



**FEDERATION EUROPEENNE DES MEDECINS SALARIES
EUROPEAN FEDERATION OF SALARIED DOCTORS**

**Registered Office/Siège
Social :**
39, rue Victor Massé
F-75009 Paris/France

<http://www.fems.net>

Presidency:
Dr. Claude Wetzel
Hôpitaux Universitaires
F-67098 Strasbourg/France
Tel +33 3 88 12 70 75 ou 76
GSM +33 6 60 55 56 16
Fax +33 3 88 12 70 74
claudewetzel@chru-strasbourg.fr

Permanent Secretariat:
Mrs Brigitte Jencik
Rue Guimard 15
B-1040 Brussels/Belgium
Tel. + 32 2 280 46 80
Fax + 32 2 280 47 80
e-mail: info@fems.net

Date :	14 – 12 - 2009	Document	F09-114 EN
Title / Titre:	Healthcare Workers Shortage		
Author/ Auteur :	European Voice, Jennifer Rankin		

EuropeanVoice.com

Welcome migrants, unwelcome effects

By Jennifer Rankin

03.12.2009 / 00:00 CET

Developing countries are struggling to hold on to their skilled healthcare workers.

Healthcare workers have been among the most welcome migrant groups coming into the EU, but back home, there can be devastating effects from the loss of their skills to the countries they have come from.

The World Health Organization (WHO) estimates that developing countries have a shortfall of 4.25 healthcare million workers. This includes 2.36 million doctors, nurses, pharmacists and laboratory technicians, as well as 1.89 million support workers such as accountants, cooks, drivers and cleaners. Some of the poorest countries are the worst affected: around one in four doctors trained in Africa are employed in rich countries in other continents.

The EU recognises the urgency of the problem, but critics say it has failed to respond adequately. In 2006 the Council of Ministers called for EU action to respond to “the crisis in human resources for health in developing countries”.

The European Commission produced a strategy in 2006 promising research and support for developing countries to expand training programmes over the period 2007-13. This acknowledges that workforce shortages are a barrier to meeting the UN's Millennium Development Goals on improving maternal health, reducing infant mortality, deaths from AIDS, malaria and other diseases. And some EU states have drawn up their own policies. For instance, France, Germany and the Netherlands allow migrant workers to return to their countries for a period without jeopardising their EU residency status.

Money and planning

These policies are yet to have an impact on the ground, says Frazer Goodwin, global health project manager at the European Public Health Alliance (EPHA).

“There is a fair amount of acknowledgement that there is a problem...but we have yet to see concrete examples of measures in place,” Goodwin says. “The problem is that activities at EU level are defined and agreed by development ministers, but the actions need to be taken by health ministers.”

Money and better planning are needed to tackle the crisis. The WHO says that more needs to be spent on training healthcare workers in developing countries, but also urges these countries to make better use of existing staff, by delegating simple tasks from skilled to less-skilled workers, and encouraging women and older workers to stay in the workforce.

Also crucial is access to HIV prevention and treatment for healthcare workers, who are disproportionately affected by the condition. But all of these measures will founder if rich countries continue poaching many of the best workers.

So the WHO is drawing up a global code on ethical recruitment. More than 90 countries and health charities have been involved in preparing the code, which will be published next year. According to a 2008 draft, WHO member countries should strive to create a self-sufficient workforce and reduce their reliance on migrant health workers. This means that importing countries need to train more home-grown doctors and nurses. But the WHO emphasises that the code of practice should not be interpreted as impinging on peoples' freedom of movement. The code will remain voluntary.

Campaigners do not want to halt migrant flows, but they think that a voluntary code is not enough. Goodwin at the EPHA calls for an EU-wide compulsory compensation system, where developing country governments are paid compensation for the migrant workers they lose to rich countries, thus enabling them to train new staff.

Crucially, compensation would be set at European rates. This is essential to stop Europe “getting workers on the cheap”, says Goodwin.