

# How Nurse Migration is Negatively Affecting Source Countries

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## INTRODUCTION

Nurse migration occurs when a foreign nurse travels to a better developed country “for professional growth, financial benefits, and educational advancement” (Sands et al., 2020, p. 2).

“Nurse migration has become a topic of interest for countries attempting to recruit nurses, the institutions which hope to recruit them, and for the countries losing their workforce” (Moyce et al., 2016, p. 181).

Source countries such as Lithuania, Philippines and South Africa are primary regions that developed countries recruit nurses from due to a worldwide nursing shortage (Bareikis et al., 2018, p. 1126).

“International migration of human resources for health affects individuals themselves and has an impact on both the source and destination countries’ health systems by affecting service provision, health policies, workforce planning, training and education, and the social and economic development of these countries” (Davda et al., 2018, p. 2).

## SIGNIFICANCE

- “The World Health Organization (WHO) estimates that there is presently a shortage of 9 million nurses worldwide” (Trines, 2018, para. 16).
- “In 2000, 5% to 8% of the United States, 10% of the United Kingdom, and 6% of the Canadian nurse workforce was foreign educated” (Moyce et al., 2016, p. 181).
- “472 nurses from Lithuania were registered for work in other countries, comprising 2% of the domestic workforce respectively” (Bareikis et al., 2018, p. 1127).

## POSITION STATEMENT

The migration of nurses to destination countries has had a negative impact on source countries with respect to maintaining safe nurse-patient ratios.

## SUPPORT FOR POSITION

- “It is expected that there will be no nursing graduates to take the local board exam for the years 2020 - 2021. Hence, as the country continues to export nurses, there are now very few nurses left” (Cuevas et al., 2021, p. 6).
- “The accelerating outmigration of nurses and other health workers to high-income economies further erodes the health labor force in many [source] countries” (Trines, 2018).
- “Host countries need to integrate foreign educated nurses into their systems, while the countries of origin must deal with a depleting workforce, commonly referred to as “brain drain”” (Moyce et al., 2016, p. 181).
- Source countries are falling victim to non-sustainable healthcare due to the increasing age in available staff and lack of labor interest related to nurse migration” (Bareikis et al., 2018, p. 1126).
- “The wage disparities between source countries and destination countries are so large that small salary increases in source countries would not significantly reduce the medical brain drain” (Bareikis, 2018, p. 1127).
- “Health workforce shortages continue to be greatest in sub-Saharan African countries that together bear 24% of the world’s disease burden today but have only 3% of health workers and less than 1% of the world’s financial resources to respond to this burden” (Trines, 2018, para. 22).

## IMPLICATIONS FOR PRACTICE

“The Philippine government can partner with the Philippine Nurses Association as the Accredited Profession Organization to make a comprehensive orientation program for nurses who have sought overseas employment and migration” (Cuevas et al., 2021, p. 16).

Migrant nurses generally require more assistance and orientation in terms of communication, interprofessional skills, and technological competence by integrated nursing staff (Davda et al., 2018, p. 7).

The addition of migrant nurses increases the foreign integration of developed nursing practice and creates a more welcoming environment to patients of cultural diversity (Moyce et al., 2016, p. 186).

“[Nurse migration] has been linked to beneficial outcomes for both patients (e.g., lower patient mortality) and employees (e.g., lower occupational stress)” (Bareikis et al., 2018, p. 1127).

Fillipino Professional Nurses Deployed Overseas, 2000-2015



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(Ortiga, 2018).

## CONCLUSION

Nurse migration has led to negative impacts on the source countries they relocate from by decreasing overall staffing sizes which can result in an increased risk for unsafe and improper patient care.

Developing countries have taken multiple measures to decrease the volume of outmigration by their nursing staff by offering post-graduate education opportunities and widening ethical standards for practice.

To continue encouraging foreign-born healthcare professionals to advance their practice within their own region, government officials must adopt more equitable codes of nursing practice that allow for better working conditions and opportunities for growth (Moyce et al., 2016, p. 186).

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