



# RECENT TRENDS IN INTERNATIONAL MIGRATION OF HEALTH WORKERS

Jean-Christophe Dumont  
Head of International Migration Division  
Directorate for Employment Labour and Social Affairs  
OECD



## Rapidly evolving context for international migration of doctors and nurses

---

- Increasing (highly-skilled) migration to the OECD
- Education policies: Large increase in medical student intakes and graduates in many countries in recent years
- Growing internationalisation of higher education notably for medical education
- EU membership: EU enlargements in 2004, 2007 and 2013, Brexit in 2021
- Adoption of Global Code on the International Recruitment of Health Personnel in May 2010
- Covid 19 pandemic



# Overview of OECD activities over the past decade to monitor health workforce migration

**2008**

**OECD *The Looming Crisis in Health Workforce***

calling for actions to increase training, retention, and productivity of health workers



**2015**

**OECD *International Migration Outlook***



**2016**

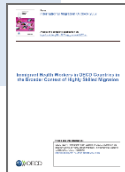
UN General Assembly adopts report from ***High-Level Commission on Health Employment and Economic Growth***

calling for expansion and transformation of health workforce to achieve Universal Health Coverage (SDG goal 3.8)

**2007**

**OECD *International Migration Outlook***

First broad overview of migration flows to support more informed policy dialogue



**2010**

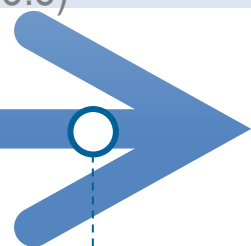
World Health Assembly adopts ***Global Code of Practice on the International Recruitment of Health Personnel***

**2017**

World Health Assembly adopts joint ***OECD-ILO-WHO Working for Health Programme (2017-2021)***

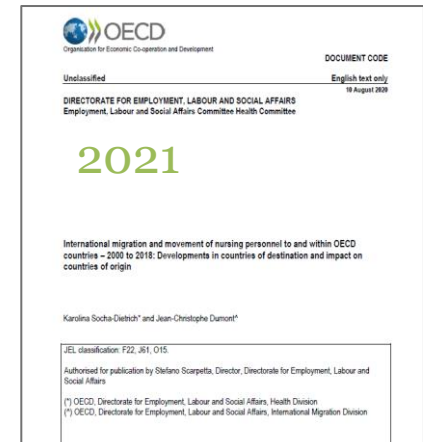
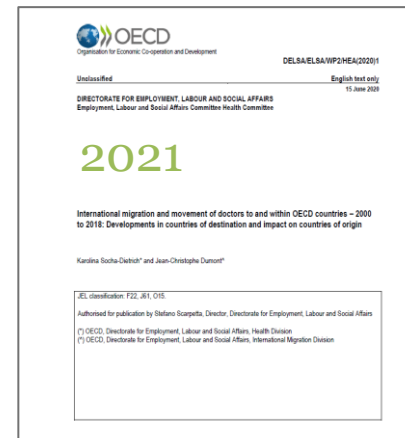
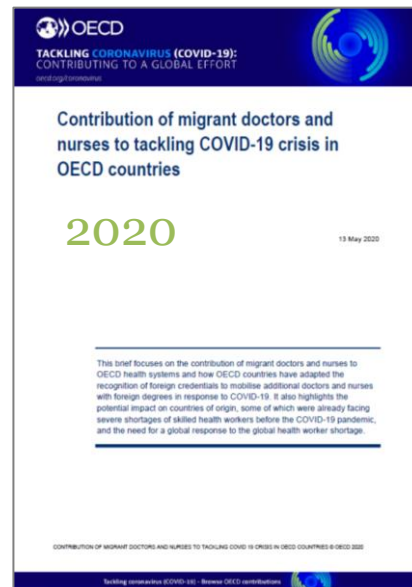
**2019-21**  
**New data sets**

New health and policy context





# Recent OECD publications on health workers migration



- <https://www.oecd.org/health/recent-trends-in-international-migration-of-doctors-nurses-and-medical-students-5571ef48-en.htm>

- <https://www.oecd.org/coronavirus/policy-responses/contribution-of-migrant-doctors-and-nurses-to-tackling-covid-19-crisis-in-oecd-countries-2f7bace2/>

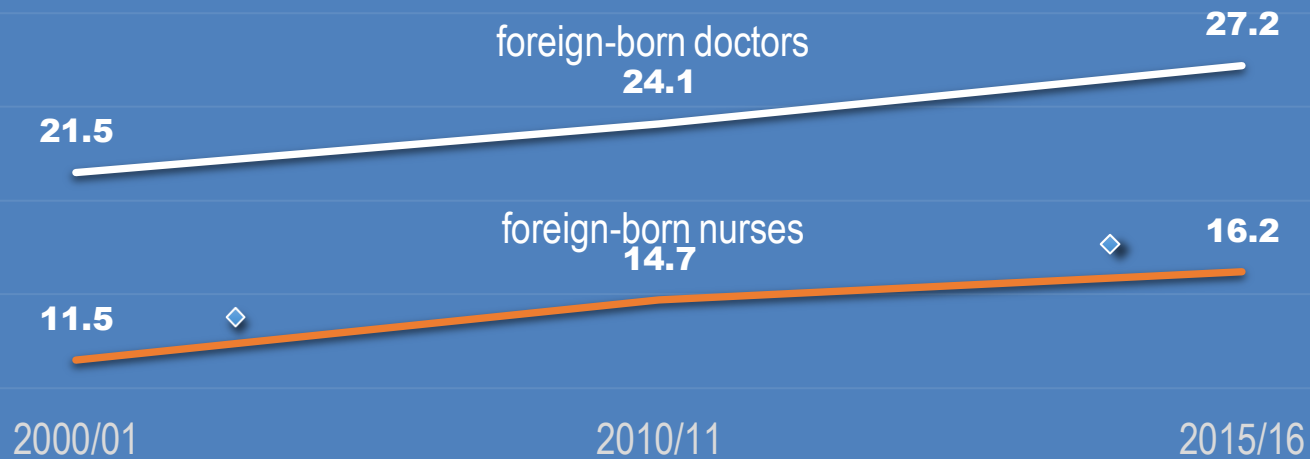


# KEY TRENDS FOR MEDICAL DOCTORS AND NURSES



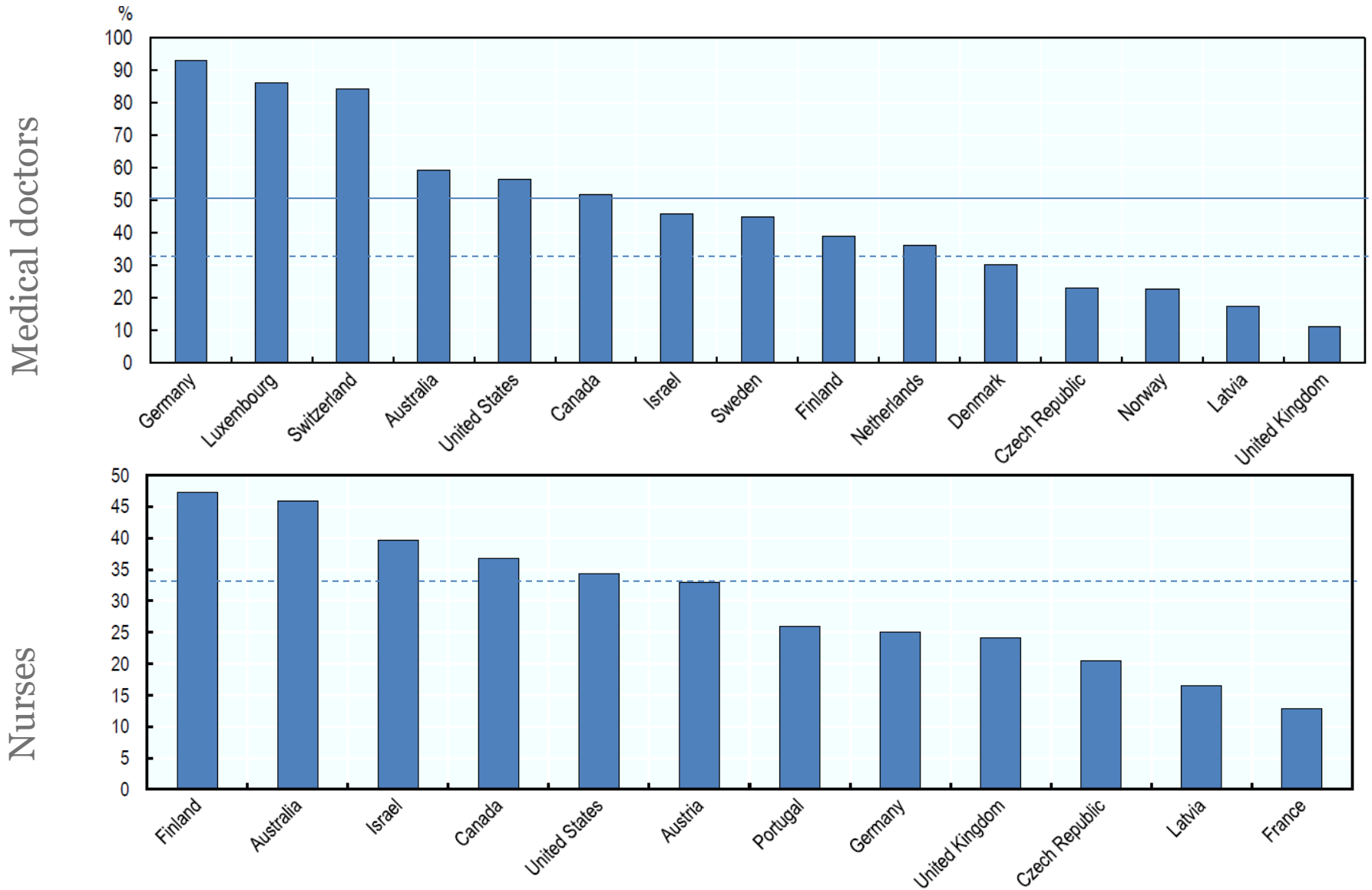
# An increasing share of migrant health workers in the OECD

## OECD average share of migrant doctors & nurses – 2000 - 2018





# Share of growth in practising doctors and nurses attributed to migration, 2011-2016



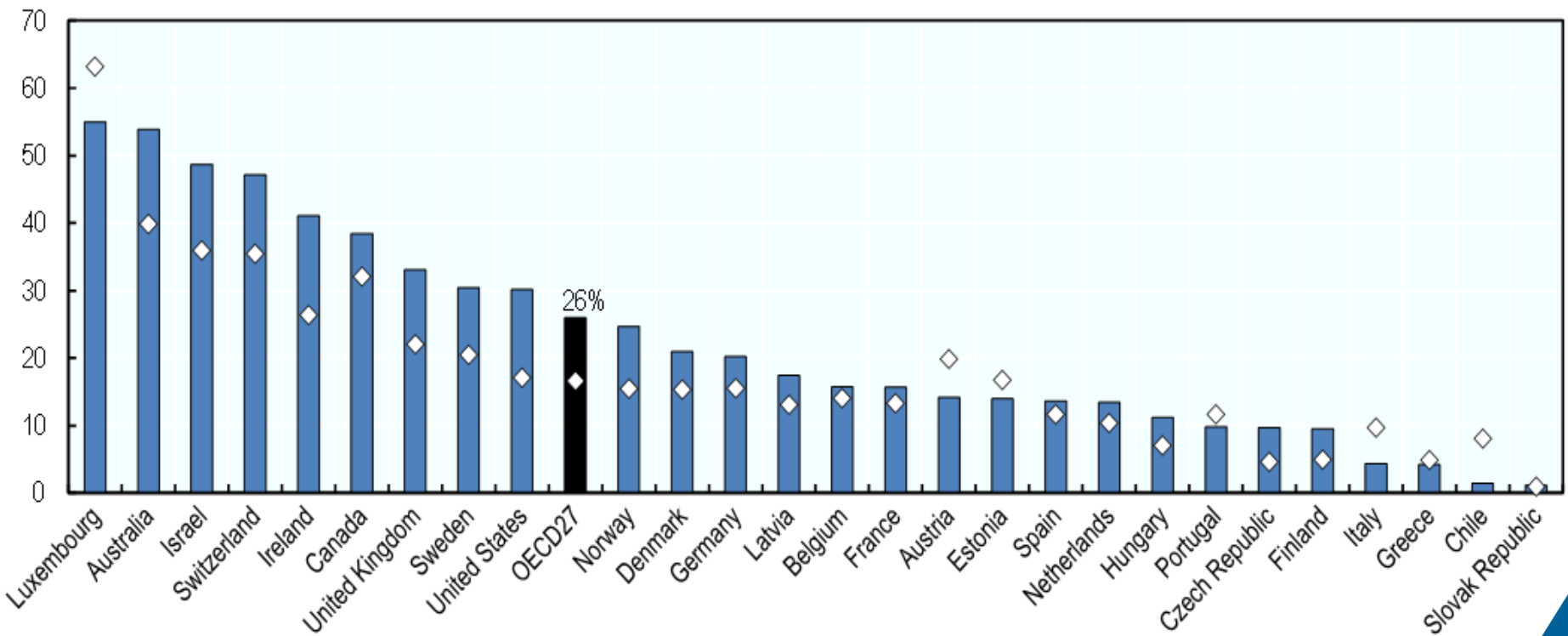


# Migration of health workers should be put in the context of increasing high skilled migration (1/2)

Percentage of **foreign-born doctors** and other immigrants with high level of education in 27 OECD countries, 2015/16

■ % foreign-born doctors

◇ % foreign-bom among people with a high level of education



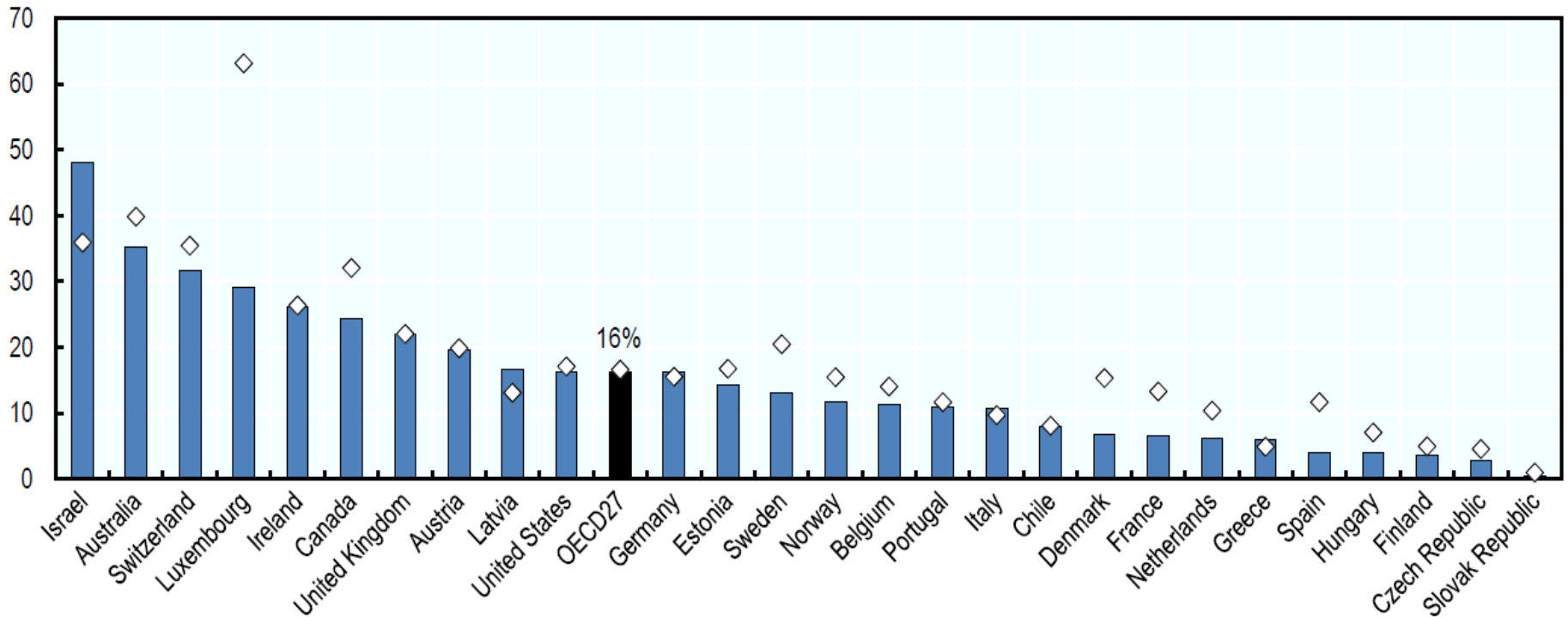




# Migration of health workers should be put in the context of increasing high skilled migration (2/2)

Percentage of **foreign-born nurses** and other immigrants with high level of education in 27 OECD countries, 2015/16

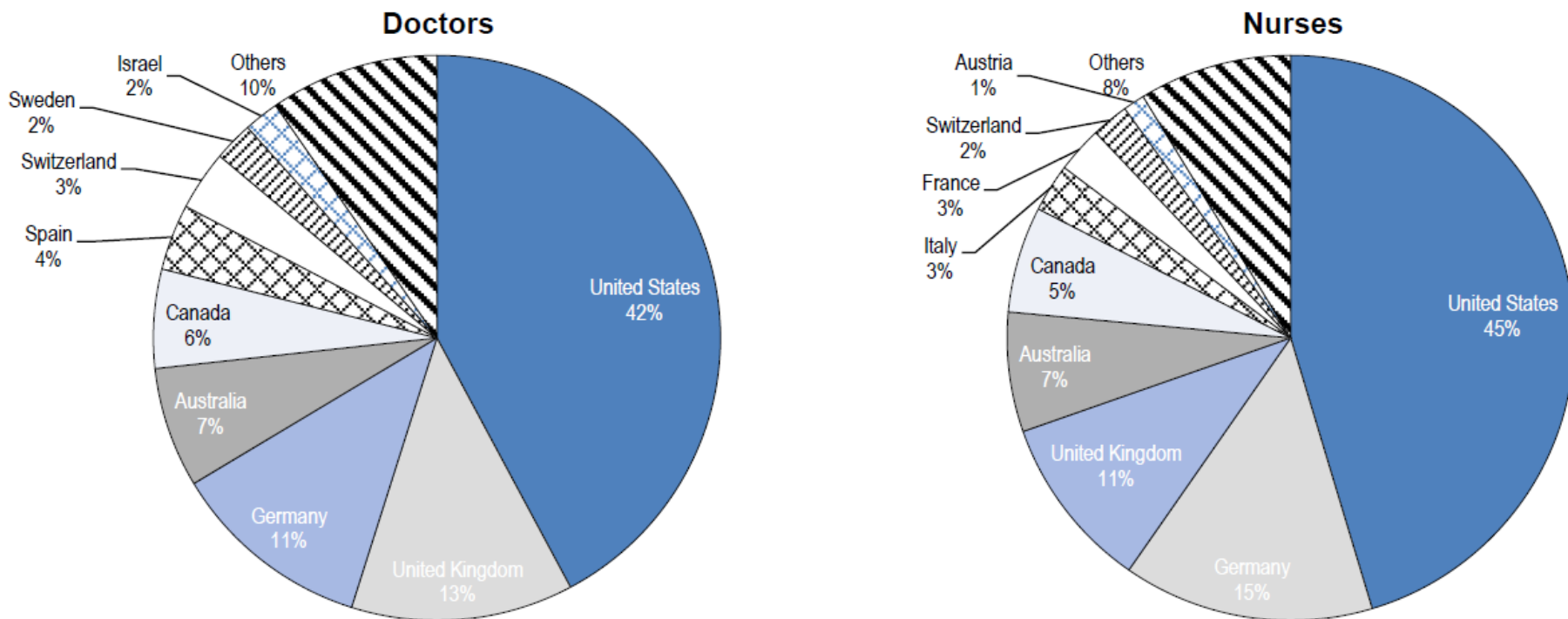
■ % foreign-born nurses      ◇ % foreign-born among people with a high level of education





# 5 destination countries concentrate more than 75% of all migrant health workers in the OECD

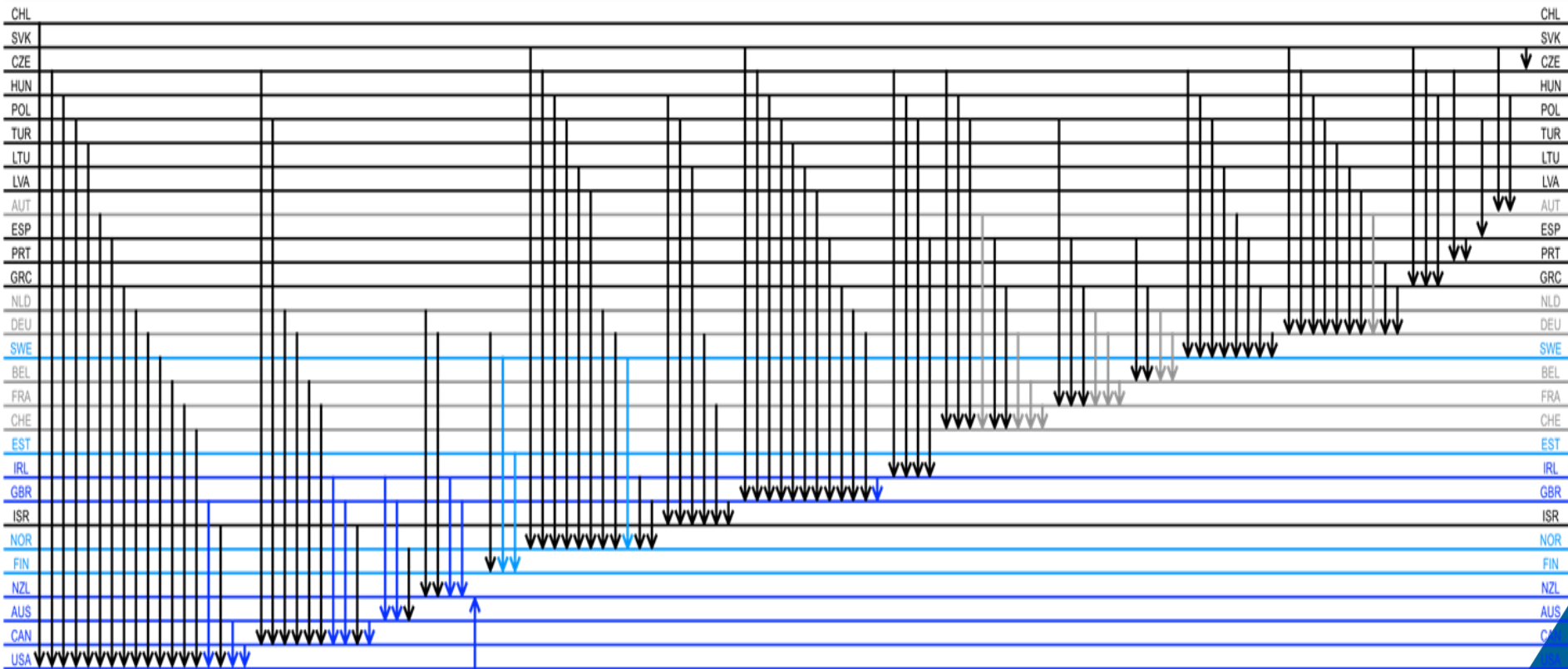
Distribution of foreign-born doctors and nurses by country of residence, 2015/16





# An the winner is ...

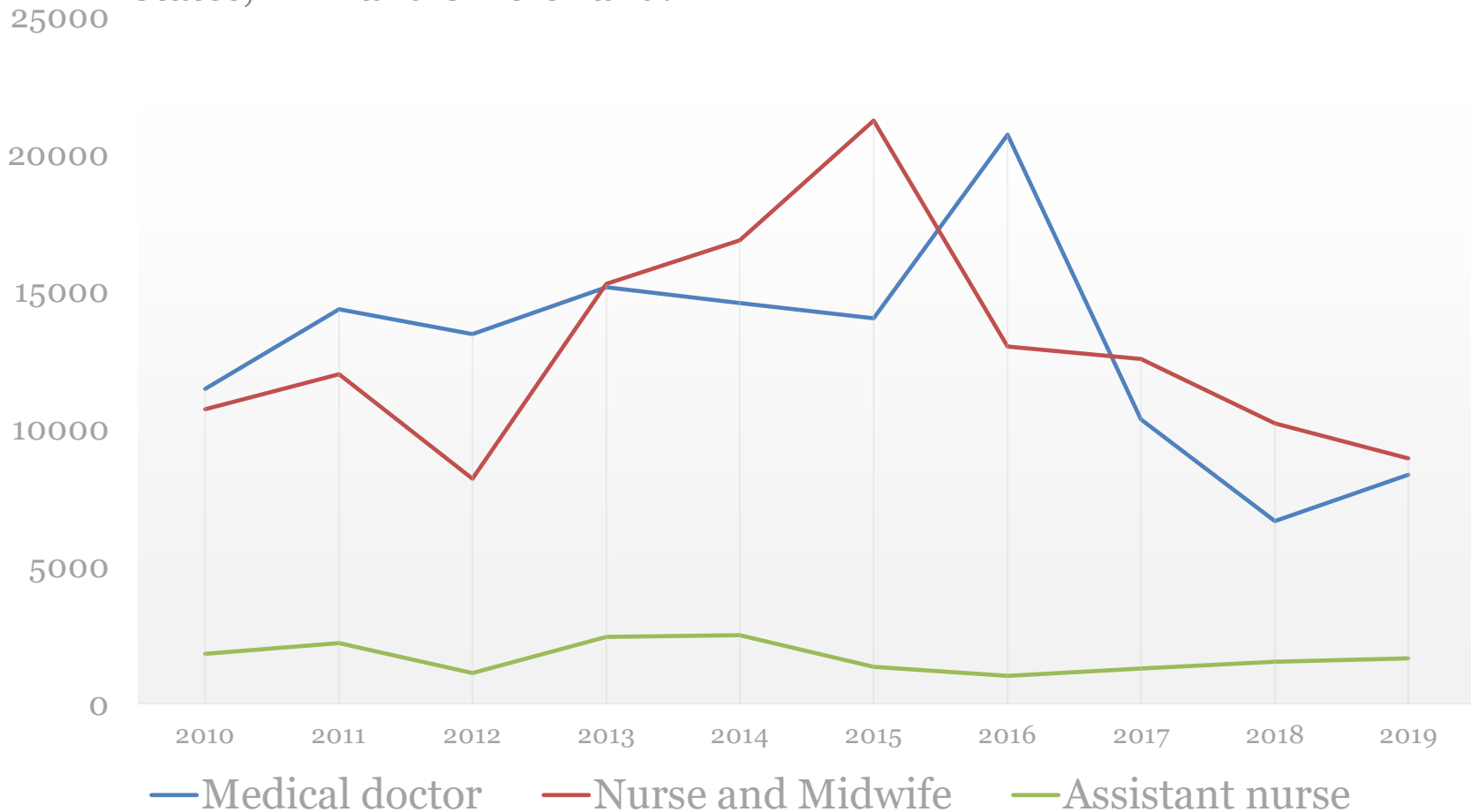
## Intra-OECD migration of doctors by place of training, net stocks 2017/18 (or nearest year)





## Intra EU mobility peaked in 2015/16

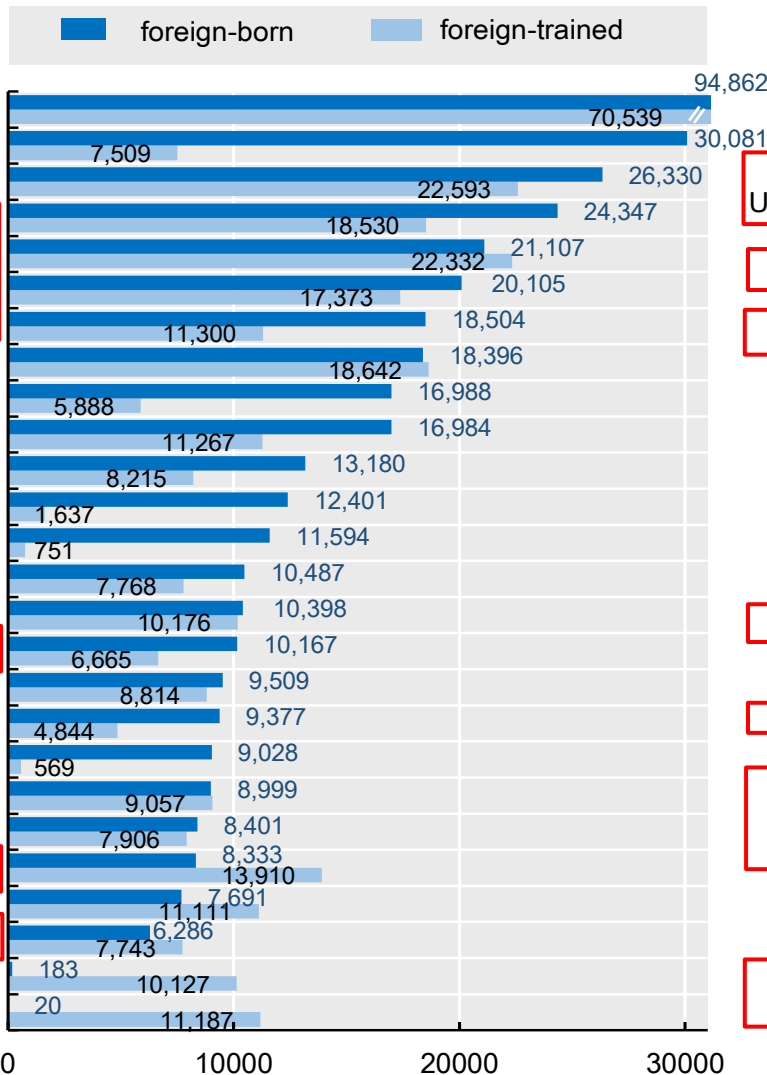
Number of decisions taken on recognition of professional qualifications for the purpose of permanent establishment within the EU Member States, EEA and Switzerland.



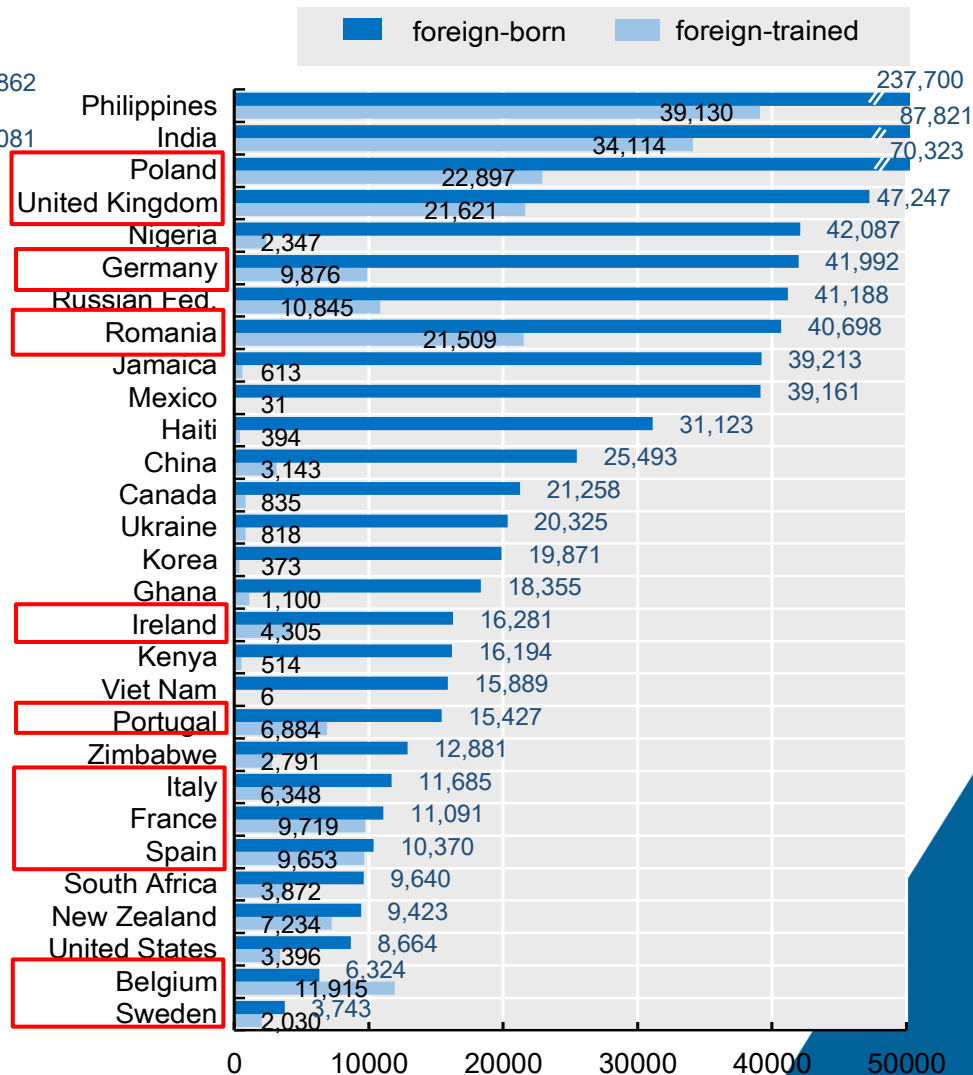


# Main countries of origin (in absolute terms are from Asia ... BUT

### migrant doctors



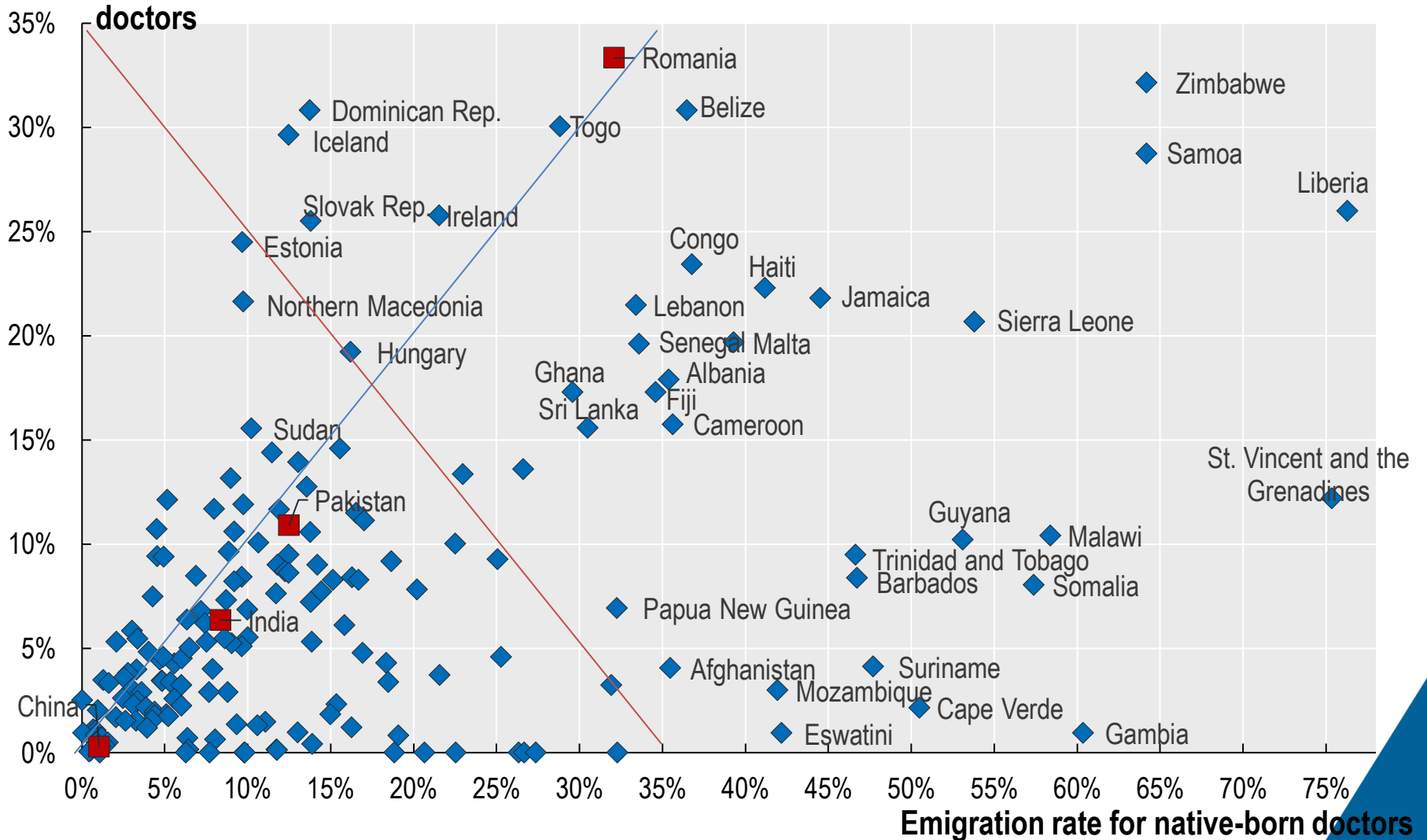
### migrant nurses





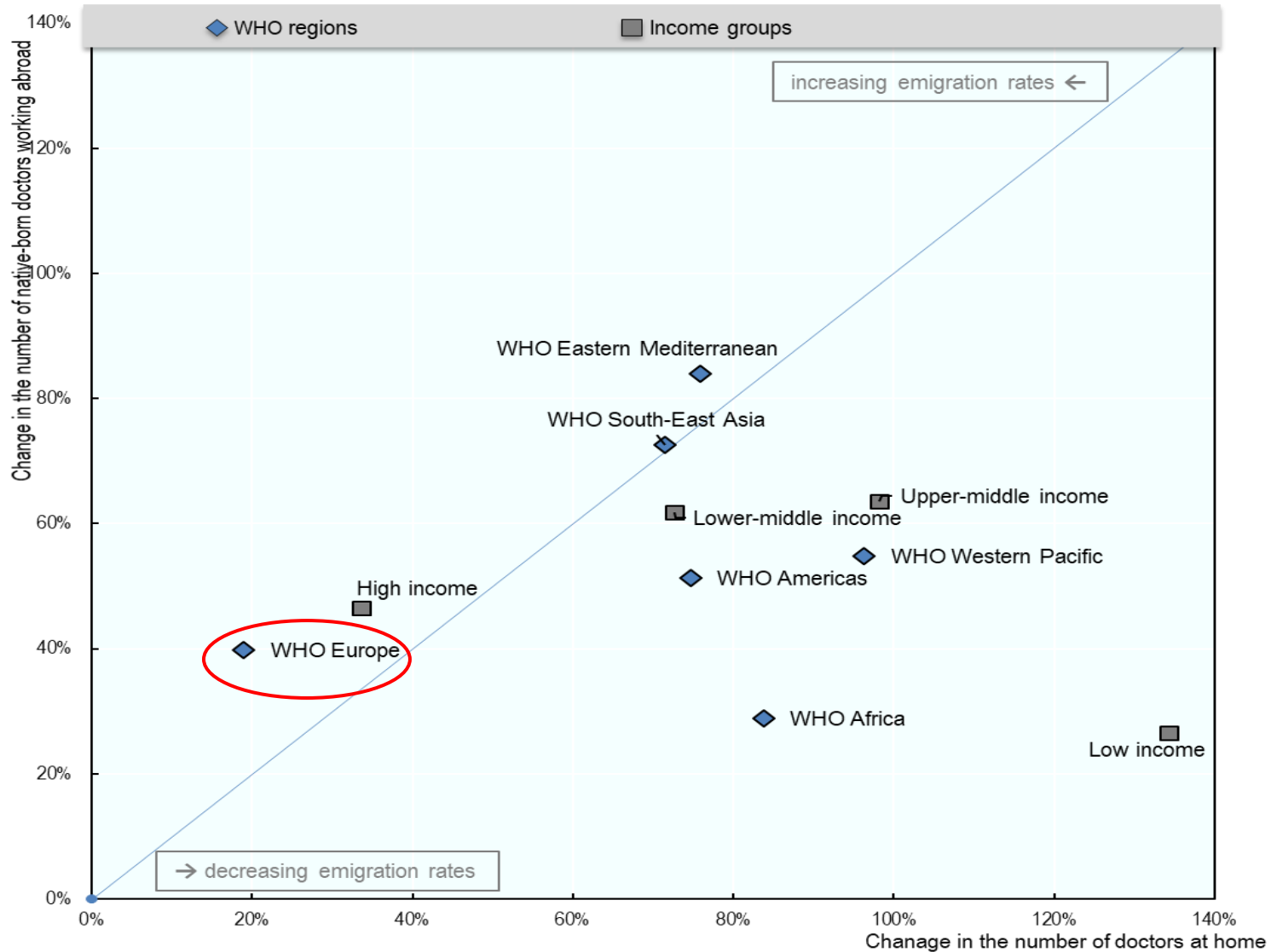
# ... highest emigration rates found notably in Africa and the Caribbean

Emigration rate for home-trained doctors





# Some progresses made in the past 15 years but only in relative terms !!!





# KEY POLICY RESPONSES





# (OECD) policy responses to the global health workforce shortage

---

- Implement to its full scope the “**WHO Global Code of Practice** on the International Recruitment of Health Personnel”
- Increase **training capacity** in main receiving countries and improve retention into the health workforce to reduce domestic shortages and misdistribution.
- Ensure that migrant health workers have **equal working conditions** with other health workers and acknowledge their contribution to the functioning of national health systems, including in the context of the COVID-19 pandemic.
- Address the risk of “**brain waste**” by streamlining procedures for the recognition of foreign qualifications and reinforcing the offer for bridging courses where appropriate.
- Reinforce international co-operation, notably **Overseas Development Assistance and technical assistance**, to help less advanced countries build up a sufficient health workforce and to strengthen their health systems, thereby mitigating factors that are pushing health professionals to leave.



# Thank you!

For further information:

[www.oecd.org/migration](http://www.oecd.org/migration)

[jean-christophe.dumont@oecd.org](mailto:jean-christophe.dumont@oecd.org)

