

## CASE STUDY 1

# The Advanced Practice Nurse

### Pre-Migration

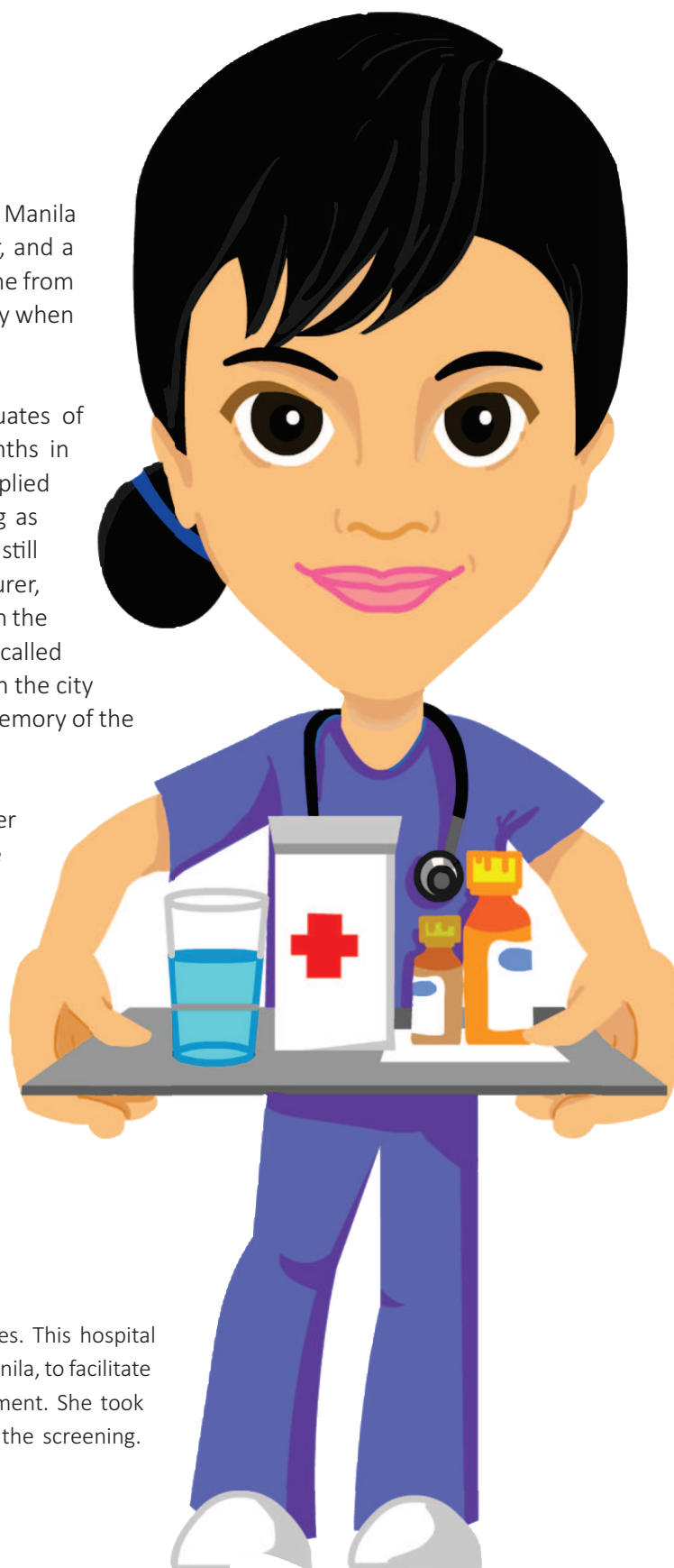
Marilyn graduated as a nurse from a big university in Manila in 1974. She would describe herself as an adventurer, and a person who loved to explore new things in life. She came from an affluent family, and did not have problems financially when she was growing up.

When Marilyn finished her college education, graduates of nursing universities were required to spend six months in rural areas to render community service. She complied with the requirement, and found satisfaction working as a regular staff nurse. She did her job as required, but still felt there was more for her to discover. As an adventurer, Marilyn felt that there must be more to life than living in the Philippines. It was the period of Martial Law, and she recalled times of curfews and barricades at designated points in the city imposed by President Ferdinand Marcos. Such is her memory of the young life she had after graduation.

While doing her usual tasks at work, news reached her that the United States was experiencing a shortage of nurses. Acknowledging the political and economic challenges in the Philippines, Marilyn became open to the prospect of working in the United States. She was persuaded by her friends to join them in applying for a job. Despite not having any career plans, she pursued the application, with the prospect of exploring other opportunities outside of her home country.

### Application

The director of nursing in a regional hospital in the US state of Arkansas directly hired applicants from the United States. This hospital collaborated with a private recruitment agency in Ermita, Manila, to facilitate the screening and other necessary procedures for recruitment. She took an exam, underwent an interview, and eventually passed the screening.



After successfully going through the application process, she was given a contract with a date of departure. Within three to four months after her visa was approved, she went to the United States very young and excited at the new opportunities that lay ahead.

It took Marilyn only ten months from the time of her graduation to move to the United States with a working visa. She transferred with the promise of a good salary, dormitory housing and preliminary medical-surgical training.

## Migration

Filipinos at that time had a pre-conceived notion of Americans as “big white people”, which symbolized a people of higher order in terms of knowledge, technology, and material possessions. While most of her colleagues dreaded such a challenge, Marilyn was determined to make it big and prove herself. For some Filipinos, getting into the groove of a foreign culture takes time-- but not Marilyn. Somehow, it was easy for her because it was in her nature to relate with different kinds of people.

### *The six-month accomplishment*

Upon landing in the United States and reaching the hospital who hired her, she conditioned herself for the several adjustments she had to make. Three new realities became very challenging for her, the first of which was the difficulty of understanding and speaking English with an American accent. She realized that she had to change her diction and immerse herself more so she could speak like everyone else. The second challenge for her was the time zone, and the pace of work. It was difficult to adjust to the time difference and the actual run of activities, considering the very different work environment between the United States and the Philippines. Last, as a relatively inexperienced nurse, her assignment was the source of some concerns. She would have preferred to have been given the chance to choose her clinical area of designation; however, this did not happen. She felt forced to practice in the recommended area to comply with the hospital policies and work with the hospital’s expectations. But she did not let these challenges stop her. Determined as she was, she pushed herself to perform well in her new foreign land.

While work conditions posed a challenge, it was nothing compared to the physical distance from her family. This experience was the same for other young Filipino nurses who had similarly tried to pursue a better life in a foreign country. She recalls some of her Filipino workmates would empty their pockets just to make phone calls to the Philippines. She saw them become emotionally crippled by sheer loneliness and homesickness. But Marilyn chose to respond differently. Despite her loneliness, her self-determination pushed her to go beyond just merely surviving. This attitude eased her adjustment into her new country, and within only six months, life abroad as a very young graduate proved easier and gratifying.

### *Work achievements*

Marilyn remained in Arkansas for two years, and despite having no career plans when she first arrived, she slowly gained momentum and became a better nurse. She transferred to Missouri in 1977 and worked as a nurse specialist for wound and ostomies<sup>1</sup> until 1980. She also became an adjunct faculty and a recognized advanced practice nurse (APN). An APN is one who has gained expert knowledge and substantial experience to practice a specialty with a level of expertise and autonomy. For a Filipina to function as an APN in a foreign land was the sign of a good achievement.

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<sup>1</sup> Ostomies: a surgically created opening for the discharge of body waste. This is done for patients with problems in the intestines and kidneys.

In 1980, she decided to transfer to a large university campus hospital in Los Angeles. She took graduate studies and worked in this hospital for 13 years. Similar to her previous experiences, she was assigned in the medical-surgical floor and was promoted to become an assistant nurse manager after one year. She started her master’s degree in 1984 from the same university and finished in 1986. She took a different stride in advanced practice, and gained enough expertise to become a metabolism and nutrition specialist at the same institution. While studying, she was well supported by colleagues.

Marilyn’s career advanced and she received the appreciation of her colleagues within the period that she was in Los Angeles. Other members of the health team valued her contribution in improving patient care. Marilyn received numerous referrals and firmly established her craft. As a determined person, she did not have any problem with work and working with foreigners. This situation allowed her to continue working and studying at the same time.

While working in the United States, Marilyn enjoyed a good standard of living. Although not a priority, she was earning a significant wage while living with her friends. She kept a good work-life balance as a single person. And because money was not her priority, she never took a double job, and never worked overtime.

### *Turn of events*

It was common for Filipinos working in foreign lands to meet for social gatherings. In one fateful event, Marilyn stumbled upon the-then dean of the college of nursing where she had graduated. The dean personally invited her to work or contribute to the on-going developments in their alma mater. Marilyn gave it careful thought, and decided to pay the Philippines a visit.

In 2009, she went home for the first time to “simply have a good time”. She knew she wanted to explore and weigh the opportunity that was being offered to her. While in the Philippines, she was appalled to find that the work-place environment and working conditions were the same as when she left. She then felt a compelling desire to contribute what she had learned and experienced in the United States. After much careful thought, she decided to accept the job offer, while living in two different worlds: work as a part-time faculty in the Philippines for 6 months, and then go back to practice for the rest of the year in the United States.

## Making it back

The dean and faculty of the college of nursing, upon learning of her decision, warmly welcomed her. From the processing of return papers to acquiring a work permit in the Philippines, she was given full support to reintegrate herself back into the health-care system and academic environment. She was assigned to teach at the undergraduate level. She was also occasionally given the task of training nurses working in the university’s hospital.

Marilyn sites major differences between the working environment in the Philippines and in the United States. For one, the professional relationship between physicians and nurses seems to be very different. Nurses in the United States are more independent, and are very well respected by physicians, and participate in decisions that concern patient care. Based on her perception, things were different in the Philippines. The environmental and infrastructural challenges in the Philippines also proved difficult for her. She cites traffic, widespread littering, and pick-pocketing as major issues. As she commuted to and from her home in Quezon City, she witnessed all the ills of her society, which were so different from what she had experienced in the United States.

She reflects that there are times that she feels frustrated over her decision to return home. However, she stresses that working and giving back to her country gives her much satisfaction, which no amount of money can provide. She loves her job, and she knows that despite the differences, there is much to learn in terms of professional development in the Philippines.

Marilyn also decided to teach in the college for six months so that she could take care of her mother better, and have more time with her family. She has never regretted coming home. However, returning to the United States every six months enables her to continue practicing in her expertise. It is a challenge living and working in two different worlds, but living and working in the Philippines gives her a sense of fulfillment.

## Lessons learned and insights

The problem with the Philippines has always been with infrastructure, she says, and the professional environment. She hopes to see the nurses and physicians working hand-in-hand with equal professional respect. She hopes to see better infrastructure, less garbage on the streets, less crime, and with the promise of peace and order in all corners of the country. While she enjoys coming home, she always finds herself cringing at the site of cluttered streets.

Working back home is a satisfying experience, but she perceives that more Filipinos would be enticed to return if the conditions she mentioned could be improved.

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## CASE STUDY 2

# The Nurse Entrepreneur

### Pre-migration

Kenneth is a nurse who graduated from a respected university in the northern part of the Philippines. He comes from a family of farmers from the city of Baguio, in the province of Benguet. He was the youngest of eight siblings. His family was poor, and his parents could barely sustain their basic living necessities. His father would plant and sell sweet potato, his mother would sell goods at their small convenience store, and his elder sister would assist with her salary as a teacher. Life proved to be difficult in the province and the only way he could finish his education was through a scholarship. He graduated full of aspirations, hoping and wishing that someday he could help his family afford a better standard of living.



While growing up, Kenneth heard stories and observed how his relatives working abroad managed to improve their living conditions. He observed that those who had returned from the KSA earned better than those coming from the United States or Australia. For example, some of his relatives who have come from the KSA had more investments in the Philippines than those relatives from the United States and Australia. This made him look forward to applying to the KSA someday.

Kenneth's first assignment as a nurse was in a hospital in Baguio. His salary was only Php 800 a month, which even in the 1980s was low and insufficient. True to his training, Kenneth laboured hard as a nurse, serving his patients professionally. But his salary was never enough to cover his needs, let alone support his family.

### Preparing to leave

In the Philippines, Filipinos applying for jobs in the Middle East would use either one of two options-- the Philippine Overseas Employment Administration (POEA), the government agency responsible for international migration, or through a private recruitment agency. Kenneth applied for a job in the KSA through the POEA. He was eventually accepted for employment after several screening procedures. Part of the requirements that he went through was to attend an orientation session where approved applicants were taught the customs and ways of living in the KSA. Kenneth was determined to be a compliant worker, even though he heard about and eventually witnessed fellow citizens deliberately breaking the rules, such as drinking alcoholic.

In the course of his application, he met other Filipinos who had gone to the KSA or who were also in the process of application. During those times he witnessed and heard stories of unjust contract and compensation arrangements made by private agencies. Some Filipinos would sign a contract with monthly remuneration of, for example, \$2,000, but would receive only \$600 once in the destination country. Several workers, even if aware of the inappropriate terms, would still opt to sign their contracts just so they could leave and earn better for their family.



Fortunately for Kenneth, his application went through a direct hire route by his employer in the KSA, and mediated by the POEA, and thus avoided the aforementioned experiences when going through some private recruitment agencies. However, these stories left Kenneth pondering the inequalities and unethical recruitment practices experienced by fellow Filipino workers, such as employers not respecting contract agreements and keeping workers’ passports. He left for the KSA in 1986 frustrated by these realities, but in spite of this, was determined to succeed-- not only for himself, but also to fulfill the dreams he had for his family.

Migration

His first stop: the Kingdom of Saudi Arabia

He considered himself a blessed man to land in the KSA with a good job and living terms. He and his colleagues were given free housing and a transportation allowance. Men’s apartments were separate from those of women, and they had their own swimming pool. Social life also came easy, as long as he and his friends complied with the socially accepted norms. He recalled even asking for permission to attend a birthday celebration of a married couple. In the KSA, single people of different genders are not allowed to mingle, unless they receive permission first. Every ten months, Kenneth and his friends were given annual rest and recreation, when he would travel to Europe.

He was assigned to a military hospital, where he worked with fellow Filipinos as well as Indians, Canadians, British and US citizens. He was assigned to the medical-surgical ward. As a Filipino, he didn’t have any problems meeting the demands of his work. He received due respect, and was even given leadership responsibilities during emergencies.

While working in the KSA, Kenneth realized his dreams of helping his family. Through his remittances, their house in the province was renovated and was now comprised of six bedrooms and a swimming pool. All of their debts were paid, and he also managed to buy his parents their own rice field. He even managed to send some of his nephews to school.

In 1988, the KSA government developed a policy called “Saudization”. This new framework required KSA companies to employ more Saudi nationals in response to its rising unemployment rate. Kenneth and his colleagues then saw a depreciation of their salaries, and he consequently decided not to renew his contract. When Kenneth returned home, he was proud of what he had achieved for his family. He would have opted to just stay in the Philippines, but months of failing to find economic opportunities prevailed. He knew that if he stayed, he would never be able to earn the same salary he had earned in the KSA. This triggered his decision to look for another job abroad, this time in Libya.

The Libyan experience

Kenneth was recruited as a company nurse in a US oil company. Compared with the KSA recruitment process, this time his employment was processed through a private agency. His decided to take this route after being promised commensurate pay similar to other nationals. He was also promised the same high-level of living conditions as he had when he was in the KSA.

He again learned about stories from the other Filipinos he was able to mingle with. Unlike himself, most of those going to Libya went via the government-recruitment route-- which proved difficult and unfair. Most did not get paid for periods of six months or more, forcing them to look for other sources of income while working in Libya. Some of them would fall into debt, and as a consequence some female nurses, even married ones, were forced to earn money by having sex with Libyan nationals. He did not know how rampant such practices were, but that due to their financial difficulties, it did occur. He remembers thinking that if he’d had the chance at the time, he would have campaigned against nurses going to Libya.

Kenneth’s experience was a better one. Since he was working for a US company, he was given equal treatment with the other foreign nationals. He received essential benefits and insurance, lived in a private place near his workplace, and was given a return flight to the Philippines every three months-- benefits not part of the usual packages afforded for workers in Libya.

While in Libya, he took the opportunity to study and was certified by the Commission on Graduates of Foreign Nursing Schools (CGFNS) examination. This is a voluntary test for non-American health professionals interested in working in the United States. He took the examination in Madrid during one of his vacations, and after passing the exam, decided to terminate his contract.

Last stop: the United States

After years of being in a relationship while abroad, Kenneth went home to marry his fiancée in 1990. She was a specialist in obstetrics and gynecology. He built a house, and together they had their first child, before his next opportunity came along.

His first assignment in the United States was in New York. Comparing that working situation with his previous ones, he felt that the United States afforded better job expectations and was more focused on higher nursing competencies, which meant better pay. To some extent he experienced discrimination. Several times he was questioned about his capabilities to perform competently, but this did not stop him from carrying out his nursing duties capably. He was assigned to a medical-surgical unit, and continuously displayed the caring approach Filipino nurses were renowned for.

He worked in New York for two years before transferring to Los Angeles, where he was offered a job in one of the big hospitals. There were many Filipino nurses there, so he felt at home. He thrived well in the hospital and continued to enjoy his job.

He worked in the United States while his family remained in the Philippines. His wife did not want to transfer to the United States because she would need to undergo further training and education in order to practice as a medical specialist. This made him exert all efforts just to be able to live with his family “someday”.

Despite his longing, he barely considered bringing his family to the United States. He had seen enough examples of Filipino families living hectic lives while striving to achieve a proper work-life balance. He remembered his cousin and his wife who were both nurses, watching them meet at the train station daily just to hand over their two kids between nursing duties. They needed to work different shifts so there would be someone to take care of their kids. In doing so, they spent little time together as a family. Others had similar stories, which proved that living in the United States was not easy and required a lot of hard work in order to survive.

Reflecting on all these situations and weighing his options, he confirmed that he did not want his family to experience such hardships. In the Philippines his family was living comfortably in a big house with helpers and a driver. He made the decision to earn as much as possible, so he could save enough to return home soon. His plan worked, and he finally returned to the Philippines in 1993 with enough savings to resume his life with his family, without the desire of working abroad again.

Making it back

Kenneth’s return to the Philippines was backed up with substantial experiences in three countries. After working abroad for seven years, he was satisfied, and had gained experience from different cultures and in varied health-care settings. He’d learned to assert his rights, and had become more confident amid challenging environments. He had earned good money and was confident to make the best out of all he had acquired. He was positive that somehow he would be able to find his way and thrive in his home country.

He started small by taking his time growing orchids from Thailand in his backyard, but became bored. He then applied for work in three colleges in Davao as an instructor. Immediately he was hired as a faculty in one of the prestigious nursing colleges there. Building on his experience, he was assigned to teach in medical-surgical nursing and fundamentals in nursing. He taught the courses to students in the morning, and then served as a clinical instructor in the afternoon. He felt that his work was harder compared to his previous experiences. He was happy in the beginning, but later on felt dissatisfied with how the university was being run, and how incommensurate his salary was compared with his efforts.

One specific event made him eventually resign and look for other opportunities. There was an incident when he failed several students in his subject, but the university did not support his decision and allowed these students to pass. For him, the university had behaved as a business, and the moral responsibility of providing proper education had failed. He consequently felt that this was not the way for him, and in 1996 he resigned.

## His biggest break

Frustrated with his first attempt of employment in the Philippines, he then decided to set up a review centre for nurses in the place where he grew up-- Baguio. His business was timely as there was an appreciable increase in nursing graduates who wanted to go abroad at that time. Since then, his company has grown to become one of the biggest review schools in the northern part of the Philippines. He added to investments an island in Mindanao and is developing it as a home-care centre. He is also currently conceptualizing a nurse-on-wheels programme whereby nurses would take care of chronically ill patients who had returned home from the hospital. While sustaining these businesses, he endeavored to explore other ventures outside the nursing profession, and became a distributor for Coca-Cola Philippines in Davao.

Kenneth has gone a long way since returning to the Philippines, turning every opportunity to his advantage. He wanted to earn a decent wage so he could also help other Filipino nurses. In his own way, he wanted to be a good contributor to the health of the Filipino people. These efforts were recognized, and he was elected as one of the governors of the PNA.

## Lessons learned and insights

Kenneth explains that working in different countries was a great learning experience. But he never regretted coming home. Not only is he now earning a lot, he saw his children grow up to live their dreams. One of his kids is studying accountancy, while the other is taking a pre-medicine course. Because he is at home most of the time, he could manage to spend time with them, and share important moments in their lives. His adventures have so far been good and rewarding.

Kenneth would nonetheless encourage young nurses to go and see the world, provided they first take their time to professionally grow and mature in the Philippines. He advised that young health professionals should wait for about one or two years before planning to migrate. They should leave, save up and then return home. "There is money in the Philippines," he said. Young nurses should just have a plan on how to go about their lives.

He also suggests that the government should work on increasing the salary of nurses so that they would not need to go abroad out of necessity. Improving the working conditions of hospitals would also be helpful, to bring down the frustration on working conditions and career prospects. He also suggested that there should be a review of government-to-government agreements between countries to address unethical recruitment, and a way to evaluate how nurses and other health workers are treated abroad.

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## CASE STUDY 3

# The Nurse Instructor

### Pre-migration

Carmen graduated in 1979 with a Bachelor of Science degree in nursing from a state university in the Philippines during Martial Law. She recalled that when she graduated, there were many nursing graduates, but very few jobs. This fuelled her dream of going elsewhere, so that she could find better job opportunities with good benefits. She wanted to learn more about life and somehow uplift her standards of living.

### Her first series of opportunities

As part of her post-graduation requirements, she served in a community in Palawan province for six months as stipulated by the public university. After, she applied for a position at a tertiary hospital in Manila. While waiting to be accepted, she worked in a private clinic for three months, and did her job with much dedication. She knew she was a hard worker, but she felt that salary and professional opportunities would be hard to achieve in her craft. Because of this, her aspiration to obtain better opportunities still remained.

Once she started work in the general hospital, Carmen was assigned to the medical ward as a staff nurse. Working in this premier referral hospital was beneficial for a Filipino nurse, since at the time they were the highest paid nurses in the country. In the 1980s she was earning Php 1,000 a month, compared with Php 600 to Php 700 a month for other nurses. In addition, she was working with former classmates that helped provided more favourable conditions for her, and was employed there for three years until 1983.

### Turn of events

While fulfilling enough, in 1983 she noticed that other nurses in the hospital began to take job offers in the United States, so she too prepared her application papers. Poised to leave, her boyfriend-- also a nurse in the same hospital-- discouraged her and urged her to go to the Middle East instead. When the process for obtaining the pertinent documents for the United States started to drag, she rerouted her plans and prepared for the Middle East like some of her co-workers. She was encouraged further by the fact she needed to take only one examination, with no obligation to pay a single peso to process her application. In



the United States, however, several exams needed to be taken, in addition to the large fees required for the process her application. So she proceeded with her application for the KSA.

Despite the advantages of rerouting to the KSA, the application process also became a challenge. Her visa took months to be processed, and she considered backing out. The pre-departure orientation also bothered her, seeming insufficient to prepare her and her co-workers for migration. They were merely told that women should not interact with men unless escorted by a married couple, and were required to comply with certain dietary and cultural restrictions. This included not eating pork and wearing specific clothing. She did not understand the rationale behind such practices, which made her feel apprehensive to proceed. But her friends continued to urge her to persist with the application.

Carmen continued and subsequently passed the exams and the interview. She immediately received a job offer and was able to negotiate her salary and her position. She was overjoyed by the fact that she was in front of people with high positions, and was being given the chance to choose the type of work that she wanted. After much thinking, she chose an assignment in a government-owned university hospital. Carmen’s boyfriend followed after several months and was assigned to a different ward within the same hospital.

Migration

Carmen claimed to have had a difficult time upon entry to the KSA because of how Saudi nationals treated them. At the airport, they were pushed around at the waiting area and to some extent some of them were even shouted at. Since her employer had collected their passports, the only item to bear her identity was a temporary residence certificate. She experienced culture shock, felt lost, and did not know what to do or where to go next because of language barriers and communication problems.

The ambivalence lasted a short while, because they were soon transported to the hospital where they would be working, and she was relieved that there were Filipinos already working in the same hospital.

It may have been a rough and challenging start, but the benefits outweighed it all. In comparison with the other Filipino workers coming to the KSA, they were treated with respect as foreign-educated nurses working in the clinical areas where they were assigned to.

Her living conditions were also favourable. They were housed in a fully furnished two-bedroom apartment, were provided with three free meals a day, and were given free transport to the hospital and shopping area at designated times. They were entitled with 45 days of annual leave, and a free round-trip ticket to the Philippines each year. This allowed Carmen to visit home on a yearly basis. In terms of communication, she was able to contact relatives in the Philippines via payphone inside the facility and could likewise receive calls through her mobile phone. In-house pay phones were also available for foreign workers inside the facility.

Work experience

Her initial salary was \$700 per month, then equivalent to around Php 12,600. After several months this appreciated to \$1,000 when the hospital began to recognize her years of work experience. This amount was way more than what she was earning in the Philippines, which was only about Php 1,000 per month, and comparable to salaries of Filipino nurses in the United States. She felt well compensated for the amount of work experience she brought in to the workplace, and provided an opportunity for her to save.

She proudly said that the her education fully equipped her with the knowledge and skills that she needed to cope with the working environment in the KSA. She worked with Indians and Egyptians most of the time, but the majority of the staff was

Filipino. Fifty-eight per cent of the staff in the hospital was from the Philippines, including several head nurses, which made her more comfortable working there.

Due to her male ward and intensive care unit (ICU) experience in the Philippines, Carmen was placed in the hospital’s ICU. Prior to this assignment, she worked as a staff nurse in the male neurosurgical area unit for three months. She felt anxious at first because she was not sure how to interact and care for foreign male patients, acknowledging their strict rules about women relating with men. She still worked as well as she could, and eventually appreciated her first assignment.

She initially didn’t like the idea of transferring to the ICU after adjusting to the neurosurgical ward, but she eventually agreed and ended up working in the ICU for five years.

After this long stint in the ICU, she was tasked to establish the coronary care unit (CCU) as a separate unit from the general ICU to handle heart and surgical cases. With this assignment, she was appointed as the unit’s first head nurse. She designed and developed a training module for her CCU staff, led the training, and together with the CCU chairperson developed protocols for patient management and care. The doctors fully trusted their CCU nurses and the majority of them were Filipinos.

Working in the KSA made Carmen feel appreciated and fulfilled as she was able to maximize her knowledge and skills. She also found it rewarding to take care of Saudi national patients. One of the things she observed was how these patients showed their appreciation to Filipino nurses. She and her colleagues would often be given chocolates and food, and even be verbally acknowledged for a job well done. She never regretted choosing to work in the KSA, and her experience was worthwhile. She not only had an enriching work experience, but over the years had made enough friends who she considered family in a foreign land.

Family life

After a half decade working in the KSA, Carmen and her boyfriend had saved well and were eventually married during one of their vacations to the Philippines. Upon their return to the KSA after the wedding, they changed houses as living rules were different for married personnel in the hospital.

Carmen and her husband continued with their work assignments and enjoyed the institutional benefits. One example was when her husband was diagnosed with a severe lung problem. She recalled it as one of the hardest challenges she ever faced while living abroad. One thing that kept her positive was the free medical services, as well as the constant support of her Filipino friends.

Workplace transfer

Carmen and her husband never planned to retire in a foreign country. They frequently assessed the working and living conditions in the Philippines every time they visited. When the first Gulf War broke out in 1991, they realized that they were still foreigners and that the Philippines would always be considered home. With this belief they began planning to return to the Philippines. They gradually sold their properties and planned their next move after having spent ten long and fruitful years in the KSA.

As they were preparing to leave, a colleague asked them to consider applying for a job as flight nurses. This specialty occupation sees highly trained registered nurses provide comprehensive nursing care to patients during rescue operations or aero-medical evacuations. She and her husband agreed and again rerouted themselves. Prior to this, her husband had taken their daughter back to the Philippines.

Her husband worked in Riyadh for two years and then went home to the Philippines to prepare their new house and to reorganize their family. Carmen instead chose to continue working as a flight nurse. Her clinical tasks were easier than the previous post but



she perceived that there were more risks involved, such as flying and taking care of prestigious clients. Within a short time she was designated as a chief flight nurse, and her work enabled her to see more of the world. She learned a lot, and proved how flexible she could be amid varied demands at work.

Her work as a flight nurse was manageable, but since it was an elite job, there were instances when she witnessed and personally experienced discrimination. But she strongly faced and addressed these challenges, knowing she had the credentials to base her confidence on. One example of discrimination was the unequal remuneration for each nationality, regardless of the position. At one point she asserted herself, demanded what she felt she deserved, and supported her claim by highlighting her capabilities and years of experience. She stood her ground and argued that nationality should never be the basis for salary scale differences. She knew her skills and competence matched those of her foreign colleagues. Consequently Carmen won her argument and received the pay increase she was demanding. There were other occasions when she proved her worth as a Filipino worker, and she eventually gained the respect of her colleagues. She worked well, and managed to continue in her role for six years.

## Making it back

Upon her daughter's request, Carmen made the decision to return to the Philippines. When asked what she wanted for her graduation gift, her ten-year-old daughter answered that she wanted her mother back. That request was enough for Carmen to return home.

By the time Carmen left Riyadh, she was making \$3,000 per month. Had it not been for her daughter's request, she would not have left the KSA because of her high earnings. She wanted to save as much as possible in order to buy more properties in the Philippines.

It took quite some time for her to reintegrate and adjust to the laid back environment of the Philippines. For one year, she did not find a job. Eventually, while doing volunteer work, she was asked to help manage a Catholic school for priests near her town. She agreed, and so her volunteer work eventually became a paid job. She was given a position as an administrator, while her husband took a job as a clinical nurse instructor at a nearby university.

Like her husband, she realized she wanted to teach in a university. She started a master's degree and then applied as a part-time instructor at the College of Nursing in a public University). Her salary was not comparable to the salary she received in the KSA, but she found a sense of fulfillment in sharing the knowledge and skills she had learned abroad.

## Lessons learned and insights

One of the things that Carmen learned from her experience in the KSA was how to assert herself. She learned to stand up for what she thought was right, believing that no one should look down on Filipinos.

Carmen believes that it is good for young nurses to look for opportunities abroad, as it helps widen your world view and understanding of life. Given the work opportunities for nurses abroad, one should continuously look for outside prospects while in the Philippines to further one's career and goals.

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## CASE STUDY 4

# The Adaptation Nurse

### Pre-migration

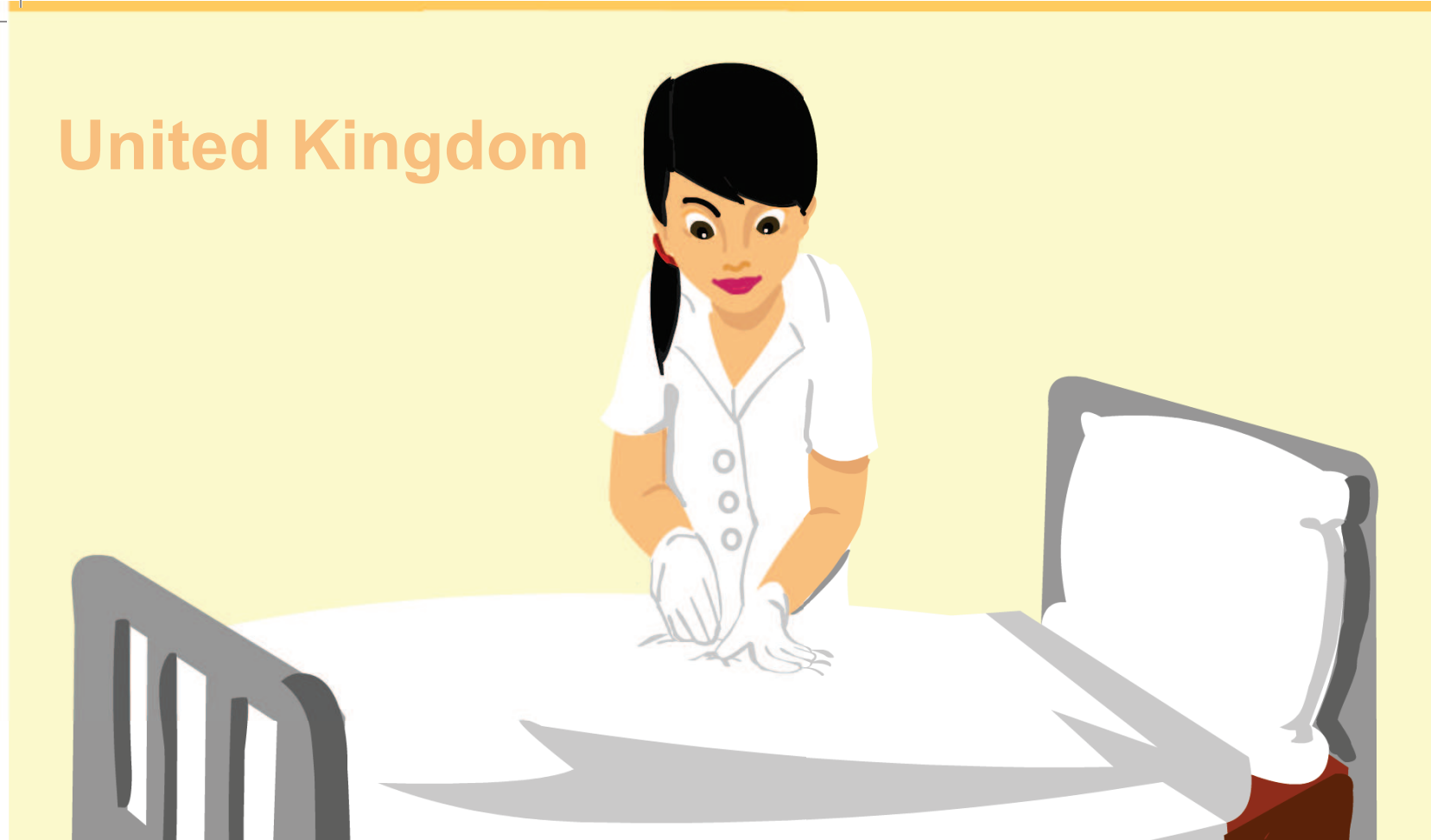
Christine is a single professional, who graduated from a public university in the Philippines in 2007. As she was full of aspirations, she quickly developed her craft and within two years she was employed as a medical ward nurse in a government hospital. Christine loves working at the bedside, but she found her workload at the hospital a burden. She recalled experiencing long-term exhaustion due to the high nurse-patient ratio. The deficiency in resources, like the lack of some basic supplies for patients, further reduced her efficiency at work, and she felt under-compensated. Feeling unrewarded and unfulfilled, she felt that there must be a better way to be properly compensated for her work. These feelings resulted in her forwarding an application to a recruitment agency in the hope of getting work abroad, particularly in the United Kingdom.

In November of 2011, Christine received news from a Philippine-based recruitment agency that there were vacancies for entry-level nurses in the United Kingdom. This agency had a counterpart recruitment agency in London, which facilitated screening and visa processing. Christine and her best friend submitted the necessary requirements, underwent screening as well as interviews, and passed. The application process was not too costly for them, as they only spent money for medical certificate requirements. During their orientation, the agency explained their work conditions, including their salaries and benefits. Within a short period of time, they received their certificates of sponsorship and in May 2012, they received their UK Nursing and Midwifery Council registration. They started packing and within weeks left their country with much excitement.

## Philippines



# United Kingdom



## Migration

Christine’s goals were to have a change of environment, to grow in her profession, and to improve her competencies as a nurse. She went away hoping that all of these would be fulfilled, and perhaps more, because she wanted to explore the world and enjoy what life had to offer.

Her transfer to the United Kingdom workplace was properly facilitated. They were given accommodations sponsored by the hospital for their first few weeks. They were likewise given meal stubs to access discounted meals and night-staff meals. They were also received well by the Filipino community, whose members became their first line of support. Going to church was also easy, as it was just near the hospital.

## The break of mindset

Upon arriving in north-west London, she, her friend, and the other hired Filipino nurses were initially categorized as “adaptation nurses”. Prior to this, they were required to take four months of preliminary training before being allowed to practice, for which they received compensation. Midway through the training, Christine realized that the position she had accepted would provide very little competency enhancement. She realized that UK nurses were trained differently from Filipino nurses. The framework for practice was different and less challenging compared to what she was used to back home. For example, during her bachelor’s preparation, they were trained to develop critical-thinking and decision-making in patient care. She was surprised that in United Kingdom, during their clinical practicum, their mentors highlighted the use of “reflective practice” as a methodology for providing care for patients. Because of the difference in the framework for practice, she became frustrated in her chosen career path, and felt that her gained knowledge and skills would not be maximized after all.

The four months of training prior to becoming full-pledged adaptation nurses comprised of ten study days with a professor, culture orientation sessions, and actual clinical duties in wards. These wards would be the areas of their future assignments as adaptation nurses. Christine had a senior nurse as a supervisor and was also assigned in a medical ward. While she served as a nurse trainee, she was also tasked to serve as a “health-care assistant”. As a health-care assistant she was asked to do functional activities. As trainees, they were given tasks such as taking vital signs, changing linen, and bathing patients. She reflected that nursing was a very routine and service-oriented task in the United Kingdom, a position she felt she was not trained for. In spite of this frustration, she continued to work as a nurse in the United Kingdom.

After her adaptation training, Christine was assigned to a 140-bed hospital with five wards. This is the hospital where she is currently practicing. She is assigned to a day-surgery ward where she encounters patients for diagnostic procedures and minor operations. She noticed that surgical practice in the United Kingdom is excellent, due to the use of minimal invasive procedures that result in patients experiencing faster recoveries.

As a young and extroverted person, she did not find it hard to mingle with people from other countries. The majority of her co-staff are Filipinos, but there are also nurses from Sri Lanka, India, and Africa. One of her challenges, despite speaking good American English, was to understand British English. What was even more challenging was the British accent adopted by different nationalities. Such language barriers can cause misunderstandings between her colleagues and clients alike. She somehow learned to manage these difficulties better and has begun to adapt to these challenges. In addition to this, she finds British nationals, particularly her workmates, to be generally frank and upfront. As a Filipino, she is not used to conversations that are too straightforward. But she continues to learn to respond to these exchanges professionally.

Despite her general impression of British nationals, Christine’s patients are usually pleasant. She found them to be conservative, very polite and generous with their compliments. This courtesy was quite unusual for her in the beginning, but she has become used to it in the course of her stay.

Despite some frustration, what Christine appreciates the most is the fact she is living in the United Kingdom. Receiving a salary six times more than what she would earn in the Philippines, she has the entire world to see and enjoy. She is not the breadwinner of her family, which allows her to enjoy her earnings more. She still sends her family a portion of her salary, but she is not obliged to fully support them. What she enjoys best in the United Kingdom are the clean surroundings, good transportation, security, and easy access to beautiful places.

## Her biggest challenge so far

Recently, Christine faced the biggest challenge in her profession yet. She was asked to temporarily fill in due to the lack of staff in a geriatric ward. Not fully oriented with the area, she worked based on the instructions given to her by the head nurse. Unfortunately, one of her patients deteriorated and experienced a cardiac arrest. Christine immediately wheeled in the emergency cart as instructed, but despite their efforts the patient died.

During the debriefing her head nurse, whom they call the “matron”, asked her why she did not press the emergency button instead. This became an issue because it was not the instruction she heard and she was not fully oriented to the set-up of the ward/unit. She was eventually called in for a disciplinary hearing, which resulted in a six-week suspension.

She felt helpless, and it dawned on her that since she was only on a work permit, it would be easy for her contract to be terminated. Fortunately, she was a member of the employees' union. The union represented her and helped her explain her side of the story. After several meetings, the internal audit of the hospital claimed that it was due to the insufficient orientation to the ward and its procedures and language barrier that caused the situation. A settlement was agreed, and she was given back her permit to work. She was cleared, and learned from the experience as much as the hospital did.

## Lessons learned and insights

Christine hopes to further her career in the United Kingdom. She plans to finish her three-year contract, and then move to another workplace or country. In terms of career development, she feels that her current work demand is easy and less challenging, so she hopes to go to a place where she can further hone her craft, such as the United States. As a young professional, she also wants to continue seeing the world.

After her adventures, she plans to return home. She would return once her dreams have come to pass and has saved enough money for investment and to purchase other material things. When she returns to the Philippines, she would retire from nursing and eventually pursue something else.

Thus far, having been away for 13 months from her home country, she has gained enough insights regarding work and living disparities between the Philippines and a first-world country like the United Kingdom.

She argues that recruitment agencies should be more transparent as to the actual remuneration nurses will receive, less other costs such as management fees. Upon reaching the United Kingdom, she learned of other deductions that were not included in the orientation before leaving the Philippines. Currently she only receives 70 per cent of her salary because of such deductions. She also proposes for the POEA to give more attention to appropriate matching of competencies of Filipino nurses to available vacancies in the United Kingdom. She believes that the bridging programme for adaptation nurses is inappropriate because the baccalaureate degree has given her enough knowledge and skills to be at par with the competencies of foreign nurses. The culture orientation, however, was useful in order for Filipinos to adapt in the United Kingdom. Lastly, she strongly discourages those Filipinos using a student visa to enter the United Kingdom. These nurses would only be allowed to work 20 hours per week, which makes earning very difficult considering the high cost of living in the United Kingdom.

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## CASE STUDY 5

# The Young Nurse

### Pre-migration

Alvyn is a young nurse from a university hospital in the Philippines who recently accepted a post as a pediatric ICU (PICU) nurse in London. He is currently waiting for his visa, and in the meantime is doing some freelance work and is finishing his remaining requirements in his graduate studies.

Alvyn graduated at the top of his class in April 2008. He finished his Bachelor of Science degree in nursing at a top state university in the Philippines. Upon graduation, he was immediately offered a job in the same university as a research assistant. Within months he was given a formal post as university research assistant, for which he received Php 13,000 per month. He received his nurse license in September 2008, then immediately applied for a staff nurse position at the hospital of the same university he graduated from.





On 2 March 2009, Alvyn took on the entry level post at the pediatric ICU. He was immediately promoted to a level II nurse (staff nurse) in December of the same year, and his monthly salary increased to Php 18,000 after a year or two, with a net income of about Php 14,000 per month. By the time he resigned in 2013, his basic monthly salary was Php 25,000, following the modified salary stand-ardization that the government implemented.

Alvyn's salary was sufficient for his needs. However, he needed to work doubly hard when his father lost their family business and the burden of becoming a breadwinner fell to him. So he sought other means to earn money, like being a freelance research assistant for doctors, or for other health professionals needing his services.

### Looking back at his four years of professional experience

The PICU where he was assigned was an 11-bed unit that caters to critically-ill pediatric patients. As a specialty level unit, nurses like him are expected to be knowledgeable and skillful, with a high degree of accountability to patient welfare.

Despite his scholastic achievements, it took a while for Alvyn to adjust to his first experience as a bed-side nurse. He says that it wasn't until 2010 that he was able to fully integrate himself into his workplace. He has always been a person devoted to his profession, with passion for detail and excellence. It became a long period of adjustment, but slowly his dedication won over the respect of his colleagues.

While working, Alvyn applied to study his master's degree in nursing at the public university in the Philippines. As he enjoyed studying while working, he did well, and at the time of his resignation from the hospital, he had already begun preparing for his thesis.

### Meeting his family's needs

Prior to his resignation Alvyn's earnings were sufficient to meet his family's requirements. However, his mother was diagnosed to have chronic kidney disease and needed to

undergo dialysis twice a week. A dialysis procedure costs a minimum of Php 6,000 in the Philippines, which meant he needed to spend Php 12,000 per week just to pay for her treatment. Despite the increase in his salary and his freelance earnings, Alvyn's resources began to deplete. His father did not have a job, and his only other support was the Philippine Health Insurance, which is a part of his privilege being a government employee. These limitations made him realize he needed to act fast and look for other means to increase his salary.

### His quest for a job abroad

Alvyn had an early foresight of what he wanted to do in his career. He was content with life in the Philippines, and happy he was able to take his master's degree under a scholarship. Before his family crisis, he felt that he would only leave the country to experience a different health-care system, or if with a good promise to improve his career-- and only if the application fees were low. He was curious about going to the United States, Australia or the United Kingdom, but this was not his priority. For him, working at home was still a better option. But even if he did work abroad, he would only do so for a while, and then return to the Philippines.

Due to his mother's illness, in September 2012 his plans of going abroad became a priority. It was timely that an agency connected to the United Kingdom announced an opening for neonatal ICU and pediatric ICU nurses. By October he had sent his application, and by December he underwent the interview. Chief nurses and officers from the hospital where he was applying to work went to the Philippines to do the interview. He was immediately accepted, and the processing of his papers began. He spent little on his application, as the employer covered most of the expenses.

He was informed that upon his arrival in the United Kingdom, Alvyn would partake in the Overseas Nurses Programme, overseen by a university in England. This programme would assess his competencies, and should he meet the minimum standards, he shall be given license to work in the United Kingdom.

With his breadth of experience and units gained in the graduate studies, Alvyn shall enter his work as an experienced nurse, and not at entry level, which means that his job description would not be routine and mechanical. At the time this report was being written, he was still waiting for his working visa to be sent, and is set to leave tentatively in August 2013. Meanwhile, Alvyn works part time as a research assistant to several physicians who are doing their postgraduate work. This work so far is sufficient to augment the costs of his mother's medical needs.



## His hopes remain

Alvyn is excited and is looking forward to working abroad. He shall be placed in a specialist neurology hospital in the outskirts of London. Alvyn shall be assigned in the neonatal and pediatric ICU area, where he learned that nurses would be the main staff and the physicians would just be the umbrella profession. This meant that his job would be very similar, if not better, than what he practiced in the Philippines.

If he could, Alvyn would still have chosen to stay in his home country. Even before leaving, he already had plans of when he would return. He sees himself staying in a foreign country between ten and 20 years, where he would save and improve his skills, and foresees taking his doctorate in Oxford while working.

He also has plans of getting married someday, and is open for his plans to shift, with family being his priority. For the long term, he would want to contribute to the betterment of nursing practice in the Philippines. This is the reason why, no matter how difficult, he would still come back to serve again.

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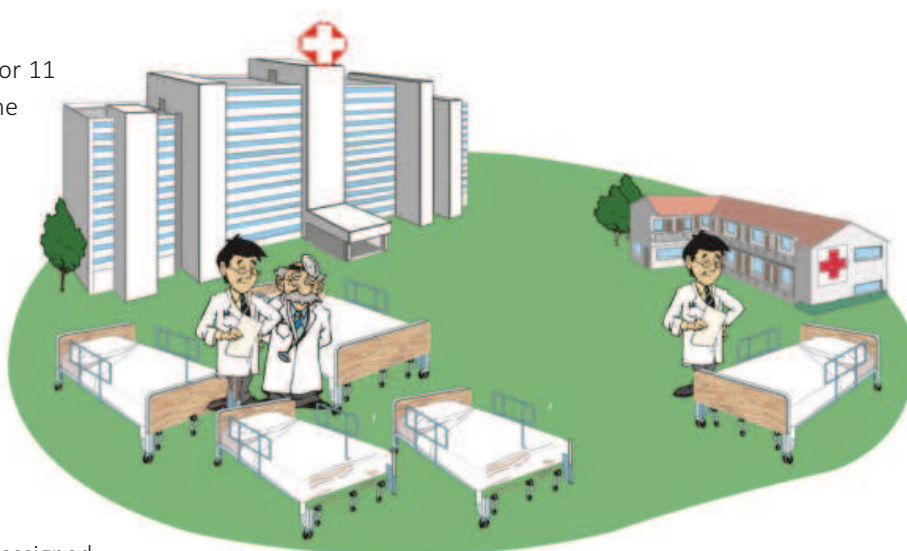


## CASE STUDY 6

# The Operating Room Nurse

### Pre-migration

Joy is a nurse who worked in the Philippines for 11 years before opting to work in Ireland. In the Philippines, her first work experience was in a private tertiary hospital. After two years, she opted to transfer to a government hospital to explore better opportunities. The hospital she transferred to had 1,500 beds, and was the biggest tertiary referral centre in the Philippines.



### Work and life balance

Upon transfer to government service, Joy was assigned to work in a female tertiary hospital with a 50 to 60-bed capacity.

Her work was heavy, owing to the usual nurse-patient ratio of 1:17-18 per eight-hour shift. The work was difficult, so after two years she requested to be transferred to the operating room (OR).

She loved working in the OR, and did so for nine years. Her job was more “technical”, owing to a lesser degree of patient interaction, but she experienced closer collaboration with physicians. For her, the remuneration she was receiving was commensurate to the workload given to staff nurses in the OR. On occasions, they would be given additional means to earn when weekend surgical procedures took place.

As a single parent and the breadwinner for her family, Joy was not only supporting her child’s schooling, but also provided support to her two siblings and parents. Her family did have other sources of income, but Joy’s financial contribution was a big support for her family.

She would never have entertained the idea of working abroad, if not for her father’s illness. Her dad was found to need an angioplasty to remove a blockage in his heart. This invasive procedure costs approximately Php 100,000, excluding the other medical costs her father would need. She sought government support through the charity office, but was refused because she was employed.

Months after constant urging from her colleagues, and with her dire need to help alleviate her father’s condition, she decided to take preliminary steps for overseas work. She first took the exam for English literacy, which she passed. She considered several places, including the United States, but the review for the national licensure examination was expensive. After six months of looking for opportunities, a job opening in Ireland was announced.



Joy went through the usual process: one week after forwarding her formal application, she underwent an interview, and about six months later she received her visa to work abroad. As apprehensive as she was, she decided to go ahead, and left for a foreign land alone, leaving her daughter with her family.

Prior to leaving, Joy and her nursing colleagues were given orientation about Irish culture by the recruitment agency. This included Filipino-Irish culture differences, some anti-bullying policies that are enforced, and other guidelines that would be necessary to thrive in Ireland. In addition to this orientation, Joy and her colleagues were promised free accommodation in the first two weeks to facilitate better adjustment.

## Migration

Joy left for Ireland on 28 September 2007. She was directly hired by a hospital through an inter-agency collaboration that processed her work permit and housing. Along with some other Filipino nurses who migrated, she was put on a six-month probationary period prior to being given permanent working status.

## Contract inconsistencies

As soon as she arrived, she noticed how stark the weather was. It was winter, so the frigid climate was very different to the Philippines. She was also initially challenged by the news that she and her colleagues would only receive free accommodation for one week instead of the agency's promised two. They lobbied for an extension, but the only available house was far from the hospital. Since they did not have a sufficient salary at that time, they had to apply for a loan. The hospital did not know about the contract inconsistency made by the agency in the Philippines, so just provided assistance by facilitating their procurement for the loan.

This was not the only issue they encountered with their home agency, which had asked them to pay Php 25,000. But according to the Ireland agency counterpart, this fee was not required and was not part of the settlement. Consequently, she made sure that the Philippines-based agency be made accountable.



The first month for Joy proved very challenging. Language barriers and different food hindered her smooth transition to a foreign land. The only thing she liked initially was the smooth transportation system, which was distinct from the situation in the Philippines. Luckily for her, she had a cousin residing in Dublin who helped her for about six weeks, giving her financial assistance and emotional support that was much needed.

## New work environment

Joy is currently working in the biggest adult hospital in Ireland. The set-up is very similar to the hospital she used to work for in the Philippines. She is assigned to the cardiac OR unit, which is very satisfying for her.

The work and preparation of registered nurses are different in Ireland. She found that nurses in Ireland are not graduates of a baccalaureate degree programme, and that each procedure required specific training and accreditation in order for the nurse to perform. There are nurse practitioners who function at a higher level of skill and competency, but generalist nurses usually do more routine and functional activities. She felt more capable than some other nurses in her unit, but due to some differences, she knew she would struggle to improve her position. She felt that Irish nurses were promoted at a faster rate than foreigners like her.

Through the years Joy has learned to just go with the flow, no longer striving to achieve a higher position than what she has achieved. As long as she is earning well for her family, she's happy.

## Together with her daughter, at last

Within one year in Ireland she was able to send for her daughter, who was still in school at that time. She was initially shy, but eventually enjoyed the living environment in Ireland. Her daughter grew up to become a consistent achiever in school, with healthy social relationships among her foreign classmates. Currently her daughter is also an active volunteer in church, and has gained enough confidence to live with people from different cultures. She easily adapted to the new living conditions.

Because of the ease in which her daughter adjusted to Ireland, Joy now strongly considers staying until her daughter finishes college. She is hoping to receive citizenship status so she would only need to pay 40 per cent of her university tuition fee. She is now comfortable with where she is, as long as her daughter is happy and continues to grow into a fine woman.

## Lessons learned and insights

Joy left the Philippines hesitantly, but in the end did not regret her decision to move away and live a new life in Ireland. Meeting and living with people from other nations opened her mind and helped her to become more mature. She is happy where she is and does not consider returning home any time soon.

The Philippines will always be her home, but it will take time until her dreams for her daughter are achieved. For her, nothing compares to the comfort of living among her own citizens and sharing her life with the people she loves the most.

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## CASE STUDY 7

# The Anesthesiologists

### Pre-migration

Hans and Concepcion are married with two daughters aged 11 and five. They were both graduates of a top medical university in the Philippines in 1999, and after further effort and training they eventually began practicing their specialization as anesthesiologists in a government tertiary hospital. This expertise meant that they were proficient to practice anesthesia and perioperative medicine.

They were already starting their career as anesthesiology consultants in the PGH when they were presented with a worthwhile opportunity. One of their colleagues, whose husband was an obstetrician in the US state of Michigan, had come across a website that sought a physician with the following qualifications: foreign graduate, female, Asian, anesthesiologist. Their friend encouraged them to apply. In addition to this, another colleague had gone to the one of the well-known universities in Washington as an anesthesia consultant, who also urged them to give it a try.

The couple eventually decided to proceed with their application. A part of their main consideration was the great learning opportunity they would have. As anesthesiologists in



a Philippines government tertiary hospital, they knew the procedure recommended in books, but needed to work around the limited resources of health institutions and their patients. This resulted in procedures that were not always ideal. They also felt they had an advantage over other Filipino doctors aspiring to work abroad. Usually, Filipinos who move to the United States are only offered resident positions, despite being consultants in the Philippines. But Hans and Concepcion were being offered consultant positions, equal to their position as anesthesiologists in their home country.

They underwent the usual screening imposed by the application, and as soon as they were accepted, they processed their papers with the POEA. They underwent pre-departure seminars and some similar overseas worker preparations, such as receiving immunizations, taking laboratory examinations and orientation tutorials.

Since they were working as consultants in anesthesiology at the same time they were clinical associate professors at the public university in the Philippines, they took a leave of absence from the hospital (which meant their university was borrowing them for one year). That year eventually became two years at the urging of the University in Washington. They filed for an extension of absence, which was immediately granted provided they promised to come back, and then left the Philippines in 2008.

### Migration

At the time of their transfer to the United States they felt everything was “new”. One of the big adjustments was to move their two young children and a helper. Their eldest was six, and their youngest was just six months.

It was summer when they arrived; they first stayed in a hotel for a week until they were able to find a place to rent. They were helped by the same friend who informed them about the application, another colleague’s friends who had been working as physicians for 20 years, and a cousin who was living about 90 minutes away. The living conditions to them were similar to the Philippines, because even if they were earning in dollars, they were also spending in dollars.

### “Acting assistant professors”: work conditions and challenges

Hans worked in the adult section while Concepcion held a job in the pediatric section. They were treated professionally and were expected to function as consultants, similar to their Caucasian colleagues. They were even labelled “acting assistant professors”, and were poised to act as such. They did their job as required, and they simply performed their work based on their knowledge and expertise. They never felt the pressure to prove themselves because both of them had good credentials.

As consultants at a Washington university they were required to fulfill work hours equal to 240 days in a year. This meant that even if they felt like time off due to stress or pressure, it wasn’t possible. For Hans it became hard to relax, and he began to develop some physical signs of stress such as gout, migraines and hyperacidity. He realized life as a consultant in the United States was different to the Philippines, where he could call in sick, but easily make up for absent schedules. But with his US work, if you needed to call in sick you needed to construct a catch-up plan in compliance with what was required in the contract.

Working in the United States meant putting strong emphasis on efficiency, and to do so one must strictly follow the book. For example, once the anesthesia was initiated, an anesthesiologist had to make sure their patients would

be made to sleep and recover in a specific number of minutes. A short delay would be a reflection of inefficiency, and would require some amount of investigation into the practitioner’s performance, or the patient delivery to the operating room, or the functioning of equipment. Hans recalls that sometimes, he felt like a machine, as the expectations were so high.

There were significant challenges, such as the time Hans needed to deal with a difficult surgeon, who was known in the hospital to be very strict when conducting surgery. At that time, Hans was also assisting two other patients, so there was a delay in attending to the surgeon’s patient. The surgeon confronted him and accused him of being inefficient. This made Hans want to quit his job, especially since it was already proving both physically and emotionally exhausting. He was greatly discouraged by what had happened, and even cried while driving on his way home.

Nonetheless, despite the difficulties the pay was good. Even their nanny was receiving a salary equivalent to a professional working in the Philippines. If there was one thing they felt made their choice to live abroad worthwhile, it was the salary they were receiving compared with that in the Philippines.

### The decision to come home

The programme was supposed to be for two years only, but their university in Washington asked them to stay longer. If they accepted, the university would have to sponsor them and process their visas for permanent residency. The offer seemed good, but it was not enough for them to take, and they eventually decided to return back to the Philippines.

One crucial factor for their decision to come home was their children. They wanted their kids to grow in a culture that they had grown up in. They observed that the values where the kids were being raised in the United States were not the same as they wanted for their kids. Another element that made it difficult to stay longer was the unplanned departure of their children’s nanny. With the demands at work, Hans immediately asked help from his parents in taking care of their children.

At the end of the contract, Hans and Concepcion brought to an end their wonderful, yet challenging time abroad, and returned to the Philippines in 2010.

### Making it back

#### *The first year*

Since their absence was by secondment, it was not difficult to process papers back in their home country. One major challenge, however, was to re-establish themselves as professionals. As anesthesiologists, their work was largely dependent on surgeons’ endorsements or through a partnership. It was hard to “reintroduce yourself into the system”, and for a year they did not have a sizeable income until they were able to “get their surgeons back”. They had to re-establish relationships by building new networks within their profession. Indeed, at one point they entertained the thought of taking a job offer in the Bahamas, but still they opted to wait.

The adjustment was not only difficult for themselves, but also for their children. First, the girls did not know how to speak Filipino, and relating with other children and teachers in school was challenging. Their nanny was also required to speak in English so that the kids could communicate better. Ironically, it helped that they did not have a constant roll of surgeons to assist, which gave them more time to help their kids adjust better.

## The benefits of coming home

When comparing their working conditions in the Philippines to those in the United States, they believe working in their home country is more comfortable. The pressure to earn for their family may persist while working here, but they still feel more of a sense of fulfillment. In the Philippines it is easier to talk to their patients, and there is a support system among colleagues and family members. These reasons alone were enough to prove they had made the right decision to return.

## Lessons learned and insights

Hans and his wife felt that they had been given a better opportunity than most of the other health expatriates who worked abroad, as their positions were more prestigious with better pay. One important piece of advice they offered potential workers going abroad with their family was the decision to bring a nanny. The nanny's pay needs to be similar with that of other workers in the foreign land, which entails much consideration in terms of facilitation of papers and financial budgeting. It put pressure on their budget and proved to be a challenge for them.

They also believe that Filipino workers should seek some financial advice upon their return home. Most of those who have worked abroad have saved a sizeable amount of money, and without proper advice on wise spending and investing, some lose their capital quickly. Financial advice would help them with reintegration and help find better ways to put their hard-earned money to good use in the Philippines.

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## CASE STUDY 8

# The Dentist Professor

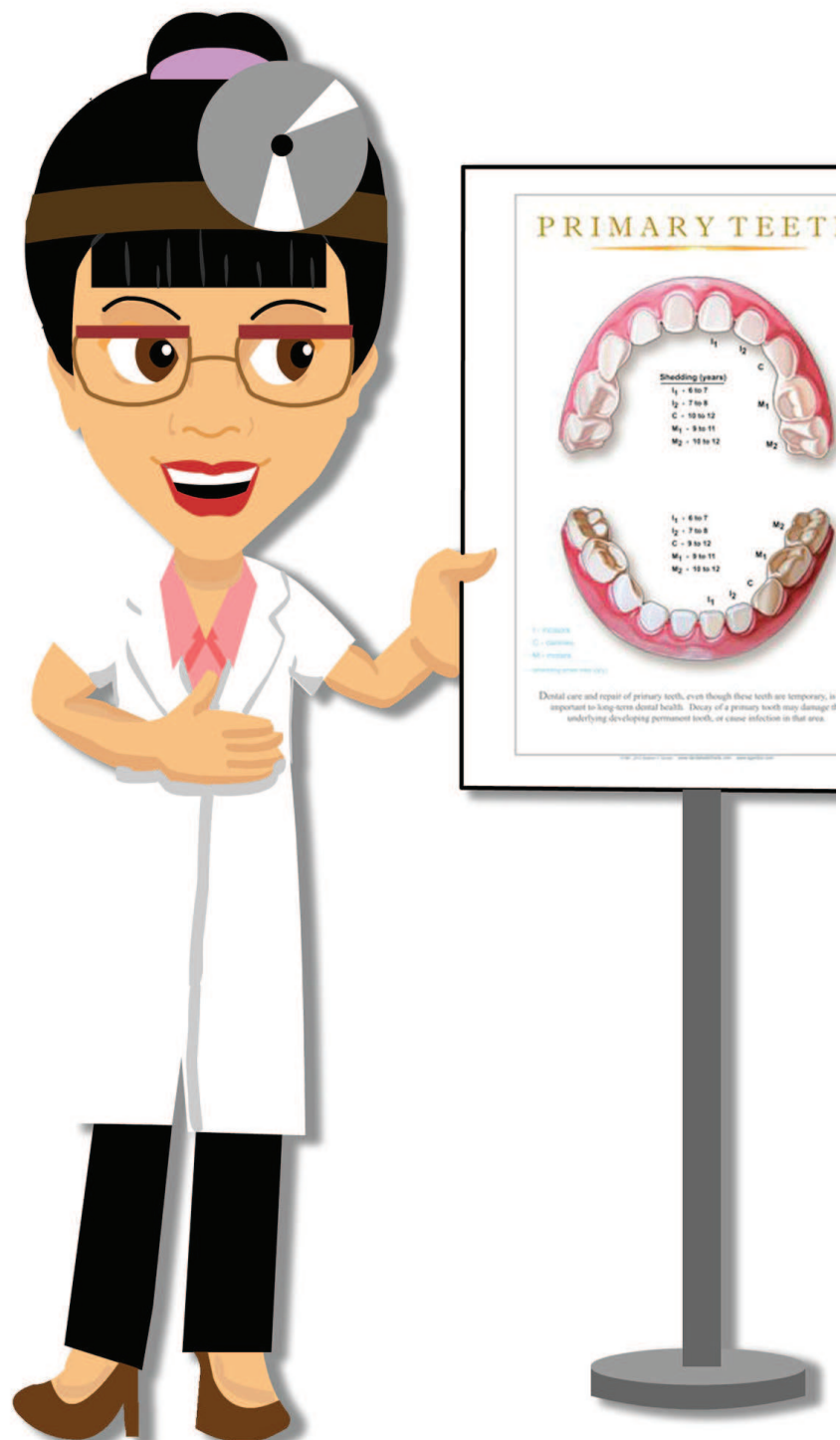
### Pre-migration

Liberty received a degree in Doctor of Dental Medicine (DDM) in 1983. The institute where she graduated from is the premiere state university in the Philippines, and is known for the excellent preparation of dentists. Despite a promising future, Liberty graduated at a time of political turmoil in the Philippines. The future looked bleak, and many people were looking to leave the country for a more stable life.

After graduation, Liberty was given an offer to work in another reputable university as an instructor. Her monthly remuneration was considered very low at that time, at just Php 2,000. She tried establishing her own clinic, but as a new graduate it was tough finding a constant flow of clients, and thus financially risky.

A senior colleague in the same university urged Liberty to try applying to the KSA as a dental assistant. Her colleague had worked as a professor there and related that her experience had been worthwhile. Her mother also had friends who had gone to the KSA, and they too gave good feedback. With her very low monthly salary and the unstable political situation in the Philippines, she became open to the possibility of moving abroad so she could earn better pay and have a brighter future.

She, her best friend, and two younger classmates applied to a university college of dentistry in the KSA via the POEA. They went through the usual process of interview, completion of paper requirements, and pre-departure orientation. The experience was fun because she was with friends, and they merely complied with what was



required of them. At the pre-departure orientation, they were informed of the different culture and work environment. Beyond these, they also inquired from other colleagues about their experiences. With sufficient information, they thought their adjustment would not be that difficult, and were poised to enjoy the new environment they would be going to.

## Migration

The transfer to the KSA in December of 1985 was not difficult for Liberty and her friends. The Filipino community that welcomed them was a big source of support, while two friends of her mother also proved helpful.

She and her colleagues were housed in a condominium, which accommodated two occupants per room. Since the university where they were going to work was government-owned, everything was well provided for. Their meals were free, and they were able to keep their salaries for themselves.

While in the KSA, one major concern was the outbreak of the Gulf War. However, it did not affect their living conditions and security was not much of a problem. In fact during their stay in the KSA, they even enjoyed attending parties and making new friends.



Although lower than a Saudi national, Liberty's salary was considerably bigger compared to what she had been earning in her home country-- even as a dental assistant.

As a dental assistant, her job entailed supporting dentists with instruments and equipment needed while a patient was being worked on. She knew that this was a form of deskilling, and was being paid less than what she had earned a degree for. Her salary was smaller than other co-workers who were not DDM graduates, but who had been working as dental assistants for longer. Her immediate boss was not even a graduate of DDM. But despite being underemployed, she accepted the challenge and chose to be flexible. With this attitude, Liberty garnered excellent remarks for her work.

She remembers there were other graduates in the Philippines who had made the same decision as herself. But being underemployed didn't matter as long as their salaries enabled them to build their own houses, put their children through school, and provide more comfortable lives for their families.

Liberty was very happy with her earnings and her performance, and considered her work easy. Yet while these were all sources of satisfaction, she admitted that her mind was not stimulated. She eventually became bored, submitted her resignation in November 1988, and decided to return home.

Before leaving, Liberty met her husband who was a Filipino engineer in the KSA. He followed her to the Philippines to get married, and then went back to Riyadh to continue working. In May 1989, Liberty went back to join her husband as a dependent. After having one child, she decided to apply for a job and was accepted as a dental assistant in a hospital in Riyadh in 1990. Everything was going well with their work and family life, and they had a second child in 1993.

In February 1994, however, tragedy struck: her husband was killed in a road accident. Liberty was devastated, and the following month she had no choice but to return home to the Philippines.

## Making it back

Her husband's employer helped facilitate her family's return papers. She arrived home with her children still very young, her eldest being three years of age and her youngest just one.

Still broken by her loss, she accepted the help of her family to adjust and resume her life in the Philippines. Her family welcomed her into their ancestral home, and took care of her and the children.

Fortunately, the adjustment back into workforce was smooth. The same colleague who had advised her for her application to the KSA invited her to teach at her alma mater. The rest of the faculty supported her, and allowed her to attend training that was necessary to improve her craft.

Liberty also set up her own dental clinic. Establishing this was a challenge because it took time for her to establish regular clients. But in recent years this has become more stable.

Comparing it to her work in the KSA, working back home is not as financially rewarding. She feels that her pay is not commensurate to the expertise she gives. She admits, however, that the professional satisfaction is worth it. For her, the greatest gain for working back in her own country is her opportunity to inspire her students, which she considers priceless. Liberty considers herself blessed. Despite the trials she has faced, she has reintegrated herself back into her home country favourably. Given the chance, however, she might still consider working abroad again.



## Lessons learned and insights

Liberty has had both good and bad experiences while working abroad and in the Philippines. While her support system was very helpful in reintegrating her back into her home country, it may not be the same for everyone. She believes that her government should do something to keep Filipinos home. She believes that Filipinos only return back home if they have earned a lot and have decided to retire. But for someone who needs to earn sufficiently, the prospect of working abroad-- even in a lesser position-- is an enticing option. For her, there needs to be strong policies and structural change to sustain a proper working environment in the Philippines.

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## CASE STUDY 9

# The Hard Working Medical Technologist

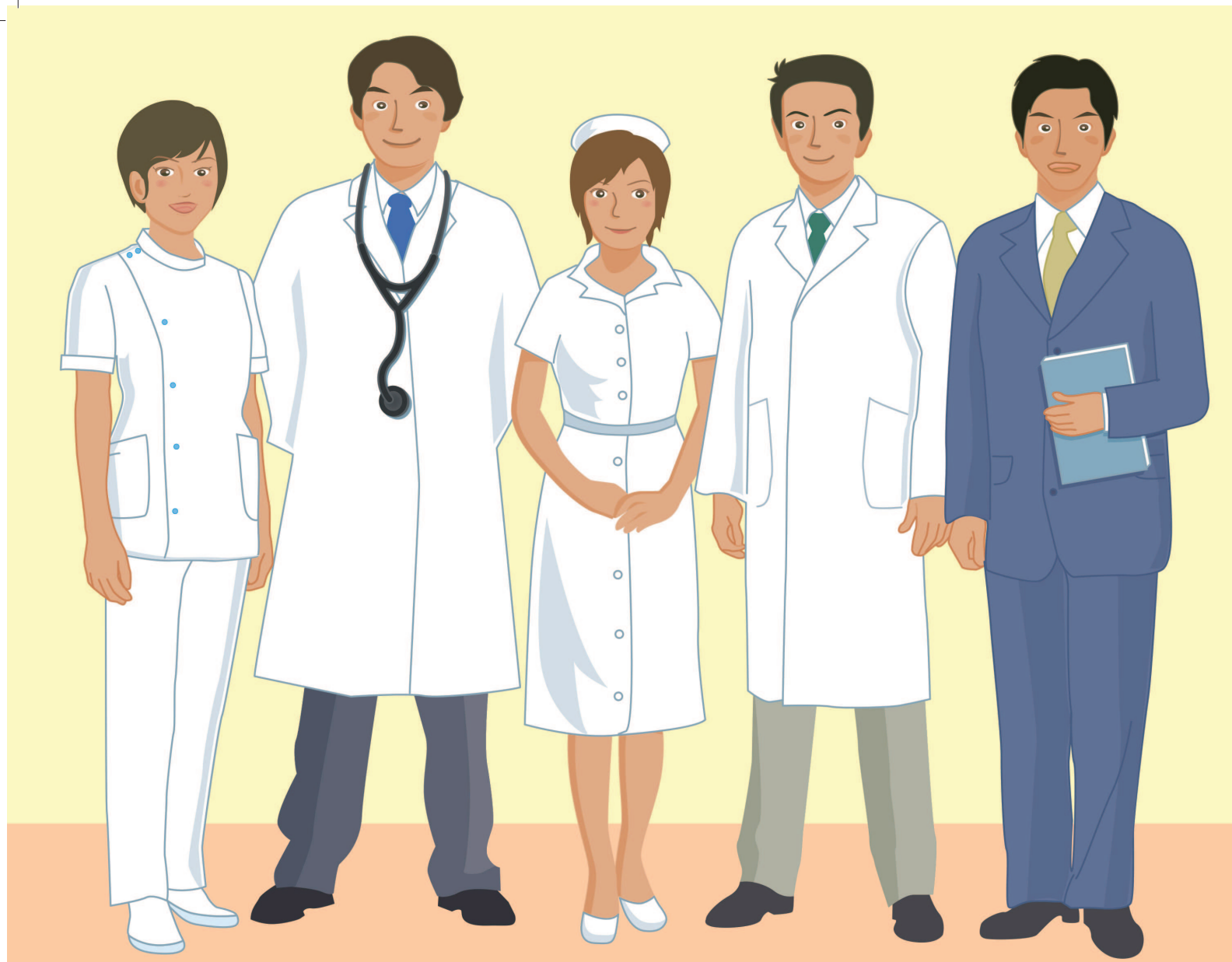
### Pre-migration

Jennifer is a medical technologist who graduated in 1991 from a known university in Dagupan. She belonged to a close-knit, middle class family, who was generally satisfied with the living conditions in the Philippines. For them, living close together was more important than leaving home for financial sustenance. Her father taught them the value of hard work and having a close family.

She did not have plans of going abroad, despite her low monthly pay of Php 2,000 from working in a maternity clinic. Then she met a Filipino radiology technician who was on vacation from the KSA, who encouraged her to try forwarding an application to the POEA. At that time, there were many negative stories in the media about Filipino workers being maltreated in the KSA, so she was wary of proceeding. However, her friend continued to encourage her, and explained that the job opening was in a government facility, and thus more secure. After much careful thought she decided to give it a try, and after five months, she submitted her application papers.

Knowing about her family's resistance, Jennifer initially concealed from them the processing of her application. She thought that since she was only considering the possibilities, it wouldn't harm them if they didn't know. Then, at the time of her application, a new job post was offered to her by her province's Medicare community team. Despite her on going KSA application, she accepted, because the position was better than her previous post and the remuneration was considered high in the facility.





Regardless of this promising opportunity, she continued to weigh her options. One major deciding factor was the incomparable financial benefits she would gain from working abroad, and the prospect of gaining a new experience. With much apprehension, she proceeded with her application to work abroad.

Despite her apprehensions, she passed the written examination and the subsequent screening procedures. After the interview, she was hired, and the processing of her employment papers moved swiftly. Within five months of her application, her papers were processed.

Knowing her departure was imminent, she informed her family about her new job in the KSA, which they respected and supported. At the time of her departure, she felt the reality of her decision. Questions flooded her mind, but the only way to answer them was to proceed with her new plans, and on 25 May 1997, she landed in the KSA.

## Migration

Upon her arrival, Jennifer and some other Filipinos were placed in a room to wait for the service vehicle that would take them to their place of assignment. While waiting, she and her companions were informed that their passports would be kept by their employer. This increased her anxiety and she continued to hope that she had made the right decision. When it was her turn, Jennifer was transported from Riyadh to Aflage, and then to a satellite health centre that was quite far from the city. Upon arrival she was welcomed by her co-workers, who were from India, Bangladesh, Syria, and Egypt.

Similar to most foreign professionals working in the KSA, Jennifer and her colleagues were given free housing as part of her benefits in a hostel on the third floor of the health facility. Two occupants stayed in each room, and the hostel had a common kitchen and two toilets. Jennifer lived with a Filipino nurse, who had already been working there for several years.

As she started working and adjusting to her new living environment, Jennifer faced the challenge of communicating and getting along with people of different nationalities. She realized that the pre-departure training offered by the POEA and orientation to the culture was not sufficient. There was more to it than just working, she thought. The mix of different cultures proved difficult for her, but she pushed herself to thrive. The orientation to the work environment also seemed inadequate because of the cultural challenges. In the following days, she received in-service training for her laboratory job from an Egyptian physician co-worker.

During work, she would often be left alone in the clinic as she was the only medical technologist in the facility. She felt this was good, because she would not need to mingle with her other colleagues. Time passed and she did her job as expected. But apart from the pay, she garnered little satisfaction from her job. As a single professional, the challenge of loneliness was predominant. She was earning well, but she simply aimed to finish her contract.

Every month they were given the opportunity to visit the city and market, where she could compare notes with other Filipinos who were working in different health facilities. Here she heard various stories of Filipinos who had experienced more difficulties than her. There were stories of harassment or ill-treatment, and varied and sometimes harmful ways of dealing with homesickness. In contrast she considered herself lucky that she worked under the Ministry of Health, where she felt safer and her benefits more secured.

Jennifer worked in such health facilities for a number of years. In 2002, she married a Filipino who was also working in the KSA. With a family on the way, she eventually decided not to renew her contract and return home.

## Making it back

Upon her return, Jennifer did not work for three months. She searched through various ads in the newspaper, and eventually landed a position at a big laboratory clinic in Manila.

The job description was more detailed compared to the responsibilities expected of her as a medical technologist in the KSA. The workload in the Philippines proved to be more difficult, due to the high number of patients being cared for daily. Comparing her experience in the KSA, work was more intense in the Philippines, but with less pay.

The disparity in remuneration did not discourage Jennifer, as she chose to work for the welfare of her family. Her efforts paid off because after two years of working back home, she was made employee of the year in her company. But the persistent absence of financial rewards pushed her to look for another job. Eventually, she was accepted into a private clinic, where she is currently working. Thus far, she has been employed there for eight years,



and was recently made the chief medical technologist. She is more satisfied in her current job, but is still hopeful for another opportunity to work abroad.

Though not regretful about returning home, life in the Philippines has become a challenge for her and her husband to sustain their family. She and her husband would much prefer not to raise their child in a different cultural environment such as that of the KSA. If only the salary of medical technologists was higher in the Philippines, she would not hesitate to stay home and flourish in the Philippines.

## Lessons learned and insights

For Jennifer, it was all about hard work. Her profession made it tough for her to earn the same amount of money she was earning in the KSA, but in the Philippines she manages to survive because of sheer hard work and determination. The joy of being with her family makes the sacrifice of working doubly hard in her home country worthwhile.

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## CASE STUDY 10

# The Persistent Medical Technologist

### Pre-migration

Marla graduated in 1974 as a medical technologist. She is an alumna of a private university in Manila. At that time, going abroad to work was very common as people were determined to earn a bigger salary. She began to work a few months before graduating. One of her professors in their school who owned a clinic encouraged her to work for herself, which she did, but it was difficult to earn a living. She worked for her professor for five years, earning less than Php 1,000 per month. This boosted her desire to work abroad like everyone else some day.

In 1978 she married and immediately gave birth to her first child, which made her living conditions more difficult. She and her husband could not even afford to rent an apartment, which then cost Php 1,000 per month. Their combined salary became insufficient to sustain the needs of their family.





She and her friends decided to apply for employment through an agency in Makati. An opportunity arose after an opening for a medical technologist in Libya was announced. She took the written exam, underwent an interview, and subsequently passed the screening procedures. After getting accepted, she had a medical examination and within months left with the promise of a better future for her family.



## Migration

Marla left in February 1981, leaving her husband and daughter behind. She was accepted into a small government hospital as a medical technologist. Adjustments were not difficult, as there were other Filipinos with her, and they served as her preliminary support. The load of work was very similar with that of the Philippines, but her pay was about five times bigger. When she arrived, she was given one month's allowance and lodgings (a "flat") were provided for free. Despite several prejudices about working in Libya, she was surprised to find her co-workers were very nice and accommodating. Perhaps one major adjustment was working with different nationalities, but even that was not a sufficient hindrance to make her feel intimidated, and her first few months at work were free of conflict.

In December of the same year, her husband followed her to Libya to work as a craftsman. Their daughter was left to be cared for by her parents while she and her husband laboured to earn better money in

a foreign land. They managed to get a flat of their own, where eventually they had two more children. Sadly, her third child died due to complications at birth. With all the hardships they had to face in Libya, they were at least fortunate not to be charged for any of the medical services they used.

Traumatized by what she recalls as "probable negligence" over the death of her baby, Marla vowed not to let her children grow up in a foreign land. They had three more children, with all of them born in the Philippines. She also made sure her children would grow up in the Philippines by sending them home as soon as they turned five, believing this would be enough time to teach them proper values. After this period, she would send them back to the Philippines to her parents.

Marla worked in Libya for 17 years. Her job was not difficult; she flourished in her position and received salary raises over the years. Her husband also excelled at work and became recognized as one of the best employees in his company. Despite this success, they both longed to be with their children. In 1998 Marla completed her contract, and decided it was time to return home for good.



## Making it back

Marla and her husband were able to buy a house and lot of their own in the Philippines, and were able to meet their financial needs. She knew that she was able to achieve her aspirations, and was even more proud that she did not need to lower her standards to do so. She practiced her profession diligently, and gained a lot from her experience.

Soon after she had returned, her husband also came home owing to the political crisis in Libya. But several years after, being a respected worker, he was offered a new contract and went back to Libya to continue working.

As soon as Marla returned, it became clear that she was no longer used to the laid-back lifestyle in her home country, and was not comfortable staying at home and doing nothing. To cope with her boredom, she began to attend varying lifestyle seminars.

It was only in 2007 when she took the step of taking another job as a medical technologist. This was in response to the increasing financial challenges of her children's education. She earned Php 10,000 a month, which was way below what she used to earn. Luckily, her husband could still support them with his earnings in Libya. She eventually became frustrated and desired to get another job, which eventually happened. In one of the seminars she attended, a classmate who happened to be the owner of a clinic offered her a job as a medical technologist. She took the position after several months and has now worked there for 4 years.

## Lessons learned and insights

Given another chance, Marla would still work abroad to earn a good living. Yet for her, choosing to come home was a better alternative because being with her children was priceless. She just hopes that someday, the government would find means to give its health workers better wages, so that they would not need to leave the Philippines. She believes that if possible, Filipinos would opt to be with their family, as this is a value innate in their culture.

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