

Promoting Decent Work Across Borders: A Project for Migrant Health Professionals and Skilled Workers

This Project is funded by the European Union



International
Labour
Organization

Challenge



© ILO/J.B. Go

International migration is an increasingly pressing issue in a globalized world. The global shortage and inequitable distribution of health professionals in many developed countries, driven by demographic and epidemiologic changes, as well as newer technologies in service delivery, intensifies the need for health workers. Shortage may also be driven by spending for healthcare in the developed countries which rose rapidly over the past decade until the financial crisis led to a virtual freeze by 2010.

The Philippines and India are the biggest sources of foreign health workers for the Organization for Economic Cooperation and Development (OECD) countries. In 2010, Filipino-born nurses and Indian-born doctors each represented about 15 per cent of all immigrant nurses and doctors (OECD, 2010). About 56,000 (8 per cent) of doctors trained in India have migrated to OECD countries. Statistics indicated that about 16,000 physicians and 110,000 nurses born in the Philippines were working in Europe and North America. Philippine authorities confirm that about 12,000 nurses leave the country annually. The role of migrant caregivers is gaining socio economic importance in Europe and the proportion of foreign-born workers in health facilities often exceeds that of local workers in most European countries (Fujisawa, 2009).

The migration of healthcare professionals raises concerns from both source and host countries. Health professional mobility impacts the performance of health systems by changing the composition of health workforce and outcomes in both sending and receiving countries. Migration of health workers is both a response to the challenges of health systems in destination and source countries as well as a challenge in itself.

While migrant healthcare workers from developing countries are greatly contributing to the healthcare sector of developed countries, the migration of health professionals workers from developing countries is perceived to negatively affect the development potentials of the countries of origin. This phenomenon has been referred to as the “brain drain”. This brought about the development of codes of practice for ethical recruitment spearheaded by the UK and later by the World Health Organization (WHO), various government-to-government labour arrangements and other possible strategies, such as circular migration focusing on how to better manage the migration of health professionals in the interest of Decent Work for All.

Response

The International Labour Organization (ILO), with funding support from the European Union (EU), is implementing a programme called *Promoting Decent Work Across Borders: A Project for Migrant Health Professionals and Skilled Workers*.

The project seeks to better understand schemes in line with circular migration of health professionals. This is done by engaging governments, trade unions and employers organizations as well as professional organizations into policy dialogues, establishing networks of experts and trained practitioners, strengthening employment services for healthcare professionals and skilled workers, facilitating skills recognition processes, and enhancing labour market information systems.

Through this project, the ILO aims at promoting approaches to migration that benefit the migrant workers, the source and destination countries within a rights-based framework for better labour migration management.

The project focuses its activities on three Asian countries with significant outflows of health professionals and skilled workers, namely, the Philippines, India and Viet Nam.

Key Statistics

- The world has some 8.6 million physicians to attend to a population of 6.7 billion, or about 780 people per doctor (WHO, 2006).
- The Americas, 10 per cent of the global burden of diseases employ 37 per cent of the global health force.
- India has a physician to population ratio of 6.5/10 000. In the Philippines, the same ratio is of 11.6/10 000, whereas Viet Nam's ratio is of 12.2/10 000. In comparison, the UK the population enjoys 27.4 physicians for 10 000 people. There are 29.1 and 30.1 physicians for, respectively the same amount of Finnish and Belgian (WHO, various years).
- About half of foreign-born doctors or nurses working in OECD countries are located in the United States, almost 40 per cent in Europe and the remainder in Australia and Canada.

Objectives

The Project aims to:

- Foster policy dialogue to better understand circular migration schemes that are aligned with the ILO Decent Work Agenda and mitigate the risks of brain drain in a pro-active manner;
- Design and test mechanisms to facilitate online registration, skills testing and certification, preparation and counseling, placement for European employment and upon return, their re-employment in the home country; and
- Improve data collection and analysis of labour market information on the demand and supply of professionals and skilled personnel in healthcare in the EU, alternative destination countries and the employment prospects in the participating countries.

Achievements

- In April 2012, the Department of Health (DOH) and Department of Labor and Employment (DOLE) in partnership with the ILO Country Office for the Philippines-Manila and WHO, developed a multistakeholder approach, whereby other sectors of government, trade unions, hospitals, private recruitment agencies and professional associations contributed to the monitoring of the WHO Global Code of Practice on the International Recruitment of Health Personnel;
- On-going case study on the realities of migration from health professionals' point of view and documentation of good practices of recruitment agencies;
- On-going assessment of the effectiveness of the existing services available to healthcare professionals in the Philippines and India;
- On-going analysis of the assessment of the effect and impact of the bilateral labour arrangements developed by the Philippines with regards to the migration of healthcare professionals;
- On-going photo competition to capture in images the circumstances around migration of health professionals from the perspective of young health professionals;
- On-going feasibility study for raising migrant workers' voice through their assessment of their own recruitment experience;
- On-going assessment of the Philippine Professional Regulation Commission's online registration system; and
- On-going development of training materials and training of master trainers on the Philippine Nursing core competencies.



Source

Fujisawa, R.; Colombo, F. 2009. "The Long-term Care Workforce: Overview and Strategies to Adapt Supply to Growing Demand", *OECD Health Working Paper*, No. 44, OECD Publishing, Paris.

OECD. 2011. *Health at a Glance 2011: OECD Indicators*, OECD Publishing.

OECD. 2010. *Policy Brief on International Migration of Health Workers Improving International Cooperation to address Global Health Workforce Crisis*.

WHO. 2006. *Working Together for Health*. Geneva: World Health Report.

Contact

Ms Catherine Vaillancourt-Laflamme
Chief Technical Advisor
Email: vaillancourt-laflamme@ilo.org

International Labour Organization
Country Office for the Philippines
Tel : +632 580 9900
19th Floor Yuchengco Tower
RCBC Plaza 6819 Ayala Avenue
Makati City 1200 Philippines
Website: www.ilo.org/manila

Components

Donor: European Union
Acronym: DWAB
Start Date: 1 February 2011
End Date: 31 January 2014
Budget: €2.5 million
Partners: Ministries of Labour, Health and Education, Trade Union, Employers' and Health Professional Organization and Research Institutions in the Philippines, India and Viet Nam
Project Sites: Philippines, India and Viet Nam



Updated: October 2012