

# International Dialogue on Migration

## Summary Report

Migration and



Human Resources for Health:

From Awareness

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To Action



IOM International Organization for Migration

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## Introduction

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The migration of health care workers is not a new phenomenon, but the issue has become of utmost importance in recent years due to the global shortage of health care workers. As populations age in industrialized countries, there has been a sharp rise in demand for health care workers. To meet these demands, health care workers have migrated from developing countries leaving behind an insufficient and weak health workforce in already struggling health systems. Demographic and economic projections indicate that the forces that drive migration of health care workers will remain and in some cases increase.

Recognizing the need to reach deeper understanding of the complex issues and dynamics involved in international migration of health care workers and move towards a more comprehensive and inclusive approach to human resource management in this domain, as part of the International Dialogue on Migration seminars, the International Organization for Migration (IOM) in collaboration with the World Health Organization (WHO) and the International Labour Organization (ILO) organized a seminar on Migration and Human Resources for Health: From Awareness to Action, in Geneva, on 23-24 March 2006.

This report highlights issues that emerged at the seminar and concludes with proposals for how the various stakeholders can carry the agenda forward from awareness to action.

## Seminar Process and Objectives

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The seminar brought together more than 160 government officials from the health, labour and migration sectors, representatives of intergovernmental organizations, NGOs, the private sector and civil society from 63 countries for an open and informal exchange of views on key issues, opportunities and challenges relating to migration and human resources for health.

The specific objectives of the seminar were:

- To provide participants with current information on the mobility of health care workers from a migration, health and labour perspective;
- To review policy approaches to managing the mobility of health care workers;
- To highlight the role of businesses and members of civil society such as professional organizations and members of diasporas in managing the mobility of health care workers;
- To discuss innovative strategies to manage the mobility of health care workers; and
- To identify action points to carry the agenda forward.

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## Key Issues

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The issues were presented and discussed from the perspective of countries of origin and destination, business and civil society (including professional organizations and diasporas), worker and employer organizations and migrant health care workers.

Challenges at hand were broadly classified into two main categories:

### **Global scarcity of health care workers**

The main reasons for absolute shortages of health care workers include underinvestment in human resource development in the health sector, intensity of work, difficult working conditions, high levels of responsibility coupled with inadequate remuneration and lack of adequate respect for the occupation. These factors lead to low entry levels into and high exit rates from the health profession. In addition, inefficient management structures in the health sector can not only lead to a high level of attrition from the profession, but also result in unproductive utilization of the existing workforce.

## **Widening imbalances and inequalities in the availability of scarce health care worker resources**

This undermines the provision of fair and universal health care. It is important to recognize that international migration is neither the sole nor necessarily the most significant factor adversely affecting the distribution and availability of human resources in the health sector. In particular, health professionals tend to move not only internationally, but also between national sectors and regions. The reasons for health care worker movements are very similar to the reasons for the high level of attrition from the profession: unsatisfactory economic and professional conditions of employment.

In addressing these issues, three cross-cutting considerations were identified.

- First, the global need to develop comprehensive policies to manage human resources for health, addressing both absolute shortages of health care workers as well as imbalances in distribution. International migration is only one of the factors affecting the distribution and the availability of human resources for health. Therefore policies to better manage international migration of health care workers should be combined with measures aimed at ensuring an adequate absolute supply of health professionals, as well as with policies for achieving a better distribution of health care workers between the public and private sectors, and between rural and urban areas.
- Second, the overall effect of international health care worker migration cannot be described as either positive or negative - its impact on the development and the functioning of health services in individual countries and communities depends on the political, social, legal and economic environments in which migration takes place, and on the effectiveness of measures put in place to ensure equity, access and quality of health services. Therefore, peace and good governance, economic and political stability, as well as functional and efficient health systems are essential to maximizing benefits of migration of health care workers and minimizing its costs. Political will of governments as well as international solidarity and support for developing countries in creating such an enabling environment are essential.
- Third, the costs and benefits of international migration are distributed unequally between countries of origin and destination. Consequently, international migration can exacerbate already existing imbalances and inequalities in the availability of health care workers and undermine the provision of fair and universal health care. There is a need for effective migration management to help address the interests of origin and destination societies, as well as of migrants, and to channel health care worker movement into safe, legal, humane and orderly avenues. All such policies should be consistent with the right of every person to leave any country, including his or her own, and rights of migrant workers in destination countries to equality of treatment and opportunity.

Having identified the challenges of managing the mobility of health care workers, the following practical approaches were identified and discussed.

### **Increase investment in education of health care workers**

A major reason for global shortages of health care workers is the decrease in public expenditures on health and underinvestment in training and education of health care workers in the developing and developed world. Many developing countries, however, do not have the funds to invest in increasing their workforce capacity. According to the WHO, current estimates of training output for Africa range between 10 to 30 per cent of what is needed, while the Commission for Africa calls for an extra 1 million health care workers to be trained by 2015. Governments of countries of origin and destination need to work closely not only with each other but also with businesses in order to pool their resources to invest in creating the urgently needed human capital for health.

### **Make the health care profession more attractive**

Improving working conditions, career development opportunities and remuneration are strategies that can be used to attract new recruits into the health workforce. Making the profession more attractive also reduces the attrition rate. The United Kingdom (UK), as part of its national strategy to improve domestic health workforce capacity, implemented from 1997 significantly increased investment in education and training. In addition, measures to promote the National Health Service as a model employer were taken. As a result, the number of persons entering medical schools and health care training has steadily increased. For instance, during 2004-2005, over 67 per cent more students entered pre-registration nursing and midwifery training than in 1996-7.

### **Improve qualifications and skills recognition across borders**

Health care worker qualifications and skills can be improved as part of regional agreements. This can help to reduce brain waste. More generally, there is growing pressure for international standards for and mutual recognition of credentials as the labour market becomes more global.

### **Address gender equality in the health workforce**

According to the ILO and Public Services International (PSI), there is a clear trend of undervaluing women's work across professions. The fact that many health professions are dominated by women might be related to inadequate remuneration levels and social status of health personnel overall. Women health care workers are often subject to low and inequitable wages, violence in the workplace and the need to combine work with the responsibility of caring for their families. All these factors cause women to quit work in the health sector. To reduce this trend, it is necessary to address gender discrimination and introduce gender specific reforms in the health sector.

## **Review retirement policies**

Early retirement or by statutory age is becoming an increasingly significant cause of exit of workers from the health sector in developed countries, as the median age of doctors and nurses is rising in much of the industrialized world. Changes to the retirement age of health professionals and to pension systems, and development of flexible retirement arrangements are among the interventions that need to be considered.

## **Improve standards of health and safety in the workplace**

Low standards of health and safety in the workplace are a cause of loss of qualified health care workers. This factor is of particular concern for countries with a high HIV/AIDS prevalence. The number of nurses dying of AIDS in Africa is comparable with the number of those migrating to developed countries.

## **Improve management of the existing workforce**

Enhancing the performance and effectiveness of the existing workforce is probably the fastest way to bring about an improvement in the provision of health services. As dissatisfaction with management quality is identified as one of the key reasons for quitting work in the health sector or moving to another country, significant opportunities exist for substantial efficiency gains in improving resource and management structures. Performance can be improved through development of performance-based systems, which would include monitoring and evaluation mechanisms linked to such incentives as supplementary pay and allowances as well as promotion opportunities. Opportunities for life-long learning are also important in this context.



## **Channel remittances to strengthen the health system**

It is important to underline the role of diasporas and the private sector, especially banks, in maximizing the positive impact of migrants' financial contributions to the country of origin and channelling these resources towards the development of the health sector. Mechanisms could be considered to create incentives for remittances sent home by migrant health care workers to be channelled into health systems. This is an important way of increasing the positive impacts of remittances and of migration in general. It must be noted that remittances are private funds and measures to enhance their impact on development should only be incentive-based.

## **Utilize diasporas for knowledge and skill transfer**

Countries of origin can also benefit from migration as a result of knowledge and skills transfer. Encouraging qualified migrants to return on a voluntary basis allows countries of origin to gain from the experience and knowledge acquired by their expatriates while working abroad, thus substituting "brain drain" with "brain circulation". Cooperation between countries of origin and destination, expatriate networks, academic institutions and the private sector is needed to facilitate brain circulation.

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## **Protect migrant health care workers**

Many health care workers who are recruited internationally face the risk of exploitation, racial and gender discrimination and social exclusion. Respect for the human rights of all migrants should be an essential component of good migration management and development strategies. Pre-departure orientation in the home country is particularly effective in raising migrants' awareness of their rights, thus, providing them with a safeguard against exploitation.

## **Promote retention of the health workforce**

Health care worker retention strategies should be based on respect for human rights, including the right of individuals to leave any country. Therefore, all policies should be based on incentives rather than coercion, which requires taking into account individual needs and aspirations of health care workers. Retention of health care workers in countries of origin requires addressing both push and pull factors.

## **Review Codes of Practice for International Recruitment of Health care workers**

Many codes of practice exist but are insufficiently implemented. Support systems such as incentives, sanctions, monitoring and evaluation are necessary for effective implementation and sustainability of codes of practice for ethical recruitment of health care workers.

## **Facilitate return migration**

Measures to retain skilled nationals will not always be effective, especially given the increasing globalization of labour markets and persistent disparities in wages and opportunity. However, where skilled nationals emigrate, brain drain can be replaced with "brain circulation". Migrants can be encouraged to participate in the transfer of knowledge, skills and technology to their countries of origin. According to an Africa Recruit survey, 70 per cent of health care workers were interested in returning permanently to their home countries and 95 per cent on a temporary basis. In most cases, however, return does not happen spontaneously, and various stakeholders have to work together to create a climate and a legislative framework conducive for return. Cooperation between home and host countries based on mutual benefits to be gained from temporary labour migration is necessary to facilitate temporary and circular migration.

## **Consider guest worker schemes**

Circular migration for health professionals can be facilitated by guest worker schemes. One of the key advantages of circular migration for the country of origin is that this type of movement is usually associated with a high level of remittances as a percentage of earnings. Research has shown that migrants' transfers to the country of origin decline the longer the worker stays abroad. Short-term work permits and intra-company international transfers of employees of multinational

health care businesses are among the mechanisms that can be used to induce circular migration.

### **Promote virtual return**

Modern information and communication technologies mean that migrants can transfer skills and knowledge from abroad, as an alternative to temporary or permanent return. Physical presence is no longer always necessary. Virtual returns have particular relevance in the area of developing human resources for health. For instance, distance learning can be an effective means for highly qualified migrant health care workers to reach a wide audience in higher education settings.

### **Consider cost sharing mechanisms**

Cost sharing mechanisms could be considered to minimize brain drain. It was proposed that destination countries that recruit foreign health care workers consider financially reimbursing countries of origin for the loss of investment and human capital or invest prospectively in education and training in the countries of origin. For example, destination countries could invest in developing the capacity of countries of origin in the form of top up of salaries, training support and human resource development. It was also suggested that migrant health care workers trained in the country of origin could remit money back to their countries in the form of tax. Mechanisms are needed to prevent double taxation. These funds could be channelled into health and social service development.

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## **Stakeholder Participation**

**T**here is a need for cooperation among all stakeholders to address the technical and political dimensions of managing the migration of health care workers.

Governments play a leading role in developing and implementing policies and programmes for effective management of human resources. Governments need to ensure sustainability of public policies; support public, private and non-profit involvement; promote appropriate regulation of professions and credential recognition. Political commitment is required from countries of destination and countries of origin to better manage the migration of health care workers.

Governments of countries of origin need to address factors leading people to migrate and devise policies to ensure an enabling political, social and economic environment. Governments should endeavour to provide a favourable environment that will retain skilled health care workers.

Countries of destination have a key role to play in assisting with capacity building efforts and strategically directing foreign aid and investment to address the factors that lead health care workers to seek to leave countries of origin. These

efforts will be most successful where complemented by measures addressing larger development challenges, such as poor economic performance, high levels of debt, rural poverty, and inefficient public administration. Codes of practice should be enforced in both the public and private sectors.

Engagement of regional governments is becoming increasingly important, especially in Europe, where the process of political decentralization is taking place. One example of cooperation between regions is partnership between the Veneto and Timis regions of Italy and Romania respectively. In addition, this partnership includes representatives of academic institutions and the private sector.

International organizations and NGOs play important consultative and facilitating roles and ensure that government policies correspond to the highest ethical standards. International organizations have an important role in establishing and strengthening partnerships between governments, and in developing the capacity of States to address health sector and migration challenges cooperatively. Partnerships between international organizations and governments for data sharing on mobility of health care worker matters is of key importance as both governments and various international organizations collect data related to the movement of people. International organizations and NGOs facilitate development of broad-based partnerships, providing a platform for dialogue and building links between different stakeholders.

Many developing countries need the support of development agencies in strengthening their human resources for health and addressing broader development issues. The New Partnership for Africa's Development (NEPAD) in its health strategy emphasizes the necessity of innovative and effective partnerships between African governments and health development partners. More active engagement of development agencies in providing support to developing countries in building health sector capacities is critical.

International organizations can assist with the return and circulation of skilled health care workers. The IOM Migration for Development in Africa (MIDA) programmes make it possible for African professionals in Europe and North America to return temporarily to their home countries to provide short-term assistance and expertise in various fields, including health care. These programmes represent broad-based partnerships involving IOM, sub-regional bodies, such as ECOWAS, the governments of the participating countries and private sector employment institutions.

The private sector plays an increasingly significant role in the health sector. Relevant private sector actors include private medical schools and institutions involved in accreditation and the setting of medical standards, health insurance companies, private recruitment agencies, clinics and long-term care facilities. Governments need to cooperate with the private sector to maintain the appropriate public-private balance in the delivery of health services and training in order to achieve a more efficient use of available resources, as well as equity and quality of access to health services. Medical schools can cooperate with countries of destination to train human resources for the international labour market.

The private sector has an important role to play in strengthening of health systems through strategic investments. For example, private businesses in destination countries can contribute to the development of human resources for health



and health services in countries of origin, through investing in public universities in countries of origin. Businesses and non-profit employers can invest in health facilities in countries of origin. Good governance, stability and safety of investments in countries of origin are necessary for attracting public funds.

Cooperation between recruitment agencies, employers and countries of origin and destination can help to protect migrants, address educational and professional issues and counteract brain drain.

The involvement of migrants and migrant associations is critical. The design of effective policies cannot be undertaken without the involvement of migrants themselves. Migrants can benefit both countries of origin and destination through a variety of financial and non-financial avenues, including knowledge and skills transfer as well as technical and financial assistance. Establishing a dialogue between governments and migrant associations and fostering a relationship of trust between these actors is necessary to mobilize migrants' resources for development. Diaspora associations should be offered opportunities to engage in programmes aimed at developing health sector capacities in their countries of origin, including participation in project identification, implementation and monitoring.

The role of migrants' financial transfers to home countries in reducing poverty and economic vulnerability of these States represents the well-recognized beneficial effect of migration for countries of destination. According to the World Bank, international remittances remain the second-largest financial flow to developing countries after foreign direct investment, and are more than twice the size of net official development assistance.

Some countries, including the Philippines and India, have encouraged the outflow of workers in order to gain foreign capital through remittances. For instance, the Philippines – one of the largest labour-sending countries in the world with 8 million nationals working abroad – has benefited significantly from the large inflow of remittances, estimated at 10.7 billion US\$ in 2005. It was pointed out, however, that remittances cannot easily compensate for the loss of talent and skills, especially if migrant workers do not return. A country of origin needs to balance its internal interests, taking into account national health requirements, labour migration issues and the value of remittances.

Participation of trade unions and professional associations is essential to ensure protection of workers and their welfare.

The involvement of patients – the consumers of health services – should not be forgotten.

# Conclusions and IOM Points to Carry the Agenda Forward

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In conclusion, there is widespread agreement that the cooperation of all stakeholders is needed to ensure that migration factors are addressed coherently to have a positive impact on the management of the movement of health care workers.

IOM has identified the following action points for it to pursue to move the agenda forward:

- IOM, WHO and ILO to collaborate to provide **technical assistance** to governments to **improve national health information systems**, including data collection and analysis and the use of a sound evidentiary base to develop strategies to manage the migration of health care workers.
- IOM, in collaboration with other key stakeholders, to **establish an observatory** to track/monitor the global migration of health care workers.
- IOM and partner international organizations to establish a **global alliance for the management of human resources for health** to bring together relevant stakeholders for dialogue, to share experiences and to develop action plans and strategies.
- IOM to create an **on-line platform to facilitate information exchange** on best practices, innovative policies and programmes for the management of health care worker migration.
- IOM to **establish and maintain a database of current health workforce resources** in diasporas.
- IOM, development agencies, the World Bank and others in collaboration with the private business sector to establish an **international public-private financing mechanism for human resource development** for health.

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It is IOM's sincere hope that other stakeholders will undertake a similar reflection on what they can do to move the agenda forward from awareness to action.

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