collection

The target of 6 participants was not met, as direct access to prospective migrant workers with disabilities, migrant workers with disabilities and migrant workers with acquired disabilities was challenging, due to the lack of mechanisms to find them. The inclusion criteria was (1) a Filipino citizen (2) over the age of 18, (3) self-identifying as being a person with a disability, and fits into one of these three categories (4a) prospective migrant workers with disabilities (a person with a disability who desires to be a migrant worker but faced barriers), or (4b) migrant workers with disabilities (a person with a disability who became a migrant worker), or (4c) migrant workers with acquired disabilities (a migrant worker without a disability but acquired a disability whilst abroad). Due to the small sample size, a purposive sampling approach was applied as it is more likely to generate participants who are willing to share their experiences (Karakas & du Plooy, 2023) and this was supplemented with snowball sampling. Participants were identified through the researchers' network in Metro Manila, from migration Civil Society Organisations (CSOs) and Non-Governmental Organisation (NGOs) and Organisations of Persons with Disabilities (OPDs).

Data was collected by conducting in-depth interviews to capture the experiences of 4 participants⁵ in March to April 2023. A semi-structured interview was designed which was reviewed by both a migration and disability expert, with open-ended questions used to guide the discussions, all of which were conducted in English. 1 interview was conducted face-to-face and 3 were conducted on Zoom. The interviews lasted roughly 2 hours, face to face conversations were recorded with a phone and online conversations were recorded via Zoom. Where necessary reasonable accommodation was provided (e.g., Filipino Sign Language Interpreters [FSLI] and

⁵ More participants were identified but declined to be part of the interview. One participant who got interviewed was not included as they only wanted to travel not to work.

Deaf Relay Interpreter [DRI]). Table 1 below outlines the profile of participants' characteristics by age, sex, disability, highest education level, occupation and migration history.

Table 1: Profile of participants characteristics.

Pseudonym	Age	Sex	Disability	Education	Current occupation	Migration
Carlos	52	Male	Physical disability	Vocational certificate	Electronic technician to Disability advocate	Prospective migrant worker with disability
Sean ⁶	51	Male	Sensory - deaf	Completed half-college	Baker, data encoding	Migrant worker with disability - Qatar
Jhon	61	Male	Physical disability - Long-COVID	Undergraduate degree	Fitness trainer	Migrant worker with acquired disability - Saudi Arabia
Luise	48	Female	Physical disability	Undergraduate degree	Secretary	Migrant worker with acquired disability -Qatar

Data analysis

The 4 interviews were transcribed verbatim and personal information was removed from these transcripts. The researcher read and reread each transcript to become familiar with the text and identify important quotes and phrases, before conducting a thematic analysis (Braun & Clarke, 2013; Figgou & Pavlopoulos, 2015; Sovacool et al, 2023). The process commenced with a deductive round, utilising pre-assigned categories derived from different phases of the labour migration cycle; pre-migration, during-migration and post-migration. This phase was followed by an inductive coding process that aimed to generate themes within these categories that matched the objectives to identify barriers and helpful practices. These themes were refined into comprehensive descriptions, using direct quotes illuminating the essence of their experiences and supplemented with contextual information. Overall, the results section provides a space for persons with disabilities experiences to be shared in their own voice, whereas the discussion extracted core themes from the data to identify common prevalent barriers. To ensure the validity and reliability of the data, participants commented on the result section after the analysis. Furthermore, an OPD's perspectives were integrated into the thematic codes and core themes, final analysis and also informed the recommendations.

Limitations

This research has several core limitations; (1) the difficulty in finding participants, (2) the small sample size which means limited generalisability, (3) participants were mostly men, all aged over 48 and not all disability types were covered, (4) the interviewer only spoke in English, and (5)

⁶ Lae is Sean's wife and was both a participant and the DRI during the interview, she is also deaf.

despite the researcher having personal lived experience as a person with a disability, it is important to acknowledge that the severity and specific challenges faced by different individuals vary greatly, hence, analysis may not capture the entire spectrum of disability experience.

Ethical Considerations

The ethical foundation of this research is anchored in a community development positionality, prioritising respect, confidentiality, and informed consent at every stage of the study, in line with a participatory methodology. This approach values community autonomy, allowing persons with disabilities to provide direct permission for sharing their voices and experiences, rather than being mediated through formal institutional channels. As such, ethical approval was deemed unnecessary; instead, ethics were addressed through direct engagement with participants. Consent was obtained verbally, with clear communication that participation was entirely voluntary and that participants could withdraw at any point without consequence. Confidentiality and anonymity were rigorously maintained, ensuring that any identifiable information was removed from published findings. Participants were also given the opportunity to review and validate the findings, with assurances that any information they felt misrepresented would be changed or excluded. Additionally, reasonable accommodations were provided to those who needed it, to ensure accessibility and inclusivity throughout the research process.

RESULTS

Carlos

Carlos, a prospective migrant worker with a physical disability, recounted his personal journey and the challenges he faced in reconciling his aspirations with the realities of living with a disability. As a teenager, he dreamed of becoming an Overseas Filipino Worker (OFW), following in his father's footsteps as an engineer. However, his life changed dramatically when he acquired a disability at the age of 16, leading him to abandon his aspirations. Reflecting on his experiences, Carlos highlighted the impact of internal challenges faced by persons with disabilities in pursuing opportunities within both national and global workforces. He explained how the absence of visible role models or success stories of migrant workers with disabilities further diminished his confidence in achieving his dreams.

"I know that to myself, I know that I cannot work abroad, it was my childhood dream to be an OFW, as an engineer actually (like his dad), but when I acquired my disability, I said it is not possible for me (to go abroad)".

"I acquired my disability when I was 16 years old, I do not know any story of a person similar to me as a wheelchair user, I never had any idea that a person like me could finish education, could find a job, could have a family, I had no idea. I stopped dreaming when I acquired my disability. I just accepted that I must find a job here... I stopped thinking I could use public transport to go places, I had this childhood dream I could work abroad but it has all gone... if this is what I felt because of my disability, migration is very impossible, if your home place is very difficult to find a job or to have a good education, so if you do not have a good education how can you travel abroad and work there, so I gave up those ideas ... I never even thought of getting on a plane to travel to other places, I never even had this idea, until I was offered to go travelling, I experienced it and saw the possibilities that it is possible for people with disabilities to travel outside their community".

In adulthood, Carlos's aspirations were further hindered by experiences of workplace discrimination in the Philippines. His first job, with a power supply company promoting the employment of persons with disabilities as part of a social outreach initiative, exposed him to inequities. During his probation period, he and his colleagues with disabilities were paid below the legal minimum wage. Upon completing probation, their wages were raised to the minimum, but a social event revealed that coworkers without disabilities earned more. The company justified the pay disparity by arguing that Carlos did not perform physical lifting tasks, although he contributed in other meaningful ways. This discriminatory treatment left Carlos disheartened, reinforcing his doubts about pursuing employment abroad, particularly when workplace barriers were already overwhelming at home.

As Carlos advanced in his career, additional barriers emerged. At his second company, he observed that many of his colleagues were being recruited to work overseas. Despite his qualifications and experience, his disability became a clear impediment. Recruitment agencies excluded him outright from consideration, illustrating the systemic challenges persons with disabilities face in migration pathways. Carlos described how these experiences diminished his aspirations, underscoring the compounded barriers that persons with disabilities encounter in both local and international employment contexts. He said:

“I worked for the company for around 5 years, after 3 years of working, I observed that my coworkers are leaving the company to work abroad. Of course, I was happy that they will be working abroad, because the salary abroad is much higher than the salary here in the Philippines. ... as years passed by, third year, or fourth year, more engineers were leaving the company, ... I already heard that there were recruiters calling them (colleagues), I overheard them talking about recruiters recruiting our engineers to work abroad I already heard from my coworkers, but one time, because there were only few engineers in the office, I had to answer a lot of phone calls, this one, I was speaking to this job placement agency, and I was being asked about my work background, and then I was asked if I was interested to work abroad. Of course, at that time I was surprised, hearing, actually answering the call, and being offered to work abroad, at that very moment, I never had any idea that it is possible for me to work abroad because I am a wheelchair user. So, I asked the phone caller, if they accept people who uses wheelchair to work abroad, and immediately the caller said to me - I am very sorry, I do not think it is possible and she hung up (soon after) ... the recruiter said we do not hire people with disabilities or something like that, that is what I remember”.

Carlos has faced significant discrimination not only in recruitment processes but also during transit. These challenges highlight systemic barriers that hinder the mobility and opportunities of persons with disabilities at multiple stages of migration. Carlos shared his frustrations regarding the recruitment process, explaining that obstacles often arise at the very first stage, preventing individuals from progressing further.

“At recruitment, we already have a problem, we cannot even proceed to the next stage, as at the very beginning there is a blockade, we cannot move to the next stage of the process of migration”.

His experiences also extend to discriminatory practices in air travel, where policies fail to accommodate the needs of persons with disabilities, adding another layer of marginalisation to their already limited opportunities.

“Even flying, when travelling sometimes there is a huge barrier in policy, I have experienced a lot of that policy as a wheelchair user... here in the Philippines for

example, an Airline once asked me do you have a companion, I said no, they said Sir sorry you cannot fly you need to have a companion, however, I said if you do not allow me, I can sue you and then they allowed me to fly .. but also, one time working for a US based organisation, who is a watchdog for the World Bank ... monitoring World Bank funded projects making sure they do not harm people or environment ... I was asked to participate in the review of the safeguard process, and I was going to South Korea... I was able to travel up to Hong Kong, but from Hong Kong I was not able to transfer to another plane to continue to fly, ... so what happened was that I was stuck there for two days, ... I stayed at the airport ... I did not have any money, so some of the employees, maybe they were worried and concerned (about me), they gave me cookies and water and checked on me from time to time”.

Carlos also shared a personal story about his father, a career OFW who faced enhanced risks due to his disability. His father, an electrical engineer, contracted meningitis in the early 1980s, which made him prone to seizures. Despite his condition, Carlos’s father chose not to disclose his disability to employers, fearing it would cost him job opportunities and limit his ability to provide for his family. However, his seizures occasionally occurred at work, leading to his dismissal and forced return to the Philippines when his condition was discovered. Undeterred, he repeatedly sought new opportunities to work abroad, perpetuating a cycle of employment and dismissal. During his last deployment, he experienced a seizure and was hospitalised. The lack of accurate medical information about his condition led to a misdiagnosis and incorrect treatment. After undergoing surgery where his pancreas was removed, he briefly regained consciousness but passed away shortly after. His reluctance to disclose his disability stemmed from the fear of losing job opportunities and the inability to provide for his family.

Sean

Sean, a migrant worker with a hearing disability, has built a successful career in Qatar, working as both a pastry chef and a data encoder for over a decade. However, his migration journey was driven by challenges he faced in the Philippines, where low wages and workplace discrimination compelled him to seek opportunities abroad. Reflecting on this period, Sean shared how financial constraints and his wife's support led to his decision to migrate:

“Before in my company, it’s a factory, I only stayed there for 3 years and then I resigned, then I applied in a big supermarket as bakery helper and for 8 years I worked, and I resigned then, my salary was low, and I was thinking of my budget and decided to move and my wife contacted her childhood friend who works in Qatar and helped me, first with training, and later the company hired me as a pastry chef and data encoder in the stock department... in Qatar I have worked 13 years and still going”.

Lae, Sean's wife, elaborated on his experience in the Philippines, highlighting the discrimination he endured as a deaf worker. She explained how societal biases and exclusionary attitudes contributed to his decision to migrate:

"His experience working with hearing people, Sean said it was really difficult, the environment was difficult, so he decided to go abroad, which is better ... Sean's experience is like, Filipino people are looking down on him, this is the discrimination he had, just because he is deaf, people look down on him, Sean was like I am also a Filipino, why do you look down on me? One time he went home and was already complaining because of the experience he had, because of Filipino culture, they always, their minds are not open to the deaf, for us we are equal, but they look down on us just because we are deaf, this is why he decided to go abroad".

Sean's journey to becoming an OFW was facilitated through the support of his wife Lae's childhood friend, who worked for a company in Qatar. This connection played a crucial role in streamlining Sean's application process and securing his position. The Qatari company, which directly hired Sean, facilitated all the necessary arrangements, including processing his papers, passport, visa, and even his plane ticket. Furthermore, they waived his medical assessment (though details on this were not elaborated), reassuring him that his disability has no bearing on the job role. Upon arriving in Qatar, Sean was provided with living accommodation in a company dormitory, where he quickly settled into his new environment. Lae recounted:

"In 2001, when he started to work as a bakery helper – doing bread and pastry – he always lacks sleep, and he's supporting both of us and the budget is lacking is not really enough – so the salary was below 10,000 (pesos) at the time. Then suddenly, we found out about the Qatar opportunity, we were surprised that there was an opportunity waiting in Qatar and I told him to go, and Sean agreed. It was like he was just going to work in an office, a kind of business company, real estate, and restaurant, so they helped my husband through that company. There was actually a deaf person and employees with disabilities in that said company. My childhood friend was the one who informed us there is an opportunity available in Qatar, the three of them, one deaf, one orthopaedic and one with autism, so there were persons with disabilities. We were surprised that those kinds of persons with disabilities are working there. They told me this is a good opportunity, and he tried to apply for work. At first the company called Sean's hotel, they asked about Sean's attitude, background check, we were all in video conferencing that time. So, my friend was one to process his papers, passport and visa, including the certificate and plane ticket going to Qatar, the hotel, and where he stayed during his training, but the allowances were already included when he applied for that job, so he passed his visa and went to Qatar".

Sean reflected positively on his migration experience, highlighting how it introduced him to a welcoming, inclusive environment free from discrimination. He described the cultural richness and friendships he built, contrasting it with the discrimination he faced in the Philippines:

“What I felt, in my experience when it was my first time going to Qatar, this is a new place, a new way for me, I had respect for Qatar. I had no fear going there... I had no problems at all because they are helping me, the hearing persons they know I’m deaf they only use gestures and there is no discrimination happening... Here in Qatar, there is no discrimination they are good, they are okay, but in the Philippines, I had a lot of discrimination experiences ... I have enjoyed being here, because you are interacting with different nationalities, you are meeting different people in all walks of life, and you become friends with them... I was mainstreamed with hearing people, we are telling jokes and having fun”.

Though Sean’s migration to Qatar was made possible by the support he received from his employer, who facilitated the opportunity. Sean’s journey was not without obstacles, particularly during the pre-migration process in the Philippines. Sean faced numerous communication and social barriers, including an incident with the BI on the day of his flight. During the BI interview, no FSLI was provided, despite Sean being deaf. The BI officer conducted the interview by writing in Tagalog⁷, a language Sean did not understand. This left Sean feeling anxious and unable to respond effectively. He was forced to leave the airport to seek help from his wife, Lae, and mother, who were waiting outside. Lae reached out to leaders in the disability sector, who intervened and helped resolve the issue. Notably, this incident violated Republic Act (RA) No. 11106, the ‘Filipino Sign Language Law,’ which mandates that government workplaces, including the civil service, adopt reasonable measures to accommodate the deaf, including providing interpreters. Reflecting on the corrected process during Sean’s second interview, Lae said:

“So, when he had the (second) interview, Sean already had an interpreter (they hired) and the interview went smooth, when the interview was ongoing. So, nothing bad happened during the interview, the only mistake was at the first interview when Sean had no interpreter. Then he successfully passed the interview”.

Sean further elaborated on his direct experiences with the BI, emphasising how the unnecessary barriers created by the process could discourage persons with disabilities from migrating. He explained:

“Having problems with the BI, because if you have to go to other countries for work, there are so many question from them, and they are looking down on people like us, in the BI, so this is a barrier why they (persons with disabilities)

⁷ Filipino Deaf community tend to speak and write in English and not in Tagalog.

are thinking they cannot go and migrate to another country... only once did I have experience with the BI ... because when I was almost going to go to Qatar, they kept telling me that I cannot go there because I am deaf, I told them I have a friend there who will train me, the BI are inventing some things, excuses, why I cannot go... the company is the one that helped me”.

Jhon

Jhon, a migrant worker who acquired a disability as a result of severe COVID-19, shared his experience navigating the compounded challenges of workplace discrimination, inadequate institutional support, and the difficulties associated with medical and repatriation processes. For over a decade, Jhon worked in Saudi Arabia, steadily building his social and economic capital. However, in 2021, his life was drastically altered when he contracted COVID-19, experienced severe health complications, and lost over 80 pounds. Describing his ordeal, Jhon shared:

“I got tested positive for COVID-19, what the management did was take me away and put me in a very dirty accommodation, without anyone looking after me ... I couldn’t even move or stand up because I developed vertigo, and every time I went to the bathroom, I caught my breath as I was losing my oxygen capacity”.

The lack of support extended beyond physical care; Jhon faced isolation as he lost contact with his family and had his belongings stolen by members of his community:

“When I was infected, no one was there to look after me (for 1 week in his work accommodation he was just brought food and water). I lost contact with my family because I couldn’t afford phone data, and I lost all my belongings to Filipinos who took advantage of my weakness (stole his belongings)”.

Despite the neglect from his employer, Jhon's social capital ultimately saved him. A client from his gym intervened, prompting the management to send him to the hospital:

“One of my clients from the gym asked me how I am, I told him, ‘Please tell the management to bring me to the hospital because I am dying already’. The next day was the only time the management helped me (to take me to the hospital)”.

Jhon's experience highlights not only the absence of support from his employer but also the inadequacies within the healthcare system. Following his hospitalisation, he was transferred to a rehabilitation centre but encountered challenges when the administration attempted to deny him care, citing his status as a foreign worker.

“(After being in ICU [intensive care unit]) They sent me to a rehabilitation centre ... because this hospital is specialising on COVID they were only catering for locals like Saudis, so they tried to throw me away and put me in another rehabilitation centre ... but the doctors who treated on me, said I needed to go

back to the hospital because they considered I was not fully treated to move about”.

Following his discharge, Jhon’s employer terminated his employment despite his ongoing health struggles:

“I begged the management to bear with me until I could recover enough to work independently, but after a month of struggling with the effects of COVID, they just fired me... because of COVID I was fired from my work because I was like a PWD (persons with disabilities)”.

This left Jhon, with no other option than to try and find a way home. Unable to secure immediate travel back to the Philippines, Jhon applied for repatriation through the Philippine Overseas Labor Office (POLO) and the Overseas Workers Welfare Administration (OWWA). However, his efforts were met with bureaucratic delays and indifference:

“I filed for the repatriation program ... even though they see me as a disabled person, they do not care about it ... I emailed them, phoned them, texted them, but no answer. It’s very hard to seek help even though you are already an immigrant. They do not care about your situation”.

After obtaining an exit visa to return to the Philippines, Jhon experienced significant impacts to his mental well-being, intensifying fears of succumbing to COVID-19. Reflecting on his experiences as a migrant, Jhon highlighted the physical and emotional toll of navigating institutions. He recounted:

“Even though we have this financial/ medical assistance and help during the peak season of the pandemic, I didn’t receive any at all. I was a COVID victim they said I could get it ... when I was still in Saudi Arabia I followed up with my medical assistance, and the guy in charge of the embassy told me that I can follow it up here in the Philippines when I got back here, but when I got back here and followed it up and then they told me it’s got to be there in the embassy in Saudi Arabia, they keep passing me one channel to the next, and even though I applied for the DOLE (Department of Labor and Employment) top-up when I was still in quarantine, I applied for this financial system online and they turned me down, because they were looking for documents form my previous company, but during those days I couldn’t actually move and when I got home and went through my documents and sent it back then, to the email address off DOLE and still no reply over two years ago”.

Jhon sought to remigrate, as he believed his age hindered his ability to secure employment in the Philippines. He emphasised the challenges posed by medical examinations⁸ required for overseas employment, which often blur the lines between health and disability. These evaluations presented a substantial barrier effectively preventing Jhon from re-entering the labour market. Drawing from his extensive overseas experience, Jhon highlighted the systemic bias embedded in the medical certification process:

“It is very hard for me to find a job now abroad because of the severe effects of COVID-19 on my health. ... because of this severe experience applying for a job abroad because our medical system here is very bad, ... around your livelihood they will turn you down ... if they get a little bit of things in your medical examination, my blood pressure, my X-ray, my age, these are the factors holding me back from applying abroad again. ... Even though I have been abroad for over 10 years they do not care about your wellbeing, that the reason why you go abroad to seek greener pastures for your family, they will just turn you down and they will stamp on your medical application - unfit for work, it’s very upsetting ... It will cost you a lot of money, like even the basic more than 3,000 pesos, and they turn you down, they stamp unfit for work detail on your medical application, you will never get the money again”.

Luise

Since 2006, Luise, a migrant worker with an acquired physical disability, has been living in Qatar. She initially moved on a family visa to seek employment and to be closer to her mother, a domestic worker, and her sister, who worked in sales. Her first job as a receptionist ended abruptly after a car accident and the acquisition of her disability. Luise decided to quit this job due to the severity of her accident, as she felt she was unable to work anymore. Following 11 months of hospitalisation and rehabilitation, Luise started her current job, where she has worked ever since. Reflecting on her journey, she emphasised the crucial role of Qatari society's supportive approach toward persons with disabilities, particularly the availability of rehabilitation services and employment opportunities tailored to her needs. Luise explained:

“My current company hired me, as they are a charity and hire persons with disabilities ... My first job was where my accident (happened), then I had rehabilitation in the hospital. There was a conversation (with the hospital staff) who recommended me a job. They do this for patients who have a disability who are able to work”.

She further elaborated on the encouragement she received during her recovery, which was the motivation for her to go back to work:

⁸ Evaluate if an OFW is fit or unfit to work abroad, conducting physical, and psychological health checks as well as testing for pregnancy (Fair Agency, n.d.).

“During my rehabilitation, there was one department that was helping persons with disabilities, the handicapped, if they are able to work. The first time they offered work to me, I did not accept ... they were convincing me to work, and so now I am still working ... I was thinking I cannot do my work probably, but they said you can do it”.

While Luise expressed satisfaction with her life in Qatar, her experience returning to the Philippines for a holiday in 2011 highlighted the challenges persons with disabilities often face in their countries of origin. During her trip, Luise encountered discriminatory treatment at the airport, where she was subjected to unnecessary questioning solely because she was in a wheelchair. Her account outlines how societal perceptions of disability and employment can shape the experiences of migrant workers, not only in host countries but also upon their return home. She shared:

“My experience (returning home) in 2011 and 2019, 2011 in the Philippines was difficult for a person with disabilities, but when I went in 2019 maybe they improve like in the airport, based on my experiences... In 2011 when I went for holiday to the Philippines, when I came back here to Qatar, in the Philippine airport, they questioned me, they held me, because I am in a wheelchair. I told them that I am working in Qatar, then they ask questions a lot, and they hold me, and they sent me to one of the offices in the airport for questions, then I told them that when I came, I gave them my medical certificate and I am allowed to travel for holiday... they question me because I am in a wheelchair and think how can I work ... I was afraid I may miss my flight (Qatar Airways)”.

Support for Persons with Disabilities in the Labour Migration Cycle

Participants emphasised the need for support systems and resources tailored to persons with disabilities throughout the labour migration cycle. They proposed addressing key gaps, including the lack of reliable information from trusted sources and the absence of social protection programs that facilitate independent living and support networks.

Navigating a familiar environment is already challenging for persons with disabilities, but transitioning to a new country presents additional obstacles, such as unfamiliar transportation systems and limited access to services. Participants highlighted that having access to reliable, disability-specific information before migration would help them better prepare for these challenges. They advocated for the establishment of networks in destination countries, particularly through OPDs, to provide practical insights into living with a disability abroad. Additionally, participants suggested creating a dedicated program within the Philippine Department of Migrant Workers (DMW) to offer tailored guidance, tips, and access to services for prospective migrant workers with disabilities. Carlos emphasised the need for government intervention:

“When they advertise for recruiting people, they shouldn’t be discriminated against from the very beginning, also during recruitment, you know during interviewing, people who have disability needs supporting, are they accessible and in a language that they understand, even for persons without disabilities, it’s important to adapt the language so they can understand”.

Improved information dissemination during recruitment was identified as essential. Participants stressed that recruiters should clearly specify if job opportunities are accessible for persons with disabilities and offer reasonable accommodations. Experiences of attending interviews only to find that accessibility needs were unmet have contributed to feelings of frustration and reinforced past discrimination. Transparent communication could mitigate these challenges and foster greater inclusivity.

Participants also outlined the importance of transnational social protection measures, particularly given the additional costs of living with a disability, such as healthcare expenses. Carlos articulated the complexities of weighing potential income against these added expenses, which often leave persons with disabilities at a financial disadvantage:

“If I was going to consider migrating to other countries, I would think about what is available to me, from the government in the destination country, are we protected in social security just like the citizens, if not is my country going to cover those costs? ... Or in a poorer country, where there is less social security, is my salary enough to cover and to secure my wellbeing and welfare, will I have access to healthcare, can I save money for my future, how can I make sure I have my social security pension when I retire, but this is me with my knowledge to what it takes accessing the social security system, are all people aware of this?”.

DISCUSSION

The findings of this pilot study align with existing literature, highlighting the distinct disadvantages faced by persons with disabilities throughout the labour migration cycle. Each of the four participants shared unique experiences shaped by marginalisation and discrimination, which manifest in varied ways during their migration journeys. The migration journey for persons with disabilities involves complex and often overlooked challenges. For some, these challenges begin with limited aspirations and societal perceptions that restrict their opportunities, while others encounter barriers in governance, recruitment and service provision. Additionally, acquiring a disability while abroad can disrupt individual trajectories and broader migration goals. This discussion explores the participants' experiences across key themes: (1) Aspirations and identity, (2) Governance and recruitment agencies, (3) Disability-responsive services, (4) Navigating the medicalisation of disability, and (5) Enabling support for aspiring OFWs with disabilities. These themes reveal both systemic barriers and opportunities for fostering inclusive practices within the labour migration cycle.

Aspirations and identity

Participants in this study, described encountering various challenges and different forms of direct or indirect discrimination while residing in the Philippines. These accounts illustrated the barriers that emerge when society lacks inclusivity and fails to provide reasonable accommodation. They faced challenges such as the inaccessibility of the physical environment, exclusion from activities, lower wages compared to colleagues without disabilities, and attitudinal discrimination both in daily life and in the workplace. These experiences influenced their perceptions about labour migration as a prospective opportunity. Discrimination served a dual role, it acted as a push factor (Ducu et al, 2024; Laffettry & Maher, 2020), encouraging migration, while concurrently instilling doubts (Bogdan, 2024) about their capabilities to pursue employment as migrant workers. However, the primary reason to migrate is still to do with the need for higher wages to support their families. Interestingly, those who had migrated to Qatar reported contrasting experiences from that found in the Philippines, expressing genuine satisfaction with their lives in the new country.

The notion of 'identity' revealed unique concerns among persons with disabilities, particularly in relation to their aspirations of becoming OFWs. The scarcity of information regarding maintenance of assistive devices and the unknown prospect of independent living without their family emerged as pivotal considerations, significantly impacting on their sense of personal autonomy. For one participant, the dream of becoming an OFW was deeply ingrained from childhood, but acquiring a disability led to the belief that such aspirations were no longer attainable. This demonstrated an element of the 'healthy migrant effect' illustrating how sociocultural discrimination can act as a self-filtering system for migrants with disabilities, with socially constructed notions about what an 'ideal typical' migrant should be (Hagen-Zanker et al, 2014). Furthermore, the lack of visibility and information of persons with disabilities pursuing

careers as OFWs, acted to reinforce the belief for persons with disabilities that they cannot become migrant workers and reinforcing the perception of persons with disabilities being the ‘undesirable migrant’ (Richards, 2004).

Governance and recruitment agencies

Though not generalisable, the experiences of persons with disabilities in this study outlined the vital role recruitment agencies and direct employers can play in shaping migration opportunities for persons with disabilities. Participants shared contrasting experiences in recruitment, wherein a recruitment agency hindered opportunities, whilst another direct employer facilitated opportunities.

The direct employer was noted for their supportive roles, aiding with documentation, securing medical exam waivers, and challenging false assumptions held by the BI about the capabilities of persons with disabilities to migrate. The BI exhibited other inappropriate practices, including mislabelling a participant's disability in official documentation and failing to provide reasonable accommodations like FSLI.

The combination of these barriers, as well as fears and costs around the medical exam and lack of transparency of jobs abroad being available for persons with disabilities may act to filter out persons with disabilities in the migration process. Such an orientation presents insurmountable challenges for persons with disabilities to overcome. Nevertheless, migration governance mechanisms, like national agencies and recruitment agencies should implement Philippine Law that support persons with disabilities, such as the ‘Filipino Sign Language’ Law, the Accessibility Law (Batas Pambansa Blg. 344) and the Magna Carta for persons with disabilities (RA No. 7277 and RA No. 9442). Implementing these laws could improve the accessibility and inclusivity of migration processes for persons with disabilities.

Disability-responsive services

The narratives shared demonstrated the significance of services for persons with disabilities, which aligns with Objective 15 of the GCM that advocates for the provision of ‘access to basic services for migrants’. The emphasis of Objective 15 is about non-discriminatory service delivery, specifically focusing on ‘disability-responsive’ accessibility at local service points. One participant who acquired a disability in Qatar exemplified the positive impact of disability-responsive service provision facilitating rehabilitation and a successful transition to a new livelihood. However, a contrasting scenario in Saudi Arabia revealed the implications of inadequate disability-responsive assistance. A participant relied on utilising their social capital through assistance from their personal Saudi network and an NGO from the Philippines after their employer fired them (Kapráns, 2022). Regrettably, the duty bearers failed to provide the necessary support to reintegrate them back in society. Despite the participant's vulnerable situation, requests for assistance and information from the Philippine migration governance departments went unanswered, indicating a lack of disability-responsive services. These effects continued during post-repatriation, where the lack of services has affected the person's mental health due to the

inability to financially support his family and came about because he was unsupported during the development of his original health condition. Similar to Côté et al (2023) research, the lack of provision for migrants with acquired disabilities can compound stigma and exclusion as it is not adapted to meet their specific needs, exacerbating situations of vulnerability and leading to long-term exclusion from the labour market and increased risk of impoverishment.

Moreover, participants highlighted discrimination encountered in traveling services at airports, aligning with the findings of the PCCRPD (2013). Discrimination based on disability was reported as a participant was denied access to a flight because of their disability and was stranded at an airport for 2 days during their journey to attend a review meeting and furthermore were almost denied access again simply because they did not have a companion. Another participant also faced challenges in returning to Qatar from a holiday in the Philippines. The participant was directed to the immigration office at the airport based on the assumption that persons with disabilities could not work abroad. These incidents exemplify the lack of disability-responsive measures in travel services, necessitating improved accessibility and inclusive practices to ensure non-discriminatory access for persons with disabilities.

These anecdotes outline the importance of not only advocating for ‘access to basic services for migrants’ (GCM Objective 15), but the ‘portability of social security entitlements and earned benefits’ (GCM Objective 22) as well as family reunification opportunities (GCM Objective 5i, 7f and 16c) for persons with disabilities. Persons with disabilities face additional costs and requirements that need to be considered when they migrate, such as assistive devices, personal assistance and healthcare services. Provision such as this could help to mitigate the fears of persons with disabilities when they question whether to migrate. Furthermore, the family is often the main access point to the community for persons with disabilities, and reunification opportunities may become even more important as they navigate a new environment. Curtailing uncertainties about accessibility in the country of destination, social protection and independent living could benefit both migrants with disabilities and migrants with acquired disabilities. As Schweyher’s (2021) research in Europe outlines, limited-service provisions disadvantaged persons with disabilities and ergo excluded them from the benefits of free movement.

Navigating the medicalisation of disability

The emergence of the medicalisation of disability has become evident, and this contradicts Objective 7 of the GCM, which aims to prevent the creation or exacerbation of vulnerabilities among migrants by adopting a ‘disability-responsive’ approach. This issue raises concerning implications, inadvertently encouraging persons with disabilities to withhold information about their disability, as illustrated by the incident shared by a participant’s father, who tragically passed away abroad because he felt compelled to conceal his disability/health condition. The lack of awareness about his condition, a misinformed diagnosis and inappropriate treatment ultimately led to his death. Furthermore, the requirement of a health certificate for some jobs overseas has presented challenges. For instance, a participant detailed the stress and financial burden associated with the medical examinations, which prevented their reapplication to

become an OFW and this was despite having a waiver from their previous employer abroad. These experiences highlight the urgent need for an open dialogue on the medicalisation of disability to prevent the blurring of health and disability, ensuring that practices align with a disability-responsive approach rather than acting to 'screen out' persons with disabilities, and instead foster an environment where people are encouraged to disclose their conditions without fear of repercussion or discrimination.

Enabling support for aspiring OFWs with disabilities

Participants reflected on the concept of 'disability-responsive,' a term highlighted in the GCM and deemed crucial in meeting the needs of persons with disabilities. While not universally familiar with this specific term, participants extensively discussed key elements integral to a disability-responsive approach. They emphasised addressing the unique requirements of persons with disabilities, encompassing aspects like tailored employment opportunities and access to essential medical support. These could be assisted by both OPDs in country of origin and destination but also supported by a program within the DMW. Importantly, participants highlighted that a disability-responsive approach transcends mere attitudes toward disabilities. It mandates an evaluation of existing policies, structures, and frameworks to ensure the absence of discriminatory practices that hinder inclusion. Moreover, participants advocated for the removal of restrictive policies contributing to exclusion (Peker & Winter, 2024; Aptekar, 2018). They highlight the necessity of implementing measures that encourage equal opportunities and encourage the active participation of all persons with disabilities in various spheres of life.

CONCLUSION & RECOMMENDATIONS

The current landscape of the labour migration cycle presents significant barriers that impede the participation of persons with disabilities in transnational opportunities. These obstacles include physical, social, institutional, and communication barriers, which collectively limit the inclusivity of migration systems. Realising the disability-responsive objectives outlined in the CRPD and the GCM requires policymakers and other migration stakeholders to adopt and champion inclusive practices at every stage of the migration journey. This transformation demands coordinated efforts and partnerships between government actors, the private sector (e.g., recruitment agencies), civil society, and OPDs.

A critical starting point is to initiate collaboration between the DMW and OPDs to define and integrate disability-responsive measures that benefit prospective migrant workers with disabilities, migrant workers with disabilities and migrant workers with acquired disabilities during their migration journey. Establishing a dedicated platform or program to address the lack of reliable information is also essential. Such initiatives would provide prospective, current, and returning migrant workers with disabilities access to resources, support for independent living, and networks to ease transitions across borders. A comprehensive approach must ensure that disability support and services—including social protection and family reunification—are both accessible and well-understood. Reasonable accommodations must be ensured throughout the labour migration cycle, with efforts directed at eliminating communication barriers in alignment with Philippine disability laws. Advocacy efforts should aim to dissociate disability from outdated individual models and counter the perception that disability equates to poor health or diminished capabilities during migration. This involves creating structures to mitigate the tendency to exclude persons with disabilities due to 'medical' issues. This could involve a re-evaluation of medical certificates, ensuring they support rather than obstruct migration. The aim is to prevent individuals from feeling compelled to hide their disability, which can have long-term implications and increase situations of vulnerability.

Recruitment agencies and other key stakeholders must undergo disability sensitivity training to ensure their processes are fully accessible. Job postings should explicitly encourage applications from persons with disabilities, and accommodations such as FSLI and accessible formats for written materials should be standard practices during the recruitment and selection process. Furthermore, initiatives must inspire and empower persons with disabilities to envision themselves as OFWs, addressing sociocultural barriers that undermine their agency and capabilities. Efforts should also be directed toward enhancing the understanding of migrant rights among OPDs, persons with disabilities, and their families. These include rights related to work, wages, and access to service provisions. Additionally, further research is imperative to build a robust evidence base on the disadvantages faced by persons with disabilities across the labour migration cycle. A larger pool of participants can provide deeper insights into the challenges and opportunities within this neglected area of study. Finally, migration stakeholders must prioritise the disaggregation of migrant worker data by disability. Evidence-based policies, processes, and

programs rely on accurate and comprehensive data to effectively address the unique needs of persons with disabilities in migration systems. By implementing these measures, the labour migration cycle can move closer to being truly inclusive, equitable, and responsive to the realities of persons with disabilities.

REFERENCES

- Addaney M, Umeh NC, Moyo CG, 2019. Legal capacity of and access to justice for refugees with disabilities in Africa. *De Jure Law Journal*. 52(1): 335-357.
- Aptekar S, 2018. Doctors as migration brokers in the mandatory medical screenings of immigrants to the United States. *Journal of Ethnic and Migration Studies*. 46(9): 1865–1885.
- Askola H, 2021. Copying Europe? Integration as a Citizenship Requirement in Australia. *International Migration Review*. 55(1): 4-30.
- Bacong AM, Menjivar C, 2021. Recasting the Immigrant Health Paradox through Intersections of Legal Status and Race. *J Immigr Minor Health*. 23: 1092-1104.
- Baglier S, Lalvani P, 2020. *Undoing ableism: Teaching about disability in K-12 classrooms*. New York: Routledge.
- Barglowski K, 2018. Migrants' class and parenting: the role of cultural capital in Migrants' inequalities in education. *Journal of Ethnic and Migration Studies*. 45(11): 1970–1987.
- Bastia T, 2014. Intersectionality, migration and development. *Progress in Development Studies*. 14(3): 237-248.
- Bogdan L, 2024. Immobility in Moldova: Beyond the migration paradigm. *International Migration*. 62: 199–214.
- Braun V, Clarke V, 2013. *Successful qualitative research: a practical guide for beginners*. London: Sage Publications.
- Burns N, 2017. The human right to health: exploring disability, migration and health. *Disability & Society*. 32(10): 1463-1484.
- Campbell FK, 2009. *Contours of Ableism: The Production of Disability and Abledness*. New York: Palgrave Macmillan.
- Cervantes AG, 2021. Language, race, and illegality: indigenous migrants navigating the immigration regime in a new destination. *Journal of Ethnic and Migration Studies*. 49(7): 1610–1629.
- Cha'Ngom N, Deuster C, Docquier F, Machado J, 2023. *Selective Migration and Economic Development: A Generalized Approach*. Bonn: IZA – Institute of Labor Economics.
- Chiu TT, Choi SY, 2019. The decoupling of legal and spatial migration of female marriage migrants. *Journal of Ethnic and Migration Studies*. 46(14): 2997–3013.

COAMEX, n.d. Migration & Disability. A View from Intersectionality. OHCHR. Available at: https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/download.aspx?symbolno=int%2fcrpd%2fico%2fmex%2f36889&lang=en.

Cobley D, 2018. Disability and International Development: A guide for students and practitioners (1st ed.). Oxford: Routledge.

Côté D, White B, Dubé J, Gravel S, 2023. Are Healthcare Systems Failing Immigrants? Transnational Migration and Social Exclusion in the Workers' Compensation Process in Québec. International Migration Review. 0(0).

De Luna-Narido SR, Tacadao MS, 2021. A study on employment profile of persons with disabilities (PWDS) in selected regions in the Philippines. Manila: DOLE.

Delve HL, Limpaecher A, 2022. What is Phenomenological Research Design? Essential Guide to Coding Qualitative Data. Delvetool. Available at: <https://delvetool.com/blog/phenomenology>.

Dew A, 2022. Drivers and destinations: people with disability from Syrian and Iraqi refugee backgrounds making the journey to Australia. Journal of Ethnic and Migration Studies. 50(10): 2631–2648.

Dolmage T, 2017. Academic Ableism: Disability and Higher Education. Ann Arbor: University of Michigan.

Dondero M, Altman CE, 2024. The Toll of Exclusion on Immigrants' Health across the Life Course: Research Advances and Future Directions. International Migration Review. 58(4): 2167-2203.

Ducu V, Telegdi-Csetri A, Hărăguș M, 2024. Local and transnational participation of families with stay-behind children in the hybrid transnational social protection nexus. Journal of Ethnic and Migration Studies. 50(17): 4279–4297.

Duda-Mikulin EA, Głowacka M, 2023. 'I haven't met one': disabled EU migrants in the UK. Intersections between migration and disability post-Brexit. Journal of Ethnic and Migration Studies. 50(6): 1530–1548.

Emery SD, Iyer S, 2021. Deaf migration through an intersectionality lens. Disability & Society. 37(1): 1-22.

Fair Agency, n.d. What is the Medical Certificate and why are domestic helpers required to get it?. Fair Agency. Available at: <https://fairagency.org/answers/what-is-the-medical-certificate-and-why-are-domestic-helpers-required-to-get-it/#:~:text=the%20medical%20certificate%20states%20whether,checks%20may%20take%20several%20days>.

Figgou L, Pavlopoulos V, 2015. Social Psychology: Research Methods. International Encyclopaedia of the Social & Behavioural Sciences (Second Edition). Elsevier.

Flowers J, 2022. Digital phrenology and automated ableism: reproducing racist and ableist logics through artificial intelligence. YouTube. Available at: <https://www.youtube.com/watch?v=st8pgvwnfzk&list=plkgecj8ectznoygntyqlx1hmzkaph3ukn&index=6>.

Ghenis A, 2016. Making migration accessible: Inclusive relocation for people with disabilities. The Migration, Environment and Climate Change: Policy Brief Series. 6(2): 1-9.

Govere E, Vearey J, Walker R, 2021. "They are Too Quiet about Migration": A Scoping Exercise Exploring Migration. Gennva: International Organization for Migration.

Hasnan L, 2019. Youth in Philippines prefer working overseas. The ASEAN Post. Available at: <https://theaseanpost.com/article/youth-philippines-prefer-working-overseas#:~:text=most%20filipinos%20go%20abroad%20to,that%20are%20already%20living%20abroad>.

Hennink M, Hutter I, Bailey A, 2020. Qualitative Research Methods. London: SAGE Publications.

Hoogenraad H, 2020. Marriage migration as happiness projects? Africa-origin male marriage migrants' experiences with marriage migration to Australia. Journal of Ethnic and Migration Studies. 47(9): 2144–2160.

Hultman L, Asaba E, Riedel D, Abdu S, Afe H, Atafnu R, Ejigu L, Bolling J, Negussie M, Ntobua J, Mondaca M, 2023. Migration and disability narratives from an intersectional perspective: a photovoice study. Disability & Society.

International Organization for Migration (IOM), 2020. World Migration Report 2020. Geneva: International Organization for Migration.

Joppke C, 2024. Neoliberal nationalism and immigration policy. Journal of Ethnic and Migration Studies. 50(7): 1657-1676.

Joseph A, 2022. Migration has always been a disability justice issue. ILO Briarpatch magazine. Available at: <https://briarpatchmagazine.com/articles/view/migration-has-always-been-a-disability-justice-issue>.

Kaprāns M, 2022. 'They laughed at me, but I left that job': occupational agency of Latvian migrant workers in the United Kingdom. Journal of Ethnic and Migration Studies. 49(5): 1191–1209.

Karakas G, du Plooy DR, 2023. "A lot of work needs to be done" —Service provider perspectives of mental health services available to Croatia- and Bosnia-born migrants. International Migration. 62: 126-142.

- Kim KM, 2011. I never expected to be a disabled person in another country: the stories of migrant workers with acquired disabilities in Korea. *Disability & Society*. 26(5): 553-566.
- Lafferty M, Maher KH, 2020. Transnational intimacy and economic precarity of western men in northeast Thailand. *Journal of Ethnic and Migration Studies*. 46(8): 1629–1646.
- Limbu A, 2022. Badhyata and Dukha: emotions, labour and migration across education migration to Australia and labour migration to Qatar from Nepal. *Journal of Ethnic and Migration Studies*. 49(17): 4390–4406.
- Linton S, Bérubé M, 1998. *Claiming Disability: Knowledge and Identity*. New York: New York University Press.
- Migration Data Portal (MDP) (2019) Migration Data Portal: The bigger picture. Migration Data Portal. Available at: <https://migrationdataportal.org>.
- Migration Data Portal (MDP) (2022) Disability and human mobility. Migration Data Portal. Available at: <https://www.migrationdataportal.org/themes/disability-and-human-mobility#selected-key-findings>.
- Nam Y, Richards-Desai S, Abraha A, 2023. Individual English Proficiency, Community Language Resources, and Immigrants' Employment in Western New York: Evidence from the American Community Survey. *International Migration Review*. 0(0).
- Nkrumah, 2019. The Hunted: UDHR and Africans with Albinism. *International Migration*. 57: 192-212.
- Peker E, Winter E, 2024. Confronting or incorporating middle-class nation-building? Right-wing responses in the pan-Canadian context. *Journal of Ethnic and Migration Studies*. 50(7): 1696–1717.
- Philippines Coalition on the United Nations CRPD, 2013. *A Parallel Report submitted to the Committee on the Rights of Persons with Disabilities on the implementation of the Convention in the Republic of the Philippines from 2008-2013*. Manila: Philippines Coalition on the CRPD.
- Pisani M, Grech S, 2015. Disability and Forced Migration: Critical Intersectionality. *Disability and the Global South*. 2(1): 421-441.
- Richards P, 2004. Points of Entry: Disability and the Historical Geography of Immigration. *Disability and Geography II*. 24(3).
- Riddle CA, 2014. *Disability and Justice: The Capabilities Approach in Practice*. Plymouth: Lexington Books.
- Schweyher M, 2021. Precarity, work exploitation and inferior social rights: EU citizenship of Polish labour migrants in Norway. *Journal of Ethnic and Migration Studies*. 49(5): 1292–1310.

- Smith K, Waite L, 2018. New and enduring narratives of vulnerability: rethinking stories about the figure of the refugee. *Journal of Ethnic and Migration Studies*. 45(13): 2289–2307.
- Soldatic K, 2013. The transnational sphere of justice: disability praxis and the politics of impairment. *Disability & Society*. 28(6): 744–755.
- Sovacool BK, Iskandarova M, Hall J, 2023. Industrializing theories: A thematic analysis of conceptual frameworks and typologies for industrial sociotechnical change in a low-carbon future. *Energy Research & Social Science*. 97.
- Stanek M, Requena M, del Rey A, García-Gómez J, 2020. Beyond the healthy immigrant paradox: decomposing differences in birthweight among immigrants in Spain. *Globalization and Health*. (16)87.
- Statham P, 2019. Living the long-term consequences of Thai-Western marriage migration: the radical life-course transformations of women who partner older Westerners. *Journal of Ethnic and Migration Studies*. 46(8): 1562–1587.
- Stern J, Valchars G, 2013. Country Report: Austria, S.I.: EUDO Citizenship Observatory.
- Sunam R, 2022. Infrastructures of migrant precarity: unpacking precarity through the lived experiences of migrant workers in Malaysia. *Journal of Ethnic and Migration Studies*. 49(3): 636–654.
- Tang A, Perales F, Rowe F, Baxter J, 2022. The going gets rougher: Exploring the labour market outcomes of international graduates in Australia. *International Migration*. 60: 167–184.
- Thatcher B, 2023. Analysis of Civil Society Organisations' thematical representation at the ASEAN Forum on Migrant Labour (AMFL): A Disability Lens. *Migration and Diversity*. 2(1): 49–64.
- United Nations, 2019. Global Compact for Safe, Orderly and Regular Migration. United Nations. Available at: <https://www.iom.int/resources/global-compact-safe-orderly-and-regular-migration/res/73/195>.
- United Nations Department of Economic and Social Affairs (UNDESA), 2006. Convention on the Rights of Persons with Disabilities – Articles. United Nations. Available at: <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/convention-on-the-rights-of-persons-with-disabilities-2.html>.
- Vähä-Savo V, Koivuluhta V, 2024. Three-dimensional trust: disentangling trust relations in the context of converted asylum seekers. *Journal of Ethnic and Migration Studies*. 1-17.
- World Health Organization (WHO), World Bank, 2011. World Report on Disability. Geneva: World Health Organization and the World Bank.

World Health Organization (WHO), 2023. Disability. World Health Organization. Available at:
<https://www.who.int/news-room/fact-sheets/detail/disability-and-health#:~:text=An%20estimated%201.3%20billion%20people,1%20in%206%20of%20us.>

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