MIGRATION OF POLISH HEALTH CARE WORKERS IN THE CONTEXT OF POLAND’S MEMBERSHIP IN THE EUROPEAN UNION

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Situation before Accession

- Fears of „old” member states – massive migration flow from „new” member states, which will disturb labour markets

- Fear of „new” member states – outflow of well qualified workers, particularly health-care staff / „brain drain”
Result of negotiations

Model „2+3+2”

- Transitional arrangements were set for the period of two years
- The states that deem after the two years that they would like to maintain restrictions, will have the right to do that for further three years
- In case of a serious threat of disturbance of labour markets - the right to extend application of restrictions for two following years until 1st May 2011
Current situation

- Fully opened labour markets – United Kingdom, Sweden, Ireland + „new member states (excluding Malta).

- Opening since 1st May 2006 – Spain, Portugal, Finland, Greece(?), Norway (?), Iceland (?)

- Transitional Period – Germany, Austria, Italy, France, Belgium, Luxemburg, Netherlands
Scale of migration

Question – How many of them are new emigration workers?
Reasons of emigration of health-care workers

- Is Poland’s membership in the EU one of the main factor of emigration? – No! -The membership in the European Union seems to play a secondary role here

**Other factors**

- Differences in salaries between Poland and many other (e.g. Scandinavian) member states.

- Better career prospects in other member states
Scale of emigration of Polish health-care workers

- The total number of professionally active medical doctors in Poland amounts to almost **119,000**

- **3.5 %** of Polish medical doctors in various specializations were interested in undertaking employment in other EU member states after 1st May 2004
Scale of emigration of polish health-care workers – the largest numbers

- Anaesthesiologists and intensive care experts – 545 persons (13.95 % of all active professions),
- Chest surgeons – 26 persons (12.04 %),
- Plastic surgeons – 19 persons (13.38 %),
- Vascular surgeons – 18 persons (7.96 %),
- Experts in life-saving medicine – 35 persons (8.22 %)
- Orthopaedists – 133 (6.08 %).
Scale of emigration of Polish health-care workers – the smallest numbers

- neonatologists (0.17 %),
- clinical oncologists (0.27 %),
- child neurologists (0.28 %).
Dentists, nurses and midwives

- Dentists - 1461 persons - 4.7 % of all dentists in Poland
- Nurses (as of the end of February 2005) - 2830 - 1.17 % of professionally active nurses in Poland
- Midwives (as of the end of February 2005) - 195 - 0.57 % of professionally active midwives in Poland
Conclusions

- Current scale of migration of health care workers is not large enough to constitute a threat to health care system in short term.

- Poland’s membership in the European Union affected to a very limited extent the migration attitudes of Polish health care workers.

- If situation in Polish health-care system does not improve significantly, the scale of emigration could increase.

- Future scale of emigration will also depend on careers and social success of those persons who have already decided to emigrate.
Thank you very much for your attention