

# Migration in the Health Sector:

## Stemming Out-Migration and Promoting Fair and Ethical Recruitment

Presentation by  
Genevieve Gencianos  
PSI Migration Programme Coordinator

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# Presentation Outline

- I. The global context: World on the Move and Right to Health
- II. Migration in the Health Sector
- III. PSI Strategies
- IV. Conclusion – Action plan take-aways

# A Quick Look at the Figures 2017

## A world on the move



- 250 million international migrants; more than 150 million are migrant workers (UN, 2017)
- Feminisation of migration: about half of the world's migrants are women
- South-South migration is as significant as South-North migration
- Migrants sent home \$601 billion in remittances in 2015; \$441 billion (74%) go to developing countries (WB, 2016)
- 65.3 million forcibly displaced due to persecution, conflict, violence and human rights violations (UNHCR, 2016)
- 21.3 million refugees, more than half (51%) are children below 18 years of age; about half are women
- 40 million internally displaced persons

# A Quick Look at the Figures 2017

## A world on the move - climate change

- Between 2008 and 2014, 18.4 million were displaced by climate-related disasters
- Up to 1 billion people are at risk of displacement if climate change not addressed

# Human Right to Health in a World on the Move



*As a frontline service, the Human Right to health is more important than ever:*

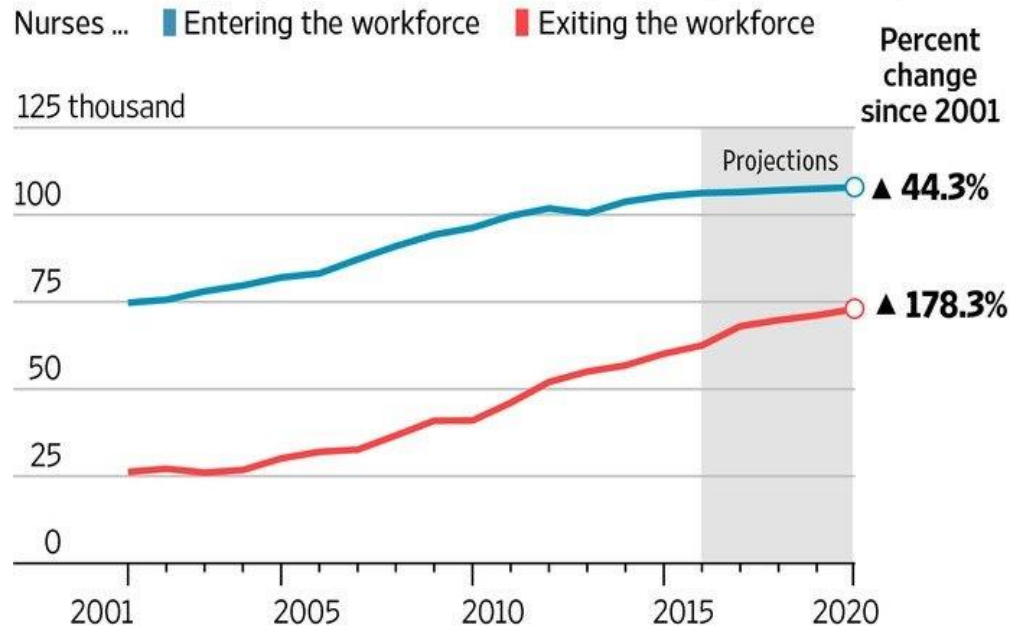
- Promoting public health, inclusion and social cohesion: non-discrimination and access by whole of society (migrants, refugees, local population)
- Quality of public health services: funding, human resources for health, health delivery
- Disaster preparedness and building resilience
- Human right to health and sustainable development: 2030 Sustainable Development Goals (SDGs)

# Migration in the Health Sector

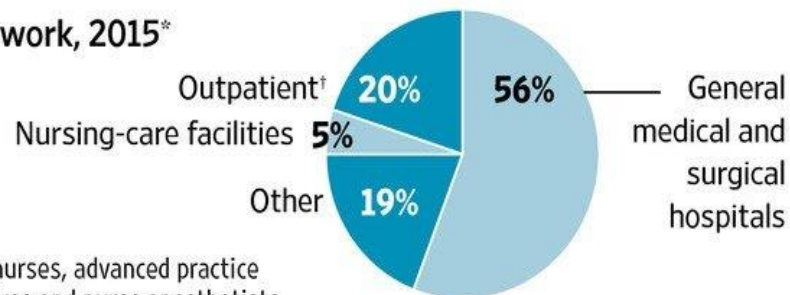
- Global economy is projected to create **around 40 million** new health sector jobs by 2030
- Global health worker shortage: **12.9 million** health workers by 2035 (WHO)
- Ageing population and the demographic contrast: strong driver of labour migration, particularly in care

## Losing Caregivers

Nurses are exiting the workforce faster than they are entering.



### Where nurses work, 2015\*



\*Among registered nurses, advanced practice nurses, nurse midwives and nurse anesthetists

†Includes physician offices, outpatient centers, home-health services

Sources: Auerbach/Buerhaus/Staiger (workforce);  
Bureau of Labor Statistics (workplaces)

THE WALL STREET JOURNAL.

## Ageing Workforce

*“surging demand for hospital care has outstripped the labour market.... hospitals cannot hire fast enough to match population growth... too few nurses means a scramble for essential staff....”*

Source: WSJ

<http://www.wsj.com/articles/nurses-are-again-in-demand-1478514622#i-9E0AF3A7-BE24-4C3E-9182-F2DA35E89183>



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Adopted from WHO, The Health Workforce 2030

# Stemming-out Health Worker Migration



- *PSI strongly maintains its position on the developmental and human rights impact of health worker migration.*
- *Migration for development is inherently flawed and undermines sustainability of the health workforce in both sending and receiving countries.*
- *Primary goal is to build human resources for health: funding of public services, improvement in salaries and working conditions, decent work over precarious work, valuing care work and the gender perspective.*
- *Migration should be a choice, not a necessity. Migration governance from the rights-based framework (UN and ILO Conventions on Migrant Workers). Migrant workers should have access to information, support services, human and trade union rights.*
- *Addressing the root causes and drivers of migration.*



# Migration in the Health Sector

## PSI Strategies



1. Influencing Global Policy
2. Union Capacity Building through Projects
3. Campaigns

# Influencing Global Policy



- Work at the ILO
  - International Labour Conference (ILC 2017) General Discussion on Labour Migration
  - ILC 2017 Adoption of ILO Recommendation 71 (Decent Work in the Transition to Peace)
  - ILO Guidelines and Principles on Fair Recruitment (2016)
- WHO/ILO and UN ComHEEG Implementation
  - Health Worker Migration Platform
- Annual Global Forum on Migration and Development
  - Thematic issue on Health Worker Migration
- Global Compacts on Migration and on Refugees (2017-2018)
  - Streamlining right to health and access of migrants and refugees to public services
  - Health worker migration

# Capacity Building Through Projects



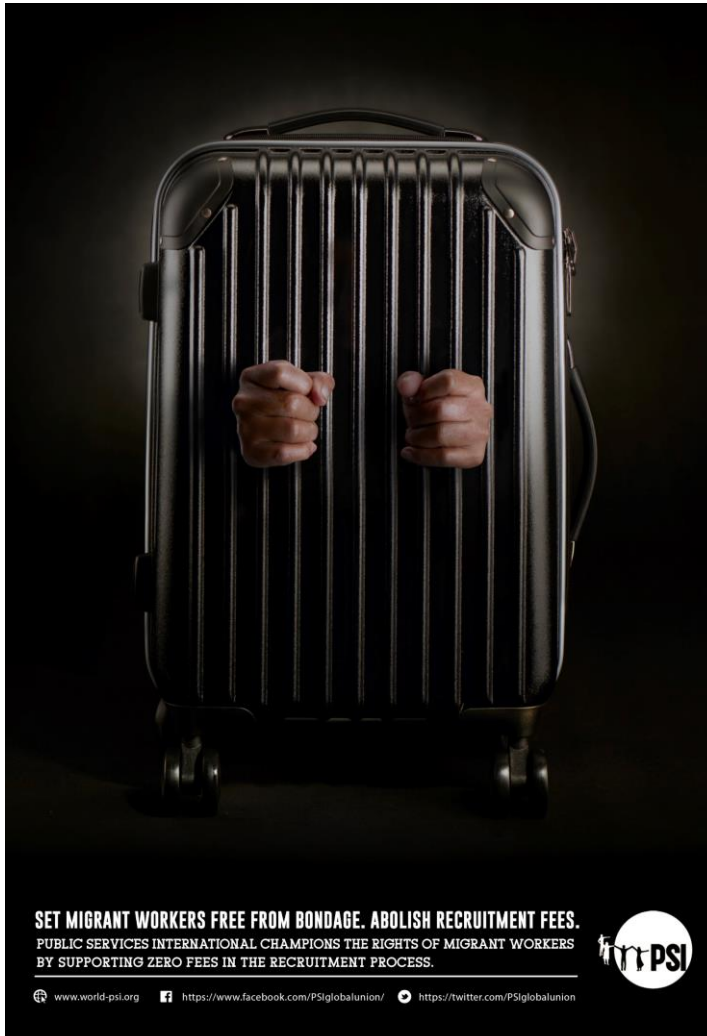
- PSI Project on Decent Work and Social Protection for Migrant Workers in the Public Services
  - Promoting bilateral labour agreements on decent work and social protection (Germany-Philippines BLA on Nurses)
  - Migrant Information Kits: Pre-decision Kit, Return and Reintegration Kit, Passport to Workers Rights
  - Migrant Desks
  - Organising migrant workers
  - Influencing national migration policy
- PSI No Recruitment Fees Campaign

# Campaigns

## PSI No Recruitment Fees Campaign



- Rampant case of worker exploitation and oppression perpetrated by unethical recruitment agencies.
- In the public services, many health workers, nurses, teachers and other professionals end up in a cycle of debt paying these exorbitant fees. Women and young workers are particularly vulnerable.



# A thriving recruitment industry



- Recruitment agencies get double income by earning from the employer and the recruitment fees collected from the worker.
- Depending on destination and salary, the recruiter may charge the worker \$550 to \$14,000.
- In their desperation, workers take on substantial debt to pay recruitment fees.



# A cycle of oppression and bondage



- The workers' urgent need to repay the debt means they can be manipulated by employers to accept lower wages, poor working conditions, excessive work hours, or similar abusive practices.
- Debt-burdened migrant workers are vulnerable to threats of deportation.
- They are afraid to join unions.



# Why the Campaign?



**Recruitment fees are unjust.** *Workers should not pay in order to get decent work.*

**Recruitment fees often lead to a cycle of debt.**

**Recruitment fees render migrant workers vulnerable to abuses and exploitation.**

# International Labour Standards

- ILO Convention No. 181 states that employment agencies shall not charge directly or indirectly, in whole or in part, any fees or costs to workers.
- ILO Principles and Guidelines on Recruitment (2016) reiterate that no fees or related costs should be charged to workers.
- Following these international labour standards, we need to change current national policy and practice.





# PSI No Recruitment Fees Campaign

## Call to action



1. Join the PSI Campaign
2. Sign up to the PSI Manifesto to Abolish Recruitment Fees and to Uphold Fair and Ethical Recruitment
3. Lobby your government to change policy and practice
4. Mobilise multisectoral alliances
5. Promote fair and ethical recruitment in the labour recruitment industry

**[www.world-psi.org/nrf](http://www.world-psi.org/nrf)**  
**#NoRecruitmentFees**

# Conclusion – Action plan take-aways



1. Join PSI's No Recruitment Fees Campaign
2. On health worker migration, utilise tools from the PSI Migration Project
3. Include the PSI Agenda in your national delegation to the 2017 International Labour Conference
4. Be part of PSI's work on Global Policy
  1. PSI Right to Health Campaign
  2. UN ComHEEG – Platform on Health Worker Migration
  3. Global Forum on Migration and Development
  4. Global Compacts on Migration and on Refugees

# Thank You!!!



Visit:

<http://www.world-psi.org/en/issue/migration-and-refugees>