



International career mobility and ethical nurse recruitment

Providing quality healthcare and achieving universal health coverage depends on a healthcare workforce with an adequate number of qualified, motivated, and well-supported nurses. It is important for nurses to be able to access career mobility in order to further their professional development, fulfil their personal career goals and make maximum use of their skills and qualifications in contributing to safe and effective care. Career mobility can include the movement of nurses (or in some cases student nurses) between different specialties and within and between organisations, sectors, regions and countries.

Flows of nurses between countries, often termed international migration, has been an ever-present feature of nursing labour markets, but in recent years has risen markedly in magnitude and in its policy challenges for health, education, immigration and regulation.¹ Factors underlying or enabling this growth include skills shortages, remuneration differentials, education and career opportunities, job and personal security, international trade agreements, mutual recognition agreements and improvements in transport and communications. ICN respects and supports the rights of nurses to pursue professional achievement and to better the circumstances in which they live and work. Migration of professionals offers potential beneficial outcomes including multicultural practice and enhanced learning opportunities.

The trend towards increased mobility has contributed to a global health labour market which is characterised by uneven levels of healthcare professionals between countries and regions leading to severe shortages of nurses and other health workers in many countries. Alarming mismatches between need, supply, and demand have been reported.² Upper-middle-income countries and the Western Pacific region are projected to have strong economic demand for healthcare workers which will create a heightened competition for available nursing human resources from low- and lower-income countries, who often cannot compete financially in order to retain these staff, and contribute to a continued increase in international mobility.² There are a range of 'push' and 'pull' factors that lead nurses to seek employment outside of their country of origin.³ Examples of push factors include low pay, pay discrimination, poorly funded health systems, and unfavourable working conditions including those that pose safety



concerns. Destination countries often have pull factors such as better salaries and conditions of employment and career development opportunities. Some high-income countries have come to regard inward international migration as a permanent solution to their nursing shortages.^{4,5}

Recruitment abuses during the processes of international recruitment have been reported. Recruitment agencies and employers may use unethical recruitment strategies that focus on large numbers of recruits or may contract a large number of newly graduated nurses from a given educational institute, significantly depleting the institution or health facility. Nurses may be recruited using false or misleading information about their terms and conditions of employment, remuneration and benefits. They may also be discriminated against in employment and in access to education and career opportunities. Internationally recruited nurses can also be at risk of exploitation or abuse because of challenges related to distance, language barriers and cost in verifying licensing and regulatory information and in the terms of employment.

Losing highly skilled nurses to actively recruiting high-income countries is compromising the capacity of some countries to achieve and sustain health systems improvements and provide universal access to quality healthcare.⁶ In addition, for countries that sustain long-term high levels of active international recruitment, there is a risk that this will delay local measures that would improve recruitment, retention and long-term human resources planning and would support workforce stability. The WHO Global Code of Practice on the International Recruitment of Health Personnel establishes and promotes voluntary principles and practices for the ethical international recruitment of health personnel and the strengthening of health systems, including effective health workforce planning, education and retention strategies.⁶ As highlighted in the Code, the goal for all countries should be to have a sustainable national nursing workforce which focuses on a stable core of domestically trained nurses whilst acknowledging and enabling the contribution of international nurses and other health professionals.

ICN Position & Recommendations

As the global voice of nursing, the International Council of Nurses (ICN):



- Calls for Governments and organisations to systematically adopt the following foundational principles, which consider the needs of multiple stakeholders, to guide informed decision-making resulting in regulated, ethical, and cost-effective recruitment processes, both domestically and internationally:
 - **Comprehensive and effective nursing regulation:** Legislation must authorise the regulatory body to determine nurses' standards of education, competencies and standards of practice, irrespective of where they have been trained and licensed. Regulatory bodies must ensure that only individuals meeting these standards are allowed to practice as a nurse.
 - **Access to full and flexible employment opportunities:** The provision of quality care relies on the availability of nurses to meet staffing demand. Nurses in a recruiting region/country and seeking employment should be made aware of job opportunities. If necessary, health stakeholders (especially government and employers) need to explore policies that would facilitate nurses' active participation in the workforce such as family-friendly environments and reinsertion programmes.
 - **Freedom of movement:** Nurses should have the right to migrate if they comply with the recruiting country's immigration/work policies (e.g. work permit) and meet obligations in their home country (e.g. bonding responsibilities, tax payment).
 - **Freedom from discrimination:** Nurses have the right to expect fair and equal treatment on employment related issues such as working conditions, promotion, and access to career development opportunities and continuing education.
 - **Good faith contracting:** Nurses and employers must be protected from false information, the withholding of relevant information, misleading claims and exploitation (i.e. there should be accurate job descriptions, full information on benefits/allocations/bonuses specified in writing and authenticated educational records). Access to factual employment-related information must be guaranteed, including social or daily life information (e.g. access to accommodation, compassionate leave, sick leave). The



concept of informed consent must be applied to all parties involved in employment contract negotiation.

- **Equal pay for work of equal value:** There should be no discrimination between occupations/professions with the same level of responsibility, educational qualification, work experience, skill requirement, and hardship (e.g. pay, grading). Similarly, there must be no discrimination between persons within the same profession with the same level of responsibility, educational qualification, experience, skill requirement, and hardship.
- **Access to grievance procedures:** When nurses' or employers' contracted or acquired rights or benefits are threatened or violated, suitable machinery must be in place to hear grievances in a timely manner and at reasonable cost
- **Safe work environment:** Nurses must be protected from occupational injury and health hazards, and from work related violence (e.g. physical and verbal abuse, sexual harassment) and made aware of existing workplace hazards. Effective prevention, monitoring, and reporting mechanisms must be in place. Protocols for withdrawal of services in situations of life-threatening danger to the nurse need to be established.
- **Effective orientation/mentoring/supervision:** The provision of quality care in the current highly complex and often stressful health care environment depends on a supportive supervisory infrastructure. Nurses have the right to expect proper orientation and on-going constructive supervision within the work environment.
- **Employment trial periods:** Employment contracts must specify a trial period when the signing parties are free to express dissatisfaction and cancel the contract with no penalty. In the case of international migration, the responsibility for covering the cost of repatriation needs to be clearly stated.
- **Freedom of association:** Nurses have the right to affiliate to and be represented by a professional association and/or union in order to safeguard their rights as health professionals and workers. Partnerships between the associations/unions in the recruiting and recruited countries



could facilitate the exchange of timely and accurate information. They would also ensure the continuation of a supportive professional environment providing needed assistance.

- **Regulation of recruitment:** Recruitment agencies (public and private) should be regulated and effective monitoring data be transparent and in the public domain (e.g. cost-effectiveness, volume, success rate over time, retention rates, equalities criteria, client satisfaction). Disciplinary measures must be introduced sanctioning agencies whose practice is unethical.
- National self-sustainability should be achieved through effective human resources planning, management and development strategies at the local, national, and international levels and which are regularly reviewed and maintained
- Denounces unethical recruitment practices that exploit nurses or mislead them into accepting job responsibilities and working conditions that are incompatible with their qualifications, skills and experience.
- Endorses the 'WHO Global Code of Practice on the International Recruitment of Health Personnel'; the 'Global Strategy on Human Resources for Health: Workforce 2030'; the policy recommendations and priority actions as set out in the report of the High-Level Commission on Health Employment and Economic Growth 'Working for health and growth: Investing in the health workforce'; and the UN Global Compact for Migration and works to align their relevant recommendations with the issue of international career mobility and ethical nurse recruitment.^{6,7,8,9}
- Supports the work of the newly established 'International platform on health worker mobility' to improve monitoring of flows of nurses and other health workers, and promote good practice in recruitment, integration and employment of mobile health professionals.¹
- Recognises the rights of individual nurses to migrate and believes that nurses in all countries have the right to migrate as a function of choice, regardless of their motivation.



- Condemns the recruitment of nurses from countries or areas within countries that are experiencing a chronic shortage of nurses and/or a temporary health crisis in which nurses are needed.¹⁰
- Acknowledges the adverse effects that international migration of nurses and other health professionals may have on healthcare quality in countries seriously depleted of their nursing workforce.
- Condemns the recruitment of nurses to countries where employing authorities have failed to implement sound human resource planning and have not adequately addressed issues of retention.
- Advocates for safeguards that protect nurses' interests and acquired rights and ensure decent work when career moves, transfers and international migration occur.
- Recognises the potential benefits of circular migration and calls for mechanisms to support nurses who wish to return to their home countries.
- Calls on governments and nursing regulatory and credentialing bodies to remove unnecessary barriers to migration whilst ensuring systems are in place to maintain safe, quality patient care and safeguard the public.

ICN encourages national nurses' associations (NNAs), in collaboration with their respective government, to:

- Disseminate information on the working conditions of nurses and migration issues in an effort to inform nurses and health sector stakeholders, including the public.
- Make public any information on abusive recruitment practices to the nursing workforce in their country and lobby for the elimination of these practices.
- Support and engage in research to document the impact of nurse immigration and emigration on quality of care provided; demand for nursing personnel; the level and quality of educational preparation, and on the mobile nurses themselves.
- Cooperate with decision-making bodies and governmental and non-governmental agencies to achieve appropriate human resources planning,



ethical recruitment strategies, and sound national policies on the immigration and emigration of nurses.

- Contribute to the development of effective national approaches to nursing workforce planning, based on standard, comprehensive, and systematically acquired data; evidence-based policy; and scenario projections that take account of international flows.
- Support research on the shortage, mal-distribution and mis-utilisation of nurses at the national and regional level; analyse data within the social, political and economic situations specific to their area; and, apply findings in human resources planning.
- Contribute to the development of a standard minimum dataset to track and compare different flows of nurses.
- Actively engage with employers to ensure that migrant nurses have conditions of employment as favourable as those of the nurses of the country, in posts requiring the same level of competence and involving the same duties and responsibilities.



References

- ¹ ILO, OECD, WHO. The international platform on health worker mobility: Elevating dialogue, knowledge, and international cooperation. [Internet]. Geneva: ILO, OECD, WHO; 2018 [cited 18 Oct 2018]. Available from: <http://www.who.int/hrh/migration/International-platform-HW-mobility.pdf?ua=1>
- ² Scheffler RM et al. Forecasting imbalances in the global health labor market and devising policy responses. Human Resources for Health [Internet]. 2018 Jan [cited 2018 Sep 13];16:5. Available from: doi.org/10.1186/s12960-017-0264-6
- ³ Dywili S, Bonner A, O'Brien L. Why do nurses migrate? – a review of recent literature. J Nurs Manag [Internet]. 2013 [cited 2018 Nov 21] 21(3), 511-20. Available from: [10.1111/j.1365-2834.2011.01318.x](https://doi.org/10.1111/j.1365-2834.2011.01318.x).
- ⁴ World Health Organization, International Council of Nurses, Royal College of Nurses. International nurse mobility: trends and policy implications. [Internet]. Geneva: World Health Organization; 2003 [cited 2018 Oct 18]. Available from: http://apps.who.int/iris/bitstream/handle/10665/68061/WHO_EIP_OSD_2003.3.pdf?sequence=1
- ⁵ Masselink LE, Jones, CB. Immigration policy and internationally educated nurses in the United States: A brief history. Nurs Outlook [Internet]. 2013 [cited 2018 Oct 18] 62(1), 39–45.
- ⁶ World Health Organization. WHO global code of practice on the international recruitment of health personnel. [Internet]. Geneva: World Health Organization; May 2018 [cited 2018 Sep 13]. Available from: http://www.who.int/hrh/migration/code/code_en.pdf?ua=1
- ⁷ World Health Organization. Global strategy on human resources for health: Workforce 2030. [Internet]. Geneva: World Health Organization; 2016 [cited 2018 Sep 13]. Available from: http://www.who.int/hrh/resources/pub_globstrathrh-2030/en/
- ⁸ World Health Organization. Working for health and growth: investing in the health workforce. [Internet]. Geneva: World Health Organization; 2016 [cited 2018 Sep 13]. Available from: <http://apps.who.int/iris/bitstream/handle/10665/250047/97892415?sequence=1>
- ⁹ United Nations. The Global Compact for safe, orderly, and regular migration. [Internet]. New York City: United Nations; 2017. Available from: https://refugeesmigrants.un.org/sites/default/files/180713_agreed_outcome_global_compact_for_migration.pdf
- ¹⁰ Alliance for Ethical International Recruitment Practices. Health care code for ethical international recruitment and employment practices. [Internet]. Philadelphia: CGFNS International; 2017 Sept [cited 2018 Oct 18]. Available from: http://www.cgfnsalliance.org/wp-content/uploads/2017/09/Health-Care-Code-for-EIREP-Sept-2017_FINAL.pdf