



# Child Rights Situation Analysis 2025

## Rights Beyond Border

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## Abbreviations

DASS-21	Depression Anxiety Stress Scale
IOM	International Organization for Migration
ISP	Institute for Strategy and Policy—Myanmar
MECC	Migrant Educational Coordination Center
MHIS	Migrant Health Insurance Scheme
MLC	Migrant Learning Center
OSCC	One Stop Crisis Center
Tak PESAO2	Tak Primary Educational Service Area Office 2
Tak SDHS	Tak Provincial Office of Social Development and Human Security
UNDP	United Nations Development Programme
UNHCR	United Nations High Commissioner for Refugees

## Executive Summary

Thailand has made progress in strengthening the child protection in migration contexts at both national and ASEAN levels. This includes its leadership in the development of the ASEAN Declaration on the Rights of Children in the Context of Migration, as well as the Memorandum of Understanding (MoU) among seven government agencies on measures and alternatives to detention of children in immigration detention centers pending deportation. However, over the past five years, the global situation of children in migration has reached a critical level. The United Nations estimates that there are approximately 43 million children in migration contexts worldwide. Thailand has long served as a place of refuge for migrant children and their families, particularly children of migrant workers who play a vital role in supporting the Thai economy. Despite this contribution, the protection of children of migrant workers continues to face significant challenges, including discrimination and limited access to basic services.

Since the 2021 Myanmar coup, a growing number of children have crossed the border into Thailand, both with their families and unaccompanied, seeking safety and access to education. Many of these children lack identity or legal documents due to the urgency of fleeing violence and insecurity. Over the past five years, Thailand has yet to develop a concrete policy framework or dedicated strategy to protect displaced children from Myanmar. As a result, these children face heightened risks of abuse, exploitation, and barriers to accessing protection mechanisms and basic services.

This report was prepared by Rights Beyond Border between November and December 2025 to analyze the situation, challenges, and constraints related to the child protection in Mae Sot District, Tak Province. Mae Sot is a key border area that hosts a large number of migrant and displaced children affected by ongoing conflict in Myanmar. The analysis focuses on child protection, education, health, legal status, and other issues related to laws and policies. The findings of this report indicate that the challenges faced by displaced children in Mae Sot are not isolated cases but are the result of gaps in policies, legal frameworks, and governance structures that fail to adequately protect all children in line with Convention on the Rights of the Child. Existing systems also do not sufficiently reflect the realities of cross-border mobility in border areas, which require flexible, child-centered policy responses.

The report therefore calls for the development of a concrete national strategy on children on the move protection, stronger coordination between government agencies and civil society organizations, increased resources and qualified professionals, reforms to child identification and protection systems, and the establishment of innovative child protection mechanisms in border areas. These measures are essential to ensure that all children can safely access their basic rights with dignity and without being left behind.

## Chapter 1: Introduction

The escalation of violence and human rights violations in Myanmar following the military coup in 2021 has triggered a major humanitarian crisis. Millions of people have been internally displaced, while hundreds of thousands have fled across borders to neighboring countries, including Thailand. The situation further deteriorated following the 7.7-magnitude earthquake in 2025, which compounded the vulnerability of communities already affected by protracted conflict.

According to the United Nations High Commissioner for Refugees (UNHCR)<sup>1</sup>, between January 2022 and November 2025, the number of internally displaced persons in Myanmar reached approximately 3.6 million. During the same period, there were an estimated 1.59 million refugees and asylum seekers. Data also indicate a significant increase in cross-border movements by land during the first half of 2025, rising by 53 percent compared to the same period in 2024. Notably, women and children accounted for 79 percent of those crossing by land, highlighting the heightened vulnerability of populations affected by ongoing conflicts.

Another key factor driving displacement among young people is the enforcement of the Conscription Law by Myanmar's military government. The United Nations reported approximately 1,900 cases of forced recruitment and the use of child soldiers between July 2020 and December 2023, noting that the actual number is likely higher. These factors have compelled many people to flee their homes and seek safety across borders. This situation has had a direct impact on Thailand's border areas, particularly Mae Sot District and neighboring districts in Tak Province. The International Organization for Migration (IOM)<sup>2</sup> estimates that approximately 4.1 million Myanmar nationals currently reside in Thailand. In 2024, around 1.3 million people from Myanmar crossed into Thailand due to economic deterioration linked to ongoing conflict, while a significant number also fled to avoid forced conscription and seek safety.

The report *Migrants and Refugees from Myanmar in Thailand: Situation and Impacts after 2021*<sup>3</sup> highlights that migration patterns from Myanmar have become increasingly complex, reflecting mixed movements of those seeking economic opportunities and those forcibly displaced due to political conflict and violence. IOM's comparative assessments in Tak Province<sup>4</sup> for 2023 and 2024 indicate that in 2024 there were approximately 139,678 migrant workers in Tak Province, of whom around 63 percent remained undocumented. While the proportion of undocumented migrants decreased significantly from 75 percent in 2023 to 23 percent in 2024, this also reflects increasingly strict border control measures.

<sup>1</sup> UNHCR. A Route-Based Snapshot Data & Trends for Refugees from Myanmar, as of 30 November 2025, <https://data.unhcr.org/en/documents/details/120237>

<sup>2</sup> IOM. Migration Data and Research Unit (MDRU), [https://thailand.iom.int/sites/g/files/tmzbdl1371/files/documents/2025-03/myanmar\\_migrants\\_thailand\\_jan25\\_final-1.pdf](https://thailand.iom.int/sites/g/files/tmzbdl1371/files/documents/2025-03/myanmar_migrants_thailand_jan25_final-1.pdf)

<sup>3</sup> Migrants and Refugees from Myanmar in Thailand Situation and Impacts after 2021, Page 5, [https://thailand.iom.int/sites/g/files/tmzbdl1371/files/documents/2025-09/myanmar-migrants-in-thailand\\_situation-attitudes-and-impacts-after-2021.pdf](https://thailand.iom.int/sites/g/files/tmzbdl1371/files/documents/2025-09/myanmar-migrants-in-thailand_situation-attitudes-and-impacts-after-2021.pdf)

<sup>4</sup> IOM. IOM THAILAND MULTI-SECTORAL ASSESSMENT OF NEEDS TAK COMPARATIVE REPORT 2023 AND 2024, <https://reliefweb.int/report/thailand/iom-thailand-multi-sectoral-assessment-needs-tak-comparative-report-2023-and-2024-april-2025>

A particularly concerning issue is the situation of children in migration contexts, who face heightened risks of rights violations and exploitation. Although there is no precise figure for the number of children from Myanmar in Thailand, available data on education and access to basic services provide an indication of the scale and vulnerability of this population. In 2024, there were 79,324 Myanmar students<sup>5</sup> enrolled in educational institutions across Thailand. In 2023, 41,799 Myanmar children were registered under the Migrant Health Insurance Scheme (MHIS), including 22,188 boys and 19,611 girls. In 2025, there were 93 Migrant Learning Centers (MLCs) nationwide, serving a total of 24,734 students. Of these, 18,317 children were enrolled in MLCs in Tak Province<sup>6</sup>, accounting for 74 percent of all MLC students nationwide.

In Tak Province, the number of migrant children enrolling in MLCs increased by more than 40 percent in early 2024<sup>7</sup> compared to the previous year. This reflects the severe impact of nearly five years of conflict in Myanmar on children's safety and well-being, and the growing number of children forced to leave their country of origin. These trends are consistent with the Thailand Migration Report 2024<sup>8</sup>, which notes that children in migration contexts in Thailand are highly diverse, including migrant children, refugees, asylum seekers, and stateless children.

The findings of this year's assessment indicate that children in migration contexts face increasing insecurity due to the lack of a comprehensive child protection system for migrant and displaced children, barriers to accessing basic services, and undocumented immigration status. These challenges are structural and policy-related and do not reflect the realities of contemporary cross-border mobility. There is an urgent need for flexible, child-centered laws and policies that respond to the experiences of children affected by conflict, natural disasters, persecution, and human rights violations, in line with the Convention on the Rights of the Child and other international human rights standards.

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<sup>5</sup> Migrants and Refugees from Myanmar in Thailand Situation and Impacts after 2021, Page 42.

<sup>6</sup> Migrants and Refugees from Myanmar in Thailand Situation and Impacts after 2021, Page 44.

<sup>7</sup> IOM, cited.

<sup>8</sup> UN Network on Migration in Thailand 2024, <https://thailand.iom.int/sites/g/files/tmzbdl1371/files/documents/2025-04/thailand-migration-report-2024-th.pdf>

## Chapter 2: Methodology

### 2.1 Objectives

This situation report aims to collect qualitative data on the conditions of children in migration contexts across multiple dimensions to develop a comprehensive understanding of their situation. The findings aim to inform evidence-based policy recommendations through a process that enables the meaningful participation of children. The data collection covered key thematic areas, including safety, health, education, legal status, and child protection, focusing on Myanmar migrant and displaced children in Mae Sot District, Tak Province.

### 2.2 Data Collection Methods

This assessment employed qualitative research methods to generate in-depth insights into the experiences, perspectives, and realities of children in migration contexts. Data collection was conducted through both primary and secondary sources, as outlined below.

#### 1. Primary Data Collection

Primary data were collected using qualitative approaches designed to capture the perspectives of key stakeholders involved in work with migrant and displaced children, including children themselves. Field data were collected from diverse groups, including refugee children and asylum-seeking children in Mae Sot District, Tak Province; government officials; NGOs; and teachers from MLCs. A total of 35 participants were involved in the study conducted between November and December 2025 (see Annex A). The following methods were used:

- **Key Informant Interviews (KII):** The interviews were conducted using structured questions (see Annex B). Participants comprised children aged 13–18 and relevant government and non-government officers. A total of 19 interview sessions were conducted with 22 participants.
- **Focus Group Discussions (FGDs):** FGDs were conducted using semi-structured, open-ended guiding questions (see Annex B). Two group discussions were held with children aged 13–18, with a total of 13 participants.

#### 2. Secondary Data Collection

Secondary data were collected through a desk review of relevant documents and reports. Key sources included:

##### 1. Reports from international organizations and NGOs, such as:

- UNHCR: A Route-Based Snapshot Data & Trends on refugee movements from Myanmar
- IOM: Multi-Sectoral Assessment of Needs: Tak Comparative Report (2023–2024) and reports on migrant workers
- UNDP: Reports on youth and migration
- UN Network on Migration in Thailand: Thailand Migration Report
- Rights Beyond Border: Mental Health Conditions in Migrant Learning Centers

##### 2. Government sources, including:

- Tak Primary Educational Service Area Office 2: education data and student enrollment statistics
- Migrant Educational Coordination Center (MECC): quarterly situation updates and statistics on students in MLCs

- One Stop Crisis Center (OSCC), Mae Sot Hospital: case records of survivors of violence

These data sources were used to triangulate findings and strengthen contextual understanding. Triangulation was conducted throughout the data collection process, both during and after fieldwork, with particular attention to contextual information that supported and explained qualitative findings.

### **2.3 Ethical Considerations**

The research and data collection process placed strong emphasis on research ethics, with regard for the rights, safety, and dignity of all participants, particularly children. The principle of the best interests of the child and child protection standards guided all stages of the study. Participants were clearly informed about the purpose and procedures of the study. Informed consent was obtained prior to data collection, and confidentiality and personal data protection were ensured in line with organizational policies. The information collected through this study was used solely for the preparation of this report for Rights Beyond Border. Researchers and interviewers did not disclose any information to other individuals or organizations, nor use the data for any other purposes.

## Chapter 3: Overall Situation of Migrant Children in Mae Sot

### 3.1 Children in different contexts

Based on data collected on children in migration contexts in Mae Sot District, children can be categorized into five groups according to their living arrangements. This categorization reflects the overall situation and the different risks associated with each living context, as follows:

#### 3.1.1 Children living independently in rented housing

The number of children in this group has increased noticeably over the past 1–2 years due to the growing movement of children from Myanmar into Mae Sot seeking for safety and education. As a result, dormitories in Migrant Learning Centers (MLCs) have become insufficient to accommodate the increasing number of students. This has led some children to live independently outside MLC dormitories. The study found that most children in this group are boys aged approximately 13–18 years. Some traveled alone and have no parents residing in Thailand, while others have parents working in other provinces, such as Bangkok.

Children in this group often live together with peers of a similar age or with friends attending the same MLC and jointly rent accommodation. Rental costs are relatively high, at approximately 3,000–5,000 THB per month for a basic fan room, which places a significant financial burden on children who do not have a stable income. Although some children receive financial support from parents or siblings working in Thailand or abroad, this support is often irregular or insufficient to cover living expenses. In addition to being affected by the conflict in Myanmar, children in this group have also experienced heavy labor demands or exploitation by relatives, harsh reprimands, and conflicts within the family.

#### 3.1.2 Children living in migrant learning center dormitories

Across the five border districts of Tak Province, there are approximately 29 Migrant Learning Centers with dormitories, accommodating more than 2,623 children<sup>9</sup>. Observations and interviews indicate that living conditions in many dormitories are overcrowded. For example, one girl's dormitory house more than 80 female students but has only three rooms and six bathrooms. In addition, most dormitory buildings are structurally unstable and lack privacy. Doors and windows in some facilities are damaged, and roofs leak during rainfall, requiring buckets to collect water. In some dormitories, doors are broken and cannot be locked, forcing residents to use ropes instead. In some cases, the walls are quite transparent, allowing outsiders to see inside when the lights are on. This makes many girls feel unsafe.

Safety remains a major concern. Some dormitories lack fencing, which allows outsiders or strangers to enter the premises easily. As a result, students' belongings have been stolen, including valuable and necessary items such as mobile phones, computers, and bicycles. Dangerous animals, such as snakes, have also been found in some dormitory areas. At the same time, strict internal regulations in some learning centers make children in migration contexts feel that their daily freedoms are restricted. Rigid schedules reduce their personal rest time. In addition, some learning centers prohibit the use of mobile phones or allow their use only once

<sup>9</sup> Migrant Education Coordination Center (MECC). (2025). *Quarterly update summary*, <https://lookerstudio.google.com/u/0/reporting/2ddc672e-7bb6-4a06-b69e-bb316845b95c/page/aU5hD>

every two weeks or only on weekends, making it difficult for children to stay in contact with their families.

### ***3.1.3 Children living with relatives or caregivers***

Children in this group include those whose parents work in other areas, such as Bangkok, or who remain in Myanmar but send their children to Mae Sot for better educational opportunities or to escape insecurity and forced conscription. Parents provide financial support for their children's living expenses. There are also cases in which families in Mae Sot take in children from Myawaddy for education, with caregivers receiving monthly financial support from the children's parents. For example, in one household caring for several children, the children live together with members of the host family, resulting in overcrowding and limited access to shared bathrooms and common areas. Children living with relatives or acquaintances are often required to help with household chores, such as general housework and cooking. For instance, one 16-year-old girl living with her aunt was responsible for all household chores, including ironing clothes for other household members in exchange for a few snacks. Some children feel that they are treated differently from the host family's biological children, which leads to tensions and conflicts within the household.

### ***3.1.4 Migrant workers' dependents***

Children in this group usually stay with their parents who migrate to Mae Sot for wage labor. Living conditions vary depending on the family's economic status and place of work. Some children live in temporary and unstable construction worker camps, while others live in overcrowded rental rooms shared by many individuals or families under unhygienic conditions. Families in this group often have unstable incomes and insecure legal status.

Some children are required to assist with household work, care for younger siblings, or even work to contribute to household income, particularly in the agricultural sector where employment is often task-based. Children are commonly involved as part of the family labor force. Parents working in agriculture tend to have low and irregular incomes. Men earn an average of approximately 250 THB per day, and women earn approximately 180 THB per day. Some families have work only two to three days per week, resulting in insufficient monthly income to meet basic expenses. This directly affects children's quality of life and educational opportunities.

Families of migrant children working in agriculture often live in accommodation provided by employers near farmland, plantations, farms, or rent housing in nearby communities. Most of these accommodations are temporary and lack adequate sanitation, safety, and basic utilities such as electricity and clean water. Some housing is located in isolated or high-risk areas, exposing children and their families to safety risks. In addition, domestic violence is another issue faced by children in these households, resulting from economic pressure on parents leading to stress and conflicts within families.

### ***3.1.5 Children experiencing homelessness***

Children experiencing homelessness in Mae Sot are partly a result of displacement due to conflict in Myanmar. This group includes children from various ethnic backgrounds, as well as Rohingya who were stranded during their journeys. These children and families lack basic life

resources and do not have stable accommodation, often living in public spaces without stable livelihoods.

Data collection found that children in this group often migrate together with their families, particularly mothers and children. Parents commonly bring children with them to beg in front of convenience stores, markets, or in community areas at night, often using younger children. Some children also assist their parents by collecting recyclable waste or selling flowers at intersections.

Families in this group face multiple and overlapping challenges, such as alcohol dependency, mental health issues, or chronic illness, which limit their ability to care for children appropriately. For example, there was a case of a homeless pregnant woman with mental health problems, resulting in children who were not adequately cared for and lacked basic necessities for survival. This has negative impacts on children's health, education, and development.

### 3.2 Legal Status

Although the IOM comparative report for Tak Province<sup>10</sup> for 2023 and 2024 indicates that the undocumented migrants decreased significantly from 75 percent in 2023 to 23 percent in 2024, it is still found that there are approximately 139,678 migrant workers in Tak Province, of whom 63 percent remain in an undocumented legal status. When considering children in migration contexts specifically, issues related to legal status are even more complex. A large number of undocumented children due to multiple factors, particularly in cases where children migrate together with parents who are migrant workers. Key factors affecting children's legal status include:

- Limitations of the Immigration Act B.E. 2522 (1979)
- The migrant registration process under Cabinet resolutions: Although this is an important mechanism that includes the registration of children accompanying their parents<sup>11</sup>, documentation barriers and the high costs of migrant worker registration prevent many children from being registered as dependents.

A review of the immigration documentation status of children in migration contexts in Mae Sot found that there are both children who entered with documentation and children who entered without documentation, as follows:

- **Temporary Border Pass (Border Pass)**

Data collection found that children who crossed the border in 2024 used temporary border passes to cross the Thailand–Myanmar Friendship Bridge and enter Thailand through official channels. However, use of this channel requires possession of a Myanmar smart card, which began collecting personal data and has been in use since 2023 for

<sup>10</sup> IOM. IOM THAILAND MULTI-SECTORAL ASSESSMENT OF NEEDS TAK COMPARATIVE REPORT 2023 AND 2024, <https://reliefweb.int/report/thailand/iom-thailand-multi-sectoral-assessment-needs-tak-comparative-report-2023-and-2024-april-2025>

<sup>11</sup> Migrant United Nations Network in Thailand. (2024). *Thailand Migration Report 2024*. International Organization for Migration (IOM) Thailand. <https://thailand.iom.int/sites/g/files/tmzbd1371/files/documents/2025-04/thailand-migration-report-2024-th.pdf>

Myanmar nationals aged 10 years and above<sup>12</sup>. Some children reported using smart cards to apply for border passes with costs on the Myanmar side of approximately 5,000–6,000 kyat (approximately 40–48 THB, based on an exchange rate of 100,000 kyat to 800 THB). However, smart cards have a limited validity period. Once expired, they can no longer be used to cross the bridge through official channels. Children who travel using border passes are required to return to renew the pass every seven days. Importantly, when their smart cards expire, these children can no longer renew their border passes, resulting in the need to cross through unofficial routes or pay additional fees to cross the border. Some children reported that the cost of crossing through natural or unofficial routes in such cases is approximately 2,000 THB.

- **Children without legal immigration documents**

Children without documentation constitute the largest group in Mae Sot. Most children cross the border through natural or unofficial routes, including crossing the Moei River below the Friendship Bridge, as well as through dozens of natural crossing points. This is particularly common during periods of insecurity, when large numbers of people flee conflict through these routes. Ongoing conflicts as well as forced conscription law in Myanmar are key factors that lead families to urgently send their children across the border to Mae Sot without being able to complete documentation procedures in time. In addition, poverty and the fact that some children come from groups opposing Myanmar's military authorities prevent them from obtaining identity documents from Myanmar government agencies. As a result, crossing the border without documents becomes their only option. Data collection found that some children crossed the border by boat with assistance from networks or facilitators who help people cross. There were cases in which children reported being brought across in groups of more than 10 people, with individuals on both the Thai and Myanmar sides facilitating their border crossing so that they could continue their education.

- **Student ID Cards**

Children studying in MLCs are the primary target group for the issuance of student ID cards for identification purposes within educational settings. Student ID cards function as temporary proof of identity for children who do not have other identity documents and serve as preliminary evidence that the child is currently enrolled in education. These cards are also linked to access to health services provided by private organizations. In some cases, student ID cards are used to facilitate border crossing. Some children report that possession of a student ID card allows them to pass through checkpoints, which may indicate informal discretion exercised by local border officials. However, student ID cards are not legal proof of personal legal status under Thai law. Even children possess student ID cards, they remain in an undocumented immigration status and do not have the legal right to reside or work in Thailand.

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<sup>12</sup> Global New Light of Myanmar. <https://www.gnlm.com.mm/uid-essential-for-people/>

### 3.3 Education

Data from the Migrant Education Coordination Center (MECC)<sup>13</sup> indicate that across the five border districts of Tak Province, there are 62 MLCs currently in operation with a total of 18,171 students. Primary-level students constitute the largest group at 8,827 children. In Mae Sot District, there are the highest number of MLCs totaling 44 centers with 11,790 students, accounting for 69.8 percent of all students in the area. The study found that a key reason of children migrating to study in Thailand is the collapse of the education system in Myanmar, which led to the closure of many schools following the Military Coup in 2021. As a result, many students were forced to leave and seek new education pathways. Consequently, many children on the move seek to continue their education in Mae Sot, and some are enrolled at grade levels below their age-appropriate levels. For children living with relatives in Mae Sot, relatives often facilitate the enrollment process at MLCs.

#### 3.3.1 Education pathways for children on the move in Mae Sot

- **Migrant Learning Centers (MLC)**

MLCs are the most accessible education option for children on the move. The curricula integrate Myanmar, Thai, and English languages. However, graduation from most MLCs is not formally recognized, resulting in many children being unable to use their qualifications to pursue further education. Despite this limitation, many MLCs offer intensive programs that enable children to obtain internationally recognized qualifications, such as the General Educational Development (GED) upper secondary equivalency program of the American system. In 2025, the AMALA 15-month program was introduced in some MLCs in Mae Sot as an alternative pathway for children in migration contexts to access educational qualifications. In the same year, approximately 1,335 students<sup>14</sup> were enrolled in GED-level or GED preparatory programs out of a total of 5,634 upper secondary students in MLCs, accounting for 24 percent. Only 19 out of the 62 MLCs offered GED-based programs.

However, ongoing conflicts in Myanmar has driven forced displacement among children. It has led to a noticeable increase in student enrollment in MLCs, both across the five border districts and within individual centers. For example, one MLC in Mae Sot increased its enrollment from 400 to more than 600 students, reflecting rising demand for education. In addition, some MLCs have increased tuition fees, in some cases exceeding 30,000 THB per year. Continuous increases in tuition fees have created significant concern among children in migration contexts and their families. At the same time, the lack of appropriate screening systems for staff and teachers working with children has contributed to an increase in cases of violence and child rights violations within MLCs.

- **Education in Thai public schools under the Thai Ministry of Education**

Within the jurisdiction of the Tak PESAO2, there are a total of 54,722 students<sup>15</sup> of both Thai nationality and migrant backgrounds enrolled in 116 schools, six branch schools, and 53 branch

<sup>13</sup> Migrant Education Coordination Center (MECC). (2025). *Quarterly update summary*, <https://lookerstudio.google.com/u/0/reporting/2ddc672e-7bb6-4a06-b69e-bb316845b95c/page/aU5hD>

<sup>14</sup> Migrant Education Coordination Center (MECC). (2025). *Quarterly update summary*, <https://lookerstudio.google.com/u/0/reporting/2ddc672e-7bb6-4a06-b69e-bb316845b95c/page/aU5hD>

<sup>15</sup> Tak Primary Educational Service Area Office 2. (2024). *Annual information report 2024*.

classrooms. The number of migrant students within the system of the Tak Primary Educational Service Area Office 2 is approximately 6,000.

Although Thailand has a policy of Education for All under the 2005 Cabinet Resolution, which guarantees free 15 years of education for all children regardless of legal status or nationality. In practice, many schools in Mae Sot apply relatively strict requirements regarding children's legal status and residency. The Ministry of Education requires children to have a stable place of residence. As a result, most children who are able to enroll in Thai public schools come from families whose parents have stable employment in the area and plan to reside in Thailand long term. In practice, children born in Thailand who have birth certificates are registered in the central civil registration system and can exercise their right to enroll in Thai schools. However, children without documentation or civil registration must have an adult, employer, or community leader certify that the child genuinely resides within the school's jurisdiction.

In addition, children are required to have a certain level of Thai language proficiency in speaking, reading, and writing to learn and adapt to Thai-language instruction before they can enroll. These requirements are not aligned with the situation of children on the move who arrived recently after 2021. Data collection found that in November 2025, nearly 100 students were removed from the system because their residence in the area could not be verified. The main reasons the students were no longer residing in the area were as follows:

- migration linked to parents' workplaces including changes in employment or seasonal agricultural work which required children to move immediately without prior notification to schools.
- return to the country of origin and some families returning to Myanmar and not returning to Thailand.
- lack of communication where parents withdrew children from school without formally completing withdrawal or transfer procedures, resulting in students' names remaining in the system while schools were unable to contact parents due to lack of reliable contact information or frequent changes in phone numbers.
- regulatory and documentation issues where children enrolled only temporarily before leaving the education system, and the absence of clear identity documentation made follow-up difficult.

In response, education authorities conducted verification of student status and removal of student records. Schools and the education area office verified individual cases. When students had been absent for extended periods and could not be traced, they were removed from the system in accordance with regulations with reasons recorded as graduation, transfer, death, or no longer residing in the area. This process was intended to ensure that enrollment figures reflect actual numbers which affects per-capita budget allocation.

These factors led to stricter measures for new student admissions, with more rigorous verification of residence. New enrollment now requires certification by an employer or community leader to confirm that the child genuinely resides within the jurisdiction. Schools were also instructed to report frequent absences and children at risk of dropping out, so that

timely support can be provided before children leave the education system. These measures have also contributed to concerns among schools about admitting migrant children. Teachers and school administrators have become more cautious regarding legal risks under the Immigration Act, due to concerns that admitting or providing shelter to undocumented children could be interpreted as facilitating irregular migration.

### ***3.3.2 Out of school children and school dropout***

According to the 2025 report by the Institute for Strategy and Policy—Myanmar (ISP)<sup>16</sup>, conflict and political instability in Myanmar have severely affected the national education system. During 2024–2025, approximately 7 million children out of a total of 13 million children, or 53 percent, were out of school. In addition, the 2025 report by the United Nations Development Programme (UNDP)<sup>17</sup> indicates that in rural areas experiencing ongoing political violence, youth who drop out of education has risen to four out of five, particularly in Tanintharyi, Chin, Sagaing, and Karen areas.

This education crisis in Myanmar has pushed Myanmar children and youth to migrate across borders into Thailand in search of safety and educational opportunities. This is consistent with IOM findings<sup>18</sup> indicating that the number of children enrolled in MLCs increased by more than 40 percent in 2024. However, safety-related concerns also increased to 42 percent in the same year. In addition, children aged 6–17 who were out of school remained at 60 percent in 2023 and 61 percent in 2024.

Multiple factors contribute to children dropping out of school. In addition to parental safety concerns, these include economic pressures and inadequate caregiving. Financial constraints lead some children to discontinue their education. A number of children who enroll in MLCs are unable to continue their studies consistently due to migration following parents who change jobs or returning to Myanmar during school holidays and not returning back to Thailand. Cases of adolescent pregnancy also prevent both girls and boys from continuing their education in MLCs. Data collection identified cases of siblings aged 13 and 15 from the same family who dropped out of school to work and support their household. Some children were reportedly persuaded to work in Myanmar. These factors have contributed to a number of children dropping out of the education system in Mae Sot.

## **3.3 Health and Hygiene**

### ***3.3.1 Physical health***

MLCs' dormitories and the communities where children in migration contexts reside are mostly overcrowded and lack appropriate waste management and wastewater systems. This creates conditions that facilitate the spread of communicable diseases, such as conjunctivitis, which previously spread across nearly the entire school, skin diseases, and influenza. Students are also

<sup>16</sup> ISP. Education Access in Crisis: Nearly 7 million children out of school, [https://ispmyanmar.com/wp-content/uploads/2025/08/ISP-SB2025\\_002\\_English.pdf](https://ispmyanmar.com/wp-content/uploads/2025/08/ISP-SB2025_002_English.pdf)

<sup>17</sup> UNDP. A Generation on the Move. <https://www.undp.org/asia-pacific/publications/generation-move>

<sup>18</sup> IOM. IOM THAILAND MULTI-SECTORAL ASSESSMENT OF NEEDS TAK COMPARATIVE REPORT 2023 AND 2024, <https://reliefweb.int/report/thailand/iom-thailand-multi-sectoral-assessment-needs-tak-comparative-report-2023-and-2024-april-2025>

frequently reported to experience diarrhea due to food provided at schools that is not fresh, clean, or hygienically prepared.

In addition, dormitory areas or communities located near forested areas face risks of dengue fever or malaria, as well as dangers from venomous animals such as snakes. These areas lack adequate safety management measures and basic first-aid knowledge. Children who have recently arrived are mostly not provided with health check-ups or disease screening prior to school enrollment, increasing the risk of introducing communicable diseases such as tuberculosis or viral infections into the student population.

Furthermore, MLCs' dormitories and children's living environments share common challenges, including a lack of access to clean water, nutritious food, and essential hygiene supplies, such as sanitary pads for girls. In addition, children living with parents who work in the agricultural sector face exposure risks to chemicals, as they rely on water sources from agricultural fields where intensive chemical use occurs.

### **3.3.2 Mental health**

Mental health is a major concern faced by many children in migration contexts. Many children experience stress related to exposure to violence in the past, particularly newly arrived children and younger children, who often cry, feel homesick, and have difficulty adjusting to new environments. Based on a preliminary mental health assessment conducted by Rights Beyond Border in 2025<sup>19</sup> using the Depression, Anxiety and Stress Scale (DASS-21) with 722 children and youth aged 9–21 in seven MLCs in Mae Sot, anxiety was identified at severe or very severe levels in 40 percent of participants, while depression and stress were each identified at 17 percent.

When disaggregated by age, children and youth under 18 years old had severe or very severe anxiety at 41 percent, while those aged 18 and above was 37 percent. In terms of stress, the proportion among those aged 18 and above was 24 percent, higher than among those under 18 years old at 16 percent. Depression was found at similar levels in both age groups, at 17 percent. These findings reflect that many children experience severe psychological distress as a result of the ongoing conflicts in Myanmar, which has led to family separation or exposure to violence in their living environments.

Interviews with mental health professionals<sup>20</sup> providing counselling services to children in migration contexts indicated cases of self-harm behaviors, suicidal thoughts, sensitivity to loud noises, social withdrawal, and distrust of others. Some children also face pressure from family expectations or from strict environments, as well as family-related problems such as parental divorce, parental alcohol use, and concerns about legal status. Many children fear of arrest and deportation to their home country, which makes their mental health challenges even worse.

In addition, a survey by Rights Beyond Border with 138 children and youth in three MLCs, who previously participated in Psychological First Aid (PFA) activities between September and

<sup>19</sup> Rights Beyond Border. Mental Health Conditions in MLCs. <https://rightsbeyondborder.org/mental-health-conditions-in-mlcs/>

<sup>20</sup> Psychologists at private clinics and Mae Sot Hospital. (2025, December 7). *Key informant interviews*.

December 2025, found that they used emotion regulation skills in their daily lives to cope with homesickness (58%), academic stress (43%), supporting peers in distress (36%), and managing conflicts with peers (26%). These findings show that PFA activities not only help reduce psychosocial distress in the short term but also strengthen children's and youths' ability to use healthy coping skills in their daily lives.

However, structural factors continue to affect the mental well-being of children in migration contexts. Some MLCs have very strict dormitory rules. For example, children may not be allowed to use their phones to contact their parents, or activities may be scheduled so tightly that children do not get enough rest. This can lead to ongoing stress. At the same time, the lack of counselling services and interpreters with psychological skills remains a major barrier to mental health recovery. This is consistent with information from the education sector indicating that mental health issues in both Thai public schools and MLCs within the Tak PSEAO2 are a significant concern, while guidance counsellors and mental health professionals remain insufficient.

### **3.3.3 Access to health services**

Most MLCs require children to purchase private health insurance schemes provided by local private organizations, which can be used at Mae Tao Clinic and Mae Sot Hospital. Generally, when children have minor illnesses, teachers at the learning centers tend to take them to nearby health posts rather than to Mae Tao Clinic, which is located farther away. However, the use of private health insurance is limited in cases where medical expenses exceed coverage limits or when high-cost treatment is required that is not covered by insurance.

In addition, children with severe illnesses or emergency conditions face difficulties in accessing medical services, particularly in emergency situations that are often overlooked by caregivers. For example, there was a case in which a child experienced severe abdominal pain, but referral to the hospital was delayed for approximately 1–1.30 hours because the teacher was unable to take the child to the hospital due to personal constraints and held negative attitudes toward the child. There were also cases in which teachers were reluctant to take children to Mae Tao Clinic due to its distance. These situations clearly reflect serious risks to the welfare and safety of children in migration contexts.

### **3.3.4 Nutrition**

The consumption of low-quality or insufficient food is a problem found in some MLCs and children's living environments. Meals provided often lack age-appropriate nutritional value. Some MLCs provide only two meals per day, breakfast and dinner without lunch, resulting in children without money skipping meals. In addition, the food provided is often of low quality and insufficient in quantity, with repetitive daily menus such as pumpkin, canned fish, and soybeans. In some cases, non-fresh meat is used, or chicken bones are used in place of meat. Kitchen management lacks basic hygiene standards, and food preparation practices are unhygienic, causing children to experience diarrhea or become ill easily.

### **3.4 Exploitation and violence against children on the move**

The exploitation and violence faced by children in migration contexts in Mae Sot take diverse and complex forms, involving close individuals, caregivers, the surrounding environment, and migration processes. Key forms include the following:

#### ***3.4.1 Recruitment into Scamming Businesses and Casinos on the Myanmar Side***

Although there is no direct data indicating that children are specifically recruited into these businesses, interviews found that some children and youth who graduated from MLCs or dropped out of school were recruited to work on the Myanmar side, such as in Shwe Kokko, in scamming businesses and casinos. This recruitment occurred through persuasion by Myanmar brokers who entered communities on the Thai side to recruit adolescents and working-age individuals by offering high remuneration. In particular, girls were targeted with no strong emphasis on physical appearance, but with requirements to be able to communicate in multiple languages, such as Thai, Myanmar, Karen, and English.

Interviews also found cases in which parents withdrew their children from school and stated that they would take them to Myanmar to learn computer skills in order to work in casinos. Such cases indicate that parents overlooked various risks and primarily focused on income. In addition, there were cases of girls aged approximately 13–15 who ran away from home due to domestic violence and expressed a desire to cross to Myanmar to work in order to escape family problems. This group is therefore at high risk of being persuaded or taken to work on the Myanmar side more easily.

#### ***3.4.2 Domestic Violence***

Stress arising from financial constraints leads to conflicts within families and becomes a factor affecting children's psychological well-being. Cases of violence against children living with relatives or acquaintances were among the most commonly identified forms of violence in this data collection. Children often become targets of violence by relatives or acquaintances when these individuals are stressed, ill, or intoxicated. For example, there was a case of a boy who moved out of his aunt's home because he could no longer endure severe verbal abuse by his uncle and aunt regarding household chores when the aunt was unwell or the uncle was intoxicated. Conflicts within extended families also affect children's psychological well-being. When parents fail to send remittances on time or in sufficient amounts, conflicts with relatives or acquaintances may arise.

Sexual abuse of children remains a serious concern. Statistics from the One Stop Crisis Center (OSCC) at Mae Sot Hospital show that between January and December 2025, 43% of the 98 people who received services were children and youth under 25 years old. These included children and youth of Myanmar, Thai, and Chinese nationalities, totaling 42 individuals. Among these 42 children and youth, 25 individuals, or 60 percent, were children in migration contexts from Myanmar, and 12 of these 25 individuals experienced sexual abuse. Of those subjected to sexual abuse, 83 percent were girls and 17 percent were boys, and the youngest survivor was only 2 years old.

### ***3.4.3 Violence in MLCs and Dormitories***

Data collection found cases in which male students with diverse gender identities were subjected to inappropriate sexual behaviors by male teachers in learning centers, causing the students to feel unsafe and to leave the dormitories. Information from the Tak Provincial Office of Social Development and Human Security (Tak SDHS) indicated that, among approximately 20 reported cases of sexual abuse survivors, 7 were male survivors. Although child protection training has been provided to teachers in educational settings, the lack of government policies on child protection mechanisms for MLCs constitutes a significant gap that enables exploitation and sexual abuse of students in these centers.

In addition, violence in MLCs is often caused by the lack of appropriate screening processes for teachers or caregivers. As a result, victims may be afraid to report abuse or seek help due to fear of losing access to education. In some cases, reporting is delayed, and when abuse occurs, many children and parents choose not to pursue legal action due to concerns about impacts on education or the need to relocate.

### ***3.4.4 Psychological Abuse***

Many children in migration contexts who arrived after the military coup in Myanmar have experienced violence or other harmful events in the past, which has affected their psychological well-being. Some children show signs of distress, such as being sensitive to loud noises, finding it hard to trust others, or withdrawing from social activities. Many children experience stress and anxiety about their future, education, family finances, and safety. Newly arrived children often struggle to adjust to their new environment, feel homesick, and show signs of depression.

In addition, inappropriate behavior by some teachers in certain MLCs has contributed to violence against students. This includes reported cases of teachers being intoxicated and engaging in physical confrontations with students in dormitories, the use of excessive punishment, and harsh or demeaning language toward children.

## Chapter 4: Issues and Challenges Related to Child Rights in Migration Contexts in Mae Sot

### 4.1 Children on the move protection

Children on the move face many forms of violence. These include domestic violence and sexual in schools, physical abuse, and exploitation such as child labour, trafficking, street begging, and neglect. The perpetrators are often people close to the child or people the child depends on. This makes reporting and taking legal action very difficult. In many cases, children experience repeated violence, especially in families where mothers are highly dependent on their husbands, who may be the perpetrators. Many children depend on MLCs or caregivers for housing and education. Because of this, they are afraid to report abuse for fear of losing educational opportunities and prospects. Some children are threatened or intimidated. In other cases, children may not recognize that what they experience is violence, or they may misunderstand it as care or affection.

Importantly, this study found that a significant number of boys experienced sexual abuse in educational settings. Many of these boys remain in abusive situations because they fear losing opportunities for education and work. Children in this group often experience serious psychological distress, which may appear as self-harming behaviors, aggression, social withdrawal, or attention-seeking behavior. This makes trust-building and recovery more difficult. Many boys are also reluctant to seek help due to shame and social expectations about masculinity. In addition, challenges in protecting children in migration contexts in Mae Sot reflect gaps in systems and policies that create barriers in practice, as outlined below:

#### 4.1.1 Coordination and implementation children on the move protection

- **Lack of concrete coordination and referral mechanisms among government agencies**

Data collection found that roles and responsibilities for handling cases of violence against children in migration contexts are not clearly defined. As a result, children often do not receive timely and continuous support. For example, in cases of abuse in MLCs, the agency responsible for coordinating MLCs reported that it has no legal authority to address violence against children in these MLCs. At the same time, Tak SDHS stated that support depends on the authority of the agency overseeing the learning centers. Due to unclear roles and responsibilities, children who often depend on perpetrators for housing and education may withdraw complaints or change their statements. Fear of damaging relationships with teachers or administrators, as well as concerns that legal action could affect their future, discourages reporting. As a result, many children are unable to effectively access justice and protection services.

- **lack of holistic approach among agencies under the same ministry**

The Ministry of Social Development and Human Security faces challenges in coordinating work across its agencies. Cases involving children experiencing homelessness are complex and often involve neglect, domestic violence, and caregivers who are unable to care for multiple children. The government Shelter for Children and Families is usually the main agency receiving referrals from partners, police, or immigration. It aims to keep children with their families when possible and works with local partners to provide in-kind or livelihood support. However, when caregivers do not cooperate or repeat harmful behaviors (such as alcohol dependence or returning to street

situations), this government shelter must separate children from their families and pursue legal action for neglect.

In cases involving non-Thai children, immigration authorities avoid detaining children and instead refer them to the government shelter, which coordinates repatriation or alternative care. However, other agencies often view cases involving children experiencing homelessness as the sole responsibility of the government shelter, even though children are not the root cause of the problem. This places a heavy burden on the shelter staffs, while shelters for homeless persons, which have mandates related to street begging and homelessness, play a limited role. Overall, coordination among government agencies and between government and non-government actors remains a major challenge in Mae Sot.

- **Reactive approaches and lack of strategic planning**

Child protection responses for children on the move are mostly reactive and handled case by case. There is limited long-term planning and no clear shared vision from lead ministries. Agencies respond to individual cases without a common strategy or integrated system, which limits prevention efforts and responses to root causes. Limited guidance from the central level also results in inconsistent practice at the local level. In addition, the number of child protection officers is limited, and their decision-making authority is restricted in some cases.

- **Limited space and capacity of NGO shelters**

NGO shelters have limited capacity to accommodate specific groups of children, such as children with disabilities, children with behavioral challenges, and foreign children. This is especially difficult during school holidays, when boarding students need temporary accommodation. Although NGO shelters are encouraged to register under legal frameworks, requirements such as building ownership and Thai nationality for caregivers create barriers in border areas. As a result, there is a shortage of both short-term and long-term shelter options. The lack of interpreters is also a major barrier, as many children and caregivers do not speak Thai, making assessments and service provision difficult. Agencies often rely on translation apps or a small number of private interpreters.

- **Lack of data and effective case tracking systems**

There is no integrated system to map or track children in migration contexts. Data are fragmented across agencies and cannot be easily shared, making follow-up and continuity of care difficult. Existing data are often limited or too general, which affects situation analysis and evidence-based planning.

- **Constraints in cross-border coordination**

There are no clear cross-border referral mechanisms for cases involving child victims of violence. This creates operational and financial challenges for case management. Since the military coup in Myanmar, coordination with state authorities has been difficult, limiting family tracing, reunification, and cross-border support. As a result, responses rely heavily on case-by-case cooperation with local NGOs.

- **Budget, facility, and human resource constraints**

Key agencies including Tak Social Development and Human Security Office, One Stop Crisis Center at Mae Sot hospital, MECC, and the government shelter for children and families face serious staff and budget shortages compared to the scale and complexity of needs. Staff are required to manage many responsibilities, leading to delays and limited outreach. For example, the

government shelter for children and families has only four social workers on child protection responsible for the entire province, including Thai children. Shelters also face constraints in bed capacity, staffing, and location, as many facilities are far from Mae Sot. This results in limited and inadequate emergency shelter options that do not cover all groups in need.

#### **4.1.2 Legal and Policy Challenges**

- **Law and policy linking child protection to migration status**

Laws or policies that link child right to protection to migration status often limit children in migration contexts from accessing basic rights and services. These legal frameworks also prevent children from being recognized as rights holders on an equal basis, creating gaps in protection and assistance. In practice, many government agencies operate under rules that restrict services to Thai nationals. This creates significant barriers to providing child protection in line with child rights principles.

- **Child-unfriendly justice system**

Although the Child Protection Act and Anti-Trafficking laws are in place, law enforcement and justice processes do not consistently apply child centered and victim centered approaches, especially in cases involving children without legal status. Weak witness and victim protection systems lead children and caregivers to withdraw complaints or change their statements due to fear, dependency on perpetrators, and the influence of perpetrators, who are often teachers or people in positions of authority.

Children and families also fear deportation due to irregular immigration status and the loss of education and work opportunities, as continuing education is often their main goal. In many cases, there is not enough evidence, or survivors are unable to provide information to support prosecution, which leads to cases being dismissed. In some situations, mediation is used instead of legal action, or informal settlements are reached, meaning children do not pursue charges even when perpetrators have been arrested.

## **4.2 Education**

### **4.2.1 Financial barriers and economic inequality**

Tuition fees at MLCs have increased significantly in contrast to the living conditions of children. Fees have risen from approximately THB 15,000 to THB 20,000–30,000 per year and continue to increase. In addition to tuition fees, families must also cover other costs such as dormitory fees, documentation fees, and daily living expenses. These costs place a heavy burden on low-income households, as most caregivers of children in migration contexts are daily wage laborers with unstable incomes, averaging approximately THB 200–250 per day.

At the same time, caregivers who remain in Myanmar face serious financial hardship, violence, and disaster related crises. These pressures, combined with peer influence or recruitment by exploitative networks, lead some children to leave school to seek income. This increases their risk of exploitation and trafficking. Moreover, rising living costs are not matched by improvements in children's quality of life or access to education. Some children do not receive school uniforms, lack access to nutritious meals, or receive only two meals per day.

#### **4.2.2 Quality of education and curriculum**

Migrant Learning Centers do not have formal legal status because their curricula are not recognized by the Thai Ministry of Education. As a result, certificates and qualifications from these centers are not officially recognized in Thailand or in other countries. Children who graduate from these MLCs, especially those without identity documents, face major barriers to further education, particularly at the university level. Many must rely on the General Educational Development (GED) exam, which is costly, or alternative programs such as AMALA, which are still in pilot stages.

In addition, Thai language teaching in MLCs is limited and often not effective enough. Many children graduate without being able to communicate well in Thai. This creates barriers to entering the Thai labor market and to continuing education within the Thai education system, such as non-formal education or other institutions. As a result, children who remain in Thailand face long term challenges with communication and social integration. Most learning centers also face shortages of qualified teachers with subject specific skills, as well as a lack of Thai language teachers and psychologists. Learning materials and facilities are often limited. In some MLCs, curricula are not flexible or diverse enough and do not respond well to children's interests or future career goals.

#### **4.2.3 Systemic and policy challenges**

- Legal recognition of Migrant Learning Centers**

Many MLCs are unable to register as private schools because regulatory requirements do not fit border area contexts. These include requirements for Thai nationality of license applicants, land ownership, and building standards that are beyond the financial capacity of most centers. As a result, unregistered centers cannot access per capita government funding, as state budgets are linked to children's legal status in the civil registration system. This limits resources for teacher salaries, school meals, and learning materials. Most MLCs therefore rely on NGO funding, which is currently declining. As a result, many centers face serious financial pressure and are forced to pass costs on to caregivers or reduce the quality of food and child welfare support.

- Lack of integrated data and information systems for migrant children**

Data on children in migration contexts are held separately by different agencies, including Office of the Basic Education Commission (OBEC), the Immigration Office, non-formal education, NGOs, and MECC, and are not linked across systems. This makes it difficult to estimate the total number of children accurately. It also leads to duplicate records for some children, while others are not tracked and receive no follow up. There are also gaps in the process of issuing G-Codes that allow children to access education. When children move between areas, their codes are not always transferred. In addition, some local officials lack understanding of the regulations or apply them in discriminatory ways. As a result, some children lose access to education services.

- Security-oriented policies that conflict with the right to education**

Although the 2005 Cabinet Resolution and the National Education Act guarantee access to education for all children. In practice, security policies are often applied in ways that restrict the rights of migrant children. Some local authorities perceive migrant and displaced children as a burden or a security concern. As a result, children without identity documents face restrictions on inter-district travel to participate in activities such as academic competitions or study visits, limiting their opportunities for skills development.

- **Lack of effective child safeguarding mechanisms in educational settings**

Migrant Learning Centers lack effective systems for checking and screening staff and volunteers who work with children. Although safeguarding policies exist, enforcement and monitoring remain major challenges. As these MLCs are not formally recognized, there is no systematic criminal background or mental health screening of volunteer teachers. This creates gaps that enable exploitation or abuse of children. When incidents of violence or abuse occur in MLCs, government agencies often state that they lack direct authority to close MLCs or sanction staff, as the centers do not fall under their jurisdiction, while other agencies may consider the issue outside their mandate. This results in delayed responses and a lack of clear accountability.

- **Institutional constraints of the Migrant Education Coordination Center (MECC)**

MECC was established as a coordination mechanism to respond to the educational needs of migrant and displaced children in border areas and plays an important role in promoting access to education. However, MECC continues to face limitations in terms of legal recognition, formal authority, as well as budgetary and human resource constraints.

## 4.3 Health

### 4.3.1 Adolescent pregnancy and violence

Data collection indicates an increasing trend in adolescent pregnancy. One key contributing factor is that many girls experience violence within their families, such as conflict and violence between parents or relatives. As a result, some girls attempt to escape these environments by staying with male friends or renting accommodation with male peers. When pregnancy occurs, it is often concealed from caregivers.

Cases were also identified in which girls and boys who experienced sexual abuse contracted sexually transmitted infections, causing severe psychological impacts. In some cases, children hold misconceptions and perceive abuse by family members as normal. These children often remain in situations of coercion and dependency on perpetrators who are close to them, which prevents them from reporting incidents to others. There are also cases in which children are threatened, are unaware of support services, or delay disclosure for long periods, resulting in delayed access to child protection mechanisms. Some children enter abortion services late, increasing health risks for pregnant adolescents.

It is evident that most children in migration contexts lack knowledge about contraception and have limited access to contraceptives due to the following factors:

- **Lack of legal status and documentation:** Many children and caregivers lack valid identity documents, leading to fear and hesitation in accessing public health services due to concerns about arrest or deportation. This constitutes a significant barrier to accessing healthcare services and contraceptives.
- **Lack of safe spaces:** Some schools or MLCs are not genuinely safe spaces. Cases of sexual abuse have occurred within MLCs by teachers or caregivers themselves, undermining children's trust in seeking help. Many children remain in situations of sexual abuse and dependency on adults who may exploit them, limiting their ability to make decisions

about their own health. Access to channels for seeking support and contraception is extremely limited for these children.

- **Limited access to comprehensive education:** While efforts have been made to enroll children in education, curricula and content do not sufficiently cover age-appropriate and context-sensitive sexual and reproductive health. In contexts where children and families struggle for survival, sexual and reproductive health education is often deprioritized. Even when services are available, transportation costs and certain service fees pose barriers for low-income families. Frequent mobility further disrupts continuity of care and follow-up by service providers.
- **Language barriers and cultural norms:** Many children face language barriers that hinder communication and understanding of health information, alongside cultural norms that may render sexuality and contraception taboo. Language barriers are particularly significant. When children are able to access hospitals or clinics, insufficient interpreter services or reluctance to interpret sensitive sexual and reproductive health matters prevent effective communication and service provision.

#### **4.3.2 Gaps in health insurance coverage and access to healthcare**

Thailand has universal health coverage for Thai nationals which does not comprehensively cover migrant and displaced children and their dependents. Currently, most children on the move rely on private health insurance schemes available in the area, which can be used at Mae Tao Clinic and Mae Sot Hospital. However, some families are unable to maintain continuous premium payments, or face medical costs that exceed coverage limits, such as brain scans or complicated deliveries, resulting in incomplete access to care. At the same time, health insurance cards for non-Thai nationals must be purchased at a cost of around THB 1,600 to 2,000 per person. This is a heavy burden for low-income families with several children. While M Fund can provide short term support, it is not a sustainable welfare mechanism. Coverage ends when families cannot pay the premiums, and the coverage limit is often not enough for serious illness or long-term treatment.

Access to healthcare facilities in Mae Sot town remains a major barrier for children living in remote areas, such as agricultural zones and MLCs on the outskirts. Travel often requires hiring vehicles or waiting for school transport. During emergencies at night, transportation is often unavailable. High travel costs also prevent families from reaching health services in time. Children who need mental health follow up face additional barriers. Many cannot travel regularly, and some caregivers do not fully understand the importance of continuous treatment. This leads to gaps in care. Language barriers between children, caregivers, and health staff also limit clear communication. As a result, families may not fully understand diagnoses and treatment plans.

#### **4.3.3 Budget constraints of border hospitals**

Under humanitarian policies, public hospitals must provide care to all patients including non-Thai patients who cannot pay. This creates a large amount of unpaid medical costs that hospitals must cover themselves. Children without identity documents and street connected children cannot access any health insurance schemes and must pay for medicines out of pocket or depend on support from public hospitals and Mae Tao Clinic. Many of these cases become unpaid bills, which affects hospital cash flow and limits budgets for service development. At the same time, central government health budgets are usually based on the number of people registered in an area.

Border areas like Mae Sot host large, unregistered populations, including migrant workers and displaced families. As a result, funding allocations do not reflect the real number of people using health services or the actual burden on local hospitals.

#### **4.3.4 Fragmented health information systems**

Health information systems for migrant and displaced children are not well connected. Data are stored separately across public hospitals, Mae Tao Clinic, and MLCs, preventing continuity of medical records and vaccination histories, as well as timely disease surveillance and outbreak control. This fragmentation leads to duplication of efforts, such as repeated screenings, or in some cases, children not being screened at all. Children's identification numbers are inconsistent due to frequent relocation, name changes, or transfers between MLCs, resulting in fragmented and discontinuous health records.

#### **4.3.5 Shortages of mental health professionals and services**

Educational institutions and education-related agencies have limited professionals with expertise in mental health. At the same time, public health services in Mae Sot face acute shortages of specialized staff. Mae Sot Hospital has only two psychiatrists, and Tak PESAO2 has only one psychologist responsible for supporting about 10,000 students. This results in delayed and uneven access to mental health services. A major barrier to effective treatment is language. Service provision relies largely on temporary staff or volunteer interpreters. Psychotherapy requires nuanced and complex communication and therefore trained mental health interpreters. However, interpreters in healthcare settings often provide overly brief or inappropriate translations, reducing treatment effectiveness. The lack of formal, standardized medical interpreter positions further increases the risk of miscommunication regarding health conditions, particularly in mental health care.

### **4.4 Legal Status**

The cost of migrant worker registration and renewal of essential documents is too high for many migrant families. When children are registered as dependents, families must pay additional fees. As a result, many low-income households register only the main caregiver, while children remain without legal documents.

Children who migrate alone often do not have identity documents because they lack Myanmar smart cards. This prevents them from obtaining passports or border passes to enter Thailand through legal channels. Without identity documents, children and families live in constant fear of arrest, deportation, or legal action. This also limits their access to education and basic services. Although Cabinet Resolutions support children's access to education, undocumented children still face barriers to enrolling in Thai schools in practice. These barriers are stronger when caregivers do not have stable legal status, cannot stay in one area for long periods, or are unable to obtain endorsements from employers or community leaders.

Concerns about immigration status also prevent children from accessing healthcare and other essential services, especially in cases of violence or abuse. Many children do not report incidents because they fear status checks. In some cases, perpetrators use documentation problems to threaten or control children. There are also challenges in identifying children in migration contexts. Although the Ministry of Education introduced the G-Code system to support access to

education, the system is not linked with civil registration or other agencies. This results in fragmented data, duplicate records, and misuse of identity information. There have been reports of corruption in the issuance of 13-digit identification numbers, including cases where numbers belonged to deceased persons. This reflects serious gaps in identity documentation systems.

Children born in Thailand to migrant worker parents may receive birth registration and be recorded in civil registration systems. However, in many cases, their records remain in the central registry and are not transferred to household registration in their area of residence. This means they are not fully recognized in practice. At the same time, Thailand does not recognize urban refugee status. Children and families who flee conflict and live outside temporary shelters are left without any form of legal documentation.

## 5. Conclusion and Recommendations

### Conclusion

This annual report highlights an increasing trend of violence against migrant children, driven by conflict situations and policy and legal pressures that are not conducive to child protection. Many migrant and displaced children, particularly unaccompanied and separated children, are forced into situations of dependency while seeking safe shelter and opportunities to continue their education. This further increases their vulnerability and creates protection gaps, leaving them exposed to exploitation and weak child protection.

The report shows that since 2021, ongoing violence and instability in Myanmar have forced many children to seek safety in border areas of Mae Sot District, Tak Province. These children live in different settings and face high risks of rights violations and many forms of exploitation. Although Thailand has the Child Protection Act and is a State Party to the United Nations Convention on the Rights of the Child, gaps in enforcement and implementation remain. These gaps are especially serious for children on the move due to conflict along the border, particularly those without legal identity documents.

Children on the move still face many barriers in accessing education and healthcare. They also experience insecurity in learning spaces and communities, challenges linked to legal status, child-unfriendly justice system, and policy implementation that prioritizes national security over child rights. Linking child rights protection to legal immigration status constitutes a major barrier to effective child protection and excludes many displaced children from protection systems based on international child rights principles. As a result, these children remain caught in repeated cycles of rights violations and exploitation, which may become serious social challenges for local communities in the future.

### Recommendations

#### Policy-Level Recommendations

- 1. Develop a Children on the Move strategy and establish an innovation platform for the protection of children in cross border migration contexts**

Public and private sector actors should coordinate to design a comprehensive strategy for child protection in border migration contexts, with the aim of strengthening child rights protection, reducing exploitation, and addressing structural barriers that affect the quality of life of these children. Tak Province should pilot innovative child protection spaces for children in migration contexts along the border, integrating technological innovations with local resources to enable more effective and context-appropriate responses to the needs of migrant children.

- 2. Develop a rights-based and secure data system for children in migration contexts**

Relevant agencies should develop a child protection database in the area that is grounded in child rights principles and does not lead to arrest or immigration enforcement. The system should facilitate data sharing among key sectors, including education, public health, social development and human security, and interior affairs, to ensure that all children can access protection and basic services on an equal basis. In addition, a central unit or task force should be established to systematically survey, screen, and register migrant child populations to enable effective service

planning. In 2025, the Migrant Learning Coordination Center and public health agencies have begun collecting and integrating student and health data.

### **3. Establish child reception centers for displaced children in humanitarian emergencies**

Child protection agencies should serve as the lead in establishing reception centers in situations of cross-border displacement due to conflict. These centers should provide screening and assistance to children in crisis through an integrated One Stop Service approach, promoting coordination, reducing duplication, and avoiding the transfer of burdens to any single agency. Multidisciplinary teams, including psychologists, lawyers, and interpreters, should be deployed within reception centers.

### **4. Reform relevant laws and regulations**

Laws, regulations, and Cabinet Resolutions that create barriers to children's access to basic rights to education and health care, particularly for children without documentation or legal status, should be reviewed and revised. Budget allocations and staffing levels in relevant agencies should be increased to support proactive outreach and comprehensive assistance that reflects the scale and complexity of needs.

## **Operational-Level Recommendations**

### **• Immediate actions**

Public authorities should prioritize ensuring that Migrant Learning Centers are safe spaces by strictly enforcing child safeguarding measures, including criminal background checks and screening of personnel working with children, and establishing safe and confidential complaint mechanisms for children. This should be accompanied by training for teachers and staff on child rights, violence prevention, and mental health support, to enable timely and appropriate responses to risks. Immediate efforts should also be made to expand proactive access to mental health services for children and staff in MLCs, including the deployment of on-site psychologists and the integration of mental health care into child protection and case referral systems, to mitigate the impacts of psychological trauma and prevent escalation of short-term risks.

### **• Medium-term actions**

Public authorities should strengthen MLCs as functional child protection hubs, with trained personnel capable of identifying, referring, and following up on cases of rights violations and child vulnerability. Staffing in education settings, such as psychologists, guidance counselors, and social work teachers, should be strengthened, especially in border areas. This should be supported by dedicated budgets and ongoing capacity building to respond to increasingly complex needs. At the same time, child protection systems should be strengthened through closer and more systematic collaboration among relevant public agencies, such as Tak SDHS, immigration authorities, police, and Tak PESAO2, in partnership with civil society organizations. Approaches should shift from a focus on constraints to proactive problem-solving centered on the best interests of the child.

### **• Long-term actions**

The government should prioritize the sustainable development of education and skills development systems for migrant children by promoting alternative education pathways that integrate academic learning with practical vocational training aligned with labor market needs. Clear career guidance and future pathways for further education or vocational training after

completion of schooling should be established to reduce the risk of children entering informal or exploitative sectors. At the same time, Thai language education in MLCs should be strengthened and linked to livelihood opportunities to prepare children for quality living and working conditions in Thailand. At the community level, continuous and systematic awareness-raising should be conducted with caregivers and children on the risks of exploitation in various forms, including online scams and trafficking, to build long-term resilience and protective capacities.

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Linking child protection principles to legal immigration status creates a major barrier to effective child protection practice. As a result, many migrant children are excluded from protection systems grounded in international child rights principles.

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