Perspectives on Migration of Health Workers from India to Overseas Markets:
Brain Drain or Export?

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Abstract:

The relation between brain drain and the export of health workers, such as doctors and nurses, dates back to the early 1960s when large-scale immigration of doctors from the United Kingdom to the United States came into focus. The consequent vacuum in the supply of health personnel created in the UK health sector was partly filled by immigration of Asian doctors in general and Indians in particular. Variations in the supply and demand of human resources in health as well as various other sectors over the last 40 years across the developed and the developing countries have led to changes in the policies and patterns of migration to and from these countries.

Indeed, the skilled health workers, particularly the doctors and nurses have continued to be on the centre-stage of the international migration of 'human resources in science and technology' (HRST). Keeping in mind the emerging world labour market for HRST through enhanced international mobility in the 21st century, two particular kinds of migration of highly skilled people, namely the return migration of IT professionals to India, and the changing response of Indian doctors and nurses to the world demand for health workers, were examined through two sample surveys in India recently. These two specific primary surveys pertained to the IT professionals in the city of Bangalore and their role in making the city a “corridor” for international mobility of Indian professionals, and the health professionals (doctors and nurses) in the city of Delhi. Contrasting the results on doctors against those on nurses on the one hand and on both as health workers against the results of the other survey on the IT professionals in the city of Bangalore has shown some interesting trends. These results have now been published by OECD in an STI Working Paper (2004).

The All India Institute of Medical Sciences (AIIMS) in New Delhi, the premier institution in health care services, medical education and research India, stands at the top of the list of institutions from which more than half of its output of graduate doctors (56%) left for greener pastures abroad during the two and a half decades between 1956-80. The phenomenon had led to very restrictive policies on persons wishing to leave India for medical training and jobs abroad because of their subsequent non-return, though there were loopholes in the effective implementation of these policies. To assess the current scenario at the turn of the century, the case-study (OECD 2004) on the changing response of Indian doctors and nurses in the city of Delhi to the world demand for health workers was conducted.

The prospective returnee Indian doctors from the CIS countries have lately been foreseeing a fast growing medical/health sector in India as the trigger behind their intentions to come back, although the demand for medical services in India is largely from the poorer section, unable to pay adequately for the health care services. The ground reality is likely therefore to reverse the decisions of these prospective returnees in the health sector sooner or later. The possibility of heightened medical tourism to India of course provides the counterpoint to such a scenario. On the other hand, the new scenario also brings in a group of Indian youth training in the skills of medical transcription as a response to outsourcing of such services by the developed countries. This is an emerging area which calls for more intensive research on health, migration, and the export of health-sector services.