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To Leave or Not To Leave: The Dilemmas of Filipino Nurses

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The recruitment of foreign nurses has been considered the most efficient way of solving the critical nursing shortage in the US. As recruitment efforts heighten, however, US hospitals and concerned sectors are now looking closely at the ethical implications of bringing in foreign nurses at the expense of causing nursing shortages in their respective countries of origin.

Some US medical facilities have taken a definite stand on the ethics of foreign recruitment. In an article by Cheryl Ching in *The Next American City*, "The Search for Nurses End in Manila," New York University (NYU) Medical Center was noted to have considered it a "poaching exercise" which takes nurses from countries that need them just as badly. American nursing organizations have likewise sounded off that foreign recruitment is the wrong solution to the US nursing shortage for the same ethical reason.

Other US medical facilities acknowledge the ethical dilemma but are pressed to make a stand when confronted by the reality of the nursing shortage. McAllen Medical Center Chief Nurse Executive Linda Daum said in an article in *NurseWeek* by Heather Stringer that she would rather hire an American nurse. When she had more than a hundred openings, however, Daum said she could not wait for years to get new faculty hired or new nurses graduated.

Observers note that medical facilities in metropolitan areas like New York could afford to make an ethical stance because there is a steady pool of temporary nurse staff circulating in urban areas. But there is no such resource in most other parts of the country where the shortage could even be worse.

The burden of the dilemma could easily be shifted on the nurse herself. Judy Pendergast, CGFNS Director of Planning, Marketing and Communication also said in the *NurseWeek* article "Foreign Investment" that there are ethical complications in the recruitment of nurses from countries facing shortages of their own. She believes though that it is also the nurse's right to decide where he or she wants to practice.

Dilemma for the Philippines

But is the destination country the only party in the set-up that is bedeviled by the ethical dilemma?

The Philippines, which is arguably the largest source of foreign nurses in the US, does not seem to have qualms about sending its nurses out. It is a given that the Philippine economy is primarily dependent on the remittances of overseas Filipino workers, including nurses.

Ching's *Next American City* article reported that Philippine President Gloria M. Arroyo herself seems determined to pursue the policy of sending more Filipino nurses abroad when she recently pledged to improve the quality of nursing education in order to "ensure the production of topnotch nurses who will have an easier time getting jobs overseas."

The policy of depending on foreign remittances has earned the Philippine government much criticism for its failure to mend its broken economy in order to eliminate or at least reduce its need to send its people for employment abroad.

Apparently, there is no such dilemma for the Philippines because the economic considerations are far too attractive to a developing economy. For one, the exodus of nurses and other skilled professionals ensures not only the steady flow of foreign remittances but also eases the pressure of widespread unemployment.

Philippine policymakers also attempt to justify the nurse export policy as a means of developing local nursing skills although there is no information confirming that nurses return to the Philippines to work and transfer their acquired skills.

Nursing Shortage in the Philippines

Central to the dilemma that seems to bother the US more than the Philippines is whether the recruitment of Filipino nurses is really causing a nursing shortage in the Philippines. There is no clear answer to this.

Dr. Jaime Z. Galvez-Tan, executive director of the National Institutes of Health Philippines and Vice Chancellor for Research at the University of the Philippines in Manila believes there is a shortage of nurses in the Philippines. In a *Manila Times* special report by Patricia Adversario, Galvez-Tan noted that the migration of Filipino nurses is now three times greater than the number of nurses licensed every year.

Another view is that the shortage may not really be as serious as Galvez-Tan says. Dr. Marilyn E. Lorenzo, director of the Institute of Health Policy and Development Studies and professor at the UP College of Public Health, noted in Adversario's *Manila Times* report that the Philippines is currently suffering from a shortage of quality nurses, but there are enough "warm bodies."

Lorenzo said in the *Manila Times* report that the ones who have left are the skilled and experienced nurses while those who stay in the Philippines are usually unskilled and inexperienced. As with an actual nursing shortage, the lack of skilled nurses still has serious negative implications on the quality of health care in the Philippines.

A third view says the high staff turnover at Philippine hospitals does not necessarily mean there is a nursing shortage. Nesie B. Dionisio, a member of the Philippine Regulatory Board for Nursing said in the same *Manila Times* report that the turnover may be attributed to more mobility because nurses have more options. Adversario reports that other major destinations of Filipino nurses are Singapore, Saudi Arabia, UK, Ireland, Norway, Austria, and recently, Japan.

Push and Pull Factors

While it is important to ascertain the actual existence of a nursing shortage in the Philippines, it is just as essential for the Philippine government to determine why nurses would rather leave the Philippines than stay.

The obvious answer would, of course, be the attractive pay for nurses in the US and the benefits that supposedly flow from migrating to the US. When one compares the net monthly pay of a nurse in the Philippines she would otherwise earn in the US, the choice is certainly understandable. According to a study on nurses' compensation packages by Annabelle R. Borrromeo, which is cited in Adversario's *Manila Times* Report, the monthly earnings of a nurse in the Philippines is approximately \$140 a month while a US nurse earns about \$2,700 or nearly 20 times more.

Filipino nurses also say the major "push factors" at home that led them to migrate are the poor working conditions in the Philippines and the unstable socio-economic situation. The workload of nurses at home has been unusually heavy, and probably, a strong indication of a nursing shortage. The nurse-patient ratio in the Philippines, according to the *Manila Times* report, ranges from 1:30 to 1:60.

The "pull factors" in the US, on the other hand, can also be just as strong. So attractive is the compensation package for nurses in the US that more and more Filipino doctors study to become nurses in order to immigrate to the US.

Adversario reported in the *Manila Times* the recent trend that Virginia Alinsao, Director of International Nursing Recruitment of Johns Hopkins Health System calls "reverse human resource phenomenon" that seems to be unique to the Philippines. This may not be so hard to comprehend if one considers that doctors reportedly earn a measly \$300 to \$800 a month in the Philippines.

Sheila Crisostomo in a *Philippine Star* article on the exodus of doctors reported that about 3,657 doctors left the Philippines for better paying jobs as nurses abroad from 1996 to 2002. Out of this number, more than 80 percent left for the US while the rest went to Canada, Australia, New Zealand, Japan, and the UK. Even dentists take up nursing courses to take advantage of the US immigration opportunities for nurses. The *Philippine Star* report also noted that out of the total of 16,124 nurses who left the country from 1996 to 2002, nearly 85 percent were bound for the US.

Another pull factor in the US for Filipino nurses is the existence of opportunities for career advancement. In her recently published book, "Empire of Care," Catherine Choy suggests that nurses have been conditioned to work for America from the time nursing schools were set up by Americans in the early 1900s because they believe they can develop professionally here.

Dilemma of the Filipino Nurse

No other person struggles more with the decision to leave or stay than the nurse herself. She deals with more gut-wrenching issues like separation from family, transition into a foreign work environment, homesickness and guilt feelings associated with having abandoned a community that needs her. Would the huge compensation package be really worth dealing with these issues?

There is evidence that the nurse's decision to leave is not really all about the money. It would seem that if the economic and social situation in the Philippines were not so difficult, the outflow of skilled nurses would not be as bad. Adversario's *Manila Times* report cites the findings of an informal survey among Filipino nurses indicating that the nurses would rather stay if the monthly pay was at least \$535 or about one-third of what US nurses are receiving.

Unfortunately, working conditions in the Philippines are not expected to improve anytime soon. The Philippine government is the single biggest employer of nurses in the country, reports Adversario in the *Manila Times*. Fiscal problems will force the Philippines to implement belt-tightening measures which could include freezing the hiring of more nurses over the short term. This does not bode well for Philippine nurses who actually prefer to work in public health institutions because the pay is higher than in private hospitals.

Conflicting policies

The Philippines has been sending mixed signals in the wake of warnings that, if unchecked, the flight of nurses may cause a shortage in the Philippines soon. Different agencies of the Philippine government seem to have opposing priorities, thereby preventing them from dealing with the consequences of nurse migration more effectively.

"Agencies like the labor department and the POEA want the dollars, while the health department is concerned about human resources and their development," according to Galvez-Tan in the *Manila Times* report.

Although the Philippines encourages nurse migration as a matter of policy, it has taken certain measures to prevent or at least alleviate a resulting shortage of nurses. For instance, Philippine law requires public health workers, including nurses, to render at least one year of service at a local hospital. Many escape this requirement, however, because of inadequate enforcement.

Legislation has also been passed fixing the minimum basic pay of nurses in public health institutions to about \$240.00.

Stricter laws that keep the nurses in the Philippines have been proposed, but would likely be challenged for violating a nurse's basic rights. The National Health Service Act, for instance, had been proposed whereby licensed health professionals would be required to serve anywhere within the country for a specified period. Nurses have assailed this proposal as a violation of their human right to travel.

US Policies

The US has been grappling with the nursing shortage in recent decades, but to date, has not come up with a comprehensive policy toward solving this dangerous trend in the healthcare system.

There can only be two ways of addressing the shortage: one, by developing more US-trained nurses; and two, by recruitment of foreign nurses. Although the first approach would make a lasting solution to the problem, it is taking far too long. The desired impact of the Nursing Reinvestment Act, for example, may be felt farther down the road because the nursing shortage has also led to a lack of nursing faculty. Although enrolment in entry level nursing degree programs have increased, such increase is not enough to alleviate the shortage.

Other than the Nursing Reinvestment Act, no other law has been passed to alleviate the nursing shortage. Presently, US immigration laws have been relatively restrictive toward foreign nurses even as foreign recruitment is turning out to be the most viable method of re-staffing US hospitals and medical facilities.

For the US (and other destination countries), there is more to be gained from recruiting foreign nurses. Still, not everyone is convinced that foreign recruitment is the right answer to the nursing shortage.

To placate opposition toward the migration of nurses, nurse migration proponents have alternatively downplayed this strategy as a "quick-fix" for the nursing shortage while raising the alarm on the deterioration of US healthcare services. Considering that the problem is projected to continue well over the next two decades, nurse migration may be more than just a quick-fix.

This forces the ethical issue on both Philippine and US policymakers. The Philippines must look for ways to cope with losing its skilled and experienced nurses or at least find ways to entice them to return. It must also examine what other effects nurse migration has on Philippine society, including the social costs of family separation brought about by its labor export policy.

On the other hand, there are ways for the US to alleviate, or prevent, the shortage of nurses in sending countries like the Philippines. These could include sharing the cost of educating more nurses in the Philippines and providing grants for nurse training, upgrading nursing education, health services and nursing scholarships. Such cooperative arrangements may be explored on various levels, whether on a government-to-government basis or perhaps through hospital-to-hospital partnership agreements. This way, there could be a sharing in the cost of training nurses who will join US hospital staff.

The dilemmas that emerge from the global trend of nursing migration are not impossible to resolve. They arise out of an extremely uneven distribution of skilled human resources between the destination country and sending country. If approached with an openness to cooperation, fair allocation of education and training costs, and sharing of skilled human resources, the nursing shortage in the US or elsewhere may eventually be resolved.