



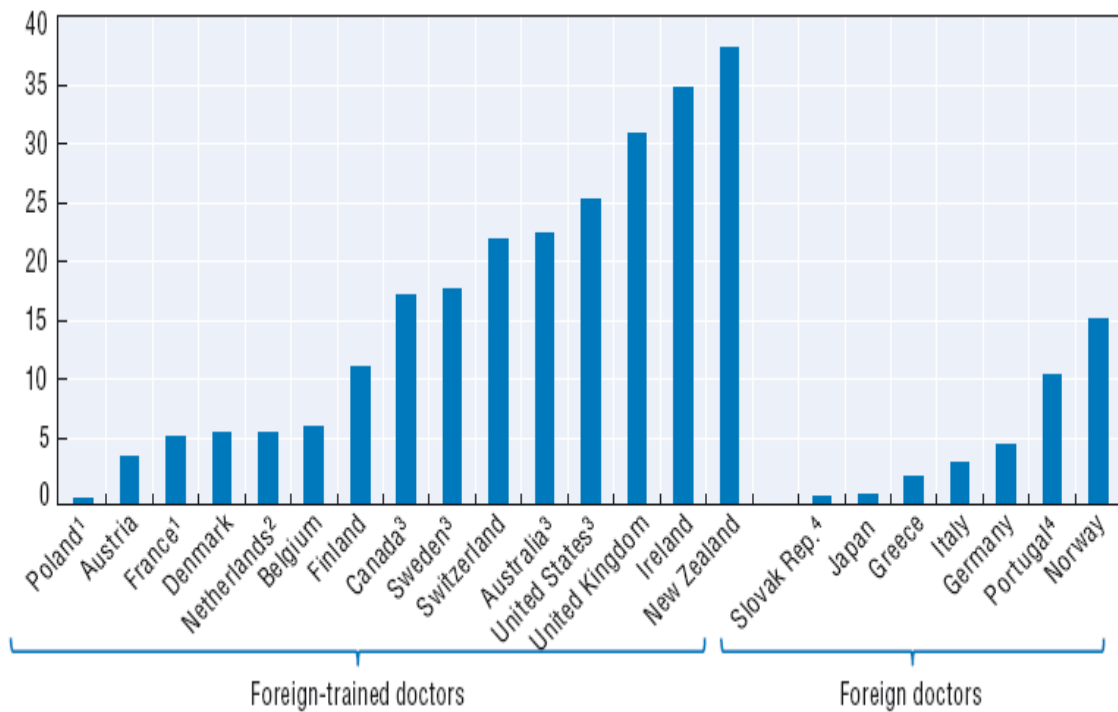
# International recruitment of health personnel. A civil society perspective

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14<sup>th</sup> of May 2010

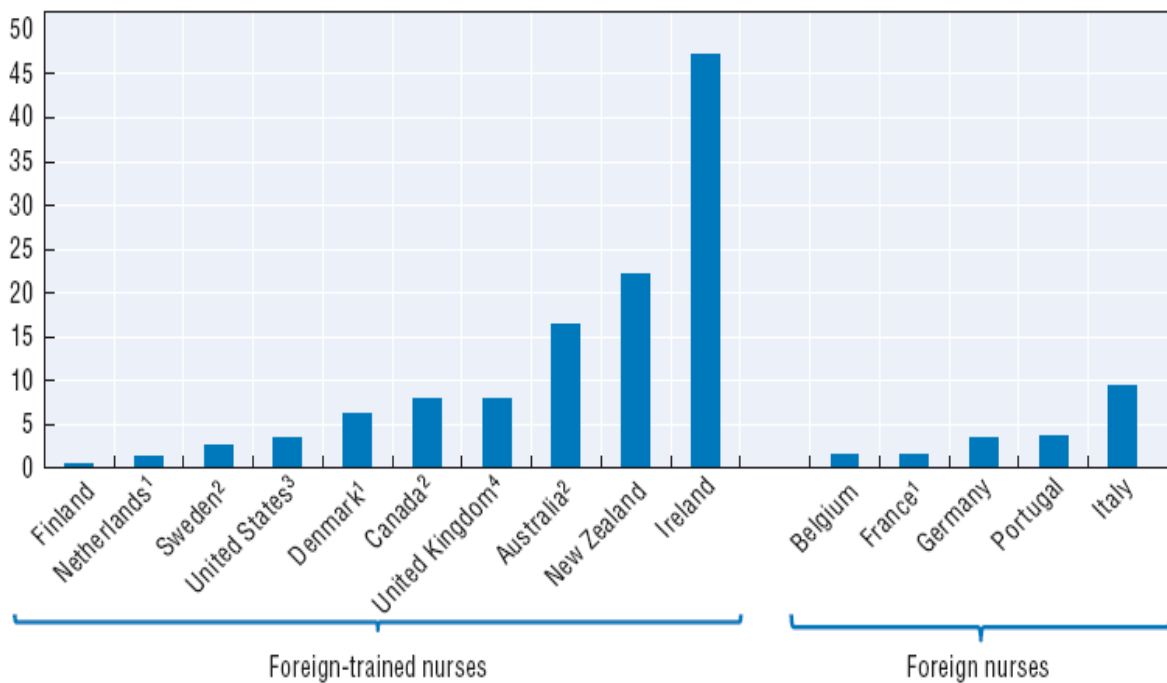
# Trends in health workforce mobility



- Context: global health workforce shortage 4.3 million health personnel
- Mobility is diverse
- International mobility of health professionals is increasing to OECD countries
- Demographic changes and increased health care needs will increase HCW demand
- International migration contributes for 12% to health workforce shortage in African countries (OECD, 2000)



Share (%) of foreign- trained or foreign doctors in OECD (2008)



Share (%) of foreign- trained or foreign nurses in OECD (2008)



## Perspectives

- International migration of HCW not cause but contributes to health inequities and weak HSS
- Migration of HCW due to 'push' and 'pull' factors related to socio-economic and working conditions
- Migration and recruitment of HCW: an example of 'perverse' subsidies
- Mitigation of HCW migration on Right to Health basis: Abstaining from active recruitment, equal working conditions; obligation to 'compensation'

## **A 63/8: “Draft global code of practice on the international recruitment of health personnel”**



Preamble

1. Objectives
2. Nature and scope
3. Guiding principles
4. Migrant health personnel: responsibilities, rights & recruitment
5. Mutuality of benefits
6. Nationality health workforce sustainability and retention
7. Data gathering and research
8. Information and exchange
9. Implementation of the code
10. Monitoring and institutional arrangements
11. Partnerships, technical collaboration and financial support

## pre-amble



- WHA 57.19: Request WHO to develop code of practice with all relevant stakeholders (2004)
- Kampala declaration: WHO to accelerate negotiations on the code (2008)
- G8 (2008, 2009): promote adoption of code
- MS: sovereign right and responsibility of HSS
- Mitigation personnel migration: must have net positive impact on health systems of developing countries



## 1. Objectives

- Promote voluntary principles and practices for ethical international recruitment
- Provide guidance for legal framework, bilateral agreements, international legal instruments
- Promote international discussion and advance cooperation on ethical recruitment of health personnel



### **3. Guiding principles**

- Addressing present and expected shortages in the global health workforce
- Achieve full realization of the “right to health”
- Balance ‘individual right of health personnel to move’ and the ‘right to health’ of population in source countries
- Transparency, fairness and mutuality of benefits
- MS: should strive for sustainable health workforce



## **5. Mutuality of benefits**

“Health systems of both source and destination countries should derive benefits from the international migration of health personnel”

“MS should abstain from active recruitment of health personnel unless there exists equitable, bilateral, regional or multilateral agreements”

## **6. National health workforce sustainability and retention**



“MS should take effective measures to educate, retain and sustain a health workforce”

“MS should recognize that improving the social and economic status of health personnel, their living and working conditions, opportunities for employment and their career prospects is an important means of overcoming existing shortages and improving retention of a skilled health workforce”



## **9. Implementation and 10. monitoring of code**

- “publicized and implemented by MS in collaboration with health personnel, recruiters, employers, professional organizations, and governmental and non governmental organizations”
- “MS should establish and maintain effective and administrative framework”
- “MS should made initial report within two years after adoption of the code”



## **Civil society action**

- Promote MS to be involved in drafting committee of the code during WHA
- Be involved in governance and (legal) framework for implementation, monitoring of the code
- Be involved in coherent and fair programs related to mutuality of benefits and sustainable national health workforce policies
- Address the socio-economic inequities that influence HCW migration



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